

*Graduate School of Nursing, Midwifery & Health
Course Outline*

NURS 551

Complex Assessment and Diagnostic Reasoning in Palliative Care

**Course Co-ordinator:
Margaret Martin**

IMPORTANT NOTICE

The Graduate School of Nursing, Midwifery & Health at Victoria University of Wellington, uses all reasonable skill and care in an effort to ensure the information and course content information contained in this outline is accurate at the time of going to print.

Students should be aware, however, that in the event course timetables and venues need to be changed, all attempts will be made to notify the students.

Produced by the Graduate School of Nursing, Midwifery & Health,
81 Fairlie Terrace, Kelburn, Wellington 6021.

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Office Hours: Monday to Friday 8.30am to 5.00pm

GRADUATE SCHOOL DATES

The Graduate School office will be open on Wednesday 3 January 2008 and close on Tuesday 23 December 2008.

In keeping with the practice of other years, academic staff will not be available on Fridays, except for the times they are involved in Schools.

COURSE AIMS

This course aims to facilitate the student's development of advanced assessment skills in palliative care in a range of health settings. Clinical decision-making processes in palliative care will be explored to prepare nurses to critically examine advanced nursing knowledge when applied to diagnostic reasoning and therapeutics within their area of practice. Students will critically reflect and extend their knowledge of pathophysiology and pharmacology when identifying their own learning objectives in the assessment of a particular client group.

COURSE OBJECTIVES

This course is designed to support the student gaining increased proficiency in a range of assessment, diagnostic and patient centred relational competencies.

The objectives of this course are informed by competencies for palliative care nursing recognised by Hospice NZ and the Cancer Nursing section in NZNO and the following New Zealand Nursing Council competencies for Advanced Nursing Practice (2001).

Nursing Council of New Zealand Competencies for Advanced Nursing Practice Programmes (Without Nurse Prescribing)

4.2.1 Articulates scope of nursing practice and its advancement.

The nurse:

- defines the scope of independent/collaborative nursing practice in health promotion, maintenance and restoration of health, preventative care, rehabilitation and/or palliative care
- describes diagnostic enquiry processes responding to actual and potential health needs and characteristics of the particular population group
- explains the application/adaptation of advanced nursing knowledge, expertise and evidence based care to improve the health outcomes for clients across the care continuum within the scope of practice
- generates new approaches to the extension of nursing knowledge and delivery of expert care with the client groups in different setting.

4.2.2 Shows expert practice working collaboratively across settings and within interdisciplinary environments.

The nurse:

- demonstrates culturally safe practice
- uses advanced diagnostic enquiry skills
- develops a creative, innovative approach to client care and nursing practice
- manages complex situations
- rapidly anticipates situations
- models expert skills within the clinical practice area
- applies critical reasoning to nursing practice issues/decisions

- recognises limits to own practice and consults appropriately
- uses and interprets laboratory and diagnostic tests.

4.2.3 Shows effective nursing leadership and consultancy.

The nurse:

- takes a leadership role in complex situations across settings and disciplines
- demonstrates skilled mentoring/coaching and teaching
- leads case review and debriefing activities
- initiates change and responds proactively to changing systems
- is an effective nursing resource
- participates in professional supervision.

4.2.4 Develops and influences health/socio-economic policies and nursing practice at a local and national level.

The nurse:

- contributes and participates in national and local health/socio-economic policy
- demonstrates commitment to quality, risk management and resource utilisation
- challenges and develops clinical standards
- plans and facilitates audit processes
- evaluates health outcomes and in response helps to shape policy.

4.2.5 Shows scholarly research inquiry into nursing practice.

The nurse:

- evaluates health outcomes, and in response helps to shape nursing practice
- determines evidence-based practice through scholarship and practice
- reflects and critiques the practice of self and others
- influences purchasing and allocation through utilising evidence-based research findings.

(Nursing Council of New Zealand, 2001, p.19-22).

The Nursing Council of New Zealand Competencies for Advanced Nursing Practice Programmes (Without Nurse Prescribing) guide the development of work completed by the student in the course which will broadly develop the participants understanding of the following areas of practice:

- the nature of practice development in palliative care and the nursing role in assessment and diagnostic reasoning; (4.2.1)
- assessment and diagnostic frameworks that are appropriate for the wide range of palliative care settings and clinical situations; (4.2.1)
- best practice in communicating the outcomes of the assessment and diagnosis to the person and appropriate others; (4.2.2)
- the professional values, ethics and standards that underpin assessment and diagnosis; (4.2.3)
- the professional, political, legal, cultural and moral parameters with the public and community and organisational settings of palliative care practice. (4.2.4)
- practice development and scholarship in palliative care and hospice nursing. (4.2.5)

COURSE CONTENT

This clinically based programme is designed to support nurses within their specialty area of practice to advance their assessment and diagnostic reasoning skills and knowledge. It has been developed to facilitate leadership by nurses practicing in any health setting where palliative care occurs. Students set their own learning objectives to manage the needs of a particular client group and use the assessments to develop a programme of study.

Students will be encouraged to articulate in both discussion and their written assignments an understanding of the professional, legal, and cultural contexts that impact on the conduct and processes and outcomes of assessment and diagnosis, and the therapeutic nursing process.

The successful completion of the course requires students to submit and pass three written assignments, demonstrate effective clinical assessment and portfolio assessment skills.

A nominated person from the teaching staff in the 1st School and the course coordinator will support students. This nominated person will be available for brief discussions to facilitate the development of course assignments with each student. The course co-ordinator will moderate the course work with clinical experts in the field.

Students are expected to negotiate specific clinical experiences with a clinical mentor of their choice in relation to advanced practice competency development relevant to their clinical setting. This will be determined by the student and their clinical mentor and recorded in the Learning Contract Document and the Clinical Competency (Mentors) Form.

Collegial conversations with a NURS 551 colleague as critical friend will support the students ability to synthesise and communicate their exploration of diverse research evidence; shared access to material and consideration of international guidelines and pathways; support plans for self care and supervision and assist with integration of the student's practice development.

This clinically based programme is designed to develop assessment skills and knowledge to support nurses within their area of practice. It has been developed to ensure nurses practicing in any health setting can identify their learning needs and set their own objectives to manage a particular client group. The Schools offered through the academic year will endeavour to support individual students practice.

Students will be encouraged to articulate in both discussion and their written assignments an understanding of the professional, legal, and cultural contexts that impact on the conduct, processes and outcomes of assessment and diagnosis, and the therapeutic nursing process. The successful completion of the course requires students to submit and pass three written assignments, demonstrate accurate clinical assessment and portfolio assessment skills.

This advanced practice programme is designed to offer nurses the background to work effectively. The intention is to build upon knowledge gained through successful completion of a Specialty Knowledge and Practice course NURS 552 and the Postgraduate Certificate in Clinical Nursing eg (NURS 535 or 537,538, 539, 540, 541, 542, 543, 545, 547, 548, 549).

During the Schools the theoretical perspective will concentrate on:

- The process of taking a patient history, methods of questioning/communicating with patients and families, diagnostic reasoning processes and effective clinical decision making strategies supported by theoretical frameworks
- The identification and use of appropriate assessment tools and frameworks to suit each individuals particular clinical area. Students will be encouraged through the assignment process to develop assessment tools/frameworks where current tools/frameworks are not satisfactory or do not exist.
- Overall clinical examination processes. Methods of examining patients, equipment required for specific examinations, head to toe assessment and discussion regarding examination, ethical and cultural consideration of examining the frail and dying.
- In depth assessment and clinical examination of the following systems in the 1st School from an acute care perspective:
 - Respiratory
 - Cardiovascular
 - Renal
 - Neurological/cognitive
 - Abdominal
 - Muscular-skeletal

Presentations will include relevant supporting in-depth physiology and pathophysiology. In addition students will undertake practical clinical workshops within the classroom setting.

The focus of the 2nd and 3rd Schools will be on the palliative care patient or client.

- How advanced clinical assessment skills can be utilised in practice – the development of nurse led initiatives, modelling new skills and innovative practice, nursing leadership in practice, the role of the Nurse Practitioner
- Interdisciplinary relationships and collaboration with patients and families will be explored. Evidence-based practice will underpin scientific and interpretative approaches to support the development of clinical competency in advanced health assessments.

The course assignments have been developed to allow the student to critique contemporary models of history taking and communication, assessment tools and the knowledge required to underpin advanced assessment skills.

Assignment 1 - is designed to engage the student to choose either to critique their working model of history taking and communication during discussions with the palliative person; or to consider the assessment frameworks/tools available within your practice setting, how these may be utilised or redesigned to demonstrate the effective use of newly gained advanced assessment skills. In choosing an area of focus the student demonstrates a scenario of how these newly acquired skills are modelled within the practice setting and describes how they can demonstrate effective advanced nursing practice and strong nursing leadership by utilising these skills.

Assignment 2 - allows the student to test their chosen assessment framework in the form of an in-depth patient case study. Within this assignment students will carry out a full assessment and

clinical examination of their chosen patient using their chosen assessment framework, discuss in depth pathophysiological processes to support a list of differential diagnoses or a definitive patient diagnosis.

Assignment 3 - The Learning Portfolio explores individual learning objectives in collaboration with an identified clinical mentor. Students are expected to design and negotiate specific clinical experiences with a clinical mentor of their choice who is either a medical consultant or registrar, nurse consultant or suitably qualified nurse in relation to advanced practice competency development relevant to their clinical setting. This will be determined by the student and their clinical mentor and recorded in the Learning Contract Document and the Clinical Competency (Mentors) Form.

The Learning Portfolio presents formal evidence of integration of theory and practice using the following documents:

A learning contract to frame up steps involved in learning;

A record of evidence of the steps taken and the outcome signed by the mentor; Students will be given a Student log book which has advanced assessment and clinical examination frameworks clearly identified. With their chosen mentor, students should have agreed assessments demonstrated by their mentor and then be supervised and then identified as competent by their mentor (see below).

Evidence of ongoing integration of competencies to achieve advanced practice outcomes.

The mentor statement provides supporting evidence that the student has met an advanced level of competence. A demonstrated competence in the student's work setting can be made evident areas as follows:

- Conducting an assessment which includes taking a clinical history
- Conducting a physical examination of a patient appropriate to their presenting condition
- Discussion of the relevant associated pathophysiology
- Demonstration of diagnostic reasoning

DEMONSTRATION OF PROGRESSION FROM SPECIALIST TO ADVANCED COMPETENCE

This course is designed to support the student as they identify how they have *integrated* their practice and theoretical knowledge gained from the entry to the specialty programme and moved to demonstrate gaining increased proficiency in a range of assessment, diagnostic and patient centred relational competencies. To support this process and provide the student and mentors with a bench mark the following description is of a typical graduate profile that would be evident on completion of the programme in assessment in their area of specialty. This profile can be used as a benchmark to demonstrate an integrated progression to advanced practice competence.

At completion of the entry to specialty assessment NURS 551 course the student will have:

- Extended their knowledge required for specialist nursing practice using the competencies outlined below, and be competent in providing high quality nursing care to patients and families experiencing complex health challenges.
- Developed as a practitioner who is analytical, reflective and who is able to apply theory and new ideas about practice to the clinical area.
- Presented a portfolio which demonstrated the **four generic areas of competency**. The four generic competencies indicated in the Nursing Council of New Zealand's publication "Framework for Post-Registration Nursing Practice Education" May 2001 relate to: nursing clinical judgement; leadership, standards, and practice development.

The competencies that students must have achieved are as follows:

3.2.1 Shows sound levels of judgement, discretion and decision-making in patient/client care.

3.2.1.1 Increases clinical understanding and practice on which to assess and manage clinical situations.

3.2.1.2 Utilises effective assessment skills (physical and psychosocial).

3.2.1.3 Performs technical skills effectively.

3.2.1.4 Utilises specialty knowledge and experience to provide effective emotional and informational support to clients and families.

3.2.1.5 Foresees likely course of events for clients.

3.2.1.6 Individualises client centred care beyond a routine approach to care.

3.2.1.7 Further develops effective organisational skills, such as time management and priority setting.

3.2.2 Shows clinical nursing leadership.

3.2.2.1 Actively participates within the health care team.

3.2.2.2 Acts as a positive role model of specialty nursing practice.

3.2.2.3 Acts as a nursing resource for the health care team.

3.2.2.4 Effectively communicates with members of the interdisciplinary team.

3.2.2.5 Provides guidance, support and nurturing to novice nurses and those entering the specialty practice area.

3.2.2.6 Acts as an advocate for nursing within the specialty practice area.

3.2.3 Monitors and improves standards of nursing through quality improvement processes.

3.2.3.1 Identifies researchable practice issues and refers to appropriate people.

3.2.3.2 Actively participates in quality improvement activities.

3.2.3.3 Contributes to the development of policies/audits/standards.

3.2.3.4 Gives and receives critical and reflective peer feedback.

3.2.3.5 Evaluates nursing practice against current standards through the use of nursing audit tools.

3.2.4. Develops nursing practice through research and scholarship.

3.2.4.1 Provides specialty nursing care which reflects current nursing knowledge, research and understanding.

3.2.4.2 Utilises research and scholarship judiciously to critique clinical practice guidelines.

3.2.4.3 Develops awareness of the impact of broader health policies and directions on specialty practice.

3.2.4.4 Presents and participates in client review from a nursing perspective.

Specific evidence demonstrating specialist professional practice will exist in the students portfolio as follows:

- Acts as a leader and change agent to promote effective nursing practice and optimum patient outcomes (3.2.2).
- Applies a sound evidence-based method of assessing, implementing and evaluating nursing care to meet the needs of the person with complex health challenges (3.2.1, 3.2.4).
- Examines economic, political, and social forces affecting nursing care delivery in complex health care systems (3.2.4.1 & 3).
- Provides care that reflects sensitivity to culturally and ethnically diverse populations (3.2.1.6, 3.2.4.3).
- Uses ethical principles to guide decision-making in nursing practice (3.2.1).
- Integrates theoretical and research based knowledge into specialty nursing practice (3.2.1, 3.2.4).
- Contributes to the development of peers and colleagues to improve patient care and foster the growth of professional nursing (3.2. 2).
- Engages in interdisciplinary collaboration to promote quality cost effective care (3.2.2, 3.2.3).
- Evaluates clinical practice in relation to professional practice standards and relevant statutes and regulations (3.2.2, 3.2.3).
- Integrates a range of teaching methods into nursing practice to ensure patient outcomes are met (3.2.1).

The numbers in brackets reflect the requirements of the Nursing Council of New Zealand's four generic competencies for Specialty Nursing Practice.

Source: Nursing Council of New Zealand. (2001). Framework for Post-Registration Nursing Education. Wellington: Author.

RELATIONSHIP BETWEEN LEARNING OUTCOMES, NURSING COUNCIL COMPETENCIES (2001) AND THE GRADUATE PROFILE

Upon completion of this course students will be able to demonstrate that they have the capacity practically and theoretically to demonstrate advanced assessment and diagnostic reasoning in their scope of practice.

Course Objectives	NC Competencies	Generic Graduate Profile
Demonstrate use of relevant advanced assessment and diagnostic skills	4.2.1	Demonstrated use of relevant advanced assessment and diagnostic skills to an appropriate level with mentor in clinical setting and demonstrated for instance in a supervised setting using the OSCE model.
Assess complex risk factors: professional, legal, clinical, familial, public and organisational;	4.2.3	Articulated history of patients in context appropriately to interdisciplinary team and case review, as family meeting.
Demonstrate advanced health assessment through the use of assessment and diagnostic frameworks	4.2.1	Demonstrated ability to discern appropriate use of assessment and diagnostic reasoning framework for a patient and family or typical scenario for a population group that enables therapeutic pathways to be appropriately identified.
Demonstrate the ability to confidently take a patient history relevant to the practice situation/area	4.2.2	Demonstrated ability to appropriately present in written format and to peers for review patient case study/scenario or a patient population group using the recognised format.
Apply critical reasoning to nursing practice issues and decisions and critique advanced diagnostic inquiry based on the assessment;	4.2.1	Demonstrated ability of assessment in the consultation process with mentor, relating and interpreting data found on examination appropriate to the patient and family situation.
Utilise evidence-based practice and research to support advanced nursing knowledge;	4.2.2	Demonstrated ability to relate to the individual patient and family using a nursing leadership practice framework,
Demonstrate knowledge of pathophysiological processes to support diagnostic reasoning and demonstrate knowledge of physiological responses to illness and identify appropriate treatment interventions.	4.2.1	Demonstrated ability to summarise the interview and physical assessment, identify the problems, investigations and offer interpretations of any tests conducted; describe the differential diagnoses as appropriate in the situation supported by the explanation of the pathophysiology.
Communicate the outcomes of the assessment and diagnosis to the client and significant others, and the health professionals in the interdisciplinary team with a	4.2.2	Demonstrated ability to summarise the interview and physical assessment, identify the problems, investigations and offer interpretations of any tests conducted; describe the differential diagnoses as

high degree of competence;		appropriate in the situation supported by the explanation of the pathophysiology.
Recognise limits to own practice and refer or consult appropriately;	4.2.5	Demonstrated ability to offer opportunity for guided discussion and debate as to options for care based on evidence; and an ability to relate the plan for care, and manage the care relationships.

PALLIATIVE CARE NURSE PERFORMANCE CRITERIA

Upon completion of this course students will be able to:

Demonstrate the use of relevant palliative care assessment and diagnostic skills;(4.2.1)

Identify and demonstrate the use of assessment and diagnostic frameworks based on the interview, unique situation of the client, significant others and whanau and identify appropriate therapeutic pathways utilising the interdisciplinary team; (4.2.1)

Conduct an appropriate palliative care interview, relevant to the setting/situation and practice, which takes into account age, gender, culture and socio economic, family and spiritual needs and which leads to an appropriate palliative care assessment, diagnosis, plan of care which may include referral and consultation; (4.2.2)

Apply critical reasoning to palliative care nursing practice issues and decisions and critique advanced diagnostic inquiry based on the assessment; (4.2.1)

Model innovative client care and leadership in nursing practice;
Utilise evidence-based practice and research to support advanced nursing knowledge; (4.2.2)

Communicate the outcomes of the assessment and diagnosis to the client and significant others, and the health professionals in the interdisciplinary team with a high degree of relational competence; (4.2.2)

Recognise limits to own practice and refer or consult appropriately;
Articulate professional values, palliative care philosophy, ethics and standards that underpin palliative care assessment and diagnosis; (4.2.5)

Assess complex risk factors: professional, legal, clinical, familial, public and organisational; (4.2.3).

The objectives of this course are informed by the following New Zealand Nursing Council competencies for Advanced Nursing Practice (2001).

Nursing Council of New Zealand Competencies for Advanced Nursing Practice Programmes (Without Nurse Prescribing)

4.2.6 Articulates scope of nursing practice and its advancement.

The nurse:

- defines the scope of independent/collaborative nursing practice in health promotion, maintenance and restoration of health, preventative care, rehabilitation and/or palliative care
- describes diagnostic enquiry processes responding to actual and potential health needs and characteristics of the particular population group
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- generates new approaches to the extension of nursing knowledge and delivery of expert care with the client groups in different setting.

4.2.7 Shows expert practice working collaboratively across settings and within interdisciplinary environments.

The nurse:

- demonstrates culturally safe practice
- uses advanced diagnostic enquiry skills
- develops a creative, innovative approach to client care and nursing practice
- manages complex situations
- rapidly anticipates situations
- models expert skills within the clinical practice area
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- recognises limits to own practice and consults appropriately
- uses and interprets laboratory and diagnostic tests.

4.2.8 Shows effective nursing leadership and consultancy.

The nurse:

- takes a leadership role in complex situations across settings and disciplines
- demonstrates skilled mentoring/coaching and teaching
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- initiates change and responds proactively to changing systems
- is an effective nursing resource
- participates in professional supervision.

4.2.9 Develops and influences health/socio-economic policies and nursing practice at a local and national level.

The nurse:

- contributes and participates in national and local health/socio-economic policy
- demonstrates commitment to quality, risk management and resource utilisation
- challenges and develops clinical standards
- plans and facilitates audit processes
- evaluates health outcomes and in response helps to shape policy.

4.2.10 Shows scholarly research inquiry into nursing practice.

The nurse:

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(Nursing Council of New Zealand, 2001, p.19-22).

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- best practice in communicating the outcomes of the assessment and diagnosis to the person and appropriate others; (4.2.2)
- the professional values, ethics and standards that underpin assessment and diagnosis; (4.2.3)
- the professional, political, legal, cultural and moral parameters with the public and community and organisational settings of palliative care practice. (4.2.4)
- practice development and scholarship. (4.2.5)

GENERAL PRE-READINGS

Fuller, J., & Schaller – Ayers, J. (2000). Health assessment: A nursing approach. Philadelphia: J.B. Lippincott.

Jarvis, C. (2003). Physical examination and health assessment (4th ed). Bloomington: Saunders.

RECOMMENDED GENERAL READING/TEXT

Bickley, L.S., & Szilagyi, P.G. (2003). Bates guide to physical examination and history taking. Philadelphia: Lipincott Williams and Wilkins.

Dains, J., Ciofu, L., & Scheibel, P. (2003). Advanced Health assessment and clinical diagnosis in Primary Care (8th ed) St Louis, MO: Mosby.

Jarvis, C. (2004). Pocket Companion for physical examination and health assessment (4th Ed) St Louis, MO: Saunders.

Johnson, M., Bulechek, G., Dochterman, J. J., Maas, M., & Moorhead, S. (eds). (2001). Nursing diagnoses, outcomes, and interventions: NANDA, NOC & NIC linkages.

Mangione, S., & Duffy, D. (2003). The teaching of chest auscultation during primary care training. Chest (124), 1430 – 1436.

Nagelkirk, J. (2001). Diagnostic reasoning: Case analysis in primary care practice. Philadelphia: WB Saunders.

NANDA. (2001). Nursing diagnoses: Definitions and classification 2001 – 2002. Philadelphia: WB Saunders.

Robinson, D. (1998). Clinical decision making for nurse practitioners: A case study approach. Philadelphia: Lippincott.

Seidal, H.M. (2003). Mosbys Guide to physical examination. (5th ed) St Louis, MO: Mosby

Seller, R (2000). Differential diagnosis of common complaints. Philadelphia: WB Saunders.

Talley , N.J., & O'Connor, S. (2001) Clinical examinations: A systematic guide to physical diagnosis.(4th ed) East Gardens: New South Wales.

Vernon, R. (2002). Nursing role expansion and advanced practice: Where to in the 21st century? VISION: A Journal of Nursing 6 (11), 20 – 24.

RECOMMENDED SPECIALIST READING

- Berger, A. M., Portenoy, R. K., & Weissman, D. E. (Eds.). (2002). *Principles and practice of palliative care and supportive oncology* (2nd ed.). Philadelphia: Lippincott Williams and Wilkins.
- Bickley, L.S., Szilagy, P.G. (2003) *Bates guide to physical examination and history taking*. Philadelphia: Lippincott Williams and Wilkins
- Dains, J., Ciofu, L., Scheibel, P., (2003) *Advanced Health assessment and clinical diagnosis in Primary Care* (8th ed) St Louis, MO: Mosby
- Doyle, D., Hanks, G., Cherny, N., & Calman, K. (Eds.). (2004). *Oxford textbook of palliative medicine* (3rd ed.). Oxford: Oxford University Press.
- Fuller, J., & Schaller – Ayers, J. (2000). *Health assessment: A nursing approach*. Philadelphia: J.B. Lippincott.
- Hickey, J., Oimette, R., & Vegegoni, S. (2000) *Advanced practice nursing: Changing roles and clinical applications* (2nd ed.) Philadelphia: Lippincott
- Jarvis, C. (2003). *Physical examination and health assessment* (4th ed). Bloomington: Saunders.
- Jarvis, C. (2004). *Pocket Companion for physical examination and health assessment* (4th Ed) St Louis, MO: Saunders
- Johnson, M., Bulechek, G., Dochterman, J., J., Maas, M., & Moorhead, S. (eds). (2001). *Nursing diagnoses, outcomes, and interventions: NANDA, NOC & NIC linkages*.
- McCance, K. L., & Hueter, S. E. (Eds.). (2002). *Pathophysiology: The biologic basis for disease in adults and children*. St Louis: Mosby.
- Mangione, S., & Duffy, D. (2003). *The teaching of chest auscultation during primary care training*. *Chest* (124), 1430 – 1436.
- Nagelkirk, J. (2002). *Diagnostic reasoning: Case analysis in primary care practice*. Philadelphia: WB Saunders.
- NANDA. (2001). *Nursing diagnoses: Definitions and classification 2001 – 2002*. Philadelphia: WB Saunders.
- Robinson, D. (1998). *Clinical decision making for nurse practitioners: A case study approach*. Philadelphia: Lippincott.
- Seidal, H.M. (2003). *Mosbys Guide to physical examination*. (5th ed) St Louis, MO: Mosby
- Seller, R (2000). *Differential diagnosis of common complaints*. Philadelphia: WB Saunders.

Talley, N.J., O'Connor, S. (2001) *Clinical examinations: A systematic guide to physical diagnosis*.(4th ed) East Gardens: New South Wales

Vernon, R. (2002). *Nursing role expansion and advanced practice: Where to in the 21st century?* VISION: A Journal of Nursing 6 (11), 20 – 24.

Recommended Websites

** denotes sites we strongly recommend

** <http://medicine.ucsd.edu/clinicalmed/introduction.htm>

A comprehensive physical examination and clinical education site for medical students and other health care professionals Web Site Design by Jan Thompson, Program Representative, UCSD School of Medicine; Content and Photographs by Charlie Goldberg, M.D., UCSD School of Medicine and VA Medical Center, San Diego, California

Check out the whole of this site. As well as the information regarding specific examination processes look at the sections on write ups and clinical decision making

<http://medicine.ucsd.edu/clinicalmed/thinking.htm>

<http://medicine.ucsd.edu/clinicalmed/write.htm>

<http://www.med-ed.virginia.edu/courses/pom1/videos/index.cfm> A site with teaching videos to watch and then self test

www.emedicine.com Searchable site with articles and images and CME

<http://connection.lww.com/products/stedmansmedict/primalpictures.asp>

**<http://www.fadavis.com/resources/index.cfm> Site of the publisher FA Davis - This site contains items that are downloadable. A useful site to support practical learning related to learning contracts and the logbook. For example, try the links in the nursing health assessment text by Dillon:

- assessment symptom analysis tables
- laboratory and diagnostic tests by body system
- lab practicum checklists
- pain chapter

**<http://www.gp-training.net/training/theory/calgary/> Useful site relating the refinement of the *process* of assessment by focus on the clinical interview These Calgary Cambridge pages are mostly derived from the work of Kurtz SM, Silverman JD, Draper J. Contain useful files e.g. see: the Calgary-Cambridge framework.

This site focuses on respiratory assessment in detail.

<http://www.shahrukh.co.uk/resp/home.html>

**<http://www.shahrukh.co.uk/resp/home.html> Site for respiratory assessment

Breath and heart sounds

<http://www.med.ucla.edu/wilkes/inex.htm>

<http://www.vh.org/adult/provider/internalmedicine/LungSounds/LungSounds.html#Normal%20breath%20sounds>

<http://www.blaufuss.org/>

Other specific issues

Capnography: <http://www.capnography.com/index.html>

Sepsis: <http://www.sepsis.com/index.jsp>

Sepsis education: <http://www.nise.cc/>

Medications and pharmacology related sites

www.palliativedrugs.com (online version of the Palliative Care Formulary. This site includes a bulletin board that often has posts from New Zealanders and Australians, and a regular newsletter)

<http://www.medsafe.govt.nz/index.asp> Medsafe - This is an excellent drug information resource.

<http://www.pharmac.govt.nz> (PHARMAC)

<http://www.bnf.org/>(British National Formulary)

<http://www.medicines.org.uk/>(UK Electronic Medicines Compendium)

<http://www.hospicecare.com/edu/prescription-pain-meds.pdf> Prescription Pain Medications: Frequently Asked Questions and Answers for Health Care Professionals and Law Enforcement Personnel by the Drug Enforcement Administration, Last Acts Partnership and the Pain and Policy Studies Group (US)

BLACKBOARD INFORMATION

Students enrolling for this course will need access to the VUW flexible learning system (Blackboard) via the Internet.

Blackboard is an online environment that supports teaching and learning at Victoria by making course information, materials and learning activities available online via the internet. Blackboard provides web-based access to course content, assessment, communication and collaboration tools. Instructions for using this will be provided as part of timetable during the 1st School. Students will need to be able to access the Internet on a regular basis.

The following software, which is necessary for using material on Blackboard, is freely available to download from the internet if you don't already have it:

- Netscape Communicator v 4.78 or higher(v. 7.1 recommended) OR
- Microsoft Internet Explorer v. 5.2.x or higher
- MS Windows 2000 or XP/ MacOS 9 or Mac OS X.2 or higher

Other software: Adobe Acrobat Reader - free download from <http://www.adobe.com/products/acrobat/>

Microsoft Office or Microsoft Viewers. The viewers can be downloaded free of charge from: <http://www.microsoft.com/office/000/viewers.asp>

Computer skills required:

- Internet browsing skills
- Basic word processing skills

How to log onto Blackboard

- Open a web browser and go to myVictoria.ac.nz
- Enter your account username which you can find in your *Confirmation of Study* sheet
- It is usually made up of 6 letters of your last name and 4 letters of your first name
- Enter your password. If you have never used Victoria computer facilities your initial password is your student ID number
- Click on the Blackboard icon
- Alternatively, if you want to access Blackboard without going through the myVictoria portal, just log on at <http://blackboard.vuw.ac.nz>

Off Campus access

Blackboard is available from any location where you can access the Internet. This may be your home, work or an Internet café.

Problems with access? Contact ITS service desk **04 463 5050**

WORKLOAD

30 point courses in the Graduate School of Nursing, Midwifery & Health have an average workload of twelve hours per week.

MANDATORY COURSE REQUIREMENTS

In order to successfully complete this course you are required to attend all Schools unless under special circumstances prior arrangements have been made with the course co-ordinator.

Students must submit and pass all pieces of assessment to satisfactorily complete the course.

GENERAL UNIVERSITY STATUTES AND POLICIES

Students should familiarise themselves with the University's policies and statutes, particularly the Assessment Statute, the Personal Courses of Study Statute, the Statute on Student Conduct and any statutes relating to the particular qualifications being studied; see the Victoria University Calendar available in hardcopy or under "about Victoria" on the VUW homepage at:

http://www.vuw.ac.nz/home/about_victoria/calendar_intro.html

Information on the following topics is available electronically at:

<http://www.victoria.ac.nz/home/about/newspubs/universitypubs.aspx#general>

- Academic Grievances
- Student and Staff Conduct
- Meeting the Needs of Students with Impairments
- Student Support

ACADEMIC INTEGRITY AND PLAGIARISM

Academic integrity is about honesty – put simply it means no cheating. All members of the University community are responsible for upholding academic integrity, which means staff and students are expected to behave honestly, fairly and with respect for others at all times.

Plagiarism is a form of cheating which undermines academic integrity. The University defines plagiarism as follows:

The presentation of the work of another person or other persons as if it were one's own, whether intended or not. This includes published or unpublished work, material on the Internet and the work of other students or staff.

It is still plagiarism even if you re-structure the material or present it in your own style or words.

Note: It is however, perfectly acceptable to include the work of others as long as that is acknowledged by appropriate referencing.

Plagiarism is prohibited at Victoria and is not worth the risk. Any enrolled student found guilty of plagiarism will be subject to disciplinary procedures under the Statute on Student Conduct and may be penalized severely. Consequences of being found guilty of plagiarism can include:

- an oral or written warning
- cancellation of your mark for an assessment or a fail grade for the course
- suspension from the course or the University.

Find out more about plagiarism, and how to avoid it, on the University's website:
www.vuw.ac.nz/home/studying/plagiarism.html

SCHOOL CATERING

The Graduate School will provide **a light snack for lunch** while students are attending Schools, and tea & coffee for morning and afternoon break. While we try to cater for the majority of students please feel free to bring your own supplies if your needs are not being met.

During the lunch breaks you may wish to investigate a variety of student cafes within walking distance on campus and several cafes at Kelburn shops approximately 10 mins walk from the School.

COURSE TIMETABLE

WEEK STARTING Monday	DATES	EVENT	ACTION
4 February	6 February	Waitangi Day	
11 February			
18 February			
25 February			
3 March			
10 March			
17 March	21 March	Good Friday	
24 March	24 March 25 March	Easter Monday VUW holiday	
31 March	2 & 3 April	1st School	
7 April			
14 April			
21 April	25 April	ANZAC Day	
28 April			
5 May			
12 May			
19 May			
26 May			
2 June	2 June	Queens Birthday	
9 June			
16 June	16 & 17 June	2nd School	
23 June			
30 June			
7 July			
14 July			
21 July			
28 July			
4 August	7 & 8 August	3rd School	
11 August			
18 August			
25 August			
1 September			
8 September			
15 September			
22 September			
29 September			
6 October			
13 October			
20 October			
27 October	27 October	Labour Weekend	
3 November			

SCHOOL TIMETABLE

1ST SCHOOL

Dates: Wednesday 2 & Thursday 3 April 2008

Times: 8.30am - 4.30pm

Venue: Room 202 83 Fairlie Tce, Kelburn, Wellington

2ND SCHOOL

Dates: Monday 16 & Tuesday 17 June 2008

Times: 8.30am - 4.30pm

Venue: Meet room 203 83 Fairlie Tce, Kelburn, Wellington

3RD SCHOOL

Dates: Thursday 7 & Friday 8 August 2008

Times: 8.30am - 4.30pm

Venue: Room 202 83 Fairlie Tce, Kelburn, Wellington

Daily timetables will be posted or emailed to students prior to the school commencing.

ASSIGNMENTS

Assignment information including grade descriptions, the procedures for submitting assignments and referencing information is available on the Graduate School's Website.

Assignment cover sheets and acknowledgement postcards are attached at the back of this outline. Please ensure you complete an assignment cover sheet and attach it to the front of each assignment you submit. All assignments are to be sent to **Abbey McDonald, Student Administrator**, who will record the details and pass it to the appropriate marker. **Please do not address assignments to members of the academic staff, as they are not necessarily the markers of the assignment.** If you want to have receipt of your assignment acknowledged, complete an acknowledgement postcard and attach it to the front of your assignment.

The Graduate School of Nursing, Midwifery & Health has set a number of assessment tasks and due dates to best meet the outcomes of the course. In keeping with the Graduate School's stated philosophy that no assessment work shall serve the Graduate School alone, it is possible to negotiate alternative assessments and schedule. This should be undertaken in consultation with the course co-ordinator.

Graduate School guidelines for submission and return of student assignments:

1. All assignments are to be submitted to the Graduate School by 5.00pm on the nominated due date.
 - 1.1 An extension to the due date may only be given in exceptional circumstances. Such circumstances would typically be sickness (as evidenced by a medical certificate) or bereavement.
 - 1.2 Application for an extension must be made to Course Co-ordinators at least 24 hours before the due date.
 - 1.3 Course Co-ordinators may grant an extension of up to 2 weeks.
 - 1.4 Any extension requested for longer than 2 weeks must be agreed to and signed off by the Teaching and Learning Co-ordinator or in her absence the Head of School.
2. Dean's extensions
 - 2.1 are available in exceptional circumstances for only the final piece of assessment in any course,
 - 2.2 must be applied for in writing at least 48 hours prior to due date,
 - 2.3 may be approved for up to 4 weeks by the Teaching and Learning Co-ordinator or Head of School with the appropriate documentation provided,
 - 2.4 may be extended beyond 4 weeks with written approval by, and an interview with, the Teaching and Learning Co-ordinator or Head of School.

3. Student coursework assignments submitted by the due date will be returned with feedback within four weeks of the due date. Students who do not submit within this timeframe may be subject to delays in their assignment being returned and may not receive comprehensive feedback.
4. Assignments which remain outstanding for up to two weeks without due cause beyond the due date will be marked, but cannot attract a grade higher than a 'C' (pass) grade.
5. Assignments that remain outstanding beyond two weeks from the due date without due cause will attract an 'E' (fail) grade. These assignments will not be marked and will not be able to be resubmitted for grading.
6. In exceptional circumstances withdrawal from assessment is a mechanism that may be recommended by the Course Co-ordinator to the Head of School when all avenues for extension have been exhausted and the Course Co-ordinator is satisfied that the student will be able to complete the required work in the negotiated timeframe. This timeframe will normally be to the end of the following trimester and will not extend beyond three trimesters.

Final assignments will not be accepted by email.

Students must submit and pass all pieces of assessment to satisfactorily complete the course.

ETHICAL CONSIDERATIONS

At all times students must act within the boundaries of professional Codes of Conduct, relevant legislative frameworks and the governance, rules and contracts of their employing organisation. Further information with regard to student's ethical responsibilities and relevant templates can be accessed on the Blackboard site or will be provided in class if required.

ASSIGNMENT WRITING: GUIDELINES FOR FORMAT AND PRESENTATION

The Graduate School recommends the use of APA referencing for all assignments and information on APA referencing can be found by searching online:

Publication Manual of the American Psychological Association: 5th ed. (2001).

Students can also request a copy of the Referencing the APA Style A Brief Guide (Brochure) from Student Learning Support Services or view on:

http://www.vuw.ac.nz/st_Services/slss/studyhub/reference/APA.pdf

- Assignments should be concise and relevant; when a word limit applies students should avoid exceeding it. Keep within 10% of the stated limit, e.g. 3000 words means 2750 - 3300. Word count includes references
- Font size 12, Times New Roman or Arial only
- Double or 1.5 line spacing. Justify all text
- 4.5-5 cm margin on the left side for marker's comments.
- Assignments must be typed and printed clearly on one side of A4 size white paper only, with all pages fastened together by staple or secure clip.
- All pages should have a footer which includes the following:
 - Course number, assignment number and student ID number (left aligned), e.g. *NURS 512, Assignment 2, 300011122*
 - Page number (right aligned)
- Include a title page and always attach an assignment cover sheet on top. The cover sheets are included with the Course Outline.
- Appendices: These are additional materials related to the text but not suitable for inclusion because of its length or format (e.g. policy documents, etc). These are not marked or counted in the word limit, but should be clearly referred to as appropriate within the main text (e.g. see Appendix A).
- Do not use plastic sheets, clear files or folders to put the assignment in (except for your portfolio), as these make it difficult for markers to handle.
- Ensure you keep a copy of your assignment until it is returned from being marked.

CONFERENCE & SCHOOL PRESENTATIONS

Students of the Graduate School of Nursing, Midwifery & Health are encouraged to present their work at professional conferences and as papers for publication. Students should discuss this with the course co-ordinator in the first instance. Dissemination of findings from academic work is a very important part of graduate education and assists clinical teams and professional groups to access up-to-date and new knowledge. Course co-ordinators will provide academic guidance in relation to the targeted activities, and also in relation to the proper academic processes of authorship and acknowledgement.

For all conference, professional and workplace presentations our VUW Power Point template should be used. You are also required to use this template for all school presentations as part of your assignment requirements. This template is available and can be accessed by those students using Blackboard or you can email: abbey.mcdonald@vuw.ac.nz for a copy of the template to be sent to you.

As a general rule, presentations and papers should cite yourselves as post-graduate students, and name the Graduate School of Nursing, Midwifery & Health as the organisation. In keeping with academic conventions course co-ordinators and teaching associates who help with the ideas and preparation of the paper/presentation should be directly acknowledged or named as co-authors.

REPORTING STUDENT ACHIEVEMENTS AND AWARDS

At the end of each year the Graduate School reports to the University details of student special achievements (such as awards, grants, presentations, and publications).

You are required to complete and submit this form Record of Special Achievements related to Study at Victoria (attached to back of outline) with your final assignment for this course.

If you would prefer to complete and submit this form electronically, a copy of the form can be located on Blackboard, our website <http://www.victoria.ac.nz/nsemid/research/student-achievements.aspx> or you could contact Abbey.mcdonald@vuw.ac.nz to request a copy.

ASSIGNMENT NUMBER ONE

Option 1: Patient History Taking

or

Option 2: Research in Complex Assessment and Diagnostic Frameworks

Option 1

Assignment Name: Patient History Taking

Due Date: 6th June 2008

Length: 2500 words

This assignment is worth 30% of your final grade

The purpose of this assignment is designed to demonstrate knowledge of history taking within your practice setting, determining which factors influence the outcome of a history taking episode such as consultations skills, environmental issues, history taking frameworks, patient/nurse/doctor relationships utilising evidence to support your conclusions.

This assignment should include the following:

- A brief discussion of the typical frameworks that utilise history taking
 - A critical analysis of the evidence with regard to history taking focussing on consultation skills, relationship issues, and environmental issues
 - Application of your findings to your own particular specialty
-

Option 2

Assignment Name: Research in Complex Assessment and Diagnostic Frameworks

Due Date: 6th June 2008

Length: 3000 words

This assignment is worth 30% of your final grade

The purpose of this assignment is for you to examine a range of assessment and diagnostic frameworks described in the literature; determine what could be most appropriate for your locality and area of practice, create the rationale and make some future development recommendations for your service to potentially consider particularly with regards to complex palliative care situations.

This assignment requires that you:

- Provide a brief description of your practice context and list the assessment tools and diagnostic framework(s) in use which includes recognition of modifications of tools or plans for specific location or cultural appropriateness.
- Undertake an initial broad scan of the literature to enable you to become familiar with the range of assessment and diagnostic frameworks, tools, and approaches that are currently available and that you consider might be useful in your practice. For instance, you might consider classic palliative care symptom assessment tools, frameworks that account for complex care; guidelines for oncology, haematology and non-cancer palliative emergencies; guidelines for specific groups of consumers; culture specific tools; quality of life measures; global measure of disability tools; outcome measures; risk assessment tools; trajectory, or prognostic tools and treatment specific outcomes. (Note you are not required to write in detail about this step of the assignment, however an overview of your findings would be helpful for future reference.)
- Identify a group of tools that you are interested in relation to your practice to consider in more depth.
 - Note: this assignment can be linked to the case study/population group study (assignment two) and you may find it helpful to consider tools that would be relevant to this work.
- Create an annotated bibliography indicating the details of the most relevant tools you have found. (Suggested maximum 4-5 tools) Consider using the Kolb framework-template will be provided. Or include annotations covering what you consider are the key facets of each tool. This might include aspects such as the reference details, scope of tool, how the tool is administered, population it is designed for etc (Include copies of the tools in your appendix for future reference).
- Identify one tool or framework from this group that would be most useful in your practice. Provide a statement giving the rationale for your choice or interest in this tool or framework (e.g. individual and or service outcome) and identify the supportive research evidence for the tool or framework you have chosen.
- Identify limitations or boundaries (include copyright) on use.
- Make brief recommendations you have regarding how this tool might be implemented in your practice setting.

ASSIGNMENT NUMBER TWO

Option 1: Complex Palliative Assessment - patient/client case study

OR

Option 2: The Health Needs of a Particular Patient Population

Due Date: **Part A** 8th August 2008 - Written work
 Part B 7th August 2008 - Presentation case study or clinical scenario

Length: 3000 words

This assignment is worth 30% of your final grade and is comprised of two parts which will both be graded.

Part A Written work: Case Study/Health needs of population group 20%

Part B Presentation – 15 min and questions from Panel of Experts 10%

The purpose of this assignment is for you to demonstrate that you are developing a diversity of consultancy skills in palliative care advanced assessment, diagnostic reasoning and clinical decision-making.

As you undertake this work carefully consider consent and ethical issues related to the use of patient/family information. A template of a consent form will be provided electronically.

Option 1: Patient/Client Case Study

Part A

Recognising the nature of consultancy and the intention of the patient interview for the purposes of history taking:

- In your writing note how you have attended to the relevant consent and ethical issues when undertaking this case study.
- Perform a full assessment of the patient/client that you have selected using an appropriate assessment framework with the objective of revealing the complexity of the person's situation. (This assignment will be based on the case notes of one of the four person's with whom you conducted a full assessment. It will be identified in your log book and will be signed off by your mentor. It will inform assignment 3)
- Describe your findings from your reading and research using a clinical judgement and management plan that would be appropriate to your clinical setting.
- Present an in depth analysis of the underlying pathophysiology.
- Discuss the differential diagnoses and prognostic indicators (if appropriate) supported with the relevant theory base.
- Provide a rationale for your management plan and the means you would use to evaluate it.
- Justify your diagnostic reasoning and clinical decision making through exploring the literature and best practice.
- Summarise and provide a description of how the information in this case study can be used in future practice.
- Reflect on how successful your assessment and diagnostic skills were in this situation.

Part B

Create a Professional Report on PowerPoint or OHP format using the above client case study. This is to be presented in the 3rd School.

Outline your Framework - for example:

- Identify your qualifications and experience
- Indicate how you have attended to consent and ethical issues when undertaking this work
- Identify your client and family, whanau or aiga and their presenting situation and history
- Current diagnoses, treatment and care in process
- Indicate your understanding of the relevant pathophysiology
- Present your assessment process and examination data, including any limitations, tools used or other circumstances that impact on the findings. If using specific tools comment on their value in this situation.
- Your assessment may include acknowledgement of the need for further assessments/investigations, or a planned family meeting or a further discussion with the client.
- Indicate the differential diagnoses that were considered and the rationale for final diagnosis/diagnoses.
- Make recommendations for the plan of care with your rationale. Reflect on the implications of your plan for the client.
- Indicate how you have addressed the complexity of the patients' situation both in your assessment and management plan.
- Include relevant reference details in your presentation

For all conference, professional and workplace presentations our VUW Power Point template should be used. You are required to use this template for all school presentations as part of your assignment requirements. This template is available and can be accessed by those students using Blackboard or you can email: abbey.mcdonald@vuw.ac.nz for a copy of the template to be sent to you.

Option 2: The Health Needs of a Particular Patient Population

This assessment requires exploration of the health needs and characteristics of a particular population group who present in the palliative care setting. It provides the opportunity to apply advanced nursing knowledge and expertise, and examine evidence based care to improve the outcomes of a certain group of patients.

Part A

Select a population group that presents to the palliative care setting with actual or potential health needs (eg, dementia, breast cancer, intellectually and physically disabled, AML, neutropenic sepsis, tumour lysis syndrome, fatigue, breathlessness).

- Present a brief overview of the common scenario that this population presents with and pay particular attention to identifying the nursing considerations of your chosen group
- Document the patho-physiology, prognostic indicators (if relevant) and management strategies associated with this condition(s) or disease process.
- Examine current literature to identify assessment and treatment trends and recommended best practice with regards to meeting the health needs of this group of patients.
- Identify from your critique of the assessment tools you have already reviewed what is most commonly used and offer an opinion about what tool might contribute to development in the areas in your practice.

- Include a 500 word appendix of a brief case study illustrating the health needs of the population group you have chosen.
 - In your writing note how you have attended to the relevant consent and ethical issues when undertaking this case study.

Part B

Create a Professional Report on PowerPoint or OHP format using the population group and the clinical scenario you have chosen to study. This will be presented in the 3rd school.

Outline your Framework - for example:

- Identify your qualifications and experience
- Identify the population group and a typical clinical scenario related to this group based on your understanding of the underlying pathophysiology
- Outline the nursing considerations for this group
- Present relevant assessment and diagnostic reasoning processes for this group.
- Indicate assessment tools that might be used and the rationale for their use in this group
- Identify current best practice treatment trends for this group
- Include relevant reference details in your presentation

For all conference, professional and workplace presentations our VUW Power Point template should be used. You are required to use this template for all school presentations as part of your assignment requirements. This template is available and can be accessed by those students using Blackboard or you can email: abbey.mcdonald@vuw.ac.nz for a copy of the template to be sent to you.

ETHICS

Students are required to include in this assignment a consent form from the patient or their family and the nurse manager in the clinical setting. This indicates that the patient and or their family are aware that the purpose of the assignment is for educational purposes and student instruction.

ASSIGNMENT NUMBER THREE

Assignment Name: Learning Portfolio

Due Date: 8th August 2008

This assignment includes your learning contract, and clinical practice log and is worth 40 % of your final grade.

Broadly the development of advanced assessment skills supports advanced nursing practice that has a clinical and therapeutic focus. It is important to develop your portfolio progressively throughout the timeframe of the paper to enable you to provide evidence of development of your practice and scholarly inquiry within a defined specialty area of practice.

Validation of competence will be demonstrated in the presentation of the overall portfolio including written work, the final school presentation and oral questions from an expert panel and in demonstrating competence in learning contract outcomes. These will have been discussed with your clinical mentor and course coordinator with regards to your particular work setting and availability of mentor. Students are required to demonstrate competency in the assessment and clinical examination of the four systems: respiratory, cardiovascular, neurological and abdominal. They will be guided in how to present this appropriately in palliative care.

You are required to identify a mentor (an experienced, competent practitioner within your practice area) to support you throughout this assignment. (If required, you can have more than one mentor.) You will need to meet with your mentor on a regular basis. Your time together will be valuable in establishing a reflective dialogue that will help to clarify learning objectives that will enable you to achieve the specific goal of becoming advancing your skills in physical assessment which includes patient history taking and identification of the significance of the patients condition. , and the critique of different learning situations that evolve throughout the course.

Part One – Self-assessment of practice and development of learning contract (April)

In conjunction with your mentor identify how you will demonstrate that you can conduct a full body assessment and are competent in assessing a palliative care patient - this requires identification of a specific and focused area of assessment and diagnostic reasoning in which you demonstrate how you have advanced your skills and knowledge. This may be demonstrated over the year as you demonstrate and document your skills with the mentor(s) with four patients.

Develop a plan identifying your learning needs, strategies to advance your practice and criteria relevant to your work setting that show your learning outcomes. This can be a working file which is updated throughout the course of paper and is recorded in the *Learning Contract* (two electronic templates will be provided which you can modify to suit your own purposes if required). The use of a log book (a template will be provided) to record your work and outcome is important to show evidence of the process and outcomes of your work with your mentor(s).

Connect on line with your course coordinator or nominated team member and confer over the development of your learning contract so a comprehensive plan is in place. Check back at any

time you require assistance as it may be necessary for the course coordinator to liaise with management in your work place to set up a range of assessment experiences. Consider connecting on line with a peer/colleague in the course as a critical friend with whom you can share resources and track practice development.

Part Two – Summary of progress to date (June School)

Review your learning strategies and summarise your progress to date. Discuss your progress with your mentor prior to the School and present a draft for formative feedback at the School. Refine your strategies after feedback as required and record these in the *Learning contract*.

Part Three – Portfolio submission (August)

Submit a Portfolio that incorporates your Learning Contract and identified learning objectives, the strategies you have engaged in to achieve these, and evidence/validation of your learning full body assessment and specific in depth ability in respect to your specifically identified assessment criteria.

There must be evidence in the portfolio of four full assessments to support your learning objectives and demonstrate the course requirements for a satisfactory outcome.

- The presentation of a signed log book, reflection and journaling are some ways that you can validate your learning outcomes.
- Your mentor's clinical competency form needs to be submitted with your portfolio to validate your progress.
- Include completed assignment one and assignment two in your portfolio.
- Include a reflective statement that takes into account your learning strategies, the literature you have read, and the feedback you have been given on your practice and theoretical work.

From this and exploring appropriate resources articulate your practice development in relationship to the Nursing Council of New Zealand Competencies for Advanced Nursing Practice Programmes (Framework for Post-Registration Nursing Education, 2001) and the aims, objectives and performance criteria of this paper (noted on page 4-6). You may choose to use the *Advanced Practice Document* (electronic template provided) to assist you to document evidence of your learning.

Please note:

You are also required to complete and submit this form Record of Special Achievements related to Study at Victoria (attached to back of outline) with your final assignment for the course.

If you would prefer to complete and submit this form electronically, a copy of the form can be located on Blackboard, our website <http://www.victoria.ac.nz/nsemid/research/student-achievements.aspx> or you could contact Abbey.mcdonald@vuw.ac.nz to request a copy.

Details of Clinical Mentor

Student's Name

--

Mentor's Work Title/First Name/Surname

--

Work Address:	Home Address:
Work Phone:	Home Phone:
Fax:	Email:

Degrees/Diploma's/Certificates	University/Polytechnic/Other Setting	Field	Year Conferred

Relevant practice academic & research experience	From Year	To year
<i>Relevant mentoring experience</i>		

Other Details of Importance: Please add an additional page to the document if you wish, as your comments are valued.



Learning Contract Template

Note this is an example only – please modify as necessary

***Purpose:** learning contracts are a dynamic tool central to the process of learning when advancing your practice. The aim of using this tool in dialogue with the your Teaching staff and Clinical Mentor is to assist you to clarify your ideas, devise realistic objectives and keep track of changes as you reflect on your practice development and refine your Learning Contract. There is no right or wrong way of writing a learning contract it can be revised as you progress through the course. However as you write a contract aim for one that is SMART – specific, measurable achievable realistic and time bound. This will assist you to manage the learning process, as well as validate the outcomes you have achieved.*

Students name:.....

LEARNING CONTRACT NURS 551

Learning Objectives	Action Plan: Note learning resources and strategies for progressive development of nursing practice with relevant timeframes	Evidence of process and progress: As you revisit the form add dates and indicate progress against each part of the process. Note achievements and any changes or modification to the plan.	Evidence of Outcomes How and where are your learning outcomes validated? (for instance you may choose to use a log book or journal to record your progress)
	Resources •		
	Process and timeframes Step One • Timeframes		
	Step Two • Timeframes		
	Step Three • Timeframes		
	Step Four • Timeframes		

**NURS 551
LEARNING CONTRACT**

Name:.....

Learning Objectives	Learning Resources and Strategies	Evidence of Accomplishment	Means of Validating Evidence

Identify the Focus of your Learning Contract -Date

Student Name:

Date:

Use this template to review and make progressive and summative statements about your learning strategies and outcomes against the course aims, objectives, performance criteria and advanced competencies

Advanced Practice Competencies In Palliative Care
Use of relevant palliative care assessment and diagnostic frameworks based on the purpose of the interview, uniqueness of the client, significant others and whanau, and identify appropriate therapeutic approaches
Conduct an appropriate palliative care interview, relevant to the setting/situation and practice, which leads to an appropriate palliative care assessment, diagnosis, referral and consultation, which takes into account age, gender, culture and socio economic, family and spiritual needs
Critique and use advanced diagnostic inquiry skills based on the assessment
Utilise evidence-based practice and research to support advanced nursing knowledge
Communicate the outcomes of the assessment and diagnosis to the client and significant others
Articulate professional values, ethics and standards that underpin assessment and diagnosis
Assess risk: professional, legal, clinical, public and organisational

<p>Summary of progress to date. What course outcomes/ advanced competencies in particular are you developing/have developed through your work? Review your strategies, summarising your progress to date.</p>
<p>IN CONCLUSION</p> <p>Colleague as mentor or critical friend. How has this process supported you to advance your practice competencies?</p>
<p>Clinical Mentoring. How has this process supported you to advance your practice competencies?</p>
<p>Comment on changes related to your practice. e.g. How are you using/have you used the opportunity available to consider or to make significant changes in your practice as a consequence of this course? In what ways are you able to use the course to actively develop a new awareness/position for yourself in your practice?</p>

CLINICAL COMPETENCY FORM - 2008

To be completed by the respective colleague. Please complete this form (email template) to provide validation statements of student's progress in advancing their practice competencies. Your specific feedback on the content of your work with the student and their learning outcomes/competency would be helpful. The student will include your comments in their Portfolio.

Student Name:

Clinical Mentor:

Teaching Staff:

Peer/Colleague/Critical Friend:

Name:

(Signed)

Date:

GRADUATE SCHOOL OF NURSING, MIDWIFERY & HEALTH
Record of Special Achievements related to Study at Victoria

At the end of each year the Graduate School reports to the University details of student special achievements (such as awards, grants, presentations, and publications). Please complete this form and **submit with your final assignment for the course**. If you would prefer to complete and submit this form electronically, a copy of the form can be located on Blackboard, our website <http://www.victoria.ac.nz/nsemid/research/student-achievements.aspx> or you could contact Abbey.mcdonald@vuw.ac.nz to request a copy.

Student Name: _____

Course Code: _____

Industry sponsorship

Name of Sponsor	Notes in relation to the conditions of sponsorship	Value	Year
eg, C&C DHB	50% Student fees paid on successful completion of the course of study	\$	2008

Special awards, Prizes & Scholarships

Name of Award/ Prize/ Scholarship	Source/Provider	Notes in relation to the prize/award/scholarship	Value/ Form	Year
eg 'Best clinical innovation'	Mental Health College of Nurses	A project that I developed while doing my practicum course resulted in our clinical team changing the way in which we met with and involved families in patient care	\$500 Award Certificate	2008

Professional presentations / Seminars /Conferences

If you gave any professional presentations, seminars or conference papers during the year please provide the details below use APA style for referencing these

Example: Student, A. (2008). New models of nursing documentation and their relevance to orthopaedic practice. Paper presented at the Orthopaedic Nurses study day 'Stepping towards the future' held in Wellington, 14 August 2008.

Publications (Book reviews, editorials, journal articles, chapters, monographs, books etc)

Example: Student, A & Teacher, B. (2008). Mental Health Consumers speak about their Health Education Needs. *Contemporary Nurse*, 5(4), 114-126.

Other Special Achievements

If you have had any other special achievements during the year please provide the details.

Attach and submit with your final assignment thank you

Victoria

UNIVERSITY OF WELLINGTON

*Te Whare Wānanga
o te Ūpoko o te Ika a Māui*



MARKING CRITERIA FOR NURS 551

2008

COMPLEX ASSESSMENT AND DIAGNOSTIC REASONING IN PALLIATIVE CARE

ASSIGNMENTS 1, 2 & 3

NURS 551: Assignment Number One

Assignment Name: Research in Complex Assessment and Diagnostic Frameworks

Paper Length: 3000 minimum - 4000 maximum words

Assignment Value: 30% of final grade

Assignment criteria

Grade	Core indices of quality	Example criteria
Distinction (A, A plus)	Excellent work	Excellent paper Superior quality - overall - in analysis, critique & or synthesis. May have excellent integration, creativity, in construction and in substance.
Credit (A minus, B plus)	Very good work	Creditable paper. General or considerable merit overall or significantly in one or more areas list in below: <ul style="list-style-type: none"> • grasp of approaches • depth & quality of analysis / synthesis / critique of field in relation to weight of evidence / quality of research • very good construction of paper - management and presentation of ideas
Pass (B, B minus, C plus, C)	Satisfactory work B range – good work C range – passable but weak work	Reasonable grasp of approaches Reasonable attempt at analysis / synthesis / critique of field in relation to weight of evidence /quality of research. Reasonable construction of paper - management and presentation of ideas.
Unsatisfactory / Re-write (C minus or below)	Unsatisfactory work	Poor paper. Inferior quality or flawed - overall - in analysis, critique & or synthesis. May be poor in integration, construction and substance.

In the following section a list of specific areas associated with the assignment task has been outlined. For your feedback, we have provided an indicator of quality in relation to each of these as they applied to your work. These specific comments should be read in relation to the overall comments provided above.

Not present, not applicable =NA

Quality: Excellent, very good, good, weak, unsatisfactory

Key Framework	Quality	Comment
Range of Frameworks		
Quality of Research		
Evidence of Critical Review		
Theoretical Evidence		
Practice Evidence		
Academic criteria		
Overall construction		
Originality/ Creativity		
Clarity of ideas		
Coherence overall of paper		
Introduction		
Conclusion		
Recommendations		
Reference list		



GRADUATE SCHOOL OF NURSING, MIDWIFERY AND HEALTH

NURS 551 Feedback Sheet

Assignment: 1

Value: 30%

Evidence of assessment and diagnostic frameworks and accompanying paper

Student name:

Recommended grade:

Teaching Staff:

Overall Comments:

Specific Comments:

NURS 551 Criteria for Assignment Number Two Part A

Assignment Name: Complex Palliative Assessment - patient/client case study/population group

Part A This assignment is worth 20 % of your final grade

Name:

Mark:

Name of Marker:

Date:

Marking template for Case Study or Scenario	Mark	Comment
<ul style="list-style-type: none"> Articulates the case study/scenario classically through presentation of case history/typical population scenario and presentation of assessment of examination data. Demonstrates assessment framework appropriate to the client/population group situation 	/25	
<ul style="list-style-type: none"> On examination data is appropriate to the clinical situation Concise summary of interview, physical assessment and clinical assessment findings (case study) Concise summary of relevant assessment processes (population group) Clear identification of the examination data, enabling problems and potential problems to be identified and identification of further investigations or assessment required Uses and interprets laboratory and diagnostic tests appropriately to the situation 	/25	
<ul style="list-style-type: none"> Detailed explanation of the differential diagnoses ranked according to probability and problems or potential problems supported by pathophysiology and evidence based rationale. Identification of prognostic indicators for individual/population group. 	/25	
<ul style="list-style-type: none"> Detailed explanation of plan for action according to priority supported by problem identification, pathophysiology and evidence of rationale and the clinicians experience (i.e. clinical reasoning) Demonstration of appropriate relational approach and culturally sensitive communication appropriate to the individual family and whanau 	/25	



NURS 551 Criteria for Assignment Number Two Part B

Assignment Name: Complex Palliative Assessment - patient/client case study

Part B This assignment is worth 10% of your final grade

Marking template for Presentation	Mark possible	Mark gained and comment
Health and illness palliative history/scenario comprehensive and provides clear information to enable adequate clinical assessment.	25%	
Presentation of problems or potential problems with reference to pathophysiology and evidence for rationale –consider ranking the problems according to probability	25%	
Presentation of action plan demonstrating in depth clinical reasoning supported by evidence	25%	
Clear and accurate case documentation and recognition of the wider aspects of the client and family situation	25%	

NURS 551 Criteria for Assignment Number Three

Assignment Number Three

Assignment Name: Learning Portfolio

This assignment is worth 40 % of your final grade

Name:

Mark:

Name of Marker:

Date:

Completion of Log Book requirements

Comment:

PART ONE: Self assessment of practice and development of learning contract

Comment:

PART TWO: Summary of Progress to date

Comment:

PART THREE: Portfolio submission: Demonstration of Advanced Nursing Practice Competencies in the Portfolio

Comment:

Signed:

Date: