

## MODULE SPECIFICATION FORM

Module Title: Clinical assessment, diagnosis and holistic care management	Level: 7	Credit Value: 20
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Module code: NHS712	Semester(s) in which to be offered: 1	With effect from: Sept 2010
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<b>Office use only:</b> To be completed by AQSU:	Date approved: July 2010 Date revised: Sept 2013, April 14 Version no: 3
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Existing/New: Existing	Title of module being replaced (if any): Clinical Assessment, Diagnosis and Treatment (V300) Holistic Assessment and Care Management in Nursing Practice
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Originating Subject: Health	Module Leader: Joanne Pike
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Module duration : 30 hrs classroom -based study, 30 hrs directed and 40 hrs independent learning 100 hrs practice-based learning supervised by DSMP /clinical mentor	Status: <b>core</b> /option/elective (identify programme where appropriate):	Core : MSc Advanced Clinical Practice and MSc Advanced Clinical Practice (Unscheduled Care)
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Percentage taught by Subjects other than originating Subject (please name other Subjects):	None
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Programme(s) in which to be offered: MSc Advanced Clinical Practice MSc Advanced Clinical Practice (Unscheduled Care)	Pre-requisites per programme (between levels):	Co-requisites per programme (within a level): None
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**Module Aims:**

This module aims to:

Prepare advancing clinical practitioners to demonstrate competence in completing holistic clinical assessments of a client group

Enhance the practitioner's skills in critical analysis and problem solving in order to make sound judgements in the holistic assessment and the implementation of care for a client / client group.

**Expected Learning Outcomes**

At the end of this module, students should be able to:

**Knowledge and Understanding:**

Within their scope of practice, competently use diagnostic, interpersonal and clinical examination skills to perform an accurate in-depth systematic assessment of the health and care needs of an individual or client group

Utilise in depth knowledge and understanding, supported by robust evidence taken from the forefront of their practice, to systematically analyse and interpret client history, presenting symptoms, clinical findings and diagnostic information

Systematically justify a differential diagnosis that informs clinical decision making and holistic care planning and management

Make appropriate referrals to and work effectively with other professionals to ensure safe, effective care management

Critically reflect upon the planning and management of holistic, culturally and spiritually sensitive care for an individual or client group

**Transferable/Key Skills and other attributes:**

critical thinking

diagnostic reasoning skills

advanced problem solving

decision making in complex and critical situations

demonstrate effective verbal and written communication skills;

exercise initiative and personal responsibility

**Professional Competency:**

Achievement of the above learning outcomes will support the practitioner in addressing the NLIAH (2010) Clinical Pillar

Assessment: please indicate the type(s) of assessment (eg examination, oral, coursework, project) and the weighting of each (%). **Details of indicative assessment tasks must be included.**

Portfolio consisting of three elements

Critical incident analysis (3,000 words). A critically reflective study of an incident in clinical practice. This will investigate the student's perception of their own clinical decision making strategy during their 100 hours of clinical practice undertaken as part of this module. Holistic practice must be considered and the assessment will make reference to the evidence in the practice portfolio.

Evidence of successful completion of a 4 stage OSCE undertaken during the 100hrs practice based learning.

Additional supporting evidence from 100hrs practice based learning to demonstrate achievement of learning outcomes. This must include a negotiated learning contract with a designated clinical supervisor and a signed record of 100hrs practice based learning.

Additional examples include action plans, formative observations and testimonials from colleagues and patients, together with a reflective learning log.

All elements of assessment must be passed

The pass mark for assessment one is 50% or above

Assessment Tasks	Learning Outcomes to be met	Type of assessment	Weighting	Duration (if exam)	Word count or equivalent if appropriate
One	2,3,4,5	Practice Portfolio: Critically reflective care management study	100%		3,000
Two	1,2, 3,4	Task 2: : 4 stage OSCE	Pass /Refer		
Three	1,2,3,4,5	Practice Portfolio – additional evidence of achievement	Pass/Refer		

Learning and Teaching Strategies:

A variety of learning and teaching strategies will be used. Interactive lectures will be used to provide core knowledge, whilst lecturer-facilitated, student-led small group discussion and seminars will support a problem-based/case-based learning approach. In clinical practice an experiential strategy based on a negotiated learning contract between the student and his/her Designated Supervising Medical supervisor/clinical mentor will be employed. Students must have an agreed DSMP in order to be admitted to this module.

Syllabus outline:

Principles of physical examination and history taking;

Advancing communication skills : Consultation and professional communication; Motivational interviewing,

Hypothetical inductive and deductive reasoning and decision-making;

Physiology and patho physiology of body systems  
Clinical investigation and interpretation of findings.  
Therapeutic intervention, management and referral  
Holistic patient/client care planning and management in advanced practice contexts  
Spirituality, Diversity and Equality  
Patient and Carers perspectives – principles of empowerment

## Bibliography

### Essential reading:

Bickley, L. S. (2003) ***Bates' guide to physical examination and history taking***. Baltimore: Lippincott, Williams & Wilkins.

Cohen, E. L. and Cesta, T..G. (2005) *Nursing case management from essentials to advanced practice applications* (4<sup>th</sup> Edition). St. Louis, Mo.: Elsevier Mosby.

Hennessey, I. (2005) *Introduction to Clinical Examination*, New York: Churchill Livingstone.

### Other indicative reading:

Springhouse (2004) *Handbook of Pathophysiology*. (2<sup>nd</sup> Edition). Baltimore: Lippincott, Williams & Wilkins