

# **MODULE SPECIFICATION**

When printed this becomes an uncontrolled document. Please access the Module Directory for the most up to date version by clicking <u>here</u>.

Module Code:	NUR620					
Module Title:	Holistic Co-ordination of Complex Care					
Level:	6	Credit Value:	40			
Cost Centre(s):	GANG	JACS3 code: HECoS code:	B740 100279			
Faculty	Social & Life Sciences	Module Leader:	Deborah Cheadle			
Scheduled learning and teaching hours 84 hrs						
Scheduled learning and teaching hours  Placement			See Programme Specification			
Guided independent study			178.5 hrs			
Module duration (total hours)						
Module daration	(total floars)				262.5 hrs	
Programme(s) ir	n which to be off	ered (not including e	xit awards)	Core	Option	
Bachelor of Nursing (Honours) with Registered nurse (Adult)						
Pre-requisites None						
None						
Office use only Initial approval: 03/03/2020 With effect from: 26/05/2020 Date and details of revision:				Version		

### **Module Aims**

This module aims to enable students to build on their knowledge of physical and mental health needs and to identify the pathophysiology and resulting complex health needs of patients presenting with various conditions across the lifespan. It aims to further develop the integration of knowledge and practice in relation to providing holistic/ person centred, individualised care within a multi-agency arena.

Mc	Module Learning Outcomes - at the end of this module, students will be able to					
1	Construct and critically evaluate a holistic, individualised evidence based plan of care for a client /service user with complex needs and explore the impact of the altered physiology on those care needs. ( <b>NMC</b> P 1 1.12, 1.16, 1.18, 1.20, P2 2.1, 2.9, P3 3.2, 3.3, P4 4.2,4.3,4.13, P5 5.7)					
2	Critically appraise key legislation, guidelines and policy changes relating to the delivery, coordination of care and care funding. ( <b>NMC</b> P 1 1.2, 1.19, P2 2.5, P3 3.6,3.16, P4 4.1,P5 5.12, P6 6.1, P7 7.2, 7.3, 7.4, 7.13)					
3	Critically discuss and show understanding of co-morbidities and the demands of meeting people's complex nursing and social care needs when prioritising evidence based plan of care. ( <b>NMC</b> P1 1.8, 1.9, 1.11, 1.13, P2 2.10, 2.11, P3 3.1, 3.4, 3.5, 3.9, 3.11, 3.12, 3.13, 3.14, 3.15, P4 4.4, 4.5, 4.6,4.8, 4.9, 4.10, 4.12, 4.15, 4.18, P5 5.11, P7 7.1, 7.5, 7.6, 7.7, 7.8, 7.9, 7.10, 7.11, 7.12)					

Employability Skills The Wrexham Glyndŵr Graduate	I = included in module content A = included in module assessment
·	N/A = not applicable
CORE ATTRIBUTES	
Engaged	1
Creative	1
Enterprising	1
Ethical	IA
KEY ATTITUDES	
Commitment	1
Curiosity	IA
Resilient	I
Confidence	1
Adaptability	I
PRACTICAL SKILLSETS	
Digital fluency	I
Organisation	IA
Leadership and team working	1
Critical thinking	I
Emotional intelligence	I
Communication	IA

# **Derogations**

- BN (Hons) Nursing students will be allowed two attempts at each module in each level
  of study, but only one third attempt at one module at that level will be allowed, at the
  discretion of the Assessment board. This excludes the Safe Medicate examination in
  each year of the programme, where three attempts will be allowed.
- There are no compensatory passes in the BN (Hons) programme due to professional body requirements, and all assessment elements of each module must be passed.
- BN (Hons) Nursing students have to pass all elements of assessment by the end of each academic year (part one, two and three of programme), before progressing into the next part of the programme unless exceptional circumstances exist, when they will be permitted until end of the first module in the next part of programme in which to retrieve trailed modules.
- BN (Hons) Nursing students will have the opportunity to re-attempt any referred modules within the academic year before progression is denied.
- Feedback on assessed work will be provided within four weeks of submission
- Any work submitted, however competent from an academic viewpoint, which omits or includes information which would indicate unsafe practice by the student or in any way breaches confidentiality will be deemed a 'refer'.
- The University regulations for 40 credit modules at level 4, 5 & 6 in terms of weighting for overall learning hours, contact learning hours and independent learning hours will be superseded by professional body requirements of 2300 hours theoretical and 2300 hours of clinical practice over the 3 years (the programme consists of three 40 credit modules in each part of the programme, equalling 9 modules in total)— this will result in each 40 credit module being 262.5hours multiplied by 9 modules is 2362.5 which allows slight slippage of 62.5 hours over required 2300.

# Assessment: Indicative Assessment Tasks:

### **Assessment:**

The assessment for this module uses an enquiry based approach in which students work in small groups within the clinical simulation environment. Students will undertake an analysis of a given clinical situation (in the simulation suite) which will be used to produce a care plan with critical commentary for a patient in a clinical situation with pathophysiology.

This will be thus used to produce a bio-psychosocial plan of care with critical commentary for a patient with complex needs requiring medical or surgical intervention (individually presented in written format).

The student will be required to take part in small group analysis lasting 20 minutes (30%) and submit a written care plan and critical commentary of 2500 words (70%)

Clinical Practice Outcomes in the 'Ongoing record of the Achievement of Proficiencies for Registration' are formatively assessed throughout the academic year, and summatively assessed in the end module of each year as Pass / Fail.

Assessment number	Learning Outcomes to be met	Type of assessment	Weighting (%)
1	1, 2 & 3	Coursework	100%

### **Learning and Teaching Strategies:**

Lectures, group work and discussion, directed study and presentations by lecturing and clinical staff. The use of the clinical simulation suite will support the assessment. Moodle™ will be used to enable students to offer support to each other. Students will have access to group tutorial support.

### Syllabus outline:

### The content will include the following:

Enhancing recovery from medical and surgical interventions (including sepsis)/Managing complex needs in acute or community settings /Principles of pathogenesis related to long-term conditions/Pathophysiology (urinary, renal, skeletal - rheumatoid arthritis, reproductive, endocrine – DKA, digestive system – Crohn's, ulcerative colitis, stoma care) and psychosocial aspect of identified medical and surgical needs / Related pharmacology / pharmacokinetics / pharmacodynamics / Clinical systems, informatics and SBAR / Palliative care (including lymphoedema) and decision making related to treatment and care preferences / Malnutrition and dehydration (including enteral feeding, Intravenous infusions and therapy and central lines) /Cannulation and venepuncture/ ECG/Blood transfusion/Chest auscultation/Health promotion/education / Care planning and discharge / Therapeutic relationships and working in partnership with people, families and carers / POVA in relation to complex needs / BLS update (Development of communication and relationship management skills as identified in Annex A/Development of Nursing Procedures identified in Annex B).

The above syllabus takes account of the following:

### **EU Directive Annex V2 Point 5.2.1**

### Syllabus outline:

General principles of health and nursing/ Nursing principles in relation to general and specialist medicine, general and specialist surgery, care of the old and geriatrics/Dietetics/Anatomy & Physiology/ Pharmacology/Principles of Administration/Social Sciences – sociology and psychology/Preventative medicine/Health Education

### NMC Future Nurse Standards of Proficiency for registered nurses

Platform 1 Being an accountable professional (1.1, 1.2, 1.8, 1.9, 1.11, 1.12,1.13, 1.16, 1.18,1.19,1.20)

Platform 2 Promoting health and preventing ill health (2.1, 2.5, 2.9, 2.10, 2.11)

Platform 3 Assessing needs and planning care (3.1,3.2, 3.3, 3.4, 3.5, 3.6, 3.9, 3.11, 3.12, 3.13, 3.14, 3.15, 3.16)

Platform 4 Providing and evaluating care (4.1,4.2,4.3,4.4, 4.5, 4.6, 4.8, 4.9, 4.10, 4.12, 4.13, 4.15,4.18)

Platform 5 Leading and managing nursing care and working in teams (5.7, 5.11, 5.12)

Platform 6 Improving safety and quality of care (6.1)

Platform 7 Coordinating care (7.1, 7.2 7.3, 7.4, 7.5, 7.6, 7.7, 7.8, 7.9, 7.10, 7.11, 7.12

7.13)

### **QAA Standards**

5.2 vii, viii, xiii, xix

### **Indicative Bibliography:**

### **Essential reading**

Barber, P. and Robertson, D. (2015), *Essentials of Pharmacology*. 3<sup>rd</sup> ed. Maidenhead: Open University Press/McGraw-Hill Education.

Howatson-Jones, L., Standing, M. & Roberts, S.B. (2015), *Patient Assessment and Care Planning in Nursing*. London: Sage.

Porth, C.M. (2015), *Essentials of Pathophysiology: Concepts of Altered Health States*. 4<sup>th</sup> ed. Philadelphia: Lippincott Williams & Wilkins.

Twycross, R. and Wilcock, A. (2016), *Introducing Palliative Care*. 5<sup>th</sup> ed. London: CRS Press.

# Other indicative reading De Chesnay, M. and Anderson, B.A. (2016), Caring for the Vulnerable: Perspectives in Nursing Theory, Practice and Research. 4<sup>th</sup> ed. London: Jones & Bartlett Publishers.