Spring semester, 2014

NMIH107: Preparing for the Reflection assignment.

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<tr>
<td>NMIH105</td>
<td>Week 6 Essay 2000 wds 40%</td>
<td>Weeks 8 &amp; 9 Group presentation 20 mins 20%</td>
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<td>Exam Period Final exam 120 mins 40%</td>
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<td>NMIH106</td>
<td>Week 9 In-class quiz 60 mins 20%</td>
<td>Week 10 Case study 2500 wds 40%</td>
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<td>NMIH107</td>
<td>Week 4 Critical appraisal 2000 wds 35%</td>
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<td>Week 13 Nursing Competency Assessment Schedule</td>
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<td>Week 7 Health Behaviour Change diary 1500 wds 60%</td>
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NMIH107 Reflective essay: Maintaining a safe environment

REFLECTION:
Introduction + Descriptive level of reflection
What?
Approx. 1000 wds.

THEORY, KNOWLEDGE, EVIDENCE:
Nursing plan
FUTURE practice...?
Approx. 1500 wds.

CONCLUSION
Overall impact on your understanding of maintaining a safe environment...?
Approx. 500 wds.

• **Who** is your patient?
• **What** is the problem or issue?
• **What** was your role in the situation?
• **What** were you trying to achieve?
• **What** were the consequences?
• **What** has changed about your understanding of the situation & your initial response?

• **What** are the APPROPRIATE care goals for this patient?
• **What** nursing interventions & / or strategies will assist in achieving these goals?
• **What** are the salient rationales for setting these goals?

• **Based** on your reflection & research, what do you now understand about the concept?
• **What** broader issues need to be considered for this change to be successful?
• **What** might the consequences be for this changed approach?
The focus of this essay

Identify a situation that describes an individual patient’s needs around maintaining a safe environment

- Have you participated in a clinical situation around this topic?
- Do you remember any class discussion or case study on this topic?
- What happened?
- How could the situation been better handled?
- Did the situation affect only you and the patient?
- Did it also affect the patient’s significant others and/or colleagues?
Introduction ~ 200 words

Patient

- **Description** of patient

Incident

- **Describe** the incident

Influences

- **Note** influences: e.g. culture; age; gender; ethnicity; religion; disability; etc.

Use a pseudonym

- **Maintain** confidentiality
Reflection ~ 800 words

Descriptive level

- **Event** & context.
- **What** were staff trying to achieve?
- **Why**?
- **Consequences**: for the client; for the staff.

Action-orientated reflection

- **What** is it about the incident that has drawn your attention?
- **What** was your role (participant; observer)?
- **What** have you come to think about the incident on reflection?
## Nursing care plan ~ 1500 words

<table>
<thead>
<tr>
<th>Care plan goals</th>
<th>How will these goals be achieved?</th>
<th>How will this care plan improve on outcomes for this type of patient in the future?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• <em>What</em> are they?</td>
<td>• <em>Proposed</em> interventions / strategies?</td>
<td>• <em>Why</em> is this a better nursing care plan for this patient?</td>
</tr>
<tr>
<td>• <em>Why</em> (rationales)?</td>
<td>• <em>How</em> will these be put into action?</td>
<td></td>
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<td></td>
<td>• Evidence?</td>
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</table>
Conclusion ~ 500 words

**Summing up**
- Conclusion you reached about your proposed Nursing care plan

**Brief recap of your new reflection based strategies**
- Value of developing evidence-based care plans specific to individual patient requirements.

**Implications**
- Effect of your alternative care proposals on maintaining a safe environment & patient outcomes
P1: Three issues impacting on quality family-centred care for Indigenous women during pregnancy and birthing are: the lack of readily accessible health care professionals and facilities; the extensive travel and expense of travelling to larger medical facilities when complications occur; and language barriers.

P3: Eighty nine percent of townships in the Northern Territory, Western Australia and Queensland are defined as remote because of their lack of medical services and distances from medical facilities.

P4: Archell et al. (2007) identify the issues around retention and attraction of medical officers to remote and regional areas of the Aboriginal and Torres Strait Islander health services.

P5: The negative affect that being removed from community and loved ones in a time preceding birth has detrimental effects on the emotional state of the mother and family.

P6: Watson et al. (2002) point out the communication issues confronting many of the women sent from remote communities, some of who have English as a second or third language. This communication problem can only be more complicated when these women are confronted with medical jargon which they do not understand.
How will you weave evidence into your discussion?

“Alcoholic liver disease accounted for 751 deaths in Australian in 2008, and the majority of the deaths were of people from the 25-34 and 85-94 age groups” (Hillman 2014, p. 805).

OR

Hillman points out that “Alcoholic liver disease accounted for 751 deaths in Australian in 2008, and the majority of the deaths were of people from the 25-34 and 85-94 age groups” (2014, p. 805).

WHY?
How will you weave web sites into your discussion?

Mims Online (2014) advise the B vitamins are essential for the effective metabolism of carbohydrates, amino acids and fats, as well for the production of energy in cells.

OR

B vitamins are essential for the effective metabolism of carbohydrates, amino acids and fats, as well for the production of energy in cells (Mims Online 2014).

WHY?
Lab Tests Online AU 2014 (a) suggests that Prothrombin time (PT) is used to check how long it takes for a person’s blood to clot.

OR

Prothrombin time (PT) is used to check how long it takes for a person’s blood to clot (Lab Tests Online AU 2014a).

WHY?
The need for Indigenous people to feel culturally safe within a medical and hospital environment is a matter of concern for health care practitioners dealing with an Indigenous family-centred care setting. In this context, cultural safety is defined as:

more or less an environment which is safe for people; where there is no assault, challenge or denial of their identity, of who they are or what they need. It is about shared respect, meaning and shared knowledge and experience of learning together with dignity and truly listening. (Williams 1998, p.2)

Williams (1998) states that national policies have attempted to ensure the dependence of Aboriginal people by managing, controlling and protecting them rather than acknowledging and accepting cultural differences when developing Aboriginal policy. Changes in education for health practitioners to increase their awareness of the cultural uniqueness of Indigenous peoples needs to be included in training programs to enhance the health outcomes in family-centred care (Cass et al. 2002). Currently, Australian health policies reflect the colonial paternalistic nature of non-Aboriginal practices by sending Indigenous women away from their families and culture to manage their pregnancies and give birth without the consideration of a family-centred care strategies (Cass et al. 2002; Watson et al. 2002).
A complete, grammatically correct sentence requires ...

<table>
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<th>Essential</th>
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<th>Essential</th>
<th>Optional</th>
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<tbody>
<tr>
<td>Subject (noun phrase)</td>
<td>Verb phrase</td>
<td>Object (noun phrase)</td>
<td>Adverbiaal</td>
</tr>
<tr>
<td>Somebody</td>
<td>broke</td>
<td>the window</td>
<td>last night</td>
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Sentence fragments are strings of words that have been punctuated as a sentence but are not valid sentences;

that is, they do not contain all the elements necessary to create a sentence.

Sentence fragments are usually incomplete ideas
Some examples from Nursing essays ...

Develop a description of his prescribed medication and their purpose.

Describe and identify community resources to assist in the prevention of injury in the home.
This case study analyses Mrs Smith’s presenting signs and symptoms and reviews her prescribed medications in relation to her current health issues.

Before Mrs Wall is discharged it is essential to identify community resources to assist in the prevention of future injury in the home.
Waterhouse (2005) suggest neurological observations involving pupil reaction, limb response assessing for motor and sensory function, and the Glasgow Coma Scale or (GSC) to determine level of consciousness and will determine deterioration of cerebral dysfunction.

How might it be improved or clarified?
Waterhouse (2005) suggests that neurological observations involving pupil reaction, limb response assessing for motor and sensory function, and the Glasgow Coma Scale (GSC) should be implemented to determine level of consciousness and will determine degree of deterioration of in cerebral dysfunction function.
Waterhouse (2005) suggests that neurological observations involving pupil reaction, limb response assessing for motor and sensory function, and the Glasgow Coma Scale (GSC) should be implemented to determine level of consciousness and degree of deterioration in cerebral function.

Is there anything else that needs doing to further enhance meaning?
Good luck with all the final bits!