



NURS13141 Acute Alterations in Health in Complex Care Environments

Term 1 - 2024

Profile information current as at 19/05/2024 09:00 am

All details in this unit profile for NURS13141 have been officially approved by CQUniversity and represent a learning partnership between the University and you (our student). The information will not be changed unless absolutely necessary and any change will be clearly indicated by an approved correction included in the profile.

General Information

Overview

Acute alterations in health occur suddenly, may be severe in onset, and may be exacerbated in chronic health conditions. In this unit, you will learn how to conduct clinical reasoning for people across the lifespan who experience acute, severe alterations in health. You will focus on care delivery, communication, person-centred care, and working in partnership with the interdisciplinary health care team to care for the deteriorating person in a complex care environment. This unit challenges you to think innovatively to justify and prioritise nursing care requirements to enable optimal health outcomes for people facing the challenges of an acute alteration in their health.

Details

Career Level: *Undergraduate*

Unit Level: *Level 3*

Credit Points: 6

Student Contribution Band: 7

Fraction of Full-Time Student Load: 0.125

Pre-requisites or Co-requisites

Pre-requisites: NURS12163 Chronic Health and Community Care NURS12164 Professional Experience Placement 3 or NURS13133 Clinical Nursing Practice 4

Important note: Students enrolled in a subsequent unit who failed their pre-requisite unit, should drop the subsequent unit before the census date or within 10 working days of Fail grade notification. Students who do not drop the unit in this timeframe cannot later drop the unit without academic and financial liability. See details in the [Assessment Policy and Procedure \(Higher Education Coursework\)](#).

Offerings For Term 1 - 2024

- Online
- Rockhampton

Attendance Requirements

All on-campus students are expected to attend scheduled classes - in some units, these classes are identified as a mandatory (pass/fail) component and attendance is compulsory. International students, on a student visa, must maintain a full time study load and meet both attendance and academic progress requirements in each study period (satisfactory attendance for International students is defined as maintaining at least an 80% attendance record).

Website

[This unit has a website, within the Moodle system, which is available two weeks before the start of term. It is important that you visit your Moodle site throughout the term. Please visit Moodle for more information.](#)

Class and Assessment Overview

Recommended Student Time Commitment

Each 6-credit Undergraduate unit at CQUniversity requires an overall time commitment of an average of 12.5 hours of study per week, making a total of 150 hours for the unit.

Class Timetable

[Regional Campuses](#)

Bundaberg, Cairns, Emerald, Gladstone, Mackay, Rockhampton, Townsville

[Metropolitan Campuses](#)

Adelaide, Brisbane, Melbourne, Perth, Sydney

Assessment Overview

1. **Presentation**

Weighting: 50%

2. **Case Study**

Weighting: 50%

Assessment Grading

This is a graded unit: your overall grade will be calculated from the marks or grades for each assessment task, based on the relative weightings shown in the table above. You must obtain an overall mark for the unit of at least 50%, or an overall grade of 'pass' in order to pass the unit. If any 'pass/fail' tasks are shown in the table above they must also be completed successfully ('pass' grade). You must also meet any minimum mark requirements specified for a particular assessment task, as detailed in the 'assessment task' section (note that in some instances, the minimum mark for a task may be greater than 50%). Consult the [University's Grades and Results Policy](#) for more details of interim results and final grades.

CQUniversity Policies

All University policies are available on the [CQUniversity Policy site](#).

You may wish to view these policies:

- Grades and Results Policy
- Assessment Policy and Procedure (Higher Education Coursework)
- Review of Grade Procedure
- Student Academic Integrity Policy and Procedure
- Monitoring Academic Progress (MAP) Policy and Procedure – Domestic Students
- Monitoring Academic Progress (MAP) Policy and Procedure – International Students
- Student Refund and Credit Balance Policy and Procedure
- Student Feedback – Compliments and Complaints Policy and Procedure
- Information and Communications Technology Acceptable Use Policy and Procedure

This list is not an exhaustive list of all University policies. The full list of University policies are available on the [CQUniversity Policy site](#).

Previous Student Feedback

Feedback, Recommendations and Responses

Every unit is reviewed for enhancement each year. At the most recent review, the following staff and student feedback items were identified and recommendations were made.

Feedback from Student feedback: SUTE data

Feedback

Content was useful and tutorials were very relevant, however assignment task sheets were unclear at times.

Recommendation

Unit coordinators will review assignment task sheet to ensure better clarity is provided.

Feedback from Student feedback: SUTE data

Feedback

Having markers more aligned would be helpful in relation to assessments.

Recommendation

Although the moderation process was followed by the Unit Coordinators as per the University policy, several students within the small number of students who responded to the survey identified this as key issue. Moderation plan supporting information assessment marking and grading is recommended as per the DDLT.

Feedback from Student feedback: SUTE data

Feedback

I appreciated the real life scenarios shared and feel this will help immensely with future patient care.

Recommendation

Unit coordinators will ensure to include relevant scenarios to link realistically to clinical setting. Invited expert guest speakers will also be sought to provide additional context, linking to our industry partners.

Feedback from Student feedback: SUTE data

Feedback

Assessment feedback could be improved, for example how you could have expanded a topic

Recommendation

Unit coordinators will work closely with all markers and provide further direction on providing clearer and more constructive feedback. Moderation plan supporting information assessment marking and grading is recommended as per the DDLT.

Unit Learning Outcomes

On successful completion of this unit, you will be able to:

1. Explain the pathophysiological changes that occur when a person experiences acute alterations in health.
2. Apply the decision-making framework for nursing (NMBA 2020) to prioritise and justify care for the person experiencing acute alterations in health.
3. Examine the role of the nurse and other members of the interdisciplinary team in the care of a person in a complex care environment.
4. Analyse and apply the best available evidence, for safe, quality practice for a person experiencing an acute alteration in health.

Content in this unit incorporates a number of professional nursing requirements

Nursing and Midwifery Board of Australia decision-making framework (DMF) - nursing

Nursing and Midwifery Board of Australia Registered Nurse Standards for Practice

Thinks critically and analyses nursing practice

Maintains the capability for practice

Develops a plan for nursing practice

Evaluates outcomes to inform nursing practice

Nursing and Midwifery Board of Australia Nursing Code of Conduct

Legal compliance

Person-centred practice

Cultural practice and respectful relationships

Professional behaviour

Teaching, supervising and assessing

Research in health

Health and wellbeing

International Council of Nursing Code of Ethics for Nursing

Nurses and People

Nurses and Practice

Nurses and the Profession

Nurses and co-workers

National Safety and Quality Health Service Standards

Clinical governance

Partnering with consumers

Preventing and Controlling healthcare-associated infection

Medication safety

Comprehensive care

Communicating for safety

Blood management

Recognising and responding to acute deterioration

Patient Safety Competency Framework

Person-centred care

Therapeutic communication

Cultural competence

Teamwork and collaborative practice

Clinical reasoning

Evidence-based practice

Preventing, minimising and responding to adverse events

Infection prevention and control

Medication safety

Aged Care Quality Standards

Consumer dignity and choice

Ongoing assessment and planning with consumers

Personal care and clinical care

Services and supports for daily living

Organisation's service environment

Alignment of Learning Outcomes, Assessment and Graduate Attributes



Alignment of Assessment Tasks to Learning Outcomes

Assessment Tasks	Learning Outcomes			
	1	2	3	4
1 - Presentation - 50%	•	•	•	•
2 - Case Study - 50%	•	•	•	•

Alignment of Graduate Attributes to Learning Outcomes

Graduate Attributes	Learning Outcomes			
	1	2	3	4
1 - Communication	•	•	•	
2 - Problem Solving	•			
3 - Critical Thinking	•	•	•	•
4 - Information Literacy				•
5 - Team Work		•	•	
6 - Information Technology Competence				
7 - Cross Cultural Competence				
8 - Ethical practice		•	•	•
9 - Social Innovation				
10 - Aboriginal and Torres Strait Islander Cultures				

Textbooks and Resources

Textbooks

There are no required textbooks.

IT Resources

You will need access to the following IT resources:

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)

Referencing Style

All submissions for this unit must use the referencing style: [American Psychological Association 7th Edition \(APA 7th edition\)](#)

For further information, see the Assessment Tasks.

Teaching Contacts

Trish Johnson Unit Coordinator
p.johnson@cqu.edu.au

Stephen Yu Unit Coordinator
s.yu@cqu.edu.au

Lucinda Brown Unit Coordinator
l.brown2@cqu.edu.au

Lisa Jackson Unit Coordinator
l.jackson@cqu.edu.au

Schedule

Week 1 - 04 Mar 2024

Module/Topic	Chapter	Events and Submissions/Topic
Introduction to the unit and unit coordinators Complex care environments and review of primary survey	See Moodle - Weekly commitments Module 1 content	Online and on-campus tutorial

Week 2 - 11 Mar 2024

Module/Topic	Chapter	Events and Submissions/Topic
The principles of triage	See Moodle - Weekly commitments Module 2 content	Online and on-campus tutorial

Week 3 - 18 Mar 2024

Module/Topic	Chapter	Events and Submissions/Topic
Overview of secondary survey	See Moodle - Weekly commitments Module 3 content	Online and on-campus tutorial

Week 4 - 25 Mar 2024

Module/Topic	Chapter	Events and Submissions/Topic
Management of the deteriorating patient	See Moodle - Weekly commitments Module 4 content	Online and on-campus tutorial Assessment One drop-in session date and time TBA

Week 5 - 01 Apr 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Professional issues in complex care environments	See Moodle - Weekly commitments Module 5 content	Online and on-campus tutorial Oral Presentation Due: Week 5 Thursday (4 Apr 2024) 11:55 pm AEST
Vacation Week - 08 Apr 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Week 6 - 15 Apr 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Cardiac alterations 1	See Moodle - Weekly commitments Module 6 content	Online and on-campus tutorial
Week 7 - 22 Apr 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Cardiac alterations 2	See Moodle - Weekly commitments Module 7 content	Online and on-campus tutorial
Week 8 - 29 Apr 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Respiratory alterations	See Moodle - Weekly commitments Module 8 content	Online and on-campus tutorial
Week 9 - 06 May 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Alterations in nutritional status and complications of diabetes	See Moodle - Weekly commitments Module 9 content	Online and on-campus tutorial
Week 10 - 13 May 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Alterations in renal and gastrointestinal function	See Moodle - Weekly commitments Module 10 content	Online and on-campus tutorial Assessment Two drop-in session date and time TBA
Week 11 - 20 May 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Shock and alterations in neurological status	See Moodle - Weekly commitments Module 11 content	Online and on-campus tutorial Case study Due: Week 11 Thursday (23 May 2024) 11:55 pm AEST
Week 12 - 27 May 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Review week: how to answer clinical interview questions	See Moodle - Weekly commitments Module 12 content	Online and on-campus tutorial
Review/Exam Week - 03 Jun 2024		
Module/Topic	Chapter	Events and Submissions/Topic
Exam Week - 10 Jun 2024		
Module/Topic	Chapter	Events and Submissions/Topic

Term Specific Information

Please note: Reattempts of assessment items are not permitted in this Unit.

Assessment Tasks

1 Oral Presentation

Assessment Type

Presentation

Task Description

Assessment One

Type: Oral presentation

Due date: Thursday 4th April (Week 5) 2355 AEST (Australia Eastern Standard Time)

Weighting: 50%

Length: 8-10 minutes

Unit Coordinators: Trish Johnson, Stephen Yu, and Lucinda Brown

Aim

This assessment aims to demonstrate critical thinking and clinical reasoning in the care of a person with an acute alteration in health presenting to the Emergency Department (ED). The information required to undertake this assessment is covered in Modules 1- 4.

Scenario Patient presentation to ED (Emergency Department) of Mrs Alison Smithson

Monday morning at 0930 hours

Mrs Alison Smithson is a 79-year-old female who lives alone in a small flat close to Caring Hospital, where you are currently working as a graduate nurse in the Emergency Department (ED). Alison was brought to the ED via ambulance following a fall at her home. The ambulance was contacted by the neighbour Bill, as he could not get Alison to answer the door.

The ambulance officers found Alison lying on the floor near the toilet, unable to move due to significant pain in her left hip and ribs. She seemed mildly dazed, had a small graze on her left forehead, and was noted to be incontinent of urine. Her observations at the scene indicated that she was tachypneic and hypothermic.

The ambulance officers insert a 16g Intravenous (IV) cannula and commence an IV infusion of Normal Saline (NS) 1 litre running at 82 mls/hour. They administered 2.5mg of IV morphine before transporting her to the hospital. She presents with a fractured left neck of femur (NOF) and possible fractured ribs, confusion, and a possible urinary tract infection. The ambulance officers inform you that the neighbour stated that Alison was normally fit and active, had no history of dementia, and was currently taking Metoprolol 50mg daily. She has no allergies, and her vaccinations are all up to date. Alison is divorced and lists her next of kin as her brother Luke who lives interstate. Based on the information provided, Allison was triaged as a category three before being moved to a cubicle for further assessment and management.

ED 1000 hours

The ED Registrar has reviewed Alison and ordered the following: Bloods for Full Blood Count (FBC), Urea and Electrolytes (U&Es), and Liver Function Tests (LFT). Bedside testing for lactate, venous blood gases, and Troponin, IV Paracetamol 1 gram, X-ray of Left hip, pelvis, and chest, and Computed Tomography (CT) head. She is to be seen by the orthopaedic team shortly for review.

Your buddy Registered Nurse (RN) Troy asks you to begin the further assessments required for Alison and informs you that he will be with you to assist once he finishes with another patient. You then introduce yourself to Alison and explain to her the nursing activities that you will be performing. You note that she seems slightly confused as to her surroundings. You undertake a set of observations and record the following: Respiratory rate (RR): 28 per minute, SpO₂: 93% on room air, Blood Pressure (BP):116/88mmHg, Pulse Rate (PR): 72 per minute and regular, Temperature: 35.9°C, Glasgow Coma Score (GCS): 14, Pain score, using numeric scale as 6/10, with complaints of pain on her left side in the lower thoracic area.

Shortly afterward, another RN Sabina arrives to assist you as Troy has been called away to see another patient. Sabina asks for a full handover as she has just come to help from another area and has no information regarding Alison's situation. Sabina is interested in educating and supporting new graduate nurses, so she also asks you to explain the rationale for the interventions that have been implemented so far.

Instructions

You will need to present an overview of a patient experiencing an acute alteration in health presenting to the ED and

provide a structured handover to the RN.

To do this, you are required to develop an 8-10-minute oral presentation using PowerPoint (PPT) slides to address the points below.

Your PowerPoint slides need to provide the main points only of your discussion, set out clearly and logically. That is, you will talk about your points and expand on them throughout your discussion.

Present your PPT verbally as a video presentation. Instructions for compiling and submitting your presentation are provided on the unit Moodle site under the Assessment Tile/Assessment One (1).

Slide Number	Slide Content	Slide Requirements
Slide 1	Assessment title, your name, and student ID	You are welcome to choose the design of your PowerPoint (PPT). However, your PPT must be presented at a professional standard and easy to read.
Slide 2 - (2 minutes)	ISBAR - Overview of Patient	From the information provided in the case scenario, present a structured overview of the patient presentation. Using the first three components of the ISBAR framework will help structure your discussion
Slides 3-4 - (2-3 minutes)	ISBAR - Assessment	Present in a structured format all the relevant assessment data and results from the investigations that have so far been undertaken on the patient. Provide comment on this data where appropriate, e.g., if findings are not within normal parameters.
Slides 5-6 - (4-5 minutes)	ISBAR - Recommendations	Briefly outline the interventions that have been made to date and provide the rationale for each intervention. Then, based on your assessment, recommend two (2) current, appropriate, prioritised, evidence-based nursing interventions for Alison, to be undertaken whilst she is in the ED. Also make one (1) current, appropriate, prioritised, evidence-based recommendation for a multidiscipline team to review Alison and provide the rationale for this request
Slide 7	References	You do not need to verbally present these; however, they must be present and able to be seen by the marker in your submission.

Literature and references

In this assessment use at least five contemporary references (<5 years) to support your discussion. All work should be in your own words. You may also use seminal scholarly literature where relevant. Suitable references include peer-reviewed journal articles as well as textbooks and credible websites. When sourcing information, consider the 5 elements of a quality reference: currency, authority, relevance, objectivity, and coverage. Information sourced from the internet must be from reputable websites such as from government, university, or peak national bodies: for example, the Australian College of Nursing.

Requirements

Use a conventional font such as Times New Roman or Arial and ensure that the font size is appropriate (legible and readable) on ppt slides.

You can present in the first-person perspective.

Use formal academic language.

Use the seventh edition American Psychological Association (APA) referencing style. The CQUniversity Academic Learning Centre has an online APA Referencing Style Guide.

Resources

You can use unit-provided materials and other credible sources (e.g., journal articles, and books) to reference your argument. The quality and credibility of your sources are important.
 We recommend that you access your discipline-specific library guide: the Nursing and Midwifery Guide;

Submission

Submit your assessment via the unit Moodle site as per instructions.

Marking Criteria

Refer to the marking rubric on the Moodle site for more details on how marks will be assigned.

Learning Outcomes Assessed

1. Explain the pathophysiological changes that occur when a person experiences acute alterations in health.
2. Apply the decision-making framework for the Nursing and Midwifery Board of Australia (NMBA) (2020) to prioritise and justify care for the person experiencing acute alterations in health.
3. Examine the role of the nurse and other members of the interdisciplinary team in the care of a person in a complex care environment.
4. Analyse and apply the best available evidence, for safe, quality practice for a person experiencing an acute alteration in health.

Assessment Due Date

Week 5 Thursday (4 Apr 2024) 11:55 pm AEST

Submit your assessment via the unit Moodle site

Return Date to Students

Week 7 Friday (26 Apr 2024)

Returned via Unit Moodle site

Weighting

50%

Assessment Criteria

UNIT CODE: NURS13141
ASSESSMENT 1 MARKING RUBRIC

Key Criteria	High Distinction 84.5 - 100%	Distinction 74.50 - 84.49%	Credit 64.50 - 74.49%	Pass 49.50 - 64.49%	Fail <49.5%

<p>Structure and Presentation (10%) 10 Marks</p>	<p>Excellent presentation that is reflective of the task requirements. Presented in a professional manner and the student appears professional. Excellent communication skills demonstrated with appropriate use of terminology. Consistently accurate spelling and grammar with no errors noted and is the student's own work.</p> <p>(8.5 - 10)</p>	<p>Very good presentation. Presented in a professional manner and the student appears professional. Very good communication skills demonstrated with appropriate use of terminology. The presentation had some inaccuracies with minor spelling and grammatical errors and is the student's own work.</p> <p>(7.5 - 8.4)</p>	<p>Good presentation. Presented mostly in a professional manner and the student appears mostly professional. Good communication skills were demonstrated, and terminology was mostly appropriate. The presentation had some inaccuracies with some spelling and grammatical errors and is the student's own work.</p> <p>(6.5 - 7.4)</p>	<p>Adequate presentation. Presented at times in a professional manner and an attempt was made to appear professional. Fair communication skills demonstrated with occasional appropriate use of terminology. The presentation had numerous inaccuracies and many spelling and grammatical errors and is the student's own work.</p> <p>(5 - 6.4)</p>	<p>Poorly presented or not presented at all. Minimal-no attempt made to appear professional, and delivery of presentation was poor to unprofessional. Poor communication skills with minimal use of appropriate terminology. The presentation had multiple inaccuracies and many spelling and grammatical errors and is not the student's own work.</p> <p>(<5)</p>
<p>Overview of the patient. ISBAR - Introduction, Situation and Background (25%) 25 Marks</p>	<p>Clear, relevant, accurate, and logical presentation in the student's own words. Included introduction, situation, and background of the patient. Marker is left with an excellent understanding of who the patient is and the situation and background of the patient.</p> <p>(21.7 - 25)</p>	<p>Mostly clear, relevant, accurate, and logical presentation in the student's own words, involving introduction, situation, and background of the patient. Marker is left with a very good understanding of who the patient is and of the situation and background of the patient.</p> <p>(18.7 - 21.6)</p>	<p>Reasonably clear, relevant, accurate, and logical presentation in the student's own words, involving introduction, situation, and background of the patient. Marker is left with a good understanding of who the patient is and the situation and background of the patient.</p> <p>(16.6 - 18.2)</p>	<p>Somewhat clear, relevant, accurate, and logical presentation in the student's own words, involving introduction, situation, and background of the patient. Marker is left with a fair understanding of who the patient is and the situation and background of the patient.</p> <p>(16.1 - 12.5)</p>	<p>Insufficient presentation and/or not in the student's own words, involving introduction, situation, and background of the patient. Marker is left with a poor/ no understanding of who the patient is and the situation and background of the patient.</p> <p>(<12.5)</p>

<p>ISBAR - Assessment (30%) 30 Marks</p>	<p>Excellent assessment overview. Comprehensively and clearly outlined in the student's own words. All relevant assessment data and results have been included. Statements are supported by valid and relevant research. Consistently insightful and accurate comments that are highly relevant and reflective of the data and results provided. The student demonstrates an excellent understanding of assessment data and results that are specific to the patient.</p> <p>(25.5 - 30)</p>	<p>Very good assessment overview. Clearly presented in the student's own words. All relevant assessment data and results have been included. Statements are supported by valid and relevant research. Comments are mostly insightful, and accurate and are predominantly relevant and reflective of the data and results provided. The student demonstrates a very good understanding of the assessment data and results that are specific to the patient.</p> <p>(22.4 - 25.4)</p>	<p>Good assessment overview. Well presented in the student's own words. Most of the relevant assessment data and results have been included. Statements are supported by valid and relevant research. Most comments are insightful and often include relevant assessment data and results provided, however, are not consistently accurate. The student demonstrates a good understanding of the assessment data and results that are specific to the patient.</p> <p>(19.5 - 22.3)</p>	<p>Acceptable assessment overview. Reasonably presented in the student's own words. Some of the relevant assessment data and results have been included. Statements are supported by valid and relevant research. Some comments are insightful with occasional inclusion of relevant data and results provided. Comments are occasionally accurate and relevant. The student demonstrates a reasonable understanding of the assessment data and results that are specific to the patient.</p> <p>(15 -19.4)</p>	<p>Poor to no presentation of assessment and/or is not in the student's own words. Minimal to no insightful comments regarding relevant assessment data and results provided. Statements are not supported by valid and relevant research. The student demonstrates poor to no understanding of the assessment data and results specific to the patient.</p> <p>(<15)</p>
---	--	---	---	---	--

<p>Recommendations (30%) 30 Marks</p>	<p>All interventions identified within the scenario are clearly outlined. An excellent rationale has been provided for all existing interventions and is supported by valid and relevant research. Two excellent additional nursing interventions and one excellent multidiscipline intervention are recommended, are appropriate, and are appropriately based on the outlined assessment findings. All recommended interventions demonstrate a comprehensive understanding of the patient's described deterioration. All interventions are supported by valid and relevant evidence.</p> <p>(25.5-30)</p>	<p>All interventions identified within the scenario are clearly outlined. A very good rationale has been provided for all existing interventions and is supported by valid and relevant research. Two very good nursing interventions and one very good multidiscipline intervention are recommended, are appropriate, and are based on the outlined assessment findings. All recommended interventions demonstrate a very good understanding of the patient's described deterioration. All interventions are supported by valid and relevant evidence.</p> <p>(22.4 - 25.4)</p>	<p>Most of the interventions identified within the scenario are outlined. A sound rationale has been provided for all existing interventions and is supported by valid and relevant research. Two good nursing interventions and one good multidiscipline intervention are recommended, are mostly appropriate, and are based on the outlined assessment findings. All recommended interventions demonstrate a good understanding of the patient's described deterioration. All interventions are supported by valid and relevant evidence.</p> <p>(19.5 - 22.3)</p>	<p>Some of the interventions identified within the scenario are outlined. A reasonable rationale has been provided for all existing interventions and is supported by valid and relevant research. Discussion on rationale is not consistently clear. Two fair nursing interventions and one fair multidiscipline intervention are recommended, are somewhat appropriate, and are based on the outlined assessment findings. One or more of the recommended interventions demonstrate an understanding of the patient's described deterioration. All interventions are supported by valid and relevant evidence.</p> <p>(15 - 19.4)</p>	<p>Minimal and/or no interventions have been identified. Those identified are poorly outlined with minimal to no rationale provided for existing interventions. Interventions are not supported by valid and relevant research. One or no additional interventions are recommended and are loosely or not appropriate or not based on the outlined assessment findings. None, or an inappropriate multidiscipline intervention has been outlined. Recommended interventions demonstrate a poor or inappropriate understanding of the patient's described deterioration. Interventions are minimally and/or not supported by current and relevant evidence.</p> <p>(<15)</p>
--	--	--	--	---	--

References (5%) 5 Marks	All sources are appropriately acknowledged, are valid and relevant, and meet the APA (7th Edition) referencing standards with no errors. The presentation is supported by 5 or more appropriate references. (4.4-5)	Sources are appropriately acknowledged, are valid and relevant, and meet the APA (7th Edition) referencing standards with 1-2 errors. The presentation is supported by at least 5 appropriate references. (3.8-4.3)	Sources are appropriately acknowledged, are valid and relevant, and meet the APA (7th Edition) referencing standards with 3-4 errors. Presentation supported by at least 4 appropriate references. (3.7 - 3.3)	Sources are appropriately acknowledged, are valid and relevant, and meet the APA (7th Edition) referencing standards with more than 4 errors. Presentation supported by 4 appropriate references. (3.2-2.5)	Sources are not appropriately acknowledged, and/or are not valid and/or are not relevant or are missing. Extensive errors in referencing. Presentation supported by less than 4 appropriate references. (<2.5)
--------------------------------------	--	--	---	--	---

Referencing Style

- [American Psychological Association 7th Edition \(APA 7th edition\)](#)

Submission

Online

Submission Instructions

Submit your assessment via the unit Moodle site following the instructions on the Unit Assessment tile under Assessment One (1)

Learning Outcomes Assessed

- Explain the pathophysiological changes that occur when a person experiences acute alterations in health.
- Apply the decision-making framework for nursing (NMBA 2020) to prioritise and justify care for the person experiencing acute alterations in health.
- Examine the role of the nurse and other members of the interdisciplinary team in the care of a person in a complex care environment.
- Analyse and apply the best available evidence, for safe, quality practice for a person experiencing an acute alteration in health.

2 Case study

Assessment Type

Case Study

Task Description

Assessment Two (2)

Type: Case Study

Due date: Thursday 23rd May (Week 11) 2355 AEST (Australian Eastern Standard Time)

Weighting: 50%

Length: 1200 words (+/- 10%)

Unit Coordinators: Trish Johnson, Stephen Yu, and Lucinda Brown

Aim

The aim of this assessment is for you to demonstrate your knowledge regarding the management of a person with an acute alteration in health.

Instructions:

Case Study - Mrs Alison Smithson

Time and Location: 0720, Orthopaedic Ward

You are a graduate RN assigned to the care of Mrs Alison Smithson. The night duty nurse gives you the following ISBAR handover at the bedside.

Identity: This is Mrs Alison Smithson, a 79-year-old lady who identifies as female and uses she/her pronouns. Her UR number is 123456 and her Date of Birth is 01/01/1945.

Situation: Alison was admitted to the Orthopaedic ward at 2200 hours yesterday for routine post-operative

management of an open reduction and internal fixation of a fractured left neck of femur (NOF), following a fall at home. She also has fractured the third and fourth ribs on her left side. She is currently in a stable condition but due to her age and surgery, she may be at risk of deterioration.

Background: Alison lives at home alone. She was brought into the Emergency Department by ambulance and pre-operation it was noted that she had mild confusion with a Glasgow Coma Score of 14. She had been incontinent of urine post-fall and had a small graze on her left forehead. She has a history of hypertension which is managed by medication. Alison has a drain in her left leg, and she has an indwelling catheter (IDC) in situ which is on free drainage. She has a 14g Intravenous cannula in her Right antecubital fossa (ACF) which has Sodium Chloride 0.9% running 12th hourly. She has a Patient Controlled Analgesia (PCA) prescribed for pain relief. Alison is tolerating oral fluids and can commence a light diet today. Alison currently has knee-high Thrombo-Embolic Deterrent (TED) stockings on both legs.

Assessment: Alison has been stable and comfortable overnight, all observations are within normal limits, and her Glasgow Coma Score (GCS) is 15. Alison's wound is clean and dry, and her drain tube drained a small amount of frank blood overnight.

Recommendations: Alison will be reviewed by the physiotherapist this morning and until then will be strict rest in bed. She will need daily enoxaparin, and will be reviewed by the surgical team this afternoon.

0800: You introduce yourself to Alison and discuss with her the nursing care needed this morning. While you are waiting for assistance from another RN with her bed bath, you observe that her facial colour has changed from pink to grey. Alison clutches her chest and says, "I suddenly feel terrible".

Instructions: (1200 words + 10%)

Please outline four (4) prioritised and appropriate nursing actions (250 words per action) and one (1) Multi-Disciplinary Team action (200 words) in the care of Alison in managing this sudden deterioration in health. Include the rationale and evidence for each action. Use the headings **Nursing Action** or (Multidiscipline Action); **Rational** and **Evidence** under each action point

Literature and references

In this assessment use at least 7 contemporary references (<5 years journal articles and <7 years for books) to support your discussion. References must be valid and relevant. You may also use seminal scholarly literature where relevant. Suitable references include peer-reviewed journal articles as well as textbooks and credible websites.

When sourcing information, consider the 5 elements of a quality reference: currency, authority, relevance, objectivity, and coverage. Grey literature sourced from the internet must be from reputable websites such as from government, university, or peak national bodies: for example, the Australian College of Nursing. Please note that websites such as Stat Pearls, Life in the Fastlane, and Wikipedia are generally not suitable for this assessment task. Lecture notes are not primary sources of evidence and should not be used in this assessment.

Requirements

Use a conventional and legible size 12 font, such as Times New Roman or Arial, with double line spacing and 2.54cm page margins (standard pre-set margin in Microsoft Word).

Write in the third-person perspective.

Use formal academic language.

Use the seventh edition American Psychological Association (APA) referencing style. The CQUniversity Academic Learning Centre has an online APA Referencing Style Guide.

The word count excludes the reference list but includes in-text references and direct quotations.

Resources

You can use unit-provided materials and other credible sources (e.g., journal articles, and books) to reference your argument. The quality and credibility of your sources are important.

We recommend that you access your discipline-specific library guide: the Nursing and Midwifery Guide;

Submit a draft before the due date to review your Turnitin Similarity Score before making a final submission. Instructions are available here.

Submission

Submit your assessment via the unit Moodle site in **Word format only**.

Marking Criteria

Refer to the marking rubric on the Moodle site for more details on how marks will be assigned.

Learning Outcomes Assessed

1. Explain the pathophysiological changes that occur when a person experiences acute alterations in health.
2. Apply the decision-making framework for nursing (Nursing Midwifery Board Australia (NMBA) 2020) to prioritise and justify care for the person experiencing acute alterations in health.
3. Examine the role of the nurse and other members of the interdisciplinary team in the care of a person in a complex care environment.
4. Analyse and apply the best available evidence for safe quality practice for a person experiencing an acute alteration in health.

Assessment Due Date

Week 11 Thursday (23 May 2024) 11:55 pm AEST

Submit via Unit Moodle site

Return Date to Students

Exam Week Friday (14 June 2024)

Returned via Moodle site

Weighting

50%

Assessment Criteria

Key Criteria	High Distinction 84.50 - 100%	Distinction 74.50 - 84.49%	Credit 64.50 - 74.49%	Pass 49.50 - 64.49%	Fail <49.5%
Structure and Presentation (5%) 5 Marks	Excellent presentation and meets all requirements listed in the instruction sheet. Consistently accurate spelling and grammar. Consistently accurate and appropriate attribution of insights and is the student's own work. (4.4-5.00)	Well-presented and meets all requirements listed in the instruction sheet. Generally accurate with minor spelling and grammatical errors. Generally accurate and appropriate attribution of insights and is the student's own work. (3.8-4.3)	Well-presented and mostly meets all requirements listed in the instruction sheet. Mostly accurate with some spelling and grammatical errors. Mostly accurate and appropriate attribution of insights and is the student's own work. (3.7 - 3.3)	Adequate presentation and meets some of the requirements listed in the instruction sheet. Some spelling and grammatical errors. Some attribution of insights and is the student's own work. (2.5-3.2)	Poorly presented and meets very few or none of the requirements listed in the instruction sheet. Multiple spelling and grammatical errors. No attribution of insights and/or is not the student's own work. (<2.5)
Nursing Action 1 (20%) 20 Marks	Nursing action is clearly articulated, appropriate, and relevant. Excellent rationale provided that is consistently supported by valid and relevant research and is in the student's own words. (17-20.00)	Nursing action is clearly outlined, appropriate, and relevant. A very good rationale is provided that is mostly supported by valid and relevant research and is in the student's own words. (15-16.9)	Nursing action is clear, appropriate, and relevant. A sound rationale is provided that is often supported by valid and relevant research and is the student's own words. (13-14.9)	Nursing action is somewhat clear, appropriate, and relevant. A satisfactory rationale has been provided that is occasionally supported by valid and relevant research and is in the student's own words. (10-12.9)	Nursing action is not clear, appropriate, and/or relevant. Minimal to no rationale provided with minimal to no valid and reliable research and/or is not in the student's own words. (<10)

<p>Nursing Action Two (2) (20%) 20 Marks</p>	<p>Nursing action is clearly articulated, appropriate, and relevant. Excellent rationale provided that is consistently supported by valid and relevant research and is in the student's own words. (17-20.00)</p>	<p>Nursing action is clearly outlined, appropriate, and relevant. A very good rationale is provided that is mostly supported by valid and relevant research and is in the student's own words. (15-16.9)</p>	<p>Nursing action is clear, appropriate, and relevant. A sound rationale is provided that is often supported by valid and relevant research and is the student's own words. (13-14.9)</p>	<p>Nursing action is somewhat clear, appropriate, and relevant. A satisfactory rationale has been provided that is occasionally supported by valid and relevant research and is in the student's own words. (10-12.9)</p>	<p>Nursing action is not clear, appropriate, and/or relevant. Minimal to no rationale provided with minimal to no valid and reliable research and/or is not in the student's own words. (<10)</p>
<p>Nursing Action Three (3) (20%) 20 Marks</p>	<p>Nursing action is clearly articulated, appropriate, and relevant. Excellent rationale provided that is consistently supported by valid and relevant research and is in the student's own words. (17-20.00)</p>	<p>Nursing action is clearly outlined, appropriate, and relevant. A very good rationale is provided that is mostly supported by valid and relevant research and is in the student's own words. (15-16.9)</p>	<p>Nursing action is clear, appropriate, and relevant. A sound rationale is provided that is often supported by valid and relevant research and is the student's own words. (13-14.9)</p>	<p>Nursing action is somewhat clear, appropriate, and relevant. A satisfactory rationale has been provided that is occasionally supported by valid and relevant research and is in the student's own words. (10-12.9)</p>	<p>Nursing action is not clear, appropriate, and/or relevant. Minimal to no rationale provided with minimal to no valid and reliable research and/or is not in the student's own words. (<10)</p>
<p>Nursing Action Four (4) (20%) 20 Marks</p>	<p>Nursing action is clearly articulated, appropriate, and relevant. Excellent rationale provided that is consistently supported by valid and relevant research and is in the student's own words. (17-20.00)</p>	<p>Nursing action is clearly outlined, appropriate, and relevant. A very good rationale is provided that is mostly supported by valid and relevant research and is in the student's own words. (15-16.9)</p>	<p>Nursing action is clear, appropriate, and relevant. A sound rationale is provided that is often supported by valid and relevant research and is the student's own words. (13-14.9)</p>	<p>Nursing action is somewhat clear, appropriate, and relevant. A satisfactory rationale has been provided that is occasionally supported by valid and relevant research and is in the student's own words. (10-12.9)</p>	<p>Nursing action is not clear, appropriate, and/or relevant. Minimal to no rationale provided with minimal to no valid and reliable research and/or is not in the student's own words. (<10)</p>

<p>Multidisciplinary Action Five (5) (10%) 10 Marks</p>	<p>Multidisciplinary team action is clearly articulated, appropriate, and relevant. Excellent rationale has been provided that is consistently supported by valid and relevant research and is in the student's own words. (8.5-10)</p>	<p>Multidisciplinary team action is clear, appropriate, and relevant. A very good rationale has been provided that is mostly supported by valid and relevant research and is in the student's own words. (7.5-8.4)</p>	<p>Multidisciplinary team action is clear, appropriate, and relevant. A good rationale has been provided that is often supported by valid and relevant research and is in the student's own words. (6.5-7.4)</p>	<p>Multidisciplinary team action is clear, somewhat appropriate, and relevant. A satisfactory rationale has been provided that is occasionally supported by valid and relevant evidence and is in the student's own words. (5-6.4)</p>	<p>Multidisciplinary team action is not appropriate, and/or relevant, and/or is not related to the multidisciplinary team. Minimal to no rationale provided with minimal to no supporting evidence. Discussion is not supported by valid and relevant evidence and/or is not in the student's own words. (<5)</p>
<p>References (5%) 5 Marks</p>	<p>All sources are appropriately acknowledged, are valid and relevant, and meet the APA (7th Edition) referencing standards with no errors. The presentation is supported by 7 or more appropriate references. (4.4-5.00)</p>	<p>Sources are appropriately acknowledged, are valid and relevant, and meet the APA (7th Edition) referencing standards with 1-2 errors. The presentation is supported by 7 or more appropriate references. (3.8-4.3)</p>	<p>Sources are appropriately acknowledged, are valid and relevant, and meet the APA (7th Edition) referencing standards with 3-4 errors. The presentation is supported by 6 appropriate references. (3.7 - 3.3)</p>	<p>Sources are appropriately acknowledged, are valid and relevant, and meet the APA (7th Edition) referencing standards with more than 4 errors. The presentation is supported by 5-6 appropriate references. (3.2-2.5)</p>	<p>Sources are not appropriately acknowledged, and/or are not valid and/or are not relevant or are missing. Extensive errors in referencing. The presentation is supported by less than 5 appropriate references. (<2.5)</p>

Referencing Style

- [American Psychological Association 7th Edition \(APA 7th edition\)](#)

Submission

Online

Submission Instructions

Submit via Moodle site

Learning Outcomes Assessed

- Explain the pathophysiological changes that occur when a person experiences acute alterations in health.
- Apply the decision-making framework for nursing (NMBA 2020) to prioritise and justify care for the person experiencing acute alterations in health.
- Examine the role of the nurse and other members of the interdisciplinary team in the care of a person in a complex care environment.
- Analyse and apply the best available evidence, for safe, quality practice for a person experiencing an acute alteration in health.

Academic Integrity Statement

As a CQUniversity student you are expected to act honestly in all aspects of your academic work.

Any assessable work undertaken or submitted for review or assessment must be your own work. Assessable work is any type of work you do to meet the assessment requirements in the unit, including draft work submitted for review and feedback and final work to be assessed.

When you use the ideas, words or data of others in your assessment, you must thoroughly and clearly acknowledge the source of this information by using the correct referencing style for your unit. Using others' work without proper acknowledgement may be considered a form of intellectual dishonesty.

Participating honestly, respectfully, responsibly, and fairly in your university study ensures the CQUniversity qualification you earn will be valued as a true indication of your individual academic achievement and will continue to receive the respect and recognition it deserves.

As a student, you are responsible for reading and following CQUniversity's policies, including the [Student Academic Integrity Policy and Procedure](#). This policy sets out CQUniversity's expectations of you to act with integrity, examples of academic integrity breaches to avoid, the processes used to address alleged breaches of academic integrity, and potential penalties.

What is a breach of academic integrity?

A breach of academic integrity includes but is not limited to plagiarism, self-plagiarism, collusion, cheating, contract cheating, and academic misconduct. The Student Academic Integrity Policy and Procedure defines what these terms mean and gives examples.

Why is academic integrity important?

A breach of academic integrity may result in one or more penalties, including suspension or even expulsion from the University. It can also have negative implications for student visas and future enrolment at CQUniversity or elsewhere. Students who engage in contract cheating also risk being blackmailed by contract cheating services.

Where can I get assistance?

For academic advice and guidance, the [Academic Learning Centre \(ALC\)](#) can support you in becoming confident in completing assessments with integrity and of high standard.

What can you do to act with integrity?



Be Honest

If your assessment task is done by someone else, it would be dishonest of you to claim it as your own



Seek Help

If you are not sure about how to cite or reference in essays, reports etc, then seek help from your lecturer, the library or the Academic Learning Centre (ALC)



Produce Original Work

Originality comes from your ability to read widely, think critically, and apply your gained knowledge to address a question or problem