

Module profile: VRP214 & VRP224(2011)

1. Module detail	
1.1 Module code	VRP214 & VRP224
1.2 Module title	Nursing Practical
1.3 Brief description of module content	Primary Health Care: IMCI, Tuberculosis, Immunity, Anaemia, Airflow Limitation, Leukemia, Gastro-intestinal problems, Reproductive Health, Musculoskeletal, Ophthalmology, Hypertension, Endocrinology
1.4 Module Convenor	Lynette van Dyk
1.4.1 Years involved with SL or other forms of CBE	8
1.4.2 Completed HOS717	Yes
1.5 Other UFS staff members involved	Julie McKenzie
1.6 UFS peer support person.	
1.7 Faculty	08
1.8 School	071
1.9 Academic host programme	Second Year Nursing
1.10 Main department involved	School of Nursing
1.11 Additional departments involved	
1.12 Study year of students	2nd Year
1.13 NQF level of the module	6
1.14 Number of credits for the module	16
1.15 Module offered during	2nd Semester
1.16 The module was offered for the first time in	0
1.17 The module was adapted to include a SL component in	2006
1.18 Module type	Core
1.19 Key words	Persons with Disabilities Education & Training Health HIV & Aids

2. Student Information

2.1 Student enrolments and performance

Enrolments	VRP214: 51 VRP224: 49
Drop out	
Pass	
Pass with distinction	
Fail	
Incomplete	

2.2 Student profile: Gender and race

Male
Female

Race

Black	VRP214: 25 VRP224: 24
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White	VRP214: 18 VRP224: 17
Asian	VRP214: 0 VRP224: 0
Coloured	VRP214: 2 VRP224: 2

2.3 Student profile: Language of instruction

Afrikaans	VRP214: 17 VRP224: 16
English	VRP214: 34 VRP224: 33

2.4 Student profile: Home language

Afrikaans
 English
 Ndebele
 Xhosa
 Zulu
 Sotho
 Tswana
 Swati
 Venda
 Other
 Unknown

3. Partners and Sites

3.1 Partner(s) in the community

- Department of Health in the Free State
- Mangaung Community
- Primary Health Care Clinics

3.2 Partner(s) in the service sector

3.3 SL site(s)

3.3.1 Key engagement sites	Number of students
3.3.2 Other sites	Number of students

3.4 Site visits

3.4.1 Venue(s)	MUCPP Primary Health Care Clinics Old-Age Homes: <ul style="list-style-type: none"> • Mooihawe • Ons Tuiste • Fichardtpark 		
3.4.2 Number of active SL hours spent in the community per student	3.4.3 Number of students	Total number of hours	Total number of student visits
208	N.a	N.a	26

4. Module Outcomes

4.1 Student learning outcomes

4.1.1 Specific module outcomes

Exit Level 1:

- Collect, analyse and interpret data, formulate a nursing diagnosis, as well as implement and evaluate a nursing care plan.
- Communicate effectively.
- Solve problems within context through critical thinking, questioning assumptions, and searching for solutions.
- Pose long-term and short-term objectives, prioritise them, as well as plan how to achieve them.
- Implement nursing care in co-operation with a multi-disciplinary team and the patient.
- Monitor the patient's progress, as well as modify interventions so that optimal quality nursing care may be rendered.
- Utilise technology effectively.

Exit Level 2:

- Keep accurate records of assessments, planning, implementation and evaluation of nursing care so that quality care may be promoted

Exit Level 3:

- Respond appropriately to emergency situations.

Exit Level 4:

- Identify research areas, in collaboration with other persons; launch a research study, and utilize the findings meaningfully.

Exit Level 5:

- Utilise community services effectively and make a cost estimate of care rendered.

Exit Level 6:

- Form partnerships with one another, patients and other health-care workers, and maintain these relationships, as well as take a leadership role.

Exit Level 7:

- Take responsibility for, and be accountable for own actions.

Exit Level 8:

- Identify and exploit opportunities for learning.

Exit Level 9:

- Act as an advocate for the patient and protect his/her human rights (patient rights).

Exit Level 10:

- Evaluate working conditions on the basis of legal guide-lines.

4.1.2 Generic (critical cross-field) outcomes

N.a.

4.1.3 Service-learning activities of students (in the community)

COMMUNITY TEACHING AID

This project offers you the opportunity to prove that you have mastered various core competencies, namely, that you are able to:

- assess a patient, plan and change nursing care as required by the patient's circumstances;
- keep accurate records in terms of legal requirements;
- work together in a team;
- communicate effectively;

- utilise technology effectively;
- make effective estimates and work economically;
- solve problems and think critically;
- communicate effectively by presenting the teaching aid to others.

This project may be completed in the first semester but the partnership mark will be used in the calculation of the VRP224 semester mark in the second semester. The assessors will be domain experts.

The assessment took place on Wednesday 25 August 2010. The typed document as well as a list of equipment, e.g. data projector etc. needed for your presentation must be handed in to the course coordinator on 10 August 2010.

NB! It must be a complete summary of your community teaching aid (see step six) and must include the bibliography. If not, you will lose certain marks. More information about the venue and time will be provided nearer the date. Consult Kozier *et al.* 1998: Chapter 19 (Teaching and learning).

- **STEP 1:** Since a partnership mark will be calculated you must form a heterogenic (Multi-cultural, Afrikaans and English) group. Groups must consist of three to eight members and you may form your own. If the group is not heterogenic, you will lose 10% of your total group mark.
- **STEP 2:** The group, in collaboration with their facilitator, identify a subject about which a teaching aid can be developed. IT MUST NOT BE A POSTER.
- **STEP 3:** A clear teaching objective must be formulated. In other words, you must determine what the patient/learner must be able to do after being taught. See Kozier *et al.* 1998: Chapter 19.
- **STEP 4:** After the teaching objective has been set the information to be given to the person must be formulated. References that have been consulted must be correctly used and referred to.
- **STEP 5:** Decide on the best way of putting across the information to the other person and how to test his/her knowledge/skill. The community teaching aid is developed after this decision has been taken. It must be unique and workable in clinical practice.
- **STEP 6:** Compile a typed document consisting of the following:
 - Topic
 - Group members and student numbers
 - Underline presenter(s)
 - Teaching objective
 - Factually correct information that will be given to patient
 - Teaching method (indicate resources needed e.g. data-, slide- or overhead projector)
 - Bibliography (consult at least two sources)
 - A completed assessment instrument community teaching aid (included in the module guide).
- **STEP 7:** Evaluate the group dynamics according to Annexure B2 included in the module guide and hand the evaluation in just after the group has presented.
- **STEP 8:** Hand in the final complete project to the assessors just before the group presentation.
- **STEP 9:** Present the community teaching aid to your colleagues, invited guests and assessors and earn an excellent mark. A partnership mark will be calculated per individual and used in the calculation of the VRP224 module mark.

4.1.4 Description of student reflection

The students develop excellent community teaching aids. They enjoy the community service learning projects. They experience the importance of their contribution.

4.2 Community outcomes

4.2.1 Service outcomes for the community

Community Teaching Aid Tool Presentation IN THE COMMUNITY:

Group Leader selects a suitable date AND time of presentation. The group leader does the final arrangements with the contact person in the community. The presentation to the community will then be done by the group in the community. The final arrangements are discussed with one of the clinical facilitators to join the group in the community for this presentation. Surnames of students who will do the official presentation are documented. Recordkeeping of this effort is important. Only if the group presentation took place the official mark (obtained during the presentation in August) can be awarded to the group. Each student then receives an official mark for the community service learning project as part of the VRP224 module mark.

4.2.2 Tangible community benefits of the SL module

- IMCI counselling.
- Community teaching tool to solve health care problems.

4.2.3 Community development priority to be addressed through the service

Solve health care problems in a specific community.

4.2.4 The service needs of the community were identified in the following way

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- make effective estimates and work economically;
- solve problems and think critically;
- communicate effectively by presenting the teaching aid to others.

This project may be completed in the first semester but the partnership mark will be used in the calculation of the VRP224 semester mark in the second semester. The assessors will be domain experts and assessment will take place on Wednesday 25 August 2010. The typed document as well as a list of equipment, e.g. data projector, etc., needed for your presentation must be handed in to the course coordinator on 10 August 2010.

NB! It must be a complete summary of your community teaching aid (see step six) and must include the bibliography. If not, you will lose certain marks. More information about the venue and time will be provided nearer the date. Consult Kozier *et al.* 1998: Chapter 19 (Teaching and learning).

- **STEP 1:** Since a partnership mark will be calculated you must form a heterogenic (Multi-cultural, Afr. and Eng.) group. Groups must consist of three to eight members and you may form your own. If the group is not heterogenic, you will lose 10% of your total group mark.
- **STEP 2:** The group, in collaboration with their facilitator, identify a subject about which a teaching aid can be developed. IT MUST NOT BE A POSTER.
- **STEP 3:** A clear teaching objective must be formulated. In other words you must determine what the patient/learner must be able to do after being taught. See Kozier *et al.* 1998: Chapter 19.
- **STEP 4:** After the teaching objective has been set the information to be given to the person must be formulated. References that have been consulted must be correctly used and referred to. See Annexure A2 (module guide) Step 15 for the criteria for references.
- **STEP 5:** Decide on the best way of putting across the information to the other person and how to test his/her knowledge/skill. The teaching aid is developed after this decision has been taken. It must be unique and workable in clinical practice.
- **STEP 6:** Compile a typed document consisting of the following:
 - Topic
 - Group members and student numbers.
 - Underline presenter(s)
 - Teaching objective
 - Factually correct information that will be given to patient
 - Teaching method (indicate resources needed e.g. data-, slide- or overhead projector)
 - Bibliography (consult at least two sources)
 - A completed assessment instrument patient teaching aid (see next page).
- **STEP 7:** Evaluate the group dynamics according to Annexure B2 (module guide) and hand the evaluation in just after the group has presented.
- **STEP 8:** Hand in the final complete project to the assessors just before the group presentation.
- **STEP 9:** Present the teaching aid to your colleagues, invited guests and assessors and earn an excellent mark. A partnership mark will be calculated per individual and used in the calculation of the VRP224 module mark.

4.2.5 Community resources to be utilised

Same as 4.2.4.

4.3 Service sector outcomes

4.3.1 The service sector will benefit from the module in the following way

IMCI counselling community teaching tool to be used for patient/client education concerning a specific health care need.

4.3.2 These outcomes for the service sector were identified in the following way

Health care needs for the specific community.

4.3.3 Service sector resources to be utilised

Teaching Aid Tool Presentation: Documentation of Proof. Proof that the student's took part in the presentation in the Community.

The following questions are asked as proof.

IN THE COMMUNITY

Group Leader; Date AND Time of Presentation; Date for final arrangements with Contact person in the community; Where in the Community; Surnames of students who will do the official presentation.

Second Year Group Members presented the Community Teaching Aid tool: Name and Surname; Student Number; Community Teaching Aid; Tool Presented: Date of presentation; Time of presentation; Address of presentation: Facility; Who attended the presentation; Representative of the Health Care Facility, Clinic, School or MUCPP; Name and Surname; Contact Number; Signature; General comments from the Health Care Facility, Clinic, School or MUCPP; Thank you for your time and efforts!!

6. Financial Implications

6.1 Cost implications

Books and stationery (1521)	R 1161.80
Books and stationery (1521)	R 2.28
Books and stationery (1521)	R 1586.92
Gifts and mementos (1574)	R 259.89
Groceries consumed (1694)	R 0.32
Internal conference/course expenses (2061)	R 2743.34
Internal conference/course expenses (2061)	R 210.00
Receptions, refreshments & meals (1571)	R 3305.36
Salaries (0544)	R 2053.86
Salaries (0544)	R 2751.57
Salaries: claims basis (0508)	R 2015.10
Telephone calls (1803)	R 1375.00
Travelling expenses: car rental (1553)	R 314.84
Travelling expenses: petrol (1721)	R 120.00