

Work Placement in the Elderly and Health

Code: 106138
ECTS Credits: 12

| Degree | Type | Year | Semester |
|-----------------|------|------|----------|
| 2500891 Nursing | OT | 4 | A |

Contact

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Teaching groups languages

You can check it through this [link](#). To consult the language you will need to enter the CODE of the subject. Please note that this information is provisional until 30 November 2023.

Prerequisites

PREREQUISITES

They will be able to do the practical Training:

Students who have attended the risk prevention classes and passed the assessment test on risk prevention before the start of the first practicum.

Students who have attended second year laboratory practice classes. (Check calendar)

Students who have attended the visits planned for the evaluation and update of the vaccination card and the tuberculin screening, carried out by the Preventive Medicine and Epidemiology service of Vall d'Hebron Hospital, before taking the first practical subject. (Consult calendar)

Students who have the personal identification card issued by the Academic Management service of the Vall d'Hebron Teaching Unit, North Module.

The knowledge required to follow the subject correctly is that of the subjects studied in the first and second year.

It is also recommended to have passed "Nursing care in the aging process"

In this sense, the student who registers for this subject must apply the contents of the "Recommendations of

conduct for students of the Faculty of Medicine" document and must maintain the "Confidentiality Commitment". Both documents are available through the following link: www.uab.cat/medicina in the Degrees section: Nursing; Practicum

Objectives and Contextualisation

TARGETS

In these practices, the basis of the activities to be developed to provide comprehensive nursing care to the elderly must include the participation of the caring environment

As well as the function and activities that the professional develops both in the primary health care team and in social-health and residential centers.

Consider the participation of the elderly person and their family in their health-illness process.

It is necessary to identify the factors related to health and the problems of the environment in order to attend to elderly people in health-disease situations as a group that is part of a community.

Both the internal and external factors that intervene in the health level of the elderly must be kept in mind.

The practice activity is basically for the nursing degree student to achieve the specific skills as a health professional. Therefore, in clinical practices, nursing students have the opportunity to develop knowledge, skills, attitudes and values in a real professional environment.

Along the practical path, the student, accompanied by a professional (tutor), will achieve the ability to integrate their knowledge, attitudes, skills and values of nursing in a caring environment. On the other hand, the practices must allow the application of the theoretical knowledge acquired from the reflection and the application of the skills in a real environment of initiation and bearing in mind the

professional development based on the application of evidence and research.

For this reason, learning in clinical practices must bear in mind the following principles:

- A greater relationship and communication between the student and the internship tutor.
- A negotiation and/or argumentation of the specific objectives of the internship site.
- That the evaluation is significant and continuous for the student and allows reflection on one's own practice and managing its progress.
- That the interventions along the practical route that are carried out must be supervised and bearing in mind the ethical and legal aspects regarding the care of people, guaranteeing at all times the safety of people, with respect to intimacy and privacy

1-Use methods and procedures necessary to identify the most relevant health problems among the elderly.

2-Identify the statistical data that refer to population studies, identifying the possible causes of the health problems of the elderly.

3-Promote and prevent health in the elderly group.

- 4-Identify the changes associated with the aging process and their impact on health.
- 5-Identify the most prevalent geriatric syndromes in the elderly.
- 6-Carry out interventions aimed at treating and preventing health problems and their adaptation to daily life through proximity resources and support for the elderly person.
- 7-Specific care in the care of chronic wounds, which due to their prevalence are Dependency-Related Lesions (LRCD) and venous and/or arterial vascular ulcers with this population group.
- 8-Palliative care and pain control that improve the situation in patients with advanced and terminal illnesses.

Competences

- "Demonstrate an understanding of people without prejudice: consider physical, psychological and social aspects, as independent individuals; ensure that their opinions, values and beliefs are respected and guarantee their right to privacy, through trust and professional secrecy."
- Base nursing interventions on scientific evidence and the available media.
- Offer technical and professional health care and that this adequate for the health needs of the person being attended, in accordance with the current state of scientific knowledge at any time and levels of quality and safety established under the applicable legal and deontological rules.
- Plan and carry out nursing care aimed at people, families and groups orientated to health results and evaluate the impact of them using clinical and care practice guides describing the processes for the diagnosis, treatment or cure of a health problem.
- Protect the health and welfare of people or groups attended guaranteeing their safety.
- Students must be capable of applying their knowledge to their work or vocation in a professional way and they should have building arguments and problem resolution skills within their area of study.
- Students must be capable of communicating information, ideas, problems and solutions to both specialised and non-specialised audiences.
- Students must develop the necessary learning skills to undertake further training with a high degree of autonomy.
- Take sex- or gender-based inequalities into consideration when operating within one's own area of knowledge.

Learning Outcomes

1. Analyse differences by sex and gender inequality in ethiology, anatomy, physiology. Pathologies, differential diagnosis, therapeutic options, pharmacological response, prognosis and nursing care.
2. Analyse nursing interventions justifying them with scientific evidence and/or expert opinions that support them.
3. Apply scientific evidence in the planning and practice of nursing care.
4. Apply the nursing process to offer and guarantee the wellbeing, quality and safety of the people receiving the care.
5. Comprehensively assess health situations using tools such as physical examination, laboratory tests and nursing interview.
6. Demonstrate skill in performing nursing procedures and techniques.
7. Evaluate risks and protect the health of people ensuring their safety.
8. Exercise a respectful relationship with the user of the service/family/health team without making value judgements.
9. Give integrated and individualised nursing care to individuals, families and communities, evaluating the results obtained.
10. Identify the guides for clinical practice specific to each stage of the life cycle.
11. Periodically evaluate health situations and the nursing interventions that take place.
12. Plan individualised nursing care adapted to each situation of clinical practice.
13. Put into care practice the knowledge and skills acquired.
14. Recognise situations of risk to life.

15. Students must be capable of applying their knowledge to their work or vocation in a professional way and they should have building arguments and problem resolution skills within their area of study.
16. Students must be capable of communicating information, ideas, problems and solutions to both specialised and non-specialised audiences.
17. Students must develop the necessary learning skills to undertake further training with a high degree of autonomy.

Content

CONTENTS

The nursing models applied to the care of the elderly population.

Ethical and methodological bases for nurses.

The ethical code, the rights and duties of the user within the framework of the care system.

The application of the teaching-learning process when nursing care is offered to elderly people.

Nursing care plan.

The continuous improvement of the quality of nursing care.

Clinical practice guidelines, protocols and evidence-informed practice.

Healthy eating and therapeutic diets for people treated.

Prevention of cardiovascular risk.

Factors that influence the learning processes of the people served, educational needs, learning objectives, educational strategies and expected results.

Pharmacokinetics and pharmacodynamics of the most common drugs in Primary Care.

Support and management of care in end-of-life situations

Comprehensive geriatric assessment (VGI)

Therapeutic communication.

Conflict management.

Risk management for the safety of the person served.

Treatment of chronic and acute wounds

Methodology

METHODOLOGY

Clinical practices

Constant in a stay in hospitalization services, socio-health care and/or geriatric residences suitable to the needs of training and during which each student will be assigned a nurse from the unit where they carry out their practices who oversees and guides their process of individualized and continuous learning.

The shifts and timetables will depend on the needs of the services, in principle eight hours in the morning or afternoon from Monday to Friday.

Note: 15 minutes of a class will be set aside, within the schedule established by the center/degree, for students to fill in surveys to evaluate the performance of the teaching staff and to evaluate the subject/module.

Annotation: Within the schedule set by the centre or degree programme, 15 minutes of one class will be reserved for students to evaluate their lecturers and their courses or modules through questionnaires.

Activities

| Title | Hours | ECTS | Learning Outcomes |
|---------------------------|-------|------|---|
| Type: Supervised | | | |
| PRACTICUM WITH GUIDELINES | 300 | 12 | 1, 2, 13, 4, 3, 8, 11, 6, 10, 12, 9, 17, 16, 15, 14, 5, 7 |

Assessment

This subject does not provide the single assessment system

EVALUATION

The evaluation of the practicum will be carried out with the following activities:

1. Evaluation of clinical practice. 60% of the final mark. This activity is evaluated by the nurse tutor who is in charge of the student throughout the learning process.
2. Reflective notebooks with 3 clinical cases. 40% of the final mark. This activity is evaluated by the practicum coordinator. It is a collection of experiences lived during the internship and their critical reflection on it. Detailed instructions will be provided at the beginning of the practicum.

It is mandatory to carry out the entire period of clinical practice scheduled in the teaching calendar, regardless of the time in which the practices take place.

It is considered a justified fault that occurs in the following situations:

- Deaths of first and second degree relatives
- Scheduled medical visit
- Acute diseases
- Official university exams
- Official language tests

In all cases, the corresponding proof is mandatory. The hours must be recovered. For each unexcused absence, 0.5 points will be deducted from the final grade (from 0 to 10).

Obtaining the final grade:

The requirement for obtaining the final grade is to have carried out all the practicals and to have obtained a minimum of 5 in all assessment activities (clinical practicals and reflective journals). Without a minimum of 5 in all assessment activities it will not be possible to achieve the final mark of the subject.

1. It is considered non-evaluable when the student has missed the scheduled practical sessions.
2. The final grade will be the sum of the different parts that make up the practice. The final qualification according to agreement 4.4 of the Governing Council 17/11/2010 of the evaluation regulations, the qualifications will be:
0- 4.9 = Fail
5- 6.9 = Pass
7- 8.9 = Notable
9- 9.5 = Excellent
9.6-10 = Honor Roll.
4. The student has the right to review the evaluations. For this purpose, the date will be determined on the virtual campus.
5. The evaluation of special and particular situations will be evaluated by a committee set up for that purpose.
6. Times and locations may be subject to last minute change with no transfer option.
7. Travel expenses are the responsibility of each student

Assessment Activities

| Title | Weighting | Hours | ECTS | Learning Outcomes |
|---|-----------|-------|------|---|
| Evaluation during nursing training at the care center | 60 | 0 | 0 | 1, 2, 13, 4, 3, 8, 11, 6, 10, 12, 9, 17, 16, 15, 14, 5, 7 |
| Submission of reports / Written assignments (reflective journals) | 10 | 0 | 0 | 1, 2, 13, 4, 3, 8, 11, 6, 10, 12, 9, 17, 16, 15, 14, 5, 7 |
| Submission of reports / Written assignments (reflective journals) | 15 | 0 | 0 | 1, 2, 13, 4, 3, 8, 11, 6, 10, 12, 9, 17, 16, 15, 14, 5, 7 |
| Submission of reports / Written assignments (reflective journals) | 15 | 0 | 0 | 1, 2, 13, 4, 3, 8, 11, 6, 10, 12, 9, 17, 16, 15, 14, 5, 7 |

Bibliography

- Alfaro-Lefevre, R. (2003). El proceso enfermero. 5a ed. Barcelona: Masson.
- Berman, A., Erb, G., Kozier, B., & Snyder, S. (2008). Fundamentos de enfermería: conceptos, proceso y práctica. Madrid: Pearson educación.
- Betolaza, E., Alonso, I. (2002). El diario reflexivo y el aprendizaje tutorizado. Metas de Enfermería 45, 14-18.

- Colina, J., Medina J.L. (1997). Construir el conocimiento de Enfermería mediante la práctica reflexiva. Rol de Enfermería, 232, 23-30.
- Gagnier J, Kienle G, Altman DG, Moher D, Sox H, Riley D and the CARE Group. (2013). The CARE guidelines: consensus-based clinical case reporting guideline development. J Clin Epidemiol;67(1):46-51.
- Luis, M.T. (2013). Los diagnósticos enfermeros. Revisión crítica y guía práctica .9a ed. Barcelona: Elsevier Masson
- Luis, M.T., Fernández. C., Navarro. M.V. (2005). De la teoría a la práctica. El pensamiento de Virginia Henderson en el siglo XXI. 3a ed. Barcelona: Masson
- Medina, J.L. (2001). Guía para la elaboración del diario reflexivo. Barcelona: Universidad de Barcelona.
- Nanda Internacional. (2015). Diagnósticos enfermeros. Definiciones y clasificación 2015-2017. Madrid: Elsevier
- Pérez, P. E., Sánchez, J. M. R., Formatger, D. G., & Fernández, M. G. (2016). Investigación en metodología y lenguajes enfermeros. Elsevier España.
- Schön, A.D. (1989) La formación de profesionales reflexivos. Barcelona. Paidós.
- Schon, D. (1992). La formación de profesionales reflexivos. Hacia un nuevo diseño de la formación y el aprendizaje en las profesiones. Madrid: Piados MEC.
- Tellez, S., García, M. (2012). Modelos de cuidados en enfermería NANDA, NIC y NOC. México DF: McGraw-Hill Interamericana

Software

SOFTWARE

It is not required