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NURS1600 – Some Note for Communication Role Play



Communication role-play (Group) : 30% Weighting

Grade	Standard	Grade Point	Numerical Score
A+	Excellent	4.3	96 – 100
A		4.0	91 – 95
A-		3.7	86 – 90
B+	Good	3.3	81 – 85
B		3.0	76 – 80
B-		2.7	71 – 75
C+	Satisfactory	2.3	67 – 70
C		2.0	63 – 66
C-		1.7	59 – 62
D+	Pass	1.3	55 – 58
D		1.0	50 – 54
F	Fail	0	Below 50



Tutorial 1

This is a tutorial for general health survey in form of client interview. The health survey provides an indication of the person's overall health and outstanding physical features.

Students are expected to collect data for a current health problem according to **COLDSPA** and a **holistic approach with Gordon Functional Health Pattern**.



Tutorial 6 (Need to Carry Out the Role Play)

This is a communication role-play assessment session.

Each sub-group will be assigned a scenario and practice effective therapeutic communication skills.

The information related to the scenario shall be health related.

Students are expected to **identify the strengths and weaknesses of the interview**, for example, in terms of the **performance of the interviewer**, **the flow and content of the interview**, **client-nurse interaction**, and **communication skills and techniques**.

After the role-play, **each sub-group must summarize the communication skills and techniques used during the interview in bilingual PowerPoint format**

Students' participation in every tutorial will be graded by tutors. [Please refer to Here for the marking rubric.](#)



Moodle Resources Related to Communication Role Play:

- ☞ [Tutorial 1](#)
- ☞ [L8 Basic Skills in Nurse-client Communication and Communication with healthcare team](#)
- ☞ [L9 Principles of Therapeutic Communication and Counselling](#)
- ☞ [L10 General Health Survey & GFHP](#)
- ☞ [L11 - Interview about 6Cs](#)



Each tutorial sub-group (9-10 students) will plan and implement a communication role play.

One out of 4 scenarios will be assigned to each sub-group by the tutor during Tutorial 1.

The communication role-play shall include the followings:

- a) Title and background: the assigned scenario and setting
- b) Demonstration of communication role-play
 - i. **A member performs role-play communication on an adult patient**
And **accompanied person(s) with a health problem in Cantonese.**
 - ii. Other sub-group members may **contribute through additional roles** or **behind the scenes.**
- c) A **summary of therapeutic communication skills** used (verbal & non-verbal communication) in the **orientation phase, working phase, termination phase.** – [Click Here to See Lecture Content](#)
- d) A script in Chinese language to **illustrate the application of therapeutic communication techniques**
- e) **Description of barriers of communication** and **constructive ways for improvement.**
- f) Intext citation and reference list in APA format
- g) Distribution of work among sub-group members.



Each sub-group has to conduct the communication role-play during Tutorial 6.

Also, students should submit

- ☞ a PowerPoint file with **20-30 slides**
 - ❖ consisting of the **summary of communication skills** used, **barriers of communication**, **suggestions for improvement**, **references**, and **distribution of work**
- ☞ soft copies of **education materials** (such as pamphlets, booklets).

The front page shall include sub-group identifier, full name of each member and UID.

The marking criteria are provided in [Appendix III & IV](#).

Each student should complete:

- ☞ peer assessment among sub-group according to [Appendix V](#) which accounts for 10% of the communication role play assignment.

PowerPoint Submission by 23:59 on 5 Dec 2022 via Moodle

Peer Assessment by 23:59 on 12 Dec 2022 via Moodle

分工合作

[illegible]

Marking Rubric of Communication Role Play

NURS1600 Getting into Nursing Communication Role-play Marking Rubric

Appendix III

Criteria	Score			
	3 points	2 points	1 points	0 points
Role-play				
Character selection and expression.	All characters are assigned according to the scenario to demonstrate communication skills. All characters are able to express through appropriate eye contacts and body gestures.	Most of the characters are assigned according to the scenario to demonstrate communication skills. Most of the characters are able to express through appropriate eye contacts and body gestures.	Some of the characters are assigned according to the scenario to demonstrate communication skills. Some of the characters are able to express through appropriate eye contacts and body gestures.	None of the characters are assigned according to the scenario to demonstrate communication skills. None of the characters are able to express through appropriate eye contacts and body gestures.
Narration of scenario	Precise and concise narration of scenario in fluent Cantonese.	Brief and clear narration of scenario in fluent Cantonese.	Brief and unclear narration of scenario in Cantonese.	Incomprehensive scenario.
Delivery				
Organization & creativity	Overall role-play is well organized, demonstrate innovation and creativity.	Overall role-play is well organized but without innovation and creativity.	Overall role-play is somewhat organized with room for improvement.	Overall role-play is disorganized.
Length of role-play	Finish on time.	Overrun within 1 minute.	Overrun 1-2 minutes.	Overrun for more than 2 minutes.
Elocution	Students use clear voice and correct, precise pronunciation of terms so that all audience can easily comprehend.	Students' voices are clear and pronounce most words correctly so that most of the audience can easily comprehend.	Students' voice is low/flat and pronounce essential terms incorrectly so that audience members have difficulty in comprehension.	Students mumble with incorrect pronunciations most of the time so that audience members cannot comprehend.
Summary and Review				
Summary of communication skills	Summarize all communication skills applied in scenario explicitly.	Summarize most of the communication skills applied in scenario clearly.	Summarize some of the communication skills applied in scenario but unclear.	Not summarizing communication skills from the scenario.
Evaluation of effectiveness	Analyze effectiveness of all communication skills for every specific conditions with justifiable reasoning.	Analyze effectiveness of most of the communication skills in most of the conditions with or without justifiable reasoning.	Analyze effectiveness of some of the communication skills in some of the conditions with or without justifiable reasoning.	Not analyzing effectiveness of communication skills at all and no justifiable reason provided.
Key issues identification	Identify all key issues from the scenario in relation to application of communication skills.	Identify most of the key issues from the scenario in relation to application of communication skills.	Identify some of the key issues from the scenario in relation to application of communication skills.	No key issue identified from the scenario in relation to application of communication skills.
Slides editing	Excellent slides editing which facilitate all review contents to be delivered clearly and smoothly.	Good slides editing which facilitate most of the review contents to be delivered clearly and smoothly.	Satisfactory slides editing which facilitate some of the review contents to be delivered clearly and smoothly.	Fair or absent of slides editing which is unable to facilitate review contents delivery.
Group Production				
Peer Assessment (Appendix V)	/3			
Total score	/30			

Appendix IV

NURS1600 Getting into Nursing Communication Role-play Review – Skills Requirements

Please consider the following communication skills when you set up your role-play.

Introduced self appropriately	✓
Acknowledged person by name	✓
Kept messages clear and concise	✓
Showed respect and empathy	✓
Used familiar vocabulary and explained any terminology	Δ
Used verbal and non-verbal communication to support and encourage	✓
Ensured non-verbal behaviour supported verbal messages	✓
Responded appropriately to patient / relative cues	✓
Attempted to reduce anxiety and tension in the appropriate manner	Δ
Used open ended questions	✓
Used closed questions where appropriate	Δ
Probed for more precise information where appropriate	Δ
Used active listening	✓
Displays warmth and caring through posture and voice	✓
Gave information or feedback that might be of benefit	✓
Avoid changing subject unnecessarily and interruption	✓
Shared self and experience if it was helpful	Δ
Summarizing	✓
Terminated the encounter appropriately	✓

✓ = communication skill should be attempted throughout the role-play

Δ = communication skill attempted only where appropriate

Marking Rubric of Peer Review

Appendix V

NURS1300 Nursing Foundation **Peer Assessment for Group Project**

Sub-group Identifier: _____ Student Name: _____ UID: _____

Group member's names	Collect information	Share responsibilities	Support team action plan	Engage in discussion	Provide quality output	Total
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						

Categories/ Score	Excellent 3	Acceptable 2	Unsatisfactory 1	Unacceptable 0
Collect information	Collects lots of information that relates to the topic	Collects some information which relates to the topic	Collects little information that does not related to the topic	Does not collect any information
Share responsibilities	Always fulfills responsibilities & helps others	Fulfills some responsibilities	Seldom fulfills responsibilities & relies on others to do their work	Never fulfills responsibilities & relies on others to do their work
Support team action plan	Always follows the group action plan & helps others stay on track	Sometimes follows the group action plan	Seldom follows the group action plan	Does not follow the group action plan
Engage in discussion	Frequently provides reasonable arguments, open to comments and ideas of group-mates and facilitates the discussion process	Provides arguments, but are not willing to be adjusted by others' reasonable comments and ideas without a valid argument to facilitates the discussion process	Little to no engagement in discussion process	Absent in all group discussion
Provide quality output	Always adhere to the agreed deadline and produce output with high quality	Usually adhere to the agreed deadline and produce output with little relevance	Seldom adhere to the agreed deadline and produce output which need great refinement	Never adhere to the agreed deadline and produce output with poor quality

Based on the course assessment weighing, the marks will be converted accordingly.

* **Submission of peer assessment score will normally be arranged via online platform by 12 Dec 2021**

** It is mandatory for students to evaluate their peers' performance, if any student fails to do so, he/she will lose all the scores earned from their peers and receive a zero in the peer assessment component.

Marking Rubric of Students' participation in tutorial

Appendix I

NURS1600 Getting into Nursing Tutorial Participation Marking Rubric

Criteria	Score			
	4 points	3 points	2 points	0-1 points
Frequency in discussions (Subtotal = 20%)	Demonstrate optimal frequency in making comments; steps in when there are silences to move discussion along; remain silence to allow peers to contribute; sensitive to appropriate time to make comment.	Demonstrate regular contributions in the discussion; allow peers to express their comments; await peers to finish before making own comments.	Occasionally make comments during discussion; may at times break the discussion flow; sometimes talks over peers.	Made no visible effort to interact with peers; remain silent or create distractions during discussion.
Relevance in discussions (Subtotal = 20%)	Use precise and concise vocabulary in the discussion; bring in relevant personal knowledge; identify issues to advance the discussion level; able to synthesize or indicate gaps or depth of topics.	Comments are clear with specific details related to the specific details related to the topic during discussion; occasionally make connections between the topic and comments from peers.	Comments lack of specific details; sometimes repeat comments already been spoken out by peers; may side track discussion occasionally.	Unclear comments make peers difficult to understand or follow; comments unrelated to topic or not follow the thread of discussion.
Summary presentation (Subtotal = 20%)	Consolidate and summarize the discussion; concise, precise, accurate and clearly present the summary in 5-10 minutes.	Consolidate and summarize the discussion; clearly present most of the discussion findings in 5-10 minutes.	Attempt to consolidate and summarize the discussion; present some of the discussion findings in 5-10 minutes.	Unable to consolidate and summarize the discussion; present little of the discussion findings in 5-10 minutes.
Feedback constructively (Subtotal = 20%)	Actively supporting, engaging and listen attentively to peers prior to make own comments; comments focus on and enhance consideration of topic instead of focusing specific people; comments and facial expression validate and encourage peers contributions.	Listen as peers contribute; comments acknowledge to peer's contributions; asks and answers questions in with facial expression are generally respectful manner.	Listen intermittently as peers contribute; comments are sometimes off topic or do not follow the thread of contents; comments with facial expression are sometimes respectful.	Comments focus on self rather than on discussion; do not ask or answer to questions; inappropriate side conversations or facial expression make peers participation fragmented.
Switch on camera (Subtotal = 20%)	At all time	Most of the time	Occasionally	Mostly not
Total score	/20			

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General Health Survey

Demographic Data

Name: _____ Gender: ☐ Male ☐ Female

Date of birth (dd/mm/yy): _____ Age: _____

Address: _____

Telephone No.: _____

Reason for seeking health care attention

What is your major health problem or concerns at this time? _____

History of present health concern

Do you have any health problem / concern at present? ☐ Yes ☐ No (go to next part)

Focus interview

COLDSPA

Character: _____

Onset: _____

Location: _____

Duration: _____

Severity: _____

Pattern: _____

Associated factors: _____

Past health history

Childhood diseases:

Immunizations:

Allergies (drug/ food):

Previous health problems:

Previous hospitalizations:

Previous surgeries:

Pregnancies & deliveries:

Previous accident / injuries:

Pain experience:

Emotional / mental problems:

Family Health history

Any family history of:

☐ Heart disease ☐ Lung disease ☐ Cancer☐ Hypertension ☐ Diabetes ☐ Tuberculosis☐ Arthritis ☐ Obesity ☐ Neurological disease☐ Mental illness ☐ Genetic disorders Others: _____

Genogram

Lifestyle and health practices profile (Gordon Functional Health Patterns Approach)

Health Perception & Health Management	
Nutrition & Metabolism	
Elimination	
Activity & Exercise	

Sleep & Rest	
Cognitive & Perception	
Sexuality & Reproduction	

Self -Concept

Stress & Coping

Role & Relationship

Values & Belief	
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The University of Hong Kong
School of Nursing

Gordon Functional Health Patterns Approach

1. Health Perception & Health Management Patterns

Perception of own health

Current health status : _____

Any regular physical check up : ☐ No ☐ Yes (where : _____)

How often do you have medical checkups? _____

How often do you see the dentist or have your eyes (vision) examined? _____

Use of medications and substances

Medications (including OTC and / or traditional remedies): _____

How much beer/wine/other alcohol do you drink? _____

Do you drink coffee or other beverages containing caffeine? ☐ No ☐ Yes

Do you now / have you ever smoked cigarettes?

☐ No ☐ Yes (no. of cigarette per day: _____)

Use of alternative medicine

Do you take vitamins, herbal supplements or adopt other alternative medicine ?

☐ No ☐ Yes (please specify types _____)

2. Nutritional & Metabolism Patterns

What do you usually eat during a typical day? _____

Do you eat out at restaurants frequently?

☐ No ☐ Yes (please specify how frequent it is) _____

Who buys and prepares the food you eat? _____

How much and what types of fluids do you drink? _____

Fruit taken daily : _____

Special diet required : ☐ No ☐ Yes (please specify _____)

3. Elimination Patterns

Bowel Habit : How often _____ ☐ Normal
☐ Constipation ☐ Diarrhoea ☐ Incontinence

Any medication needed : _____

Urination Habit : ☐ Normal ☐ Dysuria ☐ Frequent ☐ Dripping
☐ incontinence (please specify when _____)

Any other problem in urination : _____

4. Activity and Exercise Patterns

What is your daily pattern of activity? _____

What do you do for leisure and recreation? _____

Do you do exercise regularly? ☐ No ☐ Yes

Types of exercise: _____

Frequency: _____ Duration: _____

Any difficulty is breathing during

5. Sleep and rest patterns

Hours per night: _____

Do you have trouble falling asleep or staying asleep? ☐ No ☐ Yes

Do you feel rested when you awakened? ☐ No ☐ Yes

Do you nap during the day? ☐ No ☐ Yes How How often and
for how long? _____

What do you do to help you fall asleep? _____

6. Cognitive & Perception Patterns

Vision : ☐ Normal ☐ Presbyopis ☐ Myopia ☐ Cataract

Hearing : ☐ Normal ☐ Hearing aids needed ☐ Rt ear ☐ Lt ear

Pain : Location : _____ Severity : _____ Medication : _____

7. Sexuality & Reproductive Patterns*Female :*

When was your last menstrual period : _____ frequency _____

☐ Regular ☐ IrregularHave you ever pregnant : ☐ No ☐ Yes (G__P__)

What was the year of your menarche : _____

What was the year of your menopause : _____

Any concern of your sexual health : _____

Do you perform BSE : ☐ Yes ☐ NoDo you know how to perform BSE : ☐ Yes ☐ NoDo you have regular Pap smear examination : ☐ Yes ☐ No*Male :*Do you perform TSE : ☐ Yes ☐ NoDo you know how to perform TSE : ☐ Yes ☐ NoHave you heard about PSA examination : ☐ Yes ☐ NoDo you have any sexual health concern : ☐ No ☐ Yes (Please specify _____)Do you take any contraceptive precaution : ☐ No ☐ Yes (Please specify _____)8. Self-concept PatternsDo you worry about your health? ☐ No ☐ Yes

Any major life accomplishment ? _____

How do you think of yourself : _____

9. Stress & Coping Patterns

What do you do when you are under stress ? _____

Do you experience any major life changes or stresses in the last six months ? _____

What would you rate your current stress level : ☐ High ☐ Average ☐ LowWhere does the stress come from ? ☐ Family ☐ Health ☐ Work ☐ Other10. Roles and Relationships

What is your relationship like with your family/spouse/children? _____

What is your role in your family? Is it an important role? _____

What do you do for fun and relaxation? _____

Are you involved in any community activities? _____

Who would you turn to when you have problem ? _____

11. Values and beliefs system

What is the most important in your life ? _____

Your Religions: _____ Is it important to you ? ☐ No ☐ Yes

Do you have any special requests related to your religion that health care providers should know about ?

Case C – Jeannie

Focus - Chief Compliant – sleeping problems at night time – GFHP 5 Sleep & Rest

Related problem – Heavy study workload & debate competition – GFHP 2 Stress & Coping

General health – Delay period for 2 weeks; sexually active with BF – GFHP 7 Sexually & Reproductive

COLDSPA

Character: Trouble falling asleep

Onset: 1 week

Location: Not applicable

Duration: 1-3 hours in bed

Severity: Restlessness & fully awake during the first 1-3 in bed

Pattern: Insomnia every night but left sleepy during daytime

Associated factors: Stress level – higher make worsen

Sleep & Rest	See COLDSPA
Stress & Coping	Heavy study workload – 2 tests & debate competition past week and 2 assignment deadlines this week
Sexually & reproductive	Delay period for 2 weeks which is regular since 12 year-old at 28 day-cycle; G0P0; sexually active with BF for one year (dating since year 1 of study in U) – use condom and safety period occasionally as contraceptive measure

Family information for genogram:

Step father – Alive at age 45, healthy

Mother – Alive at age of 38, healthy

Boyfriend – Alive at age 20, healthy

Younger brother (from step father, no biological relationship with Jeannie) - Alive at age 18, healthy

No next generation yet