HKU Med | **LKS Faculty of Medicine**
School of Nursing
香港大學護理學院

THE UNIVERSITY OF HONG KONG

LKS FACULTY OF MEDICINE

SCHOOL OF NURSING

Bachelor of Nursing (Full-time) Programme

Year I (Class 2027)

NURS1600 GETTING INTO NURSING

COURSE MANUAL

September 2022

Bachelor of Nursing (Full-time) Programme
Learning Outcomes

The graduates of the Bachelor of Nursing (Full-time) Programme will be able to:

1. Function competently and independently in the role of the nurse;

2. Promote health to clients and assist with the restoration and maintenance of optimal health;

3. Demonstrate an understanding of the cultural competence and leadership characteristic within nursing profession;

4. Perform evidence-based nursing practice;

5. Use ethical principles and legal parameters in nursing practice; and

6. Assume responsibility for self-evaluation, professional and academic development.

1. **TEACHING TEAM**

Course Coordinator	**Dr. Joanna Ko (J Ko)** Lecturer Telephone: 3917 6630 Office: Room 512, 5/F, Academic Building, 3 Sassoon Road Email: kojoanna@hku.hk
Course Teachers:	**Dr. Cecilia Sit (C Sit)** Lecturer Telephone: 3917 6695 Office: Room 508, 5/F, Academic Building, 3 Sassoon Road Email: ceciliasit@hku.hk **Dr. Mary See (M See)** Lecturer Telephone: 3917 6691 Office: Room 512, 5/F, Academic Building, 3 Sassoon Road Email: rpwpoon@hku.hk **Dr. Grace Yuen (G Yuen)** Lecturer Telephone: 3917 6326 Office: Room 503, 5/F, Academic Building, 3 Sassoon Road Email: gyuen@hku.hk
Tutors:	**Dr. Joanna Ko (J Ko)** Lecturer Telephone: 3917 6630 Office: Room 512, 5/F, Academic Building, 3 Sassoon Road Email: kojoanna@hku.hk **Dr. Cecilia Sit (C Sit)** Lecturer Telephone: 3917 6695 Office: Room 508, 5/F, Academic Building, 3 Sassoon Road Email: ceciliasit@hku.hk **Dr. Mary See (M See)** Lecturer Telephone: 3917 6691 Office: Room 512, 5/F, Academic Building, 3 Sassoon Road Email: slmary@hku.hk **Dr. Jojo Kwok (J Kwok)** Assistant Professor Telephone: 3917 6644 Office: Room 558, 5/F, Academic Building, 3 Sassoon Road Email: jojoyyk@hku.hk

	Ms. Rebecca Poon (R Poon) Lecturer Telephone: 3917 6691 Office: Room 511, 5/F, Academic Building, 3 Sassoon Road Email: rpwpoon@hku.hk **Mr. Benney Wong (B Wong)** Lecturer Telephone: 3917 7581 Office: Room 510, 5/F, Academic Building, 3 Sassoon Road Email: benneycw@hku.hk@hku.hk

2. COURSE DESCRIPTION

This course will provide the students with a solid foundation of nursing knowledge and an understanding of the fundamental concepts essential to nursing and health. This course has two major themes, **foundations of nursing practice** and **communication**. The foundations of nursing practice introduce the students to the nursing history, essential theories and concepts of nursing practice. It includes dimensions of nursing practice, nursing process, nursing care plans, nursing as a profession, and the professional responsibilities and roles, ethics and legal aspects in nursing practice, critical thinking in nursing practice: introduction to nursing research, evidence-based nursing practice and problem solving approach in reasoning process.

The communication highlights the importance of communication as a basic element of human interaction that allows people to establish, maintain and improve contact with each other. It is an important component of nursing practice. In order to communicate effectively with clients and other members of the health care team, nurses must develop effective communication skills to cultivate therapeutic working relationships.

3. STUDENT LEARNING OUTCOMES

On completion of the course, students will be able to:	This learning outcome meets with Programme outcomes
1. comprehend nursing development through studying its history and discuss the dimension of nursing practices;	No. 1, 2, 6
2. recognize the evolution of nursing, development of health disciplines, contemporary roles and functions of a nurse;	No. 1, 2, 6
3. demonstrate an understanding of nursing theories; through nursing process and apply nursing care plan to integrate professional knowledge into practice;	No. 3, 6
4. acquire and apply critical thinking and problem-solving skills in nursing practice;	No. 3, 5, 6
5. develop basic communication skills and apply therapeutic communication skills for caring of individuals across life span;	No. 1, 2
6. identify common ethical dilemmas and legal aspects pertinent to nursing care; and	No. 5
7. distinguish the importance of nursing research in relating to evidence-based practice.	No. 4

4. TIME TABLE

Wk	Date	Time	Activity	Mode/Venue	Topic	Teacher
2	6 Sep (Tue)	0830 - 1020	Lecture	f2f 3SR-LT2	Course introduction Lecture 1 Nursing history; social & cultural factors of nursing; education and organizations	J Ko
		2 hours	Lecture	Pre-recorded video	Lecture 2 Nursing as a Profession and a Discipline; Dimensions of Nursing Practice; Roles and Responsibilities of a Nurse among the Healthcare Team; Professional Appearance and Behavior	G Yuen
	9 Sep (Fri)	1030 - 1220	Lecture	f2f 3SR-LT1	Lecture 3 Fundamental patterns of knowing in nursing	M See
3	13 Sep (Tue)	0830- 1020	Lecture	f2f 3SR-LT2	Lecture 4 History of Nursing Thoughts	J Ko
	16 Sep (Fri)	1030 - 1220	Lecture	f2f 3SR-LT1	Lecture 5 Library Workshop	Librarian
4	20 Sep (Tue)	0830 - 1020	Lecture	f2f 3SR-LT2	Lecture 6 Searching for evidence, benefits and responsibility of using social media	M See
		15:30- 17:30	Lecture	f2f 3SR-LT2	Lecture 7 Critical Thinking in Nursing Practice and Problem-based Learning	C Sit
	23 Sep (Fri)	1030 - 1220	Lecture	f2f 3SR-LT1	Lecture 8 Basic Skills in Nurse-client Communication and Communication with Health Care Team	C Sit
5	27 Sep (Tue)	0830 - 1020	Lecture	f2f 3SR-LT2	Lecture 9 Principles of Therapeutic Communication and Counselling	C Sit
	30 Sep (Fri)	1030 - 1220	Lecture	f2f 3SR-LT1	Lecture 10 General health survey and Gordon Functional Health Pattern	M See
6	5 Oct (Wed)	2 hours	Lecture	Pre-recorded video	Lecture 11 Introduction of 6Cs by Guests Speakers	G Yuen
	7 Oct (Fri)	1030 - 1220	Lecture	f2f 3SR-LT1	Lecture 12 Nursing process I	M See
7	Reading Week					
8	18 Oct (Tue)	0830 - 1020	Lecture	f2f 3SR-LT2	Lecture 13 Nursing process II	M See

Wk	Date	Time	Activity	Mode/Venue	Topic	Teacher
	21 Oct (Fri)	1030 - 1220	Tutorial	Online	<u>Tutorial 1</u> General Health Survey	Tutors
9	25 Oct (Tue)	0830 - 1020	Tutorial	Online	<u>Tutorial 2</u> Nursing process – Assessment	Tutors
	28 Oct (Fri)	1030 - 1220	Tutorial	Online	<u>Tutorial 3</u> Nursing Process – Nursing Diagnosis and Expected Outcomes	Tutors
10	1 Nov (Tue)	0830 - 1020	Tutorial	Online	<u>Tutorial 4</u> Nursing Process – Nursing Interventions	Tutors
	2 Nov (Wed)	2 hours	Lecture	Pre-recorded video	<u>Lecture 14</u> The local health care system and applied nursing roles	J Ko
	4 Nov (Fri)	1030 - 1220	Tutorial	Online	<u>Tutorial 5</u> Nursing Process – Evaluation and Develop a Nursing Care Plan	Tutors
11	8 Nov (Tue)	0830 - 1020	Lecture	f2f 3SR-LT2	<u>Lecture 15</u> Overview of Ethical and Legal Aspects in Nursing	C Sit
	11 Nov (Fri)	1030 - 1220	Lecture	f2f MMW-LT1&2	<u>Lecture 16</u> Care plan consultation	J Ko
12	15 Nov (Tue)	0830 - 1020	Lecture	f2f 3SR-LT2	<u>Lecture 17</u> Introduction of Group Assessments	C Sit
	18 Nov (Fri)	1030 - 1220	Lecture	f2f 3SR-LT2	<u>Lecture 18</u> Introduction of Concept Map	J Ko
13	22 Nov (Tue)	0830 - 1020	Tutorial	Online	<u>Tutorial 6</u> Communication Role-play	Tutors
	25 Nov (Fri)	1030 - 1220	Lecture	f2f 3SR-LT1	<u>Lecture 19</u> Introduction of nursing research and evidence-based practice	J Ko
14	29 Nov (Tue)	0830 - 1020	Lecture	f2f 3SR-LT2	Feedback and revision	J Ko C Sit M See

Venues

3SR-LT1	Lecture Theatre 1, 1/F, Academic Building, 3 Sassoon Road
3SR-LT2	Lecture Theatre 2, 1/F, Academic Building, 3 Sassoon Road
MMW-LT1	Lecture Theatre 1, G/F, William M W Mong Block, 21 Sassoon Road
MMW-LT2	Lecture Theatre 2, G/F, William M W Mong Block, 21 Sassoon Road

5. **TEACHING AND LEARNING STRATEGIES**

- Lectures
- Tutorials
- Pre-recorded videos
- Library orientation and search of information
- Problem-based learning
- Case study & discussion
- Role-play
- Online quizzes

Note: The medium of teaching is English and 100% of the course will be conducted in English.

6. **ATTENDANCE POLICY**

All students are expected to attend ALL lectures and tutorials as stipulated by the Nursing Council of Hong Kong. The total number of contact hours of each student will be submitted to the Nursing Council of Hong Kong for the application of Nurse Registration.

Class Activity	Minimum Attendance Requirement
Lecture & care plan consultation	80%
Tutorial (online)	100%

Leave application is required for absence from classes. Students should submit the original medical certificate (for medical leave) / a written letter & supporting document (for non-medical leave) to the General Office. Approval from the Faculty is also required if the leave period is 3 days or more.

Student who fail to fulfill the minimum attendance requirement of lectures/ tutorials without justification shall be reviewed by the Programme Sub-committee when assigning grades.

7. COURSE ASSESSMENT

There will be FOUR assessments. The form of assessment in this course is:

	Weighting	Assessment / Submission Date	This assessment method meets with course learning outcomes
1. **Tutorial participation (Individual)**	20%	Tutorial 1 – 6	No. 2-5
2. **Nursing care plan (Group)**	30%	14 Nov 2022	No. 3, 4
3. **In-class quizzes (Individual)**	20%	Lecture 2 - 16	No. 1-7
4. **Communication role-play (Group)**	30%	5 Dec 2022	No. 4, 5, 6

7.1 Tutorial participation (Individual)

There are 6 tutorial groups. Each tutorial group forms 4 sub-groups. Students are required to download their own tutorial guide, to be posted on Moodle before tutorial sessions.

Note: Students who are unable to attend the tutorials are required to notify their respective tutors via email. They have to submit a written essay (500 words) related to the learning activities of the particular session to the corresponding tutor within 1 week after resuming classes.

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 2-5
A scenario will be given to students for the practice of composing nursing care plan. Each sub-group is required to discuss and raise questions related to the given scenario. Tutorial objectives and activities will be described in tutorial guide.

Tutorial 6
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.

- Based on a scenario from Tutorial 1, students are required to work together, discuss on how to apply the effective communication skills and develop a script of interviewing a client.

- 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 Appendix I for the marking rubric.

Responsible teachers: All tutors

7.2 Nursing Care Plan (Group)

A sub-group of 9-10 students is required to present summary of discussion through tutorial 2 to 5 to formulate a nursing care plan based on problem-based learning method for ONE nursing diagnosis.

Written group care plan is required to be submitted in electronic format via Moodle with Turnitin check. Please refer to Appendix II for the marking rubric.

The cover page shall include sub-group identifier, full name of each member and UID. In-text citation and reference list should be prepared according to the APA referencing style.

Responsible teacher: Dr. Mary See

Submission by 23:59 on 14 Nov 2022 via Moodle

7.3 After-class Quizzes (Individual)

After-class quizzes in the format of multiple choice questions (MCQs) / matching / true-or-false / fill-in-the-blanks will be conducted after lectures. Students should complete the online quizzes, which will be released from **1800 FRIDAY until 2359 SATURDAY EVERY WEEK**. For those who encounter technical problems and are not able to access the quiz, please inform corresponding course teachers in advance. Students who are **LATE** to enter the quiz would **NOT BE ENTERTAINED**.

Responsible teachers: Dr. Joanna KO, Dr. Cecilia SIT, Dr. Mary SEE

Submission by designated timeline via Moodle

7.4 Communication Role-play (Group)

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 before / 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 sub-group 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.
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) and 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.

Responsible teachers: Dr. Joanna KO, Dr. Cecilia SIT

PowerPoint Submission by 2359 on 5 Dec 2022 via Moodle

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

8. GRADE DESCRIPTORS AND STANDARDS

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

Excellent   indicates an outstanding level of achievement. The student gives evidence of logical development and synthesis of information as well as critical thinking ability.

Good   indicates an above average achievement. The student is able to discuss the topic with supportive viewpoints and his/her work shows some independent thought and/or critical analysis.

Satisfactory   indicates an acceptable level of achievement. The student gives evidence of satisfactory knowledge of the topic and has minimal errors in understanding. A limited degree of logical and critical thought is evident in his/her work.

Pass   indicates the student's performance has just reached as the acceptable level of achievement.

Fail   indicates failure to achieve the required standard.

9. RECOMMENDED READING LIST

Required Readings:

Carpenito, L. J. (2017). *Nursing diagnosis: application to clinical practice* (15th ed.). Philadelphia: Lippincott Williams and Wilkins.

Berman, A., Snyder, S., Frandsen, G., & Kozier, B. (2020). *Kozier & Erb's fundamentals of nursing: Concepts, process and practice* (11th ed.). Harlow, Essex: Pearson Education Limited.

NANDA-I (2021). *Nursing diagnoses: definitions and classification 2021-2023* (12th ed.). New York: Thieme.

Parker, J. (2014). Nursing as art and science. In Daly, J., Speedy, S. & Jackson, D. (Ed.), *Context of nursing: an introduction*. Chatswood, NSW: Elsevier Australia.

Other References:

Ackley, B. J., Lawig, G. B. & Makic, M. B. F. (2016). *Nursing diagnosis handbook: An evidence-based guide to planning care* (11th ed.). St. Louis: Elsevier.

Carpenito-Moyet, L. J. (2017). *Nursing care plans: transitional patient & family centered care* (7th ed.). Philadelphia: Lippincott Williams and Wilkins.

Craven, R. F., Hirnle, C. J. & Henshaw, C. M. (2016). *Fundamentals of nursing: Human health and function* (8th ed.). Philadelphia: Lippincott Williams and Wilkins.

Potter, P. A., Perry, A. G., Stockert, P. A. & Hall A. M. (2016). *Fundamentals of nursing* (9th ed.). St. Louis, Missouri: Elsevier Mosby.

Rubenfeld, M., & Scheffer, B. (2015). *Critical thinking tactics for nurses: Achieving the IOM competencies* (Third ed.). Burlington, MA: Jones & Bartlett Learning.

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 synthesizes or indicate gaps or depth of topics.	Comment 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.	Comment focus on self rather than on discussion; do not asks or answers 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			

Criteria	Score			
	3 points	**2 points**	**1 point**	**0 point**
Documentation of subjective & objective data	Demonstrates a systematic approach in data collection including pathophysiology, risk factors, medications, diagnostic test/result(s), and health assessment(s).	Documented most data but missing some critical points. Approaching to systematic data collection but room for improvement.	Missing many data; lack of systematic approach in data collection but made an effort.	No effort made.
Problems identification & nursing diagnoses	Two correct problems identified with nursing diagnoses listed in proper NANDA format.	One correct problem identified with nursing diagnoses listed in proper NANDA format OR two correct problems identified with nursing diagnoses listed in improper NANDA format.	One correct problem identified with nursing diagnosis listed in improper NANDA format.	No correct problem identified.
Goals and expected outcomes	One appropriate goal matching with each stated nursing diagnoses; with at least two expected outcomes (SMART) for each goal.	One appropriate goal matching with each stated nursing diagnoses; with one expected outcomes (SMART) for each goal.	Some goals and expected outcomes listed inappropriately but made an effort.	No effort made.
Implementation – Continuous monitoring	Two or more appropriate interventions listed that are client-centered.	One appropriate interventions listed that are client-centered.	Listed inappropriate interventions OR non-client centered but made an effort.	No effort made.
Implementation – Therapeutic interventions	Two or more appropriate interventions listed that are client-centered.	One appropriate interventions listed that are client-centered.	Listed inappropriate interventions OR non-client centered but made an effort.	No effort made.
Implementation – Health education & promotion	Two or more appropriate interventions listed that are client-centered.	One appropriate interventions listed that are client-centered.	Listed inappropriate interventions OR non-client centered but made an effort.	No effort made.
Implementation – Preventive measures / collaborative care	Two or more appropriate interventions listed that are client-centered for either category OR one each.	One appropriate interventions listed that are client-centered for either category.	Listed inappropriate interventions OR non-client centered but made an effort.	No effort made.
Evidence & rationales	All interventions are supported by correct evidence and appropriate rationales.	Most of the interventions are supported by correct evidence and appropriate rationales.	Some of the interventions are supported by correct evidence and appropriate rationales.	None of the interventions are supported by correct evidence and appropriate rationales.
Evaluation	Appropriate evaluation criteria listed for all expected outcomes.	Appropriate evaluation criteria listed for most of the expected outcomes.	Limited evaluation criteria OR some inappropriate evaluation criteria listed but made an effort.	No evaluation criteria listed.
Readability and referencing	Easy to follow, very clear and correct referencing for all appropriate citations.	Easy to read, clear and correct referencing for some citations.	Clear with some grammatical errors and incorrect referencing but made an effort.	Confused with a lot of grammatical errors and no referencing / citation.
Total score	**/30**			

NURS1600 Getting into Nursing
Communication Role-play Marking Rubric

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**			

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

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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 fulfils 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 plateform 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.