

N321 Teaching Plan and Grading Rubric

Student Name: Hadley Jones

Criteria	0 points	2.5 points	5 points	Comments
<u>Assessment of Client/Family</u> - Determines motivation for learning - Identifies barriers to learning - Discuss health beliefs/values - Discuss psychosocial and cognitive development	Missing 2 or more of the following: - Determines motivation for learning - Identifies barriers to learning - Discuss health beliefs/values - Discuss psychosocial and cognitive development	Missing 1 of the following: - Determines motivation for learning - Identifies barriers to learning - Discuss health beliefs/values - Discuss psychosocial and cognitive development	Includes complete information of all criteria: - Determines motivation for learning - Identifies barriers to learning - Discuss health beliefs/values - Discuss psychosocial and cognitive development	
Criteria	0 points	2.5 points	5 points	Comments
<u>Nursing Diagnosis and Goal of Teaching</u> 1 nursing diagnosis identified in proper formatting 1 goal of teaching identified	Missing 2 of the following: 1 nursing diagnosis identified in proper formatting 1 goal of teaching identified	Missing 1 of the following: 1 nursing diagnosis identified in proper formatting 1 goal of teaching identified	Includes complete information of all criteria: 1 nursing diagnosis identified in proper formatting 1 goal of teaching identified	
Criteria	0 points	2.5 points	5 points	Comments
<u>Interventions</u> - Discuss 3 interventions to be included in teaching - Relate interventions to meeting the teaching goal	Missing 2 of the following: - Interventions to be included in teaching - Relate interventions to meeting the teaching goal	Missing 1 of the following: - Interventions to be included in teaching - Relate interventions to meeting the teaching goal	Includes complete information of all criteria: - Interventions to be included in teaching - Relate interventions to meeting the teaching goal	

Criteria	0 points	1 point	2 points	Comments
<u>Methods/Teaching Tools</u> • Use 2 appropriate teaching methods to deliver teaching • Consider the following teaching methods: • Discussion • Q&A • Teach-Back • Interactive	Missing 2 of the following: • Use 2 appropriate teaching methods to deliver teaching • Consider the following teaching methods: • Discussion • Q&A • Teach-Back • Interactive	Missing 1 of the following: • Use 2 appropriate teaching methods to deliver teaching • Consider the following teaching methods: • Discussion • Q&A • Teach-Back • Interactive	Includes complete information of all criteria: • Use 2 appropriate teaching methods to deliver teaching • Consider the following teaching methods: • Discussion • Q&A • Teach-Back • Interactive	
Criteria	0 points	1.5 points	3 points	Comments
<u>Evaluation</u> • Discuss how the client/family received the teaching • Identify strengths/weaknesses of the client or family in receiving teaching • Suggest modifications to improve teaching plan (What would have improved the plan?)	Missing 2 or more of the following: • Discuss how the client/family received the teaching • Identify strengths/weaknesses of the client or family in receiving teaching • Suggest modifications to improve teaching plan (What would have improved the plan?)	Missing 1 of the following: • Discuss how the client/family received the teaching • Identify strengths/weaknesses of the client or family in receiving teaching • Suggest modifications to improve teaching plan (What would have improved the plan?)	Includes complete information of all criteria: • Discuss how the client/family received the teaching • Identify strengths/weaknesses of the client or family in receiving teaching • Suggest modifications to improve teaching plan (What would have improved the plan?)	

Criteria	0 points	2.5 points	5 points	Comments
<u>APA Format</u> • Appropriate APA in-text citations and listed all appropriate references in APA format • At least 2 scholarly source(s) are utilized and should be 5 or less years old • Source(s) greater than 5 years old will not be accepted • Reference page complete	No in-text citations present 2 or more references are greater than 5 years old 3 or more APA errors No reference page present	1-2 APA errors 1 reference is greater than 5 years old In-text citations appropriately cited Reference page present	No APA errors present In-text citations appropriately cited Reference page present and formatted properly	
Criteria	0 points	2.5 points	5 points	
<u>Evaluation of Teaching Presentation</u> • Introduction of content • Patient put at ease • Eye contact • Clear speech and organized presentation • Environment conducive to learning • Family included (if applicable) • Accuracy of information • Validation of learning status • Use of teaching aids • Appropriate non-verbal body language	Missing 2 or more of the following criteria: • Introduction of content • Patient put at ease • Eye contact • Clear speech and organized presentation • Environment conducive to learning • Family included (if applicable) • Accuracy of information • Validation of learning status • Use of teaching aids • Appropriate non-verbal body language	Missing 1 of the following criteria: • Introduction of content • Patient put at ease • Eye contact • Clear speech and organized presentation • Environment conducive to learning • Family included (if applicable) • Accuracy of information • Validation of learning status • Use of teaching aids • Appropriate non-verbal body language	Includes all criteria: • Introduction of content • Patient put at ease • Eye contact • Clear speech and organized presentation • Environment conducive to learning • Family included (if applicable) • Accuracy of information • Validation of learning status • Use of teaching aids • Appropriate non-verbal body language	
TOTAL				/30

Assessment of Client/Family (5 points)	Nursing Diagnosis & Goal of Teaching (5 points)	Interventions (5 points)	Methods/Teaching Tools (2 points)	Evaluation (3 points)
Level of motivation for learning: This patient was alert and oriented to person, place, time, and date. The patient was ready to learn and even turned down the television, which showed interest and motivation to hear what was going to be said. The patient was taught information regarding vertigo, which she stated has recently gotten worse. She was reading along to her copy of the handout packet while I was reading mine and even asked a few questions. Barriers to effective learning: A barrier to be considered was an interruption made by the instructor. As the teaching was going on, the instructor had to pop her head in and speak to the patient regarding their lunch order, which caused a pause in the information.	Nursing Diagnosis: Risk for falls related to vertigo as evidenced by patient's report of dizziness and recent fall that took place at home (Phelps, 2023). Goal of Teaching: The goal of this teaching was to provide the patient an educational understanding about the general ideas of vertigo, along with important information that she should know moving forward with her diagnosis. The client was aware of what vertigo was, but did not know that vertigo and dizziness differ from each other in certain ways. I wanted to discuss the teaching points with the patient to differentiate these two categories and to teach her knowledgeable things that she can implement when she discharged to promote safety.	Intervention 1: Educate the patient on how to implement fall precautions both in the hospital and at home when discharged (Phelps, 2023). Keeping the bed in the lowest position, having a clean and organized environment, and wearing gripped socks can be precautions for this patient. We discussed that the patient could keep her apartment free of clutter by not having rugs and keeping cords out of the way which can help reduce the risk for falls. Intervention 2: Assist and educate the patient for ambulation and position changes (Phelps, 2023). The patient stated to me that she feels the dizziest when she stands up from a seated position. We discussed the importance of	Method 1: The first method of teaching that I used with this patient was an informational handout packet on vertigo, and an informational handout packet on dizziness. Before the patient received the handout, I took time to highlight key points that I thought would be beneficial for her to focus on to better her understanding about what each were. One of the primary approaches for health education is the use of printed materials (Haji, 2020). Prior research has mostly concentrated on the materials' readability, design, and content (Haji, 2020). Understanding patient preferences and how they utilize the materials can assist to enhance health information delivery, which will raise the standard of treatment at a lower cost (Haji, 2020).	Discuss how the client/family received the teaching: The client received the teaching information extremely well. She was asking questions and showing interest in the different topics and even went to tell me a story about her cat. She provided me extra information about her triggers, environment, and apartment complex which was helpful to add more points to the education. Overall, this was a positive and effective teaching that I believe will benefit the patient further. Identify strengths/weaknesses of the client or family in receiving teaching: Strengths of the client included the acceptance of vertigo, the motivation to listen and learn, and the warming personality she portrayed, which made me more comfortable to teach. Weaknesses were that this

Health beliefs/values: This patient is a 51-year-old Caucasian female that was admitted after a fall she experienced at her home. The patient was brought by ambulance after her neighbor called emergency services, as she lives alone and has no family or support system. The patient was then said to be admitted with a diagnosis of vertigo. The patient is a smoker for the past 20 years, smoking at least 2-3 packs a month, and realizes the health consequences that come with smoking, but does not have a plan to stop. The patient uses no drug or alcohol usage and has a past medical history of depression, anxiety, diabetes mellitus and hypertension. The client believes in the healthcare system and is motivated to get her diagnosis under control to prevent more falls and complications. Psychosocial development: This patient is in the Middle Adulthood stage of Erikson's stages of psychosocial development, due to her age being 51. This stage is considered the Generativity vs. Stagnation stage, which		changing positions slowly and not getting up from bed or moving too fast is very important for patients with vertigo. Intervention 3: I described to the patient the proper education of knowing her own boundaries when it comes to neurological assessments. If the patient gets a feeling of lightheadedness, I explained to sit down and steady herself before taking off again. The patient stated that she will change positions slowly and know her boundaries to prevent complications, which contributes to the goal of my teaching plan.	Method 2: With the patient, we discussed the importance of home safety and ways to promote effective ambulation. I asked the patient questions regarding her environment, along with who she lives with. The patient lives alone but has a cat. I told the patient the importance of being aware of where her cat was, as this can pose a threat to her safety due to the risk of tripping over the cat as it runs across the floor. The patient told me she lives on the second floor of a complex, and we talked about the disadvantages of that, and she later mentioned they may install an elevator for easier access. As mentioned on the handout, when the patient uses the stairs, she should hold the side railing to help balance, which she states she does.	patient has no family or support system. The patient lives alone and does her daily activities by herself. The patient did state that someone was taking care of her animal but never specified. Another weakness was that the patient was trying to order lunch, and with being hungry, she was distracted by the instructor ordering that on the phone. Luckily, that distraction was right before the teaching was over and the discussion then ended. Suggest modifications to improve teaching plan (what would have improved the plan?): Overall, I believe I had a great interaction with my patient. Both of us were friendly and motivated and the conversations were clear and flowed well. However, one thing that I would do differently is make sure there is a chair in there, to be eye contact level with the patient to show my respect and readiness to teach.
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can be proved by the patient's verbal communication and social interaction skills she portrayed. The client has no family, but showed traits to be the type of person that could help others if needed. Cognitive development: The client's age puts her in the formal operational category of Piaget's stages of development. This can be confirmed by the client stating that she realizes smoking is not good for her health, and that she needs to implement home safety at her apartment complex when it comes to stairs, rugs, cords, etc.				
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References (2) (APA):

- Haji, A. (2020). *Patients' utilisation and perception of the quality of printed health education materials in Primary Health Care: A cross-sectional study*. BJGP Open. <https://bjgpopen.org/content/3/4/bjgpopen19x101672>
- Phelps, L. L. (2023). *Nursing diagnosis reference manual*. Wolters Kluwer.