The need for Indigenous people to feel culturally safe within a medical and hospital environment is a matter of concern for health care practitioners dealing with an Indigenous family-centred care setting. In this context, cultural safety is defined by Williams (1998, p. 2) as:

more or less an environment which is safe for people; where there is no assault, challenge or denial of their identity, of who they are or what they need. It is about shared respect, meaning and shared knowledge and experience of learning together with dignity and truly listening.

William (1998) states that national policies have attempted to ensured the dependence of Aboriginal people by managing, controlling and protecting them rather than acknowledging and accepting cultural differences when developing Aboriginal policy. Changes in education for health practitioners to increase their awareness of the cultural uniqueness of Indigenous peoples needs to be included in training programs to enhance the health outcomes in family-centred care (Cass et al. 2002). Currently, Australian health policies reflect the colonial paternalistic nature of non-Aboriginal practices by sending Indigenous women away from their families and culture to manage their pregnancies and give birth without the consideration of a family-centred care strategies (Cass et al. 2002; Watson et al. 2002).
A Harvard reference list looks like?


**NB:** Note that the list is organised in alphabetical order by author.

Marking criteria

- Content - 70%
- Structure - 10%
- Style & Organisation - 20%

- See your marking guide for details!

A detailed account of a particular individual;

- The *role* of the Nursing case study is to examine individual variations in patient populations and explore social impacts effecting health care management.
- The *purpose* of the case study is to apply & review generalised theoretical principles in a specific context.
- The *audience* is usually fellow professionals.
And its structure should be...?

- Generally, the term ‘case study’ refers more to the assignment question than the format of the finished assignment.
- If you are required to answer one, two, or more questions related to a case study example, it is more likely that your assignment will resemble an essay: Introduction – Body – Conclusion.
- However, essays written in response to case studies will often share some characteristics of the report format in that information can be organised into sections with headings & recommendations can be made in your conclusion.

The Case to be studied

- Mrs Wall is a 75 year old woman admitted to hospital with pain in her right hip.
- Mrs Wall experienced a fall in her home one (1) week prior to this admission.
- Prior to her discharge home the community nurse conducts a ‘home assessment’.
- Mrs Wall lives on her own in a three bedroom, second level, villa home with her Maltese terrier, Fluffy.

Instructions continued...

- Discuss the incidence of injury due to falls in the home for older persons in the home in Australia. In your discussion, you should include information about causative factors (Intrinsic & Extrinsic) associated with falls in the home experienced by an older person.
- For each room or living area in the home:
  - Identify possible fall risks for Mrs Wall & comment on the second level villa living particular in relation to home modifications
  - Suggest strategies that might reduce the likelihood of her sustaining injury in her home.
  - Include current references to support your risk identification and strategies to reduce them. Sometimes homes will require structural modifications, i.e. ramps or rails, in order to increase their level of safety for older occupants; however, these should be practical and prioritised in accordance with the literature.
- Outline community resources & financial support that may be available in NSW & Australia to assist Mrs Wall & her family in making safety modifications to her home.
- In addition to the community nurse, identify & describe the roles of the Pharmacist, the GP and the Physiotherapist and their role in caring for Mrs Wall from an Intrinsic and Extrinsic point of view. Support this information with current resources.
This case study will include ...

- Information about the patient's social situation, living conditions, and so on.
- Discussion of wider incidences of the injury & / or health problem in elderly people + causes.
- Risk assessment of patient's living area (esp. bathroom & kitchen).
- Community resources + finances relevant to the patient's care needs.
- Identification & description of the roles of the three health carers.

Some questions ...

Incidence of injuries due to falls in the home for older folk in Australia:
- Rates of falls in older Australians
- What are some of the identified causes?
- What are some of the consequences: types of injuries, & so on?
- Risks & strategies for each room or living area in Mrs Wall's home?
- Which areas are used most frequently? (remember second level, kitchen & bathroom)
- What sort of activities take place in each of these areas?
- What risks are associated with each area?
- What can be done to reduce these risks for Mrs Wall?

What community resources / financial support is available?
- In NSW?
- Australia wide?
- Which of these resources will be helpful for Mrs Wall?
- Why? How will they help her to avoid falls?

Pharmacist, GP & physiotherapist?
- Why are these care services important to Mrs Wall's ongoing well being?
- What will they do?

NMIH101: Week 13 Wednesday
Professional Development Portfolio + Essay
2000 wds
Weighting 50%
Gibbs Model of Reflection (1988)

- **Description**: What happened?
  - Action Plan: What if you were to do it again, what would you do?
  - Conclusion: What did you do/didn't you do?

- **Feelings**: What were you thinking and feeling?
  - Evaluation: What was good and bad about the experience?

- **Analysis**: What sense can you make of the situation?

- **Evaluation**: What went well?
  - **Facts**: What were the events?
  - **Implications**: What were the consequences?

- **Feelings**: What were you thinking and feeling?
  - **Feelings & thoughts THEN**: What were you thinking and feeling then?
  - **Feelings about outcome NOW**: What were you thinking and feeling now?

- **Evaluation**: What didn't work?
  - **References**: What were the reasons for the failure?

- **Conclusion**: What you have learned
  - **References**: What were the lessons learned?

- **Action Plan**: If repeated, what you would do
  - the same - References
  - differently - References

- **Conclusion**: What you could have done differently
  - **References**: What were the alternatives?

**NMIH102 : Week 9 Monday**
**Case Study Report**
**2000 wds**
**Weighting 35%**

Judy Couchman: Learning Development, Bega
Your instructions ...

✓ You need to follow & use suggested headings and format.
✓ Provide a 100 word abstract of the events as part of the introduction.
✓ You must NOT use dot points in any part of the report.
✓ You MUST NOT use any additional headings.

Instructions (con.)

✓ The ‘resolution’ is crucial to your discussion because this is where you indicate what should be done about the issues you raise in the body of the report based on the ANMC codes.

✓ Draw on at least 10 different (relevant & current) references (texts, e-readings, subject resources).

✓ Demonstrate that you understand and can apply the assigned readings.

Your abstract ...

• Your abstract should provide a a description of the events
• 100 words – so be succinct

Introduction (up to 300 wds)

- Identify the story briefly in an abstract
- What is the one big idea you want to get across in this?
- What are your main points?
- How will they be presented?
- How will you connect each point you wish to make?
Structuring your discussion

1. Ways of knowing
2. Ethical issues
3. Legal responsibilities
4. Resolution

Summary
References

Ways of knowing

• Outline the fundamental patterns of knowing in nursing
  — There are \( x \) fundamental patterns of knowing in nursing: \( a, b, c \) and \( d \). \( A ... \)

• Explain how they apply here
  — Melanie should have applied \( A ... \) In addition, the application of \( B \) would have given Melanie \( ... \) Further, \( C ... \)

Ethical issues

• What are the key ethical issue here?
  — The key ethical issues for Melanie here are ...
• Define the bioethical principles commonly utilised in healthcare & explain how they apply here
  — The bioethical principles in healthcare are ... The principles of bioethics which assist understanding these issues are \( P1, ... \) This is because ...
• How could specific ethical principles assist in decision making here?
  — \( P1 \) could assist in helping decide ...

Legal responsibilities

• What are the key legal issues in this case study?
  — legislation
  — case law or
  — common law principles
  — The key legal issues in this case study are ...
• What common law principles and/or legislation define Cameron’s legal responsibilities
  — Melanie’s legal responsibilities are firstly, ... which are defined by ... Secondly, Melanie is responsible for ...
Resolution

- What (if anything) should Melanie have done instead OR Why are her actions acceptable?
- What is the rationale for your recommendations?
  - **Firstly, Melanie should have ... because ... Secondly, she should have ... The reason for this is ...**
- Justify your decision with reference to the ANMC Code of Professional Conduct for Nurses, ANMC Code of Ethics & ANMC National Competency Standards for the Registered Nurse
  - **The recommendations above reflect ... of the ANMC Code of Professional Conduct for Nurses.**

Your summary (conclusion)

- Draw together your discussion’s main points
- Make it clear how these support your proposed resolutions
- **No new evidence / ideas**

See your Marking guide!

DON’T FORGET!

To get the best grades you can ...

Come & see me ... **EARLY!**

Wednesdays, Thursdays, Friday mornings!

**BOOK ON BLUE WINDOW SHEET**
Next week?

• MID-SEMESTER BREAK!

• Week 8
• Remaining assignments
• Week 9
• Exam preparation?
  – How to save time
  – How to do it better