



University of HUDDERSFIELD

University of Huddersfield Repository

Chappell, Michelle and Covill, Carl

Simulation not for Dummies 2: Preparing students for primary care experience

Original Citation

Chappell, Michelle and Covill, Carl (2010) Simulation not for Dummies 2: Preparing students for primary care experience. In: 2010 UK Simulation in Nursing Education Conference, 9-10 June 2010, University of Huddersfield. (Unpublished)

This version is available at <http://eprints.hud.ac.uk/id/eprint/7920/>

The University Repository is a digital collection of the research output of the University, available on Open Access. Copyright and Moral Rights for the items on this site are retained by the individual author and/or other copyright owners. Users may access full items free of charge; copies of full text items generally can be reproduced, displayed or performed and given to third parties in any format or medium for personal research or study, educational or not-for-profit purposes without prior permission or charge, provided:

- The authors, title and full bibliographic details is credited in any copy;
- A hyperlink and/or URL is included for the original metadata page; and
- The content is not changed in any way.

For more information, including our policy and submission procedure, please contact the Repository Team at: E.mailbox@hud.ac.uk.

<http://eprints.hud.ac.uk/>

Care Plan

Home visit reports

Occupational Therapist

Although the house bathroom and toilet are up stairs and ground floor toilet was fitted during her sister's period of illness, the home visit demonstrated the Zimmer will fit into the toilet

It was established that there is space in the upstairs bath room for a small dining chair. A rail is required at the wash basin.

DN to assess if continence is an issue.

Home visit reports

Physiotherapist

You were concerned about the carpet and other potential obstacles. Need to undertake a falls assessment before discharge from the community team.

Miss Rutherford needs a Zimmer frame to walk independently you intent to provide one for the ground floor and one to be kept at the top of the stairs for use on the first floor.

Activity of daily living	Usual	Current
Breathing	No problem Has never smoked Had pneumonia as a child	No problems expressed although a little short of breath due to the anaemia
Eating and drinking	Has always prepared food from fresh ingredients, took the role of cook in the family home following the death of her mother,	Feels she is not eating as well recently. Does not feel like cooking for only herself. Skips meals as cannot be bothered to eat alone
Washing and Dressing	Has always managed her own personal hygiene, likes to bath on alternate days.	Reports that becomes tired easily and it takes longer than it used to. Finds the bathing more difficult due to the pain and shortness of breath.
Sleeping	Has always slept well usually goes to bed at 10.30 following the 10 O'clock news	Wakes up to use the toilet finds it difficult to get back to sleep, becoming more of an issue.
Mobility	Has used a stick for the past 6 months. Walks to and from the local shops or church or library on a daily basis	Mobility is greatly reduced, holds the furniture at home when she feels unsteady, or uses a stick. Has scatter rugs and uneven

		stair case. The lighting in the house is poor
Elimination	No problems	Has been constipated for the last 3 days. Has complained of difficulty getting up and down the stairs, so reduced her fluid and dietary intake to reduce the frequency of the trips
Communication	No problems, has been wearing glasses for as long as she can remember	Feels that her eyesight and hearing are not as keen as they used to be but not causing her problems on the ward.
Maintaining body temperature	Miss Rutherford reports no problems; she does not like to be sat in a draft.	Temperature requires monitoring – although no problem identified. Has an open fire at home and does not have central heating but has a gas fire in the bed room. Likes to wear several layers of clothing, even in summer.
Maintain a safe environment	Feels she has no problems No problem identified. Has the occasional headache-takes Paracetamol with good effect. Easily tires needs B12 injections	Admitted following a fall at home. Has had increased joint pain and experiencing pain at the site of her head wound. Not managing with up keep of the house for last few months. Noticed herself that having problems with medication taking and moving around the house.
Working and Playing	Retired from teaching 30 years ago Likes to attend church on Sunday. Has always been involved with community events	Has not been getting out as much over the last few months. Feels her role in the community is reducing and she is becoming more introvert.
Expressing sexuality	Has never been married but feels she is comfortable with herself and has no concerns about her relationships	Feels she is not as able to maintain her physical appearance to its usual standard. Has found that whilst she has been less active those closest to her have remained supportive. Not taking as much pride in her appearance due to

		difficulty with the putting on and taking off of clothing.
Dying	No issues	Feels that with her family all passed on it is natural that she should be next .

Who may be involved key persons? What are their roles in the care package.

Dietician

Podiatrist

Physician

Staff Nurse

Pharmacy

Home Care Manager

Miss Rutherford

Mrs Swan

Voluntary agency

Social worker

Occupational Therapist

Physiotherapist

District nurse

Community matron.

Rehabilitation at home team.

Intermediate care team.

Respite care.

