

Contextualized Curriculum

for Adult Learners in Math and Literacy

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Shifting Care

Print:   

The importance of clear and comprehensive oral communication in nursing.

Industry Sector: [Healthcare](#)

Content Area: [Literacy](#)

Core Topic: [Oral communication](#)

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Common Core State Standards

SL.6.4: Present claims and findings; sequencing ideas logically and using pertinent descriptions, facts, and details to accentuate main ideas or themes; use appropriate eye contact, adequate [volume](#), and clear pronunciation.

SL.11-12.4: Present information, findings, and supporting evidence, conveying a clear and distinct perspective, such that listeners can follow the line of reasoning, alternative or opposing appropriate to purpose, audience, and a range of formal and informal tasks.

SL.11-12.6: Adapt speech to a variety of contexts and tasks, demonstrating a command of formal English when indicated or appropriate.

Adult Basic Education Standards

Oral Communication Standard 1: Learners will speak with ease and confidence for a variety of purposes.

Critical Thinking Standard 1: Learners will solve problems by comprehending, comparing, applying, analyzing, evaluating, and synthesizing information.

Industry Overview

Healthcare in America

From neonatal nurses to radiology technologists, medical coders to medical office assistants, health educators to home care aides, the healthcare industry provides a vast and diverse array of services to individuals at every stage of life. Providing [nearly 17 million jobs](#) and accounting for an estimated [\\$18 billion of the U.S. GDP in 2009](#), healthcare is the nation's largest industry. In Massachusetts, in particular, healthcare accounts for more than 15% of employment (compared with 12% nationally), accounting for approximately [one in six jobs](#). With an aging baby boomer population that is living longer, there is greater demand for more and higher quality preventative and long-term healthcare across the United States. [With eight of the 30 fastest growing occupations](#), healthcare is predicted to be one of the [fastest growing industries](#) both nationwide and in Massachusetts between now and 2020.

Careers in Healthcare

The healthcare industry includes a vast array of jobs related to planning, managing, and providing therapeutic services, diagnostic services, health informatics, support services, and biotechnology research and development. This industry includes five career pathways:

- therapeutic services, which includes professionals who work directly with patients to improve their health by providing direct care and treatment for patients (for example, a nurse or a physical therapist assistant);
- diagnostic services, which includes professionals who plan and conduct tests to detect and diagnose diseases and injuries, and use test results to plan treatment (for example, a radiologic technologist or a sonographer, who perform diagnostic imaging examinations, such as X-rays or ultrasounds);
- health informatics, which includes professionals who compile and manage health information and records (for example, a medical records and health information technician, who organizes and manages patient databases; higher-level positions, such as administrators of healthcare facilities or departments, are also included in this pathway);
- support services, which includes professionals who provide assistance to other medical professionals, allowing them to do their jobs in diagnosing and treating patients or supporting therapies (for example, food service workers and nutritionists ensure that patients' meals are healthy and meet dietary guidelines); and
- biotechnology research and development, which include careers that involve bioscience research; while many of these professions require doctoral or medical degrees, some entry-level opportunities in the field require only an associate degree (for example, food and agricultural science technicians).

Mathematics and Communication Skills Needed in Healthcare

The growing complexity of the healthcare industry, including changing technologies, requires workers to continuously upgrade their skills. In addition to technical skills specific to their job, mathematics and literacy skills are crucial for success in all occupations across the healthcare industry.

Communication: First and foremost, no matter the job, good healthcare practitioners are committed to giving patients the best care available and keeping abreast of health research and developments in the field. All workers need to be able to read medical journals and understand medical terminology and vocabulary, as well as read and write literate emails to co-workers/supervisors. Many healthcare jobs also require the ability to read and interpret charts and access and interpret electronic medical records in order to provide quality care.

Many health careers, especially—but not exclusively—those in therapeutic services—involve interacting with patients and their families, in some cases working with people who may be sick, disabled, or dying. Even support staff in a medical office or hospital require effective oral communication skills as well as compassionate interpersonal skills such as the ability to listen and talk to patients to assess needs. Effective communication with colleagues as well as patients is crucial. Healthcare is increasingly a group activity, in which a patient's recovery depends on how well all members of a healthcare team perform specific function, and how well they communicate and collaborate with one another.

Mathematics: From reading charts to interpreting data to measuring and administering correct medicine, basic mathematics skills are essential for providing quality care across most healthcare occupations. Nurses, for example, use mathematics for calculations in all areas of their duties. They use mathematics to calculate dosages, caloric requirements for individual patients, calibrate

equipment, and interpret lab results. Charts and patient data are often presented as decimals or percentages, and a nurse must be able to convert between the two, thus requiring competency in understanding and using ratios, proportions and percentages.

Much of modern medicine is based on statistics, and all workers in the industry should have a basic understanding of how statistics are used to influence medical trends. Nurses, for example, need to be aware of the statistics behind prescribing medications and possible side effects or complications. They might use statistics to counsel patients on diagnoses or prognoses, or in gathering patient histories.

Career Opportunities in Healthcare with Education from Community Colleges

Massachusetts Community Colleges play a crucial role in preparing students for careers in health sciences across all sectors of the industry—therapeutic services, diagnostic services, informatics, and support services. All 15 community colleges offer pathways to nursing careers, the largest occupation in the healthcare industry. Additionally, Massachusetts Community Colleges offers associate degree and certificate programs that prepare students to enter occupations across all sectors of the industry, for example:

- *Therapeutic services:* registered nurse, practical nurse, nursing assistant, certified nurse's aide, massage therapist, fitness trainer and instructor, dental hygienist, dental assistant, [pharmacy technician](#), physical therapist assistant, occupation therapy assistant, respiratory assistant, medical assistant
- *Diagnostic services:* radiologic technologist and technician, radiographer, surgical technologist, sonographer, phlebotomist, paramedic, polysomnographic technologist and technician, medical and clinical laboratory technician, magnetic resonance imaging technologist, nuclear medicine technologist, veterinary technologist
- *Informatics:* Medical record and health information technician, medical coder, medical interpreter, medical biller, medical transcriptionist, health educator

Recent Career Opportunities in Massachusetts

The following is a sample of healthcare job listings in Massachusetts that require an associate's degree or certificate:

- Registered Nurse (RN), AmeriCare At Home, Boston, MA [[show](#)]
- Medical Technologist, Emerson Hospital, Concord, MA [[show](#)]
- Ultrasound Technologist, Brockton, MA [[show](#)]
- Licensed Practical Nurse, Hologic, East Watertown, MA [[show](#)]

Employment Outlook for Healthcare

America's aging population is now nearing or entering retirement (opening new jobs), and will continue to require more services and the increased use of innovative medical technology for diagnosis and treatment. As a result, healthcare is one of the fastest growing industries both nationwide and in Massachusetts, where growth is [even higher than nationally](#). For example, in 2010, Baystate Health of Springfield, which employs more than 10,000 across its Western Massachusetts system, said that it would likely need to hire about 15,000 people between 2010 and 2020 to replace retiring workers and meet increased demand.

One important factor in the healthcare industry is the financial pressure on hospitals to focus on efficiency and profitability, which results in discharging patients as soon as possible. These financial pressures, along with increased healthcare coverage under federal law, will likely result in a growth in out-patient services in the healthcare industry, such as [rehabilitation](#) clinics, long-term care facilities, and home care programs. As a result, occupations experiencing the largest growth include home care aides, physical and occupation therapist assistants, dental hygienists, and medical assistants.

Emerging careers in Health/Information Technology (HIT): Estimates based on data from the Bureau of Labor Statistics (BLS), Department of Education, and independent studies indicate a shortfall of approximately 51,000 qualified Health IT (HIT) workers who will be required over the next five years to meet the needs of hospitals and [physicians](#) as they move to adopting an electronic healthcare system, facilitated by the Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009. The HITECH Act is a key component of healthcare reform. The Act encompasses interoperable electronic health records (EHRs) including computerized systems to order tests and

medications, and support systems to aid clinical decision making and the development of a national health information network to permit the secure exchange of electronic health information among providers. The Congressional Budget Office estimates that the incentive mechanisms in the HITECH Act will increase HIT adoption rates from 45 percent to about 70 percent for hospitals and from 65 percent to approximately 90 percent for [physicians](#). To support job growth in this emerging career field and ensure the adoption of EHRs, new types of workers are needed to facilitate information exchange across healthcare providers and public health authorities, and assist in redesigning workflows within healthcare settings to maximize the quality and efficiency [benefits](#) of EHRs, while maintaining privacy and security of health information and records. To that end, the Department of Health and Human Services has embarked on an initiative to build the HIT workforce with community colleges as the primary training ground for these new workers: (1) Practice workflow and information management redesign specialists; (2) Clinician/practitioner consultants; (3) Implementation support specialists; (4) Implementation managers; (5) Technical/software support staff; and (6) Trainers. The average hourly earnings for community college program graduates are expected to be in the target range of between \$12.46/hour to \$20.25/hour.

Resources:

Healthcare Employment Outlook:

- [Massachusetts Career Information System](#): Massachusetts-specific information on careers which can be used to look at different industries, occupations within those industries, and the skills and education needed to work in these jobs
- [WorkKeys Occupational Profiles](#)
- [Bureau of Labor Statistics](#)

Healthcare Career Information:

- [Top 5 Reasons to Work in the Healthcare Field, About.com](#)
- [Break Into a Healthcare Career, About.com](#)
- [Healthcare Initiatives, US Department of Labor](#)
- [Six Healthcare Careers that are Booming, Yahoo! Education](#)
- [Career Clusters in Health Sciences, National Association of State Directors of Career Technical Education Consortium](#)
- [Explore Health Careers, American Dental Education Association](#)

Massachusetts Healthcare Job Listings:

- [Massachusetts Healthcare Jobs, Jobs.net](#)
- [Healthcare Jobsite, Beyond.com](#)

Workplace Scenario (8th Grade Level)

This scenario is based on the work of a [post-op ward](#) nurse. For more information, view [this video](#).

You are a nurse at a large hospital in Central Massachusetts. You work in an area of the hospital for patients who are recovering from surgery. You love your work, but it is busy and can be very stressful at times. The most common way nurses share information about patients is by talking to each other. Talking is an important form of communication. When talking to other nurses you must be accurate, clear and share the information at a good time. This is because in healthcare, patient's lives can depend on how well information is shared. Nurses need to talk with doctors and other nurses and health care staff. For example, nurses usually work one of three periods, or shifts, at a hospital. Nurses ending their [shift](#) have a meeting with the nurses starting the next [shift](#). At the meeting, they discuss each patient and what type of care is needed by the nurses starting a [shift](#). When you finish your [shift](#), you are responsible for telling the nurse on the next [shift](#) about all of the patients you take care of. This means you share both medical facts about the patient and your observations of how well the patients are doing.

Today you have been caring for a 50-year-old woman who has just had a [radical mastectomy](#) to treat her cancer. This means she had all of her left breast removed. The patient has decided not to have surgery to rebuild her breast. To help keep the cancer from growing back, she will have medicine

injected through [chemotherapy](#) beginning next week. You learned that your patient is divorced and has two teenage children who live with her. The patient expressed to you a concern about how she looks and how she will get used to her new body. She asked you, "Have you taken care of other patients who had a breast removed and how did they do it?" You answered her by telling her that you have cared for many patients who had a breast removed. You tell her about resources that might help her during her treatment and recovery. You suggested that she might want to speak to one of the hospital's [social workers](#) before she begins [chemotherapy](#). You explain that [chemotherapy](#) can make your hair fall out and she might want to get a wig. You suggest that she find cancer support groups in her community, and that she find help in how to talk with her children about what is happening and her needs. You also suggest that she make plans for how to travel back and forth for [chemotherapy](#) appointments at the hospital. Finally, you suggest to your patient that she get advice about an artificial breast and a special bra to hold it.

At the end of your work period, you meet with Manny, the nurse who will be taking care of your patients during the next [shift](#). During the meeting, you tell Manny about the patient who had a mastectomy. You share information about the patient's temperature, blood pressure, and how her scar is healing. In addition, you tell Manny about the patient's level of pain and the schedule for giving her pain medications. Finally, you share with Manny the patient's concerns about her the loss of her breast and the [chemotherapy](#). You ask him to talk with the patient. You think they may even want to ask a social worker to come speak with the patient.

Workplace Scenario (High School Level)

This scenario is based on the work of a [post-op ward](#) nurse. For more information, view [this video](#).

You are a nurse at a large teaching hospital in Central Massachusetts, working on a [post-op ward](#) to care for patients who are recovering from surgery. You love your work, but it is busy and can be very stressful at times. Since most communication about patients is done verbally, it is essential that oral communication is accurate, timely and clear because in healthcare, lives can depend on it. Nurses need to communicate with [physicians](#), specialists and other nurses. For example, nurses meet to hand-off patients from one [shift](#) to the next. When you go off duty, you are responsible for updating the nurse on the next [shift](#) about all of the patients under your care. This update is comprehensive and includes both objective clinical information and more [subjective](#) information about how well the patients are doing.

Today you have been caring for a 50-year-old woman who has just had a [radical mastectomy](#). She had her left breast removed. The patient has opted not to have [reconstructive surgery](#) and will be receiving [chemotherapy](#) beginning next week. You learned that your patient is divorced and has two teenage children who live with her. The patient expressed to you a concern about her self image and how she will cope with her new body. She asked you, "Have you taken care of other mastectomy patients and how did they do it?" You answered her by telling her that you have cared for many patients recovering from a mastectomy and telling her about resources that might help her during her treatment and recovery. You suggested that she might want to speak to one of the hospital's [social workers](#) about getting a wig before she begins [chemotherapy](#), that she seek out support groups in her community, and that she seek help in how to talk with her children about what is happening and her needs. You also suggest that she make plans for transportation back and forth for [outpatient chemotherapy](#) appointments. Finally, you suggest to your patient that she get advice about a breast [prosthesis](#) and appropriate undergarments.

At the end of your [shift](#), you meet with Manny, the nurse who will be caring for your patients during the next [shift](#). During your report on the patient recovering from her mastectomy, you tell Manny that you completed a full initial assessment of the patient. You tell him what you feel is important for him to keep an eye on and what has been happening with the patient's [vital signs](#), drainage, intake and output. In addition, you tell Manny about the patient's level of pain and the schedule for pain medications. Finally, you share with Manny the patient's concerns about her new body and treatment, and ask that he follow up with the patient about her concerns. You think that they may even want to ask a social worker to come speak with the patient now that the patient has had some time to recover from her surgery.

Core instructional context

Introduce the lesson by showing the video [Auditory and Speech Ability](#) from the Bureau of Labor Career One Stop website. [Brainstorm](#) with students other types of jobs not mentioned in the video where listening and speaking are important. If you plan to use the contextual scenario from this module with your students, guide them to discuss the importance of communication skills for nurses or others in the medical field.

Point out that speaking and listening are at the heart of much human interaction and good communication skills are an important aspect of employability in most professions, and they are especially critical in nursing. Not only must nurses listen to other nurses, staff and doctors but also they must also listen carefully to patients or their families in order to report symptoms or complaints. Adults typically view speaking and listening as areas of strength because of the level of experience they bring to these activities. They may be used to speaking with ease and confidence and reporting information in a logical sequence. The more challenging aspects of speaking and listening are related to this experience since many adults must unlearn poor habits in both areas. These are skills we learn in the first year of life, which means that each individual may have spent a lifetime learning poor habits that must be unlearned. For example, few adults listen attentively enough to be able to fully comprehend, analyze and synthesize what they have heard and to recall and apply it later in critical situations. In addition, most adults have learned poor speaking habits that need to be replaced with good ones, including the use of filler words or phrases or using nonstandard language in formal situations such as working with patients, other nursing staff or doctors. Since speaking and listening skills are so important in the field of nursing, nurses must develop these skills to do their jobs effectively. Fortunately, these are skills that can be improved with practice.

Poor listening skills contribute to poor comprehension and ability to apply knowledge. In order to comprehend, analyze and synthesize information, students must listen effectively.

A good listener uses the following techniques:

- maintaining eye contact with the speaker,
- avoiding distractions in the surroundings,
- avoiding interrupting,
- sitting or standing still,
- nodding his or her head or using other nonverbal cues to show understanding,
- maintaining focus by avoiding internal distractions or thoughts,
- taking brief notes,
- listening for subtext while testing assumptions,
- testing his or her understanding by repeating instructions or key details, and
- asking clarifying or other appropriate questions when the speaker has finished.

Good speaking skills are critical to good communication and require the speaker to organize his or her thoughts before speaking.

Good speakers ask themselves questions such as:

- Who is the audience?
- What vocabulary is appropriate for the audience?
- What is my goal?
- What are the important details that I need to share?
- What is the most logical sequence?

A good speaker:

- organizes his or her thoughts before speaking,
- uses clear and concise language without including extraneous information,
- delivers main ideas and supporting details in a logical sequence,
- speaks clearly and practices good enunciation,
- uses correct pronunciation,
- uses correct standard English,
- uses appropriate [volume](#) - speaks neither too loudly nor too softly for the environment,

- speaks confidently and avoids filler sounds, words or phrases, and
- maintains appropriate level of eye contact with listener.

Critical thinking is supported by good listening skills that enable the listener to comprehend new information, to compare or contrast what is being heard to similar situations in order to deepen comprehension, to apply the new information, and analyze or evaluate situations or information. Critical thinking skills enhance the learner's ability to organize his or her thoughts before speaking.

Example Activity

Tell students: Read the scenario aloud in your small group or read it silently. Place yourself in the situation of the nurse going off [shift](#). In that role, plan what you will tell the social worker about the patient who has had a mastectomy. To help with your plan, think about specific information and list key ideas you want to share with the social worker. Remember to organize the information so that it makes sense and there are no misunderstandings about what the patient has expressed and what you think the patient may be concerned about. Write out your thoughts and practice what you will say aloud with another [colleague](#) or a friend until you are confident in delivering the information. Do not memorize it since you will rarely have time to do this on the job. When you are ready, create a podcast of what you plan to say paying attention to the attributes in the assessment rubric. Record your podcast using your cell phone or your computer and email it to your instructor. Review the class rubric to be sure you are meeting the criteria.

Assessment

A performance rubric is a good assessment strategy for all students but especially adult students. Use a rubric developed for use in your own course or for your department, or you might adapt one you find on the Internet such as one of these:

- [Informal Speaking and Listening Rubric](#), Nelson Education Ltd.
- [Oral Presentation Rubric](#), ReadWriteThink
- [Oral Communication VALUE Rubric](#), American Association of Colleges and Universities
- [Oral Communication Rubric](#), Piedmont Community College

Contextualized learning activities

1. Role-play activity: Have students pair up with one role-playing the nurse who is going off [shift](#) and one playing the nurse who is coming on [shift](#). Allow time for the first student who is role playing the nurse going off [shift](#) to read three or four prepared patient scenarios and prepare to tell the second student about the patients who will be in her care. The first student tells the second student the key information about each patient. The second student should listen carefully and repeat the key information she heard about each patient. Role playing can be videotaped for feedback by the instructor or conducted as a live activity in front of the class for feedback by students and the instructor.
2. Practice listening skills
 - The instructor prepares podcasts demonstrating a report by a nurse going off duty and sharing information with an incoming nurse. Students listen and then summarize the key information they heard about each patient which is checked by the instructor. Alternately, the instructor can prepare an online self-assessment quiz for students to complete. The self-assessment quiz will be more valuable if corrective feedback is provided for each incorrect response.
 - In groups of three or four, one student is designated as the artist who will draw an image based on verbal instructions from the rest of the group who are viewing a picture of the image. The object can be a geometric shape or other easily replicated image. Group members can take turns being the artist using different images for each turn. Alternately, the instructor can give the directions as students draw at their seats. At the end of the activity, the instructor leads a class discussion to debrief why groups were successful or not in replicating the images.

3. Practice speaking skills by creating a podcast:

- A student records audio of himself or herself sharing patient information including complaints, dressing changes and routine care with the incoming nurse at a [shift](#) change.
- A student records audio of himself or herself sharing information with a patient about his or her care as if responding to a question the patient has asked.
- A patient is complaining of pain but he received an injection only 30 minutes previously for pain. How will you reply to the patient? Create a podcast of your response.
- You are going off [shift](#) and are reporting to your replacement on the next [shift](#) about Patient A who is on an IV antibiotic which was changed five hours previously. The patient is scheduled for an MRI in the afternoon. Plan what you will say to the nurse coming on [shift](#) by creating a video or a podcast.
- Patient B has complained about your work with him saying that you caused him a great deal of unnecessary pain when changing dressings on an infected wound. You are sure you followed protocol in changing the dressing and even checked your manual to be sure. What will you tell your [supervisor](#)? Create a podcast or prepare your response to demonstrate in class.

Contextualized test items

1. You responded in the following manner to Patient C when asked if the doctor had left orders for him to be discharged. Are these responses appropriate? Use the assessment rubric to determine why or why not? (This activity will be more useful if the responses are recorded for the students to listen to before responding.)
 - I don't know. I haven't seen the doctor yet. (This response is inappropriate. It does not include details or helpful information.)
 - She don't tell me. She would leave it with the head nurse. (This response is inappropriate. The first sentence is grammatically incorrect and not standard English. This response does not include details or helpful information.)
 - Uh, well, actually, she is still making rounds, I think. (This response is inappropriate because it contains several fillers.)
 - [mumbles] Probably, have to check. (This response is inappropriate because it not spoken clearly.)
 - I'll check for you and let you know as soon as I finish here. (This response is appropriate and satisfactory according to the rubric.)
2. Students view the YouTube video [Shift Report Gone Wrong](#) and identify areas for improvement in communication during the [shift](#) change.
3. Students listen to an instructor-prepared podcast of a [shift](#) change report and identify areas for improvement in speaking.

Contextualized project

Given a description of a nurse's daily activities, students working in pairs analyze and synthesize the activities of the day in order to determine the key information that they need to share with staff at the change of [shift](#) or that they need to share with the nurse [shift supervisor](#) or with the doctor. After reviewing "A Day in the Life" by Nurse Alice Smith, the team prepares a script for the information they

would share with the person who takes over at [shift](#) change. They will take turns being the speaker and the listener. If possible, a third person take a video of the pair (a Smartphone with video capability may be sufficient) during the role play as each person plays the role of speaker or listener. The video is emailed to the instructor. Alternately, the team will prepare to perform before the class who will have access to a copy of A Day in the Life and can critique the information the team selected to share with the next [shift](#) about these patients.

A Day in the Life by Alice Smith

0645-0715: All the nurses from my [shift](#) listen to report for the whole floor. The previous [shift](#) tapes their reports and they cover the floor while we get report. This way we all kind of know what is happening on the floor just in case something crazy happens. So this is when I grabbed a cup of coffee and a quick breakfast. I had 8 patients – John A, Mary B, Josiah M, John C, Alex W, Sarah H, Harold G and Margaret H. – and I noticed that two of the male patients have the same first names, so I need to keep them straight.

0720: I met with the nurse handing off my patients to get any updates.

0725: I checked charts and old orders briefly to make sure nothing is being missed.

0745: I walked down the hall to meet my patients. Usually, I just stop by briefly to let them know I'm on [shift](#) for the day.

0800: One patient (John A) was going to dialysis so I gave him his meds before he left at 0830 and I finished his paperwork. After that, then I prepared meds for the next round.

0830-1000: I checked labs, passed out meds and completed patient assessments. I was interrupted several times to answer phone calls from the lab and families. I scheduled x-ray for Patient Josiah M. As I finished that his family called for an update on his condition which was unchanged since the night before, but I reported that he was scheduled for an x-ray later to determine whether he had a rib fracture as the doctor expected. I also discovered a bad IV which needed changing on Patient Mary B. I had a critical lab values called on Patient Sarah H. I found the doctor to notify him of the lab values (this has to be done within 30 minutes of the lab call.) Patient Alex W. was discharged, and I finished his paperwork and went over his orders with him one more time before he left.

1000-1100: I checked charts and charted all activity through the morning.

1100-1230: I gave noon meds and insulin to the two patients who needed it, Mary B and Margaret H. I also covered for nurses who were at lunch.

1300-1330: I have my lunch. (I don't always have time for lunch.)

1330-1500: A new patient was admitted, Patient Daniel J. so I took care of the admitting forms for the floor and received the patient information from Admitting. I spent some time with him and settled him into his bed. He is worried because his family was not expecting the doctor to send him directly to the hospital from his office. I talked with him for a bit to be sure he was not overwhelmed. I checked charts and charted activity through 1500. Then I changed the dressings for patient John C. and restarted the IV. Several patients were due pain meds. There were additional phone calls to answer. I called respiratory for breathing treatments for Harold G. as ordered by the doctor. John A returned from dialysis. I checked his blood pressure and gave him his meds. John A's family appeared and asked for an update on his condition. I told them he had been to dialysis and that the doctor would have a report when he made rounds later in the day. Other patients had families visiting and I answered questions for them, typically about when the patient will be discharged or what will happen next for the patient. I pulled patient Margaret H. back up in the bed. (She slips down when in a partially upright position.)

1500-1600: I did patient assessments (1500 assessments).

1600-1800: I gave meds to all my patients and took care of insulin for the two patients who needed it. I pulled patient Margaret H. back up in the bed, again. I fluffed pillows, and tried to spend time with my patients. I called the doctor for Harold G. who is worried because he doesn't feel he can get a good breath and wants to talk to the doctor. I then taped my report for the day.

1800-1900: I tie up any loose ends and make sure I am not leaving anything undone for the oncoming [shift](#). Check through my charts and MARS (Medication Administration Records) to be sure nothing was forgotten. I finish charting for the day.

1900-1945: I waited for the oncoming [shift](#) to come out of floor report, gave updates to the nurse taking over for me and told my patients goodbye.

Additional or extension activities, multimedia, readings and/or resources

Ask students to review postings at allnurses.com or NurseTogether or other nurses' online forums to gain an understanding of the kinds of communication nurses need to share with patients, other nurses, hospital staff, administrators and medical staff.

[Speaking and Listening Competencies for College Students, National Communication Association](#)

[Communication in Nursing, NurseTogether](#)

Watch nursing students demonstrate the right and wrong way to deal with angry patients in [The Angry Patient](#) YouTube video for an in-class demonstration and prepare a critique.

Students view the YouTube video [Bedside Report – as the Shift Changes](#) and note speaking and listening skills used by the nurses during the bedside [shift](#) report.

[The Readability Test Tool](#) can help you determine whether the scenario in this module is at an appropriate reading level for your students. Type in the text in the space provided using the middle tab.

Instructor Adapted Classroom Materials

[Shifting Care ESL Introductory Lesson Plan](#), Holyoke Community College, ESL

[Shifting Care ESL Lesson Plan](#), Quinsigamond Community College, ESL

[Shifting Care Lesson Plan](#), Middlesex Community College, ABE/GED

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