

DEGREE CURRICULUM NURSING CARE IN ELDERLY ADULTS

Coordination: BOTIGUE SATORRA, MARIA TERESA

Academic year 2022-23

Subject's general information

| Subject name | NURSING CARE IN ELDERLY ADULTS | | | | | | |
|------------------------------------------|--------------------------------------------------------------|--------------------------------------|------------|-----------------------------|----------------------|----------------------|--|
| Code | 100471 | | | | | | |
| Semester | 1st Q(SEMESTEF | 1st Q(SEMESTER) CONTINUED EVALUATION | | | | | |
| Typology | Degree | | Course | rse Character Modality | | Modality | |
| | Double bachelor's degree: | | COMPULSORY | | Attendance- based | | |
| | | | 3 | COMPULSORY | | Attendance- based | |
| | Grau en Inferm | neria (R 2016 - lg) | 3 | COMPULSORY Attendance based | | Attendance- based | |
| Course number of credits (ECTS) | 6 | | | | | | |
| Type of activity, credits, and groups | Activity type | PRALAB | PF | PRAULA 2.4 | | TEORIA | |
| and groups | Number of credits | 0.6 | | | | 3 | |
| | Number of groups | 12 | | 6 | | 2 | |
| Coordination | BOTIGUE SATORRA, MARIA TERESA | | | | | | |
| Department | NURSING AND PH | NURSING AND PHYSIOTHERAPY | | | | | |
| Teaching load distribution between | Face-to-face activi | Face-to-face activities (40%): | | | | | |
| lectures and independent student | - Master class (50%): 30 hours - Seminars (50%): 30 hours | | | | | | |
| work | Non-contact activities: independent work (60%): 90 hours | | | | | | |
| | Total dedication: 150h | | | | | | |
| Important information on data processing | Consult this link for more information. | | | | | | |
| Language | Catalan | | | | | | |
| Distribution of credits | 6 ECTS: | | | | | | |
| | - Master class: 50% | | | | | | |
| | - Seminars: 50% | | | | | | |

| Teaching staff | E-mail addresses | Credits taught by teacher | Office and hour of attention |
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Subject's extra information

We welcome you to the subject "Nursing Care in Elderly Adults" which is taught in the third year of the Degree in Nursing. The democratization of olders is a challenge for society that must respond to a group, the elderly, which plays an increasingly leading role and requires greater attention in the last years of life. Disorders and technologies associated with aging, disability, rehabilitation and the development of environments assisted or oriented towards tackling frailty and dependence are framed among the priority objectives of any political agenda or between the lines research priorities (Pla de Salut de Catalunya 2021-2025, Plan Estatal de Investigación Científica, Técnica y de Innovación 2021-2023 and the Horizon Europe Program 2021-2027).

Nursing professionals play a leading role in caring for the elderly. In fact, in its beginnings, geriatrics adopted as its fundamental motto the famous phrase of Abraham Lincoln (1808-1865): "In the end, the important thing is not to add years to life, but to give life to the years". It is in this context that care is essential to ensure the quality of life that allows us to move from the last years to death. In addition, the situation caused by COVID-19 has forced us to change our daily habits, showing vulnerability of the elderly and questioning the situation of nursing-homes. This fact forces us to rethink how we want care for the elderly and the importance of the quality of care and the role of nursing. We hope that the passage through the subject will make you a little more aware of the heterogeneity that accompanies old age. Only by understanding the different and complex processes of aging will it be possible to provide quality care.

Learning objectives

Learning outcomes: in relation to the different competencies, the student will be able to:

CE44:

- To distinguish the biological changes related to the aging process of the signs and symptoms characteristic of health problems.
- To identify how age-related biological changes affect the development of health problems and geriatric syndromes.
- To justify how social changes due to age (retirement, widowhood and dependency), as well as social aspects (social relations, economy and housing) influence the onset and evolution of health problems and geriatric syndromes.
- To classify the elderly into healthy, fragile, sick or geriatric people.

CE45:

- To recognize general biological changes and organs and / or systems related to the aging process.
- To identify the psychological changes (cognitive and affective) related to the aging process.
- To associate the behavior of the elderly with psychosocial theories.

CE46:

- To perform a comprehensive geriatric assessment (physical, functional, psychological and social).
- To identify the main health problem and the associated problems from the interpretation of the data collected in the geriatric assessment.
- To practice the specific skills required in the care process.

CE47:

- To plan individualized nursing care based on the Person-Centered and Evidence-Based Care model.
- To select interventions / care according to the area of care (community, nursing-homes or social health institutions).
- To identify the role of the caregiver and the elderly in solving health problems.
- To recognize the impact of interventions / care in terms of physical, functional, psychological and social health.
- · To identify community resources in problem solving.
- To determine comfort measures in the care of palliative and terminal patients.

Competences

Basic skills:

- CB2. To apply their knowledge to their job or vocation in a professional way and have the skills that are usually demonstrated through the development and defense of arguments and problem solving within their area of study.
- CB3. Ability to gather and interpret relevant data (usually within their area of study) to make judgments that include a reflection on relevant issues of a social, scientific or ethical nature.

Specific Competences:

- CE44. To understand the changes associated with the aging process and its impact on health.
- CE45. To identify the structural, functional, psychological and lifestyle changes associated with the aging process.
- CE46. To know the most common health problems in the elderly.
- CE47. To select interventions aimed at treating or preventing health problems and adapting to daily life through resources of proximity and support for the elderly.

Transversal Competences:

CT3. To acquire training in the use of new technologies and information and communication technologies.

Subject contents

Topic 1. General concepts. Demographic aging. Historical and cultural vision of olders

Causes and consequences of demographic aging. The social images of olders throughout history. Cultural responses to older people.

Topic 2. Biological and psychosocial theories of aging and structural, functional and psychosocial changes in relation to age

Biological theories of aging. Characteristics of the biological aging process. Psychosocial theories of aging. Aging and neuropsychological skills, personality and affectivity. Changes associated with age: retirement, widowhood and dependency.

Topic 3. Characteristics of the health-disease process in the elderly: geriatric assessment

Characteristics of the frail elderly person, sick and geriatric patient. The process of illness in the elderly: epidemiology and clinical process of diseases. Characteristics in the diagnosis and treatment of the elderly, and the most common

pathological processes in the elderly: stroke, neurodegenerative processes, diabetes, peripheral vasculopathies and inflammatory rheumatism and geriatric syndromes. Comprehensive geriatric assessment: general considerations and assessment scales.

Topic 4. Immobility syndrome

Concept, characteristics and epidemiology. Causes and risk factors. Consequences. Evaluation. Prevention, treatment and care. Specific resources and skills.

Topic 5. Pressure ulcers (this topic will be developed in the subject of Family and Community Nursing 2)

Concept, characteristics and epidemiology. Causes and risk factors. Consequences. Evaluation. Prevention, treatment and care. Specific resources and skills.

Topic 6. latrogenesis and treatment adherence

Concept, characteristics and epidemiology. Causes and risk factors. Consequences. Evaluation. Prevention, treatment and care. Specific resources and skills.

Topic 7. Malnutrition syndrome

Concept, characteristics and epidemiology. Causes and risk factors. Consequences. Evaluation. Prevention, treatment and care. Specific resources and skills.

Topic 8. Cognitive impairment and confusional syndrome

Concept, characteristics and epidemiology. Causes and risk factors. Consequences. Evaluation. Prevention, treatment and care. Specific resources and skills.

Topic 9. Instability and falls

Concept, characteristics and epidemiology. Causes and risk factors. Consequences. Evaluation. Prevention, treatment and care. Specific resources and skills.

Topic 10. The elderly and their family environment

Characteristics of the role of the elderly within the current family. Cultural, ethnic and gender differences in relation to the care of the elderly. Changes in the role within family members in caring for a dependent elderly person: Consequences of care in the lives of caregivers. Caregiver claudication. Educate the caregiver in their self-care. Active involvement of older people and their families in decision making.

Topic 11. Coordination of levels of care in the area of health

Organization of care for the elderly. Description of social and health resources. Coordination of social and health resources with other levels of care.

Topic 12. Institutionalization and quality of care: person-centered care

Problems of the elderly in residences. Caring for the dependent elderly person at home. Institutionalization, quality of life. Person-centered care

Topic 13. Attention at the end of life

Most prevalent symptoms at the end of life. The phase of agony. Approach to the palliative geriatric patient.

Topic 14. Ethical aspects in the care of the elderly. Elder abuse

Disability process and informed consent. Equitable use of resources by the elderly. Ethical issues in the patient with terminal illness. End-of-life care. Types of elder abuse, causes, risk factors, consequences, diagnosis and prevention. Most frequent problems arising from the absence of a primary caregiver and alternatives to this situation.

Methodology

Theoretical classes will be taught to the whole group and will consist of master classes with the support of audiovisual media. The seminars will be held in small groups with the active participation of the student and will be aimed at: case resolution, critical analysis and practices and simulations. These seminars include previous student work, as part of independent work.

Master classes and seminars can be recorded. Therefore, "The University of Lleida informs that, for teaching purposes, will record images that identify students and other people who participate in academic activities. The responsible person for processing these images is the University of Lleida (contact details of the representative: Secretaria General. Plaça de Víctor Siurana, 1, 25003 Lleida, sg@udl.cat; contact details of the data protection officer: dpd@udl.cat). These images are only used for teaching, assessing subject's knowledge and for teaching improvement projects.

The use of the images responds to the legal obligation of the UdL to teach and improve university teaching, in accordance with Organic Law 6/2001, of 21 December, on universities. The images, once recorded, are kept at least as long as they do not prescribe the corresponding actions and claims against the evaluation approved by the teacher. They are destroyed in the terms and conditions provided for in the regulations on the conservation and disposal of the administrative documents of the UdL, and the document evaluation tables approved by the Generalitat de Catalunya (http://www.udl.cat/ca/serveis/arxiu/). The UdL will never communicate this data to third parties, except in the cases strictly provided for in the Law. Interested people can access to their images; request rectification, deletion or portability; oppose the treatment and request its limitation, by writing to the address dpd@udl.cat. They can also submit a complaint addressed to the Catalan Data Protection Authority, through the electronic headquarters of the Authority (https://seu.apd.cat) or by non-electronic media".

Students must carry out a written work and oral presentation. There will be tutorials to follow them up.

Development plan

| ECTS | Face-to-face activities (40%) | | Non-contact activities: | Total dedication | |
|------|-------------------------------|-------------------|---------------------------|------------------|--|
| E015 | Master class (50%) | Seminars (50%) | independent work (60%) | Total dedication | |
| 6 | 30h | 30h | 90h | 150h | |

Evaluation

1. CONTINUOUS EVALUATION:

Written test: corresponds to 40% of the final grade

All the theoretical contents presented in the master classes and seminars will be evaluated through a final exam. This will consist of 60 multiple choice questions where only one will be correct and 0.25 points will be deducted for each wrong answer (for each correct question, not the total). The minimum grade to pass will be a 5 and will be available of 70 min. for its realization. Check the date, start time and classroom in the exam calendar.

If this exam is failed, there will be another exam, following the same criteria as above. Check the date, start time and classroom in the exam calendar.

• Seminars: corresponds to 20% of the final grade

After the master class, the seminar that will take place the following week will be posted in the "Resources" section, detailing the development of the session, the necessary previous work and the evaluation. The seminars will be divided into:

- Theoretical-practical seminars. The student will acquire knowledge and skills about specific care. The active participation of the student and his attitudes will be evaluated.
- Exercise resolution seminars and clinical cases. They will have to work individually before the session and in this

one the sharing will be done with the rest of the classmates. It will be evaluated individually according to the evaluation criteria specified in each seminar. Also, the active participation of the student and his attitudes will be evaluated.

The marks of the seminars will be posted in the evaluations section, so that the evolution can be known. If you have any questions about the mark, please contact the teacher of that seminar directly. At the end of the course, the final grade of the seminars will be posted. It should be noted that this evaluation is continuous, therefore, the final grade will not correspond to the average of all grades but to the evolution in them. In addition, as a continuous assessment, attendance is mandatory and there is no option for recovery.

- · Group work: corresponds to 40% of the final grade
- Small group seminars (SIMULATION): corresponds to 15% of the final grade

These seminars will be worked on in groups (you will find the planning in the resources section). It will be necessary to plan, execute and evaluate a comprehensive geriatric assessment of a clinical case. The planning and evaluation part will be assess in group and the execution part will be assess individual. It will be evaluated following an evaluation guideline (see evaluation guideline of the simulation seminars). The execution seminar can be planned outside the usual schedule of the subject. These seminars cannot be recovered and attendance is required.

• Written work: corresponds to 20% of the final grade

Maintaining the same groups, a written work will have to be developed that will consist of the planning of the cares of the clinical case worked in the simulation seminars based on the model of Attention Centered in the Person that will have explained in the topic 12. During the course, tutorials will be conducted.

This must be presented by one of the members of the group through the Virtual Campus ("Activities") in word format.

The structure of the work must follow the criteria of the "work presentation guide" that you will find on the Faculty's website. The mark will be graded according to the "criteria for evaluating written work" (see written work evaluation guidelines).

• Oral presentation of the work: corresponds to 5% of the final grade

The duration of the presentation will be 15 to 20 minutes. It will be necessary to divide the presentation into proportional parts according to the number of members of the group. Each student will present a part of the work at random, so all the prepared parts will need to be brought. Therefore, attendance at the oral presentation is mandatory.

The structure of the oral presentation must follow the criteria of the "Guide for the presentation of oral presentations" which can be found on the Faculty's website. The qualification will be made according to the "Criteria for evaluating the oral presentation" (see oral evaluation evaluation guidelines).

IMPORTANT NOTE: To calculate the final mark of the subject, taking into account the percentages of the different activities, it will be an essential requirement to have passed the written test and group work (average mark of the simulation seminars, written work and oral presentation) with a minimum grade of 5, as well as attending 80% of the seminars, with the exception of simulation seminars which are already compulsory. In the event that any of the above requirements are not met, the subject will be suspended.

Below is a summary table.

| CONTINUOUS EVALUATION | | | |
|-------------------------------------------------------|--------------|-------|--|
| Activity | | Value | |
| Written test | | 40% | |
| Participation in seminars, solving cases and problems | | 20% | |
| | Simulation | 15% | |
| | Written work | 20% | |

| Group work | | |
|------------|-------------------|----|
| | Oral presentation | 5% |

2. ALTERNATIVE EVALUATION

In the event that the student accepts the alternative assessment, the assessment activities will be as follows:

- Written test and group work (simulation seminars, written work and oral presentation): the same criteria will be followed as in the continuous assessment.
- Seminar evaluation: attendance will not be mandatory, but the exercise / activity must be submitted in writing and in Word format via the Virtual Campus to the responsible teacher on the first day of the week corresponding to each seminar.

IMPORTANT NOTE: To calculate the final mark of the subject, taking into account the percentages of the different activities, it will be an essential requirement to have passed the written test and group work (average mark of the simulation seminars, written work and oral presentation) with a minimum grade of 5. In the event that any of the above requirements are not met, the subject will be suspended.

Below is a summary table.

| ALTERNATIVE EVALUATION | | | |
|-------------------------------------------------------|-------------------|-------|--|
| Activity | | Value | |
| Written test | | 40% | |
| Participation in seminars, solving cases and problems | | 20% | |
| | Simulation | 15% | |
| Group work | Written work | 20% | |
| | Oral presentation | 5% | |

Bibliography

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Nuin C. (coordinadora): Enfermería de la persona mayor. Madrid: Editorial Universitaria Ramón Areces; 2011.

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