

1. OVERVIEW

Subject area	Health Promotion and Risk Reduction: Integration of Care Processes 2
Degree	Bachelor's Degree in Nursing
School/Faculty	Biomedical and Health Sciences
Year	Second
ECTS	6 ECTS
Туре	Compulsory
Language(s)	Spanish
Delivery Mode	On campus
Semester	Semesters 3 and 4

2. INTRODUCTION

The subject area "Health Promotion and Risk Reduction: Integration of Care Processes 2" introduces students to the concepts of health promotion and prevention of disease, injury or disability, as well as to the culture of patient safety.

The overall objective of this subject area is for students to learn about the role of nurses in the promotion of health and well-being of the population, promoting healthy environments and lifestyles and enhancing patient safety in all nursing interventions at the different levels of care, in healthcare organisations, and in patients' self-care.

The learning outcomes are aimed at applying the patient safety strategy for risk reduction in any healthcare setting, diagnosing risks to a patient's health and selecting nursing interventions to reduce them (strategies, guidelines, action protocols). The focus is in community care and medical/surgical inpatient settings, with the use of strategies for healthy lifestyle promotion, disease prevention and risk reduction to ensure patient safety, in any healthcare setting. Students will analyse the health status of population groups (community health setting) and specific patient profiles (inpatient setting).

Throughout the subject area, students will be able to propose interventions aimed at regaining health, preventing individual and community disease, injury and disability, and reducing risks in order to ensure patient safety. Activities will be carried out to promote work towards a society in which individuals, families and communities can reach their full potential for development, health, well-being and autonomy, in a collaborative and inclusive manner.



3. SKILLS AND LEARNING OUTCOMES

Basic skills (CB, by the acronym in Spanish):

- CB1: Students have shown their knowledge and understanding of a study area that builds on general secondary school education, and are usually at the level where, with the support of more advanced textbooks, they may also demonstrate awareness of the latest developments in their field of study.
- CB2: Students know how to apply their knowledge to their work or vocation professionally and have the skills that are usually demonstrated by forming and defending opinions and solving problems within their study area.
- CB4: Students can communicate information, ideas, problems and solutions to both specialist and non-specialist audiences.
- CB5: Students have developed the necessary learning skills to undertake further studies with a high degree of independence.

General skills (CG, by the acronym in Spanish):

- CG3: Know and apply the theoretical and methodological foundations and principles of nursing.
- CG8: Promote and respect the right to participation, information, autonomy and informed consent in the decision-making process of the people cared for, in line with their personal experience of their health/illness process.
- CG9: Promote healthy lifestyles and self-care, supporting the maintenance of preventive and therapeutic behaviours.
- CG10: Protect the health and well-being of individuals, families or groups that use healthcare services, guaranteeing their safety.

Cross-curricular skills (CT, by the acronym in Spanish):

- CT3: Contribute actively in work teams, assuming shared responsibilities.
- CT5: Be oriented towards the development of others by understanding their attitudes, interests, needs and perspectives.
- CT7: Manage working groups.

European skills:

- CUE1: Independently diagnose the necessary nursing care using theory and medical knowledge, and plan, organise and administer nursing care when treating patients on the basis of the knowledge and skills acquired in accordance with point 6(a), (b) and (c), in order to improve professional practice.
- CUE3: Empower individuals, families and groups to take responsibility for healthy lifestyles and self-care based on the knowledge and skills acquired in accordance with paragraph 6(a) and (b).

Specific skills (CE, by the acronym in Spanish):

- CE12: Know and apply the principles underpinning comprehensive nursing care, applying the
 nursing process as a scientific methodology in the care process to manage, assess and provide care
 to individuals, families and the community, providing and ensuring the well-being, quality and
 safety of the people cared for.
- CE13: Ability to describe the fundamentals of primary health care and the nursing activities carried
 out to provide comprehensive nursing care to individuals, families and the community,
 understanding the role, activities and cooperative attitude required from professionals in a primary
 health care team and promoting the involvement of individuals, families and groups in their healthillness process.
- CE14: Identify and analyse the influence of internal and external factors on the health of individuals and groups, as well problems in their environment, in order to provide care and to educate, facilitate and support the health and well-being of community members whose lives are affected by health problems, risk, suffering, illness, disability or death.



 CE17: Analyse the data collected from an assessment of an adult patient, prioritise problems, establish and implement a care plan and evaluate it, thereby establishing a therapeutic relationship with patients and their relatives and maintaining a cooperative attitude with the different members of your team.

Learning outcomes (RA, by the acronym in Spanish):

- RA1. Analyse the health status of population groups (community health setting).
- RA2. Analyse the health status of specific patient profiles (inpatient setting).
- RA3. Employ the strategy of patient safety for reducing risks in any healthcare setting.
- RA4. Use healthy lifestyle promotion, disease prevention and risk reduction strategies for patient safety in all healthcare settings.
- RA5. Diagnose risks to a patient's health in community care and medical/surgical inpatient settings.
- RA6. Select risk-reducing nursing interventions (strategies, guidelines, action protocols), in community care and medical/surgical inpatient settings.

The following table shows how the skills developed in the subject area relate to the intended learning outcomes:

Skills	Learning outcomes
CE12, CE14, CE17, CUE1, CT5, CG3, CB5	RA1. Analyse the health status of population groups (community health setting). RA2. Analyse the health status of specific patient profiles (inpatient
	setting).
CT3, CG8, CG8, CG10	RA3. Employ the strategy of patient safety for reducing risks in any healthcare setting.
CE12, CE13, CE14, CUE3, CT5, CG9, CB1, CB4	RA4. Use healthy lifestyle promotion, disease prevention and risk reduction strategies for patient safety in all healthcare settings.
CE12, CE17, CUE1, CT5, CT7, CG3, CG8, CB1, CB2, CB5	RA5. Diagnose risks to a patient's health in community care and medical/surgical inpatient settings.
CE12, CE17, CUE1, CT5, CT7, CG3, CG8, CB1, CB2, CB5	RA6. Select risk-reducing nursing interventions (strategies, guidelines, action protocols), in community care and medical/surgical inpatient settings.

4. CONTENTS

The units of the subject area are divided into four blocks:

▶ BLOCK 1: COMMUNITY HEALTH PROMOTION

UNIT 1. COMMUNITY ACTION AND INVOLVEMENT.



> BLOCK 2: PERSONAL HEALTH PROMOTION

UNIT 2. HEALTH PROMOTION AND DISEASE PREVENTION PROGRAMMES. UNIT 3. CONTROL OF COMMUNICABLE DISEASES THROUGH VACCINATION.

▶ BLOCK 3: CULTURE OF SAFETY

UNIT 4. PATIENT SAFETY.

UNIT 5. RISK MANAGEMENT AND REPORTING SYSTEMS.

BLOCK 4: DIAGNOSIS AND PREVENTION OF RISK IN CLINICAL PRACTICE.

UNIT 6. SAFE PRACTICES.

- 6.1. Effective interprofessional communication.
- 6.2. Patient and practitioner safety with regard to communicable diseases.
- 6.3. Patient safety in procedures.
- 6.4. Patient safety in the use of medicines.

UNIT 7. HEALTH LITERACY AND ACTIVE PATIENTS.

UNIT 8. PATIENT SAFETY RELATED TO THE MONITORING OF CHRONIC DISEASES. CONTINUITY OF CARE.

UNIT 9. PATIENT SAFETY IN THE SURGICAL SETTING

5. TEACHING-LEARNING METHODS

The types of teaching-learning methods are as follows:

- Lecture.
- Simulation environments

6. LEARNING ACTIVITIES

The types of learning activities, plus the amount of time spent on each activity, are as follows:

On campus:

Learning activity	Number of hours
AF1 Lectures	9h
AF2 Asynchronous lectures	6h
AF9 Group tutorial	2h
AF11 Simulation activities	58h



AF12 Searching resources and choosing information sources	23h
AF18 On-campus knowledge tests	2h
AF19 Independent working	50 h
TOTAL	150 h

7. ASSESSMENT

The assessment systems, plus their weighting in the final grade for the subject area, are as follows:

On campus:

Assessment system	Weighting
On-campus knowledge test 1	10%
On-campus knowledge test 2	10%
Learning portfolio 1	15%
Learning portfolio 2	15%
On-campus knowledge pre-test: Pretest	10%
Performance monitoring 1	20%
Performance monitoring 2	20%

On the Virtual Campus, when you open the subject area, you can check the guide with the details of your assessment activities, including the deadlines and assessment procedure for each.

8. BIBLIOGRAPHY

The recommended bibliography is indicated below:

Documents related to health promotion and disease prevention programmes:

Andradas, E., Astorga, M. A., Campos, P., Cepeda, T., Gil, A., Jiménez, M., & Zuza, I. (2014). Estrategia de promoción de la salud y prevención en el SNS (En el marco del abordaje de la cronicidad en el SNS).

Programa de Actividades Preventivas y de Promoción de la Salud. (2018). Actualización 2018 Atención Primaria 50, Suplemento 1. Disponible en: https://www.elsevier.es/es-revista-atencion-primaria-27-sumario-vol-50-num-s1-S0212656718X70115

Documents related to health education:

Gobierno de Navarra (2006). *Manual de Educación para la Salud*. Disponible en: http://www.navarra.es/NR/rdonlyres/049B3858-F993-4B2F-9E33-2002E652EBA2/194026/MANUALdeeducacionparalasalud.pdf

López, E., Costa, M. (2008). Educación para la Salud: Una estrategia para cambiar los estilos de vida.

Madrid: Pirámide



- Frías Osuna, A. (2006). Salud Pública y Educación para la Salud. Barcelona: Masson.
- Perea Quesada, R. (2002). La educación para la salud, un reto de nuestro tiempo. *Educación XXI: Revista de la Facultad de Educación*. (Ejemplar dedicado a: Educación para la salud) 4, 15-40. Disponible en: http://dialnet.unirioja.es/servlet/articulo?codigo=259886

Bibliography and electronic resources related to nursing care:

- Gil, E. R., Rovira, G. E., & DAE. (2015). *Cuidados al paciente con alteraciones digestivas*. S.l.: Difusión Avances de Enfermería (DAE, SL.
- Jensen, S., Serrahima Formosa, L., & Vilaret Fusté, E. (2012). Valoración de la salud en enfermería: Una guía para la práctica. Barcelona: Wolters Kluwer/Lippincott Williams & Wilkins Health.

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- Quiles, Á. S., Sanjuán, Q. Á., & DAE, (2012). Cuidados al paciente con alteraciones respiratorias. S.l.: DAE.

Bibliography and electronic resources related to nursing methodology:

NNN Consult. Disponible como recurso electrónico en la biblioteca virtual UEM. NNNConsult Tipo de material: Recurso electrónico Editor: Amsterdam: Elsevier, [2015-]

- Bulecheck, G.M., et al. (ed.) (2018). *Clasificación de intervenciones de enfermería (NIC)* (7º ed). Madrid:
- Herdman, T.H. (ed.) (2015). *Diagnósticos enfermeros: definiciones y clasificación 2015-2017*. Barcelona: Elsevier
- Herdman, T.H., Kamitsuru, S. (ed.) (2017). *Nursing diagnoses: definitions and classification 2018-2020*. USA: Thieme
- Moorhead, S., et al. (ed.) (2018). Clasificación de resultados de enfermería (NOC) (6ª ed). Madrid: Mosby.

Bibliografía y recursos electrónicos relacionados con Seguridad del paciente:

- Making Health Care Safer II: An Updated Critical Analysis of the Evidence for Patient Safety Practices.

 March 2013. Agency for Healthcare Research and Quality, Rockville, MD.

 http://www.ahrq.gov/research/findings/evidence-based-reports/ptsafetyuptp.html
- Recio M, Recio C. Análisis de causa raíz esquema de clasificación de los factores contribuyentes. National Patient Safety Agency (NPSA) National Health Service (NHS). Reino Unido Ministerio de Sanidad y Consumo.2008.
- Ruiz-López P, González Rodríguez-Salinas C, Alcalde-Escribano J. Análisis de causas raíz. Una herramienta útil para la prevención de errores. Rev Calidad Asistencial. 2005;20(2):71-8.
- Agra Y, Terol, E., (2015). Estrategia de Seguridad del paciente del SNS.

Recommended websites:

www.semap.org Sociedad Madrileña de Enfermería Familiar y Comunitaria

www.semfyc.es Sociedad Española de Medicina de familia y comunitaria



www.papps.es Programa de Actividades preventivas y promoción para la salud

<u>www.faecap.com</u> Federación de Asociaciones de Enfermería Comunitaria y Atención Primaria <u>www.pacap.net</u> Programa de Actividades Comunitarias en Atención Primaria

www.estilosdevidasaludable.mscbs.gob.es web de Ministerio de Sanidad consumo y bienestar social