### Core Concept Teaching Strategies

### **CONCEPT: Interdisciplinary Education/Collaborative Practice**

**Educational Program: ⊠Four Year BSN Program** □**Two Year ADN Program** 

Competency	Learner Objective(s)	Teaching Strategies
	1. Students will describe	1. Jigsaw
Level 1 Competency	components of relationship-	2. Interprofessional Case
Blooms Level:	based care.	Study
Remembering,	2. Students will identify	
Understanding	strategies to promote	
A practitioner who	interdisciplinary teamwork.	
collaborates with other		
healthcare professionals		
to promote a climate of		
mutual respect and shared		
values (AACN, 2011).		
	1. Students will examine	1. Shadowing
<b>Level 2 Competency</b>	various healthcare	experiences (Clinical)
Blooms Level:	professionals' roles	2. "Who you gonna
Analyzing, Understanding	through	call?"

A practitioner who	interdisciplinary	
understands their own	clinical experiences	
role/scope of practice and	2. Students will discuss	
those of other healthcare	examples of available	
professionals in order to	interdisciplinary	
assess and provide care to	resources in various	
meet the healthcare needs	care settings	
of patients and		
populations (AACN,		
2011).		
l l		
	1. Students will prioritize	1. Role play: "Bedside
Level 3 Competency	1. Students will prioritize patient-centered	1. Role play: "Bedside Rounds"
Level 3 Competency Blooms Level:	_	
	patient-centered	Rounds"
Blooms Level:	patient-centered goals/patient-care	Rounds"
Blooms Level:  Evaluating, Applying	patient-centered goals/patient-care needs using a team	Rounds"
Blooms Level:  Evaluating, Applying  A practitioner who	patient-centered goals/patient-care needs using a team approach.	Rounds"
Blooms Level:  Evaluating, Applying  A practitioner who  communicates with	patient-centered goals/patient-care needs using a team approach. 2. Students will	Rounds"

using a team approach	changes in a patients'	
(AACN, 2011).	condition.	
	1. Use a collaborative	1. Team Care-Plan
<b>Level 4 Competency</b>	approach to solve	2. Group thought
Blooms Level: Analyzing,	patient-centered	
Evaluating, Creating	problems.	
A practitioner who applies	2. Plan	
relationship-building and	patient/population-	
team dynamics to	specific health	
effectively plan and	promotion strategies	
deliver patient/population	utilizing an	
centered care (AACN,	interdisciplinary	
2011).	approach.	

NAME OF LEARNING	Jigsaw
ACTIVITY	

Learning Activity	Class content will be broken down into sections representing
Dear ming receively	Chase content will be broken down into sections representing
Summary	pieces of the "puzzle" (RBC concepts); students will work in
	groups to describe their "puzzle pieces."
	Cognitive (identify level): Remembering
<b>Domain of Learning</b>	Affective: Responding
(Bloom's Taxonomy	
	Psychomotor: Imitation
Revised)	
Student-Centered Learning	At the completion of this learning activity, the learner will describe
	PDC)
Objective(s)	components of relationship-based care (RBC).
<b>Preparation</b> Required by	The teacher will assign pre-class textbook readings. Worksheets
Teacher/Facilitator and	will be developed for enough to complete during the liggory activity.
reacher/facilitator and	will be developed for groups to complete during the jigsaw activity.
Materials Needed	
Time Allotted	10 minutes will be allotted for group work and 10 minutes will be
	allotted for classroom discussion/debriefing
	anotted for classiconi discussion/debileting
Learning Styles Addressed	Auditory
by Activity	
How is content connected to	Students will connect this knowledge to previous concepts from
prior learning?	fundamentals of nursing.

Reflective <b>Debriefing</b> with	At the end of this activity, the teacher will have team-leaders
<u>Learners</u> (post-learning	describe their "puzzle pieces" to the class, and then the teacher will
activity) How will it be	ask focused questions to engage students' knowledge and
accomplished?	application of RBC concepts.
Evaluation of Learning	This activity will not be graded, however the teacher will use this
(How will it be	as a formative assessment of the students' learning.
accomplished?)	
Teacher Reflection	The jigsaw method is a great way to engage students in
(justify choice of learning activity and good "fit" for the identified learning objectives)	collaborative teamwork (Herrman, 2008). This classroom learning activity will help students "put the pieces" of RBC together.

NAME OF LEARNING	Interprofessional Case Study
ACTIVITY	
Learning Activity	Students will assume the role of Case Manager, reviewing patient's
Summary	chart and then meeting with members of the health care team during interdisciplinary rounds to facilitate the patient's discharge.
	Cognitive (identify level): Understanding, Analyzing, Evaluating
	Affective: Responding, Valuing, Organizing

<b>Domain of Learning</b>	Psychomotor: Articulation
(Bloom's Taxonomy	
Revised)	
Student-Centered Learning	At the completion of this learning activity, the learner will identify
Objective(s)	strategies to promote interdisciplinary teamwork.
<b>Preparation</b> Required by	Teacher will prepare the case study before class. Printed handouts
Teacher/Facilitator and	will be required for students to review.
Materials Needed	
Time Allotted	5 minutes will be allotted for students to read the case study, and
	10-15 minutes will be allotted for collaborative
	discussion/debriefing.
Learning Styles Addressed	Auditory, Visual
by Activity	
How is content connected	This case study will help students to connect nursing concepts and
to prior learning?	knowledge of various health care disciplines in a collaborative
	problem-solving approach to plan a patient's discharge.
Reflective <b>Debriefing</b> with	The teacher will ask teams to describe their discharge planning
<u>Learners</u> (post-learning	strategies, and will collaboratively review students' answers to the
activity) How will it be	questions at the end of the case study.
accomplished?	

Evaluation of Learning	This activity will not be graded, however the teacher will collect
(How will it be	students' work after class as a formative assessment of students'
accomplished?)	understanding of the classroom content.
Teacher Reflection	Case studies provide in-depth analysis of real-life patient scenarios
(justify choice of learning activity and good "fit" for the identified learning objectives)	in order to illustrate class content (Billings & Halstead, 2012). This particular case study provides an interdisciplinary/collaborative approach towards solving patient problems.

Source: Interprofessional Health Education and Research. (n.d.). The case of jasper beardley. Retrieved from

http://www.ipe.uwo.ca/Administration/CaseScenarios/Case%20of%20Jasper%20Beardley.pdf
This case study is adapted from the Interprofessional Health Education and Research
(IPHER) website:

Patient is an 85 y/o male admitted from home s/p a fall. **Medical history** includes vascular dementia, multiple TIAs, limb apraxia, prostate cancer, osteoarthritis, bilateral hearing loss (uses hearing aids), and progressive decline in memory and activities of daily living. **History of Symptoms**: Patient has had a gradual decline in memory over the last two years with recent symptoms of agitation and aggressive behavior. Patient's family reports that he has wandered away from home on multiple occasions. Patient scored a 15/30 on the Mini Mental State Exam (MMSE), indicating significant cognitive impairment. **Physician Assessment:** Patient is admitted s/p a fall. Hip/Femur x-rays show no fractures, however patient has moderate bruising on his right hip, and patient c/o pain with movement. Patient is a WWII veteran, married with an

adult son. No tobacco/alcohol/drug use. ROS: denies headache, dizziness, chest pain, shortness of breath. No Known Drug Allergies. Alert and oriented to person and place (disoriented to time). VSS. Lungs CTA. Cardiac RRR, Abdomen non-tender/non-distended. Musculoskeletal +pulses, limited ROM of right leg. Labs WNL. Continue home meds. Will order Tylenol for pain. Will order OT/PT/SLP eval, case management for possible LTC Placement.

**Nursing Assessment:** On admission to the unit patient yelled out in pain during transfer from the stretcher to the bed. Right hip and upper thigh are ecchymotic with tenderness. Skin is warm/dry/intact. Neck/Lymph nodes are normal with no swelling/masses. PERRLA. Lungs CTA. Heart RRR. Abdomen non-tender/non-distended with +BS. ROM limited in right lower extremity d/t pain, left side appears to have normal muscle strength. Wt. bearing not assessed at this time. Neuro-Alert and oriented to person, disoriented to place and time. Patient is smiling and cooperative to examination. Patient's family states they found him on the bathroom floor this morning and called 911. VSS. Labs WNL. Medication list reviewed- Risperidone, ASA, Colace, Metoprolol, and Namenda. Fall precautions initiated- educated patient/family about the use of bed/chair alarms during hospitalization. Patient unable to score pain on numerical scale-PAINAD score 5/10. MD ordered Tylenol, topical Lidoderm patch, and ice packs to right hip. **Occupational Therapy**: Patient's physical examination was within functional limits for upper extremities and manual muscle testing- patient c/o stiffness and joint pain in his right dominant hand with tremors. Patient scored 6/38 on the Cornell Scale for Depression in Dementia (CSDD) indicating that he is not experiencing depression. He reports occasional sleep disturbances. Patient is able to wash and dress himself with some assistance, and is able to feed himself independently. Recommend modified utensils d/t tremors. Physical Therapy: Patient ambulated independently with no gait aides for >200 feet with steady gait, moderate pace, slight

medial/lateral sway with increased speed. BERG Balance Scale 46/52 which indicates mild impairment with balance in standing/walking. Active range of motion-patient has some limb apraxia during muscle power testing. Hip extension/flexion indicates mild reduction and c/o pain in right leg. Patient is able to independently transfer in/out of bed and chair with minimal verbal cues. Recommend wheeled walker/contact guard for ambulation. Speech-Language Pathology: The patient reports that he has had no difficulty swallowing. On evaluation during a meal, there was no apparent signs of aspiration with thin liquids, however patient was noted to chew his food for an extended period of time and some pocketing of food was noted. Patient demonstrated reduced speed, strength and range of motion of the tongue, lips, and jaw. He has upper and lower dentures. Patient's scores on the Arizona Battery for Communication Disorders of Dementia (ABCD) indicate moderate communication challenges in the areas of linguistic expression and comprehension. Patient has difficulty following commands, repeating words and sentences, remembering names, recalling words, reasoning, comprehending auditory questions, and is disoriented to time.

### **Case Study Questions:**

- 1. Based on the information above, how can the healthcare team facilitate a safe discharge for this patient?
- 2. What are the resources needed to plan care for this patient?
- 3. Describe the roles of each healthcare team member related to this case study
- 4. What other members of the healthcare team should be involved in this patients' care?
- 5. How can the healthcare team establish collaborative goals for this patient?

NAME OF LEARNING	Shadowing Experience
ACTIVITY	
Learning Activity	Students will sign up for shadowing experiences within the
Summary	hospital setting (MD/Care Affiliates, Respiratory Therapy, Physical
	Therapy, Occupational Therapy, Speech Therapy, Social Work,
	Dietician, etc.) during clinical. Post-conference will involve
	classroom discussion about what was learned about the various
	roles/responsibilities of healthcare professionals.
	Cognitive (identify level): Understanding, Analyzing
Domain of Learning	Affective: Receiving, Responding, Valuing
(Bloom's Taxonomy	
Revised)	Psychomotor: Imitation, Articulation
,	
Student-Centered Learning	At the completion of this learning activity, the learner will: examine
Objective(s)	various healthcare professionals' roles through interdisciplinary
	clinical experiences
<b>Preparation</b> Required by	The teacher will need to recruit interdisciplinary volunteers from
Teacher/Facilitator and	the hospital who are willing to participate in the students'
Materials Needed	shadowing experiences.
Time Allotted	The shadowing experience will take place during students' normal
	clinical hours, and then 1 hour of classroom time will be allotted for
	this Post-Conference/Debriefing session.

Learning Styles Addressed	Auditory, Visual
by Activity	
How is content connected to	Although students already have a baseline knowledge of the roles
prior learning?	of various health care professionals in the hospital setting, this will
	give them a chance to see what happens "behind the scenes."
Reflective <b>Debriefing</b> with	The teacher will encourage students to discuss their observations
<u>Learners</u> (post-learning	during the shadowing experience, and will answer/clarify students'
activity) How will it be	questions about various health care roles in the hospital.
accomplished?	
<b>Evaluation of Learning</b>	This activity will not be graded, however this will provide the
(How will it be	teacher with a formative assessment of the students' learning
accomplished?)	experience.
Teacher Reflection	The shadowing experience is a great way for students to observe/
	ask questions/collaborate with health care professionals (in a
(justify choice of learning	relaxed setting without the clinical instructor present).
activity and good "fit" for	
the identified learning	
objectives)	

NAME OF LEARNING	"Who you gonna call?"
ACTIVITY	

## Learning Activity Summary

[The teacher will play the Ghost-Busters theme-song during the introduction of this learning activity]. The teacher will present multiple scenarios of critical situations/patient emergencies to the class, and will then ask "Who you gonna call?" Students will be encouraged to yell out their answers.

### Examples:

- A patient is found on the bathroom floor after an unwitnessed fall "Who you gonna call?"
- A patient has a seizure- "Who you gonna call?"
- A patient is experiencing chest pain- "Who you gonna call?"
- A patient is experiencing respiratory distress- "Who you gonna call?"
- A patient is agitated and physically aggressive- "Who you gonna call?"

Cognitive (identify level): Remembering, Understanding,

Applying, Analyzing, Evaluating

**Domain of Learning** 

(Bloom's Taxonomy

Revised)

**Affective:** Responding

**Psychomotor:** Articulation

Preparation Required by The teacher will need to prepare multiple scenarios prior to class.  Teacher/Facilitator and Materials Needed Busters theme song.  Time Allotted 10 minutes will be allotted for the activity, and 5 minutes will be allotted for debriefing.  Learning Styles Addressed Auditory	Student-Centered Learning	At the completion of this learning activity, the learner will: discuss
Preparation Required by The teacher will need to prepare multiple scenarios prior to class.  Teacher/Facilitator and Materials Needed Busters theme song.  Time Allotted 10 minutes will be allotted for the activity, and 5 minutes will be allotted for debriefing.  Learning Styles Addressed Auditory	Objective(s)	examples of available interdisciplinary resources in various care
Teacher/Facilitator and Materials Needed Busters theme song.  Time Allotted 10 minutes will be allotted for the activity, and 5 minutes will be allotted for debriefing.  Learning Styles Addressed Auditory		settings
Teacher/Facilitator and Materials Needed Busters theme song.  Time Allotted 10 minutes will be allotted for the activity, and 5 minutes will be allotted for debriefing.  Learning Styles Addressed Auditory	<b>Preparation</b> Required by	The teacher will need to prepare multiple scenarios prior to class.
Materials Needed  Busters theme song.  Time Allotted  10 minutes will be allotted for the activity, and 5 minutes will be allotted for debriefing.  Learning Styles Addressed Auditory	Teacher/Facilitator and	
Time Allotted 10 minutes will be allotted for the activity, and 5 minutes will be allotted for debriefing.  Learning Styles Addressed Auditory		-
allotted for debriefing.  Learning Styles Addressed Auditory	Materials Needed	busters theme song.
allotted for debriefing.  Learning Styles Addressed Auditory		
allotted for debriefing.  Learning Styles Addressed Auditory	Time Allotted	10 minutes will be allotted for the activity, and 5 minutes will be
Learning Styles Addressed Auditory		
	To a Colon All 1	
		Auditory
by Activity	by Activity	
How is content connected to Students will apply knowledge of various interdisciplinary roles in	How is content connected to	Students will apply knowledge of various interdisciplinary roles in
prior learning? emergent patient situations.	prior learning?	emergent patient situations.
Reflective <b>Debriefing</b> with The teacher will summarize the activity, and provide students with	Reflective <b>Debriefing</b> with	The teacher will summarize the activity, and provide students with
<u>Learners</u> (post-learning opportunities to ask questions.	<u>Learners</u> (post-learning	opportunities to ask questions.
activity) How will it be	activity) How will it be	
accomplished?	accomplished?	
Evaluation of Learning This activity will provide the teacher with an overall classroom	-	This activity will provide the teacher with an overall classroom
	C	•
(How will it be evaluation of students' critical thinking abilities.	(How will it be	evaluation of students' critical thinking abilities.
accomplished?)	accomplished?)	

Teacher Reflection	This activity is a fun and interactive way for students to apply
(: .:C 1 :	critical thinking abilities to different patient scenarios. The music
(justify choice of learning	will help students to reflect on/remember/apply what was learned.
activity and good "fit" for	
the identified learning	
objectives)	

	Role play: "Bedside Rounds"
NAME OF LEARNING	
TABLE OF EERICATIO	
ACTIVITY	
Learning Activity	Students will act out the roles of interdisciplinary team members
Summary	(MD, Resident, Primary Nurse, Case Manager, etc.) during various
	"bedside-rounds" scenarios. The teacher will facilitate role play by
	presenting different scenarios, however students will be responsible
	for scripting and collaborative interactions during this exercise.
	Cognitive (identify level): Evaluating, Applying
Domain of Learning	Affective: Responding
(Bloom's Taxonomy  Revised)	Psychomotor: Articulation

Student-Centered Learning	At the completion of this learning activity, the learner will prioritize
<b>Objective</b> (s)	patient-centered goals/patient-care needs using a team approach.
<b>Preparation</b> Required by	The teacher may want to set up a mock hospital room environment
Teacher/Facilitator and	for this role playing exercise. The teacher will need to plan various
Materials Needed	scenarios, and decide how to assign roles during this learning
	activity.
Time Allotted	15 minutes will be allotted for the role-playing scenarios, and 20
	minutes will be allotted for group discussion/debriefing.
Learning Styles Addressed	Auditory, Kinesthetic
by Activity	
How is content connected to	Students will connect prior knowledge of bedside rounds (from
prior learning?	observations during clinical) and interdisciplinary
	collaboration/teamwork in this role-play activity.
Reflective <b>Debriefing</b> with	Debriefing is the most important part of role play; the teacher will
<u>Learners</u> (post-learning	encourage students to clarify actions so alternative decisions can be
activity) How will it be	explained (Billings & Halstead, 2012).
accomplished?	
Evaluation of Learning	This activity will not be graded, however the teacher will use this
(How will it be	as an opportunity to observe students' bedside approach to patient-
accomplished?)	care/teamwork/collaboration.

Teacher Reflection	Teaching students about bedside rounds is an important strategy to
(justify choice of learning	facilitate interdisciplinary communication and teamwork using a patient-centered approach.
the identified learning objectives)	

	SBAR Simulations
NAME OF LEARNING	
ACTIVITY	
Learning Activity	Students will assess:
Summary	<ol> <li>A patient who is experiencing chest pain</li> <li>A patient with respiratory distress</li> <li>A patient with nausea/vomiting/abdominal distention</li> <li>Then will communicate with the physician/care affiliate about the patient's condition using Situation Background Assessment</li> <li>Recommendation (SBAR) format.</li> </ol>
	Cognitive (identify level): Understanding, Applying  Affective: Responding

<b>Domain of Learning</b>	Psychomotor: Manipulation, Articulation
(Bloom's Taxonomy	
Revised)	
icevised)	
Student-Centered Learning	At the completion of this learning activity, the learner will:
Objective(s)	communicate with healthcare professionals regarding changes in a
	patients' condition.
<b>Preparation</b> Required by	The teacher will use the simulation lab/mannequin for this learning
Teacher/Facilitator and	activity, and will prepare various simulation scenarios.
Materials Needed	
Time Allotted	15 minutes will be allotted for the simulation exercise, and 15
	minutes will be allotted for debriefing.
Learning Styles Addressed	Auditory, Visual, Kinesthetic
by Activity	
How is content connected	Students will apply clinical-assessment skills and critical thinking
to prior learning?	abilities in these scenarios, as well as having an opportunity to
	practice interdisciplinary communication skills.
Reflective <b>Debriefing</b> with	The teacher will provide opportunity for students to ask
<u>Learners</u> (post-learning	questions/reflect on what was learned/engage students in reflection
activity) How will it be	about communication strategies.
accomplished?	
ı	

Evaluation of Learning	The teacher will use this learning activity as a formative
(How will it be	assessment/observation of students' communication skills.
accomplished?)	
Teacher Reflection	These simulations are an important learning activity for students to
(justify choice of learning activity and good "fit" for the identified learning objectives)	apply clinical knowledge/critical thinking/communication skills to various patient scenarios.

	Team Care Plan
NAME OF A PARTY	
NAME OF LEARNING	
ACTIVITY	
Learning Activity	The class will involve assigning students roles of various healthcare
Summary	providers (MD, Nurse, OT, PT, Social Work, Dietician, Pharmacist,
	etc.) in responding to a case-study; students will work in their
	"interdisciplinary teams" to complete a team-care plan.
	Cognitive (identify level): Analyzing, Evaluating, Creating
<b>Domain of Learning</b>	Affective: Valuing, Organizing, Characterizing
(Bloom's Taxonomy	
Revised)	Psychomotor: Articulation, Naturalization

Student-Centered Learning	At the completion of this learning activity, the learner will: use a
<b>Objective</b> (s)	collaborative approach to solve patient-centered problems.
<b>Preparation</b> Required by	Teacher will prepare the case study before class with printed
Teacher/Facilitator and	handouts for students to review, and printed care-plan forms to be
Materials Needed	filled out by teams.
Time Allotted	30 minutes will be allotted for teams to review case study/work on
	care-plans. 15 minutes will be allotted for debriefing.
Learning Styles Addressed	Auditory, Visual
by Activity	
How is content connected to	Students will apply nursing knowledge and critical
prior learning?	thinking/interdisciplinary collaboration/communication skills in
	planning this patient's care.
Reflective <b>Debriefing</b> with	Team-leaders will review their interdisciplinary care plans with the
<u>Learners</u> (post-learning	class; the teacher will ask focused questions to engage students'
activity) How will it be	thought processes/application of content.
accomplished?	
Evaluation of Learning	The teacher will use this opportunity to evaluate students' overall
(How will it be	knowledge of interdisciplinary roles/teamwork in a formative group
·	
accomplished?)	assessment.

<b>Teacher Reflection</b>	This learning activity is a great opportunity to encourage student
(justify choice of learning activity and good "fit" for the identified learning	collaboration and respect for members of the interdisciplinary health care team.
objectives)	

Source: Interprofessional Health Education and Research. (n.d.). John doe. Retrieved from <a href="http://www.ipe.uwo.ca/Administration/CaseScenarios/Case%20of%20John%20Doe.pdf">http://www.ipe.uwo.ca/Administration/CaseScenarios/Case%20of%20John%20Doe.pdf</a>
This case study is modified from the Interprofessional Health Education and Research (IPHER) website:

Patient "John Doe" is a homeless man (appears to be in his 50s) who was brought in by ambulance after being found unconscious in an alley during the winter. Patient was unable to answer questions about his medical history, and only spoke gibberish. Physician Assessment: Patient presents with severe frostbite/extensive necrosis of the left foot. Unable to obtain information about medical history/medications/employment/family/marital status. ROS: Lungs-bilateral wheezes. Cardiac- tachycardic. Abdomen- flat/non-tender. Musculoskeletal- left foot cyanotic with absent pulse, right foot cold with diminished pulse. Patient is kicking his legs around, ROM/wt. bear not assessed at this time. Skin-Patient has multiple skin lesions/scabs over bilateral legs/arms. Patient is severely malnourished with emaciated appearance (BMI 16). Patient is hearing impaired. Lab work shows that patient is anemic with vitamin B12 deficiency. Patient will be admitted with diagnosis of frostbite and potential alcohol-related dementia. Will obtain orthopedic consult for possible amputation of left foot. Start hydration/IV antibiotics. Obtain PT/OT/SW consult, and case management for potential placement. Nursing Assessment:

On admission to the unit patient was agitated/yelling gibberish with hallucinations/paranoid behaviors. Unable to answer questions. Left foot is cold with absent pulses/necrosis of toes and sole of foot. Right foot is cold with diminished pulse. Bilateral legs and arms are covered in lesions/scabs. Patient has poor hygiene, and emaciated appearance. Poor dentition/cracked lips. Lungs- wheezes throughout. Cardiac- EKG shows sinus tachycardia. Labs and VS reviewed. Patient will require ETOH withdrawal protocols and fall precautions-MD notified. **Respiratory Therapy:** Called to see patient for smoking cessation- which patient refused at this time. **Social** Work: Unable to obtain information about the patients' name or family contacts. Suspect ETOH/smoking/recreational drug use. Nursing staff reports that patient states "There is nothing wrong with me- I do not want or need to be here, let me go!" Will continue to follow this patient's care. Physical Therapy: Unable to work with patient at this time as he will be going to surgery this evening. Will re-assess postoperatively.

**Source:** Interprofessional Health Education and Research. (n.d). Team care plan. Retrieved from http://www.ipe.uwo.ca/Administration/Team%20Care%20Plan.pdf

Sample Care-Plan form (adapted from the Interprofessional Health Education and **Research (IPHER) website):** 

Team Name:

Client Name:

Overall Goal in Case:

**Long Term Goals:** 

- 1.
- 2.
- 3.

Medium Term Goals:
1.
2.
3.
Short Term Goals:
1.
2.
3.
Patient/Client Comments (have a team member enact the role of the client):
Patient/Client Issues Goal(s) (from list above) to be addressed:
1.
2.
3.
Outcome to be achieved:
<u>Interventions</u> :
Health Care Professional(s) assigned:
TEACHING STRATEGIES PLAN

# Oroup thought NAME OF LEARNING ACTIVITY

Learning Activity	Students will work in small groups to plan patient/population-
Summary	specific health promotion strategies utilizing an interdisciplinary
	approach.
	Cognitive (identify level): Creating
	Cognitive (identity level). Creating
<b>Domain of Learning</b>	Affective: Responding, Organizing, Characterizing
(Bloom's Taxonomy	
Revised)	Psychomotor: Manipulation, Articulation, Naturalization
icevised)	
Student-Centered Learning	At the completion of this learning activity, the learner will utilize an
Objective(s)	interdisciplinary approach to plan health promotion strategies
<b>Preparation</b> Required by	The teacher will provide reading assignments prior to class which
Teacher/Facilitator and	will help students complete this activity.
Materials Needed	
Time Allotted	10 minutes will be allotted for group work and 10 minutes will be
	allotted for classroom discussion/debriefing.
Learning Styles Addressed	Auditory
by Activity	
How is content connected to	Students will utilize previous knowledge of interdisciplinary
prior learning?	collaboration and health promotion strategies
Reflective <b>Debriefing</b> with	The teacher will use debriefing at the end of the class to summarize
<u>Learners</u> (post-learning	key points from the group thought project.

activity) How will it be	
accomplished?	
Evaluation of Learning	This assignment will not be graded, however teachers can use this
(How will it be	as a formative assessment of students' understanding of the class
accomplished?)	content.
Teacher Reflection	This learning activity promotes active learning and clinical
(justify choice of learning activity and good "fit" for the identified learning	thinking using a collaborative approach (Herrman, 2008).
objectives)	