

Instructor's Toolkit for Henry William's Monologue

Henry's introductory monologue can be used in a variety of ways. Here are a few to consider:

- large class discussion
- small group discussion during class or clinical
- reflective journaling assignment
- web-based assignment: listen to the audio or read the script, then discuss and summarize the group's conclusions.

Here are some questions that might be used to stimulate discussion:

1. What are Henry's strengths?
2. What are your concerns for this patient?
3. What is the cause of your concern?
4. What information do you need?
5. What are you going to do about it?
6. What is Henry experiencing?

These questions were adapted from the following publication: Benner, P., Sutphen, M., Leonard, V., Day, L., and Shulman, L. (2010). Paradigm case: Lisa Day, classroom and clinical instructor. In *Educating nurses: A call for radical transformation* (p. 133). San Francisco: Jossey-Bass.

Possible answers to questions:

1. Strengths – wife and family, connections to the community, able to manage medications, beginning to recognize need for assistance.
2. Concerns – wife's increasing memory lapses, loss of their son, sense of anxiety, possible depression, caregiver strain.
3. Cause of concern – anxiety, loss of sleep, frustration with wife's increasing dependence on him, possible financial problems, especially medication expenses.
- 4, 5. Needed information and next steps:
 - Learn more about Henry's cardiovascular disease and the extent of his COPD.
 - Explore available resources for Henry and Ertha? Could they go to an adult day care, or a senior citizen's center for meals and an outing?
 - Determine the degree of Ertha's memory lapses
 - Assess Henry while he is in the hospital. Connect him with resources through social services, pharmacy, and respiratory therapy.
 - Assess need for home care, nursing home, or assisted living care.

6. Henry is experiencing an acute exacerbation of COPD and he is stressed. He needs follow up on medications and teaching for oxygen and new medications. He may be lonely and need help with decision making.

The [Essential Nursing Actions](#) from the ACE.S Framework can serve as a guide to learners when deciding what interventions may be appropriate for the older adult in this situation

ACE.S Framework Essential Nursing Actions

Assess Function and Expectations	<ul style="list-style-type: none"> ● Assess the older adult’s individual aging pattern and functional status using standardized assessment tools. ● Use effective communication techniques to recognize, respond to, and respect an older adult’s strengths, wishes, and expectations. ● Include findings of assessment of older adult’s cognition, mood, physical function, and comfort to fully assess the individual aging pattern.
Coordinate and Manage Care	<ul style="list-style-type: none"> ● Manage chronic conditions, including atypical presentations, in daily life and during life transitions to maximize function and maintain independence. ● Assist older adults and families/caregivers to access knowledge and evaluate resources. ● Advocate during acute exacerbations of chronic conditions to prevent complications.
Use Evidence-Based Knowledge	<ul style="list-style-type: none"> ● Understand geriatric syndromes and unique presentations of common diseases in older adults. ● Access and use emerging information and research evidence about the special care needs of older adults and appropriate treatment options. ● Interpret findings and evaluate clinical situations in order to provide high quality nursing care based on current knowledge and best practices.
Make Situational Decisions	<ul style="list-style-type: none"> ● Analyze risks and benefits of care decisions in collaboration with the interdisciplinary team and the older adult and family/caregivers. ● Evaluate situations where standard treatment recommendations need to be modified to manage care in the context of the older adult’s needs and life transitions. ● Consider the older adult’s wishes, expectations, resources, cultural traditions, and strengths when modifying care approaches.