



Committed to developing "Conscientious, Confident & Caring quality nursing professionals"

Maharshi Karve Stree Shikshan Samstha's

Smt. Bakul Tambat Institute of Nursing Education

(Affiliated to MSBPNE, MNC, MUHS & INC, NAAC Accredited)



Criterion II-Student performance and learning outcome.

2. 6.1. Documents pertaining to Learning outcomes and graduate attributes


Sign Of Principal
PRINCIPAL

Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052

MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
Smt. BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION.

2.6.1. Documents pertaining to Learning outcomes and graduate attributes


Sign Of Principal
PRINCIPAL
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE

First Year B.Sc. (N)

UNIT PLAN

Course Title: Applied Anatomy

Unit No: I

Hours: 8 hours

Name of the Faculty: Mrs. Bijayalakshmi Devi L (Associate Professor)

General Objectives:

- Define the terms relative to the anatomical position
- Describe the anatomical planes
- Define and describe the terms used to describe movements
- Describe the organization of human body and structure of cell, tissues membrane and glands
- Describe the type of cartilage
- Compare and contrast the feature of skeletal, smooth and cardiac muscles



Competencies	Contents	Hrs./minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Define the terms relative to the anatomical position	Introduction to anatomical terms relative to position-anterior, ventral, posterior, dorsal, superior, inferior, median, lateral, proximal, distal, superficial, deep, prone, supine, palmar and plantar	1hr	<ul style="list-style-type: none"> Lecture cum discussion PowerPoint presentation Videos 	PPT	Viva MCQ Short answers
Describe the anatomical planes	Anatomical planes- (axial/transverse/horizontal/sagittal/vertical plane and coronal/frontal/oblique plane)	1hr	<ul style="list-style-type: none"> Lecture cum discussion PowerPoint presentation Videos 	PPT	Viva MCQ Short answers
Define and describe the terms used to describe movements	Movements- (flexion, extension, abduction, adduction, medial rotation, lateral rotation, inversion, eversion, supination, pronation, plantar flexion, dorsal flexion and circumduction)	1hr	<ul style="list-style-type: none"> Lecture cum discussion 	PPT	Viva MCQ Short answers
Describe the organization of human body and structure of cell, tissues membrane and glands	<ul style="list-style-type: none"> Cell structure, cell division Tissue -definition, types, characteristics, classification, location Membrane, glands -classification and structure Identify major surface and bony landmarks in each body region, organization of human body 	2hrs	<ul style="list-style-type: none"> Lecture cum discussion 	PPT	Viva MCQ Short answers
Describe the type of cartilage	Hyaline, fibro cartilage, elastic cartilage	1 hr 30 mins	<ul style="list-style-type: none"> Lecture cum discussion 	PPT	Viva MCQ Short answers
Compare and contrast the feature of skeletal, smooth and cardiac muscles	Features of skeletal, smooth and cardiac muscle Application and implication in Nursing	1 hr 30 mins	<ul style="list-style-type: none"> Lecture cum discussion 	PPT	Viva MCQ Short answers

Sign of Class Coordinator



Sign of Principal
PRINCIPAL

Maharshi Karve Stree Shikshan Samstha's
 Smt. Bakul Tambat Institute of
 Nursing Education
 Karvenagar, Pune-411052

MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION

KARVENAGAR, PUNE

First Year B.Sc. (N)

UNIT PLAN

Hours: 6 hours

Course Title: Applied Anatomy

Unit No: II

Name of the Unit: The Respiratory System

Name of the Faculty: Mrs. Bijayalakshmi Devi L. (Associate Professor)

General Objectives:

- Describe the structure of respiratory system
- Identify the muscles of respiration
- Examine their contribution to the mechanism of breathing




Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe the structure of respiratory system	Structure of the organs of respiration	2 hrs	Lecture cum discussion, power-point presentation, videos, models	PPT	Short answers, long answers
Identify the muscles of respiration	Muscles of respiration	2 hrs	Lecture cum discussion, power-point presentation, videos, models	PPT	Short answers, long answers
Examine their contribution to the mechanism of breathing	Application and implications in nursing	2 hrs	Lecture cum discussion, power-point presentation, videos, models	PPT	Short answers, long answers



Sign of Class Coordinator




Sign of Principal

PRINCIPAL
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

**MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION**

KARVENAGAR, PUNE

First Year B.Sc. (N)

UNIT PLAN

Course Title: Applied Physiology

Hours: 4 hours

Unit No: I

Name of the Unit: General Physiology - Basic Concepts

Name of the Faculty: Mrs. Bijayalakshmi Devi L (Associate Professor)

General Objectives:

- Describe cell physiology including transportation across cell membrane
- Explain body fluid compartments and its distribution
- Describe the cell cycle
- Briefly explain the tissue
- List down the functions of membranes and glands



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe cell physiology including transportation across cell membrane	Cell physiology including transportation across cell membrane	1 hour	Lecture cum discussion, power-point presentation, videos	PPT	Multiple choice questions, quiz, short answers
Explain body fluid compartments and its distribution	Body fluid compartments, distribution of total body fluid, intracellular and extracellular compartments, major electrolytes and maintenance of homeostasis	1 hour	Lecture cum discussion, power-point presentation, videos	PPT	Multiple choice questions, quiz, short answers
Describe the cell cycle	Cell cycle	1 hour	Lecture cum discussion, power-point presentation, videos	PPT	Multiple choice questions, quiz, short answers
Briefly explain the tissue	Tissue -formation and repair	30 mins	Lecture cum discussion, power-point presentation, videos	PPT	Multiple choice questions, quiz, short answers
List down the functions of membranes and glands	Membranes and glands -Functions Application and implication in nursing	30 mins	Lecture cum discussion, power-point presentation, videos	PPT	Multiple choice questions, quiz, short answers


Sign of Class Coordinator




Sign of Principal

PRINCIPAL

Smt. Baharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE

First Year B.Sc. (N)

UNIT PLAN

Course Title: Applied Physiology

Hours: 6 hours

Unit No: II

Name of the Unit: Respiratory System

Name of the Faculty: Mrs. Bijayalakshmi Devi L (Associate Professor)

General Objectives:

- Describe the physiology and mechanism of respiration
- Identify the muscles of respiration and examine their contribution to the mechanism of breathing



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe the physiology and mechanism of respiration	Functions of respiratory organs Physiology of respiration Pulmonary circulation Pulmonary ventilation Carriage of oxygen and carbon dioxide Exchange of gases in tissue	3 hours	Lecture cum discussion, power-point presentation, videos	PPT	Multiple choice questions, quiz, short answers
Identify the muscles of respiration and examine their contribution to the mechanism of breathing	Regulation of respiration Hypoxia, cyanosis, dyspnea, periodic breathing Respiratory changes during exercise Application and implication in nursing	3 hours	Lecture cum discussion, power-point presentation, videos	PPT	Multiple choice questions, quiz, short answers



Sign of Class Coordinator


Sign of Principal



PRINCIPAL
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

**MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE**

First Year B.Sc. (N)

UNIT PLAN

Hours: 15 hours

Course Title: Applied Sociology

Unit No: II

Name of the Unit: Social Structure

Name of the Faculty: Ms. Aaditi Shirke (Clinical Tutor)

General Objectives:

- Describe the scope and significance of sociology in nursing
- Describe the individualization, group, processes of Socialization, social change and its importance



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe the individualization, group, processes of socialization, social change and its importance	• Basic concept of society, community, association and institution	2 hours	Lecture cum discussion, power-point presentation,	PPT	• Essay • Short answer • Objective type
	• Individual and society	1 hour			
	• Personal disorganization	1 hour			
	• Social group –meaning, characteristics and classification	2 hours			
	• Social group	1 hour			
	• Social processes	1 hour			
	• Socialization	1 hour			
	• Social change	1 hour			
	• Structure and characteristics of urban, rural and tribal community	2 hours			
	• Major health problems in urban, rural and tribal communities	1 hour 30 mins			
	• Importance of social structure in nursing profession	1 hour 30 mins			


Sign of Coordinator




Sign of Principal

PRINCIPAL
Maharshi Karve Sree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

**MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE**

First Year B.Sc. (N)

UNIT PLAN

Hours: 8 hours

Course Title: Applied Sociology

Unit No: III

Name of the Unit: Culture

Name of the Faculty: Ms. Aaditi Shirke (Clinical Tutor)

General Objectives:

- Describe culture and it's on health and disease



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe culture and it's on health and disease	• Nature, characteristic and evolution of culture	2 hours	Lecture cum discussion, power-point presentation,	PPT	• Essay • Short answer
	• Diversity and uniformity of culture	1 hour			
	• Difference between culture and civilization	1 hour			
	• Culture and socialization	1 hour			
	• Transcultural society	1 hour			
	• Culture	1 hour			
	• Modernization and its impact on health	1 hour			



Sign of Coordinator


Sign of Principal



PRINCIPAL
Maharshi Karve Sree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE

First Year B.Sc. (N)

UNIT PLAN

Course Title: Applied Psychology

Hours: 2 hours

Unit No: I

Name of the Unit: Introduction to Psychology

Name of the Faculty: Mrs. Bijayalakshmi Devi L (Associate Professor)

General Objectives:

- Describe scope, branches and significance of psychology in nursing



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe scope, branches and significance of psychology in nursing	<ul style="list-style-type: none"> • Meaning of psychology • Development of psychology – Scope, branches and methods of psychology • Relationship with other subjects 	1 hour	Lecture cum discussion, power-point presentation.	PPT	<ul style="list-style-type: none"> • Essay • Short answer
	<ul style="list-style-type: none"> • Significance of psychology in nursing • Applied psychology to solve everyday issues 	1 hour			

(Signature)

Sign of Class Coordinator

(Signature)
Sign of Principal



PRINCIPAL

Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE

First Year B.Sc. (N)

UNIT PLAN

Course Title: Applied Psychology

Hours: 4 hours

Unit No: II

Name of the Unit: Biological basis of behavior - Introduction

Name of the Faculty: Mrs. Bijayalakshmi Devi L (Associate Professor)

General Objectives:

- Describe biology of human behaviour



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe biology of human behaviour	• Body mind relationship	1 hour	Lecture cum discussion, power-point presentation,	PPT	<ul style="list-style-type: none"> • Essay • Short answer
	• Genetics and behaviour				
	• Inheritance of behaviour	1 hour			
	• Brain and behaviour	1 hour			
	• Psychology and sensation – sensory process –abnormal and normal	1 hour			

[Signature]

Sign of Class Coordinator

[Signature]
Sign of Principal

PRINCIPAL

Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.



**MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE**

First Year B.Sc. (N)

UNIT PLAN

Course Title: Nursing foundation - I

Unit No: II

Hours: 5 hours

Name of the Unit: Introduction to health and illness

Name of the Faculty: Ms. Ashwini Lande (Clinical Tutor)

General Objectives:

- Describe the levels of illness prevention and care, health care services



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe the levels of illness prevention and care, health care services	Health Care Delivery System – Introduction of basic concepts & meanings <ul style="list-style-type: none"> Levels of illness prevention – Primary (health promotion), secondary and tertiary 	1 hour	Lecture cum discussion, power-point presentation,	PPT	<ul style="list-style-type: none"> Essay Short answer Objective type
	<ul style="list-style-type: none"> Levels of care –Primary, Secondary and Tertiary 	1 hour			
	<ul style="list-style-type: none"> Types of health care agencies/ services –hospitals, clinic, hospice, rehabilitation centres, extended care facilities 	1 hour			
	<ul style="list-style-type: none"> Hospitals –types, Organization and functions 	1 hour			
	<ul style="list-style-type: none"> Health care teams in hospitals – members and their role 	1 hour			

(Signature)

Sign of Class Coordinator



(Signature)
Sign of Principal

PRINCIPAL
Maharshi Karve Sree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

**MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE
First Year B.Sc. (N)
UNIT PLAN**

Course Title: Applied Anatomy

Hours: 6 hours

Unit No: II

Name of the Unit: The Respiratory System


Name of the Faculty: Mrs. Bijayalakshmi Devi I. (Associate Professor)

General Objectives:

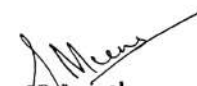
- Describe the structure of respiratory system
- Identify the muscles of respiration
- Examine their contribution to the mechanism of breathing



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe the structure of respiratory system	Structure of the organs of respiration	2 hrs	Lecture cum discussion, power-point presentation, videos, models	PPT	Short answers, long answers
Identify the muscles of respiration	Muscles of respiration	2 hrs	Lecture cum discussion, power-point presentation, videos, models	PPT	Short answers, long answers
Examine their contribution to the mechanism of breathing	Application and implications in nursing	2 hrs	Lecture cum discussion, power-point presentation, videos, models	PPT	Short answers, long answers


Sign of Class Coordinator




Sign of Principal

PRINCIPAL
Maharshi Karve Stree Shikshan Samstha
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

LESSON PLAN 7.3 – ANATOMY

NAME OF THE TEACHER : Ujwala Jadhav
SUBJECT : Anatomy
UNIT / SESSION : 7
TOPIC : Urinary system/ Urinary bladder
CLASS / GROUP : First year Basic B.Sc. Nursing students
NUMBER OF THE STUDENTS : 50
TEACHING METHOD(S) : Lecture / Discussion
TEACHING AID(S) : Power Point Presentation, Charts, Specimens
PLACE/ VENUE : Class Room
DATE AND TIME (DURATION) : 60 Minutes
PREVIOUS KNOWLEDGE OF THE STUDENTS : Students have learned about anatomy of urinary bladder in the class of 12th Science

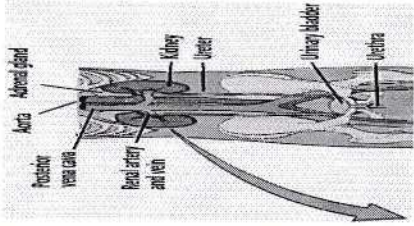
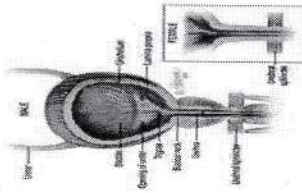
GENERAL OBJECTIVE(S) (Subject Related)

- Students will be able to appreciate normal anatomy of urinary bladder as well as identify abnormalities in urinary bladder.

LESSON OBJECTIVES

- Discuss the anatomical position, size, shape and structure of urinary bladder
- Enlist different abnormalities involved in urinary bladder.



TIME ALLOTTED	SPECIFIC OBJECTIVE	CONTENT	TEACHING / LEARNING ACTIVITIES	AV AIDS	EVALUATION
4 minutes	Student will be introduced with the topic	Urinary system includes the important organ to collect the urine till it is expelled out is called as urinary bladder.	Announces topic.	Chart	Who helps to collect and store the urine from kidney?
8 Minutes	Explain the location and size, shape of the bladder.	The urinary bladder is a muscular sac in the pelvis, just above and behind the pubic bone. When empty, the bladder is about the size and shape of a pear.	Shows the diagramme on PPT and explains.	PPT 	Explain the location of the ureters.
18 Minutes	Explain the internal structure of urinary bladder	The detrusor muscle is a layer of the urinary bladder wall made of smooth muscle fibers arranged in spiral, longitudinal, and circular bundles. When the bladder is stretched, this signals the parasympathetic nervous system to contract the detrusor muscle. This encourages the bladder to expel urine through the urethra. Study shows that sitting down allows for improved contraction of the detrusor muscle.	Shows the diagramme on PPT and explains.	PPT 	Describe the histological structure of ureters.



10 Minutes	List down the /disorders abnormalities of the bladder.	<p>Disorders of or related to the bladder include:</p> <ul style="list-style-type: none"> • Bladder cancer • Bladder exstrophy: Bladder exstrophy (also known as Ectopia vesicae) is a congenital anomaly that exists along the spectrum of the exstrophy-epispadias complex and most notably involves protrusion of the urinary bladder through a defect in the abdominal wall. • Bladder infection • Bladder spasm • Bladder stones • Cystitis • Hematuria • Paruresis is a type of phobia in which the sufferer is unable to urinate in the real or imaginary presence of others, such as in a public restroom. • Urinary incontinence • Urinary retention 	<p>What are the disorders of the bladder?</p> <p>Explains with the help of black board.</p>	Black board	Enlist the disorders of the bladder.
5 Minutes	Summarize the topic.	<p>Today we have learnt:</p> <p>Location and size, shape of the bladder, internal structure of urinary bladder, blood supply and nerve to the bladder, the disorders of the bladder.</p>	What we have learnt today?	Black board	Learner will summarize the topic.
	Students will write an	<p>Write an assignment on :</p> <p>Enlist the disorders of the bladder. (05Marks)</p>			Learner will write an



assignment .				assignment on the disorders of the bladder.
	<p>References:</p> <p>Tortora, (South asian 2015), Principles of Anatomy and Physiology" 10th Edi., Wiley inter 902-904</p> <p>Chourasia ,B.D.(2004), "Human anatomy" 4th Edi., CBS Publishers, Pg No.301-304</p> <p>Waugh, Anne(2003), "Ross and Wilson's Anatomy and Physiology in health and illness" 12th Edi, Churchill Livingstone, Pg.No.346-348</p>			



(Signature)
PRINCIPAL
 Maharshi Karve Stree Shikshan Samstha's
 Smt. Bakul Tambat Institute of
 Nursing Education
 Karvenagar, Pune-411052.

APPLIED SOCIOLOGY

LESSON PLAN

ON

INTERPERSONAL RELATIONSHIP OF

INSTITUTIONS AND

SOCIAL CONTROL



Lesson Plan-

NAME OF THE TEACHER	: Mrs.Aaditi Shirke
SUBJECT	: Applied Sociology
UNIT / SESSION	: Unit-VI
TOPIC	: Interpersonal relationship of institutions and social control
CLASS / GROUP	: 1 st year B.Sc. Nursing Semester-I
NUMBER OF THE STUDENTS	: 50 students
TEACHING METHOD(S)	: Lecture cum discussion
TEACHING AID(S)	: PowerPoint presentation, pictures
PLACE/ VENUE	: 1 st year B.Sc. Classroom
DATE AND TIME (DURATION)	: 02/08/2022 1 hour
PREVIOUS KNOWLEDGE OF THE STUDENTS	: 12 th Science

GENERAL OBJECTIVES(S) (Subject Related)

The students will know the meaning, aim and process of social control.

LESSON OBJECTIVE

1. To understand the interpersonal relationship of institutions.
2. To understand the meaning and definition of social control
3. To determine the aim and objectives of social control.
4. To explain the process of social control.
5. To discuss the means of social control



TIME ALLOTTED	SPECIFIC OBJECTIVE	CONTENT	TEACHING/ LEARNING ACTIVITIES	AV AIDS	EVALUATION
10 mins	To understand the interpersonal relationship of institutions.	INTER-RELATIONSHIP OF INSTITUTIONS <ul style="list-style-type: none"> • Social institution is a group of social positions connected by social relations performing a social role. • These are established to fulfill the needs of individuals. • In social institutions group of people work together with a common goal or objective. • They work to socialize the group of people in it. • The basic needs of individuals are satisfied through basic social institutions such as family, marriage, education, religion, government, economy, politics, etc. • Each social institution has its own objectives and functions. For example, family as an institution carries out production and caring of off springs. • Educational institutions impart knowledge and skills to individuals. • Economic institutions are responsible for manufacture and delivery of goods and services. • The Government frames and enforces rules and procedures. 	Discussion	PowerPoint presentation	In short explain interpersonal relationship of institutions.
15 mins	To understand the meaning and definition of social control	MEANING AND DEFINITION OF SOCIAL CONTROL <ul style="list-style-type: none"> • Social control is a system through which a society exercises controls over the behavior and activities of individual members by deploying formal and informal methods. 	Discussion	blackboard	Define social control?



		<ul style="list-style-type: none"> • EA Ross an American Sociologist who introduced the concept of social control defined social control as a "system of devices whereby society brings its members into conformity with the accepted standards of behavior". • Social control is a collective term for those processes, planned or unplanned by which individuals are taught, persuaded or compelled to conform to the usages and life values of groups. <p style="text-align: right;">-Roucek</p> <p>(1947)</p> <ul style="list-style-type: none"> • Social control is a process by which, through the imposition of sanctions, deviant behavior is counteracted and social stability maintained. <p>-Parsons (1954)</p>			
10 mins	To determine the aim and objectives of social control.	<p>AIM OF SOCIAL CONTROL</p> <p>According to Kimball Young (1942), social control aims to bring about conformity, solidarity and continuity of a particular group or society.</p> <p>OBJECTIVES OF SOCIAL CONTROL</p> <ul style="list-style-type: none"> • Provide fair and equal chances for co-operation and competition to all individuals, groups and institutions. • Appreciate and reward the winners of social cause and take punitive actions against anti-social individuals. • Bring desired modifications in agencies of social control. • Protect vulnerable individuals in the society. 	Discussion	PowerPoint presentation	What are the aim and objectives of social control?



15 mins	To explain the process of social control.	<p>Process of Social Control</p> <ul style="list-style-type: none"> • Social control takes place when a person is forced to act according to the wishes of the other and not in accordance with his own interests. • It occurs in every aspect of the society such as in the family, peer groups, administrative organizations, non- governmental organizations, and also in the government. It operates at three levels: <p>1)Group over group: In every group there are some deviations from the set norms. Any deviation beyond a certain degree of tolerance is considered a threat to the welfare of the group. The group then uses rewards or punishments to control the behavior of the individual and bring the non-conformists to line. All these efforts by the group are called social control.</p> <p>2)Group over its members: Every social control commits errors in the process of socializing the individual.</p> <ul style="list-style-type: none"> • Individual's group own desires may not exactly coincide with the social expectations of his group. • Social control operates on the basis of individual's desire for social status, induces him to conform to group standards of conduct whatever his personal temptations. <p>3)Individuals over their fellow members:</p> <ul style="list-style-type: none"> • In the process of socialization the growing child learns the values of his own groups as well that of the larger society. • The individual learns ways of doing and thinking that are thought to be right and proper. • He internalizes the social norms which become a part 	Lecture	PowerPoint presentation	Explain the process of social control.
---------	---	---	---------	-------------------------	--



		<p>of his personality.</p> <ul style="list-style-type: none"> • Individuals have deep-rooted sentiments that help him to co-operate with other fellow members to work for social welfare. • Sometimes these sentiments by themselves are not enough to suppress the impulses of the individuals. • Society has to make use of its mechanism to accomplish the necessary order and discipline. This mechanism is termed as social control. 			
10 mins	To discuss the means of social control.	<p>MEANS OF SOCIAL CONTROL</p> <ul style="list-style-type: none"> • Formal means • Informal means <p>FORMAL MEANS:</p> <ol style="list-style-type: none"> 1. Law 2. Education 3. Coercion 4. State <p>INFORMAL MEANS:</p> <ol style="list-style-type: none"> 1. Norms and more 2. Beliefs 3. Folkways 4. Custom 5. Fashion 6. Religion and mortality 7. Values 	Discussion	Pictures	Elaborate the means of social control.



5 mins	Summarize the topic.	Today we have learnt: The interpersonal relationship of institutions. The definition of social control, its aim and objectives, process and means of social control.	What we have learnt today?	Blackboard	Learner will summarize the topic.
	Students will write an assignment.	Write an assignment on: Explain the process of social control. (05 marks)			Learner will write an assignment on process of social control.
		REFERENCES: <ul style="list-style-type: none"> Purnimakhanna's , Sociology for Nurses, AITBS Publishers, India. Page no. 248-260 KP Neeraja. Textbook of Sociology for Nursing students, Page no. 270-282 KrishneGowda. Sociology for Nurses, Page no. 175-182 			




PRINCIPAL
 Maharshi Karve Stree Shikshan Samstha
 Smt. Bakul Tambat Institute of
 Nursing Education
 Karvenagar, Pune-411052.

**MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE**

First Year B.Sc. (N)

UNIT PLAN

Course Title: Applied Psychology

Hours: 4 hours

Unit No: II

Name of the Unit: Biological basis of behavior - Introduction

Name of the Faculty: Mrs. Bijayalakshmi Devi L (Associate Professor)

General Objectives:

- Describe biology of human behaviour



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe biology of human behaviour	<ul style="list-style-type: none"> • Body mind relationship • Genetics and behaviour 	1 hour	Lecture cum discussion, power-point presentation.	PPT	<ul style="list-style-type: none"> • Essay • Short answer
	<ul style="list-style-type: none"> • Inheritance of behaviour 	1 hour			
	<ul style="list-style-type: none"> • Brain and behaviour 	1 hour			
	<ul style="list-style-type: none"> • Psychology and sensation – sensory process –abnormal and normal 	1 hour			



Sign of Class Coordinator




Sign of Principal

PRINCIPAL

Marshi Karve Stree Shikshan Samithi's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of Nursing Education,
Karvenagar, Pune – 411052

UNIT PLAN

COURSE TITLE: Second year P. B. B. Sc. Nursing

UNIT: 1

Subject: MENTAL HEALTH NURSING

Unit Title: Introduction and historical development

Hours: 5 hours

General objectives: The student will acquired knowledge on theories of personality development and relevance to nursing practice

Competencies	Contents	Hours	T/L activities	Teaching aids	Methods of evaluation
<ul style="list-style-type: none"> Describe the history of development of mental health nursing profession. 	History of psychiatry Historical development of mental health nursing.	2	Lecture and Discussion Seminar	PPT and chalkboard	Assignment
<ul style="list-style-type: none"> Appreciate the trends and issues in the field of psychiatric nursing. 	Review of the concept of mental health and illness & mental mechanisms Role and qualities of mental health and psychiatric nurse Mental health team and functions of team members.	1	Lecture and Discussion Seminar	PPT and chalkboard	Assignment
<ul style="list-style-type: none"> Explain act, law applicable to mental health. 	Philosophy, principles of mental health and psychiatric nursing. Theoretical approaches to Psychiatric Nursing.	1	Lecture and Discussion.	PPT and chalkboard	Assignment
<ul style="list-style-type: none"> Discuss the National Mental Health Programme and right of mentally ill person 	Concept of normal and abnormal behavior. Legal aspects in psychiatry and mental health services.	1	Lecture and Discussion.	PPT and chalkboard	Assignment


Sign of Class Coordinator




Sign of Principal

PRINCIPAL
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

UNIT PLAN

Course Title: Second Year P.B.BSc Nursing

Unit No: II


Subject: Mental Health Nursing

Unit Title: Classification and assessment of mental disorders

Hours: 5 hours

General Objective: At the end of the unit students will describe terminology, classification, etiological factors, and mental health examination

Competencies	Content	hour	Teaching learning activity	Teaching A.V AIDS	Evaluation
<ul style="list-style-type: none">Describe terminology use in psychiatry	Terminologies used in Psychiatry	1	Lecture and discussion	PPT and chalkboard	Essay type
<ul style="list-style-type: none">Classify of mental disorders	Classification of mental disorders- ICD-10 classification	1	Lecture and discussion	PPT and chalkboard	Assignment
<ul style="list-style-type: none">List down the etiological factorsExplain psychopathology of mental disorders	Etiological factors and psychopathology of mental disorders	1	Lecture and discussion	PPT and chalkboard	Essay type and short answer
<ul style="list-style-type: none">Discuss history takingExplain mental status examination	History taking and mental status examination	2	Lecture and discussion	PPT and chalkboard	Short answer


Sign of Class coordinator




Sign of Principal
PRINCIPAL
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

**MAHARSHI KARVE STREE SHIKSHAN SAMSTHA'S
SMT. BAKUL TAMAT INSTITUTE OF NURSING EDUCATION
KARVENAGAR, PUNE**

First Year B.Sc. (N)

UNIT PLAN

Course Title: Applied Psychology

Hours: 4 hours

Unit No: II

Name of the Unit: Biological basis of behavior - Introduction

Name of the Faculty: Mrs. Bijayalakshmi Devi L (Associate Professor)

General Objectives:

- Describe biology of human behaviour



Competencies	Contents	Hrs./ minutes	Teaching learning activities	Teaching aids	Methods of evaluation
Describe biology of human behaviour	<ul style="list-style-type: none"> • Body mind relationship • Genetics and behaviour 	1 hour	Lecture cum discussion, power-point presentation.	PPT	<ul style="list-style-type: none"> • Essay • Short answer
	<ul style="list-style-type: none"> • Inheritance of behaviour 	1 hour			
	<ul style="list-style-type: none"> • Brain and behaviour 	1 hour			
	<ul style="list-style-type: none"> • Psychology and sensation – sensory process –abnormal and normal 	1 hour			



Sign of Class Coordinator




Sign of Principal

PRINCIPAL

Marshi Karve Stree Shikshan Samithi's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

LESSON PLAN
ON
PHYLOSOPHY, PURPOSES, ELEMENTS, AND
SCOPE OF NURSING
ADMINISTRATION

SUBMITTED BY: Mrs Dipali Awate



LESSON PLAN –

SUBJECT : Nursing administration

TOPIC : Introduction/Philosophy, purposes, elements and scope of nursing administration.

CLASS / GROUP : IInd P.B.Sc. Nursing

NUMBER OF THE STUDENTS : 30

TEACHING METHOD(S) : Lecture / Discussion

TEACHING AID(S) : Power Point Presentation

PLACE/ VENUE : Class Room

DATE AND TIME (DURATION) : 60 Minutes

PREVIOUS KNOWLEDGE OF THE STUDENTS : .

TEACHER'S NAME : Mrs. Dipali Awate



GENERAL OBJECTIVE

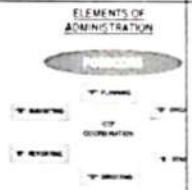
Will be able to manage nursing students, health care setup following the basics of administration

LESSON OBJECTIVES

On completion of this lesson, students will be able to-

- explain the meaning of administration and elements of administration;
- Describe the concept and philosophy of nursing and public administration;
- State the objectives and discuss the purposes of nursing administration;
- Describes the features of philosophy of nursing administration;
- Describe the components of nursing service philosophy;
- Explain the scope of nursing and public administration.



TIME ALLOT TED	SPECIFIC OBJECTIVE	CONTENT	TEACHING / LEARNING ACTIVITIES	AV AIDS	EVALUATION
3 minutes	Introduces topic	Organizational goals and objectives require appropriate administration and management. Nursing administration is practiced everywhere with the globalization of health care. We have walked past the traditional models of care settings to a wide variety of setting namely at home, in the neighborhood, in the military, in acute care settings, in rural area, in sports and anywhere else imaginable where ever humans live. The delivery of health care as it largely depends on the type of administration it is essential for all the nurses to understand the concept and philosophy underlying the nursing and public administration and should be able to explain the purpose and scope of administration, which are elaborated briefly in this unit.	Questions: What are the elements of nursing service administration Announces topic	PPT	
	Recall and explains the Meaning of administration and its elements	Planning, organizing, staffing, directing, controlling & coordinating, reporting & recording, budgeting. Definition of administration: <i>" The process concerned with determining goals, objectives, policies and plans for operation of health organization"</i>	Teacher revises previous learning with help of smart art.		Define management Define administration.
7 Minutes	Describes the concept and philosophy of nursing administration	Nursing administration involves the implementation of policy, which has been outlined by the selected representatives of the health and nursing. The health policy enunciated by policy lawmakers provides the framework within which nursing and public administration work. The law, rules framed under the law, becomes the basis of administrating authority. Policy and administration are two sides of the same coin and it is difficult to say as to where	Writes the terms on blackboard Explains the meaning of Philosophy with example on black	Black board explanation	



		<p>health policy ends and administration begins.</p> <p>The modern concept of adequate client care interprets total client needs, whether these needs be diagnostic, preventive or therapeutic, physical, psychological, spiritual or social. It recognizes the client as a person with an individual personality, and with individual needs, which has come from a recognized place within the family and the community.</p> <p>This broad based social concept of total client care has many implications for the nursing department, its activities, competencies, and attitude of the nursing staff. Nursing department is assigned the specific responsibility of providing for safe, adequate, and satisfying client care through the medium of quality nursing.</p> <p>The Philosophy of nursing service administration is made up of the benefits, and values that directly influence the professional practice of nursing within the health care setting. The basic purposes of nursing services are to provide meaningful work environments, and quality nursing care to the client. The philosophy of nursing services should be reflective of the-overall institutions purposes and philosophy statements.</p>	board.		
10 Minutes	Describes the features of philosophy of nursing administration	<p>The philosophy underlying administration of nursing services is based on following features:</p> <p>Inter-relatedness: Constant and careful attention is given to interrelated factors like quality, quantity, time, cost of work, available resources.</p> <p>Factual evidence: Obtaining factual evidence in evolution, execution and control of work plan helps to avoid wastage of resources at any level of administration.</p> <p>Delegation of responsibility: Placing the responsibility for the decision at the lowest possible organizational level</p>			Why the feature communication is important in philosophy construction?

		<p>helps to attain decision as speedily as possible.</p> <p>Individual and organizational goal: Administration is deeply concerned with human relation. The function of the administrator is to obtain an established objective through management of people. Good morale of staff is essential to achieve successful.</p> <p>Effective communication: Proper flow of communication is needed in all the related and inter-dependent components of a system to maintain balance in all networks.</p> <p>Flexibility: One of the most important elements of nursing service administration is to meet and adopt to the changing need of the organization, community, individual and society in general. Flexibility within the organizational policies permits change in schedules and routines that in turn boosts the morale of the staff, improves efficiency, generates interests and is educative.</p>			
8 Minutes	Describe the components of nursing service philosophy	<p>Components of nursing service philosophy: In the first area, the task for the nurse manager is to decide whether and how to incorporate nursing theory while formulating philosophy. This is done by 3 methods:</p> <ol style="list-style-type: none"> 1. First method is an eclectic approach, selecting ideas and constructs from various nursing theories and incorporating these into the philosophy. 2. A second method is to use one theory throughout the philosophy. 3. A third approach is to adopt a theory, then attach the entire document describing the theory to the philosophy and refer to the theory at appropriate places in the philosophy. <p>A second set of values related to nursing/nursing practice center around practice, education and research. Values specific to education are essential content for most departments of nursing. The beliefs may focus on the need</p>	Teacher explains the components of nursing service philosophy.		Ask to apply theory for philosophy construction.

		<p>for continuing education off staff members.</p> <p>The third value related to the concept of nursing practice is research and this includes the department's commitment to applying research findings or supporting others in their research efforts.</p> <p>The last content area related to nursing/nursing practice is nursing's role in over all organization.</p> <p>Sample statements of philosophy of nursing. service administration in a hospital or community set-up are:</p> <ol style="list-style-type: none"> 1. Administer safe, high quality, cost effective care to clients, family and community. 2. Provide an environment for promotion and maintenance of health for all individuals. 			
4 Minutes	Explain the evaluation criteria	<p>Evaluation criteria to evaluate philosophy:</p> <ul style="list-style-type: none"> • The philosophy is evaluated for usefulness and thoroughness • Reference is made to the purpose of the nursing service. • Terminology used is understood by nurses, clients, and others. • The philosophy is concise. • Statements of beliefs and values are included. 	Explain with the help of examples.		
3 Minutes	Discuss the purposes of nursing administration	<p>The main purpose of administration is to facilitate or help the functioning within an organization and maintain a high standard of performance.</p> <p>The nursing administration should aim for quality care for which the administrative and operative functions should be geared towards the smooth running of nursing service/ concerned departments.</p> <p>The nursing manager in order to maintain a congenial work atmosphere should try to see that she facilitates with all the</p>			

		necessary arrangements, services to her/his personnel for Achieving the organizational and professional objectives.			
8 Minutes	Enlist the nursing service objectives	Objectives of nursing service department: To render high quality of nursing care in which the physical, psychological, spiritual and social needs of client are met To carry out therapeutic measures or ordered by the physician with intelligent application to the needs of the individual client. To make studies related to nursing care and nursing service in order to improve the quality of nursing and the effective utilization of personnel. To participate in overall planning for meeting the total needs, and improving the care of the clients.			
12 Minutes	Describes the Scope of nursing	Scope explains the coverage or the extent of activities, functions. In other words, it describes the extent of its application ship with other organizations or other departments. The scope of administration is very wide. It is not only restricted to public administration that deals with three functionaries, i.e. legislative, executive and judiciary. As administration is universal in nature, its scope is wide. It covers all the areas like school, hospital, business etc., all the managerial activities and functional areas of management and administration like personnel, financial, material and production are covered. Since, administration permeates all planned human activities; hence it is a center of all human affairs. Its principle aspects are formulation of policy and its implementation for the attainment in an optimum manner of stated ends in the shape of service or products. Administration is an activity which demands correct analysis and accurate orientation. Scope of the nursing administration also encompasses the activities of the formally convened associations of nursing	Explains the Scopes of nursing by giving examples.	Shows table on black board	What difference you find in administration and management



	<p>persons, e.g. state association branches of nurses. The associations are also formed of special & led groups of nurses like cardiac, neurology, obstetric, midwifery, pediatric, etc. The associations have a participative role in the overall administration of nursing services in any organisation.</p> <p>Nursing administration also has scope within the realm of international health policies, as the nursing policies take into consideration the declarations made by agencies like: World Health Organisation, International Council of Nurses (ICN), American Nurses Association (ANA), National League for Nursing (NLN) etc. The declarations are integrated and adopted into the local policy of nursing practice and education, for example Health for All through Primary Health Care.</p> <p>Lastly we can say that the scope of nursing administration is accepted in the spirit of interdependence, collaboration, association between the broad areas of practice, education and research. As the definition of administration entails achievement of desired goal with the actions of group of people then the scope of nursing administration lies in teamwork.</p> <p>Teamwork develops with networking together of professionals and non-professionals, where each one functions according to his ability but participates in achieving the goal of quality nursing care. Therefore, teamwork is necessary at all levels of administration.</p>			
--	--	--	--	--



		<p>LESSON SUMMARY:</p> <p>In this unit you have studied about the meaning and definition of administration and management. You are also helped to understand the concept and identify the philosophy of public and nursing administration. The unit also explained the objectives of nursing service department. In the end you have studied about the scope of nursing administration from which the functions or elements of administration can be derived which you will be studying in the next unit. Mission, vision, value statements, objectives and philosophy act as a basis for any organization. So an administrator has to be vigilant while formulating these. 5 Minutes.</p> <p>RECAPTULATORY QUESTIONS:</p> <p>As a nurse director you are considered as a top level manager, describe the components of philosophy.</p> <p>TAKE HOME ASSIGNMENTS:</p> <ul style="list-style-type: none"> • Write the 5 statements of Nursing and health services 			
--	--	---	--	--	--

J. Meena
PRINCIPAL



		<p>References</p> <ol style="list-style-type: none"> 1. Basavanthappa B T. Nursing administration. 1st ed. New Delhi: Jaypee brothers medical publishers (p) ltd; 2000. 2. Wise P S. Leading and managing in nursing. 1st ed. Philadelphia: Mosby publications; 1995. 3. Koontz H , Weihrich H . Essentials of management an international perspective. (1st ed). New Delhi: Tata Mc Graw Hill publishers; 2007. 			
--	--	--	--	--	--

A. Meers

LESSON PLAN ON PERT MBO AND MBE

SUBMITTED BY: Mrs. Dipali Awate



LESSON PLAN UNIT:-3 PLANNING

NAME OF THE TEACHER : Mrs. Dipali Awate

SUBJECT : Nursing Management

TOPIC : Programme evaluation and review
technique(PERT), Gantt chart, Management by
objectives(MBO) and MBE

CLASS / GROUP : II year P.B.Bsc Nursing.

TEACHING METHOD(S) : Lecture / Discussion, demonstration

TEACHING AID(S) : Power Point Presentation

PLACE/ VENUE : pbbsc second year class

DATE AND TIME (DURATION) : 60 Minutes

PREVIOUS KNOWLEDGE OF THE STUDENTS : Student know the term planning , management
and principles of planning.



LESSON OBJECTIVES: After going through this lesson, students will be able to:

- Comprehend meaning of terms MBO, MBE and PERT
- Define MBO, MBE and PERT
- Enumerate the steps of MBO
- List down the principles of MBO
- List down the advantages and disadvantages of MBO




TIME	SPECIFIC OBJECTIVE	CONTENT	TEACHING / LEARNING ACTIVITIES	AV AIDS	EVALUATION
2	Introduction	<ul style="list-style-type: none"> An organization can have many objectives. The objectives of the workers may differ from that of management. The Principles of MBO aims at -coordinating the individual goals with that of organizational goals. Through this principle, the management and workers work without any conflicts. 	Teacher explains the meaning of terms MBO	PPT	Students comprehend meaning of term MBO
	Define MBO	<p>Each and Every employee of an organization works whole heartedly towards the attainment of the objectives of an organization is known as Management by objectives: - Peter F. Drucker.</p> <p>John Humble calls it "a dynamic System which integrates the company need to achieve its goal for profit and growth with managers need to contribute and develop himself.</p>	Teacher narrate the definition with explanation	PPT	
	Enumerate the steps and list down the principles of MBO	<ul style="list-style-type: none"> MBO comprises of the three important principles. <p>1. FRAMING THE OBJECTIVES :</p> <p>a) EACH AND EVERY OBJECTIVE HAS DIFFERENT GOALS:</p> <p>Objectives attained in the lower level help in the achievement of objectives at the higher level.</p> <p>Each objective depends on the objective below it and helps in achievement of Upper level objectives.</p> <p>These steps help in the achievement of upper level objectives by directing the members and Departmental activities.</p> <p>b) AIMS OF MANAGEMENT BY OBJECTIVES.</p> <ol style="list-style-type: none"> Each and every activity of the organisation is directed towards satisfying the goals. This is the last stage of the organisation. Objectives may be short and clear. The objectives must be easily understood by persons who are involved in the 	Teacher describe and discusses the steps char with student	PPT	

		<p>activity of achieving them.</p> <ol style="list-style-type: none"> Goals must agree with the policies and procedures of the organisation. Goals must be efficiently evaluated, dependent on decision and dependable. Goals must be reachable within a given period. <p>C) CLEAR – CUT AIMS :</p> <ol style="list-style-type: none"> The individual goals and organizational goals must be clear. If the aims are not clear then confusion arises. Goals must be fixed clearly at all management levels. <p>2. IMPLEMENTATION:</p> <ol style="list-style-type: none"> Managers require efficiency, Intelligence and ability in order to attain the common objective of the organization. They must be properly remunerated and motivated so that they will put on best efforts in management by objectives. Top level executives must not enforce their control through management by objectives, otherwise it will change into control by objectives. <p>3. EVALUATING THE RESULTS</p> <ol style="list-style-type: none"> The objective fixed must be evaluated with the results obtained. The managers at all levels must have a watch on the activities of the subordinates to attain the objectives and after a specified period the results achieved have to be evaluated. 			
--	--	--	--	--	--



List down the advantages of MBO	<p>(1) It promotes better communication relationship between the superior and his subordinates.</p> <p>(2) It gives the subordinate an opportunity to fix his own targets in consultation with his superior.</p> <p>(3) As the subordinates have the freedom to determine their own targets, they feel motivated.</p> <p>(4) The periodic review of the subordinate's performance enables him to know whether he is proceeding in the right direction.</p>	Teacher explains the different committees and their role in health planning.	PPT	Students discuss the advantages and disadvantages of PERT
List down the disadvantages of MBO	<p>(1) The superior and his subordinate may have to meet several times for the sake of setting the objectives mutually.</p> <p>(2) Periodic review of the subordinate's performance involves lot of time and also paper work.</p> <p>(3) MBO has not much to do with the lower levels of management.</p>		PPT	
Define PERT	<p>The program (or project) evaluation and review technique, commonly abbreviated PERT, is a statistical tool, used in project management, which was designed to analyze and represent the tasks involved in completing a given project.</p> <p>It is commonly used in conjunction with the critical path method (CPM).</p>	Teacher narrate the definition of PERT with explanation	PPT	Students comprehend the meaning of PERT
	<p>"PERT is basically a management planning and control tool. It can be considered as a road map for a particular program or project in which all of the major elements (events) have been completely identified, together with their corresponding interrelations"</p> <p>Project management technique that shows the time taken by each component of a project, and the total time required for its completion. PERT breaks down the project into events and activities, and lays down their proper sequence, relationships, and duration in the form of a network. Lines connecting the events are called paths, and the longest path resulting from connecting all events is called the critical path. The length (duration) of the critical path is the duration of the project, and any delay occurring along it delays the whole project. PERT is a</p>		PPT	

		<p>scheduling tool, and does not help in finding the best or the shortest way to complete a project.</p> <ul style="list-style-type: none"> • A method to analyze the tasks involved in completing a given project. • Focus is paid to the time needed to complete each task, and identifying the minimum time needed to complete the total project. 			
	Describe the usage & purposes of PERT	<ol style="list-style-type: none"> 1. Construction of a new plant 2. Research and development of a new product 3. NASA space exploration projects 4. Movie productions 5. Building a ship 6. Government-sponsored projects for developing a new weapons system 7. Relocation of a major facility 8. Maintenance of a nuclear reactor 9. Installation of a management information system 10. Conducting an advertising campaign <ul style="list-style-type: none"> • To analyze the involved tasks in completing a given project, especially the time needed to complete each task, and to identify the minimum time needed to complete the total project. • To simplify the planning and scheduling of large and complex projects. 		PPT	
	Enumerates steps in PERT	<ol style="list-style-type: none"> 1. Identify the specific activities and milestones. 2. Determine the proper sequence of the activities. 3. Construct a network diagram. 4. Estimate the time required for each activity. 5. Determine the critical path. 6. Update the PERT chart as the project progresses. 		PPT	

Construct the sample diagram for self activity	<ul style="list-style-type: none"> • Optimistic time (O) = the shortest time an activity may take if everything goes well. • Pessimistic time(P) = amount of time an activity will take if everything goes wrong. • Most probable time(M)=Most realistic estimate of how much an activity will take. the best estimate of the time required to accomplish a task, assuming everything proceeds as normal (the implication being that the expected time is the average time the task would require if the task were repeated on a number of occasions over an extended period of time). <p>ES= earliest start time for a particular activity, EF= earliest finish time for a particular activity, where EF= ES+ (estimated) duration of the activity. Starting time for project 0. Activity A: ES= 0, EF= 0 + duration (2 weeks) =2, • Activity B: ES = EF for activity A 2, EF = 2 + duration (4 weeks) = 6.</p>	Teacher describes the PERT activity schedule diagram	 PPT	Students calculate and schedule self activities in diagrammatic form.
	<ul style="list-style-type: none"> • PERT is useful because it provides the following information: • Expected project completion time; • Probability of completion before a specified date; • The critical path activities that directly impact the completion time; • The activities that have slack time and that can be lend resources to critical path activities; • Activity start and end date. 	Teacher explains the benefits of PERT	PPT	
	<p>Conclusion: Management by objectives (MBO) is a systematic and organized approach that allows management to focus on achievable goals and to attain the best possible results from available resources.</p>			

PRINCIPAL

		PERT is a technique of representing a project plan in a network form. It starts with the determination of objectives. specifying clearly as to what is to be achieved and ends with the completion of the project. Any project, therefore, has to be analyzed in depth and inter-relationships of the steps in the project determined in details. This is then represented in a graphic form known as Network Diagram. Thus a network diagram of activities is the key feature of PERT and acts as a ROAD MAP to reach the objective of the programme or project.			
		Assignment: <ol style="list-style-type: none"> 1. Define Management by objectives? 2. What do you mean by Management by exception? 3. What is M.B.O? 4. What are the advantages and disadvantages of M.B.O ? 			
		References: <ol style="list-style-type: none"> 1. Jogindra Vati (2013). Principles & practice of nursing management and administration, 1 ed., New Delhi, Jaypee Brothers Medical publishes (P) Ltd. 2. Marquis, B. L., & Huston C. J. (2009). Leadership roles and management functions in nursing: Theory and application (6th ed.). Philadelphia: Wolters Kluwer Health. 3. Drucker, P. F. (1995). People and performance: The best of Peter Drucker on management. Routledge. 4. Koontz, Harold (1990), Essentials of Management, 5th ed. McGraw-Hill series in Management: Singapore. 			



LESSON PLAN ON DISPOSAL OF WASTE

PRESENTED BY: Mrs. Dipali Awate



LESSON PLAN

- Name: Mrs. Dipali Awate
- Subject : community health nursing
- Topic: Disposal of waste
- Class: Second P.B.BSc nursing classroom
- Method of teaching: Lecture and group Discussion
- Time: 1hr



OBJECTIVES

GENERAL OBJECTIVES: at the end of the topic student will understand about the disposal of waste

Specific objective:

- Get introduced to Disposal Wastes
- Discuss about Solid waste
- Describe in detail of Sources of refuse
- Discuss about the storage of waste
- Describe the Collection of waste
- Discuss the methods of disposal
- Explain the public education
- Describe the Economics and Finance for waste disposal
- Discuss about international cooperation of waste disposal.



SR. NO.	SPECIFIC OBJECTIVE	DURATION	CONTENT	TEACHER/LEARNER ACTIVITY	AUDIO VIDEO AIDS	EVALUATION
1.	Get introduce to disposal of waste	2 min	<p align="center">Disposal of waste</p> <p>Introduction:- Disposal of waste is now largely the domain of sanitarians and public health engineers. However , health professionals need to have basic knowledge of the subject since improper disposal of wastes constitutes a health hazard .Further the health professional may be called upon sanitation or coping the waste disposal problems when there is a disruption or breakdown of community health services in natural disasters. These aspects are considered in this section.</p>	Lecture cum discussion	PPT	The group are able to tell about disposal of waste.
2.	Describe solid waste	15 min	<p>Solid Wastes:- The term "solid wastes" includes garbage (food wastes)rubbish (paper, plastics, wood, metal, throw-away containers, glass), sewage treatment residue (sludge and solids from the coarse screening of domestics sewage), dead animals , manure and other discarded material. In India and similar other countries , it is not uncommon to find night soil in collection of refuse . The output of daily waste depend upon the dietary habit , life styles, living standards and the degree of urbanization and industrialization . The per capita daily solid waste produced range between 0.25 to 2.5 kg in different countries. Solid waste , if allowed to accumulate , is a health hazard because;</p> <ol style="list-style-type: none"> It decomposes and favors fly breeding. It attract rodents and vermin. The pathogens which may be present in the solid waste may be conveyed back to man's 	Lecture cum discussion	PPT	The group are able to tell about solid waste.



			<p>food through flies and dust.</p> <p>d. There is a possibility of water and soil pollution , and</p> <p>e. Heaps of refuse present an unsightly appearance and nuisance from bad odors.</p> <p>There is a correlation between improper disposal of solid wastes and incidence of vector born diseases. Therefore , in all civilized countries , there is an efficient system for its periodic collection, removal and final disposal without risk to health.</p> <p>Sources of Refuse:-</p> <p>1.Refuse that is collected by the street cleansing service or scavenging is called street refuse. It consists of leaves, straw , paper, animal dropping and litter of all kind.</p> <p>2. Refuse that is collected from market is called market refuse. It contain large proportion of putrid vegetable and animal matter.</p> <p>3.Refuse that is collected from stables is called stable litter. It contain mainly animal dropping and left-over animal feeds.</p> <p>4.Industrial refuse comprise a wide variety of wastes ranging from completely inert material such as calcium carbonate to highly toxic and explosive compound.</p> <p>5.The domestic refuse consist of ash , rubbish , and garbage. Ash is the residue from fire used for cooking and heating .Rubbish comprise paper, clothing, bits of wood , metal , glass , dust , and dirt. Garbage is waste matter arising from preparation, cooking and consumption of food .It consists of waste food , vegetable peelings and other organic matter. Garbage needs quick removal and disposal because it ferments of storage.</p>			
--	--	--	---	--	--	--



			<p>Storage:- The first consideration should be given to the proper storage of refuse , while awaiting collection . The galvanized steel dust bin with close fitting cover is a suitable receptacle for storing refuse. The capacity of bin will depend upon the numbers of users and frequency of collection .The output of refuse per capita per day in India is estimated to vary from 1/10 to 1/20 c.ft. For a family of 5 members , a bin having a capacity of 5/10 or ½ c.ft. would be needed .If collection is done once in a 3 day , a bin having a capacity of 1½ or 2 c.ft. would be adequate. A recent innovation in the western countries is the “paper sack.”Refuse is stored in the paper sack , and the sack itself is removed with the contents for disposal and new sack is substituted.</p> <p>Public bin : Public bin cater for a larger number of people. They are usually without cover in India because people do not like to touch them. They are kept on a concrete platform raised 2 to 3 inches above the ground level to prevent flood water entering the bin .In bigger municipalities , the bins are handled and emptied mechanically by lorries fitted with cranes.</p> <p>COLLECTION:- The method of collection depends upon the fund available .House to house collection is by far the best method of collecting refuse . Only at some place in the urban areas this kind of facility available .In majority of place in India ,there is no house to house collection system. People are expected to dump the refuse in the</p>			
--	--	--	--	--	--	--



3	Explain methods of disposal	15mn	<p>nearest public bin, which is usually not done. Refuse is dispersed all along the street, and some is throw out in front and around the house. As result, an army of sweepers is required for sweeping the street in addition to the gang for collecting the refuse from public bin. The refuse is then transported in refuse collection vehicles to the place of ultimate disposal. Dead animal are directly transported to the place of disposal.</p> <p>The collection methods normally practiced in this country need drastic revision and improvement in the interest of better hygiene. The environmental hygiene committee (1949) recommended that municipalities and other local bodies should arrange for collection of refuse not only from public bins but also from individual houses. A house to house collection will result in a simultaneous reduction in the numbers of public bins. The open refuse cart should be abandoned and replaced by enclosed vans. Mechanical transport should be used wherever possible as it is more practical and economical than the 19th century methods. There is a wide variety of refuse collection vehicles of all shape and size. The latest arrival in the western countries is the "Dustless Refuse Collector" which has a totally enclosed body.</p> <p>METHODS OF DISPOSAL</p> <p>There is no single method of refuse disposal which is equally suitable in all circumstances. The choice of a particular method is governed by local factors such as cost and availability of land and labour. The principal methods of refuse disposal are:-</p> <ol style="list-style-type: none"> Dumping Controlled tipping or sanitary land-fill 	Lecture cum discussion	PPT	Group are able to explain methods of disposal
---	-----------------------------	------	---	------------------------	-----	---



			<p>c. Incineration d. Composting e. Manure pits f. Burial.</p> <p>a. Dumping:- Refuse is dumped in low lying areas partly as a method of reclamation of land but mainly as an easy method of disposal of dry refuse. As a result of bacterial action , refuse decreases considerably in volume and is converted gradually into humus. Kolkata disposes of its refuse by dumping and the reclaimed land is leased out for cultivation . The drawback of open dumping are; 1.the refuse is exposed to flies and rodents 2.It is a source of nuisance from the smell and unsightly appearance . 3.The loose refuse is dispersed by the action of the wind. 4.Drainage from the dumps contributes to the pollution of surface and ground water. A WHO expert committee (1967) condemned dumping as "a most insanitary method that creates public health hazards, a nuisance , and severe pollution of the environment". Dumping should be outlawed and replaced by sound procedures.</p> <p>b. Controlled tipping:- Controlled tipping or sanitary landfill is the most satisfactory method of refuse disposal where suitable land is available .It is differ from ordinary dumping in that the material is placed in a trench or other prepared area, adequately compacted , and covered with earth at the end of the working day .The term modified sanitary landfill has been applied to those operation</p>			
--	--	--	---	--	--	--



			<p>where compaction and covering are accomplished once or twice a week.</p> <p>Three methods are used in this operation :</p> <ol style="list-style-type: none"> 1.The trench method. 2.The ramp method. 3.The area method. <p>1.The trench method:-Where level ground is available the trench method is usually chosen. A long trench is dug out -2 to 3m (6-10ft.)deep and 4to 12 m ,(12-36 ft.) wide , depending upon local conditions .The refuse is compacted and covered with excavated earth. Where compacted refuse is placed in the fill to a depth of 2 m(6 ft.)it is estimated that one acre of land per year will be required for 10,000 population.</p> <p>2.The ramp method:-</p> <p>This method is well suited where the terrain is moderately sloping .Some excavation is done to secure the covering material.</p> <p>3.The area method :-</p> <p>This method is used for filling land depressions , discussed quarries and clay pits. The refuse is deposited , packed and consolidation in uniform layers up to 2 to 2.5 m(6-8 ft.) deep .Each layer is selected on its exposed surface with a mud cover at least 30 cm (12 inches)thick. Such sealing prevents infestation by flies and rodents and suppresses the nuisance of smell and dust .This method often has the disadvantages of requiring supplemental earth from outside sources.</p> <p>Chemical ,bacteriological and physical changes occur in buried refuse. The temperature rises to over 60 deg.C within 7 days and kill the all pathogens and hastens the decomposition procedure. Then it takes 2 to 3 week to cool down. Normally it takes 4 to 6</p>			
--	--	--	--	--	--	--

months for complete decomposition of organic matter into an innocuous mass. The tipping of refuse in water should not be done as it creates a nuisance from odours given off by the decomposition of organic matter. The method of controlled tipping has been revolutionized by mechanization. The bulldozers achieves the task of spreading trimming and spreading top soil.

C. Incineration:-

Refuse can be disposed of hygienically by burning or incineration . It is the method of choice where is suitable land is not available .Hospital refuse which is particularly dangerous is best disposed by incineration. In incineration is practiced in several of the industrialized countries ,particularly in large cities due to lack suitable land. Incineration is not a popular method in India because the refuse contains a fair proportion of fine ash which make the burning difficult. A preliminary separation of dust or ash is needed. All this involves heavy outlay and expenditure ,besides manipulative difficulties in the incinerator. Further disposal of refuse by burning is a loss to the community in term of the much needed manure. Burning , therefore , has a limited application in refuse disposal in India.

d. Composting:-

Composting is a method of combined disposal refuse and night soil or sludge. It is a process of nature whereby organic matter break down under bacterial action resulting in the formation of relatively stable humus-like material called the compost which has considerable manorial value for the soil. The principal by-product are carbon dioxide ,water and heat. The



		<p>heat produced during composting about 60 deg. C or higher , over a period of several day , destroy eggs and larvae of flies , weed seed and pathogenic agent. The end-product-compost-contain few or no diseases producing organisms , and is a good soil builder containing small amount of the major plant nutrients such as nitrate and phosphorus. The following method of composting now used:</p> <ol style="list-style-type: none"> 1. Bangalore method (Anaerobic method) 2. Mechanical composting (Aerobic method) <p>1. BENGALORE METHOD (Hot fermentation process)</p> <p>As a result of investigation carried out under the auspices of the Indian Council of Agriculture Research at the Indian Institute of Science , Bangalore, a system of anaerobic composting , known as Bangalore method has been developed . It has been recommended as a satisfactory method disposal of town waste and night soil.</p> <p>Trench are dug 90 cm (3 ft.) deep , 1.5 to 2.5m (5-8 ft.)broad and 4.5 to 10m (15-30 ft)long ,depending upon amount of refuse and night soil to be disposed of. Depths greater than 90 cm (3 ft.) are not recommended because of slow decomposition . The pits should be located not less than 800m (1/2 mile) from the city limits . The composition procedure as follows:</p> <p>First layer of refuse about 15 cm thick is spread at the bottom of the trench. Over this, night soil is added corresponding to a thickness of 5 cm .Then alternate layer of refuse and night soil is added in the proportion of 15cm and 5cm respectively , till the heap rises to 30cm above the ground level. The top layer should be of refuse ,at least 25cm thickness. Then the heap is</p>			
--	--	---	--	--	--



		<p>covered with excavated earth. If properly laid, a man's legs will not sink when walking over the compost mass.</p> <p>Within 7 days as a result of bacterial action considerable heat (over 60 deg.c) is generated in the compost mass. This intense heat which persists over 2 or 3 weeks, serve to decompose the refuse and night soil and to destroy all pathogenic and parasitic organisms. At the end of 4 to 6 months, decomposition is complete and the resulting manure is a well decomposed, odorless, innocuous material of high manorial value ready to application to the land. The Environmental Hygiene Committee (1949) did not recommend composting by municipalities with a population of over 100,000. Bigger municipalities should install underground sewers to transport to human excreta.</p> <p>2. MECHANICAL COMPOSTING :-</p> <p>Another method of composting known as Mechanical composting is becoming popular. In this compost is literally manufactured on a large scale by processing raw materials and turning out the finish product. The refuse is the first cleared of salvageable materials such as rags, bones, metal, glass, and item which are likely to interfere with the grinding operation. It is then pulverized in a pulverizing equipment in order to reduce the size of article less than 2 inches. The pulverized refuse is then mixed with sewage, sludge or night soil in a rotating machine and incubated. The factors which are controlled in the operation are the certain carbon-nitrogen ratio, temperature, moisture, PH, and aeration. The entire process of</p>			
--	--	--	--	--	--



		<p>composting is complete in 4 to 6 weeks. This method of composting is in vogue in some of the developed countries, e.g. Holland , Germany , Switzerland, Israel. The government of India is considering the installation of mechanical composting in selected cities. Cities such as Delhi, Nagpur, Mumbai, Chennai, Pune, Allahabad, Hyderabad ,Lucknow, and Kanpur have offered to join the government for setting up pilot plants for mechanical composting .</p> <p>f. Manure Pits:- In rural area in India , there is no system of collection and disposal of refuse. Refuse is thrown around the houses indiscriminately resulting in gross pollution in soil. The problem of refuse disposal in rural area can be solved by digging 'manure pits' by the individual householders. The garbage , cattle dung , straw and leaves should be dumped into the manure pits and covered with earth after each day's dumping. Two such pits will be needed , when one is closed the other will be used . In 5 to 6 months time, the refuse is converted into manure which can be returned to the field. This method of refuse disposal is effective and relatively simple in rural communities.</p> <p>f. Burial :- This method is suitable for small camps. A trench 1.5m wide and 2m deep is excavated , and at the end of each day the refuse is covered with 20 to 30 cm of earth. When the level in the trench is 40cm from ground level, the trench is filled with earth and compacted , and a new trench is dug out. The content may be taken out 4 to 6 months and used on the fields.</p>		
--	--	---	--	--



4	Describe public education	5mn	<p>If the trench is 1 m in length for every 200 persons ,it will be field about one week.</p> <p>Public Education: Refuse disposal cannot be solved without public education. People have very little interest in cleanliness outside their home. Many municipalities and corporations usually look for the cheapest solution ,especially in regard to refuse disposal. What is needed in public education on this matter , by all known methods of health education, viz., pamphlets, newspapers, broadcasting , films etc. police enforcement of thr laws may also be needed at time.</p>	Lecture cum discussion	PPT	Group are able to describe public education
5	Describe the Economics and Finance for waste disposal	5mn	<p>Economics and Finance :- If refuse disposal is to be carried out efficiently , hygienically and economically ,heavy capital outlay will be needed whatever system of disposal is adopted. In the highly industrialized countries upto 20 per cent of municipal budget are spent on the collection and disposal of solid wastes, and even more will be required if the job is to be done adequately.</p>	Lecture cum discussion	PPT	Group are able to describe economics and finance
6	Discuss about international cooperation of waste disposal	5mn	<p>International cooperation: An organization was formed-the international Solid Waste and Public Cleansing Association(ISWA)in 1970, to assist countries in general endeavor to improve sanitary services. A WHO International Reference Centre has also been set up in Switzerland to collect ,evaluate and disseminate information on wastes – disposal practices and to foster research .</p>	Lecture cum discussion	PPT	Group are able to discuss international cooperation



			<p>Summary:- Today's class was all about Disposal of Wastes .So far we have seen and discussed the topic such as,</p> <ul style="list-style-type: none"> • Get introduced to Disposal Wastes • Discuss about Solid waste • Describe in detail of Sources of refuse • Discuss about the storage of waste • Describe the Collection of waste • Discuss the methods of disposal • Explain the public education • Describe the Economics and Finance for waste disposal • Discuss about international cooperation of waste disposal. <p>Conclusion: Disposal of waste is an important procedure to be followed by an individual in a community. health professionals need to have a basic knowledge of the subject since improper disposal of wastes constitutes a health hazard. Health professional may be called upon to give advice in some special situations, such as coping with waste disposal problems when there is a disruption or breakdown of community health services in natural disasters</p>			
--	--	--	--	--	--	--



5.			<p>Bibliography:-</p> <p>1.K. Park, Textbook of preventive & social medicine, 24th edn. 2017, Banarsidas Bhanot publishers,</p> <p>2.Gulani S., Community health nursing, reprint 2011, Kumar publisher, pg.65-81</p> <p>3.Sunita Patney, Textbook of Community health nursing, CBS publishers, 2011; pg.23</p> <p>ASSIGNMENT</p> <p>1 Explain methods of disposal waste?</p>			
----	--	--	---	--	--	--



J. Meers
PRINCIPAL
 Maharshi Karve Stree Shikshan Samstha's
 Smt. Bakul Tambat Institute of
 Nursing Education
 Karvenagar, Pune-411052.

LESSON PLAN ON HOME VISIT

Presented By:

Mrs. Dipali Awate



LESSON PLAN

- Name: Mrs. Dipali AwateP
- Subject : community health nursing
- Topic: home visit
- Class: Second P.B.BSc nursing classroom
- Method of teaching: Lecture and group Discussion
- Time: 1hr



GENERAL OBJECTIVE

At the end of the lecture group will be able to acquire in depth knowledge regarding home visit and will apply the knowledge in community practice

Specific objective

- 1) Get introduced to the topic home visit
- 2) List out the purpose of home visit
- 3) State the principles of home visit
- 4) Write down advantages of home visit?
- 5) Enumerate the steps of home visit?



Sr.no	Specific objective	duration	Content	Teaching/learning activity	a.v.aids	evaluation
1)	Get introduce to the topic home visit	5mn	Home visit Home visit refers to identification and prioritization of health needs of the individual and family at their door steps and provision of care using available resources in natural setting of people the community health nurse not only provides care but prevents diseases, promotes health and plans for health maintenance using her knowledge, technical and analytical skills and decision making abilities	Demonstration		Group are able to introduce home visit
2)	List out principles of home visit	15mn	SMART PRINCIPLES OF WORK <ul style="list-style-type: none"> • Learn your community by collecting relevant information and that's would help in diagnosing the community • Identify the resources of the community and use them efficiently • Be one among the community by establishing a good rapport with community • Learn policies and procedures of your agencies that would allow you to perform your duties freely as well to protect you legally • Conduct need analysis that provides that platform for planning home visit. • Prioritize the identified needs and plan further • Prior to home visit about the family by collecting information from family folder • Empathize and be patient in listening • Respect the individual culture and family 			Group are able to explain principles



3)	enumerate the advantages of home visit	10min	<ul style="list-style-type: none"> • Never try to present in a way that you are the only who knows everything. • While assessing and caring an individual your observation must also be on other members of family • Evaluate the work to assure quality for further improvement <p>ADVADVANTAGES OF HOME VISIT</p> <ol style="list-style-type: none"> 1) The home visit permits the nurse to see the home and family situation in action 2) Family member will be more relaxed in their own surroundings 3) Family practices can be observed to from a basis for teaching 4) The family gains confidence in direct personalized contact 5) The home visits provide an opportunity to look for new health problems. 6) The nurse has an opportunity to observe actual care given by the family members. 7) Other members of the family can be contacted who may have greater influence and control on the member under nursing care 	Demonstration		Group are able to enumerate advantages of home visit
----	--	-------	--	---------------	--	--



4)	List down purposes of home visit	10min	Purpose <ol style="list-style-type: none"> 1) For the prevention of disease 2) Promotion of health 3) To investigate the source of an infectious disease in which case you may be rejected instead of being wanted. 4) To assess the nutritional and immunization status, environmental hazards and give health education. 5) To supervise and guide other health workers. 6) To carry out simple nursing care in the home. 7) Home visiting may be a part of planned visiting programme eg .prenatal. 	Discussion	Group are able to list down purpose of home visit
5)	Explain steps of home visit	20mn	STEPS HOME VISIT <ol style="list-style-type: none"> 1) Establish rapport: the first step during a home visit is to get an understanding of what has been done about the norms, culture, values about the particular community. While home visiting introduces yourself, establishes a friendly relationship through courtesy, graciousness and genuine interest. 2) Fact finding: this step is done to collect information regarding family to assess and prioritize problems/needs of the family while home visiting <ul style="list-style-type: none"> • observe inside and outside of the house • find out good and bad factors that may influences the situation • study the clinical and other records • talk with the person or persons concerned to find out what they know and understand about the situation. use simple language. • Discuss what has been done and what the person wants to do about the problem now and what plan he may have for the future. 3) Examination and analysis of the facts: after the data 	Demonstration	Group are able to explain steps of home visit



			<p>collection, it is very crucial to interpret and analyze the information gathered. true honest analysis to be done based on fact and not on opinion. The personal, environmental economic factors, emotional involvements and the spiritual aspects all have to be taken under consideration to find need/ problems in family</p> <p>a community health nurse analyzes and interprets the information by comparing with known indices, calculations of vital statistics, preparing pie diagram, bar diagram. Etc.</p> <p>4) Planning action with the individual or family: it is very important to plan action with the person and family. Plan should be done according to the need of the family. And availability of resources. It is well to understand that when mother is hungry or when her children are hungry, food is her primary interest and need, and any amount of health teaching will help little. she is not likely to listen until she has talked about the food situation and feels that you can help in this aspect too.</p> <p>5) Action: action depends on the findings in fact finding stage. May she enter the home with a definite idea and plan but it has to be changed according to the obtained information at the time of the visit to meet the needs. A proper interpersonal relationship makes the work easy for community health nurses.</p> <p>in this phase nurse is acting according to the set objectives and also according to the situation. Community health nurse provides care to disabled doing different procedures, giving health education, teaching/ demonstrating family members about different procedures, providing referral services etc.</p> <p>use of expert technical skills is very important in this phase. Nursing knowledge and skills are essential provide care at home. It is needed to carry the home visiting bag,</p>			
--	--	--	--	--	--	--



		<p>thermometer, weighing machine, sphygmomanometer, dressing articles, essential equipment for treating minor elements, etc.</p> <p>6) Follow through: follow through involves periodic visit in such a way that maximum help is given to the needed family, in this stage nurses assess that family is able to follow the things which have been taught to them in previous visits, clients are continuing their medication or not etc.</p> <p>7) Evaluation of services: review each family record periodically and should answer the objective decided before. Evaluate what are the immediate problem needs?</p> <ul style="list-style-type: none"> • list the helpful factors too eg. Coping ability of the family. • List the difficulties and unhelpful factors in the situation • What has been done about immediate problem? • What changes have taken place? • Has she made effective use of men and material measures? • Value of referral services? <p>Evaluation of services helps to decide that any change in care is needed or the service was proper.</p> <p>8) Termination of visit: home visit should be stopped abruptly. Termination of visit in proper way is very important to hold the confidence and rapport towards community health nurses. termination of visit can be done when</p> <ul style="list-style-type: none"> • Nurse client goals are achieved health is restored and the patient can function without nursing action. • A client home. • changes his residence or leaves the home to go to another home. 			
--	--	--	--	--	--



		<ul style="list-style-type: none"> the nurse transfers the patient care to another nurse other members to provide health car <ul style="list-style-type: none"> ✓ early diagnosis of diseases ✓ immunization ✓ first aid ✓ dental health <p>1. MCH AND FAMILY PLANNING</p> <ol style="list-style-type: none"> The public health nurse plays a major role in the MCH and FP services It consists antenatal, post natel, child care services Nurse can easily motivate the mothers to accept the FP methods and gain their cooperation in adopting to a small family norm. <p>2. INDUSTRIAL NURSING SERVICES</p> <ul style="list-style-type: none"> ➤ The nurse can also work industries ➤ The nursing services in industries are <ul style="list-style-type: none"> First aid Regular health check up Care of the sick and injured Industrial safety <p>3. DOMICILLARY NURSING SERVICES</p> <ul style="list-style-type: none"> ➤ The areas where domicillary nursing is practiced in this country are <ul style="list-style-type: none"> Maternity services Health supervision diseases prevention services Services for illness and accidents 			
--	--	--	--	--	--



		<p>4. MENTAL HEALTH NURSING SERVICES</p> <ul style="list-style-type: none"> ➤ Many developing countries have mental health services today./ ➤ Early diagnosis and treatment ➤ Rehabilitation ➤ Psychotherapy <p>5. REHABILITATION CENTRES</p> <ul style="list-style-type: none"> ➤ Rehabilitation means restoration of all treated cases to the highest level of functional ability ➤ Nursing is an important component in the rehabilitation of the disabled 			
--	--	---	--	--	--



CONCLUSION

Conclusion the home visit is considered essential for contributing to the reduction of morbidity and mortality of the postpartum and newborn, increasing the bond between unit and family, and reducing the risk of postpartum complications however the attention turned to these women is still covered with big challenges

ASSIGNMENT

- 1) Write down the steps of home visit
- 2) What are the principles of home visiting

REFERENCES

Bibliography:-

- 1.K. Park, Textbook of preventive & social medicine, 24th edn. 2017, Banarsidas Bhanot publishers,
- 2.Gulani S., Community health nursing, reprint 2011, Kumar publisher, pg.65-81
- 3.Sunita Patney, Textbook of Community health nursing, CBS publishers, 2011; pg.23



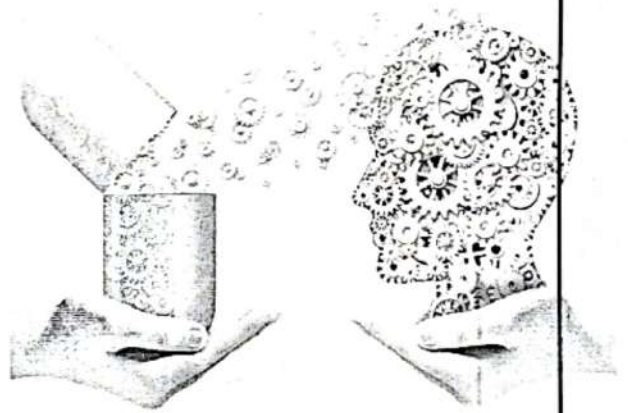
J. Mens
PRINCIPAL

Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052,



LESSON PLAN ON ANTIPSYCHOTIC AND MOOD STABILIZER

Presented by – Ms. Pethkar Shital



LESSON PLAN

Guide Name-Mrs. SHITAL PETHKAR

Subject- Mental Health Nursing

Topic name-Antipsychotic and mood stabilizer

Time-1HR

Place- Classroom

Group-PBBSC Second year

Method of Teaching- Lecture cum Discussion

Audio-visual Aid- PPT,



AIM: At the end of the practice teaching students will be able to gain in depth knowledge about Antipsychotic and antidepressant and will be able to implement that knowledge in clinical practice and in daily life.

OBJECTIVE: At the end of the practice teaching students will be able to-

- ✓ define psychopharmacology
- ✓ classify psychotropic drug
- ✓ define antipsychotic drug
- ✓ describe the mechanism of action of an antipsychotic drug
- ✓ classify antipsychotic drug
- ✓ enlist the indications and contraindications of an antipsychotic drug
- ✓ explain the side effects of antipsychotic drug
- ✓ describe the responsibility of nurse for a patient receiving antipsychotic drug
- ✓ define mood stabilizers
- ✓ describe the mechanism of action of mood stabilizers
- ✓ classify mood stabilizers
- ✓ enlist the indications and contraindications of mood stabilizers
- ✓ explain the side effects of mood stabilizers
- ✓ describe the responsibility of nurse for a patient receiving mood stabilizers



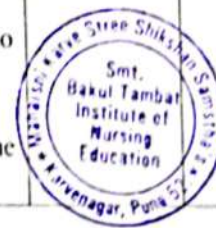
Objective	Time	Content	Teaching Learning Activity	Audio visual Aids	Evaluation
Define psychopharmacology	02min	INTRODUCTION: A psychiatric medication is a licensed psychoactive drug taken to exert an effect on the chemical makeup of the brain and nervous system. Thus, these medications are used to treat mental illnesses. Usually prescribed in psychiatric settings, these medications are typically made of synthetic chemical compounds. Since the mid-20th century, such medications have been leading treatments for a broad range of mental disorders and have decreased the need for long-term hospitalization, therefore lowering the cost of mental health care.	Teacher defined psychopharmacology with the help of PPT.	PPT	What is psychopharmacology?
Classify psychotropic drug	05 min	PSYCHOTROPIC MEDICATION: Any medication capable of affecting the mind, emotions, and behaviour.	Teacher defined psychotropic drug and their classification with the help of PPT.		
Define antipsychotic.	02 min	TYPES OF PSYCHOTROPICS: <ul style="list-style-type: none"> • Antidepressants • Antipsychotics • Anxiolytics • Hypnotics • Mood stabilizers • Stimulants ANTIPSYCHOTICS Antipsychotics, also known as neuroleptics or major tranquilizers. Neuroleptic , originating from Greek: meaning " <i>which takes the nerve</i> " – refers to both common neurological effects and side effects. Antipsychotics are usually effective in relieving symptoms of psychosis in the short term.			



Classify antipsychotics.	05min	<p>HISTORY</p> <p>The original antipsychotic drugs were happened upon largely by chance and then tested for their effectiveness. The first, chlorpromazine, was developed as a surgical anesthetic. It was first used on psychiatric patients because of its powerful calming effect; at the time it was regarded as a non-permanent "pharmacological lobotomy". Lobotomy at the time was used to treat many behavioral disorders, including psychosis, although its effect was to markedly reduce behavior and mental functioning of all types.</p> <p>TYPES OF ANTIPSYCHOTICS</p> <p>This category of medications fall into two categories:</p> <ol style="list-style-type: none"> 1. TYPICAL ANTIPSYCHOTICS or First Generation Antipsychotic Drugs. The typical, or conventional, antipsychotics were first developed in the 1950s. Haldol (haloperidol) and Thorazine (chlorpromazine) are the best known typical antipsychotics. They continue to be useful in the treatment of severe psychosis and behavioral problems when newer medications are ineffective. However, these medications do have a high risk of side effects, some of which are quite severe. In response to the serious side effects of many typical antipsychotics, drug manufacturers developed another category referred to as atypical antipsychotics. 2. ATYPICAL ANTIPSYCHOTICS or Second Generation Antipsychotic Drugs. Most atypical antipsychotics have been developed more recently, although the first atypical antipsychotic, clozapine, was discovered in the 1960s and introduced clinically in the 1970s. These new medications were approved for use in the 1990s. Clozapine, asenapine, olanzapine, quetiapine, paliperidone, risperidone, sertindole, ziprasidone, zotepine, and aripiprazole are atypical antipsychotic drugs. With the discovery of clozapine in 1959, it became evident that this drug was less likely to produce extrapyramidal effects (physical symptoms 	Teacher explained classification of antipsychotic drug with the help of PPT.	PPT	What is classification of antipsychotic drug?
--------------------------	-------	---	--	-----	---



Describe the mechanism of action of an antipsychotic drug	10 min	<p>such as tremors, paranoia, anxiety, dystonia, etc. as a result of improper doses or adverse reactions to this class of drug) in humans at clinically effective doses than some other types of antipsychotics. Clozapine was categorized as the first atypical antipsychotic drug. This category of drugs has also been of great value in studying the pathophysiology of schizophrenia and other psychoses.</p> <p>MECHANISM OF ACTION</p> <p>Antipsychotic drugs tend to block dopamine D_2 receptors in the dopaminergic pathways of the brain. This means that dopamine released in these pathways has less effect. Excess release of dopamine in the meso-limbic pathway has been linked to psychotic experiences. Decreased dopamine release in the prefrontal cortex, and excess dopamine release in other pathways, is associated with psychotic episodes in schizophrenia and bipolar disorder.</p> <p>TYPICAL ANTIPSYCHOTICS</p> <ul style="list-style-type: none"> • Block dopamine receptors, preventing dopamine from stimulating the postsynaptic neurons. • They also have anticholinergic, antihistaminic, and alpha-adrenergic blocking effects, all of which are related to its dopamine-receptor blocking action. • Other than that, they depress the RAS to limit the stimulation entering the brain. <p>ATYPICAL ANTIPSYCHOTICS</p> <ul style="list-style-type: none"> • Block both dopamine and serotonin receptors. • This dual blocking action help relieve neurological adverse effects associated to typical antipsychotics. <p>Both generations of medication tend to block receptors in the brain's dopamine pathways, but atypical tend to act on serotonin receptors as well.</p>	Teacher explained mechanism of antipsychotic drug with the help of video.	Video	Describe the mechanism of action of an antipsychotic drug?
---	--------	--	---	-------	--



PHARMACOKINETICS (Typical Antipsychotics)

Here are the characteristic interactions of typical antipsychotics and the body in terms of absorption, distribution, metabolism, and excretion:

Route	Onset	Peak	Duration
Oral	30-60 min	2-4 h	4-6 h
Intramuscular	10-15 min	15-20 min	4-6 h
T _{1/2} : 2 h, then 30 h Metabolism: liver Excretion: kidney (urine)			

PHARMACOKINETICS (Atypical Antipsychotics)

Here are the characteristic interactions of atypical antipsychotics and the body in terms of absorption, distribution, metabolism, and excretion:

Route	Onset	Peak	Duration
Oral	Varies	1-6 h	Weeks
T _{1/2} : 4-12 h Metabolism: liver Excretion: kidney (urine) and intestines (feces)			



Enlist the indications and contraindications of an antipsychotic drug	05 min	INDICATION <ul style="list-style-type: none"> Organic psychiatric disorders; like Delirium, Dementia. Neurotic disorders. Medical disorders; like Huntington's chorea, Nausea, and Vomiting. Non-Organic psychotic disorders; like Schizophrenia, Mania. Schizoaffective disorder most commonly in conjunction with either an antidepressant (in the case of the depressive subtype) or a mood stabilizer (in the case of the bipolar subtype). Bipolar disorder (acute mania and mixed episodes) may be treated with either typical or atypical antipsychotics Psychotic depression Treatment-resistant (and not necessarily psychotic) major depression as an adjunct to standard antidepressant therapy. Currently used to treat the psychiatric and behavioral symptoms that affect elderly patients with dementia Typical antipsychotics are indicated for schizophrenia and manifestations of other psychotic disorders including hyperactivity, combative behavior, and severe behavioral problems. Some antipsychotics are approved for treatment of bipolar disorder. Atypical antipsychotics are used for treatment of severely ill patients with schizophrenia but are unresponsive to standard drugs. It also reduces the risk of recurrent suicidal behaviors in patients with schizophrenia and schizoaffective disorders. Atypical antipsychotic drugs in managing psychosis, aggression, or agitation in patients with Alzheimer's disease, 	Teacher explained indications and contraindications of antipsychotic drug with the help of leaflet.	Leaflet	What are the indications and contraindications of an antipsychotic drug?
---	--------	--	---	---------	--



		<p>CONTRAINDICATION</p> <ul style="list-style-type: none"> ➤ Presence of diseases that can be exacerbated by dopamine-blocking effects. ➤ CNS depression, circulatory collapse, Parkinsons' disease, coronary disease, severe hypotension, bone marrow suppression, blood dyscrasias. Exacerbated by drug effects. ➤ QTc interval prolongation. Contraindicated to mesoridazine, thioridazine, and ziprasidone; can lead to serious cardiac arrhythmias. ➤ Dementia. Use is associated with increased risk of CV events and death. ➤ Glaucoma, peptic ulcer, urinary or intestinal obstruction. Exacerbated by anticholinergic effects of antipsychotics. ➤ Seizure disorders. Possible severe neurosensitivity can lower seizure threshold in patients with thyrotoxicosis. ➤ Active alcoholism. Antipsychotics can potentiate CNS depression. ➤ Immunosuppression, cancer. Caution is applied because antipsychotics can result to bone marrow suppression and blood dyscrasias. ➤ Pregnancy, lactation. Potential adverse effects on the fetus or neonate. ➤ Caution is used in children younger than 12 years of age who have chicken pox or a CNS infection because children are more likely to develop dystonia and this could cause confusion in the diagnosis of Reye's syndrome. ➤ Known to be hypersensitive to these agents. ➤ Depressed level of consciousness, ➤ Hepatic or renal impairment, ➤ Cardiovascular disease, ➤ Parkinson's disease, epilepsy, ➤ Hypothyroidism, ➤ Prostatic hypertrophy, ➤ Narrow angle glaucoma, ➤ Pheochromocytoma, ➤ Myasthenia gravis. ➤ Care should be exercised when these drugs are prescribed for the elderly during pregnancy, and lactation. 		
--	--	--	--	--



Discuss the side effects of an antipsychotic drug	05 min	SIDE EFFECTS OF ANTIPSYCHOTICS <ul style="list-style-type: none"> • Extrapyramidal Effects: Dystonias, akathisia, tardive dyskinesia, Parkinson's-like symptoms, unwanted movements, ataxia, muscle breakdown, rigidity, tremors, and seizures are some major effects of this category of drugs. Neuroleptic malignant syndrome may occur as well. • Effects on the Central Nervous System: Drowsiness, sedation, and hypnosis occur. Confusion, vertigo, syncope, disturbed sleep, nightmares, and agitation are also reported by various studies. Dementia, amnesia, and loss of memory are some adverse effects. Suicidal ideation in old and young with increased mania, anxiety, agitation, violent behavior, and depression can also be seen in people taking these drugs. • Effects on the Cardiovascular System: Cardiomyopathy is noted in nine out of every 100,000 people using clozapine. Alteration in electrocardiogram (ECG) readings, chest pain, angina, myocarditis, palpitation, tachycardia, edema, phlebitis, and arrhythmias are serious adverse effects. Myocardial infarction (heart attack) occurs in only 1% of people using this category of drug. Orthostatic hypotension is very common. • Hepatic (Liver) Effects: These agents increase the serum concentration of alkaline aminotransferase. Reversible liver cell hyperplasia, increase in bilirubin, jaundice, drug induced hepatitis, and necrosis have been recorded in studies. 	Teacher explained the side effects of an antipsychotic drug with the help of leaflet.	Leaflet	What are the side effects of an antipsychotic drug?
---	--------	---	---	---------	---



		<ul style="list-style-type: none"> • Gastrointestinal Effects: Constipation, dry mouth, anorexia, weight gain, increases in pancreatic enzymes, epigastric distress, abdominal cramps, dyspepsia, heartburn, and nausea are some common adverse effects. • Genitourinary (Urinary and Reproductive) Effects: Impotence, delayed and premature ejaculation, testicular swelling, priapism, increased or decreased libido, vaginal itching, enuresis, polyuria, breast engorgement, galactorrhea, and anorgasmia have been reported. • Other Effects: Cases of blurred vision, hot flashes, dry throat, nasal congestion, severe hyperglycemia, numbness, chills, glaucoma, leukopenia, neutropenia, hyperlipidemia, agranulocytosis, and respiratory depression have been reported. • Pregnancy and Lactation: Antipsychotic drugs can be used in pregnant females since they have shown no teratogenic (development of the fetus or embryo) effects in animal studies. Drugs like clozapine and olanzapine have shown no harm to the fetus. However, during lactation, the metabolites may be disturbed in the milk and could harm the newborn. <p>WITHDRAWAL SYMPTOMS</p> <p>Withdrawal from antipsychotics should be slow and gradual. A period of at least 15–30 days should be considered for this purpose.</p> <p>Nausea, vomiting, psychotic symptoms, hypertension, and sleep disturbances might come back if sudden discontinuation of therapy occurs.</p>		
--	--	---	--	--



Describe the responsibility of nurse for a patient receiving antipsychotic drug	<p>NURSING ASSESSMENT</p> <p>These are the important things the nurse should include in conducting assessment, history taking, and examination:</p> <p>Assess for the mentioned cautions and contraindications (e.g. drug allergies, CNS depression, CV disorders, glaucoma, respiratory depression, etc.) to prevent any untoward complications.</p> <p>Perform a thorough physical assessment (other medications taken, CNS, skin, respirations, and laboratory tests like thyroid, liver, and renal functions tests and complete blood count or CBC) to establish baseline data before drug therapy begins, to determine effectiveness of therapy, and to evaluate for occurrence of any adverse effects associated with drug therapy.</p> <p>NURSING DIAGNOSIS</p> <p>Risk of injury related to Central nervous system effects</p> <ol style="list-style-type: none"> Provide different comfort measures to the client like positioning of legs and arms. Provide safety measures to client to minimize the injuries like raising side rails, adequate lighting. Adequate and continuous monitoring of client after the drug is given to the client. Educate the client and family members regarding side-effects of drug for better understanding and cooperation. 	Teacher explained responsibility of nurse for a patient receiving antipsychotic drug with the help of PPT.	PPT	What is responsibility of nurse for a patient receiving antipsychotic drug?
---	--	--	-----	---



		<p>Impaired physical activity related to extra pyramidal effect</p> <ul style="list-style-type: none"> a) Provide the safe environment to the client like removing of harmful or injurious objects in environment. b) Report the doctor if there are excess tremors. c) Assist the client in performing the activities so that client gets minimal stresses out. d) Make client to sit comfortably till the motor restlessness gets relieved. <p>Impaired urinary elimination related to drug autonomic side-effect</p> <ul style="list-style-type: none"> a) Maintain input-output chart. b) Maintain adequate fluid intake. c) Promotion of normal voiding patterns. d) Administer drugs as per prescription. <p>Risk of activity intolerance related to sedation, weakness (side-effects)</p> <ul style="list-style-type: none"> a) Minimize the excess exhaustion of the client and provide adequate rest. b) Help the client to perform minor activities if any. c) Educate client and family not to operate any dangerous equipment's. <p>GENERAL RESPONSIBILITIES OF A PSYCHIATRIC NURSE</p> <ul style="list-style-type: none"> a) Client is instructed not to abruptly stand to prevent fall due to orthostatic hypotension. b) Check vital signs before and after medication. c) Client is instructed to take sips of water frequently for avoiding of dry mouth; application of glycerine is also recommended. 		
--	--	--	--	--



		<p>d) Increased intake of fluid and high fibre diet is recommended to avoid constipation.</p> <p>e) Educate the client not to drive after taking medication.</p> <p>f) Educate the client to wear full sleeves and eye gears while going out in sun to avoid photosensitivity.</p> <p>g) Do not allow patient to crush or chew sustained-release capsules as this will speed up absorption and may cause toxicity.</p> <p>h) Keep patient in recumbent position for 30 minutes if administering parenteral forms to reduce risk of orthostatic hypotension.</p> <p>i) Monitor CBC results to arrange to discontinue the drug at signs of bone marrow suppression.</p> <p>j) Monitor blood glucose levels with long-term use to detect development of glucose intolerance.</p> <p>k) Provide comfort measures (e.g. positioning of legs and arms for dyskinesia, sugarless candy and ice chips for dry mouth, voiding before taking drugs for urinary hesitancy or retention, etc.) to help patient tolerate drug effects.</p> <p>l) Provide safety measures (e.g. adequate lighting, raised side rails, etc.) to prevent injuries.</p> <p>m) Educate client on drug therapy to promote understanding and compliance.</p> <p>Evaluation</p> <p>Here are aspects of care that should be evaluated to determine effectiveness of drug therapy:</p> <ul style="list-style-type: none"> • Monitor patient response to therapy (decrease in signs and symptoms of psychotic disorder). • Monitor for adverse effects (e.g. sedation, extrapyramidal effects, hypotension, bone marrow suppression, etc). • Evaluate patient understanding on drug therapy by asking patient to name the drug, its indication, and adverse effects to watch for. • Monitor patient compliance to drug therapy. 			
--	--	--	--	--	--



MOOD STABILIZERS

REVIEW OF NEUROBIOLOGY

Emotion is regulated by **cortico- striato-thalamic- cortical (CSTC) circuits**.

The areas of the prefrontal cortex are connected with the subcortical areas by loops or circuits (limbic circuits, striatal circuits, etc.).

Emotional symptoms such as sadness or happiness are regulated by amygdala (the activity is high in the resting state of depressed patients).

Manic patient's neuronal response to no-go task: impulsive symptoms of mania, such as risk taking and pressured speech are related to activity.

Elevated/irritable mood circuits reflect inefficient information processing in Amygdala, OFC. They are modulated by serotonergic, noradrenergic and dopaminergic projections from brainstem nuclei. Symptoms such as risk taking and pressured speech are manifestations of poor impulse control, thus regulated by the orbital frontal cortex (OFC).

Grandiosity, flight of ideas, and racing thoughts circuits are linked to inefficient information processing in the same brain regions associated with psychosis (nucleus accumbens) and DLPFC. These areas receive serotonergic, dopaminergic and noradrenergic projections.

Sleep circuits Reflect- Inefficient information processing in basal forebrain, thalamus, hypothalamus, the Entire prefrontal cortex. All of these brain regions are modulated by serotonin, dopamine and nor epinephrine.



Define mood stabilizer.	10 min	<p>Originally, a mood stabilizer was a drug that treated mania and prevented its recurrence, thus "stabilizing" the manic pole of bipolar disorder. A mood stabilizer is a psychiatric pharmaceutical drug used to treat mood disorders characterized by intense and sustained mood shifts, such as bipolar disorder type I or type II and schizoaffective disorder.</p> <p>These drugs can help reduce mood swings and prevent manic and depressive episodes. Mood stabilizers can help to keep the mood of a person with bipolar disorder within this balanced range.</p> <p>Treatment with mood stabilizers can reduce symptoms of bipolar disorder and increase people's ability to pursue their interests and participate more fully in their relationships.</p> <p>CLASSIFICATION OF MOOD STABILIZERS</p> <p>a) MINERAL</p> <p>Lithium – Lithium is the "classic" mood stabilizer, the first to be approved by the US FDA, and still popular in treatment.</p> <p>Therapeutic drug monitoring is required to ensure lithium levels remain in the therapeutic range: 0.6 or 0.8-1.2 mEq/L (or millimolar).</p> <p>Signs and symptoms of toxicity include nausea, vomiting, diarrhea, and ataxia. The most common side effects are lethargy and weight gain. The less common side effects of using lithium are blurred vision, a slight tremble in the hands, and a feeling of being mildly ill. In general, these side effects occur in the first few weeks after commencing lithium treatment. These symptoms can often be improved by lowering the dose.</p> <p>b) ANTICONVULSANTS</p>	Teacher defined mood stabilizer with the help of PPT.	PPT	What is mood stabilizer?
Classify mood stabilizer.	05 min		Teacher classified mood stabilizer with the help of PPT.	PPT	What is classification of mood stabilizer?



Many agents described as "mood stabilizers" are also categorized as anticonvulsants. The term "anticonvulsant mood stabilizers" is sometimes used to describe these as a class. Although this group is also defined by effect rather than mechanism, there is at least a preliminary understanding of the mechanism of most of the anticonvulsants used in the treatment of mood disorders.

- **Valproate** – Available in extended release form. This drug can be very irritating to the stomach, especially when taken as a free acid. Liver function and CBC should be monitored.
- **Lamotrigine** – Particularly effective for bipolar depression. The usual target dose is 100–200 mg daily, titrated to by 25 mg increments every 2 weeks. The patient should be monitored for signs and symptoms of Stevens–Johnson syndrome, a very rare but potentially fatal skin condition.
- **Carbamazepine** – CBC should be monitored, as carbamazepine can lower white blood cell count. Therapeutic drug monitoring is required. Carbamazepine was approved by the US Food and Drug Administration as a bipolar disorder treatment in 2005, but had been widely used previously.

There is insufficient evidence to support the use of various other anticonvulsants, such as gabapentin and topiramate, as mood stabilizers.

c) ANTIPSYCHOTICS

Some atypical antipsychotics (aripiprazole, risperidone, olanzapine, quetiapine, asenapine, paliperidone, ziprasidone, and lurasidone) also have mood stabilizing effects and are thus commonly prescribed even when psychotic symptoms are absent.



Describe the mechanism of action of mood stabilizer-Lithium.	05 min	LITHIUM <ul style="list-style-type: none"> • Trade Name: Eskalith, Eskalith CR, Lithobid slow-release tablets, Lithostat tablets ® • Drug Class: Anti-manic, mood stabilizer • Mechanism of Action: Alters sodium transport in nerve and muscle cells. Inhibits the recycling of neuronal membrane phosphoinositides involved in generation of second messengers. By this inhibitory mechanism on neuronal signaling, it is speculated that lithium may in essence "dial down" the activity of hyperactive circuits involved in producing mania • Indications: <ul style="list-style-type: none"> a) Treatment of the manic stage of bipolar disorder b) Lithium is sometimes combined with an antipsychotic to treat acute manic episodes (with valproate plus an antipsychotic as a reasonable alternative) c) A first line drug for maintenance treatment of bipolar disorder (based upon multiple randomized clinical trials)(Post, 2012) Lithium prevents or reduces the intensity of subsequent episodes of mania in bipolar patients 	Teacher described the mechanism of action of mood stabilizer-Lithium with the help of PPT.	PPT	Discuss the mechanism of action of mood stabilizer-Lithium in detail.
Enlist the indications and contraindications of mood stabilizer.	05 min		Teacher described the side effects of mood stabilizer-Lithium	PPT	What are the side effects of mood stabilizer?
Discuss the side effects of mood stabilizer.					



<p>Discuss the nursing responsibility while administration of mood stabilizer</p>	<p>05 min</p>	<ul style="list-style-type: none"> d) Nausea e) Weight gain f) Thyroid enlargement g) Tremor, mild ataxia h) Drowsiness (common), confusion i) Muscular weakness j) Leukocytosis k) Nephrotoxicity <ul style="list-style-type: none"> ▪ Toxicity: <ul style="list-style-type: none"> ➤ Lithium toxicity is closely related to serum lithium levels, and can occur at doses close to therapeutic levels (very narrow therapeutic index), requiring frequent tests to monitor lithium trough plasma levels ➤ Early symptoms of lithium toxicity can usually be treated by reduction or cessation of dosage of the drug and resumption of the treatment at a lower dose after 24 to 48 hours. ➤ High toxic doses: seizures, circulatory collapse. ▪ Pharmacokinetics: <ul style="list-style-type: none"> ➤ primarily excreted in urine with insignificant excretion in feces ➤ renal excretion of lithium is proportional to its plasma concentration ➤ the half-life of elimination of lithium is approximately 24 hours ➤ decreases sodium reabsorption by the renal tubules which could lead to sodium depletion ▪ Nursing responsibility: <ul style="list-style-type: none"> ➤ Assess patient's mental status initially and periodically; if indicated, initiate suicide preventions ➤ Monitor intake and output and report any drastic changes. ➤ Patient should be drinking at least 2000-3000 mL and day. ➤ Patient's weight should be taken every 3 months. ➤ Monitor renal and thyroid function. ➤ Test patient's WBC with differential. ➤ Test patient's glucose levels. 	<p>with the help of flashcards.</p> <p>Teacher described the role of nurse while administration.</p>	<p>PPT</p>	<p>What is role of nurse while administering mood stabilizers?</p>
---	---------------	--	--	------------	--



Describe the mechanism of action of mood stabilizer- Valproic acid.	05 min	<ul style="list-style-type: none"> ➤ Monitor serum lithium levels twice a week during chronic therapy. ➤ Assess patient for signs and symptoms of lithium toxicity. <p>ANTICONVULSANTS</p> <p>Also known as antiepileptic medication, anticonvulsant medications were originally developed to treat seizures. Anticonvulsants that are often used as mood stabilizers include:</p> <ul style="list-style-type: none"> • Valproic acid, also called valproate or divalproex sodium • Lamotrigine (Lamictal) • Carbamazepine (Carbatrol, Tegretol, Epitol, Equetro) <p>Mechanism of action</p> <p>Anticonvulsants work by calming hyperactivity in the brain in various ways.</p> <p>Sodium Channel Blockers- Sodium channels help propagate the electrical impulse, So it act on the sodium channels by either blocking their repetitive activation (phenytoin, carbamazepine) or by enhancing their slow inactivation</p> <p>Calcium Channel Blockers- Calcium channels release the neurotransmitter into the Synapse.</p> <p>Valproic acid is a branched short-chain fatty acid and a derivative of valeric acid. It is unclear exactly how valproate works. Proposed mechanisms include increased bioavailability of the inhibitory neurotransmitter gamma-aminobutyric acid (GABA) to brain neurons. It may also suppress repetitive neuronal firing through inhibition of voltage-sensitive sodium channels. Depresses abnormal neuron discharges in the CNS, thus decreasing seizure activity.</p> <p>PHARMACOKINETICS</p> <p>Absorption: Readily from GI tract. Peak: 1–4 h valproic acid; 3–5 h divalproex.</p> <p>Therapeutic Range: 50–100 mcg/mL.</p> <p>Distribution: Crosses placenta; distributed into breast milk.</p> <p>Metabolism: The vast majority of valproate metabolism occurs in the liver.</p>	Teacher described the mechanism of action of mood stabilizer with the help of PPT.	PPT	How the mood stabilizer works?
---	--------	--	--	-----	--------------------------------



Enlist the indications and contraindications of mood stabilizer.	05 min	<p>Elimination: Primarily in urine; small amount in feces and expired air.</p> <p>Half-Life: 5–20 h.</p> <p>INDICATIONS</p> <p>To treat epilepsy, prevent migraines, and treat other brain disorders.</p> <p>They are often prescribed for people who have rapid cycling -- four or more episodes of mania and depression in a year.</p> <p>Bipolar Disorder.</p> <p>CONTRAINDICATION</p> <ul style="list-style-type: none"> • Patients with bone marrow suppression • Hypersensitivity to valproate sodium; • Hyperammonemia, • Encephalopathy; • Suicidal ideations; • Thrombocytopenia, • Cirrhosis, • Hepatitis; • Drug induced pancreatitis; • Congenital metabolic disorders, • Those with severe seizures, or on multiple anticonvulsant drugs; • Pre-existing acute or chronic liver dysfunction or family history of severe liver inflammation (hepatitis), particularly medicine related. • Known hypersensitivity to valproate or any of the ingredients used in the preparation • Urea cycle disorders • Hepatic porphyria • Hepatotoxicity • Mitochondrial disease • Pancreatitis • Porphyria 	Teacher explained indications and contraindications of mood stabilizer with the help of flashcards.	Flashcards	What are the indications and contraindications of mood stabilizer?
--	--------	--	---	------------	--



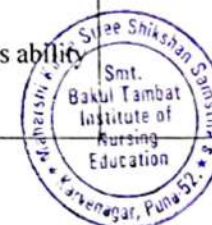
Discuss the side effects of mood stabilizer.	05 min	SIDE EFFECTS <ul style="list-style-type: none"> • Fatigue • Headache • Weight gain • Abdominal Pain • Decreased sexual desire • Fever • Confusion • Dizziness, • Drowsiness, • Hair Loss, • Blurred/double vision, • Change in menstrual periods, • Ringing In The Ears, • Shakiness (tremor), • Unsteadiness, • Weight changes • Abnormal bruising or bleeding • Nausea, vomiting, • Sleepiness, and • Dry mouth, • Liver problems 	Teacher explained side effects of mood stabilizer with the help of PPT.	PPT	What are the side effects of mood stabilizer?
--	--------	---	---	-----	---



Describe the responsibility of nurse for a patient receiving mood stabilizer	05 min	<ul style="list-style-type: none"> • Pancreatitis • An increased suicide risk. • Serious abnormalities in babies if taken during pregnancy <p>NURSING ROLE</p> <p>Administration</p> <p>Oral</p> <ul style="list-style-type: none"> • Give tablets and capsules whole; instruct patient to swallow whole and not to chew. Instruct to swallow sprinkle capsules whole or sprinkle entire contents on teaspoonful of soft food, and instruct to not chew food. • Avoid using a carbonated drink as diluent for the syrup because it will release drug from delivery vehicle; free drug painfully irritates oral and pharyngeal membranes. • Reduce gastric irritation by administering drug with food. <p>Intravenous</p> <p>Prepare: IV infusion: dilute each dose in 50 ml or more of d5w, ns, or lr.</p> <p>Administer: IV Infusion: Give a single dose over at least 60 min (20 mg/min or less).</p> <ul style="list-style-type: none"> • Avoid rapid infusion. <p>Incompatibilities: Solution/additive: Should avoid mixing with other drugs.</p> <p>Assessment & Drug Effects</p> <ul style="list-style-type: none"> • Monitor patient alertness especially with multiple drug therapy for seizure control. • Monitor patient carefully during dose adjustments and promptly report presence of adverse effects. Increased dosage is associated with frequency of adverse effects. • Monitor for and report promptly S&S of pancreatitis (e.g., abdominal pain, nausea, vomiting, and/or anorexia). • Multiple drugs for seizure control increase the risk of hyperammonemia, marked by lethargy, anorexia, asterixis, increased seizure frequency, and vomiting. Report such symptoms promptly to prescriber. If they persist with 	Teacher explained the responsibility of nurse for a patient receiving mood stabilizer with the help of PPT	Leaflet	
--	--------	---	--	---------	--



<p>Discuss carbamazepine in detail.</p>	<p>10 min</p>	<p>decreased dosage, the drug will be discontinued.</p> <ul style="list-style-type: none"> • Monitor lab tests: Baseline LFTs, platelet count, bleeding time, coagulation parameters, and serum ammonia, then repeat at least q2mo, especially during the first 6 mo of therapy. <p>Patient & Family Education</p> <ul style="list-style-type: none"> • Women of childbearing age should be aware of the potential for birth defects should a pregnancy occur while taking this drug. • Do not discontinue therapy abruptly; such action could result in loss of seizure control. Consult prescriber before you stop or alter dosage regimen. • Notify prescriber promptly if spontaneous bleeding or bruising occurs (e.g., petechiae, ecchymotic areas, otorrhagia, epistaxis, melena). • Withhold dose and notify prescriber for following symptoms: Visual disturbances, rash, jaundice, light-colored stools, protracted vomiting, diarrhea. Fatal liver failure has occurred in patients receiving this drug. • Avoid alcohol and self-medication with other depressants during therapy. • Consult prescriber before using any OTC drugs during anticonvulsant therapy, especially drugs containing aspirin or sedatives and medications for hay fever or other allergies. • Do not drive or engage in potentially hazardous activities until response to drug is known <p>CARBAMAZEPINE</p> <p><u>Carbamazepine</u> is used to prevent and control seizures. It works by decreasing nerve impulses that cause seizures and nerve pain, such as trigeminal neuralgia and diabetic neuropathy.</p> <p>Carbamazepine is also used to treat bipolar disorder.</p> <p>Therapeutic actions</p> <p>Mechanism of action not understood; antiepileptic activity may be related to its ability to inhibit polysynaptic responses and block post-tetanic potentiation.</p>		<p>PPT</p>	
---	---------------	--	--	------------	--



Discuss side effects of carbamazepine.	05 min	Pharmacokinetics	Flashcards	What are the side effects of carbamazepine?					
		<table><tr><th>Route</th><th>Onset</th><th>Peak</th></tr><tr><td>Oral</td><td>Slow</td><td>4-5 hr</td></tr><tr><td>ER Oral</td><td>Slow</td><td>3-12 hr</td></tr></table> <p>Metabolism: Hepatic; $T_{1/2}$: 25-65 hr, then 12-17 hr Distribution: Crosses placenta; enters breast milk Excretion: Urine and feces</p> <p>Contraindicated with hypersensitivity to carbamazepine or TCAs, history of bone marrow depression, concomitant use of MAOIs, lactation, pregnancy.</p> <p>Adverse effects</p> <ul style="list-style-type: none">• CNS: Dizziness, drowsiness, unsteadiness, disturbance of coordination, confusion, headache, fatigue, visual hallucinations, depression with agitation, behavioral changes in children, talkativeness, speech disturbances, abnormal involuntary movements, paralysis and other symptoms of cerebral arterial insufficiency, peripheral neuritis and paresthesias, tinnitus, hyperacusis, blurred vision, transient diplopia and oculomotor disturbances, nystagmus, scattered punctate cortical lens opacities, conjunctivitis, ophthalmoplegia, fever, chills; SIADH• CV: CHF, aggravation of hypertension, hypotension, syncope and collapse, edema, primary thrombophlebitis, recurrence of thrombophlebitis, aggravation of CAD, arrhythmias and AV block; CV complications• Dermatologic: Pruritic and erythematous rashes, urticaria, Stevens-Johnson syndrome, photosensitivity reactions, alterations in pigmentation, exfoliative dermatitis, alopecia, diaphoresis, erythema multiforme and nodosum, purpura. aggravation of lupus erythematosus			Route	Onset	Peak	Oral	Slow
Route	Onset	Peak							
Oral	Slow	4-5 hr							
ER Oral	Slow	3-12 hr							

Describe the responsibility of nurse for a patient receiving carbamazepine.	05 min	<ul style="list-style-type: none"> ▪ GI: Nausea, vomiting, gastric distress, abdominal pain, diarrhea, constipation, anorexia, dryness of mouth or pharynx, glossitis, stomatitis; abnormal liver function tests, cholestatic and hepatocellular jaundice, hepatitis, massive hepatic cellular necrosis with total loss of intact liver tissue ▪ GU: Urinary frequency, acute urinary retention, oliguria with hypertension, renal failure, azotemia, impotence, proteinuria, glycosuria, elevated BUN, microscopic deposits in urine ▪ Hematologic: Hematologic disorders (severe bone marrow depression) ▪ Respiratory: Pulmonary hypersensitivity characterized by fever, dyspnea, pneumonitis or pneumonia <p>Nursing considerations</p> <p>Assessment</p> <ul style="list-style-type: none"> ▪ History: Hypersensitivity to carbamazepine or TCAs; history of bone marrow depression; concomitant use of MAOIs; history of adverse hematologic reaction to any drug; glaucoma or increased IOP; history of cardiac, hepatic, or renal damage; psychiatric history; lactation; pregnancy ▪ Physical: Weight; T; skin color, lesions; palpation of lymph glands; orientation, affect, reflexes; ophthalmologic examination (including tonometry, funduscopy, slit lamp examination); P, BP, perfusion; auscultation; peripheral vascular examination; R, adventitious sounds; bowel sounds, normal output; oral mucous membranes; normal urinary output, voiding pattern; CBC including platelet, reticulocyte counts and serum iron; hepatic function tests, urinalysis, BUN, thyroid function tests, EEG <p>Interventions</p> <ul style="list-style-type: none"> ▪ Use only for classifications listed. Do not use as a general analgesic. Use only for epileptic seizures that are refractory to other safer agents. ▪ Give drug with food to prevent GI upset. ▪ Do not mix suspension with other medications or elements—precipitation may occur. ▪ WARNING: Reduce dosage, discontinue, or substitute other antiepileptic 	Teacher explained the responsibility of nurse for a patient receiving mood stabilizer	PPT	What is the responsibility of nurse for a patient receiving carbamazepine.
---	--------	--	---	-----	--



		<p>medication gradually. Abrupt discontinuation of all antiepileptic medication may precipitate status epilepticus.</p> <ul style="list-style-type: none"> • Suspension will produce higher peak levels than tablets—start with a lower dose given more frequently. • Ensure that patient swallows ER tablets whole—do not cut, crush, or chew. • Arrange for frequent liver function tests; discontinue drug immediately if hepatic dysfunction occurs. • WARNING: Arrange for patient to have CBC, including platelet, reticulocyte counts, and serum iron determination, before initiating therapy; repeat weekly for the first 3 mo of therapy and monthly thereafter for at least 2–3 yr. Discontinue drug if there is evidence of marrow suppression, as follows: <p>ANTIPSYCHOTICS</p> <p>Antipsychotic medications are used as a short-term treatment for bipolar disorder to control psychotic symptoms such as hallucinations, delusions, or mania symptoms. In other cases, they seem to assist mood stabilization on their own.</p> <p>Antipsychotics used to treat bipolar disorder include:</p> <ul style="list-style-type: none"> • Aripiprazole (Abilify) • Olanzapine (Zyprexa) • Risperidone (Risperdal) • Lurasidone (Latuda) • Quetiapine (Seroquel) 			
--	--	---	--	--	--



ASSIGNMENT

- 1) Write in detail nursing responsibility while administration of antipsychotic drug.
- 2) Discuss extra-pyramidal symptoms.

REFERENCE

- Synopsis of psychiatry, Kaplan and Sadock, 9th edition, Lippincott Williams and Wilkins publication,
- Psychiatric nursing contemporary practice, Mary Ann Boyd, Lippincott Williams and Wilkins publication, 5th edition, 2012.
- Gail W. Stuart, Principles and practice of psychiatric nursing, 9th edition, Elsevier publishers, 2009.
- Mary C. Townsend, Psychiatric Mental Health Nursing Concepts of Care in Evidence-Based Practice, sixth edition. A. Davis Company, Philadelphia 2009
- D. Elakkuvana Bhaskara Raj, DEBR'S Mental Health (psychiatric) Nursing, first edition, EMMESS medical publishers, 2014.
- <http://tmedweb.tulane.edu/pharmwiki/doku.php/antipsychotics>
- <https://www.sciencedirect.com/topics/pharmacology-toxicology-and-pharmaceutical-science/antipsychotics>
- <https://www.verywellmind.com/psychotropic-drugs-425321>
- <https://www.goodtherapy.org/drugs/anti-psychotics.html>
- <https://medcraveonline.com/PPIJ/PPIJ-06-00179.pdf>
- <https://nurseslabs.com/psychotherapeutic-drugs/>
- http://tmedweb.tulane.edu/pharmwiki/doku.php/mood_stabilizers_antimanic
- <https://www.healthline.com/health/mood-stabilizers-list#4>
- <https://www.ncbi.nlm.nih.gov/pubmed/18922244>



RESEARCH ANALYSIS

Anticonvulsant mood stabilizers in the treatment of behavioral and psychological symptoms of dementia (BPSD).

Abstract

INTRODUCTION:

Dementia, besides the dominant cognitive disorders that define it, is associated with behavioral disturbances, the consequences of which are, on various levels, a determining factor for the handling of these patients. The treatment of behavioral and psychological symptoms is essential and although, to date, no therapeutic solution is satisfactory, it is necessary to look for an alternative to the neuroleptics usually employed, which raise real problems of tolerance in this geriatric population.


METHODS:

The method employed in this work was a systematic bibliographic review, in which only the double-blind placebo-controlled studies or the clinically detailed enough open-labelled studies using validated scales were retained.

CONCLUSION:

Finally, although we all know that antipsychotics should no longer be prescribed in the elderly, the treatment of behavioral and psychological symptoms of dementia remains a difficult problem, considering the lack of a real alternative to these medications. Anticonvulsant mood stabilizers are an interesting solution but none of them, other than carbamazepine, which did, but which is not better tolerated than the usual drugs in this population - was able to prove its efficacy in this indication. Among these medications, valproic acid, gabapentin and lamotrigine should be studied further, and the neuroprotective effect of some of them is an interesting route for research.




PRINCIPAL
Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.



LESSON PLAN ON CRISIS AND CRISIS INTERVENTION

Presented by: Mrs. Shital Pethkar



LESSON PLAN ON –MENTAL HEALTH NURSING

SUBJECT	: Mental Health Nursing
TIME	: 1HR
TOPIC	: crisis and crisis intervention .
CLASS OR GROUP	: II year pbbsc
TEACHING METHOD	: Lecture / Demonstration
TEACHING AIDS	: Power Point presentation.
PLACE/VENUE	: II year pbbsc Class Room



GENERAL OBJECTIVE:

Students will be able to get brief knowledge regarding crisis and crisis intervention.

LESSON OBJECTIVES

On the completion of this lesson, student will be able to –

- Define the crisis.
- Explain the different types of crisis?
- Explain the phases of crisis.
- Enlist the sign and symptoms of crisis.
- Explain the process of crisis.
- Define the crisis intervention.
- Explain the principle of crisis intervention.
- Explain the techniques of crisis intervention.
- Discuss the role of nurse in crisis intervention.



TIME ALLOTTED	SPECIFIC OBJECTIVE	CONTENT	TEACHING/ LEARNING ACTIVITIES	AV AIDS	EVALUATION
5 minutes	Define the crisis	<p>CRISIS</p> <p>Introduction:</p> <p>Crisis can be viewed as an integral component of everyday life situations. A crisis may influence people's lives in different ways. As a consequence of a crisis experience, the individual may go down to a lower or less healthy level of functioning than what was before the crisis, or he may resume the same level of functioning by repressing the crisis and the related emotions.</p> <p>Definition:</p> <p>Crisis is a state of disequilibrium resulting from the interaction of an event with the individual's or family's coping mechanisms, which are inadequate to meet the demands of the situation, combined with the individual's or family's perception of</p>	Announces the topic	PPT	What is the meaning of crisis?



		the meaning of the event (Taylor 1982).			
5 minutes	Explain the different types of crisis?	Types of Crisis <ul style="list-style-type: none"> • <u>Maturational crisis:</u> <ul style="list-style-type: none"> - A maturational crisis is a stage in a person's life where adjustment and adaptation to new Responsibilities and life patterns are necessary. - The transition points where individuals move into successive stage often generate disequilibrium. - Individuals are required to make cognitive and behavioral changes and to integrate those physical changes that accompany development. - The extent to which individuals experience success in the mastery of these tasks depends on previous successes, availability of support systems , influence of role models and acceptability of new role by others. 	Explain the different types of crisis?	PPT	Discuss the different types of crisis?



		<ul style="list-style-type: none"> - The transitional periods or events that are most commonly identified as having increased crisis potential are adolescence, marriage, parenthood, midlife and retirement. • <u>Situational Crisis:</u> <ul style="list-style-type: none"> - A situational crisis is one that is precipitated by an unanticipated stressful event that creates disequilibrium by threatening one's sense of biological, social or psychological integrity. - Examples of events that can precipitate situational crises are premature birth, status and role changes, death of a loved one, physical or mental illness, divorce, change in geographic Location and poor performance in school. • <u>Social Crisis:</u> <ul style="list-style-type: none"> - Social crisis is accidental, uncommon, and unanticipated and results in multiple losses and radical environmental changes - Social crises include natural disasters like floods, 			
--	--	--	--	--	--



		<p>earthquakes, violence, nuclear accidents, mass killings, contamination of large areas by toxic wastes, wars, etc.</p> <ul style="list-style-type: none"> - This type of crisis is unlike maturational and situational crisis because it does not occur in the lives of all people. 			
10 minutes	Explain the phases of crisis.	<p>PHASES OF CRISIS:</p> <p>Caplan (1964) has described four phases of crisis as described below:</p> <p>Phase I</p> <p>Perceived threat acts as a precipitant that generates increased anxiety. Normal coping strategies are activated, and if unsuccessful, the individual moves into Phase II.</p> <p>Phase II</p> <ul style="list-style-type: none"> - The ineffectiveness of the Phase I coping mechanism leads to further disorganization. The individual experiences a sense of vulnerability. The individual may attempt to cope with the Situation in a random fashion. If the anxiety 	Explain the phases of crisis.	PPT	Discuss the phases of crisis



		<p>continues and there is no reduction, the individual enters Phase III.</p> <p>Phase/II Redefinition of the crisis is attempted and the individual is most amenable to assistance in this phase. New problem solving measures may also affect a solution. Return to pre-crisis level of functioning may occur. If problem solving is unsuccessful, further disorganization occurs and the individual is said to have entered Phase IV.</p> <p>Phase IV Severe to panic levels of anxiety with profound cognitive, emotional and physiological changes may occur. Referral to further treatment resources is necessary.</p>			
--	--	---	--	--	--



5 minutes	Enlist the sign and symptoms of crisis.	<u>Signs and Symptoms of Crisis:</u> <ul style="list-style-type: none"> • The major feeling in a crisis situation is anxiety. The individual experiences a heavy burden of free-floating anxiety. • The anxiety may be manifested through depression, anger and guilt. The victim will attempt to get rid of the anxiety using various coping mechanisms, healthy or unhealthy. • The individual may become incapable of even taking care of his daily needs and may neglect his responsibilities. • The individual may become irrational and blame others for what has happened to him . 	Enlist the sign and symptoms of crisis.	PPT	Enlist the sign and symptoms of crisis.
10 minutes	Explain the process of crisis.	<u>PROCESS OF CRISIS:</u> Healthy resolution of a crisis depends upon the following three factors: 1. Realistic appraisal of the	Explain the process of crisis.	PPT	Discuss the process of crisis.



		<p>precipitating event, i.e .recognition of the relationship between the event and feelings of anxiety is necessary for effective problem-solving to occur.</p> <p>2. Availability of support systems.</p> <p>3. Availability of coping measures over a lifetime.</p> <p>A person develops a repertoire of successful coping strategies that enable him to identify and resolve stressful situations.</p> <p>There are three ways by which the individual may resolve the crisis:</p> <p>1. <u>Pseudo-resolution:</u></p> <ul style="list-style-type: none"> - In this, the individual uses repression and pushes out of consciousness the incident and the intense emotions associated with it, so there will not be any change in the level of functioning of the individual. But in future, if and when a crisis occurs, the repressed feelings may surface and influence the feelings aroused by the new crisis. 		
--	--	--	--	--



		<ul style="list-style-type: none"> - In such a situation, the particular crisis may be more difficult to resolve because the feelings associated with the earlier crisis are neither expressed nor handled at that time. <p>2. <u>Unsuccessful Resolution:</u></p> <ul style="list-style-type: none"> - In this, the victim uses pathological adaptation at any phase of crisis, resulting in a lower level of functioning. The victim, rather than accepting the loss and reorganizing his life, keeps ruminating over the loss. An example is prolonged grief reaction, which results in depression. <p>3. <u>Successful Resolution:</u></p> <p>In this, the victim may go through the various phases of crisis, but reaches Phase III where various coping measures are utilized to resolve the crisis situation. The individual develops better skills and problem</p>			
--	--	--	--	--	--



		solving ability, which can be and will be used in various crisis situations in future.			
5 minutes	Define the crisis intervention.	CRISIS INTERVENTION: <ul style="list-style-type: none"> - Crisis intervention is a technique used to help an individual or family to understand and cope with the intense feelings that are typical of a crisis. - Nurses function as part of the interdisciplinary team in the use of crisis intervention as a therapeutic modality. - Nurses may employ crisis techniques in their work with high-risk groups such as clients with chronic diseases, new parents and bereaved persons. - Nurses may also use crisis intervention in dealing with intra-group staff issues and client management issues. 	Introduce the crisis intervention.	Orally explanation	What is the meaning of crisis intervention?
10 minutes	Explain the principle of crisis intervention	<u>PRINCIPLE OF CRISIS INTERVENTION</u> According to Purye Shiksha	Explain the principle of crisis intervention	PPT	Discuss the principle of crisis intervention



		<p>intervention is based on the following eight principles:</p> <ul style="list-style-type: none"> • Immediate Intervention: People are unable to endure crises for long periods of time; thus, crisis interventions must be immediate. If the therapist cannot see a client requesting help immediately, the client should be referred to someone who can. It is when clients request help and are at the peak of their crisis that they are most amenable to treatment; i.e., when they are least defensive and most introspective. • Action: The therapist actively participates in and directs those activities that help the client resolve the crisis. • Limited Goals: While long-term forms of therapy may address a number of goals, crisis intervention focuses on goals that are clearly related to the crisis situation. • Hope and Expectations: Because people in crisis usually 			
--	--	--	--	--	--



		<p>feel hopeless, a primary task for the therapist is to instill the expectation that the crisis will be resolved.</p> <ul style="list-style-type: none"> • Support: Lack of support is ordinarily an important contributing factor to the development of a crisis; thus, provision of support is a crucial factor in crisis intervention. • Focused problem-solving: Crisis interventions are problem oriented; i.e., their emphasis is on resolution of the problem underlying the crisis. • Self-Image: The client experiencing a crisis typically sees him/herself as inadequate. Therefore, the therapist must assume an approach that both protects and raises the client's self-esteem. • Self-Reliance: From the onset of the crisis intervention, the therapist must maintain a balance between providing support and fostering the client's self-reliance and independence. 		
--	--	---	--	--



5 minutes	Explain the techniques of crisis intervention	<p>TECHNIQUES OF CRISIS INTERVENTION:</p> <p>1) ENCOURAGING: It is important to convey an interest in what the speaker is saying and to encourage the speaker to keep talking. Encouraging can involve both verbal and nonverbal communication that invites individuals to express themselves.</p> <p>Examples:</p> <ul style="list-style-type: none"> • “Uh-huh.” • “Oh?” • “When?” • “Really?” • “I see.” • “Yes.” <p>Nonverbally, the listener can convey interest by maintaining eye contact, nodding, and smiling. Small smiles combined with nods can be powerful in affirming that messages are being heard and understood. Because eye contact can be intimidating and</p>	Explain the techniques of crisis intervention	PPT	Discuss the techniques of crisis intervention
-----------	---	---	---	-----	---



		<p>culturally specific, it is essential to gauge how much is appropriate. It is best to use eye contact along with smiles and other nonverbal messages. The listener's posture can indicate attentive listening. These may include leaning slightly forward or sideways while sitting, slanting the head slightly, or resting the head on one hand. Another nonverbal technique is referred to as "mirroring." This may involve the automatic reflection of the facial expressions of the speaker and can indicate empathy. The slight mirroring of posture or gestures also can build rapport. Mirroring may also include speech pacing, vocabulary choices, volume and tone of voice, as well as speech patterns. Mirroring, however, must be genuine to be effective</p> <p>2)CLARIFYING: Clarifying involves the ability to reflect back to the speaker the words and</p>		
--	--	--	--	--



		<p>feelings expressed in order to ensure that they have been understood correctly and that both the speaker and listener agree upon a true representation of what has been said.</p> <p>Examples:</p> <ul style="list-style-type: none"> • “I am not quite sure I understand. Can you ...?” • “Do you mean that ...?” • “Are you telling me ...?” • “Are you saying ...?” <p>Clarifying uses paraphrasing and restating to show an understanding of what the speaker has said and to help the speaker evaluate feelings by hearing them expressed by someone else.</p> <p>Paraphrasing involves the use of other words to reflect back to the speaker what has been said. When paraphrasing, it is essential that the listener does not ask questions, is nondirective, and is nonjudgmental. It shows the speaker that the listener is attempting to understand what has been</p>			
--	--	---	--	--	--



		<p>The less aware a person is of their emotions, the less likely he or she may be able to regulate them.</p> <p>Emotional labeling allows a clinician to apply a tentative label to the feelings the person is expressing or implying by words and actions. Labeling emotions lets the person know he or she is being heard and helps the person make sense of them and gain some control.</p> <p>The simple act of thinking about and then labeling an emotion can distract from and disrupt the intensity. It is important not to assume one knows how another person feels. It is best to ask if a label is correct.</p> <p>Examples:</p> <ul style="list-style-type: none"> • "You sound very frustrated. Is that right?" • "Am I correct in saying that you feel overwhelmed by everything?" <p>It is important that the person's emotions are validated and not minimized. Labeling and</p>		
--	--	--	--	--



		<p>said.</p> <p>It can be quite difficult to avoid asking questions when first learning this skill, as it may not feel natural. To become comfortable, this skill requires practice.</p> <p>Examples:</p> <ul style="list-style-type: none"> • “You are telling me ...” • “What you are saying is ...” <p>When restating and paraphrasing, it is important that it be done using simple terms, while observing for nonverbal and verbal cues that confirm or refute the accuracy.</p> <p><u>3)EMOTIONAL LABELING:</u></p> <p>During a mental health crisis, feelings may often be confusing and hard to define.</p> <p>Some people experience greater difficulty labeling their emotions than others do.</p> <p>This inability has been found to be associated with deficits in the ability to regulate those emotions.</p>		
--	--	---	--	--



acknowledging emotions help to restore equilibrium .

4) OPEN-ENDED QUESTIONS:

The use of open-ended questions encourages the individual to continue to talk.

They usually begin with how, what, when, and where and encourage exploration.

It is important to avoid yes and no questions, which limit answers.

It is also important to avoid why questions, as they may be interpreted as accusations, resulting in the person feeling defensive.

Why questions may also imply that the person should know something that they may not know.

Examples:

- "What were you



		<p>thinking/feeling?"</p> <ul style="list-style-type: none"> • "How did you act?" • "When did that happen?" • "Where did you go afterward?" <p><u>5) EFFECTIVE PAUSES/SILENCE:</u></p> <p>Part of effective communication includes the use of silence and waiting or pausing before speaking. Silence and pauses can be used effectively for several purposes. Most people are not comfortable with silence and will talk in order to fill it. Therefore, a period of silence may encourage a person to continue speaking. Silence can also be used to emphasize a point just before or just after saying something important .</p> <p><u>6) "I" MESSAGES:</u></p>		
--	--	---	--	--



		<p>“I” messages allow a listener to let the speaker know how he or she feels, why the listener feels that way, and what the speaker can do to remedy the situation in a nonthreatening way. Listeners use this technique to refocus the speaker or when the listener is being verbally attacked.</p> <p>Examples:</p> <ul style="list-style-type: none"> • “I feel uncomfortable when I’m spoken to that way. Please don’t yell at me.” • “I need to better understand what I heard you say. Tell more about that.” 			
5 minutes	Discuss the role of nurse in crisis intervention	<p><u>ROLE OF A NURSE IN CRISIS INTERVENTION:</u></p> <p>Nurses respond to crisis situations on a daily basis. Crisis can occur in any unit for e.g. in general hospitals, home settings, community health centers, schools, offices, and in private practice. Indeed, nurses may be called upon to function</p>	Discuss the role of nurse in crisis intervention.	PPT	Discuss the role of nurse in crisis intervention



		<p>as crisis helpers in any situation. Knowledge of crisis intervention techniques is thus an important clinical skill of all nurses, regardless of the setting or practice specialty.</p> <p><u>Nursing Assessment:</u></p> <p>The first step of crisis intervention is assessment. During this phase the nurse collects data regarding the following factors:</p> <ul style="list-style-type: none"> • Precipitating event or stressor • Patient's perception of the event or stressor • Nature and strength of the patient's support systems, coping resources • Level of psychological stress patient is suffering from and the degree of impairment he is experiencing 			
--	--	--	--	--	--



		<p>traumatic experience constructively</p> <ul style="list-style-type: none"> • Post-traumatic response is a sustained painful response to an overwhelming traumatic event. <p><u>Planning:</u></p> <p>In planning the previously collected data is analyzed and specific interventions are proposed.</p> <p>During this phase the nurse will undertake the following activities:</p> <ul style="list-style-type: none"> • Dynamics underlying the present crisis are Formulated. • Alternative solutions to the problem are Explored. • Steps for achieving the solutions are identified. • Environmental support needed to help the patient is decided upon, coping mechanisms 		
--	--	--	--	--



		<ul style="list-style-type: none"> • Patient's previous strengths and coping <p>Mechanisms During this phase the nurse begins to establish a positive working relationship with the patient.</p> <p><u>Nursing Diagnosis:</u></p> <p>The primary nursing diagnoses in crisis intervention are:</p> <ul style="list-style-type: none"> • Ineffective individual coping • Ineffective family coping • Altered family process • Post trauma response • Ineffective individual coping refers to the inability to ask for help, problem solving or meet role expectations • Ineffective family coping occurs when the family's support systems are not successful and family's economic or social well being is threatened. • Altered family processes result when family members are unable to adapt to the 			
--	--	---	--	--	--



		<p>that need to be developed and those which need to be strengthened are identified</p> <p><u>Implementation:</u></p> <p>The following interventions are carried out to resolve crisis:</p> <p>1) Environmental Manipulation Environmental manipulation includes interventions that directly change the patient's physical or interpersonal situation. These interventions may remove stress or provide situational support. For example a patient having difficulty in his job may take a week of sick leave so that he can be removed temporarily from that stress.</p> <p>2) General Support: Then nurse uses warmth, acceptance, empathy and reassurance to provide general support to the patient.</p> <p>3) Generic Approach: The generic approach is designed to</p>		
--	--	---	--	--



		<p>reach high risk individuals and large groups as quickly as possible. It applies a specific method to all individuals faced with a similar type of crisis (e.g. in social disasters). Debriefing is a method of generic approach. In debriefing method, disaster victims are helped to recall events and clarify traumatic experiences. It attempts to place the traumatic event in perspective, allows the individual to relive the event in a factual way, encourages group support, and provides information on normal reaction to critical events.</p> <p>The goal of debriefing is to prevent the maladaptive responses that may result if the trauma is suppressed.</p> <p>4) Individual Approach:</p> <p>The individual approach is a type of crisis intervention similar to the diagnosis and treatment of a specific problem in a specific patient. It is particularly useful in combined situational and maturational crises and</p>			
--	--	---	--	--	--



		<p>also beneficial when symptoms include homicidal and suicidal risk.</p> <p>The nurse must use the intervention that is most likely to help the patient develop an adaptive response to the crisis.</p> <p><u>Evaluation:</u></p> <p>The nurse and patient review the changes that have occurred. The nurse should give credit for successful changes to patients so that they realize their effectiveness and understand that what they learnt from crisis may help in coping with future crisis. If the goals have not been met, the patient and nurse can return to the first step-assessment and continue through the phases again.</p>		
--	--	---	--	--



REFERENCE:

- ✓ Synopsis of psychiatry, Kaplan and Sadock, 9th edition, Lippincott Williams and Wilkins publication,
- ✓ Psychiatric nursing contemporary practice, Mary Ann Boyd, Lippincott Williams and Wilkins publication, 5th edition, 2012.
- ✓ Gail W. Stuart, Principles and practice of psychiatric nursing, 9th edition, Elsevier publishers, 2009.
- ✓ D. Elakkuvana Bhaskara Raj, DEBR'S mental health (psychiatric) nursing, first edition, EMMESS medical publishers, 2014.
- ✓ https://link.springer.com/chapter/10.1007%2F978-1-349-09408-0_5
- ✓ <https://www.hse.ie/eng/services/list/4/mental-health-services/dsc/communityservices/proffesionalsandteams.html>
- ✓ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6201820/>
- ✓ <https://www.slideshare.net/oreo2888/extended-and-expanded-role-of-psychiatric-nurse>



Mens
PRINCIPAL

Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.



LESSON PLAN

LECTURE: A METHOD OF TEACHING

Presented by: Mrs.Dipali Awate



LESSON PLAN ON – Nursing Education

TEACHER NAME : Mrs. Dipali Awate

SUBJECT : Nursing education

TOPIC : lecture method of teaching

CLASS OR GROUP : II year pbbse

TEACHING METHOD : Lecture / Demonstration

TEACHING AIDS : Power Point presentation.

PLACE/VENUE : II year pbbse Class Room



Previous knowledge of the group: The group has basic knowledge about Lecture as a method of teaching,

AIM:

At the end of the class, the students will have in-depth knowledge about lecture as a teaching method and will be able to apply this knowledge appropriately as a method of teaching.

SPECIFIC OBJECTIVES:

The students will be able to:

- define lecture
- enlist the purposes of lecture
- discuss the preparation and presentation of a lecture
- identify modified methods of lecture delivery
- enumerate the advantages and disadvantages of lecture method



<i>Sr. no</i>	<i>Specific Objective</i>	<i>Duration</i>	<i>Content</i>	<i>Teacher-learner activity</i>	<i>Audio-visual aids</i>	<i>Evaluation</i>
1.	Get introduce to the topic lecture method The students will be able to define a lecture.	5 min	<p><u>Introduction:</u></p> <p>Lecture method is the oldest method of teaching. The term lecture was derived from the Latin word "lecture" which means to "read aloud". Despite many criticisms against it, lecture still continues to be the most preferred method.</p> <p>It refers to a teaching procedure consisting of clarification or the explanation of facts, principles or relationships which the teacher wishes the class to understand. The teacher talks more or less to the class. The class listens, takes down notes and thinks them over later; but usually does not converse with the teacher.</p> <p><u>Definition:</u></p> <p>Lecture is defined as a teaching activity whereby the teacher presents the content in a comprehensible manner by explaining the facts, principles and relationships, during which the teacher is expected to elicit student participation by employing appropriate techniques.</p> <p>The lecture is a teaching procedure consisting of the clarification or the explanation of facts, principles or relationships which the teacher wishes the class to understand.</p>	<p>PowerPoint presentation to introduce the topic</p> <p>The students listen to the explanations given</p> <p>Lecture cum discussion</p>	<p>PowerPoint presentation</p> <p>Black board</p> <p>PPT</p>	<p>Students are able to introduce lecture method</p> <p>The students are able to define lecture.</p>



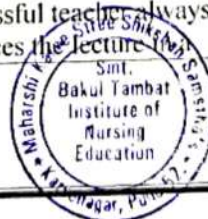
2.	The students will be able to enlist the purposes of lecture	8 min	<p>Purposes of lectures:</p> <p>Educators firmly believe that a carefully planned and thoughtfully delivered / presented lecture can serve the following purposes:</p> <p>a) To provide structured knowledge - As knowledge explosion in today's world, it becomes difficult for students to locate all sources of knowledge and synthesize it. But a teacher can select and organize all the relevant information about a topic in a learner-cantered way and present it through a lecture</p> <p>b) To motivate and guide in searching for knowledge – A lecture may help in providing students with subject material about a topic, but the teacher may not always be able to give the entire content. The efficient teacher always must give references for the student to collect more information about the topic such that the student can study by self.</p> <p>c) To arouse the students interest in a subject – By using the lecture method, the teacher can orient the students to a subject by explaining the need for studying it, ways of learning and revision etc. Once the students receive such guidelines, they may feel motivated to study by themselves.</p> <p>d) Introduce students to new areas of learning - Innovations are occurring in every aspect of life, including the medical and nursing fields. The teachers may not always be able to give detailed sessions in the classroom. However, the teacher may introduce such topics to the</p>	Lecture cum discussion	PPT	The students were able to list the purposes of lecture.
----	---	-------	---	------------------------	-----	---



3.	The students will be able to discuss the preparation and presentation of a lecture	7 min	<p>students by explaining the theory and then the students may correlate the theory with the practicals.</p> <p>e) To clarify difficult concepts – Teachers must use a wide variety of examples in clarifying concepts.</p> <p>f) To assist in preparing students for a discussion – Giving the students a basic idea of a topic using the lecture method and then asking them to discuss it in smaller groups, is a very good method of teaching. The lecture before sets the stage for the discussion after</p> <p>g) To promote critical thinking – Critical thinking can be encouraged through incorporating challenging questions throughout the lecture.</p> <p><u>Preparation of a lecture:</u></p> <p>A thoughtfully prepared subject content along with appropriate techniques helps the teacher to deliver a lecture in an interesting and comprehensible manner. Even the most impressive way of applying techniques is not sufficient to replace a thoughtfully prepared content.</p> <p>Given below are some important points to remember while preparing a lecture:</p> <p>i) Be aware of the learner's requirements ii) Keep the objectives of the class in mind while preparing the lecture iii) Consider the environmental factors such as the number of</p>	Lecture cum discussion	PowerPoint presentation	The students are able to explain the preparation of a lecture
----	--	-------	--	------------------------	-------------------------	---



The students will be able to discuss the presentation of a lecture	8 min	<p>student, available AV aids, size of the classroom, etc iv) Plan to accommodate the students' psychological factors while planning such as teaching from simple to complex, known to unknown, and concrete to abstract v) Be aware of the time allotted for the topic</p> <p><u>Presentation of a lecture:</u></p> <p>If a teacher follows all the points in preparing a lecture and prepares a complete and holistic subject content for the lecture, but is not able to present / deliver it appropriately for the students to obtain information from the lecture, it serves no purpose. The value of the lecture as a teaching method largely depends on how well the content is presented. The following techniques will help the teacher to practice lecture in a student-centered manner:</p> <p>1. <u>Spontaneity</u> – Instead of reading continuously from the prepared note, the teacher must converse freely with the students. Reading continuously reduces the interest of the students. But use of simple and appropriate language, which is easily understood by the student, and eye contact with the student, helps the student maintain concentration and attentiveness throughout the lecture.</p> <p>2. <u>Voice gradation and voice quality</u> – Voice gradation is the periodical alteration of both pitch and volume while lecturing. The voice should be audible. The students tend to get bored or become passive if a monotonous tone is used.</p> <p>3. <u>Adequate pacing</u> – A successful teacher always organizes the content effectively and paces the lecture</p>	Lecture cum discussion	The students are able to verbalise the important points to keep in mind while presenting a lecture
--	-------	--	------------------------	--



		<p>comprehensible manner in accordance with the receptivity of the students. The best way to do this is to have a fast pace when teaching simple subjects and a slow pace when teaching difficult subjects / concepts. A fast pace may cause confusion while an extremely slow pace may lead to boredom. The best indicator of the right pace is the students' receptivity.</p> <p>4. <u>Proper body language</u> – As the old saying goes, “Actions often speak louder than words”, so also the teacher has to keep in mind that proper body language and non-verbal gestures are as important as the words expressed during a lecture. The following points will help if kept in mind during the lecture :-</p> <ul style="list-style-type: none"> ✓ Effective communication ✓ Eye contact ✓ Walking towards the students instead of standing behind the podium ✓ Modest use of hand gestures <p>5. <u>Avoid annoying mannerisms</u> – Teachers easily develop mannerisms and are usually unaware about it. The common mannerisms are repeatedly saying 'okay', 'right', 'so', 'uh', pinching the nose, breaking the knuckles, waving the hands unnecessarily etc. Mannerisms are very distracting to the students.</p> <p>6. <u>Judicious use of audio-visual aids</u> – Judicious selection and use of AV aids are important and are very useful in delivering lectures effectively.</p> <p>7. <u>Simple plans and Key points</u> – When planning for a lecture</p>			
--	--	---	--	--	--



always go for a simple plan instead of a complicated one. Then select some of the key points from the plan and build the whole lecture around them. This will help students recollect the taught lessons easily.

8. Elicit feedback from students – Feedback is vital technique to assess the effectiveness of the lecture. This is usually forgotten due to the hurry of trying to complete the lecture. Feedback is diagnostic and remedial, not only to ascertain the student's knowledge gained from the lecture, but also to know whether the student was able to understand the content presented by the teacher

9. Time management – Time factor is very important in lecturing. The teacher must balance time allotted for the subject and the content prepared.

10. Opening and closing the lecture – The teacher can get the attention and interest of the class for the lecture by a confident introductory note or a review of the previous lecture. Once the topic has been delivered, the teacher must summarize the content taught, and motivate the students to continue studying the topic.



4.	The students will be able to identify modified methods of delivering a lecture	10 min	<p><u>Modified methods of lecture</u></p> <p>The traditional lecture method may be modified according to the need of the situation. Any one of the following methods may be used:</p> <p>I. Interactive lecture</p> <p>Interactive lecture is a combination of lecture, discussion and questioning. Sandra De Young has beautifully explained the interactive lecture in the following way; "The techniques of lecture, discussion and questioning can be effectively blended together into an interactive lecture, utilizing the advantages of all the methods and reducing their disadvantages. Class time can be logically and efficiently divided into sections for lecture, informal discussion, questioning, more lecture and so on. In this way, subject matter is presented for discussion, problem solving can take place and questions can stimulate student thinking and clarify difficult points. Students become periodically active in the class, which eliminates some of the objections of pure lecturing. Changing tactics every 15 to 20 minutes may also help recapture students attention at points when it naturally seems to wander. The class becomes more interesting and it is to be hoped, more memorable".</p> <p>II. Lecture – Demonstration</p> <p>As the term suggests, lecture demonstration is a combination of the lecture and the demonstration. Its purpose is to point out relationships as they occur during a demonstration. The lecture-demonstration method is used extensively in teaching sciences and nursing subjects.</p>	Lecture cum discussion	Power point presentation	The students were able to explain the modified methods of delivering a lecture .
----	--	--------	---	------------------------	--------------------------	--



5.	The students will be able to enumerate the advantage and disadvantages of the lecture method	5 min	<p>Because of its economy of time and equipment, it is often used to replace individual laboratory work in the sciences.</p> <p>III. Lecture – Conference Groups In large classes, the teacher may choose to assign students to small conference groups in order to provide opportunities for discussion and thereby compensate somewhat for the lecture which does not permit much student interaction.</p> <p><u>Advantages:</u></p> <ol style="list-style-type: none"> 1. It is the most economical method of teaching 2. It gives a feeling of security to the teacher (the teacher feels that he/she is in control of the class) 3. This method allow a large group of students to be taught at the same time 4. Time-saving method 5. Well designed and thoughtfully delivered lecture stimulates students and promotes thinking process 6. Enhances the listening capacity of the students 7. Can be used for any group of students 8. Students can get more information by attending a lecture than reading books on the same topic for the same time 	Lecture cum discussion	Charts	The students were able to list down the advantages and disadvantages of the lecture method. .
----	--	-------	---	------------------------	--------	---



			<p><u>Disadvantages:</u></p> <ol style="list-style-type: none"> 1. Teachers (especially experienced ones) may practice lecture method without preparation 2. Does not address problem solving, critical thinking and decision making techniques 3. Students may become passive 4. Student participation is less 5. Does not allow for individual pace of learning 6. Does not provide opportunities for students to interact with the teachers to clarify doubts as it arises. 			
--	--	--	---	--	--	--



SUMMARY:

The lecture today discussed the following topics:

- The definition of lecture
- The purposes of lecture
- The points to remember while preparing a lecture.
- The keys to a successful lecture delivery / presentation
- The ways to modify the traditional lecture method to do away with the disadvantages pointed out
- The advantages of using the lecture method
- The disadvantages of the lecture method

CONCLUSION:

A thoughtfully prepared and a tactfully presented lecture serves many purposes for the teacher as well as the student. The teacher gains more confidence in teaching and the students get more motivated to study the topic.



ASSIGNMENT:

1. Make a list of the common mannerism which you come across during lectures
2. Practice giving a lecture on the topic – “Advantages of the lecture method” – in front of a mirror and notice the mannerisms that you have and find out ways to stop or reduce them.

REFERENCES:

1. Shankaranarayanan, B & Sindhu, B., “Learning and Teaching Nursing” 4th Edition, Jaypee Publishers, Page No: 112 – 117
2. Heidgerken, Loretta E., “Teaching and Learning in Schools of Nursing – Principles and Methods” 3rd Edition, Konark Publishers, Page No: 421 – 427
3. Basavanthappa, B T., “Nursing Education” 2nd Edition, Jaypee Publishers, Page No: 472 – 479
4. Lecture method of teaching, definition, advantages & disadvantages. Retrieved from <http://www.studylecturenotes.com> on Sept 27, 2018
5. Paris, C., Lecture Method: Pros, Cons, And teaching alternatives. Retrieved from <https://blog.udemy.com/lecture-method/> on Sept 27, 2018




PRINCIPAL

Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

LESSON PLAN ON UNIT PLAN

SUBMITTED BY: Mrs. Dipali Awate



LESSON PLAN

- Name: Mrs. Dipali Awate
- Subject : Nursing Education
- Topic: Unit Plan
- Class: Second P.B.BSc nursing classroom
- Method of teaching: Lecture and group Discussion
- Time: 1hr



1

General objective:-

At the end of the practice teaching students will be able to get in depth knowledge about the preparation of unit plan and apply it in their professional practices.

Specific objection:-

Define unit plan

Explain characteristics of unit plan

Discuss criteria of unit plan

Elaborate activities in planning of unit

Explain the steps to be followed while preparing unit plan



Sr. No.	Specific Objective	Time	Content	Teaching learning Activity	A.V. Aids	B/B Activity	Evaluation
1.	Define unit plan	5 mins	<p>➤ Definition:- A large subdivision of the subject matter, wherein a principle of a topic or properties central to the well-organized matter.</p> <p>Planning the unit is known as 'unit plan'</p> <p>Unit consist of a comprehensive series of related and meaningful activity to achieve the purpose, educational objectives by providing significant educational experience that would result in appropriate behavioural changes in the learners.</p>	What is the definition of unit plan?	Blackboard, PowerPoint	Definition	At the end of the practice teaching students understood and will be able to define unit plan.
2.	Explain characteristics of unit plan	7 mins	<p>❖ Characteristics:-</p> <ol style="list-style-type: none"> 1) A unit planning recognized that learning takes place most effectively in terms of whole rather than fraction. <p>➤ The maturity of the learner</p> <p>➤ The possibilities of the proposed learning situation</p> <p>➤ Activities for making significant changes in the behaviour of the learner</p> <p>➤ Total situation</p> <p>➤ A relationship of the proposed activity to the present level of the</p>	What are the characteristics of unit plan?	Blackboard, PowerPoint	Characteristics	At the end of the practice teaching students understood and will be able to explain characteristics of unit plan.



			<p>student</p> <ol style="list-style-type: none"> Provides for vertical and horizontal organization of learning experience. It recognize that learning takes place most effectively when there is an understanding and exceptance of goal to be achieved and when their full and free participation in planning for the attachment of the goal. It recognize the necessity for providing individual differences in the rate of learning and interest. The true learning render, the leaner increasingly skilled in self direction, therefore opportunities are provided for the students. It provides sound basis for evaluation. 				
3.	Discuss criteria of unit plan.	5 mins	<p><u>Criteria of good unit plan:-</u></p> <ol style="list-style-type: none"> The needs, capabilities and interest of the students should be kept in views. A variety of experience should be planned for better learning.For.eg. field trips, experiments ,demonstrations, projects etc. The previous experience and 	Which are the criteria's of good unit plan?	Blackboard, PowerPoint	Criteria	At the end of the practice teaching students understood and will be able to discuss criteria of unit



			<p>background of the students should be taken into account.</p> <ol style="list-style-type: none"> 4) The length of the unit should be based on the interest of the student. 5) Provide an opportunity for new experience. 6) Familiar and related topics should be included on the units. 7) It should be related social and physical environment of the student. 8) Unit should be part of sequences, that permits growth from year to year. 9) Unit planning should be result of cooperative planning of teachers and students. 10) Signifies the unity or wholeness of learning activities related to some problems or project. 11) Psychological principal. Learning by whole is followed. 12) Importance has to be given to integrate learning outcomes. 13) Represent both subject matter into units of experience as well. 14) Organized similar type of subject matter. 15) It achieves a set of specification and objectives. 16) Teacher should have thorough knowledge about subject content so 			plan.
--	--	--	--	--	--	-------



4.	Elaborate activities in planning of unit.	15 mins	<p>that she can decide the difficult units.</p> <p>17) The availability of periods should be considered.</p> <p><u>Activities in planning of unit:-</u> Common activities which are involved while planning developing teaching learning units are:</p> <ol style="list-style-type: none"> 1) Selection and statement of objective: To bring the desirable change in the behaviour which are manifested result of specific teaching learning activities. 2) Selection of content: <ul style="list-style-type: none"> ➤ Facts, concepts, principle which are required to formulate objectives of the unit. ➤ Information, generalizations, subject matter, which are organized into knowledge. ➤ Sources for its knowledge components, text books, references, periodicals, journals. ➤ A.V. Aids. ➤ Educational resources-study of a client at home ,hospital or clinic or any situation. ➤ The content and learning experiences for a unit vary 	Discuss activities while planning a unit.	Blackboard, PowerPoint	Activities in unit planning	At the end of the practice teaching students understood and will be able to elaborate activities in planning unit plan.
----	---	---------	---	---	------------------------	-----------------------------	---



			<p>according to the type of unit, objectives, the field of study.</p> <ul style="list-style-type: none"> ➤ Primary emphasis in nursing course is placing scientific principles along with the development of skills. ➤ Pre-test has to be administered to test the knowledge, understanding and skills in the area. ➤ Study guide has to be prepared but the teacher in advanced and give the students to workout earlier as it orients, revise the topic related to unit and familiarizing the students for the topic. <p>3) Distribution of time and the allotment of time.</p> <p>4) Organization of content of the unit to meet the desired objectives.</p> <ul style="list-style-type: none"> ➤ Keep in mind the curriculum, policies, administrative pattern. ➤ Subject matter or learning experiences has to be organized for students development. ➤ Produce a calmative effect, i.e. accumulation of results of experience in desirable manner. ➤ To create a broader and deeper understanding of knowledge base. ➤ To develop, refine and strengthen the skills already acquired. <p>5) Selection of teaching and learning</p>				
--	--	--	--	--	--	--	--



			<p>activities:</p> <ul style="list-style-type: none"> ➤ Tracing out and utilization of available education resources. ➤ Flexibility according to needs. ➤ Provide opportunity for students to practice the behaviours they are expected to develop as a result of participation in these activities. <p>6) Teacher's expertise:</p> <p>The teacher should have the knowledge of-</p> <ul style="list-style-type: none"> ➤ The subject that she is teaching. ➤ Teaching-learning process. ➤ Learners for whom she is planning process. ➤ The unit. ➤ Her positive attitude towards teaching and her students together with her experience in teaching. ➤ Teacher expertise plays a pivotal role in shaping the student in a desired manner and moulding them with positive attitudes. <p>7) Selection of method of evaluation.</p> <ul style="list-style-type: none"> ➤ To find out how effective the teaching learning activities have been. ➤ To ascertain the extent of students learning on going and terminal plans are necessary. <p>8) Selection of preference.</p> <ul style="list-style-type: none"> ➤ Reading of books, articles, 				
--	--	--	--	--	--	--	--

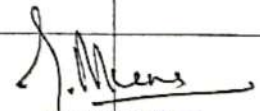


5.	Explain the steps to be followed while preparing unit plan	8 mins	<p>journals is necessary.</p> <ul style="list-style-type: none"> ➤ The school/college should have a good library equipped with journals, periodicals, books and library reference materials which will aid in teaching learning process. ➤ Teacher should give the reference to the students for their self-study according to their needs and level. ➤ To update knowledge regularly, the teacher also should make use of library. <p>Steps to be followed:-</p> <ol style="list-style-type: none"> 1) Content analysis by means of terms, concepts, facts, principles, laws, situation, processes, generalizations, relationships, conclusions, etc. ➤ It helps the teacher to have a thorough knowledge about the subject matter. ➤ It gives self-confidence since she mastery over the subject matter. ➤ Missing of points will be avoided. 2) Objectives with specifications can be realized through the content analysis. 3) Learning activities: Individual differences and psychology of the 	Which are the steps in preparing unit plan?	Blackboard, PowerPoint, chart.	Steps of preparing unit plan.	At the end of the practice teaching students understood and will be able to steps to be followed for unit planning.
----	--	--------	--	---	--------------------------------	-------------------------------	---



		5 mins	<p>student will be considered while choosing learning activities.</p> <p>4) Testing procedures: types of evaluation tools and techniques are mentioned through which the student would get evidence of achievement of objective on the part of the student.</p> <p><u>Conclusion:-</u> Today we learn about:</p> <ol style="list-style-type: none"> 1) Definition of unit plan. 2) Characteristics of unit plan. 3) Criteria of good unit plan. 4) Activities in planning unit plan. 5) Steps to followed while preparing unit plan. <p><u>Assignment:-</u> 1) Write principles of unit plan.</p>				
--	--	--------	--	--	--	--	--



			<p>Reference:-</p> <ol style="list-style-type: none"> 1) 'D.Elakkuvana Bhaskara Raj', 'Nima Bhaskar'; Text book of Nursing Education; emmess medical publishers; curriculum development, Unit plan-pg.no. 363-365. 2) 'Basavanthappa B.T.'; Nursing education; Jaypee brothers; edition-1, 2005; pg.no. 3) 'Neeraja K.P.'; Text book of Nursing education; Jaypee brothers; edition-2, pg.no. 			
					 PRINCIPAL	



Maharshi Karve Stree Shikshan Samstha's
Smt. Bakul Tambat Institute of
Nursing Education
Karvenagar, Pune-411052.

LESSON PLAN ON INTRODUCTION TO RESEARCH

PRESENTED BY : Mrs. Nupoor Bhambid



LESSON PLAN ON – Introduction to Research

TEACHER NAME : Mrs.Nupoor Bhambid

SUBJECT : Research

TOPIC : Introduction to Research

CLASS OR GROUP : II year pbbse

TEACHING METHOD : Lecture / Demonstration

TEACHING AIDS : Power Point presentation.

PLACE/VENUE : II year P.B.BSc Class Room



Specific objective	Time	Content	T/L activity	A.V aids	Evaluation
Get introduce to the topic	5min	INTRODUCTION Nurses are increasingly engaged in disciplined studies that benefit the profession and its patients and that contribute to improvements in the entire health care system	Lecture cum Discussion	PPT	Students understood about research design
Define nursing research	2mn	DEFINITION Research is a systematic enquiry that uses disciplined methods to answer question or solve problems	Lecture cum Discussion	PPT	Students understood about definition of research design
Discuss methods of source of knowledge	5mn	SOURCE OF KNOWLEDGE Ideas are generated from many ways for nursing research point of view these approaches to generating knowledge into two groups a) Unstructured – tradiform authority, experience ,trial and error , intuition b) Structured –induction, deduction, nursing process, research	Lecture cum Discussion	PPT	Students understood about source of knowledge
Describe problem solving and scientific method in research	10mn	Problem solving and scientific method Research is a scientific endeavor it involves scientific method The scientific method is a systematic step by step procedure following the logical process of reasoning The scientific method is based on certain articles of path these are • Reliance on empirical incidence • Use of relevant concepts	Lecture-cum Discussion	PPT	Students understood about problem solving and scientific method in research



		<ul style="list-style-type: none"> • Commitment to objectivity • Ethical neutrality • Generalization • Verifiability • Logical reason of process <p>Scientific approach of research also includes</p> <p>a) Inductive reasoning and deductive reasoning</p> <p>Characteristic of scientific approach</p> <ol style="list-style-type: none"> 1. Order and control 2. Epinicism 3. Generalization 4. Theory <p>Purposes of scientific approach</p> <ul style="list-style-type: none"> • Description • Exploration • Explanation • Prediction • Prescription <p>Limitation of scientific method</p> <ol style="list-style-type: none"> 1.moral and ethical problem 2.human complexity 3.measurment problems 4.control problems <p>Problem solving and research</p> <p>➤ Characteristics of research</p>			
				PPT	
				PPT	



Discuss characteristic of research	10mn	<ul style="list-style-type: none"> • Research directed towards the solution of a problem • Research emphasizing the development of generalization of principle or theories • Research demands accurate observation description • Research involving gathering new data from primary or hand source or existing data for a new purpose • Research is carefully designed • Research requires expense • Research involving the quest for answer to unsolved problems • Research is carefully recorded and reported • Research sometime requiring courage 	Lecture cum Discussion		Students understood about problem solving research
Discuss of purposes of research	5mn	Purposes of research <ul style="list-style-type: none"> • Finding answer to questions or solutions to problems • Discovering and interpreting new facts • Testing theories to revise accepted theories or laws in the light of new facts • Formulating new theories 	Lecture cum Discussion	PPT	Students understood about purpose of research
Know the scope of research	5mn	Scope of research Research can be practiced in A) Administration B) Practice C) Education	Lecture cum Discussion	PPT	Students understood about scope of research



Discuss the steps of research methodology	10mn	<p>Research methodology</p> <p>Following are the major phases and steps of the research</p> <p>Phase I – conceptual phase Step I – formulating and delimiting problem Step II- reviewing the related literature Step III-undertaking clinical fieldworks Step IV- formulating hypothesis</p> <p>Phase II- the design and planning phase Step V- selecting a research design StepVI-developing protocols for the intervention StepVII-identifying the population to be studied Step VIII-designing the sampling plan Step IX- specifying methods to measures the research variables Step X-developing methods for safeguarding human/animal rights StepXI-finalizing and reviewing the research plan</p> <p>Phase III-the empirical phase StepXI-collecting data StepXII- preparing the data for analysis</p> <p>Phase 4 the analytic phase Step XIII- analyzing the data Step XV-interpreting the result Phase 5-the dissemination Step XVI-communicating the findings Step XVII-utilizing the findings in practice</p> <p>SUMMARIZATION:</p>	Lecture cum Discussion	PPT	Students understood about research methodology
---	------	--	------------------------	-----	--



		<p>SUMMARIZATION: Today we have seen</p> <ul style="list-style-type: none"> - Definition of research, methods of acquiring knowledge, scientific method, research characteristic ,purposes and scope steps of research methodology - <p>ASSIGNMENT</p> <ol style="list-style-type: none"> 1) List down the phases and steps of research methodology 2) Describe the purposes and characteristics of research 			
--	--	--	--	--	--

PPT



			Reference <ol style="list-style-type: none"> 1. Nursing Research and Statistics by Sh Suresh 2nded 2. Basics in Nursing Research and Biostatistics by Sreevani R Jaypee Publication 1sted 3. DEBRS Nursing Research and Statistics by Bhaskara Raj EMMESS publication 4. Nursing research by Basavanthappa J Publication 2nded 			
--	--	--	--	--	--	--



[Signature]
PRINCIPAL

Maharshi Karve Stree Shikshan Samstha's
 Smt. Bakul Tambat Institute of
 Nursing Education
 Karvenagar, Pune-411052,



LESSON PLAN

ON

SCOPE OF NURSING RESEARCH

Presented by: Mrs. Nupoor Bhambid



LESSON PLAN

Teacher Name:- Mrs Nupoor Bhambid

Subject: Nursing Research

Topic :- Scope of nursing research

Class:- Pbbse second year classroom

Method of teaching:- lecture and group discussion



Aim-At the end of the presentation the group will be able to gain in depth knowledge about Scope of nursing in research

Objective-

At the end of the presentation students are able to

- Get introduce to the research scope of nursing
- Explain the research in clinical nursing practice
- explain the research in nursing practice
- Explain the research in nursing education
- Explain research in nursing administration



R.NO	SPECIFIC OBJECTIVE	TIME	CONTENT	T/L ACTIVITY	A.V AIDS	
	Get introduced to the research scope of nursing	5min	Introduction The scope of nursing research is to strengthen the body of knowledge in nursing practices. Education, and administration. Therefore, the research/scope of nursing research may be classified in the following three broad categories <ul style="list-style-type: none"> • Research in clinical nursing practice • Research in nursing practices • Research in education • Research in nursing administration 	Lecture cum discussion	PPT	At the end of the class students got introduced to the Scope of nursing research
	Explain the research in clinical nursing practice		Research in clinical nursing practices The scope of clinical nursing research may range from examining nursing interventions and experiences for health promotion, illness prevention, and care for individuals, families, and communities in diverse settings. Nursing research is different from biomedical research because it focuses on examining and expanding the view of health, which emphasizes on health promotion, restoration and rehabilitation as well as a commitment to caring and comfort.	Lecture cum discussion	PPT	At the end of the class students understood the research in clinical nursing practice
				Lecture cum discussion		



explain the research in nursing practice	5min	<p>Research in nursing practices</p> <p>Evidenced base nursing care practices are in greater need to improve the quality of patient care. high quality and cost effective nursing care is only possible through research in this area of nursing profession. Nursing practices are the most researched held in nursing science, where nurse researchers regularly make modest attempts to generate or refine the nursing intervention for following subareas</p> <ul style="list-style-type: none"> ➤ Health promotion, maintenance, and disease prevention ➤ Patient safety and quality of health care ➤ Promotion and risk reduction intervention of health of vulnerable, minority groups and marginalized community ➤ Patient centered care and care coordination ➤ Promotion of the health and well being of older people ➤ Palliative and end of life care ➤ Development of evidenced based practices and translational research ➤ Care implication of genetic testing and therapeutics ➤ Nurses working environment ➤ Home care and community health nursing care practices 	Lecture cum discussion	PPT	At the end of the class students understood the research in nursing practice
--	------	---	------------------------	-----	--



Explain the research in nursing education	5min	<ul style="list-style-type: none"> ➤ Treatment compliance and adherence to treatment ➤ Description of holistic situation :social cultural, religious, traditional and family practices, which have health implication and fall under the nursing care . <p>Research in nursing education Nursing education is another important area of nursing research where nurse researchers try to generate or refine the knowledge, which is useful to improve the teaching learning method and environment in nursing discipline there are several issues and subareas on which nursing research may focus:</p> <ul style="list-style-type: none"> ➤ Promoting clinical and classroom learning among nursing students. ➤ Refining and generating evaluation methods to judge the efficiency of the teaching learning process. ➤ Identifying and managing problems of absenteeism and lack of motivation among nursing students. ➤ Resolving any issue or phenomenon related to the teaching learning process of the nursing students. 	Lecture cum discussion	PPT	At the end of The class students understood the research in nursing education
---	------	---	------------------------	-----	---



Explain research in nursing administration	5min	<p>Research in nursing administration Administration is one of the most difficult disciplines to manage. Similarly, nursing administration also encounters several problems which must be solved. Therefore, there are several main subareas of nursing administration which requires investigation such as:</p> <ul style="list-style-type: none"> ➤ Assessing existing organizational structure, span of control, communication, staffing pattern, wages, benefits, performance evaluation practices etc. and their effectiveness. In addition, developing new knowledge or refining the old knowledge regarding nursing administrative phenomena. ➤ Developing and testing different administrative models to enhance swift administration, employees, and customer satisfaction. ➤ Retention and effective use of nursing personnel in providing the quality of nursing care. ➤ Furthermore, research can be conducted on any phenomenon related to nursing administrative issues. 	Research in nursing administration	PPT	At the end of the class students understood the research in nursing administration
--	------	---	------------------------------------	-----	--



			Reference <ol style="list-style-type: none"> 1. Nursing Research and Statistics by Sh Suresh 2nded 2. Basics in Nursing Research and Biostatistics by Sreevani R Jaypee Publication 1sted 3. DEBRS Nursing Research and Statistics by Bhaskara Raj EMMESS publication 4. Nursing research by BasavanthappaJa Publication 2nded 			
--	--	--	--	--	--	--




PRINCIPAL
 Maharshi Karve Stree Shikshan Samstha's
 Smt. Bakul Tambat Institute of
 Nursing Education
 Karvenagar, Pune-411052.