Success in Nursing Program

Learning Activity Plan

Unit 13: The basics of writing assignments in nursing

Learning outcome:

Participants will be able to:

* Describe the process of writing papers
* Analyze a sample paper using the Student Paper Evaluation Tool

Learning activity:

* Social interaction
* Micro-lecture
* In small groups, students will use the evaluation tool to analyze a sample paper

Time for learning activity:

* Social interaction – 15 minutes
* Small groups – 40 minutes

Time for debriefing: 5 minutes

Resources needed:

* Powerpoint
* Evaluation tool
* Sample paper

**Student Paper Evaluation Tool**

|  |  |
| --- | --- |
| Paper | Notes |
| **Elements of Grammar** |  |
| * Subject-verb agreement?
 |  |
| * Correct sentence structure? (no fragments or run-on sentences)
 |  |
| * Spelling errors?
 |  |
| * Punctuation errors?
 |  |
| * Use of correct pronoun? (he, she , they)
 |  |
| * Use of correct pronoun – agreement (he does, they do)
 |  |
| **APA** |  |
| * Correct title page?
 |  |
| * Correct use of headings?
 |  |
| * Correct in-text citations?
 |  |
| * Correct reference list?
 |  |
| * Correct margins, page headers and spacing?
 |  |
| **Paper content** |  |
| * Is there an introduction to the issue or problem?
 |  |
| * Can you identify the issue or problem?
 |  |
| * Can you identify the thesis statement?
 |  |
| * Is it easy to understand the ideas?
 |  |
| * Is there a logical flow to the ideas through the paper?
 |  |
| * Is there a conclusion?
 |  |

A. Student

Minnesota Transgender Health Coalition

5/13/2000

 The Minnesota Transgender Health Coalition (MTHC) operates out of a tiny shared space behind a coffee shop at 3405 Chicago Avenue in south Minneapolis. The mission of the MTHC is “to improving health care access and the quality of health care received by Trans and gender non-conforming people through education, resources, and advocacy.” (<http://www.mntranshealth.org>) The MTCH was started in 2002 although they didn’t have a formal location until 2009. Before that it was meeting at member’s households and coffee shops and its focuses were on assisting transgender folk’s access to health services including navigating public assistance, and directly approaching health care organizations to train staff on how to respectfully engage and serve the transgender community. The organization still does that but now with its office it can hold meetings with the both the transgender community and the health care community at its own location. In addition to its teaching focus the addition of a physical space allowed for the creating of a shot clinic for trans folks using IM hormone therapy to come and get there shots done for them free of charge and learn how to safely inject hormones themselves, obtain sterile equipment and dispose of dirty equipment.

Let me focus for a moment on an additional service that MTHC provides as it was this service that was my original interest for a volunteer project this semester. After effectively operating a shot clinic/ needle exchange they decided to broaden their services and provide a needle exchange program for IV drug users as well. While this is not the focus of the MTHC it was my main interest and for this project I wanted to use IV drug users as my community to write about for this paper. The Minnesota Aids Project (MAP) operates the most accessible needle exchange programs in the area, however they are very well funded have a large volunteer pool and did not need additional volunteers until this summer. I will be starting to do volunteer needle exchange/ harm reduction work with MAP up in Duluth over the summer. Anyway MAP referred me to MTHC as an alternative needle exchange and they seem to accept all volunteers all the time (yes!). At the MTHC an IV drug user can come and get everything they need to inject drugs (except the drugs themselves) additionally they can get a crack kit. I had not considered it before but there is a high occurrence of hepatitis infection amongst crack users and it spreads easy when smokers share a pipe that is so hot it causes burns on the smoker’s mouth. In the crack kit there is an insulated mouth piece that prevents burns and thus reduces greatly the spread of disease. I thought that was a simple, cheap and effective harm reduction tool. I did not have any clients in need of such services while I was there but I did give out needle and syringes to one recreational IV drug user. The MTHC as recently lost is Minnesota Department of health (MHD) funding and as a result can only give out a limited amount of paraphernalia. The recreational drug user can only get 10 needles and syringes a week and a log is kept under a fake name so as to not incriminate the user. A serious drug user will need to assess other exchanges (such as MAP) to ensure a new rig is used every time. MTHC provides such users with information on how to connect with other exchanges and a list of pharmacy’s that will sell syringes without a prescription. Transgender folks taking hormones typically only have two – four injections per month and as this is the primary community the organizations serves supplies are reserved for these people. Nobody at MTHC is happy about this limiting factor but they must be frugal until they are reapproved with the MDH. The agency also provides designated sharps containers and disposes of full ones for drug users. I thought I had a good idea of saving them money when I suggested that they tell clients to use old laundry detergent cartons as we are taught to encourage patients who need to use needles in nursing school. I learned that the real sharps containers have two profound advantages. First of all it is lockable making a dirty needle much harder to access in a pinch thus potential preventing infection and second and most importantly to be able to open a designated sharps container police need a warrant so a drug user cannot be arrested for responsibly disposing of needles as they could be when using a detergent jug.

I enjoyed my short time working with MTHC and will continue to volunteer with them for their shot clinic hours on Fridays. I have not been given the green light on administering shots yet as none of my volunteer hours happened to coincide with the volunteer coordinator who checks people off when they demonstrate skills and knowledge necessary to provide shots. I have provided assistance with giving out supplies and I gave a couple of very basic demonstrations on how to administer your own shots to the deltoid to a couple of young men taking T or testosterone. On my orientation I was told I could practice giving shots of T to a couple of workers in the coffee shop, and embarrassingly enough I told them that I didn’t think shooting tea into ones muscle was a good idea especial since I was already confident of my IM abilities. No one made too much fun of me. A lot of my time with MTHC was just hanging out (I also cleaned the bathroom and shot closet once) as there limited hours making their shot clinic is not that assessable but honestly I think a huge part of how this organization helps the trans-community is just by being there and providing a space, though a tiny one where transgender folks are supported comforted and served. The two other organizations that share The Exchange with MTHC as also focused on serving the transgender community, one is politically focused and the other on the arts. The people who volunteer there regularly are very dedicated and caring individuals, when all of the paid positions disappeared with the state funding people kept coming to work. Also the coffee shop in front is also a designated gender safe place and a gathering place for both the transgender and queer community’s in Minneapolis, I did feel like I was a service to the community and I plan on continuing this service, I was mostly of service by offering of self. I the future may to have the opportunity to use their educational services when I a working as a nurse within a larger institution as many fail to treat transgender folks with the respect they need. The Trans community is one that is often horribly judged, my service was mostly that of being an alley, treating these people as they want to be treated. Most people whom are transgender feel that their true self is the one they need to become through dressing, hormone replacement therapy, and sometimes surgery. My position is that it’s not any of my or anyone else’s business telling other human beings who they are supposed to be. Little things I can take away from the experience that I take away from this experience to my hospital nursing career are that it is always ok to ask someone what their preferred pronoun is. Also, if you have a med to pass to a patient named John but there is a beautiful woman in the hospital bed, don’t walk away saying you got the wrong room, ask her if her legal name is John and see if there is something else she would rather be called and write it on the board.