

# Looking beyond the traditional: Integrating a new curriculum design into an immersion practicum evaluation tool

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## Abstract

Changes in health care delivery and recent reports from the Institute of Medicine (IOM, 2010) call for nurse educators to reconstruct the way they prepare nursing students for practice in the 21st century. Health care delivery continues to shift from the acute care to outpatient and transitional settings, therefore faculty must assure that graduates are prepared to practice in those environments. In order to address these changes, the Jefferson College of Nursing at Thomas Jefferson University embarked on a mission to redesign their undergraduate curriculum. The new clinical courses, now referred to as Immersion Practicums, were designed to allow students the opportunity to provide care in more diverse community and transitional settings, as well as in acute care facilities. Since the immersions are different from the traditional clinical experience, faculty recognized the need to change the clinical evaluation tool. The purpose of this poster is to describe the process used to develop the immersion evaluation tool, the challenges faculty faced, and the lessons learned.



## Process

A group of faculty met several times over a three month period to develop a feasible tool. Faculty performed a literature search to examine current practices in evaluating clinical performance and to discover tools and rubrics used in clinical evaluation today. The tool evaluates student performance as honors, satisfactory, or unsatisfactory in each of the immersion course objectives, which are categorized according to the four major themes of the curriculum and the Quality and Safety Education for Nurses (QSEN) core competencies. The new tool was presented to the general faculty for their vetting and feedback.

## Literature Review

Clinical Performance	Grading Rubric	Grading Scale
<ul style="list-style-type: none"> <li>Objective structured clinical evaluation (OSCE) tool: Instrument development study identifies adequate construct validity and reliability of the Novice OSCE tool in a sample of 565 baccalaureate nursing students (Walsh et al., 2010).</li> <li>Web-based Practice ePortfolio (PeP): Mixed-method study data analysis utilizing convenience samples comprised of nursing baccalaureate students and clinical faculty highlights issues related to transparency and familiarity of a new pedagogic approach to clinical performance evaluation (Garrett, MacPhee, &amp; Jackson, 2013).</li> <li>Clinical performance evaluation practices: Exploratory study survey results of 1,573 faculty in U.S. pre-licensure registered nurse programs primarily measure clinical competence through performance observation, level of student participation in clinical conferences, self-assessment scores, and OSCE evaluation (Oermann et al., 2009).</li> </ul>	<ul style="list-style-type: none"> <li>Quality and Safety Education for Nurses (QSEN): QSEN incorporates six competencies including patient-centered care, teamwork and collaboration, evidence-based practice, quality improvement, safety, and informatics that align with promoting a culture of safety and quality in the nursing profession as recommended by the Institute of Medicine (Walsh et al., 2010).</li> <li>Rubrics facilitate individualized, fair, and efficient feedback, highlight patterns of improvement or weakness, and provide an explicit grade translation (Isaacson &amp; Stacy, 2009).</li> </ul>	<ul style="list-style-type: none"> <li>Pass/Fail system (i.e. pass/fail, honors/pass/fail, or honors/high pass/pass/marginal pass/fail)</li> <li>Multi-institutional, cross-sectional study including 1,192 first- and second- year medical students from 12 U.S. medical schools survey analysis reveals that the utilization of a two-category pass/fail system impacts psychological stress to a lesser degree than compared to those students who utilize a three category or greater pass/fail system (Darcy, et al., 2011).</li> <li>Two group experimental study involving first- and second- year medical students attending University of California, San Diego identifies through linear regression analysis that a change from utilization of an honors/pass/fail to pass/fail grading system results in decreased academic performance (McDuff et al., 2014).</li> <li>Exploratory student survey results of 1,573 faculty in U.S. pre-licensure registered nurse programs primarily utilize pass/fail system (Oermann et al., 2009).</li> </ul>

## Immersion Practicum Evaluation Tool

The team investigated clinical evaluation tools presented in literature and on the QSEN website. After reviewing the various tool formats, we decided to link the four themes of our redesigned concept-based curriculum (practice excellence, interprofessional collaboration, population health, and innovation) to the QSEN competencies and use that as the foundation for our immersion evaluation tool. A tool was developed for each immersion course, aligning the course objectives with the curricular themes. The object was to have a streamlined tool that was simple to use and met the goals of the course and curriculum.

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Immersion Performance Evaluation Tool  
NU428 Immersion Practicum III

Student Name \_\_\_\_\_ Faculty \_\_\_\_\_ Semester \_\_\_\_\_ Self Evaluation Faculty Evaluation Site \_\_\_\_\_

Fill in appropriate fields to the right & below:

Course Objectives	Midterm (NA for Immersion I)					Final				
	H	S	NI	U	S	H	S	NI	U	
Building upon prior clinical immersion courses, this course focuses on the unique developmental needs of children, childbearing women, and the older adult through collaborative partnerships with other healthcare professionals. At the end of NU428, the student should be able to:										
<b>Population Health<sup>1</sup></b>										
Cultivate knowledge of the normal and abnormal psychological, social, spiritual, cultural and physiological dimensions of the childbearing family, child and the older adult.										
Incorporate knowledge of the aging process, age-related changes and complex health issues into a plan of care for the older adult.										
Implement population focused primary, secondary and tertiary prevention strategies to manage care for the childbearing family, child and older adult.										
<b>Interprofessional Collaboration<sup>2</sup></b>										
Participate in interprofessional teams to provide safe, effective health care for the childbearing family, child and the older adult.										
Collaborate with community partners to prioritize interventions for the childbearing family, child and older adult.										
<b>Innovation<sup>3,4,5</sup></b>										
Use standards of care and research findings to critique the effectiveness of nursing measures to support coping and adaptation of the childbearing family, child and the older adult.										
Implement strategies to minimize risk and promote quality and safety in the nursing care of the childbearing family, child and older adults with physical and cognitive needs.										
<b>Practice Excellence<sup>6,7</sup></b>										
Provide nursing care in simulated and clinical practice settings for the childbearing family, child and older adult using appropriate nursing skills and scientific rationale.										
Facilitate safe and effective care coordination and transitions across levels of care for the childbearing family, child and the older adult.										
Prioritize age-appropriate interventions to meet the developmental, psychosocial, emotional, spiritual, and physical needs of the childbearing family, child and the older adult.										
Accept responsibility and accountability for the nursing care of the childbearing family, child and older adult.										

Final Competency for Immersion Student Nurse Examination of Clinical Competency (SNECC): \_\_\_\_\_

Successful \_\_\_\_\_ Unsuccessful \_\_\_\_\_

Student Comments (Address strengths and areas for improvement)

Faculty Comments (Address strengths and areas for improvement)

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Faculty Signature \_\_\_\_\_ Date \_\_\_\_\_

Mid-Immersion Evaluation: Faculty and student must complete documentation for remediation of unsatisfactory areas. Immersion Remediation Tool must be initiated for any unsatisfactory areas. \*\*NA for Immersion I

Unsatisfactory Area	Remediation Strategy

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Faculty Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\* If a student scores 80% or > of the course objectives as "H" (Honors), the final immersion grade at the summative evaluation will be Honors. Student must obtain at least Honors "H" or Satisfactory "S" grade in all objectives at the Final Evaluation to pass the course.

QSEN Core Competencies Key  
1-Patient Centered Care  
2-Teamwork and Collaboration  
3-Evidence-based Practice  
4-Quality Improvement  
5-Safety  
6-Informatics  
7-Professionalism

H=Honors  
S=Satisfactory  
NI=Needs Improvement  
U=Unsatisfactory

## Grading Rubric

During a formative evaluation, students can receive a grade of Honors, Satisfactory, Needs Improvement or Unsatisfactory. At the summative evaluation students can receive a grade of Honors, Satisfactory, or Unsatisfactory. A grade of Honors indicates that the student earned "H" in 80% or greater of the course objectives. A grade of Unsatisfactory in any objective at the summative evaluation constitutes a failure of the course.

Scale Label	Quality of Performance	Level of Assistance Required	Standard Procedure
Honors	Proficient, confident and expedient; demonstrates accurate, appropriate knowledge, integrating that knowledge with skills and attitudes; uses the nursing process and applies scientific rationale	Rarely requires supportive cues	Safe, Accurate Consistently self-directed, proactive Able to identify learning needs
Satisfactory	Proficient throughout most of performance; demonstrates organization; able to use the nursing process	Requires occasional supportive cues	Safe, Accurate At times self-directed and able to identify learning needs
Needs Improvement	Limited skills. Lacks confidence and organization; demonstrates adequate knowledge base; has trouble integrating knowledge with skills	Requires frequent directives in addition to supportive cues	Safe, with supervision At risk performance Not always accurate Requires some direction in recognizing learning needs
Unsatisfactory	Lacks confidence, coordination and effort hesitates in performance; disorganized; demonstrates significant gaps in necessary knowledge; demonstrates breaches in professional or ethical conduct	Requires continuous directives and supportive cues	Unsafe, unskilled. Unable to demonstrate behavior/procedure; unable to identify learning needs; does not seek appropriate assistance

## Lessons Learned

- Subjectivity: there is no way to completely remove subjectivity from the clinical evaluation.
- Matching QSEN Core Competencies with course objectives and the curricular themes of population health, interprofessional collaboration, innovation, and practice excellence.
- Creating a tool that would be suitable for 7 week and 14 week immersions, and one that could be used for both formative and summative evaluations.
- Inclusion of a Mid-Immersion Remediation Tool for unsatisfactory performance.
- Immersion faculty development on the concept-based curriculum, the evaluation tool, the course objectives terminology, and the rubric criteria.
- The Immersion III course focuses on three different populations, obstetrics, pediatrics, and gerontology. Students will have experiences in all three areas with three different educators; all three educators will need access to the one form.
- Although there was a grading rubric, a defining statement for each objective was developed so that the immersion educators would know what behavior(s) indicated that a student had met an objective.



## Next Steps

- The College of Nursing has formed an Evaluation Team to analyze the new curriculum, including this tool. Edits will be made based on feedback from the immersion educators, students and faculty.
- Continued faculty development on the use of the evaluation tool.
- Test the validity and reliability of the tool through evaluation by an expert panel.

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