

Oakland University School of Nursing

Nursing Synthesis - Clinical

NRS 4125 (473) - CRN# 10332

NRS 4325 (485) - CRN# 10504

**Kathleen Walsh Spencer
DNP, MA, MSN, RN, ACNS-BC, CNE
Special Instructor**

**This course has been determined to meet the
Oakland University General Education Capstone Requirements**

Winter 2018

COURSE NUMBER:	NRS 4125 (473)– CRN #10332		
CREDIT & HOUR ALLOCATION:	Credits	Hrs/Wks	Total Hours Semester
	Clinical	5	210
COURSE TITLE:	Nursing Synthesis – Clinical		
CLASS TIME & LOCATION:	January 3, 2018 – April 25, 2018		
	TBA		
FACULTY OF RECORD:	Anne Marie Mitchell, Ph.D., CNM, WHNP		
	Associate Professor		
	Office: 3037 Human Health Building (HHB)		
	Office Telephone: (248) 364-8709		
	Office Hours: By Appointment Only		
	Email: mitchell@oakland.edu		

This course has been determined to meet the Oakland University General Education Capstone Requirements

PREREQUISITES and/or CO-REQUISITES

Prerequisites: NRS 4061 (428), 4111 (470), 4115 (471), 4145 (477)
 Co-requisites: NRS 4121 (472)

OU GENERAL EDUCATION STUDENT LEARNING OUTCOMES

Capstone Experience

The Capstone course prepares students to demonstrate:

- Appropriate uses of a variety of methods of inquiry and a recognition of ethical considerations that arise
- The ability to integrate the knowledge learned in general education and its relevance to the student’s life and career

COURSE OVERVIEW

This course is the capstone clinical experience for students in the Basic-BSN track. Students will be given the opportunity to demonstrate clinical reasoning within the context of patient-centered care while integrating knowledge and skills learned during the nursing curriculum in the precepted clinical experience.

COURSE OBJECTIVES

1. Demonstrate application of the nursing process with health care consumers, including competency in:
 - a. Health assessment
 - b. Diagnostic reasoning
 - c. Planning and implementing empirically based nursing interventions
 - d. Effective communication with health care consumers, their families, and member of the intra- and inter- professional health care teams, and
 - e. Evaluation patient-specific outcomes using established standards
2. Demonstrate the effective use of clinical resources, delegation skills with members of the intra-professional health care team, and evidence based nursing practice providing patient-centered care.
3. Provide ethically and legally responsible patient-centered care to diverse patient populations while managing a caseload of patients in accordance with the scope and standards of generalist nursing practice.

ESSENTIAL CONTENT

The Nursing Process

Clinical reasoning

Evidence-based nursing practice

Delegation and intra- and inter-professional communication

Patient-centered care

The following are required *prior to starting the clinical experience*:

- Complete mandatory ***orientation on January 8, 2018 at 1800 in HHB Rm 5045***
- Attend a clinical instructor meeting either on January 8 at 1900 or at a time determined by your clinical faculty.
- Complete all assigned facility orientation requirements/modules as identified.
- Complete all mandatory orientation modules required by your clinical facility.
- Upload your photo to Moodle so it accompanies your Moodle emails.
- Complete your Introduction on Moodle.
- Complete Syllabus Quiz.
- Print out required forms for Preceptor and Clinical Faculty (see Moodle page).
- Give printed Clinical Evaluation Tool (CET) to Clinical Faculty at Orientation with your name and G# on it.

Students may not contact preceptors until permission is obtained from the clinical faculty.

CLINICAL REQUIREMENTS

1. A minimum of 210 *precepted clinical hours* must be completed in order to satisfy the NRS 4125/4325 course requirements. Students who do not complete the 210 hours will receive a final course grade of 2.4 regardless of their performance on all the other course components. *Since students are in clinical for 12-hour shifts, and no students are to work any partial shifts, expect to be in clinical for 216 hours (18 12-hour shifts).*
2. Students **MAY NOT** attend clinical with their preceptors on official federal holidays, or when the university has designated emergency closures (e.g. snow days). Classes for the winter semester end on April 17 at 10 p.m. so all clinical hours should be completed by this time.
3. During NRS 4125/4325, you are required to provide your clinical instructor with your clinical schedule at **least two weeks in advance** of the days you will be attending clinical. You cannot begin the clinical experience or work with the preceptor at any time that is not agreed upon in advance with your clinical faculty.
 - Once you submit your clinical schedule (which is based on the work schedule of your preceptor), your clinical days are considered final.
 - *Never* ask your preceptor to change his/her schedule to accommodate your schedule.
 - Any deviation from your submitted clinical schedule will count as a clinical absence and will follow the SON deductions for a clinical absence.
 - Calling in ill after the beginning of the shift, is considered a clinical absence. Students should call the preceptor and the unit at least two hours before the beginning of the shift.
 - Students may not *extend* any of the scheduled clinical experiences (e.g. work overtime with the preceptor) without advance permission from the clinical faculty.
 - Any clinical time that is not preapproved by your clinical faculty *will not count as clinical experience time.*
 - *Students must not work partial shifts.*
 - Students who must leave clinical early, or if their preceptor is being sent home early, must notify the clinical faculty by *text* message before leaving the clinical facility, giving a clear reason. Send a *follow-up message* to your clinical faculty in Moodle Mail.
 - Students who are “called off” due to low staffing must notify clinical faculty by text message before that shift begins. Follow this up with an email in Moodle.
4. Students are expected to be consistently and thoroughly prepared to perform safe nursing practice.
5. Dress and attire for this clinical experience follows the criteria set forth in the School of Nursing Undergraduate Student Handbook. *At no time will a NRS 4125/4325 student wear anything other than the designated nursing uniform approved by the Oakland University School of Nursing. This includes all meetings with preceptors.* Students will wear any required agency identification badge in addition to their OU badge and OU patch. Students should not wear any cover jacket over their uniform and OU uniform ID patch. Chewing gum in clinical is inappropriate. Students who do not adhere to the School of Nursing dress code policy or maintain a professional image representative of OU SON will be told to leave the clinical

setting and that day's hours will not be credited toward the 210 clinical hours needed to complete the course.

6. All Midterm and final clinical evaluation conferences, will take place in person with the clinical faculty, as scheduled.
 - School of Nursing Clinical faculty grades all student clinical performance, *not the NRS 4125/4325 preceptor*. While the preceptor's assessment of the student's performance is a valuable component of the grading process, *the final course grade will be determined solely by the School of Nursing faculty member*.
 - The Clinical Evaluation Tool and subsequent course grade will be completed and calculated by the clinical faculty.
 - Clinical faculty will monitor student progress and assess evidence of accomplishment of the course objectives throughout the term, and will make **unannounced visits** to the clinical unit to monitor student progress and to communicate with the student/preceptor.
 - The Faculty of Record may make unannounced visits to any clinical unit to monitor student progress and to communicate with the student/preceptor
 - Students must attend their final evaluation to receive feedback from their clinical instructor
7. Absenteeism from clinical: Clinical absenteeism will be weighted as a percentage of the total hours of the clinical rotation. For example if a student misses 8 hours of an 84 hour clinical rotation, 10 points would be deducted from the clinical raw score. **A student missing over 20% of any clinical rotation will fail the clinical rotation.**
8. Tardiness from clinical: Clinical tardiness is being late at the beginning of a clinical day defined by the clinical faculty. All students are expected to be on the clinical unit at least *15 minutes* before the shift begins. Thus, since they are to be present on the unit by 0645 for a day shift, for example, the student would be considered tardy at 0646. For each 15 minutes a student is tardy, 1 point will be deducted from the clinical raw score.
9. A *Weekly Clinical Journal (WCJ)* is due each week. Each clinical faculty will determine the day of the week and time that it is due. Your clinical faculty may ask you to upload a WCJ or other document on the weeks that you are not in clinical
10. One (1) point will be deducted from your clinical raw score (on the Clinical Evaluation Tool) **for EACH day** that a Weekly Clinical Journal is submitted after the due date.
11. Five (5) points will be deducted from your clinical raw score each week a Weekly Clinical Journal is not turned in.
12. All student/faculty e-mail *communication is to occur through Moodle* and cannot be through any other mechanism (e.g. OU e-mail account). *All text messages should be followed up with an email to summarize the text communication and the resolution of the problem.*

FACULTY, PRECEPTOR AND SENIOR STUDENT RESPONSIBILITIES

Clinical Faculty

1. Meet with preceptor prior to the start of the clinical experience to outline mutual expectations regarding course objectives, student learning needs, student time commitments, faculty schedule/on-call availability, and other pertinent issues.
2. Provide preceptor with NRS 4125/4325 (may be electronic access) syllabus and discuss its contents.
3. Contact appropriate person (usually nurse educator) and arrange hospital orientation for (a) the student, and (b) yourself, per agency preference.
4. Receive *the original copy* of the **Preceptor Verification Form** from the student. **(The student uploads a copy on Moodle where designated by the Deadline)**. Once the clinical faculty collects all of the *original* Preceptor Verification Forms, they are submitted to Faculty of Record (in SON mailbox) for the Undergraduate Director of the School of Nursing.
5. Provide students with a summary of your on-call schedule restrictions and/or alternate emergency contact information (faculty covering in case of absence).
6. Confer with preceptor to arrange any specific experiences the student needs in order to meet course objectives.
7. Arrange appointments to meet with preceptor and student (individually and together) in person, a *minimum* of 3 times, over the course of the semester to discuss the student's performance/progress. At no time may appointments or evaluations be conducted over the phone, or other social networking mechanisms.
8. Advise the student of his/her clinical progress no later than half way through the semester (e.g. completion of 105 hours of time).
9. **Provide direct supervision for students who are not meeting course objectives satisfactorily, who are failing at midterm, or if there are concerns from the preceptor.**
10. Confer with preceptor regarding student progress in achieving course objectives. Complete clinical evaluation tool, determine student grade, and meet with student to discuss clinical performance and grade for the course.
11. Be available to the preceptor and student during all scheduled clinical times by cell phone.
12. Submit final course grades in Moodle and completed evaluation form to the Faculty of Record in SON mailbox by December 15.
13. Grade student Weekly Clinical Journals submitting their score for each assignment on Moodle.

Preceptor

1. Meet with faculty and student to review syllabus information regarding NRS 4125/4325.
2. Complete Preceptor Verification Form at first meeting with student and give to student to upload on Moodle immediately. (The student will give the original form to the clinical faculty during the first week of clinical).
3. Develop clinical schedule with the student that corresponds to *your* work schedule.
4. Work on the unit on all of the days that the student is scheduled for a clinical experience.
5. **Notify student in case of absence from work on a scheduled clinical day** so that student doesn't come in to clinical. Student will notify faculty immediately by text.
6. Socialize student to the clinical setting by introducing him or her to unit nursing staff member

- and other health care professionals affiliated with the unit.
7. Acquaint student with unit/institution policies and procedures.
 8. Mentor the student regarding the role of the professional nurse and professional nursing activities associated with your clinical nursing practice.
 9. Guide student toward clinical nursing experiences that facilitate student attainment of the course objectives.
 10. Review student's daily/weekly clinical objectives with student.
 11. Model professional nursing behavior at all times.
 12. Assist students to exercise sound clinical judgment when planning, implementing, and evaluating professional nursing care.
 13. Meet with faculty and student *a minimum* of three times per semester, more if needed. This must be a face-to-face meeting with faculty.
 14. Contact the clinical faculty *immediately* regarding any critical incident or when there is a concern and/or a potential concern about the student's performance.
 15. Contact the clinical faculty *immediately* regarding any injury to the student.
 16. Discuss student's progress and performance with faculty on a weekly basis or as indicated by student clinical performance.

OU Nursing Student

1. Have preceptor complete Preceptor Verification Form during first meeting and upload it on Moodle and give the original copy to clinical faculty, who will give it to FOR.
2. Plan a clinical schedule with the preceptor that:
 - a. Corresponds to the preceptor's work schedule and scheduled work shifts (8 or 12 hours). Never ask the preceptor to accommodate *your* schedule.
 - b. **Contains no partial shifts** (Only exception = if preceptor is sent home. Then it is the student's responsibility to notify the clinical faculty immediately by text to inform him/her of the change to the clinical schedule). Follow up with an email to Moodle Mail.
 - c. Work breaks are not included in the total number of clinical hours required for this course. For example, if the preceptor and student attend report at 0645, take a 30 minute lunch break, and depart the facility at 1930, the student may only count 12 hours toward his/her total required time. Any time spent on the unit after the scheduled shift with the preceptor must be approved by the clinical faculty before credit will be given. Each variation to the schedule, if it occurs, will be reviewed on a case by case basis by the clinical faculty.
 - d. May include weekend shifts, but clinical experience cannot occur during any period of time when **Oakland University is closed (legal holidays, official breaks, etc.)**.
 - e. Allows for the completion of a minimum of 210 hours by the end of the semester. Students may not complete a partial shift on the last day of clinical if 210 hours would be reached before the end of the day. Some students may end the semester with more than 210 clinical hours, but no fewer than 210 is acceptable. The majority of students complete 216 hours for this clinical.
 - f. Submit clinical schedule to clinical faculty at the beginning of each schedule cycle, and at least 2 weeks in advance.
 - g. Maintain Clinical Time Log. The student will download and print this log from Moodle. Obtain preceptor signatures on each clinical day. Upload completed log with preceptor signatures at the end of the course *and* give the original to your clinical faculty at evaluation.

3. The student is accountable for attending all of the clinical experiences he/she scheduled with his/her preceptor once the schedule is submitted to the clinical faculty. If the preceptor is unavailable for a scheduled clinical experience, the student **may NOT attend** the clinical experience that day. Students are not permitted to be assigned to other nurses than the designated preceptor which has been agreed upon between OU SON and the hospital. Communication between the preceptor, student, and faculty is critical. The student is responsible for notifying the clinical faculty, immediately, if their preceptor is unavailable on a given day.
4. An up-to-date tally of clinical hours will be made on Weekly Clinical Journal and submitted weekly
5. Student absence due to illness. Notify preceptor, unit, and clinical faculty of any absence at least 2 hours before the scheduled clinical experience. Text clinical faculty and follow up with an email in Moodle. Re-schedule missed clinical experience with preceptor. Notify faculty of re-scheduled time by Moodle mail.
6. Attend all mandatory orientations, clinical meetings, and scheduled clinical experiences.
7. Clearly understand clinical learning objectives (as outlined in the course syllabus) and confer with preceptor to arrange for clinical experiences to meet them. NOTE: Clinical experiences designed to meet clinical learning objectives should be primarily direct care activities expected of registered nurses on the assigned unit. ***Students should not be going to other units for observational experiences.***
8. Prepare adequately for clinical experiences by performing independent reading in the nursing literature regarding clinically relevant nursing phenomena, conference with faculty and/or preceptor, utilize School of Nursing resources as needed (e.g. simulation laboratory, etc.).
9. Demonstrate accountability for all actions and safe clinical practice during all clinical experiences.
10. Follow all agency policies and procedures.
11. Communicate clearly with preceptor and clinical faculty regarding learning needs, limitations, progress, and expectations for the clinical experience.
12. Demonstrate appropriate professional nursing behavior.
13. Students are **not** permitted to:
 - a. Administer chemotherapeutic medications.
 - b. Administer blood.
 - c. Titrate and administer IV drip medications.
 - d. **Function without preceptor supervision.**
 - e. Receive or transcribe physician orders.
 - f. Take verbal orders from physicians.
 - g. Cover assigned and/or any other patients on the unit without preceptor present

COURSE WRITTEN REQUIREMENTS

A. Weekly Clinical Journals

Purpose of Weekly Clinical Journals:

- To stimulate student reflection on his/her clinical practice experiences according to the American Nurses Association (ANA) Standards
- To track progress according to the 10 professional nursing standards of the ANA.
- To formulate weekly plans to meet ANA standards and revise as necessary
- To develop enduring habits of daily and weekly professional self- assessment

- To validate professional growth across the course
- To record clinical hours accrued.

Requirements:

- Students must submit a **Weekly Clinical Journal (WCJ)** using the form posted on Moodle
- The day of the week that your WCJ is due will be determined by the clinical faculty.
- All WCJs will be uploaded on Moodle. Expect that the FOR may periodically review these.
- Clinical faculty will provide written feedback regarding WCJs.

Content:

Each Weekly Clinical Journal entry should include the following:

1. The goal is that students will focus on each and every ANA practice standard throughout the course. In each WCJ, the student identified that the **two** ANA Standards that were focused on during the week. Use the number of the standard and write out the Standard (ex. 1. Assessment). The ANA standards can be found on the Clinical Evaluation Tool and in Syllabus Part A.
2. Maintain a record of which ANA Standards you have addressed and which one you have yet to address. Realize that a practicing nurse meets all of the standards every day.
3. Provide brief descriptions of actual patient scenarios and/or give a variety of examples of how you met the standard.
4. Provide examples and reflection on how you demonstrated accountability, autonomy, decision—making skills, problem-solving skills and other leadership skills.
5. Discuss candidly what went well and what you could have done differently.
6. Discuss sources you consulted to investigate and solve patient problems: personnel you spoke with (managers, other disciplines, committee members), specific policy and procedure manuals, hospital standards, etc. Support your ideas with current literature, including journal article citations.
7. Provide a list of bullet points listing all new patient care skills *since the previous* entry. You may include new psychomotor skills, teaching experiences, all activities related to managing patients, and leadership experiences.
8. Provide an accounting of clinical practice hours.
9. The clinical faculty will average the scores of these journals for your final grade.

Grading Scheme for Weekly Clinical Journals

Element	Points Allocated
Addresses two ANA Standards, providing details about how standards were met (include brief patient scenarios). Provide a variety of examples. Provides accurate interpretation of each standard.	10
Does not repeat same ANA Standards as previously until all are addressed. Does not repeat remarks from previous weeks but exhibits keen insight into applying ANA standards with different patients over time.	10
Evidences reflection and realistic insights in self evaluation of <i>both</i> strengths and weaknesses	10

Identifies appropriate weekly goals according to ANA Standards and clinical progress. If goals are repeated from previous weeks, state why they are not being met.	10
Lists all new skills acquired for current week only	10
Lists <i>specific</i> sources consulted during week to enhance knowledge	10
Lists specific examples of how preceptor or clinical faculty can help student meet goals.	10
Submitted on time, includes hours worked, and schedule for upcoming two weeks.	10
Writing is professional with no errors in spelling, syntax, grammar, punctuation. Uses full sentences. All responses are substantive, <i>at least</i> 4-5 sentences in length.	10
Provide examples of how you exhibited professionalism, autonomy and accountability	10
Total	100

B. Clinical Case Analysis

Purpose: The student will evaluate the nurse's role in facilitating safe, quality outcomes for patient-centered care. The student will select one patient from the clinical course to complete the case analysis using the criteria below. It is our experience that students who are most successful with this assignment select the patient after their fourth week of clinical. It is suggested to select a complex patient with challenging discharge planning needs.

The student must cite at least three professional nursing journal articles and one hospital policy to supplement content from other recent and scholarly sources. Do not cite your *basic* nursing textbooks. All references must be within five years of publication. The written assignment will conform to APA format. The body of the paper is not to exceed ten pages. In the event that you submit your paper late, 10% will be deducted for every day late.

There are four parts to this assignment:

Part A: Write and Upload the Clinical Case Analysis on Moodle under the Assignment Tab for Grading

Part B: Copy and Paste your Clinical Case Analysis in the Nurse-to-Nurse forum. One student will comment on your Case Analysis, and you will comment on one. *Your clinical faculty will determine which case study you will respond to.* Responses should be thoughtful, courteous, and expand the discussion referencing scholarly articles. Your response to your colleague should be 250-300 words, cite an additional scholarly article not already reference. Provide the reference in APA format.

Part C. Present what you learned to your preceptor. You may present your Clinical Case Analysis to other nurses on the unit in addition to your preceptor. Obtain a signature from your preceptor that indicates that you have presented the Clinical Case Analysis topic *and* Addendum to him/her. Upload this signature page on Moodle by the due date *and* give this original signature page to your Clinical Faculty during your Final Clinical Evaluation

Part D. Write an Addendum to your paper following the criteria below. Also post the addendum in the Nurse-to-Nurse forum. Follow the instructions under the Nurse-to-Nurse forum Tab on Moodle.

Clinical Case Analysis: Scholarly Writing Assignment
Criteria for Evaluation

CRITERIA	POSSIBLE POINTS	EARNED POINTS/ COMMENTS
Part A. (20%)	100	
1. Introduce the background of the patient, providing pertinent dates and time frames (date of admission, dates of surgery, etc.) <ul style="list-style-type: none"> • Health history • Economic & social history • Spiritual & cultural considerations • Community of residence • Developmental Stage • Etc. 	8	
2. Admitting/ Medical Diagnoses <ul style="list-style-type: none"> • Discuss pathophysiology of disease or symptoms with focus on current health problems, integrating pertinent lab results (ex. Cardiac cath report, scans, etc.) 	8	
3. Patient Assessment <ul style="list-style-type: none"> • Evaluate relevant data such as VS, meds, labs, diagnostic tests and relate them to your assessment findings. • Emphasis should be on the <i>analysis</i> of assessment data to care for the patient 	8	
4. Analyze the case and progress toward outcomes using the nursing process framework <ul style="list-style-type: none"> • Prioritize three nursing diagnoses (#1, #2, #3) and provide brief plan of care with rationale, interventions, realistic and individualized outcomes and evaluation for each diagnosis. • Evaluate the care provided to the patient and the patient's achievement of care outcomes 	15	
5. Examine how a <i>systems approach</i> to collaboration with other members of the interdisciplinary team contributed to safe patient care (what is the system, how was it used, how did it work/not work?). Review systems theory if necessary.	10	
6. Discharge planning <ul style="list-style-type: none"> • Identify clear discharge planning goals and other long term planning goals for the patient. 	14	

<ul style="list-style-type: none"> • Discuss potential referrals to other disciplines and community resources • Discuss <i>anticipatory guidance</i> and <i>health promotion</i> needs of the patient 		
7. Discuss how the nurse provided or could have provided for the spiritual and /or cultural needs of the patient and family	5	
8. Evaluate one or more of the agency specific policies and the impact on the provision of care for this patient (cite these) <ul style="list-style-type: none"> • Was policy a barrier or facilitator for care? • How does nursing leadership advocate for safe, quality care? 	8	
9. Analyze ethical and legal standards that impacted the care of the patient and family. Possible discussion topics include: ethical standards for professional nursing practice, end-of-life decisions and advanced directives, respect for ethical rights of patients (autonomy, beneficence, etc.)	8	
11. Reflect on additional learning that you need to enhance your care of similar patients or situations in the future.	5	
12. Scholarly appearance of work: <ul style="list-style-type: none"> • Uses three scholarly journal articles in a substantial way, one hospital policy and appropriate scholarly resources to support discussion points. • APA format • Absence of grammatical and spelling errors • Within page limit 	10	
PART B (5%)	100	
13. Nurse-to-Nurse Forum <ul style="list-style-type: none"> • Posts Clinical Analysis on Moodle in Nurse-to-Nurse forum following instructions on Moodle. 10 • Responds to one other student's (as assigned by clinical instructor) following instructions on Moodle. 5 • Responses are substantial in content 30 • Response extends the discussion in thoughtful way, 30 • Response cites at least one scholarly nursing article that was not cited in peers' papers 15 • Responds to all student comments on own original post 10 		
PART C (0%) Pass/Fail		
14. Presentation to Preceptor: Present the Clinical Case Analysis to preceptor (may include other unit nursing staff). Upload the signature form where indicated on Moodle.	P/F	
15. Provide the preceptor with one evidence-based scholarly article from the nursing literature that supports the clinical phenomena pertinent to the Case Analysis:	P/F	

PART D. (5%)	100	
Addendum to Case Analysis Write Several paragraphs indicating <ul style="list-style-type: none"> • How your a) knowledge, b) skills, and c) attitudes have progressed in the weeks since you cared for this patient. 50 • How your KSA have deepened as a result of comments from peer in Nurse-to-Nurse forum 25 • How you plan to continue to investigate and learn about this phenomenon 25 • Your recommendations for other nurses caring for similar patients. Recommendations for nursing education and practice. 		
TOTAL (30% of course grade)	300	

APA Format

All written work must correctly follow the APA writing format, 6th Edition. This includes 12-point Times New Roman font throughout, correct grammar/spelling/punctuation, correct citations of all work(s) referenced, and a Title page and reference list. All emails to faculty and preceptors are considered professional business writing and should be written with proper salutations and appropriate content.

CLINICAL EVALUATION TOOL

Student Name: _____
(Print Name)

GRIZ # (last 4 digits)

Course: _____

CLINICAL EVALUATION TOOL

- This evaluation tool consists of 10 standards that are based on the ANA Standards of Practice and the AACN Essentials.
- Measurement criteria are listed for each standard. These criteria are intended to illustrate examples of expected objectives that should be mastered in clinical experiences. Please note that not every example will apply in every situation or at each level of the curriculum.
- Each standard has suggested criteria that should be met for the clinical experience. Some criteria may not be appropriate for all levels of the curriculum. For example, students at the sophomore level are expected to be aware of and show evidence of understanding each of the criteria and its applicability to clinical practice. At the junior level, students are expected to begin demonstrating use of the criteria during clinical practice situations. At the senior level, students are expected to articulate both their use of the criteria in clinical practice, and other nursing implications related to the criteria. Each level subsumes the ones under it, and student behaviors are expected to reflect this progression.

Instructions to clinical faculty:

- The midterm evaluation is to be given midway way through the clinical experience. Its purpose is to inform the student of their clinical performance and is graded on a pass (P)/fail (F) basis using the criteria outlined in each standard. This evaluation will include a written assessment (see Clinical Evaluation Tool Midterm Summary) highlighting the student's current strengths and areas for improvement for the remainder of the clinical experience. Clinical faculty may also provide additional information and anecdotal notes/work plan if needed.
- At the midterm evaluation, if a student earns a failing mark (6.9 or below) for a particular standard, specific documentation must be provided to support this failing mark. A plan should be developed with the student on how a passing mark can be achieved.
- The final evaluation is given to the student AFTER the entire clinical rotation is completed and MUST reflect faculty assessment through the last day of the clinical course. The student's performance will be evaluated for each standard using a 10 point scale (see next page). A total of 10 points can be earned for each of the 10 standards, so possible final evaluation scores may range from 0-100 points. A written assessment of the student's strengths and progress toward addressing areas for improvement for the future will also be included as well as any additional documentation necessary to explain the student's final grade (see Clinical Evaluation Tool Final Summary). The final clinical grade should be calculated as per instructions from the Faculty of Record (FOR).
- At the final evaluation, if a student earns a failing grade (6.9 or below) for a particular standard, specific documentation must be provided to support this grade.
- Complete tool using black or blue ink only

CLINICAL EVALUATION TOOL POINT SCALE

The following criteria will be used to evaluate the student's clinical performance within each standard.

9.0-10.0

- Applies theoretical knowledge accurately each time.
- Performs safely and accurately each time behavior is observed without supportive cues from the preceptor/instructor.
- Demonstrates dexterity.
- Spends minimal time on task.
- Appears relaxed and confident during performance of task.
- Focuses on client while giving care.

8.0-8.9

- Applies theoretical knowledge accurately with occasional cues.
- Performs safely and accurately each time behavior observed with supportive cues from the preceptor/instructor.
- Demonstrates coordination, but uses some unnecessary energy to complete behavior/activity.
- Spends reasonable time on task.
- Appears generally relaxed and confident; occasional anxiety may be noticeable.
- Focuses on client initially; as complexity increases, focuses on task.

7.0-7.9

- Identifies principles, but needs direction to identify application.
- Performs safely and accurately each time observed.
- Requires frequent supportive and occasional directive cues.
- Demonstrates partial lack of skill and/or dexterity in part of activity; awkward.
- Takes longer time to complete task; occasionally late.
- Appears disorganized in planning nursing intervention.
- Focuses primarily on task or own behavior, not on client.

6.9 and below

- Identifies fragments of principles or unable to identify principles at all.
- Applies principles inappropriately or is unable to apply principles at all.
- Performs safely under supervision, not always accurate or performs in an unsafe manner.
- Requires continuous supportive and directive cues.
- Demonstrates lack of skill; uncoordinated in majority of behavior or unable to demonstrate behavior.
- Performs tasks with considerable delay; activities are disrupted or omitted.
- Appears incapable of carrying out nursing intervention.
- Attempts activity or behavior, yet is unable to complete.
- Focuses entirely on task or own behavior.
- Lacks organization; non-productive.

Adapted from tool developed by Krichbaum, K. from Bondy, K. (1983). Criterion-referenced definitions for rating scales in clinical evaluation. *Journal of Nursing Education*, 22, 376-382. (University of Minnesota School of Nursing)

GRADING POLICY

- Students must achieve a grade of 2.5 or higher on the Clinical Evaluation Tool before the scores for the Weekly Clinical Journals and the Clinical Case Study paper are incorporated into the final grade.
- The chart below identifies the three components of your Course grade:

Weekly Clinical Journals : one for each week that the student is in clinical. The clinical instructor will score these according to the grading scheme in the syllabus, and will <i>average</i> the scores for the final score in the grade book.	10%	Your Score
Clinical Case Analysis <ul style="list-style-type: none">• Part A: Paper (20%)• Part B: Nurse-to-Nurse Forum Responses (5%)• Part C. Presentation to Preceptor (P/F)• Part D.Addendum (5%)	30%	
Clinical Evaluation Tool	60%	
Total Course Score	100%	

**Oakland University School of Nursing
GRADE CONVERSION**

Note: 70% = 2.5

<u>PERCENTAGE</u>	<u>GPA</u>
100.00	4.0
98.00 – 99.99	3.9
96.00 – 97.99	3.8
94.00 – 95.99	3.7
92.00 – 93.99	3.6
90.00 – 91.99	3.5
88.00 – 89.99	3.4
86.00 – 87.99	3.3
84.00 – 85.99	3.2
82.00 – 83.99	3.1
80.00 – 81.99	3.0
78.00 – 79.99	2.9
76.00 – 77.99	2.8
74.00 – 75.99	2.7
72.00 – 73.99	2.6
70.00 – 71.99	2.5
68.00 – 69.99	2.4
66.00 – 67.99	2.3
64.00 – 65.99	2.2
62.00 – 63.99	2.1
60.00 – 61.99	2.0
58.00 – 59.99	1.9
56.00 – 57.99	1.8
54.00 – 55.99	1.7
52.00 – 53.99	1.6
50.00 – 51.99	1.5
48.00 – 49.99	1.4
46.00 – 47.99	1.3
44.00 – 45.99	1.2
42.00 – 43.99	1.1
40.00 – 41.99	1.0