

Classroom/Clinical Evaluation

Classroom Evaluation

Theory Grade:

The theory grade is a letter grade obtained by adding all unit exams and comprehensive final exam and dividing by the number of exams given in the course (i.e. $84.6 + 88.4 = 173 \div 2 = 86.5$). The final course grade will be rounded up if .5 or greater (e.g. 86.5 would = 87, 77.9 would = 78). No rounding will occur on unit exams or comprehensive final, only the final course grade. Every exam **must** be taken and **no** exam grade can be dropped.* The actual number of the final course grade is applied to the scale below to determine a letter grade:

A	100-90
B	89-83
C	82-78
D	77-65
F	BELOW 65

Students must successfully complete all unit exams and the final examination with an average score of 78 or above to progress to the next level or to graduate in their final semester. The student must successfully complete all concurrently taken courses to progress to the next level. If the student elects to drop the class prior to the scheduled college drop date, a grade of "W" will be earned. If the student continues after the "drop date", the student will earn the grade compiled from unit exams and the final exam.

If a hardship (e.g., surgery, serious illness, accident, death in the family) prevents a student from taking an examination, the student may petition the classroom instructor for approval to take a make-up examination. The classroom instructor will determine whether or not the student is eligible for a make-up exam and when the exam is to be scheduled. The instructor may request documentation of the student's circumstances prior to approving such a request.

A "C" grade or higher is required before the student can progress to the next nursing course.

A numerical average of 78 equals a "C" grade.

* Specific information regarding the number and type of exams will be distributed on the first class day.

Clinical Grade:

Each course will be graded separately. Students must successfully complete each course with an average grade of 78 or above to progress to the next level or to graduate in the final semester. Unsafe clinical practice will result in a clinical failure. If the grade is below 78 in one course, the student will have to repeat all concurrent corequisite courses concurrently upon readmission.

The clinical course involves check-off of specified skills in a simulated lab setting; clinical test; using the nursing process to give safe care to a specified number of patients in a hospital setting; completion of specific written and/or oral assignments (e.g., medication cards, nursing care plans, process recordings); and demonstration of professional behavior in attitude, dress, communication, and punctuality.

A clinical evaluation tool, with criteria, is the document used to record progress in the clinical laboratory setting. All students are formally evaluated at mid-semester and at the end of the semester in each nursing course. If the student performs unsafe care or exhibits inappropriate behavior during the course of the semester, the clinical instructor will identify and discuss this problem with the student as soon as possible after the occurrence(s). An occurrence record will be written to document the occurrence(s).. Steps to rectify the problem will be suggested, and the student will be expected to improve. If the identified actions/behaviors continue, a formal learning contract will be written. The formal contract will identify specific areas for improvement, a plan to achieve expected outcomes, a specified time period to correct the deficiency, and a designated time period for evaluation. Contracts can be written at any time during the semester.

Repeated incompetent actions and/or disruptive behavior or unsafe actions ie abandonment in the clinical setting may be grounds for suspension from the clinical prior to the end of the semester. If the identified problems do not resolve by the end of the semester, the student will receive a clinical failure (below 78) in the nursing course. Some examples of clinical failure include:

1. Failure to satisfactorily complete the required clinical objectives and assignments.
2. Performance of a skill or behavior that causes physical injury or emotional distress to the patient.
3. Falsification or misrepresenting any information concerning patients, staff, and peers.
4. Performing unsafe nursing care in the clinical setting while under the influence of alcohol or drugs (drugs that have a detrimental effect on students' behavior or ability to reason).

- Reports information that is important for consistent care and safety
- Uses a variety of communication techniques

3. Decision Making

Examples:

- Makes appropriate nursing judgments at performance level
- Reports abnormal vital sign changes
- Usually seeks out new learning experiences
- Sets appropriate priorities with some direction

4. Skills

Examples:

- Is safe in carrying out nursing care skills and/or delegated medical functions (with supervision as required)
- Administers medications according to the "Five Rights" (completed within a reasonable time period)
- Recognizes violation of aseptic technique in dressing change and takes appropriate action to remedy situation
- Obtains accurate vital signs

5. Personal/Professional Accountability

Examples:

- Adequately suctions trach, asks for assistance to change ties on tracheostomy dressing
- Asks for guidance in caring for patient of same age; willing to look at own feelings, attitudes, and behaviors
- Open to new ideas, willing to take some risk
- When under stress, maintains standards with guidance

Clinical Performance Rating Scale

The clinical performance rating levels of Satisfactory and Unsatisfactory are described below. Examples of behaviors for Satisfactory and Unsatisfactory ratings are included. The rating levels are included.

Satisfactory = S+(4), S(3), S-(2)

A Satisfactory (78 or above) clinical grade constitutes safe clinical performance: the student adequately demonstrates application of the nursing process, communication, decision making, and psycho-motor skills; assumes personal/professional accountability; is able to synthesize expected learning at course level. Student achieves all (100%) of expected behaviors (objectives) as listed on the evaluation tool by the end of the course.

Examples (which include but are not limited to the following) of safe clinical behaviors in areas included on the evaluation tool are:

Areas Included on Evaluation Tool / Examples of Safe Clinical Behavior

1. Use of Nursing Process

Examples:

- Accurately assesses the patient and implements plan of care in a safe manner
- Makes decisions and plans care based upon collected information
- Is well organized and sets priorities appropriately

2. Communication

Examples

- Uses appropriate terminology
- Is aware of verbal and nonverbal cues
- Seeks clarification when statements are inconsistent

Unsatisfactory = U (below 78)

An Unsatisfactory (below 78) clinical grade constitutes unsafe clinical performance: the student is inadequate or inaccurate in application of the nursing process, communication, decision making or psychomotor skills; lacks personal/professional accountability; does not synthesize expected learning at course level. Student fails to achieve all (100%) of expected behaviors (objectives) as listed on the evaluation tool by the end of the course.

Examples (which include but are not limited to the following) of unsafe clinical behaviors in areas included on the evaluation tool are:

Areas Included on Evaluation Tool/Examples of Unsafe Clinical Behavior

1. Use of Nursing Process

Inadequately and/or inaccurately utilizes the nursing process

Examples:

- Fails to observe and/or report/chart critical data re: patients
- Makes decision without collecting adequate information
- Is unable to develop appropriate nursing care plan for assigned patients
- Fails to evaluate effectiveness of nursing interventions

2. Communication

Inaccurate and/or inappropriate verbal/nonverbal skills in interaction with others

Examples:

- Uses non-therapeutic techniques repeatedly in interactions
- Responds inappropriately to patients/family/ nursing staff/peers/ community
- Attacks/derogates individual's beliefs or values

3. Decision Making

Assumes inappropriate independence in action or decisions

Makes repeated faulty judgments/decisions in nursing situations (or resulting in ineffective/unsafe nursing care)

Places patient in emotional or physical jeopardy

Examples:

- Fails to recognize own limitations, incompetence and/or legal responsibilities, e.g., refuses to admit errors, cannot identify own legal responsibility in specific nursing situations
- Performs competencies not yet tested
- Fails to appropriately seek assistance when needed e.g., emergency situations
- Fails to keep a patient NPO for surgery
- Fails to complete assigned nursing responsibilities

4. Skills

Violates principles in carrying out nursing care skills

Violates previously mastered principles/ learning objectives in skills performance
Requires more supervision than other students at same level

Examples:

- Fails to obtain or report/record accurate vital signs
- Neglects appropriate use of side rails/restraints
- Fails to recognize violations of aseptic techniques
- Violates the "5 Rights" in administering medications
- Fails to prepare IV infusions accurately
- Fails to monitor IV infusions safely
- Burns patient with hot packs, heating lamps, etc.

5. Personal/Professional Accountability

Fails to accept moral and legal responsibility for own actions, thereby violating professional integrity as expressed in the *Code for Nurses*
Unable to self-evaluate in terms of insight and personal growth

Examples:

- Attempts actions beyond competency / skills level
- Falsifies or fails to report information concerning patients ; falsifies or misrepresents information concerning staff and peers
- Fails to conduct self in professional manner
- Shares confidential information inappropriately
- Reports to clinical under the influence of substances that potentially affect performance
- Takes property belonging to hospital, patient and others
- Comes unprepared to clinical
- Does not notify unit and/or instructor of absence per policy of specific clinical
- Inadequate patient teaching in preparation for hospital discharge
- Fails to monitor a critically ill patient frequently or notify supervisor if he/she cannot
- Leaves patient unattended

- Fails to notify appropriate staff when patient's condition deteriorates
- Fails to follow school /hospital policies/procedures
- Fails to seek supervision when needed

Skills Lab Grade

Skills Lab course will be graded separately. Students must successfully complete each course with an average grade of 78 or above to progress to the next level or to graduate in the final semester.

The grade in a skills laboratory course involves check off of specific skills in a simulated laboratory setting/clinical test. A numerical grade will be assigned at the completion of the skill and an average of the skills grades will result in the course grade. A skills evaluation tool with criteria is the document used to record progress in the skills setting. The final course grade will be rounded up if .5 or greater; (e.g. 86.5 would = 87 or 77.9 = 78). No rounding will occur prior to determination of final grade. No grade will be dropped. The final grade rounded is applied to the scale below to determine a letter grade.

- A - 100-90
- B - 89-83
- C - 82-78
- D - 77-65
- F - BELOW 65

Some examples of skills failure include:

1. Failure to satisfactorily complete the required skills objectives and assignments.
2. Failure to complete all skills in the skills laboratory.
3. Failure to complete skills within the allowed three (3) times.
4. Failure to perform skills according to stated criteria.

Each skill check off must be completed within two weeks of the date of the original check off.

A student's unsuccessful performance of the skill on the third attempt will result in an administrative withdrawal from the course. A "W" will appear on the student's transcript.

Occurrence Records Guidelines

Occurrence records are a form of written documentation used by faculty when:

1. further explanation or documentation of student performance is needed
2. the student needs to be immediately informed of his/her behavior

Occurrence records are notations that an instructor keeps to describe specific behaviors of a student. These behaviors, appropriate or inappropriate (positive or negative), are documented and presented to the student to read and sign. The student may also record his/her description of the behavior on the occurrence record. The instructor uses the occurrence record to make the student aware of behaviors he/she may be exhibiting.

Occurrence records:

1. may contain a prescription for changing certain behaviors
2. become a permanent part of the student's departmental file

Formal Learning Contract Guidelines

A formal learning contract is necessary when specific problem areas are identified and these problems **must** be remedied to ensure safe clinical practice. The learning contract is usually initiated after the student has been informed of inappropriate and/or unsafe behavior by occurrence records and the behavior is still creating a problem. Formal learning contracts may be used in clinical, skills lab, math, and class situations. The contract and successful completion of it becomes part of the student's departmental file. Satisfactory completion of the contract, as well as all other aspects of the objectives for the course, are necessary to earn a satisfactory classroom/clinical grade.

The formal learning contract contains:

1. a statement of the problem/problems
2. a statement of expected outcomes
3. prescription for behavior change or steps to remedy the problem
4. a specified time period to correct the deficiency and a time period to evaluate
5. signature of the student and instructor