Lincoln Memorial University Caylor School of Nursing Clinical Outcomes Tool Guide

This tool is used to evaluate student performance in each clinical setting in conjunction with the ASN courses. This evaluation tool is guided by the objectives and guidelines which are listed in this Clinical Outcomes Tool Guide. In addition, the guide gives examples of behaviors that would be demonstrated by the student in order to receive a satisfactory for the items in this evaluation tool. This tool is based on the ANA's Clinical *Standards for Nursing Practice (2015)*. The identified behaviors are consistent with the Adaptation nursing theory of Sister Callista Roy.

For each clinical rotation, the student is to print the 3 page Clinical Outcomes Tool (COT) and give it to the clinical instructor. Each clinical rotation will be evaluated based on this Clinical Outcomes Tool Guide.

Evaluation Criteria:

- 3 = Satisfactory (The clinical objective has been met by the student.)
- 2 = Needs Improvement (The clinical objective has been minimally met by the student.)
- 1 = Unsatisfactory (The clinical objective has not been met by the student.)
 (An unsatisfactory rating on any clinical objective that has been identified as critical for that particular semester will result in unsatisfactory clinical grade.)
- **N/A** = **Not Applicable/Not Observed** (This indicates that the clinical objective was either not observed or not applicable in that clinical setting.)

(Each Unsatisfactory or Need Improvement must include an instructor's comment and date on the COT.)

Clinical Objectives:

First Semester (1) - clinical objective met with assistance for instructor.

Second Semester (2) - clinical objective met with minimal assistance from instructor.

Third Semester (3) - clinical objective met with supervision from instructor.

Fourth Semester (4) - clinical objective met with minimal supervision from instructor.

Listed below are the evaluation categories with the corresponding *ANA Standards of Nursing Practice* (2015). Each behavioral item from the Clinical Outcomes Tool is listed. These items are followed by criteria for satisfactory behaviors which indicate student progression. The semester in which these items are critical behaviors is designated by: (1) First Semester, (2) Second Semester, (3) Third Semester, (4) Fourth Semester. From that semester until the program is completed, that objective must be met at a minimum criteria of 2.

American Nurses Association. (2015). *Standards of Nursing Practice* (3rd). Kansas City, MO: American Nurses Publishing.

Roy, C. (2009). *The Roy Adaptation Model* (3rd ed.). Upper Saddle River, NJ: Pearson Education, Inc.

SECTION I: STANDARDS OF PRACTICE (SOP) (Nursing Process)

ASSESSMENT (SOP 1)

- 1. (1) Collects appropriate patient information to form a thorough and organized database for patient care.
 - (1) Reviews the patient's chart, Kardex, and medication records.
 - (1) Obtains appropriate history information from the patient and family.
 - (1) Gets report from members of the health care team to clarify information and provide for continuity of care.
 - (2) Organizes and records data as directed.
 - (2) Identifies individual and family learning and discharge needs.
 - (3) Prioritizes data collection based on patient's condition.

2. (2) Performs thorough and accurate physical assessments.

- (1) Obtains and records vital signs, intake / output, height / weight accurately.
- (2) Documents assessment findings accurately in appropriate records.
- (2) Identifies changes in patient's health status and takes action when necessary.

DIAGNOSIS (SOP 2)

- 3. (2) Analyzes data to identify appropriate nursing diagnoses.
 - (1) Selects and documents appropriate nursing diagnoses.
 - (2) Identifies actual or potential problems that threaten or promote adaptation.

OUTCOME IDENTIFICATION (SOP 3)

- 4. (1) Identifies appropriate patient outcomes.
 - (1) Derives outcomes from written nursing diagnoses.
 - (1) Establishes desired patient outcomes as realistic and obtainable goals.
 - (2) Documents outcomes appropriately.
 - (3) Participates with patient, family and health care team to establish patient-centered outcomes which promote health, prevent illness, and provide for rehabilitation.

PLANNING (SOP 4)

- 5. (3) Creates and documents a well-developed plan of care.
 - (2) Develops a plan of care with input from the patient, family, other members of the health care team.
 - (2) Includes appropriate patient and family learning and discharge needs.
 - (2) Creates a plan that provides for continuity of care.
 - (3) Incorporates patient's cultural and spiritual beliefs in plan of care.
 - (3) Incorporates patient's physiologic, psychosocial, developmental needs, and patient strengths in plan of care.
- 6. (2) Establishes priorities for nursing care.

IMPLEMENTATION (SOP 5)

- 7. (2) Provides appropriate interventions based on the patient's plan of care.
 - (2) Implements plan of care according to the patient's needs and established priorities.
 - (2) Follows prescribed medical regimen for the patient undergoing diagnostic tests, therapeutic procedures, and/or surgery.
 - (2) Implements appropriate teaching plans specific to patient's learning and discharge needs.
 - (3) Utilizes community resources when appropriate.
 - (4) Promotes the patient's optimum level of functioning and adaptation to changes in health status.
- 8. (1) Provides for physiologic health and safety of the patient and others.
 - (1) Follows universal precautions when providing care.
 - (1) Follows isolation policies when applicable.
 - (1) Provides for patient's hygiene needs.
 - (1) Provides for a safe patient environment.
 - (2) Implements necessary care for the bed-ridden, immobilized, or unconscious patient.
- 9. (1) Demonstrates safe performance of nursing skills.
 - (1) Administers medications safely and correctly and documents appropriately.
 - (1) Follows established hospital policies, procedures, protocols, and routines.
 - (1) Demonstrates understanding of aseptic technique when providing patient care.
 - (2) Administers parenteral fluids safely and documents appropriately.
- 10. (1) Demonstrates accurate and appropriate documentation and written communication.
- 11. (2) Promotes psychological safety of patients.
- 12. (1) Makes decisions based on knowledge of facts and sound judgment.
- 13. (1) Utilizes evidence-based nursing and collaborative interventions.
- 14. (3) Promotes patients capacity for optimal participation and problem-solving.
- 15. (1) Demonstrates utilization of available healthcare technologies.

COORDINATION OF CARE (SOP 5A)

16. (4) Provides for continuity and coordination of care in the management of health care needs.

HEALTH TEACHING AND HEALTH PROMOTION (SOP 5B)

17. (3) Incorporate effective teaching-learning strategies to promote patient and family adaptation to health care needs

EVALUATION (SOP 6)

- 18. (2) Determines the effects of nursing interventions on the patient.
 - (4) Participates with the patient, family, and health care team to evaluate the patient's progress towards written outcomes.
- 19. (3) Revises plan of care based on ongoing assessments.

SECTION II: STANDARDS OF PROFESSIONAL PERFORMANCE (SOPP)

ETHICS (SOPP 7)

- 20. (1) Conducts self in an ethical manner.
 - (1) Is truthful in dealings with patients, families, health care team members and instructors.
- 21. (1) Applies legal implications of nursing practice.
- 22. (1) Maintains confidentiality regarding patient information.
- 23. (1) Maintains a non-judgmental attitude.

EDUCATION (SOPP 12)

- 24. (1) Participates in pre/post conferences.
- 25. (1) Turns in completed written assignments on time.
- 26. (1) Utilizes time effectively and efficiently during the clinical day.

EVIDNCE-BASED PRACTICE and RESEARCH (SOPP 13)

- 27. (4) Incorporates appropriate research findings.
 - (4) Utilizes a variety of resources to incorporate evidence-based practice into plan of care and/or other assignments.

QUALITY OF PRACTICE (SOPP 14)

- 28. (1) Is a reliable and conscientious caregiver.
 - (1) Spends time with patients.
 - (1) Is conscientious; follows through with responsibilities.
 - (3) Serves as an advocate for patients.
- 29. (3) Is self-directing; assumes initiative when appropriate.
- 30. (4) Provides care for a group of patients based on priority of needs.

COMMUNICATION (SOPP 9)

- 31. (1) Communicates therapeutically with patients and family members.
- 32. (2) Establishes and maintains a therapeutic relationship with patients and family members.
- 33. (4) Demonstrates beginning conflict resolution skills.

LEADERSHIP (SOPP 11)

34. (4) Identifies the role of the nurse leader.

COLLABORATION (SOPP 10)

- 35. (2) Recognizes own strengths and weaknesses and seeks assistance when necessary.
- 36. (1) Communicates appropriately and respectfully with other members of the health care team.
 - (1) Verbally communicates patient information to other members of the health care team when

- needed.
- (2) Provides for continuity of care through receiving and giving reports about patient status and plan of care.
- 37. (4) Engages in teamwork with other members of the health care team, including fellow students.

CULTURALLY CONGRUENT PRACTICE (SOPP 8)

- 38. (1) Treats patients, family members, fellow students, faculty/clinical instructor, and members of the health care team with respect, trust, and dignity.
- 39. (3) Provides culturally and ethnically sensitive care to the patient and family.

PROFESSIONAL PRACTICE EVALUATION (SOPP 15)

- 40. (1) Assumes responsibility for own actions.
- 41. (1) Accepts constructive feedback well and utilizes suggestions for improvement.
- 42. (1) Reports to clinical practice and conferences on time.
 - (1) Notifies instructor if he / she is going to be late or absent.
- 43. (1) Dresses appropriately in the clinical setting, including preplanning.
 - (1) Follows the LMU Uniform policy.
 - (1) Wears nametag at all times.
 - (1) Follows hospital dress code if applicable.
- 44. (4) Organizes time and is efficient in performing nursing care.

RESOURCE UTILIZATION (SOPP 16)

45. (4) Provides patient care utilizing other personnel in regards to their educational preparation and experience.

ENVIRONMENTAL HEALTH (SOPP 17)

- 46. (4) Learns environmental health concepts and applies those in the clinical area as appropriate.
- 47. (3) Assess patient's environment for factors such as sound, odor, noise and light which may potentially affect health.
- 48. (3) Reports observations or concerns related to patient errors or hazards in the patient's environment to the clinical instructor.

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