



Clinical Judgment: Nursing Actions and Measurable Indicators

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Background

Making clinical decisions is an activity frequently performed by nurses, accounting for 46% of tasks performed by registered nurses (NCSBN, 2018). However, new graduates often have difficulty making clinical judgments. Nurse educators need to facilitate the development of clinical judgment skills and evaluate the student's ability to use them effectively in the clinical setting.

Purpose

Using the 5 components of the National Council of State Boards of Nursing (NCSBN) Clinical Judgment Model (CJM), the study identified nursing actions and measurable indicators demonstrating the nurses' performance of clinical judgment skills.

Methodology

Nurse educators designing the survey and those surveyed taught at least 5 years as an instructor or assistant professor in pre-licensure ADN or BSN 2- and 4-year programs. Hospital-based nurse educators worked in teaching hospitals or general acute care hospitals with over 400 beds. They identified as clinical unit educators with between 1 and 30 years of experience.

A total of 94 out of 644 (14.6%) potential nursing program-based nurse educators and 14 out of 22 (63.6%) hospital-based nurse educators completed the survey designed to assess actions and measurable indicators of 5 components of the NCSBN CJM (Recognize Cues, Generate Hypotheses, Judge Hypotheses, Take Action, Evaluate).

The survey was deployed via a secure online survey platform, on November 12, 2018 and closed on November 27, 2018 for nursing program-based nurse educators. For hospital-based nurse educators the survey was deployed on July 17, 2019 and closed on August 12, 2019.

Selections from prepopulated lists and additional supplied text responses in the survey allowed respondents to identify actions or indicators they thought were necessary for nurses/nursing students to demonstrate clinical judgment skills for each step of the CJM. Additional nursing actions and measurable indicators were adopted from open-ended responses provided by the respondents for each step of the CJM process. Five nurse educators reviewed the responses and helped create the survey, yielded agreement for inclusion of the action.

Results

Recognize Cues

- Use knowledge, experience and evidence to assess clients
- Collect relevant subjective/objective client data^(MI)
- Identify subtle and apparent changes in client condition and related factors
- Document and communicate expected and unexpected patterns/trends/changes in clinical findings^(MI)
- Recognize when to seek guidance from more experienced colleagues
- Differentiate between signs and symptoms of a client's condition that may present similarly to a different health problem.

Generate Hypotheses

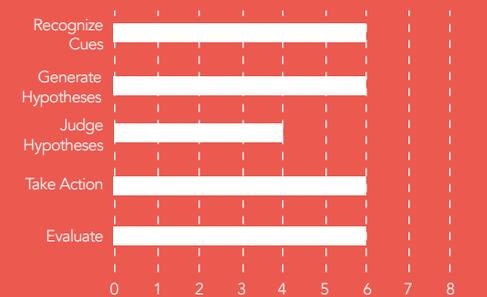
- Organize client assessment information and data according to changes, patterns and trends
- Analyze expected and unexpected findings in health data
- Compare client findings to evidence-based resources
- Anticipate illness/injury and wellness progression
- Identify actual client problems^(MI)
- Relate client findings to evidence-based resources

Judge Hypotheses

- Identify client problems and related health alterations^(MI)
- Recognize problems beyond the client's current condition or diagnosis
- Use standards of care and an empirical framework for priority setting^(MI)
- Prioritize established hypotheses based on client assessment data^(MI)

Demographics

Actions & Measurable Indicators



Take Action

- Modify the plan of care to assure achievement of optimal client outcomes when indicated.^(MI)
- Establish optimal client outcomes^(MI)
- Identify evidence-based actions to achieve outcomes^(MI)
- Promptly and accurately perform nursing actions based on prioritized client problems
- Re-prioritize nursing actions as the client's condition changes
- Prioritize client care for multiple clients

Evaluate

- Perform reassessment of client condition and related factors^(MI)
- Compare assessment data to the achievement of expected outcomes^(MI)
- Evaluate client outcomes to determine efficacy of actions.^(MI)
- Modify expected outcomes based on the client's response and clinical findings^(MI)
- Select nursing actions to attain optimal desired outcomes
- Update and revise the plan of care^(MI)

MI = Measurable Indicator

Conclusions

For each of the five steps of the Clinical Judgment process, the majority of respondents selected the predefined answer options for both measurable actions and indicators, identifying all options as important skills related to Clinical Judgment.

Additional nursing actions and measurable indicators were adopted from open response results for each step of the Clinical Judgment process following a review by 5 nurse educators that participated in creating the survey.

Recommendations

Equip nursing program and hospital-based nurse educators with the knowledge and skills to incorporate Clinical Judgment throughout the curriculum in class, lab, simulation and clinical.

Incorporate nursing actions and measurable indicators in nursing curricula to instruct, measure and evaluate student clinical judgment ability.

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