

GRAND VALLEY STATE UNIVERSITY

KIRKHOF COLLEGE OF NURSING

ASSESSING CLINICAL JUDGMENT BEHAVIORS AND SELF-REFLECTION USING THE LASATER CLINICAL JUDGMENT RUBRIC IN BSN STUDENTS

DIANNE SLAGER, DNP, FNP.BC

LEARNING OBJECTIVES

- Identify at least three elements of clinical judgment.
- Review at least four strategies to promote clinical judgment using simulation with human manikins (HSM) with BSN students.
- Discuss impact of research project on student self-reflection and self-awareness re clinical judgement.

THE CHALLENGE

• Educate nurses as critically thinking participants in interdisciplinary teams.

 Demonstrate accountability via valid and reliable assessment tools for quality education.



BACKGROUND: CLINICAL REASONING

- Nursing students need opportunities to act as detectives to help develop clinical reasoning and judgment:
 - -set priorities
 - -learn how to act in given situations
 - -respond to changes in patient condition
- -attend to evidence-based rationales to guide practice



BACKGROUND: CLINICAL REASONING

- Students need to learn specific types of thinking relevant to novice practice, such as problem solving, decision making and diagnostic reasoning in health care situations.
- Synthesize the nursing process to assess, determine, and manage patient problems.

BACKGROUND: PROJECT

- BSN program-traditional students
- Senior laboratory class
- Team taught course
- First HSM course
- Cohort size: 59 students



WHY HUMAN SIMULATION MANIKINS?

- Permits exposure to complicated yet safe patient care situations that permit development and practice of reasoning skills.
- Offers opportunities to practice critical events in a safe and controlled environment.
- Fosters problem based learning.
- Consistent clinical experience for study GRAND VALLEY G

SELF-AWARENESS

- Self-awareness is defined as the agreement between an individual's self-perceptions and external perceptions about that individual.
- Individuals with accurate self-perceptions generally have better outcomes and leadership performance.
- Increases forward movement in thinking.



GOALS

faculty.

- Provide a clear layered scaffold for development of clinical judgment behaviors.
- Provide clear, consistent, formative feedback to students involved in clinical simulation learning with four different

LASATER CLINICAL JUDGMENT TOOL

- Based on Tanner's Model of Clinical Judgment
 - 1. Noticing: observe and develop expectation
 - 2. Interpreting: perceive and understand
- 3. Responding: develop appropriate intervention
 - 4. Reflecting: evaluation and debriefing



LASATER CLINICAL JUDGMENT TOOL

- Describes behavioral dimensions under the categories of Assessment, Diagnosing, Interventions and Evaluation.
- Each behavioral dimension provides clear examples of salient behaviors under descriptor categories: novice, developing, accomplished and exemplary to guide students in their clinical activities.

(Tanner, 2005, 2006) (Lasater, 2007A, 2007b, 2011) (Lasater & Neilson, 2009)

NURSING PROCESS ELEMENTS

- Assessment
- Diagnosis
- Planning/Outcomes
- Implementation
- Evaluation



HYPOTHESES:

- 1. Weekly reflection using the LCJR, students' awareness of and incorporation of critical thinking behaviors would improve their movement across a continuum toward exemplary behaviors & habits.
- 2. Weekly reflection would increase self-awareness of critical thinking behaviors and lead to accurate student self-evaluation of simulation lab participation.



METHODS: SAMPLE

- Randomly assigned to 5-person care team
- Traditional BSN students in their senior year.
- 86 % Caucasian, and 10 % Hispanic, 2% African American.
- •82% female, 18% male



METHODS: PROCEDURES

- Quasi-experimental design, repeat-measures test of student scores at 2 points (mid, end semester)
- Quasi-experimental design, measures test of faculty and student score average at conclusion of semester
- Inter-rater reliability scores-2 points
- Focus group-qualitative measures



LOGISTICS

- Four faculty with four unique areas of clinical expertise
- 60 senior BSN students in synthesis course
- Lab time and space for 3 cohorts of 20 students
- IRB approval



LAB TIME

- Students randomly assigned to 4 or 5 member teams, based on their lab time schedule.
- 2 hour lab divided into 3 rotating activity periods (prep content quiz, learning activity, Simulation).
- Simulation each week: rotated role of primary, secondary nurse, ancillary team member, family member(s).

- LCJR tool was introduced on the first day of the 14 week simulation lab. Reviewed tool and discussed tool purposes: for performance reflection and self-evaluation.
- Numbered rubrics were given to students at the beginning of each lab session, and collected at the conclusion.

METHOD

- Simulations were videotaped and faculty developed a skill/behavior list for each simulation.
- Faculty relied on their observational notes, the behavior list notes, and videos for grading using the LCJR.
- Scores from the five primary or secondary nurse role scenarios over the semester were then averaged for a final simulation grade.
- Grades for weekly quizzes and other learning activities were compiled with the simulation grade for an overall grade for the semester.

- All simulations were filmed. These films were used to evaluate inter-rater reliability of faculty scoring.
- The four faculty evaluated films at two different points in the semester; with Cohen's Kappa values of 0.70, 0.70, 0.80 and 0.40 respectively.

 Hypothesis 1: Weekly reflection using the LCJR, students' awareness of and incorporation of critical thinking behaviors would improve their movement across a continuum from novice toward exemplary behaviors & habits.

- The quasi-experimental design compared students' self-scores of behavioral indicators from two different points during the 14 week semester.
- A means score was achieved by averaging each 5 member team's individual scores for each dimensions

ANALYSIS

 Statistical analysis entailed use of simple counts, means (M), standard deviations (SD), and two-tailed t-test analysis. A paired T-test was used to compare congregate team scores from week 4-6 with congregate team scores from week 10-12.



	As	ssessme	nt	Diag	nose	I	nterve	Evaluation			
	Obser vation	Change from Expected Patterns	Infor- mation Seeking	Prioritize Data	Analyze Data	Manner	Commu- nication	Flexible	Skillful- ness	Self- Analysis	Improve- ment
A-1	2.53	2.33	2.73	2.40	2.40	2.73	2.80	2.67	2.73	2.73	2.53
A-2	3.20	3.27	3.53	3.33	3.20	3.33	3.53	3.33	3.13	3.07	3.47
Paired T-Test	0.0006	0.0002	0.0006	0.0005	0.0002	0.0035	0.0006	0.0034	0.0042	0.0275	0.0005
B-1	3.33	3.07	3.13	3.20	2.67	3.13	3.27	3.00	3.07	3.13	3.07
B-2	3.40	3.33	3.47	3.47	3.27	3.40	3.53	3.40	3.07	3.47	3.67
Paired T-test	0.3592	0.1671	0.0680	0.1310	0.0167	0.1084	0.1503	0.0554	0.5	0.0480	0.0167
C-1	3.21	3.14	3.21	3.14	3.00	3.00	2.86	3.21	2.86	3.07	3.21
C-2	3.57	3.50	3.57	3.50	3.43	3.50	3.57	3.57	3.43	3.43	3.57
Paired T-test	0.1330	0.1192	0.1039	0.0869	0.1168	0.0446	0.0032	0.0480	0.0130	0.0682	0.0869
D-1	2.80	2.73	3.00	2.80	2.40	2.93	2.87	2.73	2.67	2.60	3.00
D-2	3.40	3.47	3.33	3.40	3.13	3.53	3.67	3.27	3.33	3.27	3.53
Paired T-test	0.0028	0.0006	0.0680	0.0167	0.0031	0.0167	0.0006	0.0073	0.0015	0.0061	0.0133

ANALYSIS

- Hypothesis 1: Weekly reflection using the LCJR, students' awareness of and incorporation of critical thinking behaviors would impact their movement across a continuum toward exemplary behaviors & habits.
- Null hypothesis was NOT proven as 36 of 44 Proven as 36 of 44 Proven were < 0.05.

• Hypothesis 2: Weekly reflection would increase self-awareness of critical thinking behaviors and lead to accurate student selfevaluation of simulation lab participation.

ANALYSIS

 Statistical analysis entailed use of simple counts, means (M), standard deviations (SD), and twotailed t-test analysis. The between-group (student and faculty) comparisons of scoring of simulation lab participation were evaluated with an unpaired T-test. A 95% confidence interval was utilized using Excel.

S-Student	ream 1		leam z		ream 5		ream 4		ream 5		ream o	
F-Faculty	S	F	S	F	S	F	S	F	S	F	S	F
Noticing/Assessment												
Focused observation	3	3.6	3	3.6	3.8	3.7	3	3.2	3.2	3.7	3.6	3.2
Recognize deviations	3.2	3.4	2.8	3.5	3.6	3.5	3.4	3.4	3.2	3.1	3.4	3
Information Seeking	3.2	3.7	3.6	3.6	3.6	3.8	3.4	3.6	3.4	3.6	3.6	2.9
Interpreting/Diagnosing												
Prioritize data	3	3.3	3	3.4	3.6	3.5	3	3.1	3.2	2.9	3.4	2.9
Analyze data	3.2	3.1	3.2	3.1	3.4	3.4	3	3.2	3.4	3	2.8	2.4
Interventions/Responding												
Manner	3.2	3.8	3.2	3.7	3.6	3.5	3	3.6	3.6	3.8	3.6	3.8
Communication	3.2	3.8	3	3.8	3.6	3.6	3.2	3.4	3.8	3.7	3.2	3.6
Flexible Interventions	3	3.4	3	3.2	3.4	3.5	2.6	2.8	3.6	3	3.4	3
Skillfulness	2.8	3.4	3	3.2	3.2	3.2	3	3.2	3.4	3.3	3.2	3.7
Evaluation/Reflecting												
Self-Analysis	3.2	3.6	3	3.6	3.2	3.2	3.4	3.4	3	3.7	2.8	3.4
Commit to improve	3.4	3.8	3.2	3.7	3.4	3.5	3.2	3.3	3.8	3.7	2.8	3.8
	0.0	0016		00041	1	20000	0	00647	0	04560	0	05727

F-Faculty	S	F	S	F	S	F	S	F	S	F	S	F
Noticing/Assessment												
Focused observation	3	3.5	3	3.2	2.8	2.9	3.2	3.6	3	3.8	3	3.4
Recognize deviations	3	2.7	3	2.8	3.2	3	3.6	3.2	3	3.1	3.3	3.2
Information Seeking	3	3.5	3.2	3.8	3	2.6	3.4	3.2	3	3.1	3	2.5
Interpreting/Diagnosing												
Prioritize data	3	3	3.6	3	3.2	2.7	3.6	3.1	2.8	3	2.8	2.9
Analyze data	3	2.8	4	3.1	2.8	2.7	3.4	3.2	2.8	2.9	2.6	2.4
Interventions/Responding												
Manner	3	3.7	3.6	3.8	3.2	3.7	3	3.7	3.4	3.6	3.5	2.9
Communication	3	3.6	3.6	3.9	3.5	3.9	3.4	3.7	3.2	3.2	3.3	3.2
Flexible Interventions	3	2.8	2.4	2.8	2.8	2.6	3	2.6	3	3.1	3.2	2.9
Skillfulness	3	3.4	3	3.1	2.8	3.3	3.2	3.1	2.8	2.7	3	2.9
Evaluation/Reflecting												
Self-Analysis	3	3.3	3	3.4	3.4	3.7	3.2	3.6	2.8	3.5	3.2	3.9
Commit to improve	3	3.8	3.2	3.9	3.4	3.9	3	3.9	3	3.7	3.4	3.9
P-value	0.22344		0.56344		0.65655		0.54524		0.04499		0.91537	

ANALYSIS

 In two-tailed t-test analysis of LCJR scores, student's self-evaluation scores (M=2.675, SD=0.2491) compared with faculty evaluation scores (M=3.12, SD=0.3175). A P-value of 0.465 demonstrated no significant difference between the means using a 95% confidence interval.

DISCUSSION

- Students reported discomfort with weekly self-evaluation.
- This was a really clear tool for evaluation, but also an exceptional resource for guiding debriefing for a novice faculty member.
- The LCJR tool helped raise students' awareness of and incorporation of critical thinking behaviors & improved their movement across a continuum of novice towards exemplary behaviors.



DISCUSSION

- Across all twelve sections, students consistently graded themselves lower than faculty at the interventional dimension.
- Benner, Tanner & Chesla (2009) describe this tendency of novice nurses to focus on mastering skills versus developing a "big picture" perspective.

THANKS!

- Kathy Lasater for giving permission for use of tool for research project.
- Colleagues and students
- Sigma Theta Tau for promoting nursing knowledge research and nursing education.
- Simulation champions everywhere!



REFERENCES

Abelsson, A., & Bisholt, B. (2017). Nurse students learning acute care by simulation-Focus on observation and debriefing. *Nurse Education in Practice, 24*, 6-13. doi: 10.1016/j.nepr.2017.03.001

Aiken, L. H., Clarke, S. P., Sloane, D. M., Sochalski, J., & Silber, J. H. (2002). Hospital nurse staffing and patient mortality, nurse burnout, job dissatisfaction. *Journal of the American Medical Association*. 288(16), 1987-1993.

Akerjordet, K. & Severinsson E. (2007). Emotional intelligence: A review of the literature with specific focus on empirical and epistemological perspectives. Journal of Clinical Nursing, 16(8), 1405-1416.

AlSabei, S.D. & Lasater, K. (20116). Simulation debriefing for clinical judgment development: A concept analysis. Nurse Education Today. doi: 10.1016/j.nedt.2016.06.008.

Benner, P. Tanner, C. A., Chesla, C. A. (2009). Expertise in Nursing Practice: Caring, Clinical Judgment and Ethics. New York: Springer Publishing. p 78.

Cato, M. L., Lasater, K., & Peeples, A. I. (2009). Nursing student's self-assessment of their simulation experiences. Nursing Education Perspectives, 30(2), 105-108.

Chee, J. (2014). Clinical simulation using deliberate practice in nursing education: A Wilsonian concept analysis, Nursing Education in Practice,14, 247-252

Chen, S-H., Chen, S-C, Lee, S-C., Chang, Y. & Yeh, K-L. (2017). Impact of interactive situated and simulated teaching program on novice nurse practitioners' clinical competence, confidence and stress. Nurse Education Today,55, 11-17.

Decker, S., Fey, M., Sideras, S., Caballero, S., Rockstraw, L., Boese, T.,...Borum, J. I. (2013). Standards of best practice: Simulation standard VI: The debriefing process. Clinical Simulation in Nursing, 9(6S), S27-S29. http://dx.doi.org/10.1016/j.ecns.2013.04.008.

Fenske, C.L., Harris, M.A., Aebersold, M.L. & Hartman, L.S. (2013). Perception versus reality: A comparative study of the clinical judgement skills of nurses during a simulated activity. *Journal of Continuing Education in Nursing*, 44(9), 399-405.

Lasater, K. (2007). Clinical judgment development: Using simulation to create an assessment rubric. The Journal of Nursing Education, 46(11), 496-503.

Lasater, K. (2007). High-fidelity simulation and the development of clinical judgment: Students experiences. Journal of nursing Education, 46(6), 269-276.

Lasater, K. (2011). Clinical judgment: The last frontier for evaluation. Nursing Education Practice, 11(2), 85. doi: 10.1016/j.nepr.2010.11.013.

Lasater, K., & Nielsen, A. (2009). Reflective journaling for clinical judgment development and evaluation. Journal of nung Education, 48(1), 40-44.

Maxwell, W.D., Grant, A. D., Fabel, P. H., Worrall, K., Brittain, K., Martinez, B.,...Ziegler, B. (2016). Impact of the Birkman Method Assessment on pharmacy student self-confidence, self-perception, and self-awareness. American Journal of Pharmaceutical Education, 80(9), Article 148.

OF NURSING

Nelson, M.H., Fierke, K.K., Sucher, B.J., & Janke, K.K. (2015). Including emotional intelligence in pharmacy curricula to help achieve CAPE outcome and ricar January Pharmacology education, 79(4), Article 48.

Sabei, S.D.A.L., Lasater, K. (2016). Simulation debriefing for clinical judgement development: A concept analysis. *Nurse Education Today, 45*, 42-47, 10.1016/j.nedt.2016.06.008.