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THE COLLEGE OF NEW JERSEY

Content Validation of a Quality and Safety Education for Nurses (QSEN) Based Clinical Evaluation Instrument

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QSEN Competencies



- *Health professions education: A bridge to quality*(2003)
 - IOM; Now National Academy of Medicine
- QSEN
 - Funded by Robert Wood Johnson Foundation
 - Focused on transforming basic education for nurses
 - Reflects a new identity for nurses that demonstrates **knowledge, skills** and **attitudes** that emphasize quality and safety in patient care
- Relevance to Nursing Education and Clinical Practice
 - Pre-licensure Education
 - Baccalaureate Essentials /Master's Essentials
 - Transition to Practice Program

Where I started from



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THE COLLEGE OF NEW JERSEY
Department of Nursing
CARING IN ADULT/ELDERLY HEALTH II: PRACTICE
NUR 424

(SELF) EVALUATION OF STUDENT CLINICAL PRACTICE (FACULTY)

STUDENT: _____ FACULTY: _____ GRADE _____

AGENCY/CLINICAL AREA: _____ DATE: _____

The following descriptive statements relate to the rating scale utilized for the evaluation of student performance in the clinical practice area. The rating scale is as follows:

- 4 = OUTSTANDING (A) Consistently superior in clinical performance, skill, synthesis of learning and application of nursing principles. Functions consistently above expectations of students at this level.
- 3 = ABOVE AVERAGE (B) Clinical performance, skill, synthesis of learning and application of nursing principles is always above average and is sometimes superior.
- 2 = AVERAGE (C) Clinical performance, skill, synthesis of learning and application of nursing principles is at the expected level, satisfactory and safe.
- 1 = NEEDS IMPROVEMENT (D) Clinical performance, skill, synthesis of learning and application of nursing principles is below that expected of students at this level.
- 0 = UNSATISFACTORY (E) Clinical performance, skill, synthesis of learning and application of nursing principles is inadequate, and/or unsafe.

Evaluation of student clinical practice is based on the objectives of the Caring in Elderly Health: Practice course. Specific nursing practice behaviors described are related to stated course objectives. To successfully meet the requirements of the course the student must achieve a "C-" in each OBJECTIVE.

Those behaviors marked with an asterisk (*) are CRITICAL behaviors in that they relate directly to client safety. Unsatisfactory performance of these behaviors at any point during the course could result in an immediate clinical failure. In this event, the student may not continue any clinical experiences for the remainder of the course.

For additional details related to clinical performance behavior refer to GUIDELINE CONCERNING BEHAVIOR IN CLINICAL PRACTICE SETTINGS, ASSUMPTION UNDERLYING CLINICAL PRACTICE EVALUATION AND LEGAL ISSUES IN CLINICAL PRACTICE EVALUATION.

Searched QSEN Based Evaluations



- **Nicholls State**

- <http://qsen.org/clinical-performance-evaluation-tools-utilizing-the-qsen-competencies/>

- **Western University of Health Sciences**

- <http://qsen.org/clinical-evaluation-tools-integrating-qsen-core-competencies-and-aacn-bsn-essentials/>

- **University of Massachusetts**

- <http://qsen.org/integrating-qsen-into-clinical-evaluation-tools/>

Instrument Construction



Goal: Standardize and clarify expectations of clinical performance

- **Six QSEN Competencies as headings**
 - Patient-centered care; Teamwork & Collaboration; Evidence-based Practice; Quality Improvement; Safety; Informatics
- **Additional heading of Professional Role Development**
- **National Delphi Study to create and level items (*where it should be introduced, emphasized, required*)**

Choosing Experts

Connecting QSEN, Practice, and Academia



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- Six expert nurse educators recruited
 - 3 QSEN knowledgeable, doctorally prepared medical-surgical nurse educators
 - 1 QSEN knowledgeable master's prepared simulation expert
 - 2 master's prepared expert adjunct medical-surgical nurse educators with clinical practice hospital-based positions

Data Collection



- Content Validity Index-most widely used method of determining content validity for multi-item scales in nursing research
Polit & Beck, 2017
 - Computes consensus estimates; the extent to which experts agree
 - Uses 4 point ordinal scale-1=not relevant, 2=somewhat relevant,
3=quite relevant, 4=highly relevant
- 44 items in 1st round
- 4 items rated not relevant
- 43 items in 2nd round

QSEN Competency Based Clinical Evaluations



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Core Competencies	Midterm 1 to 4		Final 1 to 4	
	Faculty	Student	Faculty	Student
Focusing on the impact of Acute Illness on adults and their families regarding priority treatments, health restoration, and health maintenance, the student completing NUR 424 will be able to:				
Patient-Centered Care/Caring/Empowerment				
1. Provide comprehensive patient care in compliance with clinical agency policy and procedure (1,2)				
2. Synthesize pathophysiology of patient conditions and associated pharmacological interventions, drawing on past experiences to improve quality of life for individuals, families, and community systems in a comprehensive plan of care (1)				
3. Demonstrate caring behaviors, modifying interventions to address actual and anticipatory physical, emotional, and spiritual comfort, pain, and/or suffering (2,3,8,)				
4. Collect a family history and identify disorders that may indicate need for genetic assessment (1)				
5. Demonstrate cultural sensitivity and respect for diversity in promoting health and maintenance in the health care setting (3)				
6. Evaluate effectiveness of patient and family teaching and modify plan of care as needed (6)				
7. Advocate for and include the patient and family as the center of the caregiving team when setting and modifying care goals (2,5)				
8. Engage patients and families in discharge planning that includes evidence-based strategies to prevent avoidable readmissions throughout the hospital stay (5,6,9)				
Teamwork and Collaboration				
9. Coordinate and delegate elements of care to the inter-professional healthcare team within the scope of practice (5,7,10)				
10. Recognize changing patient condition and communicate changes in patient status to the inter-professional team in a timely manner using SBAR framework (2,4,5,7)**				
11. Conduct patient care reports (hand-off communication) efficiently and effectively (7)				
12. Engage patient and family in a collaborative relationship by providing relevant information, resources, access, and support (3,6,7)				
13. Accurately Interpret physician and inter-professional orders and communicate accordingly (2,4,5)				
14. Initiate requests for help when appropriate to situation (2,4,7)				

Grading Rubric



Clinical Evaluation Rating Scale

Rating	Grade	Independent Professional Practice	Knowledge, Skills & Attitudes	Overall Grade Computation																				
4	A	Rarely requires <ul style="list-style-type: none"> • Direction • Guidance • Monitoring • Instructor assistance 	Consistently Exhibits <ul style="list-style-type: none"> • A patient and family centered focus • Accuracy, safety, & skillfulness • Assertiveness and initiative • Efficiency and organization • An eagerness to learn 	<p>Computation Process: Each of the 42 specific competencies listed is of equal value. To compute the final NURS 424 clinical evaluation grade, add all the scores for the specific competencies and divide the sum by 42. For items that were not observed, a NO (non-observed) should be entered in the blank and should not be counted when computing the final score.</p> <p>The overall grade award is based on a 4-point scale:</p> <table> <tr><td>A</td><td>4.00 – 3.68</td></tr> <tr><td>A-</td><td>3.67 – 3.34</td></tr> <tr><td>B+</td><td>3.33 – 3.01</td></tr> <tr><td>B</td><td>3.00 – 2.68</td></tr> <tr><td>B-</td><td>2.67 – 2.34</td></tr> <tr><td>C+</td><td>2.33 – 2.01</td></tr> <tr><td>C</td><td>2.00 – 1.68</td></tr> <tr><td>C-</td><td>1.67 – 1.34</td></tr> <tr><td>D+</td><td>1.33 – 1.01</td></tr> <tr><td>D</td><td>1.00</td></tr> </table>	A	4.00 – 3.68	A-	3.67 – 3.34	B+	3.33 – 3.01	B	3.00 – 2.68	B-	2.67 – 2.34	C+	2.33 – 2.01	C	2.00 – 1.68	C-	1.67 – 1.34	D+	1.33 – 1.01	D	1.00
A	4.00 – 3.68																							
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B+	3.33 – 3.01																							
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B-	2.67 – 2.34																							
C+	2.33 – 2.01																							
C	2.00 – 1.68																							
C-	1.67 – 1.34																							
D+	1.33 – 1.01																							
D	1.00																							
3	B	Intermittently requires <ul style="list-style-type: none"> • Direction • Guidance • Monitoring • Instructor assistance 	Often Exhibits <ul style="list-style-type: none"> • A patient and family centered focus • Accuracy, safety, & skillfulness • Assertiveness and initiative • Efficiency and organization • An eagerness to learn 																					
2	C	Regularly requires <ul style="list-style-type: none"> • Direction • Guidance • Monitoring • Instructor assistance 	Commonly Exhibits <ul style="list-style-type: none"> • A patient and family centered focus • Accuracy, safety, & skillfulness • Assertiveness and initiative • Efficiency and organization • An eagerness to learn 																					
1	D	Consistently requires <ul style="list-style-type: none"> • Direction • Guidance • Monitoring • Instructor assistance 	Rarely Exhibits <ul style="list-style-type: none"> • A patient and family centered focus • Accuracy, safety, & skillfulness • Assertiveness and initiative • Efficiency and organization • An eagerness to learn 																					

Criteria marked with * indicate critical knowledge, skills, and attitudes that directly relate to client safety. A minimum skill level of 2 is required at all times; ratings less than 2 could result in immediate clinical failure, in which event the student may not continue any clinical experiences for the remainder of the course. Numbers in parentheses represent association of item to Student Learning Outcomes.

In accordance with the School of Nursing policy the clinical grade must be a C- or greater to successfully complete the course.

For additional details related to clinical performance behavior refer to [GUIDELINE CONCERNING BEHAVIOR IN CLINICAL PRACTICE SETTINGS, ASSUMPTION UNDERLYING CLINICAL PRACTICE EVALUATION AND LEGAL ISSUES IN CLINICAL PRACTICE EVALUATION.](#)

Results



42 Item Instrument

- each item had CVI .83 or higher

Scale CVI/Universal Agreement 1.0

Scale CVI/Average .979

Adaptability



- **Each item connects to course learning objectives**
- **Grading can be letter grade, pass/fail, or satisfactory/unsatisfactory**
- **Can modify to align with program theorists**

Implications



Strengths

- QSEN provides a clear, organized framework for objective analysis of student performance in the clinical setting
- Creates coherent categories for student to identify strengths and weaknesses
- High agreement among experts indicates instrument is relevant to nursing education and practice

Limitations

- Content validation is only one aspect of an effective clinical evaluation

Evaluation of the QSEN Competencies



- Development of valid and reliable instruments to measure QSEN competency
- Measure impact of QSEN integration in curricula on practice
- Level competency based clinical evaluation instruments for all courses and establish content validation
- Competency based performance evaluations in practice

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Thank you!
Questions?

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