Student Name: D#: Date:

Course: Session: Year:

# OBSERVATIONAL CLINICAL EXPERIENCE

**Observational Clinical Experience:** Defined as a clinical experience in which the student is in an observational role only and is not directly providing patient care. Examples include but are not limited to: Interventional Radiology, Cardiac Cath Lab, Operating Room, and/or Clinic settings. It is recommended that the students complete no more than 6 hours in an observational clinical experience per session.

# DIRECTIONS

* The Direct Patient Care Documentation (DPCD) reinforces the link between didactic and clinical learning and promotes clinical judgment.
* The DPCD – Observational Clinical Experience will be assigned by your clinical faculty and is to be completed following the Observational Clinical Experience.
  + Can be handwritten or typed.
  + Submit within 24 hours (or as directed by the course leader).
* **Grading: See DPCD Grading Rubric. Evaluated as Satisfactory or Unsatisfactory on the Clinical Learning Evaluation.**
  + Satisfactory rating meets the following:
    - Clinical Learning Competency: Completes all clinical learning experiences and requirements successfully. (PO 5) Performance Descriptor: Completes all assignments related to the clinical learning experience within established guidelines.

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| **Clinical Experience Reflection** |
| **1. Clinical facility (description, population served, and role of the nurse):** Describe the type of facility/setting where you completed your observation (i.e., Acute care setting, Skilled Nursing Facility, Clinic, Public Health Facility), department, primary function, number of beds (if applicable), the population it primarily serves, and the role of the nurse. |
| **2. Connecting theory to practice:** Discuss how concepts and strategies you have learned in your current course(s) or throughout the program were connected to patient care activities observed. |
| 1. **Communication/ Compassionate Care/ Interprofessional Care:** Reflect on ways effective or ineffective communication and compassionate care was observed and how this impacted the patient(s).    1. Provide an example of how interprofessional care was utilized and the impact this had on patient outcomes.    2. Identify two (2) delegation tasks utilized/observed during your shift (or anticipated delegation opportunities) and whom they were delegated to. Explain the five rights of delegation and if they were upheld. |

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| **Clinical Experience Reflection** |
| 1. **Diversity/Equity/Inclusion (DEI) [Including but not limited to age, sex, race, ethnicity, sexual orientation, gender identity, family structures, geographic locations, national origin, immigrants/refugees, language, religious beliefs, and socioeconomic status]**    1. Describe the actions and/or practices you utilized or observed that support DEI.    2. In what ways could there have been more support provided? |
| **5. Evidence-based practice (EBP): Identify two (2) examples of evidence-based practice you observed during your clinical experience. Explain how each supports safe and effective nursing care. (There are various examples of evidence-based practice in nursing, such as, management of angina, protocols regarding alarm fatigue, family members’ influence on a patient’s presentation of symptoms, noninvasive measurement of blood pressure in children.) Utilize journals or other references to support the EBP identified (cite  the references).**  1.  2.  References: |
| 1. **Social Determinants of Health:** Review the **Social Determinants of Health Questionnaire-Full**    1. Identify any concerns observed regarding economic stability, education access and quality, health care access and quality, neighborhood and built environments, and social and community context.    2. Reflect on your findings and how this may impact the patient’s health. |
| 1. **Ethics/Health Policy**    1. In what ways did you observe how ethics (autonomy, moral distress, caregiver role strain, etc.) plays a role in the patient care you observed?    2. Identify ways nurses can be change agents and advocate for their patients/community in this clinical setting. |
| 1. **Identify how the Four Spheres of Care (AACN, 2019) were addressed while care was provided.** (If a sphere is not applicable, provide rationale and/or exploration of how this could be incorporated into care)    1. Wellness and Disease Prevention (includes physical and mental health needs).    2. Chronic Disease Management (includes managing chronic disease and preventing further complications).    3. Regenerative/Restorative Care (complex acute, trauma/critical care and acute exacerbations of chronic conditions).    4. Hospice/Palliative Care (includes end-of-life care and supportive care for complex diseases and/or rehabilitative care). |

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| **Clinical Experience Reflection** |
| 1. **Clinical Judgment:** Select one (1) patient in which strong clinical judgment was utilized. Based on the observations made:    1. What were the significant cues that led to the nurses making a priority decision?    2. What were the expected outcomes?    3. How were the actions implemented and evaluated?    4. What was the outcome of their actions? |

# DPCD – OBSERVATIONAL CLINICAL EXPERIENCE GRADING RUBRIC

* Criteria are met when the student’s application of knowledge demonstrates achievement of the listed outcomes.
* Clinical faculty will utilize the grading rubric to evaluate the submitted DPCD following submission and provide feedback to support the development of clinical judgment.
* If the student achieves anUnsatisfactory in any section of the DPCD, faculty should provide constructive feedback and recommendations. Utilizing their best judgment and ***Chamberlain Care®***, clinical faculty may allow students to edit and resubmit the DPCD (within 24 hours). If any section is Unsatisfactory on the second attempt, an Unsatisfactory score will be given on the Clinical Learning Evaluation and a CLC will be initiated.

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| Assignment Section /Required Criteria | Satisfactory | Unsatisfactory |
| **Clinical facility (description, population served, and role of the nurse):** Describe the type of facility/setting where you completed your observation (i.e., Acute care setting, Skilled Nursing Facility, Clinic, Public Health Facility), department, primary function, number of beds (if applicable), the population it primarily serves, and the role of the nurse. | Provides a detailed description of the facility/setting including function, primary population served, size, and the role of the nurse in this setting. | Gives a brief description of clinical facility but missing specific details regarding the role of the nurse. |
| **Connecting theory to practice:** Discuss how concepts and strategies you have learned in your current course(s) or throughout the program were connected to patient care activities observed. | Demonstrates a deep understanding of course concepts and interventions by directly connecting them to specific patient information observed or learned during clinical experience, and includes patient specific details (assessment findings, labs, meds, patient education, etc.) | Demonstrates room for increased information in the description of a patient care activity observed  and how it is connected to a concept learned in class. |
| **Communication, Compassionate Care,**  **Interprofessional Care:** Reflect on ways effective  or ineffective communication and compassionate care was observed and how this impacted the patient(s).   * Provide an example of how interprofessional care was utilized and the impact this had on patient outcomes. * Identify two (2) delegation tasks utilized/observed during your shift (or anticipated delegation opportunities) and whom they were delegated to. * Explain the five rights of delegation and if they were upheld. | Provides a thoughtful reflection on observed instances of effective or ineffective communication and compassionate care, discussing how these impacted patient outcomes. Gives a clear example of  interprofessional care, detailing its influence on patient results. Identifies two delegation tasks, specifying the team members involved, and explains how the five rights of delegation were applied (or if any were missed) in the delegation process. | Provides minimal reflection, or completely missing one of the required talking points:   * Effective and/or ineffective communication * Interprofessional Care and impact * 2 Delegation tasks and to whom * 5 rights of delegation |
| **Diversity/Equity/Inclusion (DEI)**   * Describe the actions and/or practices you utilized or observed that support DEI. * In what ways could there have been more support provided? | Describes observed actions and practices that effectively support DEI, highlighting their impact on patient care and team interactions. Provides thoughtful insights into potential improvements for DEI support identified during clinical. | Demonstrates a lack of understanding of DEI and the impact on patient care and/or missing the connections to actions and practices that support DEI. |

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| Assignment Section /Required Criteria | Satisfactory | Unsatisfactory |
| **Evidence-based practice (EBP):** Identify two (2) examples of evidence-based practice you observed during your clinical experience. Explain how each supports safe and effective nursing care. Utilize journals or other references to support the EBP identified (cite the references). | Demonstrates high-level critical thinking by identifying two evidence-based practices observed in the  clinical setting and thoughtfully analyzing how each enhances patient safety and care effectiveness.  Integrates credible references to validate the practices, showcasing a clear understanding of the underlying evidence and its application in nursing care. | Identifies two evidence-based practices observed in the clinical setting but provides limited analysis on how each supports patient safety and care effectiveness. References or citations may be missing, incorrect,  or lack relevance to the observed practices.  **Or**  Fails to identify two evidence-based practices observed.  **Or**  Missing References |
| **Social Determinants of Health:** Review the Social Determinants of Health Questionnaire-Full.   * Identify any concerns observed regarding economic stability, education access and quality, health   care access and quality, neighborhood and built environments, and social and community context   * Reflect on your findings and how this may impact the patient’s health. | Identifies key concerns related to economic  stability, education, healthcare access, neighborhood environment, and social context observed during the assessment. Provides a reflective analysis of how these social determinants may affect the patient’s health outcomes, demonstrating an understanding of their influence on overall well-being and access to care. | Observation of the concerns regarding SDOH lacks depth and details. The reflection on how these social determinants may impact the patient’s health is minimal, indicating a need for a more thorough understanding of their influence on health outcomes. |
| **Ethics/Health Policy**   * In what ways did you observe how ethics (autonomy, moral distress, caregiver role strain, etc.) plays a role in the patient care you observed? * Identify ways nurses can be change agents and advocate for their patients/community in this clinical setting. | Describes specific instances where ethical considerations, such as autonomy, moral distress,  or caregiver role strain, influenced patient care during the clinical experience. Clearly identifies ways in which nurses can act as change agents and advocates for their patients and community. | Provides limited examples of how ethics can influence patients and ways in which nurses can be change agents and advocates for their patients/communities. |
| **Identify how the Four Spheres of Care (AACN, 2019) were addressed while care was provided.** (If a sphere is not applicable, provide rationale and/or  exploration of how this could be incorporated into care)   * Wellness and Disease Prevention (includes physical and mental health needs). * Chronic Disease Management (includes managing chronic disease and preventing further complications). * Regenerative/Restorative Care (complex acute, trauma/critical care and acute exacerbations of chronic conditions). * Hospice/Palliative Care (includes end-of-life care and supportive care for complex diseases and/or rehabilitative care). | Clearly identifies how all 4 Spheres of Care were integrated into patient care, providing clear examples for each sphere addressed. Where a sphere was not applicable, offers thoughtful rationale and explores how it could be incorporated into future care plans, demonstrating a comprehensive understanding of holistic patient care. | Does not address all 4 Spheres of Care or demonstrates room for growth in connecting patient specific examples of how integrated into patient care. Does not include rationale if a sphere is not applicable to the patient’s care. |
| **Clinical Judgment:** Select one (1) patient cared for during your clinical day in which strong clinical judgment was utilized. Based on the observations made:   * What were the significant cues that led to the nurses making a priority decision? * What were the expected outcomes? * How were the actions implemented and evaluated? * What was the outcome of their actions? | Response exemplifies strong clinical judgment and clearly outlines the significant cues that prompted priority decisions by the nurse. Describes the expected outcomes associated with these decisions and details how actions were implemented and evaluated throughout the care process. Concludes with a summary of the outcomes resulting from the interventions. | Demonstrates room for enhancement in clinical judgment or does not address all 4 questions. |