

Clinical facilitator's Guide to Learning and Assessment on Clinical Placement

This guide has been produced to support clinical facilitators in enhancing learning for students during the process of assessing clinical practice. The 'student-centred process for assessing clinical practice' has been designed to amalgamate learning strategies and assessment practice to provide a foundation for students to develop self-directed and lifelong learning skills to take into the future as Registered Nurses. The following document is a hard copy version of an online module for students to undertake when enrolled in a clinical course. The online module will be embedded in to each clinical course site in Learning@griffith under the tab 'assessment'. If students are struggling with the process of assessment or utilising the learning strategies, please redirect them back to the online module for review. The document contains links to the relevant documents and videos to assist in the student's understanding. Of particular mention, videos have been produced to show examples of goal-setting, mid-placement and summative assessment interviews with Clinical Facilitators.

In 2020 we have produced a new goal-setting sheet as well as an amended ANSAT form- further information will be provided regarding the use of the ANSAT feedback component at the clinical facilitator workshop and a hard copy will also be available. The information within this learning module regarding goal setting should assist you to support students in this process.

If you have any questions, the Clinical Course Convenor should be able to assist you, however, if you have further queries or feedback, please don't hesitate to contact a member of the research team:

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Learning and Assessment on Clinical Practice

INTRODUCTION TO THE LEARNING ACTIVITY

The purpose of this learning activity is to take you, the nursing student, on a journey incorporating lifelong learning skills into your professional practice. This activity covers: an introduction to how the Nurse and Midwifery Board of Australia's (NMBA) Registered nurses standards for practice (RNSP) apply to practice and an overview of learning and assessment during clinical placement. Once you have completed this learning activity, you should be able to incorporate these skills into each of your clinical placements throughout your program and beyond.

Learning Outcomes

At the end of this module, you will be able to:

- Explain the links between assessment and learning related to clinical practice
- Apply strategies from the assessment process to assist with learning during clinical practice
- Demonstrate skills related to the assessment strategies that support learning in clinical placement

Introductory Video

Please watch the following video 'introduction to learning and assessment on clinical placement' that explains the importance of the *Student-centred process for assessing clinical practice*. It will assist you in getting the best outcomes from your clinical placement.

While you are watching, make some notes in the space below regarding any new ideas or areas you would like to review related to learning while on clinical placement. Your notes will be visible only to you and the teaching team. This activity will assist you to focus on specific areas of the upcoming modules.

Introduction to learning and assessment on clinical placement: <https://youtu.be/nYrOP429SxE>

New ideas or areas I want to review:

Module 1: UNDERSTANDING THE REGISTERED NURSE STANDARDS FOR PRACTICE

The assessment of clinical practice is a crucial component of this program to ensure safe and competent practice upon graduation. Each clinical course assesses your ability to perform required skills, with appropriate knowledge and attitudes, to determine if you demonstrate capability for practice equal with your year level of education. It is a requirement for educational providers of nursing programs, like Griffith University, to adequately prepare and assess future nursing professionals.

These assessments are informed by the NMBA RNSP to ensure that you are capable of providing holistic, safe clinical care. The NMBA RNSP are the core competency standards against which your performance is measured to obtain and then maintain your licence to practice as a Registered Nurse in Australia. The RNSP are available for review below:

<https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards/registered-nurse-standards-for-practice.aspx>

Understanding the RNSP

The RNSP describes Registered Nurse Practice as 'person-centred and evidence-based with preventative, curative, formative, supportive, restorative and palliative elements' (NMBA, 2016, p.2). To assist the development of these skills as a nursing student, an understanding of the RNSP is scaffolded throughout the program. It is important to understand the RNSP and how they relate to practice as **the assessment of clinical placement is based on the standards** with the use of the Australian Nursing Standards Assessment Tool (ANSAT).

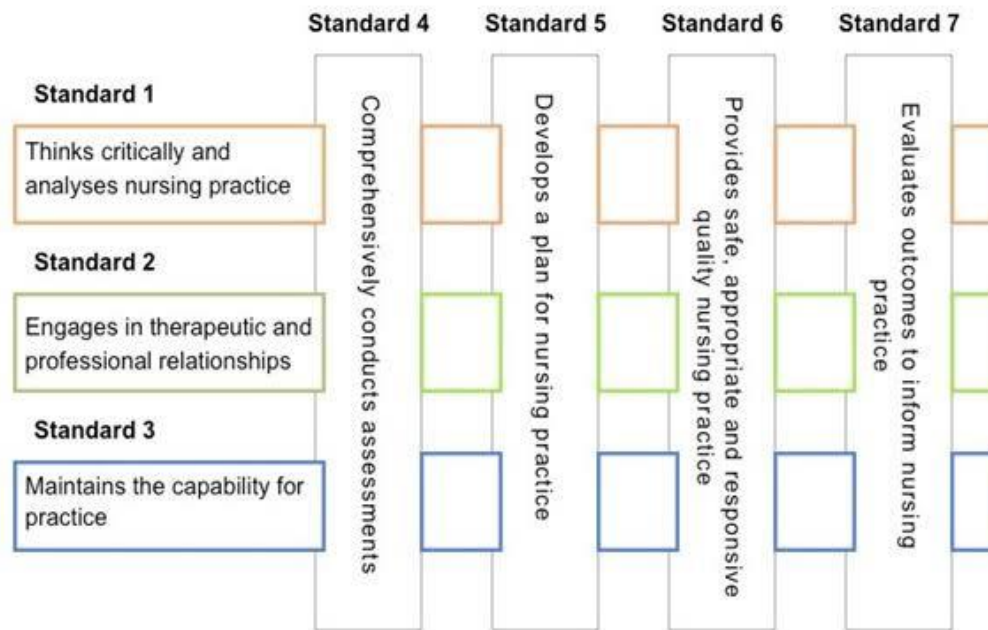
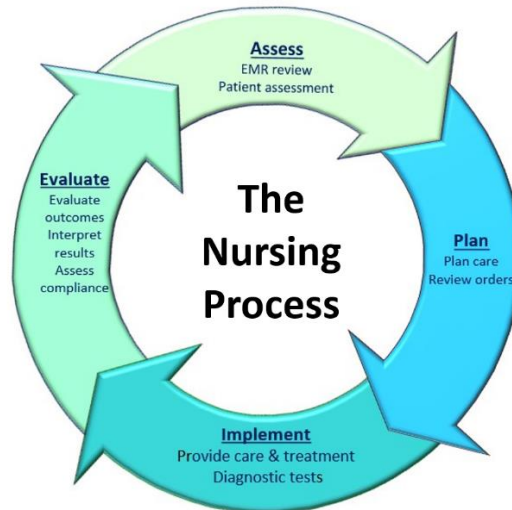


Figure 1: Registered nurses standards for practice

In Figure 1, it is illustrated how Standards 1 to 3 underlay Standards 4 to 7 to support practice. Standards 4 to 7 describe the nursing process components (assess, plan, implement, evaluate) which you have been introduced to within the program. Understanding how the nursing process applies to practice is an essential component of meeting the RNSP.

Button is clicked to reveal the following image:



Please watch this animated video, *The nursing process (clinical decision making) - a video graphic to help digital health teams (and more)* (9:10 min) <https://vimeo.com/301799630> which shows how the RN is following the nursing process, even in a seemingly simple task such as a patient shower.

While you are watching, consider *why* it is important for the Registered Nurse to use the nursing process during care.

In the space below, identify at least one reason for using the nursing process during care. Your answer (which must be succinct) will be visible to your classmates, but remain anonymous.

Answer garden activity

Behavioural Cues

To support understanding of the RNSP and how they apply to your learning and assessment through the ANSAT, a set of behavioural cues has been developed. The behavioural cues are self-explanatory statements that clearly describe acts and practices that indicate particular domains of professional nursing standards. The use of these behavioural cues in assessment is beneficial as they provide clear and transparent information to your buddy RN and/or CF who need to determine your level of performance and allows clear feedback describing specific routine behaviours. These behaviours are detailed in the following *Behavioural Cues ANSAT document*:

<https://docs.google.com/viewer?a=v&pid=sites&srcid=YW5zYXQuY29tLmF1fGFuc2F0X2F1c3xneDo3ZWRhOTQ4MDVjOTA3YzU>

Activity:

Which of the tasks below would allow you to demonstrate that you are meeting RNSP1- tick appropriate boxes

1. THINKS CRITICALLY AND ANALYSES NURSING PRACTICE

- Follows policies and procedures of the facility/organisation (e.g. workplace health and safety / infection control policies)
- Maintains patient/client confidentiality
- Uses assessment data and best available evidence to construct a plan
- Plans professional development based on reflection of own practice
- Arrives fit to work
- Arrives punctually and leaves at agreed time

A: RNSP1 Compliance

Tasks that would allow you to demonstrate that you are thinking critically and analysing nursing practice through compliance with legislation and local policy are listed below:

- Follows policies and procedures of the facility/organisation (e.g. workplace health and safety / infection control policies)
- Maintains patient/client confidentiality
- Arrives fit to work
- Arrives punctually and leaves at agreed time
- Calls appropriate personnel to report intended absence
- Wears an identification badge and identifies self
- Observes uniform/dress code
- Maintains appropriate professional boundaries with patients/clients and carers

Extract from RNSP 1 in [Behavioural Cues ANSAT](#).

Behavioural Cues

The Behavioural Cues ANSAT document was originally designed to assist assessors to identify appropriate behaviours in students as they applied to each standard, but it is also very useful for you to better understand how you can meet the standards.

By conducting a self-assessment using the behavioural cues, you are able to direct your own learning and be more confident that you meet the RNSP. This self-assessment is vital to assist you in developing your learning goals and is an important component of registered nurse practice. Having a clear understanding of how you can meet the RNSP will also assist you to set goals for your clinical placements as part of assessment of clinical practice (next section).

Activity

One task you would likely undertake each day on a nursing shift is to take a patient's blood pressure as part of an assessment. Consider how you would meet each standard when taking a blood pressure. Refer to the behaviours detailed in the [Behavioural Cues ANSAT](#) to assist you.

Standard 1 Thinks critically and analyses nursing practice:

Standard 2 Engages in therapeutic and professional relationships:

Standard 3 Maintains capability for practice:

Standard 4 Comprehensively conducts assessments:

Standard 5 Develops a plan for nursing practice:

Standard 6 Provides safe, appropriate and responsive quality nursing practice:

Standard 7 Evaluates outcomes to inform nursing practice:

Below are some examples of how the RNSP can be applied to measuring blood pressure:

Standard 1 Thinks critically and analyses nursing practice:

I would: follow infection control policy and wash hands before beginning BP measurement; identify myself to patient and discuss BP measurement with patient (procedure and findings); document findings legibly and accurately on the patient ADDS chart; consider findings in relation to patient's health status, previous findings, ADDS score.

Standard 2 Engages in therapeutic and professional relationships:

I would: greet the patient and their family upon entering the room; listen to/observe the patient for any verbal or non-verbal signs of discomfort; ask the patient for consent to measure BP; be respectful of the patient's right to privacy and confidentiality (ensuring findings discussed sensitively with patient); communicate respectfully with buddy RN if any concerns/to provide an update.

Standard 3 Maintains capability for practice:

I would: review procedure for measuring BP using policy document/course resources; consider findings in relation to my knowledge of normal ranges and the patient's health status; seek additional support from buddy RN if unsure of procedure/findings; continue to practice BP measurement to ensure capability.

Standard 4 Comprehensively conducts assessments:

I would: Conduct BP measurement in acceptable time, ensuring patient comfort (i.e. BP cuff not inflated for long duration/communicating with patient); compare findings to normal ranges and consider patient's health status/medication regime/previous findings/ADDS score; ask patient about any symptoms related to low/high blood pressure (if findings abnormal); consider intervention if BP outside of normal range (i.e. if very low, assist patient to lie down, repeat measurement); escalate any concerns around BP to buddy RN.

Standard 5 Develops a plan for nursing practice:

I would: use BP findings to develop a plan for care (i.e. continue with current plan or increase frequency of obs); document findings on care plan if applicable; consider timing of obs and whether any adjustments needed to when BP measured (i.e. after patient has been active, when patient lying flat, if patient sleeping, when medications administered etc.); decide if need to escalate any concerns with abnormal findings.

Standard 6 Provides safe, appropriate and responsive quality nursing practice:

I would: ensure BP measurement taken safely with patient sitting at bedside/in bed or chair; ensure BP measured on limb free of IV access/not contraindicated (i.e. mastectomy); review abnormal findings in relation to patient's health status/medication regime/previous findings/ADDS score; consider interventions if patient symptomatic of abnormal BP; escalate findings if needed.

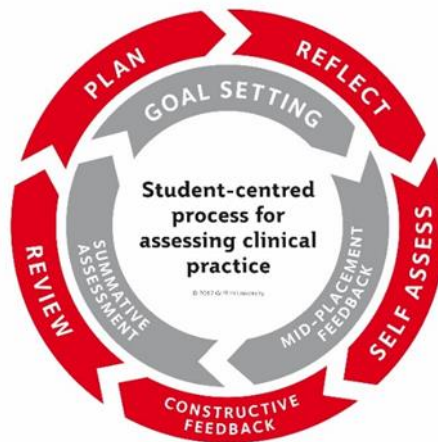
Standard 7 Evaluates outcomes to inform nursing practice:

I would: communicate findings to patient; reassess BP again at appropriate timeframe; compare past/future BP readings to current reading; use reading to inform future care.

As you can see, a number of the behavioural cues can apply to each standard!

ASSESSMENT OF CLINICAL PRACTICE

Within the Bachelor of Nursing program at Griffith University, the Student-centred process for assessing clinical practice is used:



This process aims to link both learning and assessment within clinical placement and supports the development of self-directed and lifelong learning skills for nursing students.

The grey circle in the middle incorporates the 3 steps that are utilised in assessment: goal setting, mid-placement feedback and then the summative assessment.

The red circle then describes the learning strategies that will assist the student to successfully pass through each step of the assessment.

Alignment

The learning strategies align with the assessment practices as follows:

Planning is informed by the previous placement's Summative Assessment and informs Goal Setting.

Reflecting on both informs Goal Setting and Mid-placement Feedback and Mid-placement Feedback provides more input for reflection.

Self Assessment is continuous and is formalised at Mid-placement Feedback and enables you to ask questions of clarification during the feedback session.

Constructive Feedback supports both Mid-placement Feedback and the Summative Assessment

Reviewing your practice and your experience supports the Summative Assessment.

Review activity to align strategies with assessment practices

STEP ONE: GOAL SETTING

Self-directed learning is considered an essential nursing skill to allow the nurse to adjust and cope with the ever-changing clinical environment. Goal setting and the review of goals are essential components of self-directed learning and the development of lifelong learning skills (Levett-Jones, 2005). Goal setting demonstrates your ability to initiate and direct learning and should be guided by

- the learning outcomes for your particular clinical course
- your individual learning goals based on your self-assessment
- feedback from theoretical courses and reflecting on previous clinical placements including clinical laboratory sessions.

It is your responsibility to present to clinical placement with well thought out goals documented on the Goal Setting Sheet (see below). Failure to do so will indicate that you are not adequately prepared, which is not in keeping with the NMBA standards of practice (RNSP1) and therefore development around this practice may be required.

On the first day of placement you will discuss your goals with your Clinical Facilitator (CF). After discussion with your CF, your goals may be refined or added to, based around your particular clinical area, or individual needs. Your goals will then be reviewed at the mid-placement and summative assessment times to check if they are being met. Further modification may be necessary at this time.

Link to Goal setting sheet

Setting SMART Goals

So how do you set goals? A learning goal clearly describes what you want to learn and achieve. A SMART learning goal is:

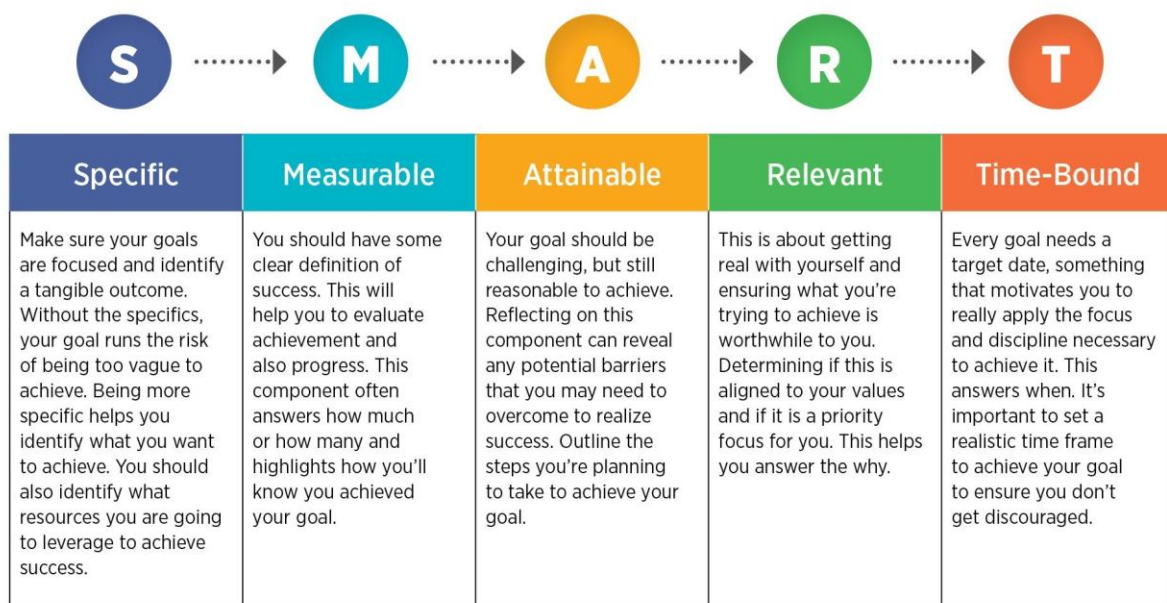


Figure 2: SMART Goals table. Think Marketing website: <https://thinkmarketingmagazine.com/how-to-create-smart-goals/>

A SMART goal makes it easier to plan relevant learning activities and make the most of opportunistic learning as your clinical facilitator and preceptors know what it is you wish to achieve.

The first step to effective goal setting is to reflect on your current practice and knowledge using the available resources – previous clinical placement feedback, clinical laboratory feedback, personal interests, areas that require development etc. This will help you decide what your interests and needs are.

Activity:

In preparation for your next placement, consider the following (You may wish to use the Behavioural Cues ANSAT document to help you think about your goals.):

What have I been doing well in clinical placement or clinical laboratories?

What do I think I need to work on?

What feedback have I received suggesting I work on certain areas?

What new skills have I learnt that I want to improve?

What particular skills might be important to develop in this placement?

These responses will help you to formulate your goals for your next placement

Once you have undertaken this REVIEW, it is now time to PLAN your goals for the placement. The Goal setting sheet will assist you with identifying the 'SMART' components:

Goal 1:

Area I want to develop:

(attainable, relevant)

I will achieve this by:

(specific)

I will complete this by:

(time)

I will address the following Standards for Practice when achieving this goal :

(measurable)(explain how you will meet at least three standards within each goal- all seven standards need to be met across the three goals)

Standard 1 Thinks critically and analyses nursing practice:

Standard 2 Engages in therapeutic and professional relationships:

Standard 3 Maintains capability for practice:

Standard 4 Comprehensively conducts assessments:

Standard 5 Develops a plan for nursing practice:

Standard 6 Provides safe, appropriate and responsive quality nursing practice:

Standard 7 Evaluates outcomes to inform nursing practice:

You will need to develop 3 goals for placement. Examples of completed goals are:

Example of 1st year goal setting:

Goal 1:

Area I want to develop: *assessment of patient's pain*
(attainable, relevant)

I will achieve this by: *looking at the WHO pain ladder and checking my understanding of this; discussing with RN buddy; review common pain medications (analgesia) used in this ward; witness a pain assessment by RN buddy;; assess 3 patients pain while I am in this placement*
(specific)

I will complete this by: *end of placement*
(time)

I will address the following Standards for Practice when achieving this goal :
(measurable)(explain how you will meet each standard within this goal)

Standard 1 Thinks critically and analyses nursing practice:

Look at the intranet for policy and procedure for pain assessment in this clinical area and discuss with my buddy RN

Standard 2 Engages in therapeutic and professional relationships:

Discuss plan of assessment with buddy RN and communicate with patient

Standard 3 Maintains capability for practice:

Discuss success of pain assessment with buddy RN and reflect on my experience

Standard 4 Comprehensively conducts assessments:

Measure objective and subjective data, utilises PQRSTU and chest pain protocol policy of institution if applicable

Standard 5 Develops a plan for nursing practice:

Care planned and provided is appropriate and holistic. Not just medication but adjunct therapies as well (positioning, massage, hot/cold pack, deep breathing, communication)

Standard 6 Provides safe, appropriate and responsive quality nursing practice:

Assess pain as guided by policy and procedure; patient reports that pain has reduced; good communication with patient demonstrated; pain assessment is documented accurately

Standard 7 Evaluates outcomes to inform nursing practice:

Ask patient how they are feeling at 20 mins and 60 mins following assessment and intervention.

Example of 2nd year goal setting

Goal 1:

Area I want to develop: *administration of drugs intravenously*

(attainable, relevant)

I will achieve this by: *revise current understanding of background information, techniques and risks through reviewing notes, videos, consulting peers/RN/CF in order to prepare myself; be familiar with common IV medications administered in my area; I will actively seek opportunities to administer IV drugs as they become available*

(specific)

I will complete this by: *end of placement*

(time)

I will address the following Standards for Practice when achieving this goal :

(measurable)

Standard 1 Thinks critically and analyses nursing practice: *Be aware of local policies and ensure the safe practice of IV drug administration*

Standard 2 Engages in therapeutic and professional relationships: *discuss this procedure with both the supervising RN and ensure a therapeutic relationship has been developed with the patient*

Standard 3 Maintains capability for practice: *access the IV drug handbook prior to commencing the procedure/reflects on the experience with the supervising RN to identify the strengths and weaknesses of my performance.*

Standard 4 Comprehensively conducts assessments: *Assess the IV site before and after the procedure*

Standard 5 Develops a plan for nursing practice: *consider the patient's schedule for the day and the administration time. Consider the need for assessment following the drug administration*

Standard 6 Provides safe, appropriate and responsive quality nursing practice: *Administer drug within recognised policy guidelines, consider the 6 rights of administration.*

Standard 7 Evaluates outcomes to inform nursing practice: *Evaluates the outcome for the patients- ask the patient how they are feeling, did the drug administration cause any discomfort, etc.*

Please watch the following video 'Goal setting interview' which will allow you to view an example of an interaction between the Student and the Clinical Facilitator (CF). While you are watching consider how you would answer the questions posed by the CF.

Goals setting 1st year

<https://youtu.be/DExgT8D3mEc>

Goal setting 2nd year

<https://youtu.be/FpXmjy623kg>

Goal setting 3rd year

https://youtu.be/qWYHyhG1m_s

Goal setting Any year

<https://youtu.be/FtU-wYZ9FwM>

Learning strategy: Reflect

REFLECTIVE PRACTICE

Developing your capacity to REFLECT in and on practice is one of the most important dimensions of successful clinical practice and the development of continuous professional and personal growth (Levett-Jones et al., 2018). Reflection is a key component of effective learning (Miraglia & Asselin, 2015). It allows people to process their experience, explore their understanding of what they are doing, why they are doing it, and what impact it has on themselves and their practice, as well as the impact on others after it has occurred (Boud 1999; Bulman & Shutz, 2013; Usher & Holmes, 2017).

The skill of reflection is pivotal to the development of your clinical knowledge and understanding. It allows you to consider your personal and professional skills, and to identify needs for ongoing development. Reflection is about exploration, questioning, learning and growing through, and as a consequence of, experiences (Redmond, 2016). With thoughtful considerations, one challenges one's initial thinking and the feelings embedded in a meaningful experience.

Reflective learning

Reflection is revisiting an experience to make inferences, and evaluations. It challenges our presuppositions and understanding of the event, so that the experience transforms our meaning, adds to our understanding and guides our future actions (Bulman & Shutz, 2013; Usher & Holmes, 2017). This is vital in nursing as it improves patient outcomes and develops the nurse's clinical practice in an ever changing environment (Thomas & Revell, 2016). Furthermore, it is mandated by our governing body, the Australian Health Practitioners Registration Board.

Reflective learning allows the learner 'to determine for themselves whether or not they have a sufficient grasp of the concepts, principles or skills, such that they can bring all of this to bear on new situations' (Stefani, et al, 2000, p163). In other words the purpose of reflective learning is to provide opportunities for you to direct your own learning and reflect on the value of that learning to your personal and professional development. Reflection does not stop once you graduate from this program, it is an on-going process and will require continuous development throughout your career.

Reflective Writing

Reflective writing offers an opportunity for the health professional to reflect on their practice, explore relationships, and connect new meanings to past experiences. Reflective journaling is widely used in the education of all health care professionals, nurses, doctors and allied health staff, as a means of developing reflective practitioners who can envision new ways of thinking and practicing (Peeters & Sexton, 2019; Zori, 2016). Other methods include: brainstorming and freeform writing; creative expression through art, music or dance; and debriefing. In this program you will be using debriefing, brainstorming and reflective journaling to develop your reflective learning skills. If you are not already aware of this, we all actively participate in reflection. With most things we do in our day to day life, we inevitably, although often fleetingly, think back and wonder how or why we did that particular action. Reflection is self-awareness. It is realising you are not perfect, and wanting to develop and improve as a person and as a professional.

Activity:

Activity: Let's practice some reflection.

Think back to what motivated you to enrol in your current program. Why did you want to become this professional? Now that you have more knowledge, do you feel the same?

(Enter your response in the box below. Your notes will be visible only to you and your teaching team.)

Gibbs Reflective Cycle

There are many theories and models of reflective learning which are based on the premise that students need to develop critical thinking skills in order to reflect on learning and then modify performance based on new insights (Dean & Kenworthy 2000). Gibbs (1998) developed the reflective cycle in order to provide structure for reflecting on an experience or situation. It is built on Kolb's experiential learning theory and proposes that theory and practice enrich each other in a never ending circle (Finlay, 2008). Have a look at Gibbs' (1988) reflective cycle. It explains each element of the cycle, and poses a question to get you thinking. It is a great model to get you started and helps with the basic structure of reflection.

Please watch this short video: Gibb's reflective cycle.

<https://www.youtube.com/watch?v=5WfnHGq6ztg>

Apply Gibbs Reflective cycle

Activity: Recall a situation that resulted in a poor outcome. It doesn't have to be nursing related.

In the space below, describe what happened and respond to the following questions Your response will be visible only to you and your teaching team.

What were you thinking and feeling? (the good, bad and ugly!)

Have you reviewed your actions in the situation? What you did well and what you did not do well?

What else was going on around that situation?

What would you do differently next time?

What have you learnt from this experience?

If you encountered this situation again, what would you do?

If you are having difficulty linking each step of the Gibb's reflective cycle with a nursing example, take a look at the following video which illustrates an example of applying the Gibb's reflective cycle to a patient situation.

<https://www.youtube.com/watch?v=i6V1uyeGnu8>

Learning Strategy: Self-Assess

Self-assessment

To prepare for your mid-placement feedback interview, you will perform a formal SELF-ASSESSMENT, including reviewing your goals, by using the assessment tool and rating your performance. It is vital as a health practitioner and learner that you reflect honestly on your own performance.

Your self-evaluation will be discussed and compared with the clinical facilitator's assessment. You will need to reflect on differences between your self-assessment and your clinical facilitator's assessment. Document examples of your performance to justify your self-assessment. This will improve the quality of the discussions.

Reflective practice leads to self-assessment. How have I done? How can I improve?

The Behavioural Cues ANSAT is very useful for you to measure your progress against the standards. By conducting a self-assessment using the behavioural cues, you can direct your own learning and be more confident that you meet the RNSP. This self-assessment is vital to assist you in measuring against your learning goals. Having a clear understanding of how you can meet the RNSP will also assist you to measure your achievement of your goals for clinical placements as part of assessment of clinical practice.

Activity – drop down box activity

Ask yourself the following questions about your ability to think critically:

- Are you open to new or different viewpoints?
- Are you able to identify and challenge assumptions?
- Are you able to express your ideas in an organised and logical manner?
- Do you look for evidence to support your ideas and views?
- Can you separate relevant from irrelevant information?
- Do you spot inconsistencies in reasoning and arguments?
- Do you ask yourself "What am I taking for granted here?"
- Do you systematically consider the problem at hand, what is known, what is yet to know, and the implications?
- Do you consider alternative solutions?

WRITTEN REFLECTION ON CLINICAL PLACEMENT

Self-assessment is not just ticking a list. Within the assessment of clinical practice, you are asked to complete two written reflections, one at the mid-placement feedback and one at the end of the placement. This task should be a true reflection and not just a list of the skills you have undertaken on the placement. It should reflect your learning growth in the areas of skills attitudes and knowledge. Example are shown below. The written reflection is an important component of your learning on placement, therefore it is mandatory. You may be asked to repeat your written reflection if it is not satisfactory.

Example of a student's reflections:

Mid placement reflection

I have reached the half-way point of my mental health placement in the Grevillea wing (older persons rehabilitation) at the Princess Alexandra Hospital. I feel that as each day has passed I have began to adapt to the routine tasks for the shift, orientated myself to the ward and become familiar with some of the patients which has helped to slowly increase my confidence. I have so far found the experience in mental health interesting, although challenging at times to break away the usual medical focus rather than the mental status of a patient as I have never experienced mental health before. I have been working on engaging with patients and building a rapport with them, which in turn has allowed me to gain more insight in the patient's thought process and form trust and reliability for them to open up about their concerns and how they are feeling. I have been learning about how to educate a patient in a state of psychosis on managing their auditory hallucinations by suggesting the patient acknowledges the voices rather than ignore them. I have been developing my understanding of the questions I can ask a patient in relation to assessing their mental health status and have been documenting in progress notes accordingly. I have researched the procedure for ECT in preparation to observe a patient receiving the ECT. I am aware that I need to continue to develop my interpersonal skills and conduct Mental state examinations (MSE) daily to retrieve valuable information about a patient's mental status to provide quality care. I plan to continue researching unfamiliar medications and health conditions to build on my critical thinking skills.

Summative reflection

I have now completed my mental health placement in the Grevillea ward (older persons rehabilitation) at the PA hospital. It was a valuable experience to learn new skills, apply some of my current skills and develop my confidence by working in the mental health setting with patients who have differing mental health disorders and presentations. I have developed my communication skills which has helped to build a rapport with patients and better understand their mental status, as well as learned how to help a patient with psychosis to manage their condition. I recognise it is essential to research and study and will continue to do this to ensure I am educated about each patient and their individual needs and can develop my understanding of mental health. The communication skills I have learnt and the experience I have gained during this placement will be very useful for upcoming placements and my future career as a registered nurse.

Assessment Strategy:

The mid-placement feedback interview is part of a formal process to discuss the formative assessment.

During the mid-way feedback interview, any deficits in learning and achievement can be discussed and new goals set and readjusted to support the attainment of the standards. The academic staff member (Course Convenor) may also be consulted in this instance.

To enable you to engage in the mid-placement feedback interview process most effectively, you must develop the strategies of reflection, self-assessment and utilising constructive feedback.

Be Prepared for your interview.

1. Review your goals.
2. Use the ANSAT assessment tool to rate your performance.
3. Collect examples of your performance to justify your self-rating.
4. Bring a hard copy of your self-evaluation to the interview.

Mid-placement feedback Interview-Application

Structured assessment using the ANSAT is used to evaluate your progress to date and support ongoing development for the remainder of the placement. Your goals are to be reviewed at this time and should be used to document ongoing learning and strategies.

Once you receive mid-placement feedback, you are expected to apply this information to improve future performance. Whilst formative assessment is designed to give judgment about your current performance, the most valuable aspect is the addition of feedback that will guide your future performance (Sadler, 1989). Your learning opportunities are wasted if you do not receive or act on your feedback.

Mid-placement feedback interview - video example

Please watch the video Mid-placement feedback (4:52) which shows an example of a collaborative approach to the assessment at mid-placement.

While you are watching, consider

- How would you approach your self- assessment – students tend to be quite harsh on themselves with only a few being generous in considering their own abilities and achievements.
- How would you respond to the Clinical Facilitator, if they had given an assessment below how you thought you were doing?

Mid placement feedback video

<https://youtu.be/GOsHU-bHIUI>

Reflective Questioning – scaling

How can reflection make me a ‘better’ nurse? Making the connection between what it is and thinking about its value to you personally and professionally is an important link to make and will be so valuable throughout your career. Like critical thinking, reflective questioning can be uncomfortable. Reflective questioning is a technique where a person, in the case of clinical placements often the clinical facilitator, asks questions to provide opportunities for you to explore your knowledge, skills, experiences, beliefs and values (Lee & Barnett, 1994).

Your clinical facilitator or allocated registered nurse may ask you different types of questions to get you thinking reflectively. These questions will become more complex as you progress through the years of the programme. Initially they may focus their questions on your knowledge. Then they may start to ask questions about your comprehension related to your clinical area. Towards the middle of your placement they will also be focusing questions around application of your knowledge. Here your buddy/ CF may start to ask analytical type reflective questions.

Click each button for an example of the types of questions you will be asked as your ability increases.

Knowledge: “How should you assess pain?”

Comprehension: “Why is it important to take blood glucose levels?”

Application: “How would you care for this lady in regards to her activities of daily living?”

Analytical: “What is the rationale for withholding this analgesia at this time?”

Reflective Questioning – End of placement

By the end of your placement you may be asked to plan an episode of care for a particular patient. This is an example of a synthesis type of reflective questioning. Finally, evaluative type reflective questions may see your registered nurse ask you to consider the most important aspects of caring for a particular patient. These types of questioning help you to think critically about what you are doing. It moves you away from specific task knowledge and moves you towards bridging the theory practice gap and developing you professionally.

Reflective questioning – emotions

So when your clinical facilitator or registered nurse asks you questions about your patient and to think deeper. It is not about them trying to intimidate you or catch you out, it is about them trying to get you to think critically on your practice and learn.

Thinking critically and reflectively can make people feel uncomfortable and insecure however it is important to remember that openness to new ways of thinking is necessary in becoming a reflective practitioner.

Learning Strategy: Utilising constructive feedback

Feedback during clinical practice placements is an important and widely used method in nursing to support learning (Calleja et al. 2016, Glover, 2000, Wells & McLoughlin, 2014). Feedback is information provided to you to alter the gap between your current performance and the ideal. It tells you about what happened; how well or otherwise you responded and guidance as to how your performance can be improved for future practice. It is essential in order to assist you to learn effectively and to meet professional standards.

Receiving and seeking feedback is recognised as a vital component of self-directed learning as you strive to attain learning outcomes and improve performance (Nicol & Macfarlane-Dick, 2006). Therefore, the assessment of the standards of practice needs to be a participatory and collaborative process between the student, the buddy RN/preceptor, clinical facilitator and academic staff. This is done through a cyclic process involving three key components: goal setting; mid-way feedback; and summative feedback.

Receiving Feedback

Sometimes feedback is hard to hear. Like when we self-reflect, hearing feedback can make us feel uncomfortable and raise doubts. Remember the aim for feedback is for you to learn and grow as a professional rather than criticise. Below are some tips on receiving feedback which might assist you in your clinical practice, feedback interviews and throughout your professional career.

Top Tips for Receiving Feedback

- Listen to the feedback rather than prepare a response or defence
- Ask for the feedback to be repeated if you did not hear it or understand it
- Assume it is constructive until proven otherwise
- Pause and think before responding
- Ask for clarification and examples if the feedback is unclear or unsupported
- Accept it positively for consideration rather than dismissively for self-protection
- (remember discomfort = learning)**
- Ask for suggestions of ways to improve your practice
- Respect and thank the person for providing you with feedback

(Based on McKimm, 2009)

Activity:

Q: Receiving Constructive Feedback

What are some good ways to receive constructive feedback? (Select all that apply)

- Take notes
- Say unkind things about your CF, or accuse them of bullying
- Ask for suggestions for improvement
- Upend the table and storm out
- Ask for clarification and examples if you aren't clear
- Hope you can look up the bits that aren't clear later on the internet
- Respond to every statement immediately

Activity:

Q: Utilising Constructive Feedback

What are some good ways to utilise constructive feedback? (Select all that apply)

- Role play with a friend until you feel comfortable with the new behaviour
- Reflect on new experience with the areas for improvement. Are you improving? What evidence makes you think so?
- Say unkind things about your CF, or accuse them of bullying
- Reflect on the interview and document it but do not change your behaviour
- Try the suggested improvements at your earliest opportunity
- Continue as you were
- Keep trying until you become comfortable with the desired behaviours
- Read more (research) about your problem areas to improve your knowledge or learn better strategies

THE SUMMATIVE ASSESSMENT

The summative interview involves a summary of your experiences and discussion of the accumulated feedback.

You will need to self-evaluate and provide examples of your performance. The summative interview is linked to your formative or mid-placement assessment and feedback, for the greatest learning gains to direct future learning goals.

Formal feedback will be supplied after the collaborative discussion so that you can formulate goals for future clinical experiences to start the next phase of the learning cycle. Whilst it brings one clinical learning experience to an end, it will be the starting point for your next clinical practice goal setting interview, so take notes so that you're prepared!

An outcome (mark or grade) for the clinical placement will be awarded.

Summative feedback

https://youtu.be/TJNrhiUIC_E

Activity:

Q: How to prepare for your summative assessment?

Please select the actions you should take prior to attending your summative assessment. (Select all that apply)

- Send flowers to your clinical facilitator
- Use the behavioural cues document for ideas of things you have done
- Review and self-assess your performance against the ANSAT tool
- Print your documentation to aid the discussion
- Review your mid-placement feedback
- Collect examples of your performance against each standard
- Reflect on your performance
- List every task you engaged in whilst on placement

Activity

Q: What should you do after your summative assessment?

Please select the actions you should take after attending your summative assessment. (Select all that apply)

- Go to the unibar and celebrate!
- Keep your learning goals visible so that you can focus on any related theory in future courses
- Keep your notes handy for future clinical placements and assessment
- Review your feedback
- Reflect on your performance in the interview - how could you have behaved differently?
- Reread your notes - write anything you failed to write during the interview

Summary

In this lesson, you have been introduced to the Nursing and Midwifery Board of Australia's (NMBA) registered nurse standards for practice (RNSP); the student-centred process for assessment of clinical practice; and the learning strategies of plan, reflect, self-assess and utilise feedback. These lifelong learning skills will assist you in preparing for your professional practice.

Please reflect on whether you have achieved the lesson learning objectives. Are you able to:

- Explain the links between assessment and learning related to clinical practice
- Apply strategies from the assessment process to assist with learning during clinical practice
- Demonstrate skills related to the assessment strategies that support learning in clinical placement

Write a reflection on your ability to meet the learning outcomes of this lesson in the box below then click NEXT.

To access the references for the lesson or a summary of your text input responses, click the buttons below.

After completing this lesson (i.e. after you see a popup announcing you have finished), return to the course site and complete the online quiz in the Clinical Placement folder to ensure you are ready for clinical practice. For now, click next to get to the next screen or My Responses if you wish to collect your responses to the text input questions in this lesson.