

Guided Reflective Writing Rubric Validation – A Tool for Nursing Assessment of Student Clinical Judgment

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Abstract:

Nurse educators have been challenged to not guide clinical judgment development in nursing students but determine students' level of clinical judgment. As clinical judgment is not easily assessed, nurse educators are seeking reliable measurements of clinical judgment. The researchers of this project sought to determine the reliability and validity of the Guided Reflective Writing rubric as developed by Smith¹. Students in the Fort Hays State University Nursing program routinely use the Guided Reflective Writing assignment and rubric post-clinical for journaling. Inter-rater reliability was completed on second semester and fourth semester first and last journals. Moderate reliability was established for the second semester students whereas strong reliability was established for the fourth semester students. Content validity was not established with the comparison of the Guided Reflective Writing rubric and the Lasater Clinical Judgment rubric. The results indicate that the Guided Reflective Writing rubric can be used to assess clinical judgment at all levels of nursing students. Although content validity was not established, one can conclude that clinical judgment can be assessed in multiple modalities.

Keywords: *Reflective writing, Clinical judgment, Nursing students, Reflective writing, Rubric*

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I. Introduction:

As strong clinical judgment has become the standard for nursing student success, educators continually strive to determine the best ways to teach and measure clinical judgment. Clinical judgment is routinely seen as a framework for nursing education with guidelines for students. The National Council State Board of Nursing (NCSBN) Clinical Judgment Measurement Model and Tanner's Evidence based Model of Clinical Judgment in Nursing both emphasize patient engagement and quick thinking. Teaching clinical judgment skills is an essential piece of nursing education. Assessment of clinical judgment has been a challenge for nurse educators. Clinical judgment measurement is frequently seen in simulation as assessed by the Lasater Clinical Judgment rubric. The NCSBN has changed the formatting of the NCLEX questions to include Next Generation Nurses questions that focus more on thinking at the bedside. Smith¹ developed a Guided Reflective Writing assignment and rubric to encourage clinical judgment development post-clinical. As the Guided Reflective Writing assignment and rubric are newly developed tools, validity and reliability have not been established. The purpose of this study focused on validation of the Guided Reflective Writing Rubric using content validation and inter-rater reliability. With validation of the Guided Reflective Writing Rubric, another teaching strategy is available for nurse educators for clinical judgment application and measurement.

II. Background:

Clinical Judgment

Now a classic nursing education model, Tanner's Clinical Judgment Model is widely used to frame students' thinking². The Clinical Judgment Model defines clinical judgment as an "interpretation or conclusion about a patient's needs, concerns, or health problems, and/or the decision to take action (or not), use or modify standard approaches, or improvise new ones as deemed appropriate by the patient's response" (Tanner, 2006, p. 204). This clinical judgment model emphasizes the role of the nurse in relation to their patient. As a model for debriefing post simulation, the Clinical Judgment Model emphasizes engagement with patients.

The overall process of the Clinical Judgment Model includes noticing, interpreting, responding, and reflecting. These aspects are relevant for nursing situations that require quick thinking and reasoning in rapidly changing situations. Lasater (2007) created a Clinical Judgment Rubric, based on Tanner's Clinical Judgment

Model, to effectively assess and communicate students' simulation performance. The four main aspects of the Clinical Judgment Model are further described in the rubric to provide more detail. Effective noticing involves focused observation, recognizing deviations from expected patterns, and information seeking. Interpreting involves prioritizing data and making sense of the data. Responding involves calm, confident manner, clear communication, well-planned intervention/flexibility, and being skilful. Finally, reflecting involves evaluation/self-analysis and commitment to improvement³.

The Lasater Clinical Judgment Rubric has been used primarily for faculty led debriefing post-simulation. However, Nielsen et al. (2007) adapted the Lasater rubric for journaling post-clinical activity. The adaptation consisted of a guide for reflection with questions related to the four aspects of the Tanner Clinical Judgment Model. The reflection guide questions provide ways for students to think deeply about their clinical experiences.

Clinical Judgment Reflective Writing Assignment & Rubric

Using both the Nielsen Guide for Reflection³ and the Lasater Clinical Judgment Rubric² as guides, Smith¹ developed a Guided Reflective Writing assignment and rubric to guide and assess students' reflective writing post-clinical activity. Smith's qualitative study focused on student and faculty perceptions of using the Guided Reflective Writing assignment and rubric. Beginning level nursing students emphasized that the assignment helped organize basic nursing care. Whereas final level nursing students felt the assignment provided a sense of wholeness regarding patient care. Faculty supported the assignment with the theme of encourages deep thinking. Overall, Smith's study provided beginning support for the Guided Reflective Writing assignment and rubric as a quality instrument for clinical judgment development in nursing students¹. As the Guided Reflective Writing assignment and rubric have been used routinely within the investigators' nursing curriculum since Smith's initial qualitative study, the investigators strived to seek validation of the instrument through content validity and inter-rater reliability. Further validation of the instrument prompted the purpose of this study.

III. Materials And Methods:

Students in a midwestern small university completed guided reflective writing journals after each nursing clinical experience. Students in the second semester and fourth semester were chosen for this study as they complete both reflective writing and simulation exercises as part of the normal curriculum. 23 second semester students completed journals after their medical/surgical experiences. Students completed nine medical/surgical journals throughout the semester. 25 fourth semester students completed reflective journals after each capstone clinical experience. The rubrics' assessment does not influence the students' grades for the simulation or reflective writing assignments. The students in the second and fourth semester were also evaluated during simulation using the Lasater clinical judgment rubric.

Students were asked to participate in class and signed consents to allow the researchers to evaluate their writing as well as performance during simulation. No additional coursework was required by participants. The journals and simulation were part of the planned course assignments. The research rating of exemplary, accomplish, developing and beginning did not affect the grade of the student. Assignments were graded on a rubric of completeness. Performance during simulation did not impact the grade given to the student. Participation was voluntary. Approval was granted through the University Institutional Research Board.

The journals were de-identified and each journal was coded so that a comparison could be done from the first journal to the last journal. All journals were assessed by both a second semester faculty and a fourth semester faculty. Both faculty raters were familiar with using the Clinical Judgment Reflective Writing rubric. Each corresponding faculty assessed the student simulation performance using the Lasater Clinical Judgment Rubric. Each faculty were familiar with use of the Lasater Clinical Judgment Rubric for simulation assessment. Quantitative data was analysed using descriptive and inferential statistics with SPSS v26. Journals were also evaluated to establish examples of exemplary, accomplished, developing, and beginning.

IV. Results:

The overall score of the journals did improve for the first example to the last journal by each rater in both the second and fourth semester students. Correlation did increase between the raters and was highest on the last journal of the fourth semester.

The rating did increase from the first journal to the last journal by both raters in both groups. The ratings of the fourth semester students were more similar but not statistically significant. The first rater had a Pearson correlation that was significant at the 0.05 level (2 tailed) for first journal and last journal of the second semester at 0.462. The second rater had a Pearson correlation of 0.670 which was statistically significant at the 0.01 level (2 tailed). Both raters showed moderate correlation between intra- reliability when evaluating the

same student at two different points. The simulation assessment and last journal averages were not statistically significant when assessing for correlation or t-test to determine convergent validity.

Table 1: Correlation between Raters Inter-rater reliability (2nd semester & 4th semester faculty)

First Journal 2nd Semester	Last Journal 2nd Semester	First Journal Fourth Semester	Last Journal Fourth Semester
.542	.653	.740	.830

Table 2: Average Score of Journals

	First Journal Average Second semester	Last Journal Average Second semester	First Journal Average Fourth semester	Last Journal Average Fourth semester
Rater 1	2.47	2.69	2.46	2.61
Rater 2	2.17	2.32	2.48	2.52

Student Writing Examples

Beginning Response: One important goal for my patient was pain management. She had some intermittent coughing fits that were productive and lasted for about a minute to two each time. This was causing her some body aches and a bad headache.

Exemplary Response: The first goal for my patient was to make sure he stayed safe and free from risk of falling. In order to support these goals, we continued interventions such as putting the chair alarm, turning on the fall risk light, putting yellow gripper socks on, putting a fall bracelet on him, putting his call light and personal belongings within reach, and helping him to walk when he needed to move from one place to the other.

V. Discussion:

It is important to discuss the perspective of the rater prior to evaluation of the students. The first rater focused on how the students were expected to perform at the second semester. The first rater evaluated second semester students higher than the second rater. The second rater focused on comparing students to what was expected at the senior level near graduation.

The junior level student also has room for greater growth to develop clinical judgment. The expectation of a junior level student and senior level student are different. Faculty expect more from a senior level student. A second semester student journal that rates a four would not be the same as a senior journal entry that rated a four.

A limitation of this study was the sample size and utilization of two raters. This was a small study focusing on two cohorts in a small midwestern university.

VI. Conclusion:

Based on the results of this study, the Guided Reflective Writing rubric has demonstrated moderate inter-rater reliability. Although developed with the Clinical Judgment Model framework as a guide, the Guided Reflective Writing rubric did not demonstrate convergent validity with correlation to the Lasater Clinical Judgment Rubric used for simulation assessment. This could be that students have different ways of demonstrating clinical judgment. The Guided Reflective Writing assignment and rubric emphasized written cognitive clinical judgment whereas the Lasater Clinical Judgment Rubric emphasized psychomotor clinical judgment. Overall, the Guided Reflective Writing rubric is a quality tool for nursing education to guide the development of clinical judgment in nursing students.

CONFLICT OF INTEREST:

The authors have no conflicts of interest regarding this investigation.

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