STANDARDIZING CLINICAL JUDGMENT EVALUATION
in the Emergency Nurse Residency Program

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PROBLEM

Emergency department nurse residency orientation inconsistencies hinder the development of decisive critical thinking, negatively impacting teamwork, patient care, and may contribute to increased burnout

- Variations in preceptor support and feedback
- Subjective evaluation criteria
- Ambiguous expectations for clinical judgment

AIM

Create standardized language and expectations in evaluating clinical judgment and progress in new nurses transitioning through the Emergency Nurse Residency Program (ENRP) by utilizing the **Lasater Clinical Judgment Rubric** (LCJR) for weekly feedback.
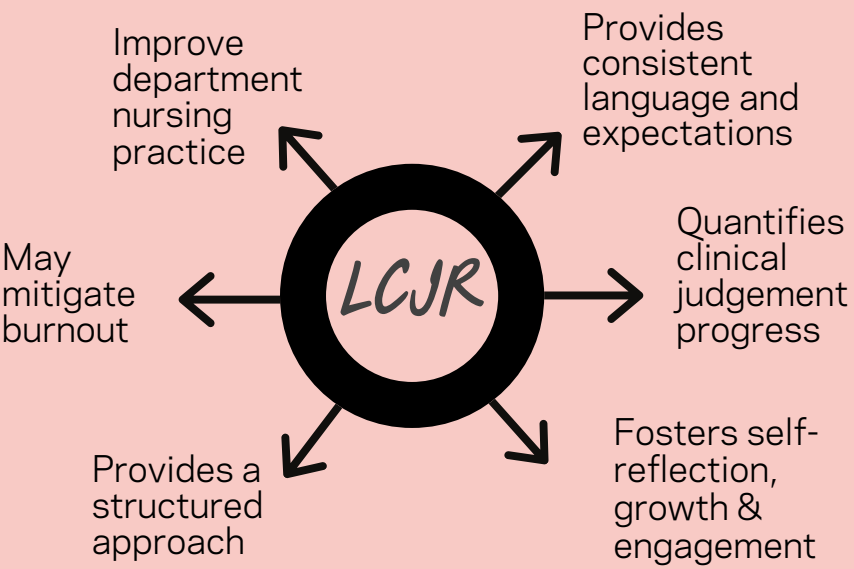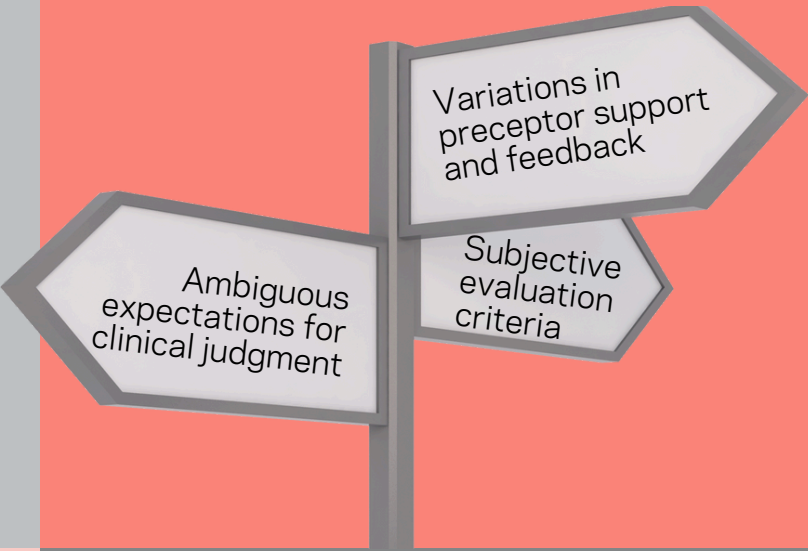
IMPLEMENTATION

- Education and training provided to stakeholders
- LCJR administered at the start and completion of the ENRP
- Residents meet weekly with leadership and preceptors to review onboarding goals and track progress
- Residents performs a self-evaluation using the LCJR
- Weekly goals established by based on ratings

LCJR

- Improve department nursing practice
- Provides consistent language and expectations
- May mitigate burnout
- Quantifies clinical judgement progress
- Provides a structured approach
- Fosters self-reflection, growth & engagement

MEASURES/INDICATORS

1. Trending scores from weekly feedback meetings to ensure forward progress as well as mastery of the *Developing Dimensions* with a trajectory towards mastering *Accomplished* by the end of the ENRP
2. In the learning needs assessment portion of the Casey-Fink Survey, responses will improve from *Not Confident* to at least *Somewhat Confident* in at least 75% of the skills

RESULTS

LCJR has strengthened the ENRP and improved outcomes for residents.

- Total score range is 11-44, 11 being complete beginner to 44 exemplary in all dimensions
- Residents and preceptors report increased skill set and confidence in the department

LESSONS LEARNED

- Fostering clinical judgment improves individual practice and elevates the department's collective performance
- The tool has contributed to advancing the practice of preceptors/mentors
- Novice and experienced preceptors now rate themselves on the rubric and note areas for improvement

NEXT STEPS

Future goals include:

- Validating the tool for use in this setting with this population.
- Continued utilization with the ENRP program to enhance growth and professional development within the Emergency Department.

ENA EMERGENCY NURSE RESIDENCY PROGRAM

Lasater Clinical Judgment Rubric© Evaluator

NOTICING	EXEMPLARY (4)	ACCOMPLISHED (3)	DEVELOPING (2)	BEGINNING (1)
FOCUSED OBSERVATION	Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information	Regularly observes/monitors a variety of data, including both subjective and objective; most useful information is noticed, may miss the most subtle signs	Attempts to monitor a variety of subjective and objective data but is overwhelmed by the array of data; focuses on the most obvious data, missing some important information	Confused by the clinical situation and the amount/type of data; observation is not organized, and important data is missed and/or assessment errors are made
RECOGNIZING DEVIATIONS FROM EXPECTED PATTERNS	Recognizes subtle patterns and deviations from expected patterns in data and uses these to guide the assessment	Recognizes most obvious patterns and deviations in data and uses these to continually assess	Identifies obvious patterns and deviations, missing some important information; unsure how to continue the assessment	Focuses on one thing at a time and misses most patterns/deviations from expectations; misses opportunities to refine the assessment
INFORMATION SEEKING	Assertively seeks information to plan intervention: carefully collects useful subjective data from observing the client and from interacting with the client and family	Actively seeks subjective information about the client's situation from the client and family to support planning interventions; occasionally does not pursue important leads	Makes limited efforts to seek additional information from the client/family; often seems not to know what information to seek and/or pursues unrelated information	Is ineffective in seeking information; relies mostly on objective data; has difficulty interacting with the client and family and fails to collect important subjective data
INTERPRETING	EXEMPLARY (4)	ACCOMPLISHED (3)	DEVELOPING (2)	BEGINNING (1)
PRIORITIZING DATA	Focuses of the most relevant and important data used for explaining the client's condition	Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data	Makes difficulty focusing and focus on the most important but also attends to less relevant/useful data	Has difficulty focusing and appears not to know which data are most important to the diagnosis; attempts to attend to all available data
MAKING SENSE OF DATA	Even when facing complex, conflicting, or confusing data, is able to (1) note and make sense of patterns in the client's data, (2) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (3) develop plans for interventions that can be justified in terms of their likelihood of success	In most situations, interprets the client's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or complicated cases where it is appropriate to seek the guidance of a specialist or more experienced nurse	In simple or common/familiar situations, is able to compare the client's data patterns with those known and to develop/explain intervention plans; has difficulty, however, with even moderately difficult data/situations that are within the expectations for students, inappropriately requires advice or assistance	Even in simple or familiar/common situations has difficulty interpreting or making sense of data; has trouble distinguishing among competing explanations and appropriate interventions, requiring assistance both in diagnosing the problem and in developing an intervention

REFERENCES & CONTACT INFO

Northwell Northern Westchester Hospital