

**ORAL ROBERTS UNIVERSITY
ANNA VAUGHN COLLEGE OF NURSING**

Whole Person Assessment Handbook



Welcome

The Anna Vaughn College of Nursing faculty, staff, and I, are committed to facilitating an academic environment in which you may successfully fulfill God's calling in your life, your education, and your profession.

The following handbook is designed to simplify and clarify the requirements of your Nursing Whole Person Assessment (WPA). The handbook is arranged in a step-by-step order, beginning with the entry level requirements through the intermediate, to the professional level.

Your completed Nursing Whole Person Assessment is a profile of an individual's achievement of curricular objectives and professional standards prescribed by the University, the College of Nursing, professional organizations, and external accrediting agencies. The WPA will also assist you in developing an on-line competitive and professional portfolio relative to your discipline.

Kenda Jezek, Ph.D., R.N.
Dean

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Whole Person Assessment Handbook

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ORU's Founding Vision and Mission Statements

FOUNDING VISION

Oral Roberts University is a charismatic university, founded in the fires of evangelism and upon the unchanging precepts of the Bible. The university was founded as a result of the evangelist Oral Roberts' obeying God's mandate to build a university on God's authority and the Holy Spirit.

God's commission to Oral Roberts was to "Raise up your students to hear My voice, to go where My light is dim, where My voice is heard small, and My healing power is not known, even to the uttermost bounds of the earth. Their work will exceed yours, and in this I am well pleased."

MISSION

To build Holy Spirit-empowered leaders through whole person education to impact the world with God's healing.

AVCON's Mission Statement

The mission of the Anna Vaughn College of Nursing is to prepare professionally competent graduates—whole in spirit, mind, and body—who go into every person's world to address physical, psychosocial, and spiritual health of individuals, families, communities, and populations through the ministry of nursing.

ANNA VAUGHN COLLEGE OF NURSING

BSN CURRICULUM OUTCOMES

Upon completion of the BSN curriculum, the graduate will be able to demonstrate achievement of the following outcomes:

1. Synthesize knowledge of liberal arts, sciences, theories, and concepts to provide safe, evidence-based practice and professional nursing.
2. Assume responsibility for the delivery of direct, delegated, and holistic nursing care across the life span of diverse individuals, families, communities, and populations.
3. Utilize evidence-based practice and nursing standards to prevent illness and to promote, maintain, and restore health in a variety of settings.
4. Implement a professional, culturally appropriate communication style in the delivery of patient care, education, and collaboration with the health care team.
5. Apply current knowledge of health care policy and use of resources in the plan and delivery of safe, fiscally responsible nursing care.
6. Utilize information technology in communication, quality improvement, and research in the delivery and management of health care.
7. Integrate Christian principles, respect of the individual, ethical behavior, evidence-based practice, cultural awareness, and collaboration into professional nursing practice.
8. Develop a personal leadership style that fosters his or her quest for wholeness through ongoing personal and professional development.

ASSISTANCE

You may seek assistance from each of the following:

1. Your Academic Peer Advisor (APA)
2. Computer Lab Assistants, GC 2A01, Lab #1, GC2A01
3. Full-time faculty members:
 - a. Lenore Butay
GC 3C13
(918) 495-6139
 - b. Dr. Patricia Catts
GC 3C12
(918) 495-6144
 - c. Rebecca S. Poore
GC 3C09
(918) 495-6142
 - d. JoeAnn Robinson
GC 3C10
(918) 495-6149
 - e. Dr. Cheryl Swanson
GC 3C07
(918) 495-6147
 - f. Dr. Audrey Thompson
GC 3B17
(918) 495-6140
 - g. Rachael Valentz
GC3B13
(91) 495-6946
 - h. Corie VanArsdale
GC 3C17
(918) 495-6145
4. Dr. Kenda Jezek, Dean
GC 3C08
918-495-6198
kjezek@oru.edu

You may also refer to the “Frequently Asked Questions” at the back of this handbook.

Whole Person Assessment Artifacts for Nursing Majors

LEVEL	OUTCOME	ARTIFACTS	COURSE	RUBRIC
ENTRY	8	Called to Care Paper	NUR 110	NUR 110 Called to Care Rubric
	1, 2, 3, &7	Clinical Evaluation	NUR 202	NUR 202 Clinical Evaluation Rubric
INTER-MEDIATE	2 & 4	Communication Paper	NUR 304	NUR 304 Communication Paper Rubric
CAPSTONE	1, 2, 3, 4, 6, &7	Hospital Care Plan Rubric	NUR 308	NUR 308 Hospital Care Plan Rubric
	4, 5, 7, & 8	Charge Nurse Paper	NUR 400	NUR 400 Charge Nurse Paper Rubric
	1, 2, 3, 4, 5, 6, 7, & 8	Leadership Project	NUR 405	NUR 405 Leadership Project Rubric
	7 & 8	Philosophy of Nursing Paper	NUR 405	Nursing 405 Philosophy of Leadership Paper Rubric
	1, 2, 3, 4, &7	Cultural Ante-natal Care Paper	NUR 430	NUR 430 Cultural Antenatal Care Paper Rubric
	1, 2, 3, 4, 5, 6, 7, & 8	Clinical Evaluation	NUR 406	NUR 406 Clinical Evaluation Rubric
	1, 6, & 8	Senior Paper	NUR 499	NUR 499 Senior Paper Rubric

Rubrics

NUR 110: CALLED TO CARE PAPER

Category	4 Exemplary	3 Good	2 Acceptable	1 Unacceptable	0 Not Attempted	Weight	Points Possible	Points Earned
Introduction-Organization	Introduction is inviting, states the main topic and previews the structure of the paper.	Introduction clearly states the main topic and previews the structure of the paper, but is not particularly inviting to the reader.	Introduction states the main topic, but does not adequately preview the structure of the paper nor is it particularly inviting to the reader.	There is no clear introduction of the main topic or structure of the paper.		2	8	
Required Elements	Includes all required elements as well as additional information.	All required elements are included.	All but 1 of the required elements are included	Several required elements are missing.		15	60	
Support for Topic-Content	Relevant, telling, quality details give the reader important information that goes beyond the obvious or predictable.	Supporting details and information are relevant, but one key issue or portion of the storyline is unsupported.	Supporting details and information are relevant, but several key issues or portions of the storyline are unsupported.	Supporting details and information are typically unclear or not related to the topic.		5	20	

Category	4 Exemplary	3 Good	2 Acceptable	1 Unacceptable	0 Not Attempted	Weight	Points Possible	Points Earned
Sequencing-Organization	Details are placed in a logical order and the way they are presented effectively keeps the interest of the reader.	Details are placed in a logical order, but the way in which they are presented/ introduced sometimes makes the writing less interesting.	Some details are not in a logical or expected order, and this distracts the reader.	Many details are not in a logical or expected order. There is little sense that the writing is organized.		2	8	
Transitions-Organization	A variety of thoughtful transitions are used. They clearly show how ideas are connected.	Transitions clearly show how ideas are connected, but there is little variety.	Some transitions work well; but connections between other ideas are fuzzy.	The transitions between ideas are unclear or nonexistent.		2	8	
Capitalization and Punctuation	Writer makes no errors in capitalization or punctuation, so the paper is exceptionally easy to read.	Writer makes 1 or 2 errors in capitalization or punctuation, but the paper is still easy to read.	Writer makes a few errors in capitalization and/or punctuation that catch the reader's attention and interrupt the flow.	Writer makes several errors in capitalization and/or punctuation that catch the reader's attention and greatly interrupt the flow		2	8	

Category	4 Exemplary	3 Good	2 Acceptable	1 Unacceptable	0 Not Attempted	Weight	Points Possible	Points Earned
Grammar and Spelling	Writer makes no errors in grammar or spelling that distracts the reader from the content.	Writer makes 1-2 errors in grammar or spelling that distract the reader from the content.	Writer makes 3-4 errors in grammar or spelling that distract the reader from the content.	Writer makes more than 4 errors in grammar or spelling that distracts the reader from the content.		2	8	
APA Format	95-100%	85-94%	70-84%	Below 70% accuracy		1	4	
					TOTAL	31	124	
					Final Grade			
Comments:								

NUR 202: Foundations of Nursing Clinical Evaluation Rubric

CLINICAL EVALUATION RUBRIC
NUR 202: Fundamentals of Nursing
Clinical Site/Rotation: Adult

SEMESTER: Spring

Student: Susie Nurse
MS

Faculty: Joe Ann Robinson, RN,

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
<u>Discipline-Specific Knowledge:</u> The utilization of theoretical/conceptual and practical knowledge bases to analyze salient relationships (relationships that stand out) in the organization and delivery of patient care* (1.1, 1.5, 4.3).	<input checked="" type="checkbox"/> Analyzes, synthesizes, and evaluates theoretical/conceptual and practical knowledge appropriate to nursing practice	<input type="checkbox"/> Applies theoretical/conceptual and practical knowledge appropriate to nursing practice	<input type="checkbox"/> Identifies theoretical/conceptual and practical knowledge appropriate to nursing practice**	<input type="checkbox"/> Unable to demonstrate knowledge of theoretical/conceptual and practical knowledge bases to analyze salient relationships	<input type="checkbox"/> Does not attempt to demonstrate knowledge of theoretical/conceptual and practical knowledge bases to analyze salient relationships
<u>Critical Reflection:</u> The recognition of similarities and differences among patterns of interaction between internal and external environments in clinical practice* (1.4)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates similarities and differences among patterns of interaction between internal and external environments	<input type="checkbox"/> Uses knowledge of similarities and differences among patterns of interaction between internal and external environments in clinical practice environments	<input type="checkbox"/> Recognizes similarities and differences among patterns of interaction between internal and external environments**	<input checked="" type="checkbox"/> Unable to recognize similarities and differences among patterns of interaction between internal and external environments	<input type="checkbox"/> Does not attempt to recognize similarities and differences among patterns of interaction between internal and external environments
<u>Critical Thinking Competency:</u> Identifies missing information that is needed to generate evidenced-based positive outcomes through knowing the patient* (1.2, 1.3).	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the effect of missing information in clinical practice	<input type="checkbox"/> Implements strategies to obtain missing information in clinical practice**	<input type="checkbox"/> Identifies missing information necessary for clinical practice	<input type="checkbox"/> Unable to identify missing information necessary for clinical practice	<input type="checkbox"/> Does not attempt to identify missing information necessary for clinical practice
<u>Critical Thinking Competency :</u> Performs problem-solving, and decision-making skills that generate evidenced-based positive outcomes through knowing the patient* (1.2, 1.3, 2.4, 3.4)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates problem-solving and decision making skills: Interprets and acts upon clinical findings	<input type="checkbox"/> Implements problem-solving and decision making skills: Correctly interprets abnormal clinical findings**	<input type="checkbox"/> Discusses problem-solving methods and decision making skills: Identifies clinical findings that are abnormal	<input type="checkbox"/> Unable to discuss problem-solving methods and decision making skills: Cannot identify clinical findings that are abnormal	<input type="checkbox"/> Does not attempt to discuss problem-solving methods and decision making skills: Cannot identify clinical findings that are abnormal

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
Communication: Written communication is professional (2.1)	<input type="checkbox"/> Written communication is accurate, clear, concise, comprehensive, and well organized	<input type="checkbox"/> Written communication is accurate, relevant, clear and comprehensive	<input type="checkbox"/> Written communication is accurate, relevant, clear and appropriate**	<input type="checkbox"/> Written communication lacks relevance, clarity, or is incomplete	<input type="checkbox"/> Written work not attempted.
Communication: Verbal communication is professional and culturally sensitive (2.2, 2.4, 2.5)	<input type="checkbox"/> Uses professional, culturally sensitive communication skills that are clear, concise and well-organized: Analyzes personal communication style and develops a plan for improvement	<input type="checkbox"/> Uses professional, culturally sensitive communication skills that are clear, concise and well-organized	<input type="checkbox"/> Verbal communication is relevant, clear and appropriate**	<input type="checkbox"/> Verbal communication lacks relevance, clarity, or completeness.	<input type="checkbox"/> Verbal communication not attempted
Information literacy: Integration of current knowledge into nursing practice (2.3)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates current literature for clinical practice	<input type="checkbox"/> Applies current literature to clinical practice**	<input type="checkbox"/> Identifies and accesses appropriate literature for use in clinical practice	<input type="checkbox"/> Unable to identify or access appropriate literature for use in clinical practice	<input type="checkbox"/> Does not attempt to identify or access appropriate literature
Therapeutic nursing interventions: Psychomotor skills (3.1, 3.2, 3.3, 3.4)	<input type="checkbox"/> Demonstrates nursing skills using accepted standards of practice and performs psychomotor skill in a timely, organized, coordinated manner	<input type="checkbox"/> Demonstrates nursing skills using accepted standards of practice: Able to perform psychomotor skill in an organized and coordinated manner	<input type="checkbox"/> Demonstrates nursing skills using accepted standards of practice**	<input type="checkbox"/> Unable to demonstrate nursing skills using accepted standards of practice	<input type="checkbox"/> Does not attempt to demonstrate nursing skills
Therapeutic nursing interventions: Independence (3.4, 4.3)	<input type="checkbox"/> Demonstrates advanced nursing skills independently	<input type="checkbox"/> Demonstrates basic nursing skills independently and advanced skills with minimal cues or supervision	<input type="checkbox"/> Demonstrates nursing skills with appropriate level of independence and/or supervision**	<input type="checkbox"/> Unable to demonstrate nursing skills at a level of independence appropriate to level of student	<input type="checkbox"/> Unable to demonstrate nursing skills

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
Therapeutic nursing interventions: Safety (3.4, 4.3)	<input type="checkbox"/> Performs tasks safely: Analyzes, synthesizes, and evaluates actual or potential safety issues	<input type="checkbox"/> Performs tasks in a safe manner: Identify actual or potential safety issues**	<input type="checkbox"/> Performs tasks in a safe manner	<input type="checkbox"/> Does not perform tasks safely	<input type="checkbox"/> Performance is unsafe in clinical setting
Therapeutic nursing interventions: Medication administration (3.4, 4.3)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the process of medication administration	<input type="checkbox"/> Administers medications using the 5 rights, identifies side effects and therapeutic effects**	<input type="checkbox"/> Administers medications using the 5 rights	<input type="checkbox"/> Unable to administer medications using the 5 rights	<input type="checkbox"/> Does not attempt to administer medications using the 5 rights
Therapeutic nursing interventions: Provider of care (3.1, 3.3, 3.5)	<input type="checkbox"/> Provides care for four or more patients	<input type="checkbox"/> Provides care for two patients**	<input type="checkbox"/> Provides care for one patient	<input type="checkbox"/> Unable to provide care for one patient	<input type="checkbox"/> Does not participate in providing patient care
Therapeutic nursing interventions: Initiative in learning skills (3.4, 4.5)	<input type="checkbox"/> Demonstrates initiative in learning new skills: Actively seeks new experiences	<input type="checkbox"/> Demonstrates initiative in learning new skills	<input type="checkbox"/> Participates in learning new skills as opportunities arise**	<input type="checkbox"/> Does not show initiative to learn new skills	<input type="checkbox"/> Does not participate in learning new skills
Therapeutic nursing interventions: Time management (3.4, 3.5)	<input type="checkbox"/> Analyzes personal use of time and makes plan to improve time management skills	<input type="checkbox"/> Performs tasks in timely manner and uses clinical time to maximize learning	<input type="checkbox"/> Performs necessary tasks during scheduled clinical experience**	<input type="checkbox"/> Unable to perform tasks during expected time frame, procrastinates, or misuses clinical time	<input type="checkbox"/> Does not attempt to perform tasks during clinical time
Therapeutic nursing interventions: Integration of the Theory of Nursing for the Whole Person: Ministry to body, mind, spirit (3.1, 3.2, 4.2)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the TNWP in clinical practice	<input type="checkbox"/> Applies TNWP to clinical practice**	<input type="checkbox"/> Identifies and discusses the use of TNWP in clinical practice	<input type="checkbox"/> Unable to identify or discuss the use of TNWP in clinical practice	<input type="checkbox"/> Does not attempt to identify the TNWP in clinical practice
Therapeutic nursing interventions: Sensitivity to the Holy Spirit (3.1, 4.1)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the role of the Holy Spirit in clinical practice	<input type="checkbox"/> Uses sensitivity to the Holy Spirit in clinical practice	<input type="checkbox"/> Able to identify biblically based work of the Holy Spirit**	<input type="checkbox"/> Unable to identify the role or works of the Holy Spirit	<input type="checkbox"/> Does not attempt to identify the role or works of the Holy Spirit
Leadership behaviors: Demonstrates professional roles (2.5, 3.5)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the roles of the nurse	<input type="checkbox"/> Demonstrates roles of the nurse**	<input type="checkbox"/> Identifies the roles of the nurse	<input type="checkbox"/> Unable to identify the roles of the nurse	<input type="checkbox"/> Does not attempt to identify the roles of the nurse

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
Leadership behaviors: Ability to articulate a vision for nursing practice (4.1, 4.5)	<input type="checkbox"/> Formulates strategy utilizing personal vision and leadership style to promote future career goals	<input type="checkbox"/> Establishes plan for fulfilling personal vision for nursing practice	<input type="checkbox"/> States preliminary goals for individual nursing practice**	<input type="checkbox"/> Unable to express goals for professional growth and development	<input type="checkbox"/> Does not attempt to express goals for professional growth and development
Leadership behaviors: Develops goals and influences change (4.1)	<input type="checkbox"/> Analyzes health care setting for needed changes and role as change agent: Implements plan to enact change and evaluates outcomes of actions	<input type="checkbox"/> Critiques health care setting for needed changes and identifies potential goals	<input type="checkbox"/> Describes importance of goals and methods of implementing change to improve health care**	<input type="checkbox"/> Unable to identify goals or changes to improve health care	<input type="checkbox"/> Does not attempt to identify goals or changes to improve health care
Leadership behaviors: Acknowledges personal strengths and weaknesses (4.1, 4.5)	<input type="checkbox"/> Analyzes personal abilities and challenges: Implements and evaluates strategies for personal growth	<input type="checkbox"/> Utilizes personal abilities in nursing practice: Takes action to improve in areas of weakness and implements plan for personal growth	<input type="checkbox"/> Describes personal abilities and challenges**	<input type="checkbox"/> Unable to recognize personal abilities or challenges	<input type="checkbox"/> Does not attempt to recognize personal abilities or challenges
Leadership behaviors: Professional conduct (4.1, 4.5)	<input type="checkbox"/> Well prepared, professionally dressed, and always on time for clinical: Analyzes the importance of professional conduct on nursing practice	<input type="checkbox"/> Well prepared, professionally dressed, and always on time for clinical	<input type="checkbox"/> Prepared, appropriately dressed and consistently on time for clinical**	<input type="checkbox"/> Unprepared, inappropriately dressed, or late to clinical two or more times during the semester	<input type="checkbox"/> Does not attempt to prepare for clinical, be punctual, or dress professionally
Leadership behaviors: Participates in peer review (4.1, 4.5)	<input type="checkbox"/> Performs self/peer evaluation during peer review process	<input type="checkbox"/> Contributes to peer review process	<input type="checkbox"/> Identifies importance of peer review process**	<input type="checkbox"/> Unable to identify importance of peer review process	<input type="checkbox"/> Does not attempt to identify importance of peer review process
Leadership behaviors: Identification of resources to facilitate the meeting of outcomes (4.4)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates usefulness of various resources in health care setting	<input type="checkbox"/> Uses various resources in health care setting	<input type="checkbox"/> Identifies a variety of resources for use in the health care setting**	<input type="checkbox"/> Unable to identify resources to use in health care setting	<input type="checkbox"/> Does not attempt to identify appropriate resources

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
Leadership behaviors: Promotion of collaboration (2.5, 4.4)	<input type="checkbox"/> Creates a collaborative effort among disciplines or community agencies	<input type="checkbox"/> Outlines a plan to produce a collaborative effort among disciplines or community agencies	<input type="checkbox"/> Identifies importance of collaboration: Identifies disciplines or community agencies appropriate for collaboration**	<input type="checkbox"/> Unable to identify disciplines or community agencies to work on a collaborate effort	<input type="checkbox"/> Does not attempt to identify disciplines or community agencies to work on a collaborate effort
Leadership behaviors: Open to instruction (4.1, 4.5)	<input type="checkbox"/> Evaluates and incorporates feedback in nursing practice	<input type="checkbox"/> Analyzes feedback and relates it to nursing practice	<input type="checkbox"/> Clarifies and uses feedback to improve nursing practice**	<input type="checkbox"/> Resistant to feedback	<input type="checkbox"/> Denies credibility of feedback
Leadership Behaviors: Attitude of a servant leader (4.1, 4.5)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the role of servant leader in nursing practice: Evaluates personal performance in role of servant leader	<input type="checkbox"/> Implements role of servant leader: Open to direction from others to improve performance as servant leader	<input type="checkbox"/> Describes and accepts role of servant leader**	<input type="checkbox"/> Unable to describe or does not accept role of servant leader	<input type="checkbox"/> Does not attempt to describe role of servant leader
*Adapted from: PDTCTCJ Scale, © 2000		**Critical behaviors must be met to pass clinical.		Clinical grade: Pass	

NUR 304: Community Mental Health Nursing Communication Paper

Criteria for Self-Analysis of Growth and Development Paper

The paper should follow the format listed below and include all listed information.

It will be graded by the subsequent rubric!

- I. Summarize physical, cognitive, and psychosocial norms for each of the major periods of the life cycle. Cite the developmentalist and/or theoretical perspective used.
- II. Identify Havighurst's developmental tasks for each stage of the life cycle.
- III. Write a self-evaluation documenting growth and development in relation to:
 - a. Identification of a psychosocial crisis as identified by Erikson or a developmentalist of your choosing that was very significant in your life.
 - b. Achievement of developmental tasks of the stage as identified by Havighurst
 - c. Resolution of psychosocial crisis or developmental task through spiritual intervention**

(**Choose the stage that is most important to who you are today. You have the option of discussing same crisis or task identified in III a & b or another crisis or task may be discussed in III c. regarding spiritual intervention).

- IV. Bibliography (including at least three sources, one primary source)
- V. Grammar, spelling, format

* Resources to answer III C. may include the Holy Bible, Breaking Generational Curses (2000) by Marilyn Hickey or any current contemporary works by Christian Leaders.

NUR 304 COMMUNITY MENTAL HEALTH NURSING

EVALUATION RUBRIC FOR ANALYSIS OF GROWTH AND DEVELOPMENT PAPER

Category	4 Exemplary	3 Good	2 Acceptable*	1 Unacceptable	0 Not Attempted	Wt.	Points Possible	Points Earned
Introduction-Organization	Introduction is inviting, states the main topic and previews the structure of the paper.	Introduction clearly states the main topic and previews the structure of the paper, and is inviting to the reader.	Introduction states the main topic, but does not adequately preview the structure of the paper nor is it inviting to the reader.	There is no clear introduction of the main topic or structure of the paper.		2	8	
Transitions-Organization	A variety of thoughtful transitions are used. They clearly show how ideas are connected.	Transitions clearly show how ideas are connected, but there is little variety.	Some transitions work well; but connections between other ideas are fuzzy.	The transitions between ideas are unclear or nonexistent.		3	12	
Required Criteria	Includes all required criteria as well as additional information.	All required criteria are included.	All but 1 of the required criteria are included.	Several required criteria are missing.		4	16	
Focus on Topic	There is one clear, well-focused topic. Main idea is supported by detailed.	Main idea is clear but the supporting information is general.	Main idea is somewhat clear.	The main idea is not clear. Information seems randomly placed.		5	20	

Category	4 Exemplary	3 Good	2 Acceptable*	1 Unacceptable	0 Not Attempted	Wt.	Points Possible	Points Earned
Support for Topic-Content	Relevant, telling, quality details give the reader important information that goes beyond the obvious or predictable.	Supporting details and information are relevant, but one key issue or portion of the storyline is unsupported.	Supporting details and information are relevant, but several key issues or portions of the storyline are unsupported.	Supporting details and information are typically unclear or not related to the topic.		5	20	
Synthesis	Clearly, concisely, and comprehensively discuss research findings, resulting in pertinent statements supported by multiple citations.	Study findings are clearly identified, related to research questions, and analysis is evident.	Study findings are related to the research questions.	Study findings are unclear and do not relate to the research questions.		4	16	
Capitalization, Punctuation, Grammar and Spelling	Writer makes no errors in capitalization punctuation, grammar or spelling.	Writer makes 1 or 2 errors in capitalization grammar or spelling punctuation.	Writer makes 3 errors in capitalization punctuation, grammar or spelling	Writer makes more than 3 errors in capitalization punctuation grammar or spelling.		2	8	

Category	4 Exemplary	3 Good	2 Acceptable*	1 Unacceptable	0 Not Attempted	Wt.	Points Possible	Points Earned
Sources	All sources used for quotes and facts are current and cited correctly.	All sources used for quotes and facts are current and most are cited correctly.	Most sources used for quotes and facts are current and cited correctly.	Many sources used for quotes and facts are less than current and/or cited incorrectly		3	12	
APA Format	95-100%	85-94%	70-84%	Below 70% accuracy		2	8	
					TOTAL	30	120	
								%

Faculty _____

Final Letter Grade _____

Faculty Signature _____

Faculty Comments:

Student _____

Student Signature _____

NUR 308: PATTERNS OF HEALTH & ILLNESS II

HOSPITAL CARE PLAN RUBRIC

Criterion	4	3	2	1	0	wt	
Patient history and assessment: Adult inpatient	Demographics and psychosocial data are relevant, accurate and relate to patient wholeness	Most (90%) of the data are relevant, accurate, and relate to patient wholeness	75% or more of the data are relevant, accurate, and relate to patient wholeness	Less than 75% of the data are relevant, or accurate, or do not relate to patient wholeness	Data has little relevance and lacks accuracy or relevance	3	
Assessment: Metabolic syndrome	Risk factors are identified and score is tallied	Risk factors identified but total not tallied	Data missing 1 component	Data missing > 1 component	Did not attempt to provide data	1	
Assessment: Physical assessment	Data reflect a comprehensive assessment that is complete	Data reflect a comprehensive assessment with less than two missing items	Data reflect an assessment that is 90% complete	Data reflect an assessment that is at least 75% complete	Data reflect incomplete assessment	5	
Assessment: Use of appropriate nursing language and rating scales	> 90% use of appropriate nursing language and rating scales	> 75% use of appropriate nursing language and rating scales	> 50% use of appropriate nursing language and rating scales	Uses slang or un-professional language	Did not attempt to provide data	2	
Assessment: Individualized and abnormal patterns Identified	Identifies all abnormal patterns of health	Identifies most (90%) abnormal patterns of health	Identifies at least 75% of the abnormal patterns of health	Identifies at least 50% of the abnormal patterns of health	Fails to consistently identify abnormal patterns of health	1	
Nursing Diagnosis: Priority	Prioritizes and individualizes nursing diagnosis to fit patient's condition			Not prioritized – looks like “standardized” care plan and not individualized	Not prioritized	2	

Criterion	4	3	2	1	0	wt	
Nursing Diagnosis: Correct definition of the nursing diagnosis which correlates with assessment data	Interprets assessment data accurately in forming all nursing diagnoses	Interprets assessment data accurately in forming most (90%) nursing diagnoses	Interprets assessment data accurately in forming at least 75% of nursing diagnoses	Interprets assessment data accurately in forming at least 1 nursing diagnosis	Inaccurately interprets data in forming nursing diagnoses	1.5	
Nursing Diagnosis: Format	All diagnoses are nursing concepts (not medical) and include 'related to/evidenced by'	Diagnoses are 90% complete, accurate, and in correct format	Diagnoses are 75% complete, accurate, and in correct format	Diagnoses are 50% complete, accurate, and in correct format	Diagnoses are incomplete or contain multiple errors in expression	0.5	
Outcomes: Validity	All outcomes clearly represent creative measurement of resolution of the nursing diagnoses	Most (90%) outcomes clearly represent measurement of resolution of the nursing diagnoses	75% of outcomes represent measurement of resolution of the nursing diagnoses	50% of outcomes do not represent resolution of specific nursing diagnoses	Outcomes do not represent resolution of specific nursing diagnoses	0.5	
Outcomes: Reliability	All outcomes are empirically measurable or can be qualitatively evaluated	90% of the outcomes written in empirically measurable terms	75% of the outcomes written in empirically measurable terms	50% of the outcomes written in empirically measurable terms	Less than 50% of the outcomes are written in empirically measurable terms	0.5	
Outcomes: Realistic	All outcomes are realistic given patient's age, baseline functioning and time frame	90% of the outcomes are realistic in both content and time frame	75% of the outcomes are realistic in both content and time frame	50% of the outcomes are realistic in both content and time frame	Less than 50% of outcomes are realistic in both content and time frame	1	

Criterion	4	3	2	1	0	wt	
Outcomes: Patient focused	Outcomes are patient focused and do not represent nursing actions		90% of outcomes are patient focused and do not represent nurse outcomes		Outcomes are not patient focused	0.5	
Interventions: Comprehensive	Interventions comprehensively identify actions to resolve nursing diagnoses	Interventions identify 90% of the actions to resolve nursing diagnoses	Interventions identify 75% of the actions to resolve nursing diagnoses	Interventions identify 50% of the actions to resolve nursing diagnoses	Interventions do not specifically address the nursing diagnosis and are lacking in sufficient quantity	1	
Interventions: Diversity	Interventions are appropriate for patient's condition, diverse and clearly expressed	Interventions are diverse and clearly expressed	Includes at least 2 different types of interventions that are clearly expressed	Includes 1 type of intervention that is clearly expressed	Includes 1 or fewer types of interventions that are not clearly expressed	2	
Interventions: Completeness	Includes all necessary information on who, specific action or strategy, when, duration of activity	Includes necessary information on who, specific action or strategy, when, duration of activity, on 90% of interventions	Includes necessary information on who, specific action or strategy, when, duration of activity on 75% of the interventions	Includes necessary information on who, specific action or strategy, when, duration of activity on at least 50% of interventions	Lacks necessary information on who, specific action or strategy, when, duration of activity	2	
Interventions: Patient teaching	Each diagnosis includes patient teaching/discharge planning as appropriate		At least 50% of the diagnoses includes patient teaching/discharge planning as appropriate		Does not address patient teaching/discharge planning as appropriate	1	

Criterion	4	3	2	1	0	wt	
Interventions: Collaboration	Interventions designate if nursing action or specify what discipline for collaboration		Interventions reflect limited collaboration		Interventions lack collaboration	1	
Medication cards: Safety	Medication cards identify indication, safe dose range, parameters to hold and black box warning	Medication cards 90% complete	has 2 or less errors	multiple inaccuracies	Does not submit medication cards	4	
Medication cards: Patient education	Medication cards Provide common important patient education	80% provided			Limited or irrelevant data	1.5	
Medication cards: Drug order written following JACHAO rules	100% accurate	2 or more errors	4 or more errors	6 or more errors	Substantial lack of adherence to JACHAO rules	1	
Inter-relatedness Pathophysiology diagram: Patho steps or complication of a procedure	5 steps reflecting medical diagnosis and concept area	< 5 steps	< 4 steps	inaccurate	No attempt	5	
Inter-relatedness Pathophysiology diagram: Signs/symptoms and diagnostic test	Accurate identification of expected and actual clinical manifestations including expected and actual diagnostic test	80% provided	50 %	Substantially inaccurate	Data omitted	5	

Criterion	4	3	2	1	0	wt	
Inter-relatedness Pathophysiology diagram: Risk factor	Identifies 100 % risk factors	80% provided	50%	Substantially inaccurate	Data omitted	3	
Inter-relatedness Pathophysiology diagram: Medications listed with indication and relevant side effects	Identifies 100 %	80% provided	50%	Substantially inaccurate	Data omitted	3.5	
General criteria: Spelling and legibility	100 %	2 or more errors	4 or more errors	6 or more errors	substantial		
			Possible points	200	Total Weights	50	

NUR 400: Patterns of Health & Illness III

Charge Nurse Paper - Grading Rubric

Criteria/Points	Exemplary/ 4	Competent/ 3	Acceptable/ 2	Unacceptable/ 1	Not attempted/ 0	Wt	Points Possible	Points Earned
Amount of Information	All objectives are addressed and discussion is comprehensive	All objectives are addressed and discussion is satisfactory	All or most of the objectives are addressed and discussion is limited	Some of the objectives were not addressed and discussion is unsatisfactory	Did not address the objectives	3	12	
Organization	Organization enhances development of main ideas, easily moves the reader through the discussion, is compelling and has well-constructed paragraphs	Organization is clear and focused on the main ideas, moves the reader through the discussion and has well-constructed paragraphs	Organization is attempted, some ideas are clear and overall structure is inconsistent	Writing lacks clear organizational structure, is difficult to follow and the reader has to reread portions, or the discussion is too short to demonstrate organizational skills	Did not attempt to organize information	4	16	
Quality of Information	Writing clearly relates to the objectives, is focused, interesting and holds the reader's attention; main ideas are distinct, well developed and include several supporting details	Writing clearly relates to the objectives, is focused and interesting; main ideas are clear and developed by 1-2 supporting details	Writing clearly relates to the objectives; main ideas are easily understood; development is limited or general	Writing has little or nothing to do with the objectives; purpose is unclear and development is minimal	Writing lacks a central idea or purpose	4	16	
Support for Topic	Includes several creative, original and relevant, telling details that go beyond the obvious or predictable	Includes 1-2 original, relevant supporting details	Includes details that are repetitious and lack creativity	Details are unrelated to the topic	Did not attempt	3	12	

Criteria/Points	Exemplary/ 4	Competent/ 3	Acceptable/ 2	Unacceptable/ 1	Not attempted/ 0	Wt	Points Possible	Points Earned
APA Format and Mechanics	Meets the APA formatting standards of the ORU Anna Vaughn School of Nursing with no mistakes, grammatical, spelling or punctuation errors	Meets the APA formatting standards of the ORU Anna Vaughn School of Nursing with 1 or 2 mistakes, grammatical, spelling or punctuation errors	Meets most of the APA formatting standards of the ORU Anna Vaughn School of Nursing with several mistakes, grammatical, spelling or punctuation errors	Has many mistakes in APA formatting, grammatical, spelling, or punctuation errors	Did not attempt	1	4	
Points Earned					Scale A = 3.5 – 4.0 B = 2.5 – 3.49 C = 2.0 – 2.49 F = <2.0	15	60	
						Scaled Score		

NUR 405: PATTERNS OF LEADERSHIP
EVALUATION RUBRIC FOR PHILOSOPHY OF NURSING PRACTICE PAPER

Student: _____

Category	4 Exemplary	3 Competent	2 Acceptable	1 Unacceptable	Wt	Pts possible	Pts earned
Introduction	Introduction sparks reader interest, drawing them into paper topic, uses 2 supporting details.	Introduction sparks reader interest, draws them into paper topic, uses 1 supporting detail.	Introduction clearly leads reader into the paper topic.	Introduction does not lead reader clearly into topic.	2	8	
Background	Background gives comprehensive understanding of topic and uses 2 or more professional sources.	Background gives adequate detail to fully explain topic and uses 2 professional sources.	Background gives adequate detail to fully explain topic and uses 1 professional source.	Background gives adequate detail to explain topic.	2	8	
Clinical Significance	Interprets clinical significance of topic in light of properly cited current facts, professional nursing roles, and social context.	Identifies areas related to clinical significance of topic in view of properly cited current facts and professional nursing roles.	Identifies clinical significance of topic based on a few facts that are properly cited.	Clinical significance is based on student's opinions rather than properly cited facts.	3	12	
Clinical Significance—Details	Information includes 3 or more supporting details and/or examples.	Information includes 2 supporting details and/or examples.	Information includes 1 supporting detail and/or example.	Information includes details and/or examples that are not supported.	2	8	
Writer's perspective	Clear and complete explanation of personal nursing practice with supporting details.	Explains personal nursing practice interest with some detail.	Explains personal nursing practice interest.	Ties to topic unclear.	2	8	
Scope	Literature comprehensively addresses personal nursing practice.	Literature adequately addresses personal nursing practice.	Literature addresses personal nursing practice research.	Literature fails to address personal nursing practice.	4	16	

Category	4 Exemplary	3 Competent	2 Acceptable	1 Unacceptable	Wt	Pts possible	Pts earned
	Synthesis gives comprehensive information on all concepts of interest	Synthesis gives comprehensive information on 90% of concepts of interest	Synthesis gives comprehensive information on 75% concepts of interest	Synthesis gives comprehensive information on 50% concepts of interest	4	16	
	Literature comprehensively addresses how personal nursing practice affects the individual, family and/or community.	Literature adequately addresses how personal nursing practice affects individual, family and/or community.	Literature inadequately addresses how personal nursing practice affects the individual, family and/or community.	Literature does not address how personal nursing practice affects the individual, family and/or community.	4	16	
	Literature comprehensively addresses relevant information related to nursing practice	Literature adequately addresses relevant information related to nursing practice	Literature correctly addresses some relevant information related to nursing practice	Literature inadequately addresses relevant information related to nursing practice	4	16	
Depth	Each section has 2 or more supporting details. All criteria is included in paper	¾ of sections have 2 or more supporting details. 90% of criteria included in paper	½ of sections have at least two supporting detail. 75% of criteria included in paper	½ or fewer sections lack supporting details. 50 % of criteria is included in papers	4	16	
Synthesis	Synthesis of information is evident. Material is presented as a unified whole with integration of ideas.	Analysis of information is evident. Materials presented have integrated ideas	Interpretation of information is evident. Information not presented as integrated whole.	Little or no integration of information is evident.	4	16	
Currency of Information	Literature reflects most current state of knowledge. 90% is 5-10 years (depending on topic) or more recent.	¾ of literature reflects current state of knowledge. 75% is 5-10 years (depending on topic) or more recent.	½ selected sources reflect current state of knowledge. 50% is 5-10 years (depending on topic) or more recent.	Does not reflect current state of knowledge.	3	12	
Organization	Sections are organized in logical manner with good flow of information and easily guides the reader	At Least 75% of chapter demonstrates organization. Information in logical order with good flow of information	At least half of chapter has some organizational strategy, though not always most logical order.	Less then half of chapter has organizational strategy, and not always most logical order.	3	12	

Category	4 Exemplary	3 Competent	2 Acceptable	1 Unacceptable	Wt	Pts possible	Pts earned
Transitions	Each section has appropriate transitions	75% of chapter has appropriate transitions	50% of chapter has transitions	25% of chapter has transitions	3	12	
Paper Conclusion paragraph	Makes clear, forceful, meaningful closing remarks that relate to impact of topic on nursing and society.	Makes clear, meaningful closing remarks that relate to impact of topic on nursing and society.	Makes meaningful closing remarks that relate to impact of topic on nursing and society.	Closing remarks are weak or do not relate to the topic's impact of nursing or society	2	8	
Language	Uses professional language that is clear and appropriate.	Uses professional language	Uses appropriate college level language.	Language not appropriate for college level paper.	2	8	
APA Format	No APA format errors	<3 APA format errors	<5 APA format errors	5 or > APA format errors	2	8	
Grammar	Uses correct grammar throughout.	1-2 grammatical errors.	3-4 grammatical errors.	5 or > grammatical errors.	2	8	
Spelling	Uses correct spelling throughout.	1-2 spelling errors.	3-4 spelling errors.	5 or more spelling errors.	2	8	
Punctuation	Uses correct punctuation.	1-2 punctuation errors.	3-4 punctuation errors.	5 or > punctuation errors.	2	8	
Organization	Entire paper leads the reader with appropriate transition and logical flow of ideas.	Entire paper is organized, logical in flow, with well-constructed paragraphs.	Entire paper is organized with well-constructed paragraphs.	Paper is not well constructed or is disorganized.	2	8	
Length	Entire paper is no more than 10 pages in length not including references.	Entire paper is 6-8 pages in length not including references.	Entire paper is 5-7 pages in length not including references.	Entire paper is less than 5 pages in length not including references.	3	9	

Category	4 Exemplary	3 Competent	2 Acceptable	1 Unacceptable	Wt	Pts possible	Pts earned
					Tot. wgh =60	240	
			Use conversion table	Earned points/60=scaled score			

Faculty Evaluator: _____ Faculty Comments: _____

NUR 405: PATTERNS OF LEADERSHIP

LEADERSHIP PROJECT RUBRIC

COMMUNITY HEALTH PROGRAM

Criteria/Points	Exemplary/ 4	Competent/ 3	Acceptable/ 2	Unacceptable/ 1	Not attempted/ 0	Wt	Points Possible	Points Earned
Assessment of Need	Discussion synthesizes all major points. Problem identification, age and cultural group.	Discussion addresses all major points	Discussion addresses several major points.	Discussion addresses few points.	Major points are not addressed.	3	12	
Depth of information	Discussion clearly relates to identified need; major points are distinct, well developed, and include several creative, and relevant points; literature review to support need.	Discussion clearly relates to identified need major points are clear and developed by 1-2 supporting details	Discussion clearly relates to identified need; major points are easily understood; development is limited.	Discussion has little or nothing to do with identified need; major points are unclear and minimally developed.	Discussion lacks development of major points.	3	12	
Organization	Organization is clear, focused, and compelling, easily moves the reader through the main points with smooth transitions and well-constructed paragraphs.	Organization is clear and focused, moves the reader through the discussion with smooth transitions and well-constructed paragraphs.	Organization reflects logical development of major points with well-constructed paragraphs and some attempt at smooth transitions.	Lacks clear organizational structure, is difficult to follow or the discussion is too short to demonstrate organizational skills	Did not attempt to organize information	3	12	
Purpose of project	Purpose represents a synthesis of concepts and theory that reflect priority health needs.	Purpose represents an analysis of concepts and theory that reflect priority health needs.	Purpose represents appropriate use of concepts and theory that reflect priority health needs.	Purpose does not demonstrate understanding of concepts and theory, and does not prioritize health needs.	Inaccurate use of concepts or theory	2	8	
Outcome objectives to be met during the project	Clearly distinguishes project participant objectives that are written using realistic, measurable terms.	Clearly distinguishes project participant objectives and most objectives are written using realistic, measurable terms.	Clearly distinguishes project participant objectives. At least half of the objectives are written in realistic, measurable terms.	Unclear project participant objectives. Less than half of the objectives are written in realistic, measurable terms.	No distinction of project participant objectives. Objectives are unrealistic and not measurable.	3	12	

Criteria/Points	Exemplary/ 4	Competent/ 3	Acceptable/ 2	Unacceptable/ 1	Not attempted/ 0	Wt	Points Possible	Points Earned
Content outline or project schedule	Content outline includes main subject headings and subheadings with specific details about project schedule, budget, teaching methodology, includes detailed timelines and specific activities; includes evidenced based Rationale	Content outline includes main subject headings and subheadings with several details about project schedule, budget, teaching methodology, includes detailed timelines with some activities; includes evidenced based rationale	Content outline includes main subject headings and subheadings without details or project schedule includes a timeline with no activities listed; includes some rationale	Content outline includes main subject headings or project schedule includes a sketchy timeline; includes few rationale	Content outline or project schedule do not relate to the clinical project, provide enough information about project activities, or include supporting rationale	3	12	
Oral Presentation	Presentation is includes all aspects of project, dress is professional. Within time limit.	Presentation is includes 90% of project criteria, dress is business/causal. Within time limit.	Presentation is includes 75% of project, dress is appropriate for setting. 1-2 minutes above time limit.	Presentation is includes 50% project criteria, dress is casual. 3-5 minutes above time limit.	Presentation is includes 25% of project criteria, dress is unprofessional. Goes over time limit.	2	8	
APA Format	Meets the APA formatting standards of the ORU Anna Vaughn School of Nursing with no mistakes.	Meets the APA formatting standards of the ORU Anna Vaughn School of Nursing with 1 or 2 mistakes	Meets most of the APA formatting standards of the ORU Anna Vaughn School of Nursing with several mistakes.	Many mistakes in APA formatting.	Did not attempt.	1	4	
Mechanics	No grammatical, punctuation, or spelling errors.	One or two grammatical, punctuation, and spelling errors.	Several grammatical, punctuation, and spelling errors.	Many grammatical, punctuation, and spelling errors	Blatant violations of grammar, punctuation, and spelling.	1	4	
<i>Points Earned</i>					Scale A = 3.5 – 4.0 B = 2.5 – 3.49 C = 2.0 – 2.49 F = <2.0	21	84	
					Scaled Score			

NUR 406: PATTERNS OF HEALTH & ILLNESS IV

CLINICAL EVALUATION RUBRIC

SEMESTER: Spring

Student:

Faculty:

Year:

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
<u>Discipline-Specific Knowledge:</u> The utilization of theoretical/conceptual and practical knowledge bases to analyze salient relationships (relationships that stand out) in the organization and delivery of patient care* (1.1, 1.5, 4.3).	<input type="checkbox"/> Analyzes, synthesizes, and evaluates theoretical/ conceptual and practical knowledge appropriate to nursing practice**	<input type="checkbox"/> Applies theoretical/ conceptual and practical knowledge appropriate to nursing practice	<input type="checkbox"/> Identifies theoretical/ conceptual and practical knowledge appropriate to nursing practice	<input type="checkbox"/> Unable to demonstrate knowledge of theoretical/ conceptual and practical knowledge bases to analyze salient relationships	<input type="checkbox"/> Does not attempt to demonstrate knowledge of theoretical/ conceptual and practical knowledge bases to analyze salient relationships
<u>Critical Reflection:</u> The recognition of similarities and differences among patterns of interaction between internal and external environments in clinical practice* (1.4)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates similarities and differences among patterns of interaction between internal and external environments	<input type="checkbox"/> Uses knowledge of similarities and differences among patterns of interaction between internal and external environments in clinical practice environments **	<input type="checkbox"/> Recognizes similarities and differences among patterns of interaction between internal and external environment	<input type="checkbox"/> Unable to recognize similarities and differences among patterns of interaction between internal and external environments	<input type="checkbox"/> Does not attempt to recognize similarities and differences among patterns of interaction between internal and external environments
<u>Critical Thinking Competency:</u> Identifies missing information that is needed to generate evidenced-based positive outcomes through knowing the patient* (1.2, 1.3).	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the effect of missing information in clinical practice**	<input type="checkbox"/> Implements strategies to obtain missing information in clinical practice	<input type="checkbox"/> Identifies missing information necessary for clinical practice	<input type="checkbox"/> Unable to identify missing information necessary for clinical practice	<input type="checkbox"/> Does not attempt to identify missing information necessary for clinical practice
<u>Critical Thinking Competency :</u> Performs problem-solving, and decision-making skills that generate evidenced-based positive outcomes through knowing the patient* (1.2, 1.3, 2.4, 3.4)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates problem-solving and decisions making skills: Interprets and acts upon clinical findings**	<input type="checkbox"/> Implements problem-solving and decision making skills: Correctly interprets abnormal clinical findings	<input type="checkbox"/> Discusses problem-solving methods and decision making skills: Identifies clinical findings that are abnormal	<input type="checkbox"/> Unable to discuss problem-solving methods and decision making skills: Cannot identify clinical findings that are abnormal	<input type="checkbox"/> Does not attempt to discuss problem-solving methods and decision making skills: Cannot identify clinical findings that are abnormal

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
Communication: Written communication is professional (2.1)	<input type="checkbox"/> Written communication is accurate, clear, concise, comprehensive, and well organized	<input type="checkbox"/> Written communication is accurate, relevant, clear and comprehensive**	<input type="checkbox"/> Written communication is accurate, relevant, clear and appropriate	<input type="checkbox"/> Written communication lacks relevance, clarity, or is incomplete	<input type="checkbox"/> Written work not attempted.
Communication: Verbal communication is professional and culturally sensitive (2.2, 2.4, 2.5)	<input type="checkbox"/> Uses professional, culturally sensitive communication skills that are clear, concise and well-organized: Analyzes personal communication style and develops a plan for improvement	<input type="checkbox"/> Uses professional, culturally sensitive communication skills that are clear, concise and well-organized**	<input type="checkbox"/> Verbal communication is relevant, clear and appropriate	<input type="checkbox"/> Verbal communication lacks relevance, clarity, or completeness.	<input type="checkbox"/> Verbal communication not attempted
Information literacy: Integration of current knowledge into nursing practice (2.3)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates current literature for clinical practice**	<input type="checkbox"/> Applies current literature to clinical practice	<input type="checkbox"/> Identifies and accesses appropriate literature for use in clinical practice	<input type="checkbox"/> Unable to identify or access appropriate literature for use in clinical practice	<input type="checkbox"/> Does not attempt to identify or access appropriate literature
Therapeutic nursing interventions: Psychomotor skills (3.1, 3.2, 3.3, 3.4)	<input type="checkbox"/> Demonstrates nursing skills using accepted standards of practice and performs psychomotor skill in a timely, organized, coordinated manner	<input type="checkbox"/> Demonstrates nursing skills using accepted standards of practice: Able to perform psychomotor skill in an organized and coordinated manner **	<input type="checkbox"/> Demonstrates nursing skills using accepted standards of practice	<input type="checkbox"/> Unable to demonstrate nursing skills using accepted standards of practice	<input type="checkbox"/> Does not attempt to demonstrate nursing skills
Therapeutic nursing interventions: Independence (3.4, 4.3)	<input type="checkbox"/> Demonstrates advanced nursing skills independently	<input type="checkbox"/> Demonstrates basic nursing skills independently and advanced skills with minimal cues or supervision**	<input type="checkbox"/> Demonstrates nursing skills with appropriate level of independence and/or supervision	<input type="checkbox"/> Unable to demonstrate nursing skills at a level of independence appropriate to level of student	<input type="checkbox"/> Unable to demonstrate nursing skills
Therapeutic nursing interventions: Safety (3.4, 4.3)	<input type="checkbox"/> Performs tasks safely: Analyzes, synthesizes, and evaluates actual or potential safety issues**	<input type="checkbox"/> Performs tasks in a safe manner: Identify actual or potential safety issues	<input type="checkbox"/> Performs tasks in a safe manner	<input type="checkbox"/> Does not perform tasks safely	<input type="checkbox"/> Performance is unsafe in clinical setting

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
Therapeutic nursing interventions: Medication administration (3.4, 4.3)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the process of medication administration**	<input type="checkbox"/> Administers medications using the 5 rights, identifies side effects and therapeutic effects	<input type="checkbox"/> Administers medications using the 5 rights	<input type="checkbox"/> Unable to administer medications using the 5 rights	<input type="checkbox"/> Does not attempt to administer medications using the 5 rights
Therapeutic nursing interventions: Provider of care (3.1, 3.3, 3.5)	<input type="checkbox"/> Provides care for four or more patients	<input type="checkbox"/> Provides care for two patients**	<input type="checkbox"/> Provides care for one patient	<input type="checkbox"/> Unable to provide care for one patient	<input type="checkbox"/> Does not participate in providing patient care
Therapeutic nursing interventions: Initiative in learning skills (3.4, 4.5)	<input type="checkbox"/> Demonstrates initiative in learning new skills: Actively seeks new experiences**	<input type="checkbox"/> Demonstrates initiative in learning new skills	<input type="checkbox"/> Participates in learning new skills as opportunities arise	<input type="checkbox"/> Does not show initiative to learn new skills	<input type="checkbox"/> Does not participate in learning new skills
Therapeutic nursing interventions: Time management (3.4, 3.5)	<input type="checkbox"/> Analyzes personal use of time and makes plan to improve time management skills**	<input type="checkbox"/> Performs tasks in timely manner and uses clinical time to maximize learning	<input type="checkbox"/> Performs necessary tasks during scheduled clinical experience	<input type="checkbox"/> Unable to perform tasks during expected time frame, procrastinates, or misuses clinical time	<input type="checkbox"/> Does not attempt to perform tasks during clinical time
Therapeutic nursing interventions: Integration of the Theory of Nursing for the Whole Person: Ministry to body, mind, spirit (3.1, 3.2, 4.2)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the TNWP in clinical practice**	<input type="checkbox"/> Applies TNWP to clinical practice	<input type="checkbox"/> Identifies and discusses the use of TNWP in clinical practice	<input type="checkbox"/> Unable to identify or discuss the use of TNWP in clinical practice	<input type="checkbox"/> Does not attempt to identify the TNWP in clinical practice
Therapeutic nursing interventions: Sensitivity to the Holy Spirit (3.1, 4.1)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the role of the Holy Spirit in clinical practice	<input type="checkbox"/> Uses sensitivity to the Holy Spirit in clinical practice**	<input type="checkbox"/> Able to identify biblically based work of the Holy Spirit	<input type="checkbox"/> Unable to identify the role or works of the Holy Spirit	<input type="checkbox"/> Does not attempt to identify the role or works of the Holy Spirit
Leadership behaviors: Demonstrates professional roles (2.5, 3.5)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the roles of the nurse	<input type="checkbox"/> Demonstrates roles of the nurse**	<input type="checkbox"/> Identifies the roles of the nurse	<input type="checkbox"/> Unable to identify the roles of the nurse	<input type="checkbox"/> Does not attempt to identify the roles of the nurse
Leadership behaviors: Ability to articulate a vision for nursing practice (4.1, 4.5)	<input type="checkbox"/> Formulates strategy utilizing personal vision and leadership style to promote future career goals	<input type="checkbox"/> Establishes plan for fulfilling personal vision for nursing practice**	<input type="checkbox"/> States preliminary goals for individual nursing practice	<input type="checkbox"/> Unable to express goals for professional growth and development	<input type="checkbox"/> Does not attempt to express goals for professional growth and development

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
Leadership behaviors: Develops goals and influences change (4.1)	<input type="checkbox"/> Analyzes health care setting for needed changes and role as change agent: Implements plan to enact change and evaluates outcomes of actions	<input type="checkbox"/> Critiques health care setting for needed changes and identifies potential goals	<input type="checkbox"/> Describes importance of goals and methods of implementing change to improve health care**	<input type="checkbox"/> Unable to identify goals or changes to improve health care	<input type="checkbox"/> Does not attempt to identify goals or changes to improve health care
Leadership behaviors: Acknowledges personal strengths and weaknesses (4.1, 4.5)	<input type="checkbox"/> Analyzes personal abilities and challenges: Implements and evaluates strategies for personal growth	<input type="checkbox"/> Utilizes personal abilities in nursing practice: Takes action to improve in areas of weakness and implements plan for personal growth**	<input type="checkbox"/> Describes personal abilities and challenges	<input type="checkbox"/> Unable to recognize personal abilities or challenges	<input type="checkbox"/> Does not attempt to recognize personal abilities or challenges
Leadership behaviors: Professional conduct (4.1, 4.5)	<input type="checkbox"/> Well prepared, professionally dressed, and always on time for clinical: Analyzes the importance of professional conduct on nursing practice	<input type="checkbox"/> Well prepared, professionally dressed, and always on time for clinical**	<input type="checkbox"/> Prepared, appropriately dressed and consistently on time for clinical	<input type="checkbox"/> Unprepared, inappropriately dressed, or late to clinical two or more times during the semester	<input type="checkbox"/> Does not attempt to prepare for clinical, be punctual, or dress professionally
Leadership behaviors: Participates in peer review (4.1, 4.5)	<input type="checkbox"/> Performs self/peer evaluation during peer review process	<input type="checkbox"/> Contributes to peer review process**	<input type="checkbox"/> Identifies importance of peer review process	<input type="checkbox"/> Unable to identify importance of peer review process	<input type="checkbox"/> Does not attempt to identify importance of peer review process
Leadership behaviors: Identification of resources to facilitate the meeting of outcomes (4.4)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates usefulness of various resources in health care setting	<input type="checkbox"/> Uses various resources in health care setting**	<input type="checkbox"/> Identifies a variety of resources for use in the health care setting	<input type="checkbox"/> Unable to identify resources to use in health care setting	<input type="checkbox"/> Does not attempt to identify appropriate resources
Leadership behaviors: Promotion of collaboration (2.5, 4.4)	<input type="checkbox"/> Creates a collaborative effort among disciplines or community agencies	<input type="checkbox"/> Outlines a plan to produce a collaborative effort among disciplines or community agencies**	<input type="checkbox"/> Identifies importance of collaboration: Identifies disciplines or community agencies appropriate for collaboration	<input type="checkbox"/> Unable to identify disciplines or community agencies to work on a collaborate effort	<input type="checkbox"/> Does not attempt to identify disciplines or community agencies to work on a collaborate effort

Performance	Exemplary (4)	Competent (3)	Acceptable (2)	Unacceptable (1)	Not Attempted (0)
Leadership behaviors: Open to instruction (4.1, 4.5)	<input type="checkbox"/> Evaluates and incorporates feedback in nursing practice	<input type="checkbox"/> Analyzes feedback and relates it to nursing practice**	<input type="checkbox"/> Clarifies and uses feedback to improve nursing practice	<input type="checkbox"/> Resistant to feedback	<input type="checkbox"/> Denies credibility of feedback
Leadership Behaviors: Attitude of a servant leader (4.1, 4.5)	<input type="checkbox"/> Analyzes, synthesizes, and evaluates the role of servant leader in nursing practice: Evaluates personal performance in role of servant leader	<input type="checkbox"/> Implements role of servant leader: Open to direction from others to improve performance as servant leader**	<input type="checkbox"/> Describes and accepts role of servant leader	<input type="checkbox"/> Unable to describe or does not accept role of servant leader	<input type="checkbox"/> Does not attempt to describe role of servant leader
*Adapted from: PDTCTCJ Scale, © 2000		**Critical behaviors must be met to pass clinical.		Clinical grade:	

NUR 430: PATTERNS OF CHILDBEARING

CULTURAL ANTENATAL CARE PAPER RUBRIC

HEADINGS ARE BOLDED ITEMS BELOW

CRITERIA	4	3	2	1	0	Xwt	pts
1. Culture Choice: Specific culture and rationale for choosing this group uses more than 3 supporting details. Explanation is clear, complete and logical.	Specific culture and rationale for choosing this group uses 3 supporting details. Explanation is clear and logical.	Specific culture and rationale for choosing this group uses 2 or less supporting details. Explanation is clear.	Specific culture and rationale for choosing this group has no supporting details. Explanation is not clear or logical.	Not attempted or information not clearly meeting criteria	1		
2. Explains importance of culturally sensitive nursing care with More than two rationales and synthesizing at least two scholarly resources	Explains importance of culturally sensitive nursing care with two rationales and cites at least one scholarly resource	Explains importance of culturally sensitive nursing care with one rationale and cites at least one resource	Explains importance of culturally sensitive nursing care with no supporting details or resources	Not attempted or information not clearly meeting criteria	2		
3. Synthesizes a variety of nutrition practices during antenatal period and compares/contrasts with antenatal nutrition practices with traditional American practices	Describes a at least two nutrition practices during antenatal period and compares/contrasts with antenatal nutrition practices with traditional American practices	Describes a one nutrition practices during antenatal period and compares/contrasts with antenatal nutrition practices with traditional American practices	Describes one nutrition practices during antenatal period. Does not make any comparisons.	Not attempted or information not clearly meeting criteria	2		
4. Identifies three culture-specific practices (customs) related to the prenatal period and contrasts with US practice and its implications	Identifies two culture-specific practices(customs) related to the prenatal period and contrasts with US practice	Identifies one culture-specific practice (custom) related to the prenatal period and contrasts with US practice	Identifies culture-specific practice (custom) related to the prenatal period	Not attempted or information not clearly meeting criteria	2		
5. In-depth description of the role of the father and extended family members in the childbearing process with three or more details of each. Explains the influence of these relationships on the mother-to-be and child.	Description of the role of the father and extended family members in the childbearing process with two or more details of each. Explains the influence of these relationships on the mother-to-be and child.	Description of the role of the father and extended family members in the childbearing process with one detail of each. Explains the influence of these relationships on the mother-to-be and child.	Superficial description of the role of the father and extended family members with no details	Not attempted or information not clearly meeting criteria	2		

CRITERIA 4	3	2	1	0	Xwt	pts
6. Synthesizes chosen culture's community involvement in the childbearing process. Gives three examples with supporting details	Identifies the community involvement in the childbearing process. Gives two examples with supporting details	Identifies and interprets community involvement in the childbearing process. Gives one example with supporting details	Identifies community involvement in childbearing process.	Not attempted or information not clearly meeting criteria	2	
7. Discuss three nursing interventions in detail that you could implement to specifically assist a childbearing mother/family from your chosen culture to be consistent with her culture's practices in a US setting. Describe why these would be beneficial.	Discuss two nursing interventions in detail that you could implement to specifically assist a childbearing mother/family from your chosen culture to be consistent with her culture's practices in a US setting .	Identifies two nursing intervention that specifically assist the child-bearing mother/family from your chosen culture to be consistent with her culture in a US setting	Nursing interventions are not detailed or do not specifically assist this cultural group in the US setting.	Not attempted or information not clearly meeting criteria	3	
8. Analyze three of the selected culture's child birth practices in relation to a Christian Worldview . Relates all necessary biblical precedents/principles with details.	Discuss two selected culture's child birth practices in relation to a Christian Worldview. Relates all necessary biblical precedents/principles with details.	Discuss one selected culture's child birth practices in relation to a Christian Worldview. Relates all necessary biblical precedents/principles with details.	Discuss one selected culture's child birth practices in relation to a Christian Worldview.	Not attempted or information not clearly meeting criteria	3	
9. Discuss your personal insights and feelings related to information discussed in all items above. Identify a significant concern.	Discuss your personal insights and feelings related to information discussed in all items above.	Discuss your personal insights and feelings related to information discussed in 50% items above.	Discuss your personal insights and feelings related to information discussed in 25% items above.	Not attempted or information not clearly meeting criteria	2	
10. Uses 4 or more appropriate literature and internet resources, correctly cited.		Uses 3 appropriate literature and internet resources correctly cited.		Not attempted or information not clearly meeting criteria	2	
11. Paper is neatly typed with correct spelling and grammar. (two errors or less)	Paper is neatly typed with correct spelling and grammar. (four errors or less)	Paper is neatly typed with correct spelling and grammar. (eight errors or less)	Paper is typed with multiple spelling and grammar errors.	Not attempted or information not clearly meeting criteria	1	

CRITERIA 4	3	2	1	0	Xwt	pts
12. Has identified headings with information complete in each section. Paper is well organized. Creates interest with good flow of subject and appropriate transitions.	Paper is well-organized with good flow of subject and appropriate transitions.	Paper is organized with appropriate transitions.	Paper is organized according to rubric.	Not attempted or information not clearly meeting criteria	2	
13. Language reflects college level vocabulary and sentence structure. Uses appropriate descriptive terminology. Paper presents a professional level document.	Language reflects college level vocabulary and sentence structure. Uses appropriate descriptive terminology.	Language reflects college level vocabulary and sentence structure.	Language, sentence structure, and overall presentation below college level document.	Not attempted or information not clearly meeting criteria	1	
				Total Poss Pts 100/25 to get rubric score of 4.00-0	25	

NUR 499: RESEARCH/SENIOR PAPER II

EVALUATION RUBRIC

Category	4 Exemplary	3 Competent	2 Acceptable	1 Unacceptable	0 Not Attempted	Wt.	Pts Poss	Pts Earn
Abstract	Clearly and concisely presents all necessary elements with good flow and use of professional language		All elements presented accurately and utilizes some professional language			3	12	
Introduction & Background	Introduces topic of interest in a way that captures the attention of the reader with supporting details. Gives a clear, concise, and comprehensive summary of current information relevant to topic of interest, reflecting use of multiple sources. References clearly cited.	Concise summary of current information relevant to topic of interest. References clearly cited.	Brief summary of information relevant to topic.	Citations missing. Statement of personal opinion rather than citing experts or professional literature.		4	16	
	Synthesis of information is evident.	Analysis of information is evident.	Interpretation of information is evident.	Little or no integration of information is evident.		4	16	
Significance	Clear, concise, & comprehensive summary of clinical significance, using data that illustrates current practice issues and desired patient outcomes.	Describes current clinical practice and importance of updating knowledge and practice related to the topic of interest.	Describes clinical practice issues related to topic of interest.	Unclear about significance. Based on personal opinion rather than citing experts or professional literature.		4	16	
Problem Statement	Clear and concise statement identifying the problem to be addressed by the purpose and research question.	Clear identification of the problem to be addressed by the purpose and research question.	Identification of the problem to be addressed by the purpose and research question.	Problem is not clearly identified.		3	12	
Research Questions	Research questions are stated in a PICO format, significant to clinical practice, and guide the research process.	Research questions are significant and pertinent to clinical practice.	Research questions are stated in a PICO format.	Research questions are absent or unclear.		3	12	

Category	4 Exemplary	3 Competent	2 Acceptable	1 Unacceptable	0 Not Attempted	Wt.	Pts Poss	Pts Earn
Purpose Statement	Clear & concise statement of the SRR's purpose using a format that indicates intent to search current knowledge about topic.	Clear & concise statement of the purpose of the SRR.	Clear statement of purpose of the SRR.	Statement of purpose is unclear or absent.		3	12	
Study Variable(s)	Defines and explains the study variable(s) referenced to most scholarly works.	Defines the study variable(s) referenced to scholarly works.	Defines the study variable(s).	Identifies the study variable(s).		3	12	
Methodology: Sources of Evidence	Clearly & concisely identifies the following: <ul style="list-style-type: none"> • Inclusion criteria • Key search words • Sources, databases, websites, etc. Explains rationale for choices.	Clearly identifies the following: <ul style="list-style-type: none"> • Inclusion criteria • Key search words • Sources, databases, websites, etc. 	Identifies two of the following three: <ul style="list-style-type: none"> • Inclusion criteria • Key search words • Sources, databases, websites, etc. 	Unclear about sources of evidence and/or identifies minimal pertinent information.		4	16	
Research Evidence	Comprehensively discusses the following: <ul style="list-style-type: none"> • Currency of evidence • Various types of evidence • Scope of evidence Clear and concise.	Clearly identifies the following: <ul style="list-style-type: none"> • Currency of evidence • Various types of evidence 	Identifies two of the following: <ul style="list-style-type: none"> • Currency of evidence • Various types of evidence • Scope of evidence 	Any one of the following: <ul style="list-style-type: none"> • Outdated evidence • No mention of types of evidence 		4	16	
Scope of Evidence	Reflects a comprehensive review of subject matter. Evidence and rationale for inclusion are clearly and concisely described.	Reflects a comprehensive review of subject matter. Evidence and rationale for inclusion are clearly described.	Reflects an adequate review of subject matter. Evidence and rationale for inclusion are clearly described.	Does not reflect an adequate review of subject matter. Evidence and rationale for inclusion are not clearly described.		4	16	
Findings Table	Synthesis of pertinent evidence, organized in a logical manner.	Analysis of current evidence, systematically organized, & supports change in clinical practice.	Current evidence is systematically organized.	Evidence is inadequate to support change in clinical practice.		6	24	

Category	4 Exemplary	3 Competent	2 Acceptable	1 Unacceptable	0 Not Attempted	Wt.	Pts Poss	Pts Earn
Narrative Discussion of Findings	Compare & contrast current evidence responding to each research question with appropriate citations.	Thoroughly but concisely discuss current evidence in research in relation to SSR's purpose and each research question with appropriate citations.	Identifies current evidence and includes citations.	Discussion is limited in scope and fails to answer research questions and purpose. Citations are lacking.		6	24	
Interpretation of Findings	Succinctly interprets and summarizes the findings of the study.	Accurately summarizes findings in a logical manner	Lists findings of the study.	Attempts to summarize findings are incomplete or illogical		4	16	
Synthesis	Clearly, concisely, and comprehensively discuss research findings, resulting in pertinent statements supported by multiple citations.	Study findings are clearly identified, related to research questions, and analysis is evident.	Study findings are related to the research questions.	Study findings are unclear and do not relate to the research questions.		3	12	
Implications for Nursing Education, Practice, and Research	Clearly and concisely identify how research findings support or influence changes in clinical education, practice, and research.	Implications, derived from study findings, reflect understanding of current research and how findings relate to clinical education, practice, and research.	Identifies implications for nursing education, practice, and research derived from study findings.	Implications are unclear and are not related to study findings.		6	24	
Strengths and Limitations	Clearly and comprehensively addresses strengths and limitations of the study including potential biases to the study.	Addresses some strengths and limitations of the study.	Identifies one or two strengths and limitations of the study	Study strengths and limitations are not identified.		3	12	
Recommendations	Gives clear and comprehensive recommendations for study replication. Also makes recommendations regarding clinical guidelines including presence on topic and if there is a need for updating OR clarifies that no clinical guidelines are available with citations of websites searched.	Gives clear recommendations for study replication. Also indicates evidence of searches for clinical guidelines, citing source & date.	Includes recommendations for study replication. Also, Indicates search for clinical guidelines/yes or no.	Recommendations for study replication are unclear. No mention of existence of clinical guidelines related to topic.		3	12	

Category	4 Exemplary	3 Competent	2 Acceptable	1 Unacceptable	0 Not Attempted	Wt.	Pts Poss	Pts Earn
Conclusions	Clearly and concisely summarize the paper, focusing on key findings and implications for clinical practice. Written so clearly that “conclusion” section could be an “abstract” of the paper.	Clearly summarizes the paper, focusing on key findings and implications for clinical practice.	Summarize the key elements of the paper.	Inadequate summary of key elements of the paper.		3	12	
Reference List	All references listed and matching citations within text.	90% references listed and matching citations within text.	75% references listed and matching citations within text.	50% references listed and matching citations within text.	Missing or unmatched references citations within text.	2	8	
Logical Flow of Ideas	Ideas are presented in a logical manner and transitions are used to link ideas and sections of the paper throughout the entire paper.	Ideas are presented in a logical manner and transitions are used to link ideas and sections of the paper throughout at least 75% of the paper.	Ideas are presented in a logical manner and transitions are used to link ideas and sections of the paper throughout at least 50% of the paper.	Ideas are seldom presented in a logical manner and transitions to link ideas and sections of the paper are generally lacking.		4	16	
Length of Paper	Length of paper does not exceed 20 pages from the beginning of the introduction to the end of the conclusions section.			Length of paper exceeds 20 pages from the beginning of the introduction to the end of the conclusions section.		2	8	
Grammar	No grammatical errors.	No more than 2 grammatical errors.	No more than 3 grammatical errors.	More than 3 grammatical errors.		2	8	
Punctuation	No punctuation errors.	No more than 2 punctuation errors.	No more than 3 punctuation errors.	More than 3 punctuation errors.		2	8	
Spelling	No spelling errors.	No more than 2 errors.	No more than 3 errors.	More than 3 errors.		2	8	
APA Format	No APA format errors.	No more than 2 errors.	No more than 3 errors.	More than 3 errors.		2	8	
Changes	Revises paper as required by good writing methods.			Does not revise paper as required for good writing.		2	8	

Category	4 Exemplary	3 Competent	2 Acceptable	1 Unacceptable	0 Not Attempted	Wt.	Pts Poss	Pts Earn
						91	364	

Faculty _____ Student _____ Final Letter Grade _____

Faculty Signature _____ Student Signature _____ Comments _____

Frequently Asked Questions

Here are some frequently asked questions about ePortfolio and related services.

What is an ePortfolio?

An ePortfolio (electronic portfolio) is a student’s personal website dedicated to presenting a selection of the student’s course work and faculty assessment of that work. It is a secure Internet site. The University collects data from all student ePortfolios to be used in preparing accreditation reports and in evaluating student achievement and the effectiveness of the University’s programs and curriculum.

What is an artifact?

An “artifact” is another name for an assignment that you upload to your ePortfolio. These assignments are required for everyone taking a particular course. Students with ePortfolio accounts turn in the assignment in class and through their ePortfolio.

What is a rubric?

A rubric is a chart used to help a professor assess artifacts fairly and consistently. The left-hand column lists the different criteria being graded. For each criterion, the rubric presents a horizontal breakdown of what qualifies as Exemplary, Competent, Acceptable, Unacceptable, and Not Attempted work. See the sample below.

Criteria	Exemplary	Competent	Acceptable	Unacceptable	Not Attempted
Logical organization of ideas for thesis development	Organizes all ideas in logical sequence for clear thesis development	Organizes most ideas in logical sequence for clear thesis development	Organizes some ideas in logical sequence for clear thesis development	Organizes ideas illogically for thesis development	Does not organize ideas for thesis development
Creativity of expression	Presents the material effectively and creatively with originality	Presents the material effectively and creatively	Presents the material creatively	Presents the material with little creativity	Does not present the material creatively

Rubrics help students to know what is expected of them, and rubrics help professors evaluate students’ work based on clearly defined criteria.

What is Chalk & Wire?

Chalk & Wire is a Canadian educational research-based company that specializes in Internet technology, high-performance networking, and user interface components. ORU has been a research and development partner with Chalk & Wire since February 2003 and is currently utilizing two Internet-based programs (ePortfolio™ and RubricMarker™) as support for the University's electronic portfolio system.

What is assessment?

Assessment is not a grade. Rather, it is your professor's evaluation of the quality of your work when compared with a consistent standard. For instance, if you are submitting an artifact under the Intellectual Creativity student learning outcome proficiency, your professor is assessing how well your work demonstrates your attainment of the criteria chosen by the ORU faculty to be a significant component of Intellectual Creativity.

Why is it possible to receive a Whole Person Assessment that is either higher or lower than my grade for the assignment?

When a professor grades an assignment, he or she takes into account such factors as appropriate format, proper grammar and usage, and acceptable logic, essentially asking the question, "How good is this paper?" When a professor assesses an assignment for ePortfolio, he or she is focusing on the specific criteria on the rubric. In this situation, the professor asks the question, "How well does this paper demonstrate that the student has attained the qualities outlined for this particular outcome or proficiency?" Therefore, a student may write an A paper (a paper that demonstrates technical proficiency and scholarly research) that does not fulfill all of the criteria on the rubric—thus receiving a poor assessment. Or a student may write a C paper (a paper demonstrating technical problems) that completely covers the rubric criteria—thus receiving a high assessment. Therefore, it is very important for students to compose/create their artifact assignments knowing both the criteria for ePortfolio assessment and the criteria for grading. Also, rubrics do not usually include late penalties, etc.

Why do I need to complete a demographic survey when I set up my ePortfolio?

ORU does not discriminate on the grounds of race, color, sex, age, national origin, disability, or veteran status. However, the demographic information that you provide is very useful to us as we analyze our student data. These surveys help us understand our student body so that we can better understand and meet the needs of our incoming students. We also use them to collect data for reporting purposes.

How do I know what artifact is required for each course?

Consult the General Education Whole Person Assessment Handbook available online at wpahandbook.oru.edu for a comprehensive list of all artifacts for general education courses. Also, consult this Behavioral Sciences Department's ePortfolio Handbook on pp. 10-13 for a comprehensive list of artifacts for your Psychology or Social Work Major.

What ePortfolio requirements do I need to complete if I am a transfer student?

You will need to fulfill all applicable ePortfolio requirements for classes taken at ORU. There may be gaps in your ePortfolio from the classes you took elsewhere.

Do I have to complete ePortfolio artifacts if I'm taking summer school or online courses?

Yes. Regardless of the course format, artifacts are still required.

Can I get specific, personal feedback from my professor through ePortfolio?

Yes! When your professor assesses your artifact, you will automatically get a colored bar graph designating how you scored on the various areas listed on the rubric. In addition, your professor has the option to insert specific comments next to each criterion.

Does it matter what I name my artifact?

Currently, the ePortfolio default setting is to give your artifact the name of your document file with X's between the words. (For instance, if your file is named "Honor Code Reflection Paper.doc," it will be given the name of "(HonorXCodeXReflectionXPaper.doc)" unless you rename it. We suggest that you name each artifact clearly so that your professor will be able to distinguish it from other artifacts that are in the same ePortfolio sub-folder.

What will happen if I don't upload my artifacts to my ePortfolio and send them to my professor for assessment?

The consequence for not submitting your ePortfolio artifact is usually a grade penalty (often receiving a zero for that assignment).

Is anyone ever going to look at my ePortfolio?

Many people will look at your ePortfolio over the course of your college career (and beyond). First, every time you submit an artifact to one of your professors, he or she will look at it before assessing it. Second, since your ePortfolio is a bona fide website, you can send the link to friends, family, or future employers as well.

Can I use my ePortfolio after I graduate?

Yes! Students may opt to retain their ePortfolio by paying a yearly \$15 renewal fee to Chalk & Wire. This is a wonderful opportunity for students to create personal portfolios to show potential employers. For more information, contact ePortfolio@oru.edu.

Why can't I upload documents saved in Microsoft Works or WordPerfect?

Artifacts must be uploaded in a format that professors can open and read. ORU's computer network is equipped with Microsoft Office. Thus, documents saved in Works or WordPerfect often do not open or become jumbled when opened in Word. Appropriate file types are as follows: HTML, PDF, Word.

What should I do if my course requires a Pre/Post-Test score but I haven't received one?

Unless otherwise instructed by your professor, you do not need to submit anything for Pre/Post-Test scores. Your professor or teacher's assistant (TA) will upload and assess these scores automatically.

Will I receive an extension if Chalk & Wire is not working on the day that my artifact is due?

It is up to the discretion of the faculty whether students are given extensions for late artifacts. Recently, ORU has upgraded to a new Chalk & Wire server that should have no problem handling the number of hits that the site receives, even at peak times. However, as server difficulties cannot always be forecasted, it is important to get your artifacts submitted early in order to avoid technical glitches.

Do I have to pay an ePortfolio fee every year?

Included in your General Fees will be an initial \$70 fee to activate your Chalk & Wire account during your first year at ORU. The renewal fee, also included in your General Fees, will be \$20 each additional year at ORU.

Should I be receiving administrative emails regarding ePortfolio?

Yes! ORU ePortfolio administrators will occasionally send important emails to the email address that you have listed in your ePortfolio contact information. It is important that you read these emails. If you use an outside email provider, such as Hotmail or Yahoo, you may need to adjust your bulk mail settings to make sure that you receive these emails.

What should I do if I'm not receiving ePortfolio emails?

Check your bulk mail settings to make sure your account will let you receive emails from ePortfolio@oru.edu. If you still cannot receive emails from ePortfolio, contact the ePortfolio Help Line (ePortfolio@oru.edu or 918-495-7356) or go to the IT Concierge Help Desk on LRC 3rd Floor for assistance.

What are the steps for uploading an artifact and sending it for assessment?

There are three main steps in the process. First, the artifact must be uploaded to your ePortfolio. Second, the artifact must be submitted for assessment. Third, you must choose the professor who will assess the artifact. For step-by-step instructions on this process, consult the video instructions at http://www.oru.edu/current_students/my_academics/resources/whole_person_assessment/instructions.php.

Where can I go if I need to scan an artifact and don't have a scanner?

- 2nd Floor (GC) Academic Computing Lab, 8:00 a.m. to 10:30 p.m. most days. There are 8 dedicated ePortfolio computers and scanners, and the staff are helpful.
- The IT Concierge Help Desk (3rd Floor, LRC, next to the Java Stop).
- Ask a fellow student if you can use his or her scanner. Avoid saving scanned items as TIFF files.

How do I know where in my ePortfolio to place my artifact?

It is very important that you upload your artifact into the correct place in your ePortfolio. Each artifact is connected to a certain proficiency/capacity and a specific assessment rubric. Consult the General Education Handbook or the individual artifact description in this handbook to determine the location in your ePortfolio. Most classes that require the submission of an ePortfolio artifact now have a link in the D2L course shell that aids in uploading the artifact to the correct location in your ePortfolio. Always look for this link in your courses to insure that your artifact is being submitted correctly. If you have any questions, please contact your course professor or the ePortfolio Help Line (ePortfolio@oru.edu or 918-495-7356) for assistance.

What if I don't know my professor's name?

Minimize the Internet window that has your ePortfolio open. Open a new Internet browser. Go to www.oru.edu, click on "Academics," then click on "VISION: Enrollment and Registration System." Log in to VISION, click "Student Services and Financial Aid," click "Registration," click "Student Detail Schedule," and choose the correct term. You should then see your entire schedule including your professor's name. When you have obtained the necessary information, log out of VISION, maximize the Internet browser with your ePortfolio, and continue the artifact submission process. [If you are submitting your artifact to a TA, you should follow the instructions given to you in your discussion group. Most TAs share generic Chalk & Wire accounts (for example, "2 BibLit").]

How can I find the results of my professor's assessment of my submitted artifact?

Once you have submitted your artifact for assessment, you can click on the "Menu" button on the main ePortfolio page and choose "Work" and "My Results" to view your assessment scores. There you will see a listing of all artifacts that you have submitted for assessment. You can click on the artifact and choose "View Details" in the drop-down menu to see how you scored on each criterion of the rubric. You can also view your composite results in a dashboard format in VISION by going to "Student Services", "Student Records", and clicking on "Whole Person Assessment Scores".

Can I remove an artifact from my ePortfolio once I have successfully submitted it for assessment?

You should not remove an artifact from your ePortfolio unless (a) you are replacing it with a corrected version of the same document, (b) you have uploaded it in the wrong place and are correcting the error, or (c) you are deleting multiple versions of the same artifact. Your artifacts should remain in your ePortfolio for the duration of your time at ORU. If you remove them, then faculty will not be able to view them, and this may cause problems when your ePortfolio is audited at the end of a semester and prior to graduation.

How do I create my major ePortfolio?

Your major ePortfolio will be automatically created when you submit your first artifact in your major. You can also create other portfolios within your Chalk & Wire account. Follow the video instructions for at ePortfolio.oru.edu and click on “Instructions” to see how you can create portfolios for purposes other than General Education and your major.

Do I need to upload artifacts for electives or classes taken for my minor?

No. You are only required to submit artifacts for your general education classes and for the designated classes in your major.

What should I do when I think I uploaded my artifact correctly but I received communication from ORU that something with my ePortfolio was incomplete?

Follow the directions given in the letter/email/voice message that you received. If you are instructed to contact a specific individual, please do it as soon as you get the message. You are also welcome to contact the individuals monitoring the ePortfolio Help Line at 495-7356 (x7356 on campus) or ePortfolio@oru.edu and ask them to check your status in the Chalk & Wire system. Sometimes there is a problem with your actual ePortfolio account, and in these cases we need to fix it to avoid future problems. Other times, you may have inadvertently missed a step in the process. Often these things can be cleared up quickly and easily.

Where can I go to get ePortfolio help?

- ePortfolio Help Line at x7356 (918-495-7356) or ePortfolio@oru.edu
- IT Helpdesk, 3rd floor LRC, Front Doors
- Assessment Coordinator in your major department
- Website: www.ePortfolio.oru.edu (many helpful resources)
- Your Academic Peer Advisor