

IM 2 Simulated Patient Clinical Video Grading Rubric

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Video: 2

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There are three (3) ways to receive credit for the video:

1. Perform the scenario with all critical elements in each area of the grading tool
2. Verbalize a breach or mistake in real time and provide the nursing intervention to correct the breach or mistake then proceed with the video
3. When reviewing the video, honestly evaluate the nurse. Recognize all (if any) breaches or mistakes, record them as "unmet" and provide a nursing intervention to correct the breach or mistake

Universal Competency	#	Critical Elements	M	U
Safety (physical and emotional)	1	Introduce self		X
	2	Identify patient (2 patient identifiers)		X
	3	AIDET		X
	4	Allergies		X
	5	4 P's		X
	6	Fall Bundle		X
	7	Medication Administration: Medication, dosage, route, reason, assessment of route site(s), medication delivery equipment (IV pump, etc.)		X
Critical Thinking	8	Assessment: See NII for critical elements pertaining to selected assessment(s)	X	
	9	Procedure Assess, Plan, Implement, Evaluate (APIE) (Selection of appropriate equipment, time management, organization, etc.)	X	
Standard Precaution	10	Asepsis:	X	
	11	Hand hygiene		X
	12	Don and change gloves (as indicated)	X	
	13	Clean equipment (stethoscope, pulse ox, bedside table, med tray, etc.)		X
	14	Sterile procedure		X
	15	Medication preparation	X	
Documentation	16	Medication delivery		X
	17	Teach Patient:	X	
	18	Medication	X	
	19	Procedure	X	
	20	Scan patient	X	
	21	Scan each medication & acknowledge/accept	X	
	22	Document assessment findings	X	
Human Caring and Relationship	23	Document procedure	X	
	24	Respect, active engagement, authenticity, empathy, etc.	X	
Professional Role Performance	25	Appearance, preparation, behaviors, resource management, etc.	X	

Comments:

Unmet Items:

1. Time 05:39; Line 3 (AIDET)
Breach: I did not thank patient during AIDET.
Intervention: I should follow the acronym to catch all parts of the introduction and to thank the patient for his cooperation.
2. Time 05:42; Line 11 (Hand Hygiene)
Breach: I did not perform hand hygiene before touching the patient.
Intervention: I should perform hand hygiene immediately upon entering the room to ensure that I do not touch the patient with unwashed hands.
3. Time 06:08; Line 4 (Allergies)
Breach: I did not inquire about allergies for the specific materials and chemicals that I would be using.
Intervention: I should inquire about allergies concerning the specific materials and chemicals that I will be using while I am asking the patient about his medicinal allergies.
4. Time 11:23; Line 13 (Clean equipment)
Breach: I used the table for setting out my medications without cleaning it.
Intervention: I should clean the table before using it.
5. Time 11:49; Line 7 (Medication Safety)
Breach: I did not perform my third check on the medication.
Intervention: I must perform a final check on the medication before administering it. Scanning the medicine does not count as the third check.
6. Time 14:22; Line 16 (Medication Delivery)
Breach: Although I stated that I was flushing with 9 mL of saline, I actually pushed the entire 10 mL. This occurred during both flushes.
Intervention: I need to slow down while flushing to ensure that I do not accidentally push more than 9 mL.
7. Time 15:46; Line 11 (Hand Hygiene)
Breach: After documentation the medication delivery, I failed to perform hand hygiene before touching the patient.
Intervention: I must perform hand hygiene before touching the patient.
8. Time 18:49; Line 11 (Hand Hygiene)
Breach: I did not perform hand hygiene after removing my gloves.
Intervention: I should perform hand hygiene every time that I don or doff gloves.
9. Time 19:16; Line 14 (Sterile Procedure)
Breach: I did not perform hand hygiene before donning my sterile gloves.
Intervention: I must perform hand hygiene before donning gloves, especially the sterile gloves.
10. Time 19:36; Line 14 (Sterile Procedure)
Breach: My exposed skin on the forearm went over the sterile field and one of the sterile gloves.
Intervention: I need to step back and to the side when reaching for my sterile gloves.
11. Time 20:00; Line 14 (Sterile Procedure)
Breach: While I was trying to pick up the sterile glove, I accidentally moved it onto the 1 inch border. Note that the part that touched is technically will be the inside of the glove.
Intervention: I need to ensure that the sterile equipment stays within the sterile field. I should slow down and pick the glove straight up.
12. Time 20:33; Line 14 (Sterile Procedure)
Breach: My sterile glove touched the patient's pillow.
Intervention: I need to position the patient where I have more working room. The pillow should be placed at the edge of the patient's head.

13. Time 22:31, Line 14 (Sterile Procedure)
Breach: I touched the outside of the sterile field package with my sterile gloves.
Intervention: I need to open the sterile field before donning my sterile gloves.
14. Time 22:51, Line 14 (Sterile Procedure)
Breach: The camera moved away from the sterile field.
Intervention: I need to remind the cameraman to stay zoomed out during the sterile procedure.
15. Time 22:51, Line 14 (Sterile Procedure)
Breach: My back turned away from the sterile field while cleaning the IV site:
Intervention: I need to position the table closer and slightly over the patient. I could also perform the cleaning with my left hand to prevent turning too much.
16. Time 23:00, Line 14 (Sterile Procedure)
Breach: I did not let the chlorhexidine dry.
Intervention: I must wait for the chlorhexidine to dry completely before proceeding to the next step.
17. Time 24:14; Line 11 (Hand Hygiene)
Breach: I did not perform hand hygiene after removing my gloves.
Intervention: I should perform hand hygiene every time that I don or doff gloves.
18. Time 26:45; Line 11 (Hand Hygiene)
Breach: I did not perform hand hygiene immediately before exiting the room.
Intervention: I must perform hand hygiene as I leave the room.
19. Time 27:28; Line 1-3 & 5-6
Breach: When reentering the room to apply the CVAD dressing label, I failed to perform multiple tasks required with entering and exiting a patient's room.
Intervention: When entering, I need to introduce myself, perform AIDET, and identify the patient again. When exiting, I should check the 4 P's and Fall Bundle. The abbreviated conversation for the second encounter did not address all of these items as thoroughly as the first time that I entered the patient's room.

Additional Comments:

1. Time 01:19; Line 13
I did not place a towel in the med tray. Although this step is optional, I should add the towel as an extra barrier against contamination.
2. Time 03:20; Line 10
Gloved hand is very close to touching the blunt fill needle while filling the vial. I should hold the vial away from the palm of my hand to prevent this potential source of contamination.
3. Time 06:48
I did not raise the bed before performing the vital signs. I should raise the bed to a proper working height to prevent potential back injury.
4. Time 10:53
I did not give the patient an opportunity to ask questions about the medication. I should specifically ask the patient if he has any questions or concerns before I administer the medication.
5. Time 10:57, Line 5 (4 Ps)
I walked away from the patient with the side rail down. I should either tell the patient to stay put or raise the rail before walking away. This also occurred at the following times: 17:54 and 18:26.
6. Time 14:00; Line 25 (Professional Role Performance)
I squirted saline on the patient's gown. I should have moved away from the patient before taking out the air out of the saline flush. I should pull back on the seal before pushing it forward. Also, I should have offered to change the patient's gown.

7. Time 17:11
I do not check to see if the patient was prepared for the procedure. I should ask the patient if they are comfortable and if they need to use the restroom before starting the procedure.
8. Time 20:53
I said that the IV site looked good but should have said that it did not appear red, inflamed, nor purulent.
9. Time 23:00
I was very close to leaning over my sterile field. I should stand up straight to avoid this potential breach.
10. Time 23:59
I crumpled up the label and threw it away. I should preserve the label to avoid having to get another one.
11. Time 24:04
I finally palpated the dressing for tenderness. This step should have been done earlier. If there was tenderness, I might have to remove the newly changed dressing.
12. Time 24:25
I removed the mask after cleaning up. I should take the mask off the patient as soon as it is safe to do so.