

PROJECT Grading Rubric

N405 Leadership and Management in Nursing – Fall 2011 – On-Line Course

Lakeview College of Nursing

Name: <i>Michael Kruse</i>	Due: Saturday, October 15th, 2011 Submitted: Date: <i>10/11/11</i> Time: AM PM	Total Score <i>97%</i> <u>90</u> / 100 + 7 bonus points
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Objective	Emerging	Mastering	Score	Comments
1) Identifies and summarizes the problem/question at issue (and/or the source's position). 15pts	Does not identify and summarize the problem, is confused or identifies a different and inappropriate problem. Does not identify or is confused by the issue, or represents the issue inaccurately.	Identifies the main problem and subsidiary, embedded, or implicit aspects of the problem, and identifies them clearly, addressing their relationships to each other. Identifies not only the basics of the issue, but recognizes nuances of the issue.	15	
2) Identifies and presents the STUDENT'S OWN hypothesis, perspective and position as it is important to the analysis of the issue. 15pts	Addresses a single source or view of the argument and fails to clarify the established or presented position relative to one's own. Fails to establish other critical distinctions.	Identifies, appropriately, one's own position on the issue, drawing support from experience, and information not available from assigned sources.	15	<i>Good use of experiences w/ House Super. & Case mgr. - superficial though - application or details relevant to topics.</i>
3) Identifies and considers OTHER salient perspectives and positions that are important to the analysis. 10pts	Deals only with a single perspective and fails to discuss other possible perspectives, especially those salient to the issue.	Addresses perspectives noted previously, and additional diverse perspectives drawn from outside information.	10	<i>Good references</i>
4) Identifies and assesses the key assumptions . 15pts	Does not surface the assumptions and ethical issues that underlie the issue, or does so superficially.	Identifies and questions the validity of the assumptions and addresses <u>the ethical dimensions</u> that underlie the issue.	14	<i>No discussion re: ER MD perspective or Primary Care MD - who's responsible for pt. in CPU?</i>

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5) Identifies and assesses the quality of supporting data/evidence and provides additional data/evidence related to the issue. 10pts	Merely repeats information provided, taking it as truth, or denies evidence without adequate justification. Confuses associations and correlations with cause and effect. Does not distinguish between fact, opinion, and value judgments.	Examines the evidence and source of <u>evidence</u> ; questions its accuracy, precision, relevance, completeness. Observes cause and effect and addresses existing or potential consequences. Clearly distinguishes between fact, opinion, & acknowledges value judgments.	8	Did not cite TSC reference re: requirement to provide same level of care. What ED volumes, hospital bed size in studies reviewed - need that to consider application to your clinical site.
6) Identifies and considers the influence of the context * on the issue. 15pts	Discusses the problem only in egocentric or sociocentric terms. Does not present the problem as having connections to other contexts-cultural, political, etc.	Analyzes the issue with a clear sense of scope and context, including an assessment of the audience of the analysis. Considers other pertinent contexts.	13	Superficial & regurgitation of source info.
7) Identifies and assesses conclusions, implications and consequences . 20pts	Fails to identify conclusions, implications, and consequences of the issue or the key relationships between the other elements of the problem, such as context, implications, assumptions, or data and evidence.	Identifies and discusses conclusions, implications, and consequences considering context, assumptions, data, and evidence. Objectively reflects upon their own assertions.	15	Your PICOT was very confusing and did not follow correct format

P: ER patients meeting admission criteria for OBSERVATION

I: Use of an Observation Unit to decompress ER.

C: ER throughput with and without OBS unit

O: Reduced length of stay in ER, ↑ Pt. Satisf., ↑ ER staff sat.

You needed to apply your research findings to your clinical site to achieve higher score and fully meet the Project guidelines.