

AssCE* - Discussion support for assessment

Utbildning

Nursing programme, 180 hp

Kurs

Gerontological and geriatric nursing, 9 points

Semester 4

Content

| AssCE | E* basis for clinical placement (VFU) | 3 |
|---------|--|----|
| Instruc | ctions for Using the AssCE Form at Undergraduate Level | 4 |
| Purj | pose of the AssCE Form | 4 |
| | e AssCE Assessment Form | |
| Plar | nning Meeting | 4 |
| | ring the Clinical Placement | |
| Mid | d-Placement Discussion (HD) | 4 |
| Fina | al Assessment Discussion (AB) | 5 |
| | here is a risk of failing | |
| Assess | sment tool AssCE* | 7 |
| I. | Communication and teaching | 7 |
| II. | The nursing care process | |
| III. | Examinations and treatments | 13 |
| IV. | Management and co-operation | 15 |
| V. | Professional approach | 17 |
| Mid | d-course discussion and final assessment | |
| Atte | endance report | 21 |



AssCE* basis for clinical placement (VFU)

Nursing programme at School of Health and Welfare - Basic level

| Students name | Personal identity number |
|--|--------------------------|
| | |
| Course | Care unit |
| Gerontological and geriatric nursing, 9 hp | |
| | |
| Time period | |
| | |

| Mandatory | Date | Signature |
|--|------|----------------------|
| | | Signature student |
| Participated in all Activities during the Clinical Placement | | Signature student |
| Learning Plan for Clinical Placement submitted to the | | Signature supervisor |
| supervisor | | |

| Written self-assessment before discussion is executed | | |
|---|-------------------|----------------------|
| Before mid-course discussion (MC) | Signature student | Signature supervisor |
| Before final assessment (FA) | Signature student | Signature supervisor |

| Summary of goal achievement at MC and FA regarding assessed factors for the course (16 factors total) | Number s at MC | Number s at FA |
|---|-------------------|-------------------|
| Number of factors with: Inadequate achievement of goals | | |
| Number of factors with: Good achievement of goals eller Very good achievement of goals | | |
| Signature supervisor: | | |

| In case of insufficient goal achievement in one or more factors during the clinical assessment in mid- course discussion | Date | Signature |
|--|------|--|
| Contac teacher is contacted | | Signature supervisor |
| An Individualized Educational Action Plan has been developed It is made by a student and supervisor | | Signature supervisor Signature student |
| it is made by a student and supervisor | | Signature student |
| In case of insufficient goal achievement in one or more factors during the clinical assessment in final assessment | Date | Signature |
| | | Signature supervisor |
| Contac teacher is contacted | | 8 |
| Contac teacher is contacted An Individualized Educational Action Plan has been developed | | Signature supervisor |



Instructions for Using the AssCE Form at Undergraduate Level

Purpose of the AssCE Form

The purpose of the AssCE form is to serve as a support and tool for assessing students' professional development during clinical placement. Each course in the nursing program has specific learning outcomes outlined in the syllabus, and it is these outcomes that should be examined and graded.

The AssCE Assessment Form

The AssCE form is based on various official documents relating to the nursing degree and the scope of practice for nurses. The 21 assessment factors are grouped into five areas and exemplify how the learning outcomes of each course can be translated into nursing practice. The learning outcomes are often described more generally and multidimensionally, and the content of the AssCE form can serve as a support, by exemplifying and clarifying the intended learning outcomes in a more concrete way. In the earlier courses of the nursing program, not all factors are included in the assessment — some are crossed out. At the end of the program, the student is assessed based on all factors.

Each factor in the AssCE form includes a description designed as assessment criteria in relation to *Good goal achievement* and *Very good goal achievement*, but these should be seen as examples. The assessment should be based on how well the student has achieved the objectives for each factor. If one or more AssCE factors are difficult to assess, this should be discussed and reflected upon between the student and the supervisor, in order to evaluate the theoretical knowledge in relation to clinical practice. To support this process, supervisors are encouraged to contact the course's clinical placement coordinator.

To assist in grading the students' development for each factor, there is a line scale with markings, and there is also space for comments. Indicate whether the comments are written during the Mid-Placement Discussion (HD) or the Final Assessment Discussion (AB).

Assessing students' knowledge and understanding, skills and abilities, as well as their judgment and professional approach is a shared responsibility among students, supervisors, and teachers. To allow students to develop in all of these areas, planning and follow-up are required. Each clinical placement period should follow a structured process with an initial planning meeting, a mid-point review, and a final assessment discussion.

Planning Meeting

At the beginning of the placement, the student and supervisor should have a meeting where the student's prior knowledge, experience, and expectations are discussed, and the supervisor presents their plan and expectations for the placement. The meeting should result in an overall plan for how the student is to achieve the learning outcomes of the placement. The student's learning plan, the factors in the AssCE form, and the course syllabus learning outcomes should serve as a foundation.

During the Clinical Placement

The clinical placement should be characterized by ongoing dialogue between the supervisor and student about the student's development. This dialogue should be a natural part of supervision, and students should receive frequent feedback on their performance. Feedback is essential for continued development and provides an opportunity for students who need more practice in certain areas to become aware of this.

Mid-Placement Discussion (HD)

The mid-placement discussion takes place halfway through the clinical placement. Before the discussion, both the student and supervisor should reflect on the time spent on placement so far. Discuss situations that have been challenging as well as those that have gone well. As part of the supervisor's preparation, input and comments should be gathered from colleagues who have interacted with and supervised the student during the placement.

The students should take an active role in the discussion. The discussion may focus on one or several concrete situations related to the factors and assessment criteria. The supervisor gives their feedback and relates it to concrete situations, but only after the student has shared their reflections and viewpoints.

The mid-placement discussion should be signed by the supervisor on the second-to-last page of the AssCE form. The students should receive clear feedback on strengths and areas for improvement in relation to the assessment criteria.



Final Assessment Discussion (AB)

The final assessment discussion is prepared for and conducted using the AssCE form as a basis. The student must prepare for the assessment by completing a self-assessment in a separate AssCE form. To prepare for the discussion, the student should write down examples of situations that support their self-assessment. The supervisor prepares for the discussion by marking each factor in the AssCE form on which the final assessment will be based. The supervisor should also gather input from colleagues who have had contact with and supervised the student during the placement. The student should take an active role in the discussion and base it on their self-assessment. The discussion may focus on one or several specific situations that relate to the assessment factors and criteria.

The discussion is summarized in an assessment that is documented in the assessment form. All participants sign the document with both signature and printed name. The teacher is responsible for determining the final grade based on the supervisor's input (Swedish Higher Education Authority, 2008). All pages of this document must be scanned into one file, along with the *Matrix of Performed Activities*, and uploaded to the course's Canvas space. The student is responsible for doing this no later than one week after the end of the clinical placement.

If there is a risk of failing

If the supervisor identifies difficulties with the student's ability to meet the learning outcomes and there is a risk of failure, the supervisor must immediately inform the student and contact the teacher responsible (the name is listed in the Clinical Placement Handbook for each course). Together with the students, an **Individual Educational Action Plan** must be established (see separate document) for the learning outcomes assessed as *Insufficient goal achievement*. The individual plan should be continuously evaluated by the student and supervisor. The plan must be submitted on the Canvas platform as soon as it has been established, and the student is responsible for this.



Basic level Learning outcomes for the clinical education of the nursing programme

| Learning outcomes for the clinical education of the nursing programme | | | |
|--|---|---|--|
| Year 1 Knowledge and understanding | Year 2 Knowledge and understanding | Year 3 Knowledge and understanding | |
| Is able to identify and describe the patient's situation and functions, as well as the physical, mental and social factors of importance in the context. Is able to define fundamental concepts, such as integrity and holistic view. | Demonstrates knowledge of current research and development work. Is able to account for and explain the theoretical background of patients' symptoms and manifestations of illness and relate these to the need for basic and specific nursing care. Demonstrates knowledge of laws and ordinances. | Shows knowledge of the scientific foundations as well as research and development issues of importance to the area. Shows knowledge of how to plan, lead and co-ordinate nursing work. Shows knowledge of the health and medical care system's requirements in society and regulation in laws and ordinances. | |
| Skills and abilities | Skills and abilities | Skills and abilities | |
| Is able to carry out basic personal care and show consideration for the patient's needs and wishes. Has the ability to prevent infection and the spread of infection. Can apply professional secrecy. | Has the ability to observe, plan, attend to and document the patient's basic and specific nursing care needs in co-operation with the patient and family/ friends. Demonstrates the ability to carry out nursing care based on relevant scientific and ethical principles. Has the ability to observe and counteract complications in relation to care and treatment. Is able to inform about and ensure the patient's security and well-being during examinations and treatments. Is able to work with medical devices and take part in examinations and treatments regulations. Is able to manage medications in an appropriate manner. Is able to give suggestions for quality-promoting measures. Is able to plan and carry out work in a structured manner. | Is able to assess, plan, carry out and evaluate patient care independently and in co-operation with the patient and family/friends. Is able to independently initiate health-promoting and preventive measures in care of the patient. Observes risks and has the ability to predict consequences and rectify with preventive measures. Demonstrates the ability to assess the need for and initiate improvements in methods and quality assurance. Has the ability to take in information and convey information to others. Can formulate and solve problems as well as carry out assignments within given time limitations. Is able to use his/her abilities in new situations. | |
| Judgement and approach | Judgement and approach | Judgement and approach | |
| Demonstrates the ability to see the patient as an individual. Demonstrates his/her commitment and interest. Demonstrates good judgement in his/her conduct. | Demonstrates the ability to acquire information from different areas and to consider different aspects prior to taking a decision on patient care. Demonstrates good judgement and insights into ethical issues in delicate situations. | Is able to identify difficult situations and discuss various solutions. Is able to see the nurse's role in the interprofessional team. Demonstrates good judgement, insight and consideration in his/her conduct and standpoints. | |

From the examination description in the Higher Education Ordinance (SFS 1993:100). Revised for the clinical education parts of the nursing programme.



Assessment tool AssCE* for the clinical education parts of the nursing programme

Assessment of professional development factors during the clinical education parts of the nursing programme, basic level. The assessment is to be carried out in relation to the level of instruction and learning outcomes for the course in question. If the student or supervisor does not believe that "Good achievement of goals" has been reached or marks "Inadequate achievement of goals" on the scale for any individual factor at the mid-course discussion or the final assessment, the reason for such an assessment shall be given in the space provided for "Comments". Please indicate, using the abbreviations that follow, whether the comment was written at the mid-course discussion (MD) or at the final assessment (FA).

I. Communication and teaching

- identify the needs of support for frail older persons and their relatives in different care contexts
- demonstrate an ethical approach, in communicating with older persons and their relatives in a changing life situation, with a focus on person-centered care

| Communication and interaction with patients | | | | |
|---|--|--|--|--|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals | | |
| | Communicates with patients in an engaged manner. Listens. Shows respect and empathy. | Adapts communication to the patient's needs, e.g., in cases of communication difficulties. Gives the patient adequate room in the dialogue. | | |
| | | | | |
| Comments: | | | | |
| | | | | |
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| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goal |
|---------------------------------|---|--|
| | Communicates with and listens to the viewpoints of family/friends. Shows respect and empathy. | Creates a dialogue with family/friends and treats their viewpoints with respec |
| | + + | 1 1 |
| omments: | | |

| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
|---------------------------------|--|--|
| | Communicates, consults and confers with others. Ensures continuity in the patient's chain of care. | Collects, discusses, and critically evaluates relevant information with various authorities and co-operates so as to ensure appropriate patient care. Provides correct information to appropriate authorities. |
| Comments: | 1 1 | |



| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
|---------------------------------|--|---|
| | Identifies individual needs. Organizes and carries out planned instruction. Adapts information and instructions for self-care. Provides health-promoting and preventive advice and support as well as follows up on understanding. | Ensures that the patient and family/ friends receive co-ordinated and continuous information and instruction based on their needs and wishes. Uses various aids and techniques creatively. |
| Comments: | 1 1 | 1 1 |



| nadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
|--------------------------------|--|--|
| | Demonstrates the ability to seek out and consey information on the patient, situation and case problems. Informs about his/her own intended educational outcomes. Teaches and supervises upper secondary students, classmates or equivalent. | Critically evaluates information concerning various care issues and conveys it in an interesting manner. Teaches and supervises with a view to facilitating development and knowledge growth. |
| | | |
| omments: | | , |

II. The nursing care process

- identify, initiate, implement, and evaluate health-promoting and preventing interventions for frail older persons through team collaboration
- identify the needs of support for frail older persons and their relatives in different care contexts

| 6. Describes patients' nursing care needs | | |
|---|---|---|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
| | Identifies individual needs, resources and risks. Applies interview methods. Uses relevant measurement devices. | Appraises the patient's need for care in complex situations, even with limited information, and in relation to resources and risks. Uses a variety of sources in data collection. Reflects on methods used. |
| Comments: | I I | |



| 7. Plans and prioritizes nursing care interventions | | |
|---|---|---|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
| | Analyses and reflects on what needs to be done. Plans the patient's care, together with the patient, according to existing problems, risks and resources. Explains why certain interventions are taken. | Plans and discusses necessary priorities with the patient. Discusses the care plan with the supervisor and other nursing staff. |
| Comments: | 1 1 | |

| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
|---------------------------------|--|--|
| | Carries out planned interventions on his/her own. Provides care in a knowledgeable and thoughtful manner. Applies theoretical knowledge in practical situations. Adapts care interventions to the patient's situation. | Takes the initiative in adapting care interventions. Relates care intervention to both best practice and research. Reflects on previously provided care and suggests alternatives when needed. |
| | 1 1 | + + |
| omments: | | |



| 9. Follows up needs/problems and nursing care interventions | | |
|---|--|--|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
| | Asks the patient how things are going or lets the patient participate in another way. Follows up the status of care, signs of change or stability and the results of interventions taken. Makes suggestions for care plan alteration when changes occur. | Systematically follows up provided care by asking the patient how things are going or how he/she feels and takes the initiative in carrying out interventions when needed. Reacts quickly to changes. |
| Comments: | 1 1 | 1 1 |
| | | |

| 10. Reports, documents and record-keeping | | |
|---|---|---|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
| | Is objective and correct in his/her speech and writing. Accounts for and relates interventions to the patient's situation. Reads the patient records. | Sees connections and reflects on the patient's wishes concerning care, developed care goals and provided care. Reports appropriately and documents important matters. Documents information from different sources quickly and accurately. |
| I I | 1 1 | + + - |
| Comments: | | |
| | | |
| | | |



III. Examinations and treatments

- identify, initiate, implement, and evaluate health-promoting and preventing interventions for frail older persons through team collaboration
- identify the needs of support for frail older persons and their relatives in different care contexts
- demonstrate such professional proficiency that no person's health or safety is prejudiced.

| 11. Participates in and carries out examinations and treatments | | |
|---|---|---|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
| | Plans, observes and follows up the patient's care in connection with examinations and treatments. Monitors the patient's safety and well-being. Manages material and equipment with confidence and asepsis. | Plans and assumes responsibility for examinations and treatments being carried out in a way that is expedient for and considerate to the patient. Adapts performance of examinations and treatments to the patient's situation and needs. Manages material with insight and asepsis. Demonstrates knowledge of procedures and necessary precautions. |
| Comments: | 1 1 | 1 1 1 |



- administer medicines, evaluate, report and keep records of the effects and side effects in accordance with applicable legislation under supervision
- identify the needs of support for frail older persons and their relatives in different care contexts
- demonstrate such professional proficiency that no person's health or safety is prejudiced.

| 12. Administers medications | | |
|---------------------------------|--|---|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
| | Demonstrates knowledge and thoroughness in handling medication. Informs the patient about the medication effects and side effects. | Demonstrates the ability to systematically follow up and evaluate treatment involving medication. Informs the patient about the medication effects and side effects in a way that is appropriate to the patient. |
| Comments: | 1 1 | 1 1 |
| | | |



Management and co-operation IV.

| 13. Plans, organizes, allocates and follows up on work assignments | | |
|--|--|---|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
| | Works systematically. Co-ordinates and procitizes various efforts. Demonstrates awareness of costs and quality. | Demonstrates the ability to plan and organize appropriate patient care. Leads nursing work. Allocates and follows up on work assignments. |
| Comments: | | |
| | | |

| | es a positive attitude Demonstrates the ability to engage in |
|--|---|
| different properties of the di | nwork. Co-operates with offessional groups. es awareness of fundamental rules. Listens to the of others. dialogue and to co-operate with other professional groups in work development. |
| + + + | + + + + + |



| 15. Readiness to act | | | |
|---------------------------------|---|--|--|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals | |
| | Takes the initiative. Behaves appropriately in unexpected situations. Adapts his/her working pace to the task. | Acquires information, manages and takes action in complex, unexpected and emergency situations. Demonstrates the ability to evaluate experiences after the fact and in co-operation with others. | |
| Comments: | | | |
| | | | |

demonstrate such professional proficiency that no person's health or safety is prejudiced.

| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals |
|---------------------------------|--|--|
| | Demonstrates the ability to apply his/her knowledge in order to manage situations that could jeopardize safety, e.g., infection risks, fall risks, complications, misunderstandings. | Demonstrates up-to-date knowledge regarding harm caused by medical errors and submission of incident reports within his/her area of specialization. Able to account for existing ordinance and is familiar with safety issues unde discussion both locally and nationally. |
| | 1 1 | 1 1 |
| Comments: | | |



V. Professional approach

| 17. Scientific awareness | | | |
|---------------------------------|---|---|--|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals | |
| | Demonstrates a reflective and analytical ability. Demonstrates willingness to seek out and spread new knowledge. Shows an interest in using results from research and development work in current activities. | Demonstrates knowledge of the connection between science and well-tried experience and the importance of this connection to professional practice. Demonstrates a structured working method; evaluates and reconsiders thoughts, ideas and interventions. | |
| Comments: | 1 1 | 1 1 | |
| | | | |

reflect on how personal and societal values on older persons can influence nursing care and reflect on ethical dilemmas that may arise

| 18. Ethical awareness | | | | |
|---------------------------------|---|--------------------------------|--|--|
| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goals | | |
| | Demonstrates care and respect for the patient's independence, integrity, and social and cultural situation. Demonstrates openness, courage and consideration in regard to different values. Demonstrates the ability to situations and weigh in release aspects, such as the patient dence, informed consent are nursing staff's reasons for in points in the situation. Proving a deliberate manner and stand up for the basic value profession and health care. | | | |
| Comments: | 1 1 | 1 1 1 | | |



- reflect on how personal and societal values on older persons can influence nursing care and reflect on ethical dilemmas that may arise justify an evidence-based person-centered approach, in nursing care for frail and multi-ill older persons.
- demonstrate such professional proficiency that no person's health or safety is prejudiced.

| 19. Self-knowledge | | | | | |
|--------------------------------|---|---|--|--|--|
| nadequate achievement of goals | Good achievement of goals Very good achievement of | | | | |
| | Is able to criticice him-/herself. Recognizes his/her own strengths and limitations. Shows responsibility for his/her own learning and development. | Demonstrates the ability to see him-/herself in perspective and to work on personal strengths and limitations relevant to professional practice. Demonstrates the ability to identify the need for additional knowledge. | | | |
| Comments: | | | | | |

- demonstrate such professional proficiency that no person's health or safety is prejudiced.

| nadequate achievement of goals | Good achievement of goals | Very good achievement of goal | |
|--------------------------------|---|--|--|
| | Finds and follows regulations and guidance documents. Demonstrates thoroughness and judgement in planning and carrying out care and in contacts with patients, family/friends and other professional groups. Prioritizes and completes obligations. | Demonstrates great thoroughness, judgement and insight into how care work should be accomplished. Serves as a model for others in his/her professional practice. | |
| | | | |
| omments: | | | |



| Inadequate achievement of goals | Good achievement of goals | Very good achievement of goa |
|---------------------------------|---|---|
| | Demonstrates insight and takes initiative within his/her own area of responsibility. Discusses and justifies his/her actions. | Demonstrates the courage to stand up for and work according to current knowledge and his/her own standpoint Demonstrates his/her willingness to contribute to development of the profession and organization and to take the initiative in co-operation with other professional groups. |
| | | |
| omments: | | |



Mid-course discussion and final assessment

| Date of mid-course discussion | |
|-------------------------------|------------|
| | |
| | |
| Student's signature | Print name |
| | |
| Supervisors signature | Print name |
| | |
| Clinical lecturer's signature | Print name |
| Comments: | |
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| Date of final assessment | |
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| Student's signature | Print name |
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| Supervisors signature | Print name |
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| Clinical lecturer's signature | Print name |
| Comments: | |
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Attendance report

- To pass the clinical placement, the student must complete a minimum of 16 work shifts.
- Clinical placement days should be scheduled over four days per week (preferably Monday to Thursday). Placement should not be scheduled on Fridays due to campus-based activities. Weekend shifts may occur, but hours must not be compressed.

| Traine of supervisor | | | Clinical practice site | | | |
|------------------------|--|---------------------------|------------------------|-----------|-------------|--|
| Clinical practice site | | | | | | |
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| Stude | ents name | | Ye | ar 🗖 Sı | Spring Fall | |
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| Social | Social security numberSemester (2, 3, 4, 5, 6) | | | | | |
| Day | | Notes | Time | Students | Supervisors | |
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| Total | work shifts durin | ng your clinical placemen | | | | |