



LOMA LINDA UNIVERSITY  
School of Allied Health Professions

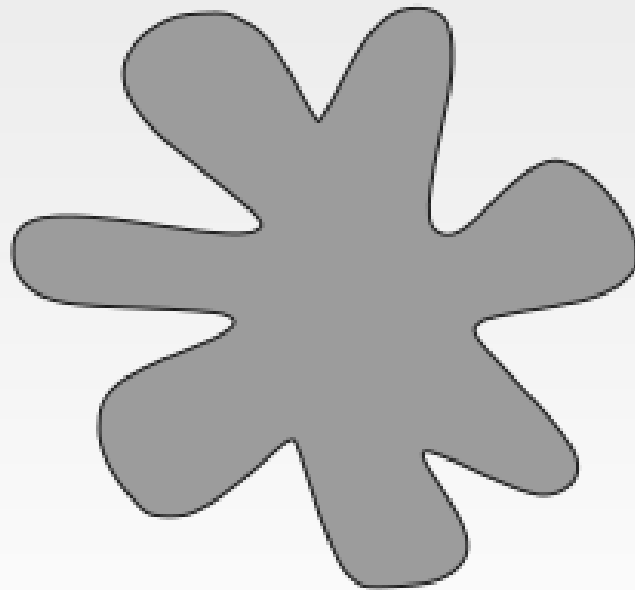


# Electronic Competency: Can we develop it for FREE!?

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**Asst. Clinical Professor**

Department of Cardiopulmonary Sciences  
School of Allied Health Professions  
Loma Linda University





# Disclosure

I don't have any..



# Objectives

- Define clinical competency, clinical evaluation .
- Describe the database system.
- Define and understand Inter-rater reliability.
- Explore Loma Linda University available programs/application for faculty to use for their courses.



# What is Clinical Competency/Procedure Check off

- Satisfactory.
- Unsatisfactory.



After a pulse is found, a blood sample is taken from the artery

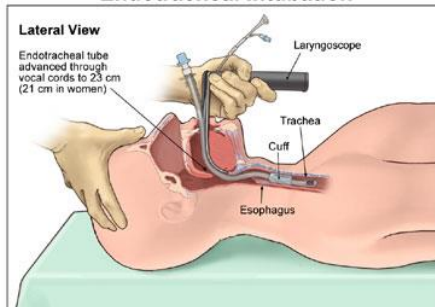
ADAM  
ADAM



### Endotracheal Intubation

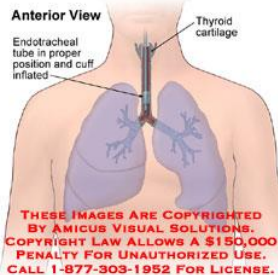
#### Lateral View

Endotracheal tube advanced through vocal cords to 23 cm (21 cm in women)

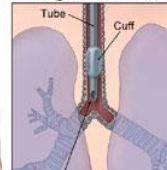


#### Anterior View

Endotracheal tube in proper position and cuff inflated



#### Enlarged Anterior View



Endotracheal tube inserted to 23 inches and cuff inflated

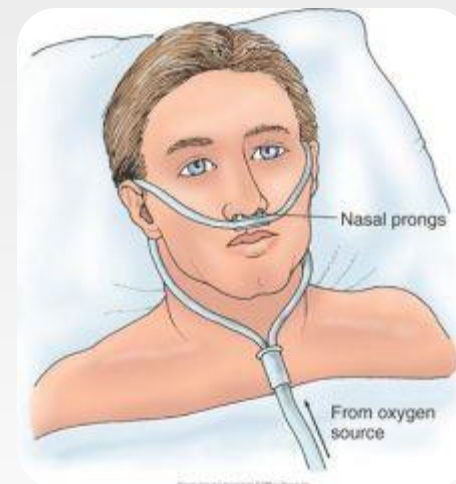
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Nasal prongs

From oxygen source

Illustration of a patient with nasal prongs and an oxygen source.



> RSTH391\_30397 > Files

RESP CARE PRACTICUM I (30397)

Clinical Competency  
book\_2013\_Canvas.docx

Clinical SOAP guide.docx

Clinical Syllabus  
2014\_winter2014.docx

Juniors2014.xlsx

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School of Allied Health profession-  
Cardiopulmonary Department.

Date: _____		Site: _____	Times performed: _____
Suctioning Competency			
1	Check chart. (MD order, History & Physical, Progress Note)	S or U	
2	Gather all appropriate equipment and medication	S or U	
3	Wash hands. Put on gloves.	S or U	
4	Introduce self to patient and family. Check patient ID band and second identifier. Explain procedure.	S or U	
5	Position patient. Obtain heart rate, respiratory rate, breath sounds, pain assessment, peak flow if applicable, note patient appearance and work of breathing.	S or U	
6	Oxygenate patient. Use aseptic technique. Lavage airway if needed. Lubricate catheter as needed. Advance catheter until resistance met. Withdraw catheter 1 cm. Apply suction for 10-15 seconds while withdrawing and rotating catheter. Discontinue if adverse reaction occurs.	S or U	
7	Oxygenate patient. Assess need for further suctioning.	S or U	
8	Properly dispose of equipment.	S or U	
9	Obtain heart rate, respiratory rate, breath sounds, pain assessment, peak flow if applicable, note patient appearance and work of breathing.	S or U	
10	Assure patient is stable and as comfortable as possible.	S or U	
11	Wash hands.	S or U	
12	Chart treatment.	S or U	

RCP Preceptor/Clinical Instructor Name:



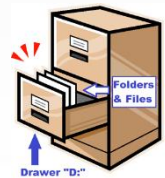
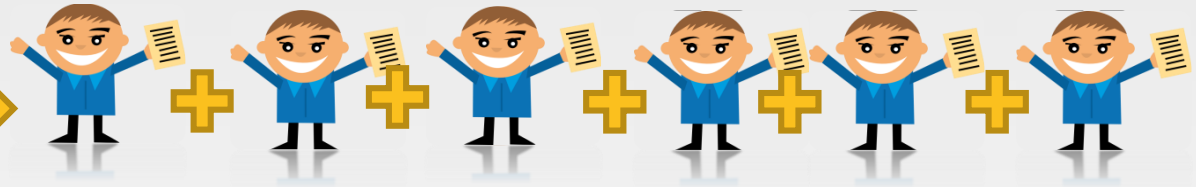
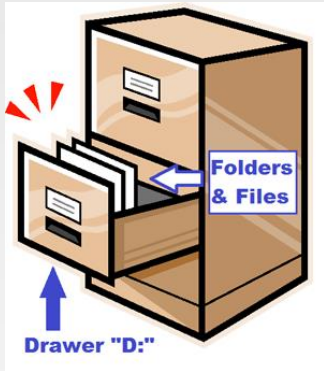
# Clinical Evaluation

- Performance:
  - Below Average.
  - Average.
  - Above Average.
  - N/A
- Likert Scale (1-5).
- Rubric.



# Check lists

- Evaluation (**Blue sheet**).
- Metered Dose Inhaler ( **Light Blue** ).
- Dry Power Inhaler (**Yellow**).
- Oxygen Therapy (**Dark Red**).
- Chest Physical Therapy (**Orange**).
- Suctioning (**Purple**).
- Arterial Blood Gas Puncture ( **Light Yellow** ).
- MedNeb (**Green**).
- Clinical Competency Book General Care (Floors).
- Clinical Competency Book Critical Care.
  - Vents, Advanced Procedures, Transport, HBO, Intubation, Extubation.....etc.
  - 105 pages.





# How we used to do it! – Evaluations + S.O.A.P

## Class of 2014:

- 10 weeks X 2 Clinical days/week = 20 days /student.
  - 20 students X 20 evaluation papers = 400 evaluation papers.
  - 20 students X 20 S.O.A.P note = 400 notes to grade.
  - $400 + 400 = 800$
  - $800 \times 80 = 64000$

**64000!!**



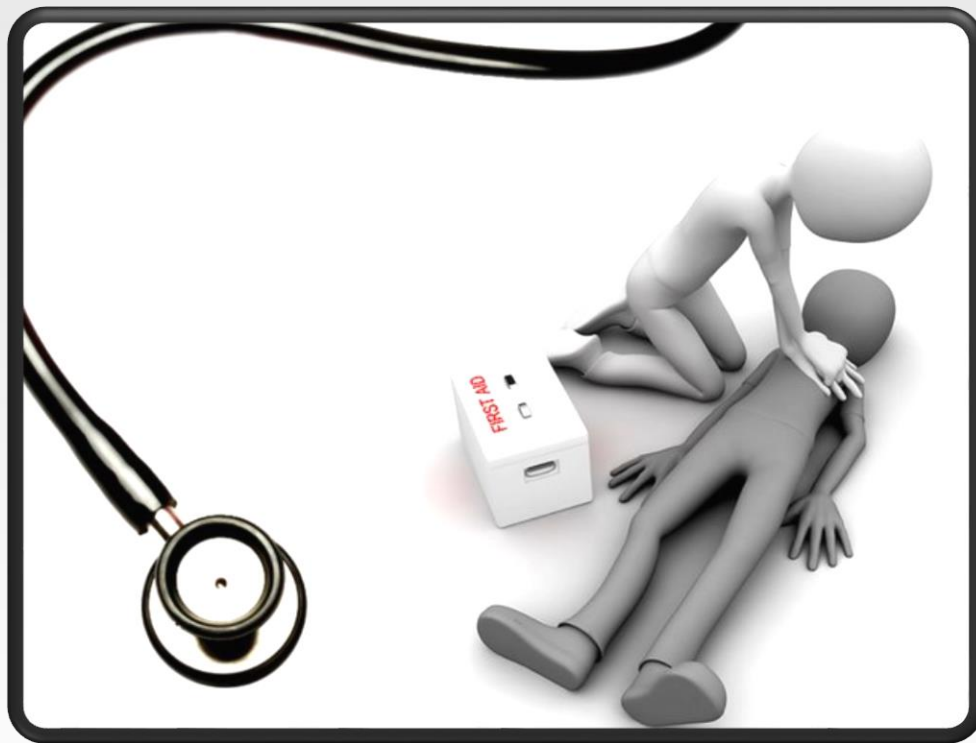
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# Solution?

- Move Electronically.
- Look for a third party company.
- Department and Faculty approval.



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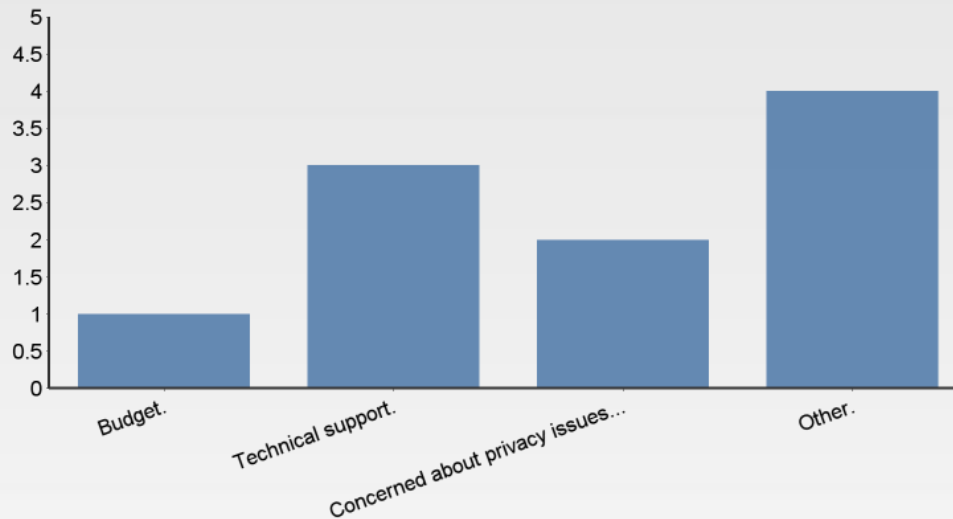
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# Concerns:

- \$\$\$\$ Cost.
- Privacy
  - **Health Insurance Portability and Accountability Act (HIPPA)**
  - **Family Educational Rights and Privacy Act (FERPA)**
- Easy access and compatibility.
- Technical support.
- Backups?
- Accreditation (CoARC, WASC).





#	Answer	Bar	Response	%
1	Budget.	<div></div>	1	16.67%
2	Technical support.	<div></div>	3	50.00%
3	Concerned about privacy issues that involves student information such as (name, student ID, etc).	<div></div>	2	33.33%
4	Other.	<div></div>	4	66.67%
	Total		10	100.00%



# Company X, Y

- Each student have a profile (username and Password).
- Each Instructor will have a profile/Access (username and password).
- Director of Clinical education, program director, will have their own access and features as well.
- Students can chart, clock in, clock out, evaluate.
- Clinical schedule can be uploaded to each student.
- Student portfolio can be downloaded (E-Portfolio).
- You can run a **REPORT** for each account.
- Clinical competency check offs.



## Company X, Y

- \$150 per student per year.
- 40 students.
- $40 * 150 = \$6K/\text{year}$ .
- \*\*\*Free log in access to the faculty members!!





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**It's a Survey!**



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# Plan

- Easy access for both students and faculty.
  - Computer and Mobile tablets.
  - Grading.
  - Rubric grading.
  - On-going feedback to the students (Formative Assessment).
- Train Clinical Instructors and Students.
- Inter-rater reliability (IRR).





# What is Inter-Rater Reliability (IRR)?



C

A



#\$##\*\*\*^&!!!!!!??



# How to Achieve it?

- Preceptor workshop.
- Train your instructors about the program outcomes and expectations annually.
- Video scenarios.



# LLU

- Canvas (Course info, syllabus, grades, schedule, communication).
  - Rubric grading.
  - Comments.
  - SpeedGrader App!!.
- Qualtrics.





# Canvas

- Upload Course to Canvas.
  - Add Clinical Instructors as TA's.
  - Add the rubric grading as an outcome in the course.





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W Mind, Brain, and Educatic x W Mind, Brain, and Educatic x W Evolutionary Perspectives x Q Qualtrics Survey Software x Files: RESP CARE PRACTIC x New Tab x

← → ↻ https://llu.instructure.com/courses/881328/files#RESP%20CARE%20PRACTICUM%20I%20(30397)%2FClinical%20Competency%20book\_2013\_Canvas.docx

Apps Loma Linda University Log In to Canvas Qualtrics myLLU Home



Abdullah Alismail Inbox Settings Logout Help

Courses & Groups ▾ Assignments ▾ Grades Calendar

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RSTH391\_30397  
W/2014

→ RSTH391\_30397 ▸ Files

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Announcements  
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Syllabus  
Outcomes  
Quizzes  
Modules  
Conferences  
Collaborations  
Attendance  
Settings

RESP CARE PRACTICUM I (30397)

- Clinical Competency book\_2013\_Canvas.docx
- Clinical SOAP guide.docx
- Clinical Syllabus 2014\_winter2014.docx
- Juniors2014.xlsx



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**LOMA LINDA UNIVERSITY**  
**School of Allied Health Professions**  
**Department of Cardiopulmonary Sciences**  
**B.S. Respiratory Therapy Program**

Clinical Competency Book, 2013

Scribd.

1 of 105

Storage Used: 99.9 KB out of 1 GB

see files for all your courses/groups



# Qualtrics

- It is built for surveys (Research).
- Licensed by our institution.
- Statistics.
- Excel, SPSS, HTML.





# Plan

- **Students** - Responsible.
- **Clinical Instructors / Preceptors** - Team player.
- **Program and Department** - Keep Records.



# Action – Phase I

- Transferred the clinical competency book to Qualtrics.
  - Comes back to me!! Right away!!
- Develop an online daily evaluation form.
  - Record more data.
    - “You don’t have a choice, Sir!”
  - Comes back to me!! Right away!!
- How was your day?
  - Rate your preceptor! Do you recommend him/her to your classmates?
  - Do your homework!
  - Comes back to me!! Right Away!!



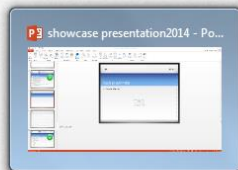


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This student does not have a submission for this assignment



Grading					
Cognitive (10)					
Criteria	Ratings				Pts
Recall patient past medical history.	PMH is clearly presented and described comprehensively. Related and relevant information is included for full understanding on the PMH. 4 pts	PMH is critically presented and described in minimum details. Have a minimum relevant information that helps understanding the chief complaint 3 pts	PMH is critically presented with lack of understanding the meaning of some of the medical terms, diseases that are critical to provide excellent care 2 pts	PMH is presented/not presented without any clarification and understanding. 1 pts	4 / 4 pts
Describing patients chief complaint (CC).	Chief Complaint presented and described clearly and in a comprehension way. Reason for the visit is clearly and fully understood. 4 pts	Chief Complaint presented and described with minimum knowledge. Minimum recall of some information; such as, why is this patient having this CC. 3 pts	Chief Complaint critically presented with a lack of understanding the meaning of the medical terms and why it lead the patient to be admitted. 2 pts	Chief Complaint presented /not presented without clarification or understanding its meaning. 1 pts	3 / 4 pts
	Patient's current physical, or physiological condition and assessment is fully understood and presented in a systematic	Patient's current physical, or physiological condition, and assessment is understood at a minimum	Patient's current physical, or physiological condition is not clearly presented nor understood.	Physical, physiological, vital signs presented/not presented without any clarification nor	
Attach					Submit Comment



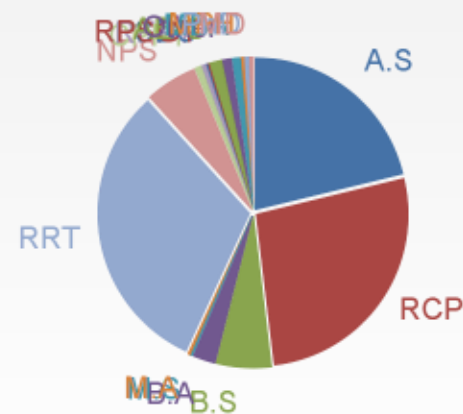
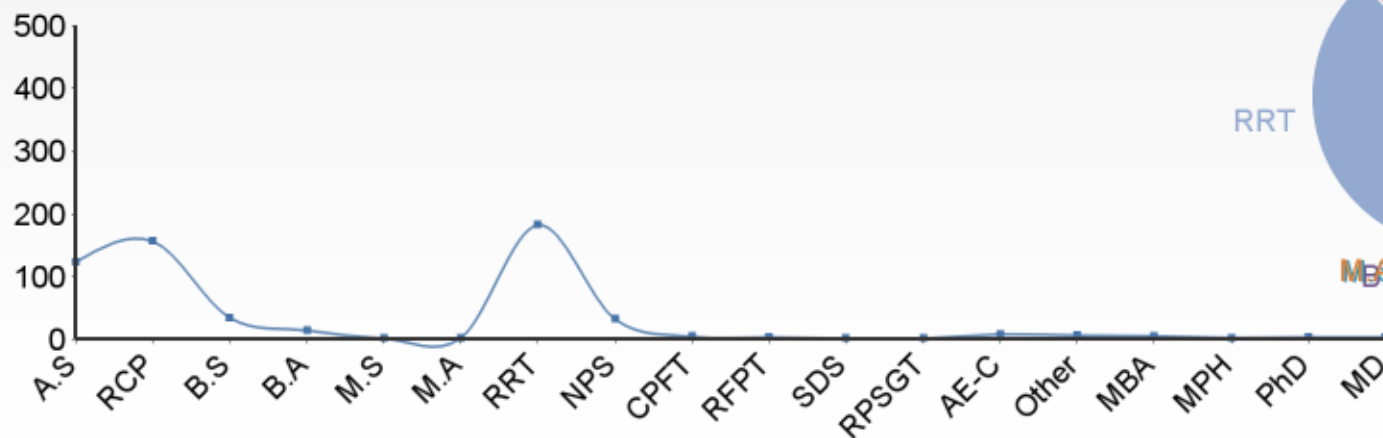
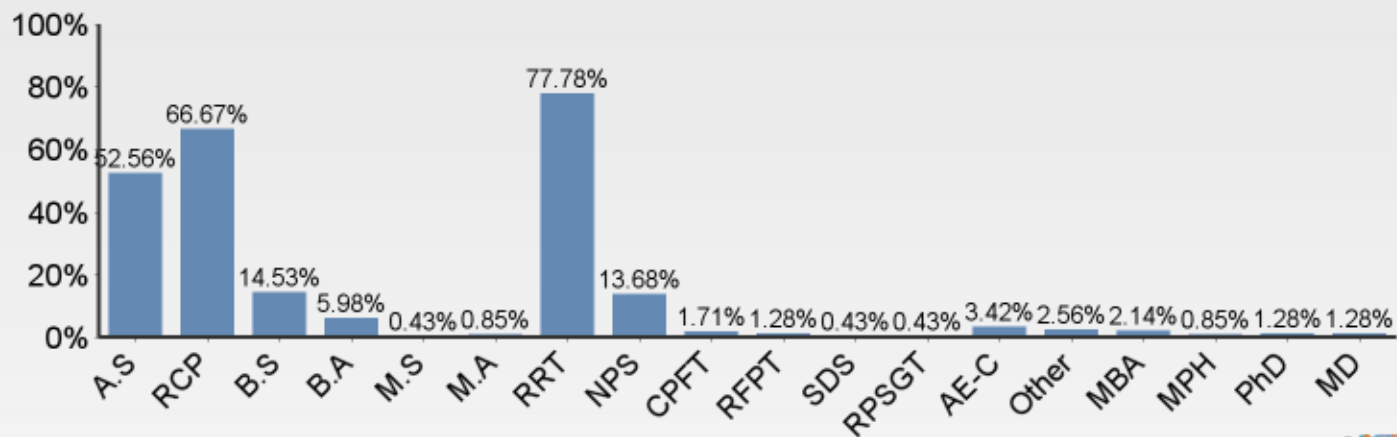
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Cognitive-Monday 11/04/13 Out of 24	Psychomotor-Monday 11/04/13 Out of 16	Affective-Monday 11/04/13 Out of 28	Cognitive-WED 11/06/13 Out of 24	Psychomotor-WED 11/06/13 Out of 16	Affective-WED 11/06/13 Out of 28
18	12	27	-	-	0
18	12	23	-	-	-
16	14	21	-	-	-
-	-	-	17	12	22
18	12	23	-	-	-
18	12	27	18	-	-
22	14	27	18	13	24
18	12	23	-	-	-
-	-	-	18	14	22
18	13	24	18	12	22
18	13	23	18	14	23
18	12	21	0	12	22
18	12	23	18	12	22
18	12	22	14	11	21
18	13	23	-	-	-
23	15	26	18	12	24
17	11	22	18	12	27
21	15	27	0	12	-



#	Answer	Bar	Response	%
1	A.S	<div></div>	123	52.56%
2	RCP	<div></div>	156	66.67%
3	B.S	<div></div>	34	14.53%
4	B.A	<div></div>	14	5.98%
5	M.S	<div></div>	1	0.43%
6	M.A	<div></div>	2	0.85%
7	RRT	<div></div>	182	77.78%
8	NPS	<div></div>	32	13.68%
9	CPFT	<div></div>	4	1.71%
10	RFPT	<div></div>	3	1.28%
11	SDS	<div></div>	1	0.43%
12	RPSGT	<div></div>	1	0.43%
13	AE-C	<div></div>	8	3.42%
14	Other	<div></div>	6	2.56%
15	MBA	<div></div>	5	2.14%
16	MPH	<div></div>	2	0.85%
17	PhD	<div></div>	3	1.28%
18	MD	<div></div>	3	1.28%





# Would you recommend your preceptor for your colleagues in the future?

#	Answer	Bar	Response	%
1	Yes.		223	97.81%
2	No.		5	2.19%
	Total		228	100.00%

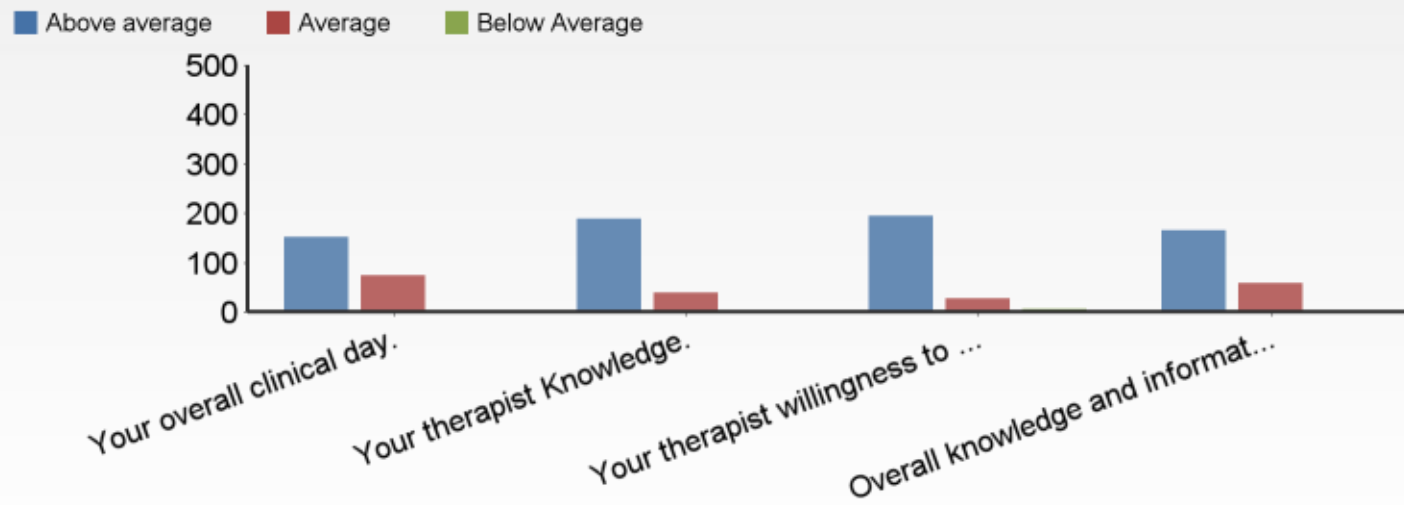


# How would you rate your clinical day based on the following Questions:

#	Question	Above average	Average	Below Average	Response
1	Your overall clinical day.	152	73	3	228
2	Your therapist Knowledge.	189	38	1	228
3	Your therapist willingness to teach and help you explore new things in the field.	195	28	5	228
4	Overall knowledge and information you learned.	166	59	3	228



# How would you rate your clinical day based on the following Questions:





## Action – Phase II

- AARC Exhibit Hall.
- Develop a Time Stamp. “CPS-Time Stamp”
  - Clock in and Out.
    - Record IP address.
    - Record your location.
    - Browser.
    - Zip Code.
    - Area Code.
    - City.
    - State.



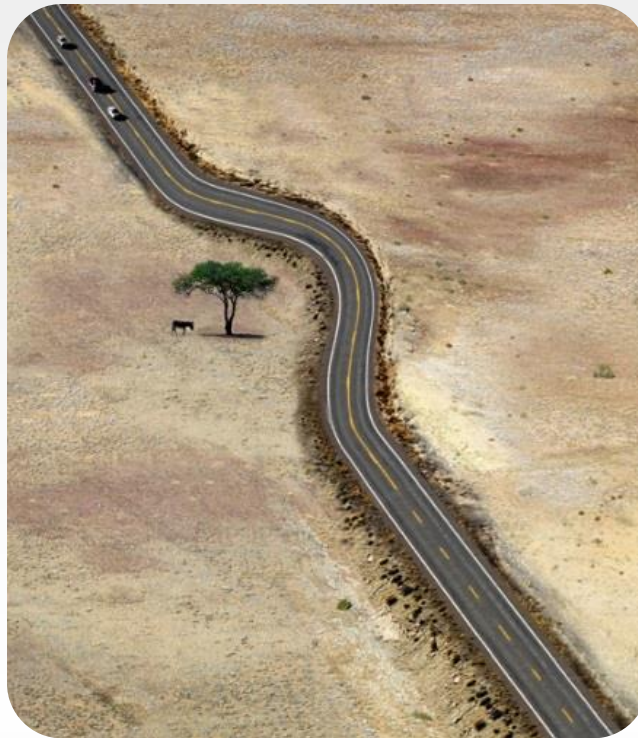


# Did it work?

- Respiratory Care Practicum courses (I, II, III, IV, and V).
- Inter-Professional Education module.
- Research.
  - Collect subjects data, surveys .. Compare pre-and post .. Etc.
- Department quarterly course evaluation.
  - No more number crunching.



# Remember





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