White Paper

Bringing the Bucket Strategy Full Circle

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In 2017, the Bucket Strategy was designed to help nursing educators determine the best placement of digital tools in a nursing course. Although it can be difficult to navigate different digital tools, these resources can help faculty work smarter and enhance students' ability to learn. When applied throughout a program, and not just individual courses, the outcomes can be even greater. The purpose of this paper is to expand on the Bucket Strategy to discuss how educators can effectively use digital tools to build a program that meets the needs of today's nursing standards with the Next-Generation NCLEX® (NGN) and help students prepare for their careers as nurses in today's healthcare environment.

Many nursing educators may feel overwhelmed when thinking about their students' future in the clinical setting and how to prepare for the upcoming NGN. There are many digital products that can provide the tools needed to help prepare students for this change to promote optimal student success and ensure NCLEX readiness. Having the most efficient digital tools for your course is a step in the right direction but implementing these tools effectively and cohesively across the program is vital to success. It is essential that all faculty work together to create consistent learning opportunities for students.

The NCSBN defines clinical judgment as "a process that uses nursing knowledge to observe and assess a presenting situation, identify a prioritized client concern, and generate the best possible evidence-based solutions in order to deliver safe client care" (2019). While preparing for what nurses face in the clinical setting has always been important in nursing education, there is a renewed focus on clinical judgment as related to the new research by NCSBN and presented in the new Clinical Judgment Measurement Model (Dickison, Haerling, & Lasater, 2019). This new focus is prompting nursing educators around the country to transform the way they teach, with more careful consideration to providing meaningful learning experiences that support knowledge acquisition, application of clinical judgment, and ongoing assessment of learning.

In the previous iteration of using the Bucket Strategy, the basis for these strategies stemmed from the teaching pedagogy of the flipped classroom model and used Bloom's taxonomy as the framework. With the enhanced focus on clinical judgment, this can be expanded to include additional teaching methodologies that can be used to develop the essential nursing skills needed to provide safe patient care.

The scrambled classroom may provide a better learning environment for today's nursing programs. As described by Barnett (2014), a scrambled classroom encourages educators to use a combination of teaching methodologies before, during, and after class. Educators in a scrambled classroom will use a mixture of pre-class assignments, lecture during class, active learning strategies during class, and frequent assessments to promote student learning.

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In a scrambled classroom, there is a mixture of lecture and active learning. Active learning is defined as "anything that involves students in doing things and thinking about the things they are doing" (Bonwell & Eison, 1991). This is a perfect description of how educators can help students build their knowledge acquisition and practice their clinical judgment skills. Nursing educators must consider how to use digital tools to create active learning opportunities that allow students to "think and do".

When thinking about the most effective way to use digital tools in a nursing program consider the following questions to promote optimal student outcomes:

- How will students build their knowledge?
- How will students apply and build their clinical judgment skills?
- How are you assessing student's knowledge and clinical judgment skills?

Digital tools can be used to help educators address each of these questions. In a flipped classroom model, answering these questions is often thought of in a sequential order with students building knowledge prior to class and application and assessment happening during and/or after class. A key difference in the scrambled classroom model is that these questions do not have to be answered in a sequential order for optimal student learning, rather, it is more important for educators to purposefully plan how each of these questions will be accomplished regardless of when that happens.

NCSBN's Clinical Judgment Measurement Model provides an excellent framework to help educators think about how to help students bolster their clinical knowledge as they move through the program. Specifically, Layer 3 of the model breaks these skills into detailed steps. Instructors can focus on each of these steps as appropriate to the level of student they are teaching. For example, a Fundamentals instructor may just focus on making sure students can recognize and analyze cues. A Med-Surg instructor might want to ensure students can recognize and analyze cues and begin to prioritize hypothesis, generation solutions, and take action.

There is much discussion in nursing education about how we can use case studies to help students learn and develop clinical judgment skills. Case studies allow students to practice the necessary skills needed to make sound clinical decisions as they work through real-world patient scenarios in a safe learning environment. Case studies are often confined to one singular course but imagine the possibilities if one case study was used in multiple courses, focusing not only on the content of the case study but also being purposeful about the clinical judgment skills students are being asked to use and practice. As the student moves through the program, higher expectations regarding skill performance would be expected. Eventually, students would be expected to complete all steps in Layer 3 when discussing case studies in class.

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Layer 3 CJMM (NCSBN) Questions for Case Study Review with Students

Recognize Cues:

Ask students the following questions:

- What is relevant/irrelevant?
- What is most important?
- What is of immediate concern?

Analyze Cues:

- What client conditions are consistent with the cues?
- Are there cues that support or contraindicate a particular condition?
- Why is a particular cue or subset of cues a concern?
- What other information would help establish the significance of a cue or a set of cues?

Prioritize Hypotheses:

- Which explanations are most/least likely?
- Which possible explanations are the most serious?

Generation Solutions:

- What are the desirable outcomes?
- What interventions can achieve those outcomes?
- What should be avoided?

Take Action:

- Which intervention or combination of interventions is most appropriate? (Top 4)
- How should the intervention(s) be accomplished (performed, requested, administered, communicated, taught, documented, etc.)?

Evaluate Outcomes:

- What signs point to improving/declining/unchanged status?
- Were the interventions effective?
- Would other interventions have been more effective?

(NCSBN, 2019. p. 4-6)

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Teaching students how to apply clinical judment is a primary focus in nursing education today but clinical judgment is only one piece of a larger circle for student success. It is also important to consider how to use digital tools to help students build foundational knowledge and provide opportunities for ongoing assessment and review. If students do not have a good foundational knowledge of nursing concepts it will be difficult for them to apply clinical judgment to patient scenarios. Students can build foundational knowledge by completing meaningful pre-class activities and through brief lecture bursts regarding key concepts during class.

Additionally, an essential step to make sure students are applying their clinical judgment correctly is to test their knowledge in order to make sure they apply their skills in a clinical situation correctly. Frequent assessment is key so that students and educators can quickly identify points of confusion and intervene early to promote optimal student outcomes. Faculty can also follow up on student weakness with structured remediation.

The 2017 Bucket Strategy set the tone for helping educators consider how to place digital tools in their nursing course. In this paper, this strategy has been expanded and comes full circle to ensure students are building strong clinical judgment skills throughout their nursing program to adequately prepare them for today's complex healthcare environment and the new NGN. To effectively use digital tools nursing educators must consider three key points: students need to build foundational knowledge, students need opportunities to practice clinical judgment skills, and students need frequent and ongoing assessment of their knowledge and clinical judgment skills. The scrambled classroom is an optimal learning environment to help educators address all three pieces of this circle. With these three priorities, students will have the skills they need to pass the NCLEX now, prepare for the NGN in the future, and provide optimal patient care as practicing nurses.

References

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