# GenAI for Assessment Preparation

**Institution:**  Dublin City University

**Discipline:**  Nursing

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**GenAI tool used:** ChatGPT and APO AI

## Situation / Context

Subject Discipline: Nursing, Year 3, 140 students. Module: General Nursing 3A

General Nursing 3A aims to enable students to develop a critical understanding of nursing assessment skills, and nursing management of physical and psychological problems in the context of acute and chronic health conditions.

The module assessment is summative, consisting of a written case study to describe the nursing assessment and care of a deteriorating patient in a hospital setting; examples of appropriate case studies included shock (e.g. septic, hypovolaemic, cardiogenic or anaphylactic shock), respiratory distress (e.g. due to exacerbation of a chronic breathing/lung condition), or a person living with a physical complication of cancer (e.g. pain, sepsis, dehydration).

The case study was to be based on a case the student had encountered in clinical practice. In year 3 of the programme, students will have completed 40 weeks of placement, with 26 weeks completed in the Summer, Autumn and Spring semesters preceding the delivery of this module.

## Task /Goal

The first running of this Generative AI (GenAI) initiative took place in Spring 2023, following the public release of ChatGPT. The primary purpose of this initiative was to engage students in a critical exploration of academic integrity in the context of artificial intelligence.

The primary goal was to familiarise students with the practical and ethical considerations of artificial intelligence in academic writing. Additionally, this activity marked the beginning of a module redesign aligned with the principles of Universal Design for Learning (UDL).

UDL is an educational framework that promotes inclusivity by offering multiple ways for students to engage with content, process information, and demonstrate learning. It emphasizes three core principles: Multiple Means of Engagement, which seeks to capture and sustain students' interest; Multiple Means of Representation, which ensures content is accessible through varied formats; and Multiple Means of Action and Expression, which offers students diverse ways to communicate their understanding.

In this case study, I examine how specific UDL principles guided the design and delivery of an AI-based learning activity that engaged students in evaluating a GenAI essay against the module assessment rubric. Through the targeted use of UDL principles, I aimed to foster critical thinking, support diverse learning preferences, and enhance students’ familiarity with academic standards. Specifically, I focused on engagement by leveraging students’ curiosity about AI and academic integrity, on representation by presenting content through various forms (AI essays, written, verbal and visual feedback), and on expression and action by allowing students to critique, discuss, and collaboratively revise the GenAI essays.

## Actions / Implementation

Two GenAI chatbots, ChatGPT (chatgpt.com), and APO AI (APO AI has now been discontinued) were prompted to write four essays related to the assignment brief using a single, low-level prompt in each tool:

* Prompt 1, Essay 1: "Tell me about ABCDE patient assessment.” (Appendix 1, Appendix 3)
* Prompt 2, Essay 2: "Present a case study of an ABCDE patient assessment for someone with respiratory distress." (Appendix 2, Appendix 4)

Prior to class, students were given preparatory tasks to engage their interest and scaffold understanding:

1. Revisit the Assignment Brief and give particular attention to the Assignment Rubric.
2. Review each of the four GenAI essays, with awareness of the assignment brief.
3. Share their evaluations of the four essays in three Mentimeter polls:
   1. In three words, what are your first impressions of the four essays?
   2. Please comment on 1-2 aspects of this draft essay that have been done particularly well.
   3. Please identify 1-2 aspects of this draft essay that the author could change to greatly improve their work.

Students examined the essays for content and structure, allowing them to connect the material to their own learning goals and to academic standards. This step engaged students by fostering curiosity about the role of GenAI in academic integrity and by highlighting the practical relevance of the assignment.

Prior to class, the feedback submitted by students in Mentimeter polls was uploaded to the online learning platform for students to review prior to class. During class, the poll results were presented and used to prompt initial discussion before proceeding to the in-class activities.

The use of the Mentimeter results as discussion prompts encouraged students to think critically about quality, clarity, and depth in the AI essays. An interrogation of the less common responses prompted students within the class to provide more detailed examples within the essays which could benefit from improvement. Members of the class highlighted examples where concepts were poorly explained or confusing, where information provided lacked sufficient detail, the lack of referencing and citation, and examples of spelling and grammatical inaccuracies.

Finally, students were asked to discuss how the essays could be improved based on a final Mentimeter poll. The discussions following each poll allowed students to expand on their points collaboratively, encouraging deeper engagement.

By addressing the essays’ strengths and weaknesses, this exercise supported students to articulate their observations and to identify specific improvements for the GenAI essays via written and verbal means.

The next stage of the in-class activity focused on students’ critical evaluation skills. Working in pairs, students were invited to evaluate one of the GenAI essays (Appendix 1), in relation to each point of the assignment feedback rubric (Appendix 5). By assessing each rubric criterion, students practised structured critical thinking and reinforced their understanding of academic expectations, actively applying their knowledge and articulating their judgments and reasoning.

The class responses to the assignment rubric evaluation were discussed one by one and compared with the lecturer’s evaluation of the essay. During the discussion, an action plan was co-designed, to support editing and revision of the essay during class (Table 1). During the process of revising the essay, students prompted the lecturer on points to correct and strengthen the essay, focusing on presentation, formatting, spelling; titles, subsection headings; citation, checking references and verifying references; application of knowledge – differentiating between personal experience and scholarly evidence; writing concisely and critically, and introducing, concluding, and summarising the essay. This collaborative revision aligned with Multiple Means of Representation, Action, and Expression, as students were actively involved in translating feedback into specific revisions.

## Outcomes

While no formal evaluation was conducted, comparing the responses of the pre-class Mentimeter polls with the discussion and outcomes of in-class activities provided insights into the effectiveness of this initiative.

During discussions of Mentimeter poll results, students’ reflections on the GenAI essays provided qualitative data that highlighted both strengths and areas for growth in their understanding of academic writing. The iterative dialogue around rubric-based assessment revealed an improvement in students’ critical analysis skills, as they moved from general impressions (“informative,” “structured”) to critique of the depth, clarity, and citation practices within the essay. This process, grounded in UDL principles, fostered a learning environment where students felt encouraged to actively participate, question, and refine academic writing.

There were three key outcomes of this activity, highlighting the impact of integrating UDL principles in fostering engagement, critical thinking, and self-assessment:

* Students’ enhanced understanding of self-assessment and assessor-based assessment: Students gained hands-on experience in applying the module assessment criteria to a worked example, generated via an AI chatbot. Through the discussion and subsequent in-class activities, students deepened their understanding of assessment processes. The Mentimeter polls and discussions provided an informal means to gauge students' evolving understanding as they critically analysed the strengths and weaknesses of the essay, making them more aware of the standards expected in their own assignment submission. Observations during these discussions suggest that students became more comfortable with assessment, developing a stronger sense of how to evaluate their work in line with academic expectations.
* Creation of an action plan for essay revision: Providing feedback on rubric items to improve the essay gave students a practical framework which students could adapt to support self-assessment and revision of their essays. The collaborative nature of this task, coupled with instructor feedback, provided a structured approach to refining the GenAI essay, leading to the co-designed action plan to revise the GenAI essay.
* Development of a module-specific phrase bank: As students discussed the structuring of academic writing, including assignment purpose, rationale, and case study summaries, a list of phrases were developed by the lecturer to support students in articulating key sections of their work. This module-specific phrase bank became a shared resource, supporting students in clearly expressing their ideas and aligning their language with academic standards. The phrase bank may also serve as a scaffold for future assignments, promoting consistency and confidence in writing.

## Reflections

This initiative underscores the potential and limitations of GenAI in undergraduate academic writing for assessment. The pre-class activities highlighted common misconceptions among students about the reliability of GenAI. Information derived from the Mentimeter polls provided important information to modify in-class activities, prompting more in-depth discussion regarding shortcomings in GenAI for academic writing, and risks to academic integrity.

Through the in-class activities to assess and revise the GenAI essay, students began to recognise that while GenAI could be a useful tool to begin outlining a written assignment, the information generated would not be suitable for final submission and required students to apply their understanding and theoretical knowledge of concepts to enhance the quality of the essay and ensure it meets the standards of assessment. The development of the action plan and phase bank serve as useful tools which students can adapt for use within this and other modules to enhance skillsets related to critical thinking, proofreading, and revision.

In future iterations of this module, I plan to integrate GenAI tools further in teaching through two key activities:

* Students will disclose and critically assess their use of GenAI in assignments: The assessment will require students to generate the essay initially in a GenAI chatbot, and will be asked to submit the version generated, alongside the prompts used to prepare the initial essay. In the final assignment, students will be asked to include a brief critical commentary of the essay produced by the chatbot and provide an outline of the specific revisions made to the essay, including the readings, evidence and information which informed the revisions.
* GenAI case studies for in-class use: During classes, case studies are critical to support students’ application of theoretical knowledge to practical cases. I will begin to integrate GenAI case studies for use during class. Students will be asked to prompt the chatbot on the assessment and management of a GenAI case study; the chatbot will tell the students the outcomes of their actions, and students will be facilitated in class to discuss and critique the outcomes of case management within the chatbot.

By integrating UDL principles, this initiative cultivated a flexible, inclusive learning environment that bolstered students’ capacity for self-assessment, critical engagement, and academic confidence.

The activity’s outcomes indicate that students were more prepared to approach assignments with an evaluative mindset, equipped with a practical toolkit to enhance their work and align it with academic standards. For others who might consider adapting this activity within teaching and learning, careful scaffolding of the process, including structured mechanisms for student feedback before, during and after the activity is essential to ensuring the success of the activity, and allowing real-time alterations in the lesson plan to clarify and address the issues raised by students during the activity.

## Further Readings:

Alneela, H. A., & Jawad, A. H. (2018). Respiratory distress syndrome: A structured ABODE approach simplifies care. Asian Pacific Journal of Tropical Biomedicine, 8(1), 67–74.

Clemens, A. S. (2020). The ABODE of care: Assessment and initial treatment. Retrieved March 14, 2021, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2934476/>

Pahor, A. L., & Belardi, A. (2020). ABODE assessment: A guide to patient assessment. Retrieved March 14, 2021, from https://www.nejm.org/doi/full/10.1056/NEJMra1910135

Rojas, Y. N. (2021). ABODE of patient assessment. Retrieved March 14, 2021, from <https://www.sciencedirect.com/science/article/abs/pii/S2451914521300086>

Srivastava, S. K., & Sharma, S. K. (2019). ABODE approach for recognition and management of patients with respiratory distress syndrome. Indian Journal of Chest Diseases & Allied Sciences, 61(2), 145–152.

Torrefranca-Gomez, A. M., Kramer, A., Roos, J. E., & de Keukelaar, M. (2009). Respiratory distress: A structured patient-centered approach. Respiratory Care, 54(10), 1513–1520.

Wang, X. (2016). ABODE approach to oxygenation in acute respiratory failure. Chinese Medical Journal, 129(13), 1604–1608.

## Author Biography

**Dr Amanda Drury** is an Associate Professor in General Nursing in the School of Nursing, Psychotherapy and Community Health, Dublin City University, Ireland. She holds a PhD, MSc in Cancer Care and Postgraduate Diploma in Education from Trinity College Dublin. Her research and teaching interests focuses on the health and well-being of people affected by cancer and chronic diseases. She has expertise in the development and evaluation of education programmes, most recently as the principal investigator of the Advanced Breast Cancer for Nurses (ABC4Nurses) programme.

## Tables and Figures

**Table 1** Action Plan to Revise APO AI Essay 1

|  |  |
| --- | --- |
| Rubric Item | Issues Identified |
| 1. Title & Introduction | Title needs to reflect what the assignment is about |
| 2. Assessment & management of the case | ABCDE has not been applied to a case.  Limited information is provided about the ABCDE assessment and how specific issues are assessed (e.g. breath sounds, what might you be listening for?).  No priorities for care evident. |
| 3. Conclusion | There are no efforts to summarise key information from the assignment or case.  There has been no effort to critically reflect on the care provided (e.g. what could have been done better/differently to achieve an earlier intervention or better outcome for this patient?) |
| 4. Referencing | None of the module recommended reading is referenced.  None of the references listed exist.  There are no citations in the assignment. |
| 5. Presentation, grammar, punctuation, and spelling | Formatting of the assignment is not acceptable.  There are efforts to use paragraph structures, and there is a logical flow to the assignment, but it is not sufficiently detailed.  There are some spelling errors. |

## Appendices

### Appendix 1: APO AI Essay 1

Tell me about the ABCDE patient assessment.

ABODE patient assessment is a structured approach to medical evaluation and decision-making used in the diagnosis and treatment of patients. It stands for Airway, Breathing, Circulation, Disability, and Exposure and includes a systematic set of procedures for assessing, treating, and monitoring a patient's health status.

When ABODE is used, practitioners evaluate a patient's airway, breathing, circulation, disability, and exposure in an organized and systematic way. Each stage of assessment can be evaluated quickly, often with the purpose of stabilizing life-threatening conditions such as airway obstruction, impaired breathing, shock, or impaired consciousness.

The ABODE approach to patient assessment is based on the need to rapidly and accurately assess the patient's health. Assessment begins with evaluation of the airway. This can include a number of factors such as evaluating the patient's ability to talk, swallow, and vomit, and also the adequacy of their tongue support and upper airway patency.

This is followed by the examination of the patient's ability to breathe, which can include assessing their cumulative lung sounds, the use of a pulse oximeter to measure oxygenation, and the assessment of breath sounds. Next practitioners evaluate a patient's circulation and cardiovascular system, measuring heart rate and medications administered.

Disability is assessed after circulation, which includes evaluating the patient's level of consciousness, cognitive functioning, motor skills, and sensation. Finally, exposure is evaluated by making sure the patient has appropriate clothing, skin integrity, and temperature.

Overall, the ABODE approach to patient assessment helps medical practitioners accurately assess and monitor patient's health conditions quickly and efficiently. It has been widely adopted by medical practitioners around the world to improve patient outcomes.

### Appendix 2: APO AI Essay 2

Present a case study of an ABCDE patient assessment for someone with respiratory distress.

This case study will provide a unique patient assessment model to analyse the patient's respiratory distress, based on the ABODE framework of evaluation. ABODE stands for Airway/Breathing, Circulation/Cardiovascular, Disability/Neurologic, Exposure/Environmental, and Education/Explanation. This model provides a comprehensive, yet simple, approach to assessing patients with respiratory distress.

The ABODE model utilizes a patient-centred approach, focused on the patient's understanding and teaching of their condition. This patient assessment can be used for any patient, no matter their background or diagnosis, which provides the capability for clinicians to quickly and accurately assess the underlying cause of respiratory distress and provide appropriate treatment.

The ABODE model involves the assessment of five components:

1. Airway/Breathing: In this component, the clinician assesses the patient's airway and ventilation. An evaluation of the airway includes a physical examination of the mouth, throat, and other respiratory structures. Vital signs and laboratory results should also be assessed. An evaluation of the patient's breathing includes noting the pattern, depth, rhythm, and any abnormal sounds. Peep value, if ventilated, should also be assessed.

2. Circulation/Cardiovascular: In this component, the clinician assesses the patient's circulation and vital signs. An assessment of circulation includes monitoring vital signs such as heart rate, blood pressure, temperature, and oxygen saturation. The patient's history should also be reviewed as an aid in determining the patient's current status.

3. Disability/Neurologic: In this component, the clinician assesses the patient's current level of mental status. This includes assessing the patient's orientation and level of consciousness, as well as cognitive, language, and memory functions. This can also include assessing level of distress, fatigue, appropriate use of medications, and any warning signs of any further deterioration.

4. Exposure/Environmental: In this component, the clinician assesses any environmental factors that may contribute to the patient's distress. This includes assessing air quality, room temperature, outside noise, and surrounding lights. Additionally, any stressors the patient may be exposed to should also be identified.

5. Education/Explanation: In this component, the clinician educates the patient about their condition and explains the correct approaches for managing distress. This involves providing the patient with strategies for relaxation, support, and lifestyle management. Additionally, the clinician should evaluate the patient's understanding of their condition and any personal beliefs or views they hold that hinder their ability to healthfully manage their condition.

This case study serves to provide a straightforward and comprehensive model to address a patient's respiratory distress. The ABODE approach begins by assessing the patient's airway and breathing, then proceeds to evaluating the patient's cardiovascular and neurological status, followed by assessing environmental factors, and finally educating the patient about the condition and its management. This patient assessment model encourages a holistic approach and allows clinicians to identify the underlying cause of respiratory distress. Additionally, it allows clinicians to provide a supportive environment that helps to encourage patient education, self-management, and treatment adherence.

### Appendix 3: ChatGPT Essay 1

*A, b, c, d, and e* patient assessment is a systematic approach used in emergency medicine to identify and treat life-threatening conditions in patients. The acronym stands for Airway, Breathing, Circulation, Disability, and Exposure. Each letter represents a different aspect of the assessment process, which helps medical professionals quickly identify and address the most pressing issues affecting the patient's health. In this article, we will explore each of these components of the ABCDE patient assessment in more detail.

Airway

The first step in the ABCDE assessment is to evaluate the patient's airway. This is because a blocked airway is one of the most immediate life-threatening conditions that a patient can experience. The airway refers to the passage through which air travels from the mouth and nose to the lungs. If this passage is obstructed, the patient may not be able to breathe properly, leading to hypoxia or low oxygen levels.

During the airway assessment, medical professionals will look for signs of obstruction, such as choking or stridor, which is a high-pitched sound made during breathing. They will also assess the patient's level of consciousness and ability to speak, as difficulty speaking or altered mental status can indicate an airway obstruction. If an obstruction is identified, medical professionals will take immediate steps to clear the airway, such as performing the Heimlich manoeuvre or inserting an endotracheal tube.

Breathing

The second step in the ABCDE assessment is to evaluate the patient's breathing. This is because a lack of oxygen or difficulty breathing can quickly lead to serious complications, such as respiratory failure or cardiac arrest. Medical professionals will assess the patient's respiratory rate, depth, and effort, as well as their oxygen saturation levels using a pulse oximeter.

During the breathing assessment, medical professionals will look for signs of respiratory distress, such as shortness of breath, wheezing, or cyanosis, which is a bluish tint to the skin and mucous membranes. They will also listen to the patient's chest with a stethoscope to assess lung sounds and check for signs of trauma, such as rib fractures or pneumothorax.

If the patient is experiencing respiratory distress, medical professionals will provide oxygen therapy or other breathing treatments, such as bronchodilators or corticosteroids. They may also perform interventions to improve ventilation, such as intubation or chest tube placement.

Circulation

The third step in the ABCDE assessment is to evaluate the patient's circulation. This is because adequate blood flow is necessary to deliver oxygen and nutrients to the body's tissues and organs. A lack of blood flow, such as in cases of shock or cardiac arrest, can quickly lead to organ damage and death.

During the circulation assessment, medical professionals

### Appendix 4: ChatGPT Essay 2

*A, b, c, d, and e* patient assessment is a structured approach to the initial evaluation and management of acutely ill or injured patients. The ABCDE stands for Airway, Breathing, Circulation, Disability, and Exposure, which are the five key elements that need to be assessed and addressed in a systematic and sequential manner to ensure the best possible outcome for the patient.

Airway assessment is the first step in the ABCDE approach. It involves assessing the patency of the airway and identifying any potential obstructions that may compromise the patient's ability to breathe. This can be done by observing for signs of airway obstruction such as stridor or wheezing, assessing the patient's level of consciousness, and evaluating the presence of any foreign bodies or trauma to the airway.

If there is any evidence of airway obstruction, immediate interventions such as airway manoeuvres, suctioning, or intubation may be necessary to maintain a patent airway and ensure adequate oxygenation. The use of adjuncts such as oral or nasal airways, or a bag-valve-mask (BVM) may also be considered if intubation is not immediately possible.

Breathing assessment is the second step in the ABCDE approach. It involves assessing the adequacy of ventilation and oxygenation. This can be done by monitoring the patient's respiratory rate, depth, and effort, as well as assessing for the presence of any respiratory distress or abnormal breath sounds.

If there is any evidence of respiratory distress or inadequate oxygenation, interventions such as supplemental oxygen or mechanical ventilation may be necessary to maintain adequate oxygenation and prevent further respiratory compromise. Chest compressions and defibrillation may also be necessary if the patient is in cardiac arrest.

Circulation assessment is the third step in the ABCDE approach. It involves assessing the patient's hemodynamic status and identifying any signs of shock or inadequate perfusion. This can be done by monitoring the patient's heart rate, blood pressure, and peripheral perfusion, as well as assessing for the presence of any signs of shock such as tachycardia, hypotension, or decreased urine output.

If there is any evidence of shock or inadequate perfusion, interventions such as fluid resuscitation or vasopressor therapy may be necessary to restore hemodynamic stability and improve tissue perfusion. In severe cases, immediate surgical intervention may also be necessary to control bleeding or repair any vascular injuries.

Disability assessment is the fourth step in the ABCDE approach. It involves assessing the patient's level of consciousness and neurological function. This can be done by assessing the patient's Glasgow Coma Scale (GCS) score, evaluating pupillary responses, and assessing for the presence of any focal neurological deficits.

If there is any evidence of neurological compromise, interventions such as rapid sequence intubation (RSI)

### Appendix 5: Assignment Rubric

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Outstanding  91-100% | Excellent  81-90% | Very Good  71-80% | Good  61-70% | Satisfactory  51-60% | Acceptable  41-50% | Unacceptable  < 40% |
| Title & Introduction provides information about the purpose & content of the assignment, and the overview of the case demonstrates the relevance of the selected case to learning from this module. | The title & introduction provides a concise overview of the purpose & content of the assignment, the selected case, and clearly demonstrates the relevance of the selected case to learning from this module. | The title & introduction provides a concise overview of the purpose & content of the assignment, the selected topic, and demonstrates the relevance of the selected case to learning from this module. | The title & introduction provides a very good overview of the purpose & content of the assignment, the selected case, and its relevance to learning from this module. | The title & introduction provides a good overview of the purpose & content of the assignment, the selected case, and its relevance to learning from this module. | The title & introduction provides a limited overview of the purpose & content of the assignment, the selected case, and its relevance to learning from this module. | The title & introduction provides a minimal overview of the purpose & content of the assignment, the selected case, and its relevance to learning from this module. | The title & introduction does not provide an adequate overview of the purpose & content of the assignment, the selected case, and its relevance to learning from this module. |
| The Assessment and Management of the Case  The body of the assignment:  discusses the assessment of the patient, with reference to ADPIE and appropriate or relevant assessment tools.  critically identifies the main priorities of care for the patient.  Discusses the nursing care of the patient related to the specified priorities for care. | The body of the assignment demonstrates an exceptionally extensive and detailed knowledge of the assessment and nursing care of the person, with exceptional ability to apply knowledge about the issues described, and provide patients with appropriate, evidence-based care. | The body of the assignment demonstrates an extensive and detailed knowledge of the assessment and nursing care of the person, with a highly developed ability to apply knowledge about the issues described, and provide patients with appropriate, evidence-based care. | The body of the assignment demonstrates a broad knowledge of the assessment and nursing care of the person, with a very good ability to apply knowledge about the issues described, and provide patients with appropriate, evidence-based care. | The body of the assignment demonstrates an adequate, but not complete knowledge of the assessment and nursing care of the person, with a good ability to apply knowledge about the issues described, and/or provide patients with appropriate, evidence-based care. | The body of the assignment demonstrates a basic understanding of the assessment and nursing care of the person, presented with a limited ability to apply knowledge about the issues described, and/or provide patients with appropriate, evidence-based care. | The body of the assignment demonstrates a poor understanding of the assessment and nursing care of the person, presented with limited efforts to apply knowledge about the issues described, and/or provide patients with appropriate, evidence-based care. | The body of the assignment demonstrates an unacceptably poor understanding of the assessment and nursing care of the person, presented with no effort to apply knowledge about the issues described, and/or provide patients with appropriate, evidence-based care. |
| The conclusion provides a summary of:  The main points of the assignment.  A critical reflection on the nursing care provided, and its potential to support and optimise the well-being of the patient in the context of the issues presented. | The conclusion provides a concise summary of the key points of the assignment and an exceptional critical reflection on the nursing care provided, and its potential to support and optimise the well-being of the patient in the context of the issues presented. | The conclusion provides a concise summary of the key points of the assignment and an excellent critical reflection on the nursing care provided, and its potential to support and optimise the well-being of the patient in the context of the issues presented. | The conclusion provides a very good summary of the key points of the assignment and a very good critical reflection on the nursing care provided, and its potential to support and optimise the well-being of the patient in the context of the issues presented. | The conclusion provides a good summary of the key points of the assignment and a good reflection on the nursing care provided, and its potential to support and optimise the well-being of the patient in the context of the issues presented. | The conclusion provides a limited summary of the key points of the assignment and a limited reflection on the nursing care provided, and its potential to support and optimise the well-being of the patient in the context of the issues presented. | The conclusion provides a minimally acceptable summary of the key points of the assignment and a poor/limited reflection on the nursing care provided, and its potential to support and optimise the well-being of the patient in the context of the issues presented. | The conclusion does not provide an adequate summary of the key points of the assignment and does not reflect on the nursing care provided, and its potential to support and optimise the well-being of the patient in the context of the issues presented. |
| Referencing  The assignment contains evidence of critical awareness of the relevant, recent evidence-based peer-reviewed literature and policy related to the selected issue/aspect of care. | The assignment provides evidence of comprehensive, critical background reading of relevant evidence-based literature.  Demonstrates exceptional synthesis of evidence to inform patient care. | The assignment provides evidence of extensive background reading of relevant evidence-based literature.  Demonstrates ability to synthesise evidence to inform patient care. | The assignment provides evidence of substantial background reading of evidence-based literature.  Demonstrates ability to analyse and present evidence to inform patient care. | The assignment provides evidence of a reasonable familiarity with the relevant evidence-based literature.  Demonstrates some ability to analyse and present evidence to inform patient care. | The assignment provides evidence of some familiarity with the relevant evidence-based literature.  Demonstrates limited ability to analyse and present evidence to inform patient care. | The assignment provides minimal evidence of familiarity with the relevant evidence-based literature.  Demonstrates minimal ability to analyse and present evidence to inform patient care. | The assignment provides no evidence of familiarity with the relevant evidence-based literature.  Demonstrates no ability to analyse and/or present evidence to inform patient care. |
| Presentation, Grammar, Punctuation & Spelling  ● *The presentation has a clear structure.*  ● *The rules of grammar, usage and punctuation are followed.*  ● *Spelling is correct.* | Exceptional presentation with essentially no spelling, grammar, or graphical errors. | Excellent presentation (spelling, grammar, graphical) with minimal or no presentation errors and an original and creative presentation style. | Good quality presentation with few spelling, grammar, or graphical errors. | Good presentation with some spelling, grammar, or graphical errors. | Satisfactory presentation with some spelling, grammar, or graphical errors. | Acceptable presentation with many spelling, grammar, or graphical errors. | Unacceptable presentation with many spelling, grammar, or graphical errors.  Evidence of substantial plagiarism. |
| Overall  Comments  *(Summary of Overall Grade from All Rubric Items)* | A comprehensive and highly focused assignment which demonstrates an exceptionally deep and systematic engagement with the issue presented. | A comprehensive, highly structured, focused.  and concise assignment which demonstrates a deep and systematic engagement with the issue presented. | A thorough and well-organised assignment which demonstrates substantial engagement with the issue presented. | An adequate and competent assignment which demonstrates an intellectually competent and factually sound engagement with the issue presented. | A satisfactory assignment which demonstrates some familiarity with the issue presented. | An acceptable assignment which demonstrates minimal familiarity with the issue presented. | An unacceptable assignment which demonstrates no familiarity with the issue presented.  The assignment does not follow assignment guidelines. |