# DEVELOPMENT AND IMPLEMENTATION OF AN INTERPROFESSIONAL SOAP NOTE GRADING TOOL

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### OBJECTIVES

1. Provide rationale for the importance of a standardized grading tool for group assignments.

2. Detail the steps towards development of an interprofessional grading tool for SOAP notes.

3. Detail the stepwise implementation procedure and use of grading tool within the class.

#### BACKGROUND/RATIONALE

- Two universities; 4 disciplines
  - University of Maryland Baltimore: Pharmacy, Nursing, Social Work
  - Salisbury University: Respiratory Therapy
- 10 critical care cases mostly using high fidelity mannequins completed over the course of the semester in student teams.
- Each team submits one group SOAP note per case and all students get the same grade.
- A standardized grading tool was needed to ensure consistency since faculty share the grading responsibilities.
- Historically, students struggled as a team to complete the SOAP note early in the semester.

## DEVELOPMENT AND IMPLEMENTATION

- Progress through components of SOAP in stepwise fashion
  - SO for primary problem
  - SOA for primary problem
  - SOAP for primary problem
  - SOAP for all problems
- Points gradually increase from 20-75 points over course of semester
- Each week students received feedback on previous week's SOAP note that they use incorporate into the following SOAP note.

Group:	Case N	ame:	Date:	Score <u>: /20</u>		
***All group r	members receive the same sco	ore. If SOAP note is not received by due date/	time outlined in the course schedule, no poin	ts will be awarded.		
Complaint/Reas	on for Encounter; History of Prese	atient reports concerning symptoms, treatments, me nt Illness; review of systems (ROS); Pertinent histor onal tone/expression, ability to communicate and un	edical history, etc. Include components as applicable y (past medical history (PMH), family hx, social hx); derstand instructions and medical conditions.	e. Potential elements for inclusion are: Chief Self-reported medication use and behaviors; Self-		
CRITERIA	□ includes only subjective data □ clearly & concisely written with a clear thought progression □ includes all pertinent information as above					
Out	standing (10 pts)	Good (8 pts)	Fair (5 pts)	Poor (2 pts)		
Section meets all three criteria		Is not clearly written <u>and/or</u> includes non-subjective data, but still includes all pertinent information	Does not include all pertinent information	Deficiencies in all three criteria		
	/E (O): Reproducible and verifi		sion are: Vital signs; Physical examination; Laborato	ry data; Testing data (i.e. ECHO); Observations of		
CRITERIA	□ includes only objective data RITERIA □ includes relevant data allowing for evaluation of disease control and/or medication efficacy □ includes relevant data allowing for evaluation of medication toxicity					
Outstanding (10 pts)		Good (8 pts)	Fair (5 pts)	Poor (2 pts)		
Section meets all three criteria		Deficiencies in 1 of the defined criteria	Deficiencies in 2 of the defined criteria	Deficiencies in all three criteria		
ASSESSM	IENT (A): Interprets (does no	t repeat) data from the S/O to comment on whether	patient-related goals are being met and if drug, and/	or disease, and/or social-related problems are present.		
ASSESSMENT (A): Interprets (does not repeat) data from the S/O to comment on whether patient-related goals are being met and if drug, and/or disease, and/or social-related problems are present. CRITERIA CRITERIA CRITER						
Outstanding (10 pts)		Good (8 pts)	Fair (5 pts)	Poor (2 pts)		
Section	meets all three criteria	Deficiencies in 1 of the defined criteria	Deficiencies in 2 of the defined criteria	Deficiencies in all three criteria		
PLAN (P): required clinician	Your interprofessional (including on monitoring and follow-up; and pa	disciplines outside of your team) plan should Include tient/family education (including discharge counseli	e drug, non-drug, and social/family oriented recommong) provided and how the plan will be communicated	endations; referrals for further study or evaluation; I among the team.		
CRITERIA	<ul> <li>appropriate drug, non-drug, and social/family recommendations made</li> <li>CRITERIA</li> <li>includes clinician monitoring plan <u>for all active problems</u> including short and long term goals with parameter(s) and timeframe for follow-up</li> <li>includes patient/family education and psychosocial needs provided</li> </ul>					
Out	standing (20 pts)	Good (16 pts)	Fair (10 pts)	Poor (4 pts)		
Section meets all three criteria		Deficiencies in 1 of the defined criteria	Deficiencies in 2 of the defined criteria	Deficiencies in all three criteria		

COMMENTS:

Group:	Case N	ame:	Date:	Score <u>: /30</u>		
***All group members receive the same score. If SOAP note is not received by due date/time outlined in the course schedule, no points will be awarded.						
Complaint/Reas	on for Encounter; History of Prese	atient reports concerning symptoms, treatments, me ent Illness; review of systems (ROS); Pertinent histor onal tone/expression, ability to communicate and un	y (past medical history (PMH), family hx, social hx);	e. Potential elements for inclusion are: Chief Self-reported medication use and behaviors; Self-		
CRITERIA	□ includes only subjective data □ clearly & concisely written with a clear thought progression □ includes all pertinent information as above					
Out	standing (10 pts)	Good (8 pts)	Fair (5 pts)	Poor (2 pts)		
Section meets all three criteria		Is not clearly written <u>and/or</u> includes non-subjective data, but still includes all pertinent information	Does not include all pertinent information	Deficiencies in all three criteria		
patient skills; Do	cumented mediation use; Docume	able data as applicable. Potential elements for inclue ented allergies	sion are: Vital signs; Physical examination; Laborato	ry data; Testing data (i.e. ECHO); Observations of		
CRITERIA Includes only objective data CRITERIA Includes relevant data allowing for evaluation of disease control and/or medication efficacy Includes relevant data allowing for evaluation of medication toxicity						
Outstanding (10 pts)		Good (8 pts)	Fair (5 pts)	Poor (2 pts)		
Section I	meets all three criteria	Deficiencies in 1 of the defined criteria	Deficiencies in 2 of the defined criteria	Deficiencies in all three criteria		
ASSESSM	IENT (A): Interprets (does no	t repeat) data from the S/O to comment on whether	natient-related goals are being met and if drug, and	or disease, and/or social-related problems are preser	nt	
ASSESSMENT (A): Interprets (does not repeat) data from the S/O to comment on whether patient-related goals are being met and if drug, and/or disease, and/or social-related problems are present.         CRITERIA						
Outstanding (10 pts)		Good (8 pts)	Fair (5 pts)	Poor (2 pts)		
Section meets all three criteria		Deficiencies in 1 of the defined criteria	Deficiencies in 2 of the defined criteria	Deficiencies in all three criteria		
PLAN (P): Your interprofessional (including disciplines outside of your team) plan should Include drug, non-drug, and social/family oriented recommendations; referrals for further study or evaluation; required clinician monitoring and follow-up; and patient/family education (including discharge counseling) provided and how the plan will be communicated among the team. CRITERIA C						
Out	standing (20 pts)	Good (16 pts)	Fair (10 pts)	Poor (4 pts)		
Section meets all three criteria Deficiencies in 1 of the defined criteria Deficiencies in 2 of the defined criteria Deficiencies in all three criteria						

Group:	Case N	ame:	Date:		/50		
***All group members receive the same score. If SOAP note is not received by due date/time outlined in the course schedule, no points will be awarded.							
Complaint/Reaso	on for Encounter; History of Prese	atient reports concerning symptoms, treatments, me nt Illness; review of systems (ROS); Pertinent histor onal tone/expression, ability to communicate and un	y (past medical history (PMH), family hx, social hx);	e. Potential elements for inclusion are: Chief Self-reported medication use and behaviors	; Self-		
CRITERIA	□ includes only subjective data □ clearly & concisely written with a clear thought progression □ includes all pertinent information as above						
Outs	standing (10 pts)	Good (8 pts)	Fair (5 pts)	Poor (2 pts)			
Section meets all three criteria		Is not clearly written <u>and/or</u> includes non-subjective data, but still includes all pertinent information	Does not include all pertinent information	Deficiencies in all three criteria			
	/E (O): Reproducible and verificumented mediation use; Documented m	able data as applicable. Potential elements for inclusented allergies	sion are: Vital signs; Physical examination; Laborato	ry data; Testing data (i.e. ECHO); Observati	ons of		
CRITERIA	□ includes only objective data RIA □ includes relevant data allowing for evaluation of disease control and/or medication efficacy □ includes relevant data allowing for evaluation of medication toxicity						
Outstanding (10 pts)		Good (8 pts)	Fair (5 pts)	Poor (2 pts)			
Section r	meets all three criteria	Deficiencies in 1 of the defined criteria	Deficiencies in 2 of the defined criteria	Deficiencies in all three crite	ria		
	ENT (A): Interprets (does no does not repeat S/O da conveys accurate infor cope with medical situati	t repeat) data from the S/O to comment on whether Ita and/or does not introduce new S/O da Imation regarding treatment goals, and c on cise <i>rationale</i> to explain lack of control/s	patient-related goals are being met and if drug, and/ ta urrent control/stability for <u>all active prob</u>	or disease, and/or social-related problems a ems_and ability of patient/family sy	re present. /stem to		
ASSESSM	ENT (A): Interprets (does no does not repeat S/O da conveys accurate infor cope with medical situati includes clear and con	t repeat) data from the S/O to comment on whether Ita and/or does not introduce new S/O da Imation regarding treatment goals, and c on cise <i>rationale</i> to explain lack of control/s	patient-related goals are being met and if drug, and/ ta urrent control/stability for <u>all active prob</u>	or disease, and/or social-related problems a ems_and ability of patient/family sy	re present. /stem to		
ASSESSM CRITERIA	ENT (A): Interprets (does no does not repeat S/O da conveys accurate infor cope with medical situati includes clear and con why no issues are preser	t repeat) data from the S/O to comment on whether ta and/or does not introduce new S/O da mation regarding treatment goals, and c on cise <i>rationale</i> to explain lack of control/s nt	patient-related goals are being met and if drug, and/ ta urrent control/stability for <u>all active prob</u> tability, presence of disease and/or drug	or disease, and/or social-related problems a ems_and ability of patient/family sy related problem, <u>or</u> accurately exp	re present. /stem to lains		
ASSESSM CRITERIA Outs Section r	ENT (A): Interprets (does no does not repeat S/O da conveys accurate infor cope with medical situati includes clear and con why no issues are preser standing (10 pts) meets all three criteria	t repeat) data from the S/O to comment on whether ata and/or does not introduce new S/O da rmation regarding treatment goals, and c on cise <i>rationale</i> to explain lack of control/s at Good (8 pts)	patient-related goals are being met and if drug, and/ ta urrent control/stability for <u>all active prob</u> tability, presence of disease and/or drug Fair (5 pts) Deficiencies in 2 of the defined criteria e drug, non-drug, and social/family oriented recomm	or disease, and/or social-related problems a <u>ems</u> and ability of patient/family sy related problem, <u>or</u> accurately exp <u>Poor (2 pts)</u> Deficiencies in all three crite endations; referrals for further study or evalu	re present. /stem to lains ria		
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ASSESSM CRITERIA Outs Section r PLAN (P): required cliniciar CRITERIA	ENT (A): Interprets (does no does not repeat S/O da conveys accurate infor cope with medical situati includes clear and con why no issues are preser standing (10 pts) meets all three criteria Your interprofessional (including on monitoring and follow-up; and pa appropriate drug, non- includes clinician mon	t repeat) data from the S/O to comment on whether at a and/or does not introduce new S/O da tration regarding treatment goals, and co on cise rationale to explain lack of control/s at Good (8 pts) Deficiencies in 1 of the defined criteria disciplines outside of your team) plan should Include tient/family education (including discharge counselin drug, and social/family recommendations itoring plan <u>for all active problems</u> include	patient-related goals are being met and if drug, and/ ta urrent control/stability for <u>all active prob</u> tability, presence of disease and/or drug Fair (5 pts) Deficiencies in 2 of the defined criteria e drug, non-drug, and social/family oriented recomm ng) provided and how the plan will be communicated s made ling short and long term goals with parar	or disease, and/or social-related problems a ems_and ability of patient/family sy related problem, <u>or</u> accurately exp Poor (2 pts) Deficiencies in all three crite endations; referrals for further study or evalue among the team.	re present. /stem to lains ria		

Group:	Case N	ame:	Date:	Score:	/75	
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CRITERIA	□ includes only subjective data □ clearly & concisely written with a clear thought progression □ includes all pertinent information as above					
Outs	standing (15 pts)	Good (12 pts)	Fair (7.5 pts)	Poor (3	pts)	
Section meets all three criteria		Is not clearly written <u>and/or</u> includes non-subjective data, but still includes all pertinent information	Does not include all pertinent information	Deficiencies in all three criteria		
	<b>/E (O):</b> Reproducible and verifi- ocumented mediation use; Docume	able data as applicable. Potential elements for inclusented allergies	sion are: Vital signs; Physical examination; Laborato	ry data; Testing data (i.e. ECHC	); Observations of	
CRITERIA	□ includes only objective data					
Outstanding (15 pts)		Good (12 pts)	Fair (7.5 pts)	Poor (3	ots)	
Section meets all three criteria		Deficiencies in 1 of the defined criteria	Deficiencies in 2 of the defined criteria	Deficiencies in all three criteria		
ASSESSM	IENT (A): Interprets (does not	t repeat) data from the S/O to comment on whether	patient-related goals are being met and if drug, and/	or disease, and/or social-related	l problems are present.	
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CRITERIA	cian monitoring and follow-up; and patient/family education (including discharge counseling) provided and how the plan will be communicated among the team.           Image: appropriate drug, non-drug, and social/family recommendations made           Image: appropriate drug, non-drug, and social family recommendations made           Image: appropriate drug, non-drug, and social family recommendations made           Image: appropriate drug, non-drug, and social family recommendations made           Image: appropriate drug, non-drug, and social family recommendations made           Image: appropriate drug, non-drug, and social family recommendations made					
Outs	standing (30 pts)	Good (24 pts)	Fair (15 pts)	Poor (6 pts)		
Section meets all three criteria COMMENTS:					1	

#### CONCLUSIONS

- Creation of a standardized grading tool for all SOAP note assignments has allowed for consistent in grading across disciplines.
- The SOAP note format allowed the students to build upon the skills learned with the previous week's note and facilitated improvement in identifying, assessing, and treating patient related problems.

## **Ouestions?** If one does not ask one never knows...