Table A. Academic Performance Assessment Scheme

Assessment component	Assessment item	Maximum score	Scoring criteria
Formative assessment	Attendance	5	• Full attendance and punctuality throughout the course: 5 points; • Occasional lateness or absence with valid reason: 3–4 points; • Repeated lateness or absence: 1–2 points; • Rrequent absence or failure to meet minimum attendance requirements: 0 points.
	Assignment and task completion	7	• All assignments and learning tasks completed on time with high quality: 6–7 points; • Most tasks completed with acceptable quality: 4–5 points; • Incomplete or delayed submissions: 2–3 points; • Major tasks missing: 0–1 point.
	Classroom participation	5	• Actively participated in discussions, case analysis, group activities, and interactive learning: 5 points; • Participated regularly: 3–4 points; • Limited participation: 1–2 points; • No meaningful participation: 0 points.
	Learning notes and quizzes	6	• Complete and well-organized learning notes and high quiz performance: 5–6 points; • Generally complete notes and satisfactory quiz performance: 3–4 points; • Incomplete notes or low quiz performance: 1–2 points; • No notes or quizzes completed: 0 points.
	Practical skills performance	7	• Demonstrated accurate, standardized, and independent performance of required practical skills: 6–7 points; • Performed most procedures correctly with minor errors: 4–5 points; • Required substantial guidance or showed several procedural errors: 2–3 points; • Unable to complete required procedures safely or correctly: 0–1 point.
Subtotal		**30**	
Summative assessment	Standardized written examination	70	The summative assessment consisted of a standardized written examination generated from the Xuexitong question bank. The examination assessed theoretical knowledge, competency application, and professional values. The raw written examination score was converted proportionally to a maximum of 70 points.
Total academic performance score		**100**	**Total score = formative assessment score + converted summative written examination score. Higher scores indicated better academic performance.**

Table B. Objective Structured Clinical Examination (OSCE) Assessment Scheme

Clinical competency was assessed using an Objective Structured Clinical Examination (OSCE) developed by the teaching team according to the course objectives and competency framework of this study. The OSCE consisted of three scenario-based stations with trained standardized patients. Each station lasted 10 minutes and was scored on a 100-point scale. The overall OSCE score was calculated as the mean score of the three stations. Performance was rated independently by two trained assessors using station-specific procedural checklists and a global rating scale. The final score for each station was calculated as the average of the two assessors' scores.

Station	Scenario/task	Main competency assessed	Duration	Maximum score
Station 1	Hemiplegia dressing training	Admission assessment, rehabilitation nursing skills, patient education, communication, and safety awareness	10 min	100
Station 2	Chronic pain management	Postoperative monitoring, pain assessment, symptom management, clinical reasoning, and health education	10 min	100
Station 3	Cognitive rehabilitation for brain injury	Emergency response, cognitive function assessment, rehabilitation intervention, risk identification, and patient-centered care	10 min	100

Station 1: Hemiplegia dressing training

Assessment item	Scoring criteria	Maximum score
Preparation and introduction	Introduces self, verifies patient identity, explains the purpose and procedure of dressing training, and obtains cooperation.	10
Assessment before training	Assesses limb function, muscle strength, range of motion, skin condition, pain, cognitive status, and safety risks.	15
Training plan and instruction	Selects appropriate dressing sequence and methods according to the affected side; explains key points in simple and clear language.	20
Procedural performance	Demonstrates or guides dressing training accurately, safely, and step by step; protects the affected limb and prevents falls or injury.	25
Communication and encouragement	Provides encouragement, responds to patient questions, and promotes patient confidence and self-care ability.	15
Safety and humanistic care	Maintains privacy, comfort, and dignity; observes patient tolerance and stops or adjusts training when necessary.	10
Summary and documentation	Summarizes patient performance and records key findings, problems, and follow-up guidance.	5
Total		**100**

Station 2: Chronic pain management

Assessment item	Scoring criteria	Maximum score
Preparation and introduction	Introduces self, verifies patient identity, explains the purpose of pain assessment and management, and establishes rapport.	10
Pain assessment	Assesses pain location, intensity, nature, duration, aggravating and relieving factors, medication use, sleep, activity, and emotional impact.	20
Clinical judgment	Identifies possible causes of pain and related nursing problems; recognizes warning signs requiring further medical attention.	15
Pain management intervention	Provides appropriate non-pharmacological pain management strategies, such as positioning, relaxation, breathing, distraction, heat/cold precautions, or rehabilitation guidance.	20
Health education	Educates the patient on pain monitoring, medication adherence where applicable, activity adjustment, rehabilitation exercises, and when to seek help.	15
Communication and empathy	Demonstrates empathy, listens actively, validates the patient's pain experience, and encourages patient participation.	10
Safety, summary, and documentation	Ensures safety, evaluates patient response, summarizes care recommendations, and records key assessment and intervention information.	10
Total		**100**

Station 3: Cognitive rehabilitation for brain injury

Assessment item	Scoring criteria	Maximum score
Preparation and introduction	Introduces self, verifies patient identity, explains the assessment and rehabilitation task, and creates a calm environment.	10
Cognitive and functional assessment	Assesses orientation, attention, memory, language, executive function, emotional status, daily living ability, and safety risks.	20
Risk identification and clinical reasoning	Identifies key cognitive deficits, fall risk, aspiration risk, behavioral problems, or communication barriers; prioritizes nursing problems appropriately.	15
Rehabilitation intervention	Selects appropriate cognitive rehabilitation strategies, such as orientation training, memory training, attention exercises, task simplification, environmental cues, or family involvement.	20
Emergency or abnormal response management	Recognizes sudden changes or unsafe behaviors and responds promptly with appropriate nursing actions and escalation when needed.	10
Communication and patient-centered care	Uses simple language, repetition, encouragement, and respectful communication; adapts communication to the patient's cognitive level.	10
Health education and family guidance	Provides guidance on home safety, cognitive training, daily activity support, and follow-up rehabilitation.	10
Summary and documentation	Summarizes assessment findings, intervention plan, and follow-up recommendations; records information accurately.	5
Total		**100**

Questionnaire A. Student satisfaction and acceptability questionnaire

Instructions: Please select the response that best reflects your opinion regarding ***the traditional teaching approach***.

Part A. Acceptance of the Teaching Model

1. Overall, how would you rate your acceptance of the traditional teaching approach?

☐ Accept

□ Neutral

□ Not accept

Part B. Satisfaction with Learning Outcomes

2. Overall, how satisfied are you with your learning outcomes achieved through this course?

□ Satisfied

□ Moderately satisfied

□ Not satisfied

Optional Comments

3. Please provide any comments or suggestions regarding the teaching approach.

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Questionnaire B. Student satisfaction and acceptability questionnaire

Instructions: Please select the response that best reflects your opinion regarding ***the Five-Step Model teaching approach***.

Part A. Acceptance of the Teaching Model

1. Overall, how would you rate your acceptance of the Five-Step Model teaching approach?

□ Accept

□ Neutral

□ Not accept

Part B. Satisfaction with Learning Outcomes

2. Overall, how satisfied are you with your learning outcomes achieved through this course?

□ Satisfied

□ Moderately satisfied

□ Not satisfied

Optional Comments

3. Please provide any comments or suggestions regarding the teaching approach.

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