

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Faculty: Frances Brennan, MSN, RN; Amy M. Rockwell, MSN, RN
Chandra Barnes, BSN, RN; Brian Seitz, MSN, RN
Brittany Lombardi, MSN, RN

Date of Completion: 4/29/2022

Faculty eSignature:	Brittany Lombardi, MSN, RN
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Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S), Needs Improvement (NI), Unsatisfactory (U), and Not Available (NA)**. The faculty member will initial if in agreement with the student's evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, U, or NA". If the student does not self-rate, then it is an automatic "U". A student who submits the clinical evaluation tool late will be rated as "U" in the appropriate competency(s) for that clinical week. Whenever a student receives a "U" in a competency, it must be addressed with a comment as to why it is no longer a "U" the following week. If the student does not state why the "U" is corrected, it will be another "U" until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. If the final performance code is unsatisfactory or needs improvement in any one of the competencies, a grade of unsatisfactory is given. If a pattern of unsatisfactory performance occurs after performing the competency satisfactorily, this also constitutes a grade of unsatisfactory. An unsatisfactory or needs improvement as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.

Clinical Assignments
Completion of Patient Care
Meditech Documentation
Observation of Clinical Performance
Evaluation of Clinical Performance Tool
Onsite Clinical Debriefing
Clinical Discussion Rubric
Preceptor Feedback
Nursing Care Plan Rubric
Skills Lab Checklists/Competency Tool
Lasater Clinical Judgment Rubric
Virtual Simulation scenarios
Pathophysiology Grading Rubric

Date		Number of Hours	Comments	Make Up (Date/Time)
Initials	Faculty Name			
CB	Chandra Barnes, BSN, RN			
FB	Fran Brennan, MSN, RN			
BL	Brittany Lombardi, MSN, RN			
AR	Amy Rockwell, MSN, RN			
BS	Brian Seitz, MSN, RN			

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

Satisfactory (S): Safe; accurate each time, efficient, coordinated; confident, focuses on the patient; some expenditure of excess energy; within a reasonable time period; appropriate affective behavior; occasional supporting cues; minimal faculty feedback needed related to written clinical work.

UNSATISFACTORY CLINICAL PERFORMANCE

Needs Improvement (NI): Safe, accurate each time, skillful in parts of behavior, focuses more on the skill and self rather than the patient, inefficient, uncoordinated, anxious, worried, and flustered at times, expends excess energy within a delayed time period, frequent verbal and occasional physical directive cues in addition to supportive cues, faculty feedback required in several areas of clinical written work.

Unsatisfactory (U): Failure to achieve the course competency, safe but needs faculty reminders constantly, not always accurate, unskilled, inefficient, considerable expenditure of excess energy, anxious, disruptive or omitting behaviors, focus on skills and/or self, continuous verbal and frequent physical cues, unsafe, performs at risk to patient/clients/others, unable to function, incomplete, erroneous, faulty, illegible clinical written work, no feedback sought from faculty or response to feedback not evident in submitted written work. If the student does not self-rate a competency the competency is graded "U." A "U" in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the "U," the faculty member (s) will continue to rate the competency unsatisfactory.

OTHER

Not Available (NA): The clinical experience which would meet the competency was not available.

Grey shaded weekly competency boxes do not need a student evaluation rating or faculty/teaching assistant initials.

Objective

1. Engage in the coordination and delivery of nursing care measures to groups of patients and to patients with complex problems. (1,3,4,5,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	S	S	S	N/A	N/A	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
a. Manage complex patient care situations with evidence of preparation and organization. (Responding)	S	S	S	N/A	N/A	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
b. Assess comprehensively as indicated by patient needs and circumstances. (Noticing)	S	S	S	S	N/A	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
c. Evaluate patient's response to nursing interventions. (Reflecting)	S	S	S	S	N/A	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
d. Interpret cardiac rhythm; determine rate and measurements. (Interpreting)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	NA	N/A	N/A	N/A	S	S	N/A	N/A	N/A	S
e. Administer medications observing the six rights of medication administration. (Responding)	S	S	S	N/A	N/A	N/A	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. (Responding)	N/A	N/A	N/A	S	N/A	N/A	N/A	N/A	S	N/A	S	N/A	N/A	S	N/A	N/A	N/A	S
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. (Responding)	S	S	S	N/A	N/A	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
Faculty Initials	FB	FB	FB	AR	AR	AR	AR	AR	AR	BS	BS	BS	BS	BS	BL	BL	BL	BL
Clinical Location	4N PM	3T PM	3T PM	Digestive Health	Core Measures	Patient Advocate	N/A	N/A		N/A	Special procedures, Cardiac diagnostics, Infusion center	N/A	4C	4C	4P	N/A	N/A	

Comments:

*End-of- Program Student Learning Outcomes

Week 3 (1a,b,c)- Great job managing a group of patients, assessing patients to determine needs and priority of care, and evaluating the patient's response to care delivered. FB

Week 4 (1b)- Great job assessing your patients and responding to needs appropriately. FB

Week 5 (1f)- Great job performing IV starts during the digestive health clinical. Proper technique and aseptic procedures were followed. Keep up the great work! FB

Week 7 (1c)- Excellent discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience. Keep up the great work! Preceptor comments: Satisfactory in all areas. AR

Week 10 CD 1b- Nice job discussing the diagnostic procedures you observed during your time in Cardiac Diagnostics and summarizing the associated interventions. Nice job also of correlating the information obtained from the procedures to the patients' symptoms. IS- 1c- Good job describing two of the patients you worked with at the infusion center and the nursing interventions provided to them. SP- 1b,c- Nice work discussing the interventions provided to the patients in Special Procedures and evaluating the patient responses to them. Nice job also of correlating the information obtained from the procedures to the patients' symptoms. BS

Week 12- 1a-e,f- Nice work this week assessing and managing care for your mechanically ventilated patient. Several cardiac rhythms were identified and measured. Medications were administered (OG, IVP, IV, Ophthalmic) appropriately while observing the six rights. BS

Week 13- 1a-e,f- Nice work this week assessing and managing care for your critical care patient. Several cardiac rhythms were identified and measured. Medications were administered (PO, SQ, IV) appropriately while observing the six rights. BS

Week 14-1(a-e,g) Emsley, you did an excellent job this week managing complex patient care situations. You were well prepared for clinical, and completed all your nursing interventions in a timely manner. You did an excellent job with your medication passes and followed all six rights of medication administration. You satisfactorily completed your ECG book, and you monitored your patients very closely to ensure positive patient outcomes. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

2. Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care of diverse populations, evidence-based practice, and clinical judgment. (1,2,3,4,5,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	S	S	S	N/A	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
a. Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. CC (Noticing, Interpreting, Responding)	S	S	S	N/A	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
b. Monitor for potential risks and anticipate possible early complications. (Noticing, Interpreting, Responding)	S	S	S	S	N/A	N/A	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
c. Recognize changes in patient status and take appropriate action. (Noticing, Interpreting, Responding)	S	S	S	N/A	N/A	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. CC (Noticing, Interpreting, Responding, Reflecting)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	NA	N/A	N/A	N/A	N/A	S	N/A	N/A	N/A	S
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. (Responding)	S	S	S	S	N/A	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
Faculty Initials	FB	FB	FB	AR	AR	AR	AR	AR	AR	BS	BS	BS	BS	BS	BL	BL	BL	BL

Comments:

Week 3 (2a,b)- Good use of clinical judgement as you correlate the relationship between patient's disease process, current symptoms, and present condition. You are also assessing for potential risks and anticipating possible complications as you prioritize care for your assigned patients. Keep up the good work! FB

Week 4 (2c)- Great use of clinical judgement as you monitor for risks and possible complications. FB

Week 12- 2a-c,e- Great job correlating the relationships among your patient's disease process, history, symptoms, and present condition utilizing your clinical judgment skills. Good job discussing potential cultural considerations assessed while caring for your patient. BS

Week 13- 2d,e- Good work on your care plan. Please see rubric below for feedback. Nice job discussing social determinants of health that could potentially have an impact on your patient's health during debriefing. BS

Week 14-2(b,c) Great job in debriefing discussing how you monitored your patient for potential risks and anticipated early complications. You also did a great job discussing changes in patient status you noticed, as well as how you responded and took action. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective																		
3. Plan leadership experiences with a mentor to impact team performance, patient safety, and quality indicators. (1,3,5,7,8)*																		
Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	S NA	N/A	N/A	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
a. Critique communication barriers among team members. (Interpreting)	S NA	N/A	N/A	N/A	S	N/A	N/A	N/A	S	N/A	N/A S	N/A	N/A	N/A	N/A	N/A	N/A	S
b. Participate in QI, core measures, monitoring standards and documentation. (Interpreting & Responding)	S NA	N/A	N/A	N/A	S	N/A	N/A	N/A	S	N/A	S	N/A	N/A	N/A	N/A	N/A	N/A	S
c. Discuss strategies to achieve fiscal responsibility in clinical practice. (Responding)	S NA	N/A	N/A	N/A	S	N/A	N/A	N/A	S	N/A	S	N/A	N/A	N/A	N/A	N/A	N/A	S
d. Clarify roles & accountability of team members related to delegation. (Noticing)	S	S	S	N/A	N/A	S	N/A	N/A	S	N/A	N/A	N/A	S	S	S	N/A	N/A	S
e. Determine the priority patient from assigned patient population. (Interpreting) (Patient Mgmt.)	S	S	S	N/A	N/A	S	N/A	N/A	S	N/A	S	N/A	N/A	N/A	N/A	N/A	N/A	S
Faculty Initials	FB	FB	FB	AR	AR	AR	AR	AR	AR	BS	BS	BS	BS	BS	BL	BL	BL	BL

Comments:

Week 2 (3a,b,c)- These competencies will be completed during various clinical rotation (i.e. quality assurance/core measures, ICU/4P rotations). (3d,e)- Great discussion, noticing accountability of delegation and the clarification of roles. You also did a great job interpreting facts to determine the need for prioritization of assigned patient during this clinical rotation. FB

Week 3 (3d,e)- You have demonstrated the process of delegation, responsibility, and accountability of the interdisciplinary team members. Great job determining priority care of assigned patients and the priority patient of assigned patients. Keep up the great work! FB

Week 4 (3d, e)- Great job with prioritization and using clinical judgement to determine plan of care. Make sure when delegating care, as the RN you are responsible for knowing the abilities to whom you are delegating. FB

Week 6 (3b)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. Great job! RN comments- Rapid Response: Excellent in all areas; Stroke- Satisfactory in all areas. "Nice Job! Good luck in Oncology or Med/Surg!" AR

Week 10- IS- 3c- Nice job discussing ways in which members of the healthcare team can contribute to the fiscal health of the organization. SH- 3b,c- Nice work discussing the resources you utilized to complete the Quality Scavenger Hunt and the variances you discovered as you completed it. Good job also of discussing how these variances can affect the fiscal health of the health system. BS

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

4. 4. Plan for a future in the nursing profession by analyzing information concerning employment, licensure, ethical, and legal issues in nursing focusing on accountability and respecting patient autonomy. (1,2,4,5)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A	NA	N/A	N/A	N/A	S	N/A	N/A	N/A	N/A	S
a. Critique examples of legal or ethical issues observed in the clinical setting. (Interpreting)	NA																	
b. Engage with patients and families to make autonomous decisions regarding healthcare. (Responding)	S	S	S	S	N/A	S	N/A	N/A	S	N/A	S	N/A	N/A	S	S	N/A	N/A	S
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. (Responding)	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
Faculty Initials	FB	FB	FB	AR	AR	AR	AR	AR	AR	BS	BS	BS	BS	BS	BL	BL	BL	BL

Comments:

Week 2 (4a)- This competency will be discussed during your ICU/4P clinical rotation. FB

Week 3 (4c)- You have demonstrated yourself in a very professional manner during this clinical rotation. Great job! FB

Week 12- 4a,c- Good job discussing examples of legal/ethical issues observed in the clinical setting during debriefing this week. Professional behavior observed at all times. BS

Week 13- 4c- Professional behavior observed at all times in the clinical setting. BS

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

5. Construct methods for self-reflection and critiquing healthcare systems, processes, practices and regulations on a weekly basis. (7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
a. Reflect on your overall performance in the clinical area for the week. (Responding)	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
b. Demonstrate initiative in seeking new learning opportunities. (Responding)	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. (Interpreting)	S NA	N/A	N/A	N/A	N/A S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
d. Perform Standard/Standard Plus Precautions. (Responding)	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
e. Practice use of standardized EBP tools that support safety and quality. (Responding)	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
f. Utilize faculty feedback to improve clinical performance. (Responding & Reflecting)	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
Faculty Initials	FB	FB	FB	AR	AR	AR	AR	AR	AR	BS	BS	BS	BS	BS	BL	BL	BL	BL

Comments:

Week 2 (5c)- This competency will be completed during the ICU/4P clinical rotation. (5a) Reported on by assigned RN on 1/18/2022- Satisfactory in all areas except Professionalism and Attendance (Excellent). Student Goals: Have better prioritization among patients when administering pain medications and completing assessments. Allow for better time management skills. JB/FB

Week 3 (5a)- Reported on by assigned RN on 1/25/2022 – Satisfactory in all areas except Collection/Documentation of Data, Communication Skills, Professionalism, and Attendance (Excellent). No comments made. 1/26/2022 – Excellent in all areas except Knowledge Base, Technical Skills, Delegation (Satisfactory). No comments made. MW/FB

Week 4 (5a)- Reported on by assigned RN on 2/1/2022– Satisfactory in all areas except Professionalism and Attendance (Excellent). Student Goals: “Meet all needs and requirements of four patients; manage time and resources efficiently between my patients; become more confident in my skills and abilities.” Additional Preceptor Comments: “Makes good use of her time; has a good base of knowledge and asks if unsure; she is going to be a great nurse! Good Luck, Emsley.” TM/FB Reported on by assigned RN on 2/2/2022 – Satisfactory in all areas except Knowledge Base, Professionalism, and Attendance (Excellent). Student Goals: “View an admission process including initial assessment; become familiar with reviewing medications upon admission; start an IV.” TM/FB

*End-of- Program Student Learning Outcomes

Week 6 (5c)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. Keep it up! AR
Week 10:

Emsley Bricker with Mary Grieger

3-22-22 – Satisfactory in all areas. “Quiet, shy and timid, pleasant.”

Emsley Bricker with Diana Gibson

3-23-22 – Satisfactory in all areas. “Emsley was able to see a Thora, a couple of IV starts.”

Week 12- 5a,b,c,e- You performed well in the clinical environment this week. During debriefing you were able to discuss factors that create a culture of safety and discuss the use of EBP tools that support safety and quality, nice work! BS

Week 13- 5a,b- You performed well in the clinical environment this week, providing quality nursing care to your patient. You were also able to observe an intubation. BS

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

6. Engage with members of the healthcare team, patients, families, faculty, and peers through written, verbal and nonverbal methods, and by utilizing computer technology. (1,2,6,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	S	S	S	N/A	N/A	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
a. Establish collaborative partnerships with patients, families, and coworkers. (Responding)																		
b. Teach patients and families based on readiness to learn and discharge learning needs. (Interpreting & Responding)	S	S	S	N/A	N/A	S	N/A	N/A	S	N/A	S	N/A	N/A	S	S	N/A	N/A	S
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. (Responding)	S	S	S	S	N/A	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
d. Deliver effective and concise hand-off reports. (Responding)	S	S	S	N/A	N/A	N/A	N/A	N/A	S	N/A	N/A	N/A	S	S	S	N/A	N/A	S
e. Document interventions and medication administration correctly in the electronic medical record. (Responding)	S	S	S	N/A	N/A	N/A	N/A	N/A	S	N/A	N/A	N/A	S	S	S	N/A	N/A	S
f. Consistently and appropriately posts in clinical discussion groups. (Responding and Reflecting)	S	S	S	N/A	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
Faculty Initials	FB	FB	FB	AR	AR	AR	AR	AR	AR	BS	BS	BS	BS	BS	BL	BL	BL	BL

Comments:

Week 2 (6d)- Satisfactory hand-off report competency rubric completed with a score of 30 by assigned RN and returned to faculty. (6f)- CDG was posted following all rubric criteria and on-time. FB

Week 3 (6f)- CDG posting is satisfactorily completed following CDG rubric criteria and on time. FB

Week 4 (6e)- Good job recognizing the importance of medication reconciliation and how collaboration assists with positive patient outcomes for the patient. FB

Week 6 (6f)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. Keep up the great work! AR

Week 7 (6c,f)- Excellent discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience. Keep up the great work through the second half of the semester! AR

*End-of- Program Student Learning Outcomes

Week 10- 6c- Nice work on your Infusion Center CGD and discussing examples of collaboration among the interdisciplinary team. BS

Week 12- 6a,c,e,f- Nice job working collaboratively with your nurses this week. Good job documenting nursing interventions and medication administration, and excellent job with your pathophysiology CDG this week. Please see rubric below for feedback. BS

Week 13- 6a,c,e,f- Nice job working collaboratively with your nurses this week. Nice job documenting nursing interventions and medication administration, and great job with your care plan CDG this week. Please see rubric below for feedback. BS

Week 14-6(e,f) Excellent job with all your documentation this week in clinical. Your documentation was done in a timely manner and accurate. You also did an excellent job with your CDG. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

7. Devise methods utilized by nursing to develop the profession, advance the knowledge base, ensure accountability, and improve the outcomes of care delivery.
(1,3,4,6,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
a. Value the need for continuous improvement in clinical practice based on evidence. (Responding)																		
b. Accountable for investigating evidence-based practice to improve patient outcomes. (Responding)	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
c. Comply with the FRMCSN "Student Code of Conduct Policy." (Responding)	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S	S	S	S	S	S	N/A	N/A	S	N/A	S	N/A	S	S	S	N/A	N/A	S
Faculty Initials	FB	FB	FB	AR	AR	AR	AR	AR	AR	BS	BS	BS	BS	BS	BL	BL	BL	BL

Comments:

Week 6 (7a)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. AR

Midterm- You have done an excellent job during the clinical experiences the first half of the semester; keep up the great work as you complete the semester! AR

Week 14-7(a,b) You researched and summarized an interesting EBP article in your CDG titled "Factors Influencing Adherence to Treatment in Older Adults with Hypertension" Excellent job! BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Skills Lab Evaluation Tool
AMSN
2022

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills									
	Meditech Document (1,2,3,4,5,6)*	Physician Orders (1,2,3,4,5,6)*	Prioritization/ Delegation (1,2,3,4,5,6)*	Resuscitation (1,3,6,7)*	IV Start (1,3,4,6)*	Blood Admin./IV Pumps (1,2,3,4,5,6)*	Central Line/Blood Draw/Ports/IV Push (1,2,3,4,6)*	Head to Toe Assessment (1,2,6)*	ECG/Telemetry Placements/CT (1,6)*	ECG Measurements (1,2,4,5,6)*
	Date: 1/11/2022	Date: 1/11/2022	Date: 1/11/2022	Date: 1/11/2022	Date: 1/13/2022	Date: 1/13/2022	Date: 1/14/2022	Date: 1/14/2022	Date: 1/14/2022	Date: 1/14/2022
Evaluation:	S	S	S	S	S	S	S	S	S	S
Faculty Initials	FB	FB	FB	FB	FB	FB	FB	FB	FB	FB
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

***Course Objectives**

Comments:

Resuscitation: Satisfactory participation in the practice of Hands-Only CPR, discussion regarding use of and ventilation with bag-valve mask/Ambu bag, and review of crash cart and Code Blue team duties and documentation. AR

Meditech: Satisfactory participation of assessment documentation including physical re-assessment, safety and fall assessment, RN mechanical ventilator assessment, IV location assessment, and documentation editing. Great job! FB

Physician Orders: Satisfactory completion of physician's order lab utilizing SBAR communication and taking orders over the phone. Good job! CB/BS

Prioritization/Delegation: Satisfactory completion of the prioritization and delegation skills lab. You satisfactorily prioritized care for multiple patients using multiple methods (e.g. Maslow's hierarchy of needs, ABC, Nursing Process, etc.). You were able to appropriately delegate nursing tasks for the patients, and you actively participated in the group discussion on delegation of nursing tasks. Great job! BL

Blood administration/IV pump: Satisfactory completion of practice with blood administration safety checks activity. Great job with IV pump practice, the use of the medication library, and pump set up of primary and secondary IV medication infusion. AR

IV Starts: Satisfactory participation in the IV Start lab, including practice with technique, initiation and discontinuation of IV site, and placement of IV dressing. FB/BS/CB/BL

Head to Toe Assessment: You are satisfactory for the head-to-toe assessment competency. Nice Job! BL/BS

ECG/Telemetry/Chest Tube: Satisfactory participation with review of monitoring tutorial and placement of ECG/Telemetry patches and leads; satisfactory participation in review of Chest Tube/Atrium tutorial. BL/BS

Ports/Blood Draw: You were satisfactory in accessing an Infusaport device, demonstrated proper technique for CVAD cap change and satisfactorily demonstrated how to draw blood from a CVAD per hospital policy. Nice work! CB

Central Line Dressing/IV push: Satisfactory central line dressing change using proper technique, as well as line flushing. Great job with preparation of mixing a medication with normal saline and administering as an IV push through the central line. FB

ECG Measurements: Satisfactory participation in and practice of ECG measurements during the ECG Measurements Lab. You accurately measured and interpreted a 6-second rhythm strip for Normal Sinus Rhythm. Great job! AR

Nursing Care Plan Grading Tool
AMSN
2022

Student Name: E. Bricker

Clinical Date: 4/12/22-4/13/22

Firelands Regional Medical Center School of Nursing
Advanced Medical Surgical Nursing 2022
Simulation Evaluations

<u>vSim Evaluation</u> Performance Codes: S: Satisfactory U: Unsatisfactory								
	Rachael Heidebrink (Pharmacology) (1, 2, 6, 7)*	Week 8: Dysrhythmia Simulation (see rubric)	Junetta Cooper (Pharmacology) (1, 2, 6, 7)*	Mary Richards (Pharmacology) (1, 2, 6, 7)*	Lloyd Bennett (Medical-Surgical) (1, 2, 6, 7)*	Kenneth Bronson (Medical-Surgical) (1, 2, 6, 7)*	Carl Shapiro (Pharmacology) (1, 2, 6, 7)*	Comprehensive Simulation (see rubric)
	Date: 2/18/2022	Date: 3/2-3/2022	Date: 3/4/2022	Date: 3/18/2022	Date: 3/25/2022	Date: 3/31/2022	Date: 4/28/2022	Date: 4/28/2022
Evaluation	S	S	S	S	S	S	S	S
Faculty Initials	AR	AR	AR	BS	BS	BS	BL	BL
Remediation: Date/Evaluation/ Initials	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

2/18/2022- Satisfactory completion of vSim Rachael Heidebrink and accurate documentation. AR

3/4/2022- Satisfactory during dysrhythmia simulation (see rubric) and vSim Junetta Cooper. Keep up the great work! AR

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **L. Briscoe, J. Schloemer, B. Lesch, E. Bricker, K. McCoy** OBSERVATION DATE/TIME: **3/3/2022 1430-1630** SCENARIO #: **1**

CLINICAL JUDGMENT	OBSERVATION NOTES				
COMPONENTS NOTICING: - Focused Observation: E A D B - Recognizing Deviations from Expected Patterns: E A D B - Information Seeking: E A D B	Notices patient's heart rate is decreased. Notices patient's heart rhythm is Sinus Bradycardia. Notices patient's rhythm changed to a 2nd degree Mobitz II heart block after two doses of Atropine are given. Notices patient's heart rate is elevated. Notices patient's heart rhythm is irregular and in A-fib. Notices patient has decreased BP after diltiazem is administered. Does not notice patient's low EF or history of heart failure before recommending fluid bolus. Notices that patient is in fluid overload after fluids are administered. Notices patient is unresponsive.				
INTERPRETING: - Prioritizing Data: E A D B - Making Sense of Data: E A D B	Interprets patient's heart rhythm as Sinus Bradycardia. Prioritizes calling the physician for patient's low heart rate and symptoms. Prioritizes administering Atropine 1 mg IVP after receiving order from physician. Interprets patient's heart rhythm change as a 2nd degree Mobitz II heart block. Interprets patient's heart rhythm as A-fib. Prioritizes calling physician for elevated heart rate and rhythm. Prioritizes administering diltiazem promptly after order is received. Prioritizes stopping the fluids once patient shows signs and symptoms of fluid overload. Interprets patient's heart rhythm as v-tach without a pulse.				
RESPONDING: - Calm, Confident Manner: E A D B - Clear Communication: E A D B - Well-Planned Intervention/Flexibility: E A D B - Being Skillful: E A D B	Introduces self. Assesses pain. Performs head to toe assessment. Obtains vital signs (SpO2-91%, HR-48, BP-103/61). Identifies patient. Administers 2L oxygen via NC, increases oxygen to 4L. Calls physician to notify of weakness, fatigue, and low heart rate (reminder to use SBAR). Recommends Atropine 1 mg IVP Q3-5 minutes. Administers Atropine 1 mg IVP. Reassesses patient's vital signs and heart rhythm. Administers second dose of Atropine 1 mg IVP. Calls physician. Recommends transcutaneous pacing as a treatment option. Introduces self and identifies patient. Assesses patient's symptoms, raises HOB. Begins head to toe assessment and obtains vital signs. Places patient on the heart monitor. Administers oxygen. Calls physician, attempts to utilize SBAR (remember to give history and a recommendation). Recommends diltiazem after prompted by physician. Correctly identifies dose and rate of diltiazem. Reads back orders from physician. Educates patient on performing Valsalva maneuver (reminder this is not recommended for a patient in A-fib). Administers diltiazem				

*End-of- Program Student Learning Outcomes

	bolus and gtt. Reassesses patient's vital signs and heart rhythm. Increases oxygen. Calls physician (reminder to use SBAR). Stops diltiazem after ordered to by physician. Recommends IV fluid bolus to increase BP. Administers IV fluid bolus. Reassesses patient's vital signs and respiratory assessment. Stops fluid bolus. Calls physician, recommends cardioversion for treatment. Assesses patient's pulse. Begins CPR. Begins bagging patient. Calls Code Blue. Administers Epinephrine 1 mg IVP. Places pads on patient. Defibrillates patient (reminder to always prioritize defibrillation for patients in pulseless v-tach or v-fib).
REFLECTING: • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Discussed first scenario, identification and treatments for symptomatic bradycardias. Reviewed chart to look for causes of heart block (metoprolol, patient history). Talked about holding medication to see if sinus rhythm will be restored. Alternate drugs for complete heart block discussed (epi, dopamine). Discussed pacing options for symptomatic bradycardias (transcutaneous, transvenous, permanent). Talked about the importance of adjusting electrical current to obtain capture, need for medication). Excellent teamwork! Discussed recognition of A-fib and associated symptoms. Talked about goals of diltiazem therapy. Discussed importance of providing patient history to physician when calling. Explanation and demonstration of synchronized cardioversion; discussed differences between cardioversion and defibrillation, the need for sedating medications prior to delivering shock. Great teamwork and communication. Discussed the importance of immediate CPR and defibrillation with pulseless v-tach. Discussed alternative to epi (amiodarone). Roles of the code team discussed (recorder, CPR, airway, meds, lead). Potential causes of code blue discussed (review of chart reveals low K+). Defibrillation discussed, starting low and increasing joules with subsequent shocks. Excellent job!
SUMMARY COMMENTS: E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric Developing to accomplished is required for satisfactory completion of this simulation.	You are satisfactory for this simulation, great job!

Pathophysiology Grading Rubric
Firelands Regional Medical Center School of Nursing
Advanced Medical Surgical Nursing
2022

Student Name: **E. Bricker**

Clinical Date: **4/5/22-4/6/22**

1. Provide a description of your patient including current diagnosis and past medical history. (2 points total) - Current Diagnosis (1) 1 - Past Medical History (1) 1	Total Points: 2 Comments: Good job discussing your patient's diagnosis and past medical history.
2. Describe the pathophysiology of your patient's current diagnosis. (1 point total) Pathophysiology-what is happening in the body at the cellular level (1) 1	Total Points: 1 Comments: Good job discussing the pathophysiology of your patient's diagnosis.
3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total) - All patient's signs and symptoms included (1) 1 - Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1) 1 - Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1) 1	Total Points: 3 Comments: Good discussion of the correlations between your patient's symptoms and diagnoses.
4. Correlate the patient's current diagnosis with all related labs. (4 points total) - All patient's relevant lab result values included (1) 1 - Rationale provided for each lab test performed (1) 1 - Explanation provided of what a normal lab result should be in the absence of current diagnosis (1) 1 - Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1) 1	Total Points: 4 Comments: Nice job including relevant lab values and providing rationales and correlations.
5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total) - All patient's relevant diagnostic tests and results included (1) 1 - Rationale provided for each diagnostic test performed (1) 1 - Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1) 1 - Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (1)	Total Points: 4 Comments: Good job discussing the information obtained from the diagnostic tests and correlating it to the patient's diagnosis.

1	
6. Correlate the patient's current diagnosis with all related medications. (3 points total) - All related medications included (1) 1 - Rationale provided for the use of each medication (1) 1 - Explanation of how each of the patient's relevant medications correlate with current diagnosis (1) 1	Total Points: 3 Comments: Great job listing medications, providing rationales, and explaining relevance to the patient's diagnoses.
7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total) - All pertinent past medical history included (1) 1 - Explanation of how patient's pertinent past medical history correlates with current diagnosis (1) 1	Total Points: 2 Comments:
8. Describe nursing interventions related to current diagnosis. (1 point total) All nursing interventions provided for patient explained and rationales provided (1) 0.5	Total Points: 0.5 Comments: Interventions listed but with no rationales.
Total possible points = 20 17-20 = Satisfactory 14-16 = Needs improvement <13 = Unsatisfactory	19.5/20 Satisfactory. BS Nice work Emsley!

Lasater Clinical Judgment Rubric Scoring Sheet: AMSN

Objectives:

*End-of- Program Student Learning Outcomes

1. Assessment of ACS/STEMI, HF, and Atrial Fibrillation from admission to discharge. (1,6)*
2. Initiate treatment protocols for ACS/STEMI, HF, and Atrial Fibrillation. (1,6)*
3. Collaborate and communicate with interdisciplinary health care providers while transitioning from admission to discharge. (1,2,6)*
4. Summarize the nursing implications for medications and treatments utilized in the care of patients with ACS/STEMI, HF, and Atrial Fibrillation. (1,3,5,6,7)*
5. Demonstrate ability to resolve conflict among interdisciplinary healthcare team members. (6,7)*

DATE: 4/28/2022					Comprehensive Simulation				
CLINICAL JUDGMENT					OBSERVATION NOTES				
NOTICING: (2,6)*					Recognized Afib and impending heart failure and suggested appropriate therapies for both conditions. Recognized the different medical diagnosis and past medical history that needed to be considered when developing a discharge care map. Recognized the association between patient history, including non-compliance, and current findings. Recognized the appropriate use of MONAH (morphine, oxygen, nitrates, aspirin, heparin), fluid resuscitation, diuretics, and potassium use for the inferior wall MI patient. Recognized the necessary components of assessment for the post Inferior STEMI patient upon return from the cardiac cath lab. Recognized the appropriate patient information pertinent to communication with oncoming nurse following SBAR.				
• Focused Observation:	E	A	D	B					
• Recognizing Deviations from Expected Patterns:	E	A	D	B					
• Information Seeking:	E	A	D	B					
INTERPRETING: (1,2,3,6)*					Excellent interpretation of data. Upon reviewing the patient's chart/ECG, Afib was noticed and interpreted to be a priority. When reviewing patient's symptom upon arrival to the Critical Care Unit, symptoms were interpreted to indicate heart failure/fluid overload. Interpreted current diagnosis and past medical history and determined the need for education on current and past health issues as well as lifestyle modifications. Interpreted the areas affected by an inferior wall MI and artery responsible for this particular MI. Excellent job prioritizing appropriate data to include in communication using the SBAR format.				
• Prioritizing Data:	E	A	D	B					
• Making Sense of Data:	E	A	D	B					
RESPONDING: (1,5,6)*					Multiple dosage calculations performed accurately. Several IV drips and boluses (heparin, nitroglycerin, Bivalirudin, amiodarone) were calculated and initiated appropriately. Sedation medications				
• Calm, Confident Manner:	E	A	D	B					

*End-of- Program Student Learning Outcomes

• Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: B E A D	were calculated and verbalized. Appropriate medications were chosen to treat Afib and heart failure/fluid overload. Potassium level was noted and the need to give supplemental K+ along with furosemide was recognized. Very good job! Active participation in the group discussion related to lifestyle modification including diet/exercise, rest, smoking cessation, monitoring blood pressure, weight management, incision care, and symptom recognition. Participated in discussion related to response to symptoms, compliance with follow-up appointment and medications, medication storage, and regular communication with the healthcare provider. Applied appropriate interventions based on assessment findings. Active engagement during debriefing session. Demonstrated clear communication providing the necessary components to include during change of shift hand-off report utilizing SBAR. Provided appropriate response to conflict resolution during shift report.
REFLECTING: (4,6)* • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Able to identify new knowledge obtained through the simulation and how to apply to future patient care scenarios. Acknowledged the importance of customizing teaching to accommodate patient lifestyle. Asked appropriate questions to gain understanding of information provided. Identified areas of improvement to foster clear and concise communication using SBAR. Reflected on ways to resolve conflict in appropriate manner.
Developing to accomplished in all areas is required for satisfactory completion of this simulation.	Comments: Overall fantastic job with the STEMI Comprehensive Simulation.

E = exemplary, A = accomplished, D = developing, B = Beginning
Based off of Lasater's Clinical Judgment Rubric

EVALUATION OF CLINICAL PERFORMANCE TOOL Advanced Medical Surgical Nursing- 2022

*End-of- Program Student Learning Outcomes

**Firelands Regional Medical Center School of Nursing
Sandusky, Ohio**

I was given the opportunity to review my final clinical ratings in each course competency. I was given the opportunity to ask questions about my clinical performance. I have the following comments to make about my clinical performance/final clinical evaluation:

Student eSignature & Date:

ar 12/15/2021