

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Psychiatric Nursing- 2022**  
**Firelands Regional Medical Center School of Nursing**  
**Sandusky, Ohio**

**Student:** Livia Suresh

**Final Grade:** Satisfactory/Unsatisfactory

**Semester:** Summer Session

**Date of Completion:**

**Faculty:** Fran Brennan MSN, RN, Monica Dunbar MSN, RN,  
 Lora Malfara MSN, RN, Brittany Lombardi MSN, RN  
**Teaching Assistants:** Chandra Barnes BSN, RN, Devon Cutnaw BSN, RN

**Faculty eSignature:**

**DIRECTIONS FOR USE:**

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 on the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, or U". 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, the following week it must be addressed with a comment as to why it is no longer a "U". If the student does not state why the "U" is corrected, then 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 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 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.

**METHODS OF EVALUATION:**

- Clinical Patient Profile
- Meditech Documentation
- Evaluation of Clinical Performance Tool
- Onsite Clinical Debriefing
- Online Discussion Rubric
- Nursing Process Recording Rubric
- Geriatric Assessment Rubric
- Lasater Clinical Judgment Rubric
- Virtual Simulation scenarios
- Participation in adjunctive therapies (N.A./A.A.; Erie County Detox Unit, Hospice inpatient care)
- EBP Presentations Rubric
- Hospice Reflection Journal
- Observation of Clinical Performance
- Clinical Nursing Therapy Group
- Nursing Care Map Rubric

**ABSENCE (Refer to Attendance Policy)**

Date	Number of Hours	Comments	Make Up (Date/Time)
Initials	Faculty Name		
FB	Frances Brennan, MSN, RN		
MD	Monica Dunbar MSN, RN		
BL	Brittany Lombardi MSN, RN		
LM	Lora Malfara MSN, RN		
CB	Chandra Barnes BSN, RN		
DC	Devon Cutnaw BSN, RN		

\* End-of-Program Student Learning Outcomes

## **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 effective 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.

<b>Objective</b>										
1. Apply the principles of psychiatric theory in the care of adolescent to geriatric patients with a mental illness diagnosis. (1, 2, 3, 5, 6, 7, 8)*										
Weeks of Course:	1	2	3	4	5	6	7	8	9//Make Up	<b>Final</b>
<b>Competencies:</b>	NA	S	S							
a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder. <b>(noticing)</b>	NA	S	S							
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. <b>(interpreting)</b>	NA	S	S							
c. Provide culturally and spiritually competent care within the scope of nursing that meets the needs of assigned patients from diverse cultural, racial and ethnic backgrounds. <b>(responding)</b>	NA	S	S							
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care <b>(noticing)</b>	NA	S	S							
e. Recognize social determinants of health and the relationship to mental health. <b>(reflecting)</b>	NA	S	S							
f. Develop and implement an appropriate nursing therapy group activity. <b>(responding)</b>	NA	NA	S							
g. Develop a geriatric physical/mental health assessment and education plan. <b>(Geriatric Assessment) (responding)</b>										
Faculty Initials	<b>FB</b>	<b>FB</b>								
Clinical Location		1-S	1-S							

\* End-of-Program Student Learning Outcomes

**Comments:** Week 2 (1a,b)- Great job providing an understanding of mental illness and its relationship to an individual's physical health. You also were able to correlate the importance of alternative therapies used in conjunction with medication therapy to increase the chances of mental well-being. (1e). Social determinants of health were recognized and how they affect an individual's mental health. FB

<b>Objective</b>										
2. Synthesize concepts related to psychopathology, health assessment data, evidenced based practice and the nursing process using clinical judgment skills to plan and care for patients with mental illness. (1, 2, 3, 4, 5, 6, 7, 8)*										
Weeks of Course:	1	2	3	4	5	6	7	8	9//Make Up	<b>Final</b>
<b>Competencies:</b>	NA	S	S							
a. Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. <b>(noticing)</b>	NA	S	S							
b. Identify patient's subjective and objective findings including labs, diagnostic tests, and risk factors. <b>(noticing, recognizing)</b>	NA	S	S							
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. <b>(noticing, interpreting)</b>	NA	S	S							
d. Formulate a prioritized nursing care map utilizing clinical judgment skills. <b>(noticing, interpreting, responding, reflecting)</b>	NA	S	S							
e. Apply the principles of asepsis and standard precautions. <b>(responding)</b>	NA	S	S							
f. Practice use of standardized EBP tools that support safety and quality. <b>(noticing, responding)</b>	NA	S	S							
Faculty Initials	FB	FB								

**Comments:** Week 2 (2a)- Great job providing a thorough history including past and present issues. (2b) Subjective and objective data including labs, diagnostic testing and associated risk factors were provided. (2d) Satisfactory completion of prioritized nursing care map, see grading rubric attached below. FB

\* End-of-Program Student Learning Outcomes

## Objective

3. Refine basic verbal and nonverbal therapeutic communication skills when interacting with patients, families, and members of the health care team. (1, 2, 3, 5, 7, 8)\*

Weeks of Course:	1	2	3	4	5	6	7	8	9//Make Up	Final
a. Illustrate professionally appropriate and therapeutic communication skills in interactions with patients, and families. <b>(responding)</b>	NA	S	S							
b. Demonstrate professional and appropriate communication with the treatment team by using the SBAR format for handoff communication during transition of care. <b>(responding)</b>	NA	S	S							
c. Identify barriers to effective communication. <b>(noticing, interpreting)</b>	NA	S	S							
d. Construct effective therapeutic responses. <b>(responding)</b>	NA	S	S							
e. Construct a satisfactory patient-nurse therapeutic communication. <b>(Nursing Process Study) (responding, reflecting)</b>										
f. Posts respectfully and appropriately in clinical discussion groups. <b>(responding, reflecting)</b>	NA	S	S							
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. <b>(responding)</b>	NA	S	S							
h. Teach patient/family based on readiness to learn and patient needs. <b>(responding, reflecting)</b>	NA	S	S							
Faculty Initials	FB	FB								

**Comments:** Week 2 (3a) You did a great job communicating while interacting with patients on 1-S this week. (3f)- CDG was done on time and documented in the appropriate section. FB

\* End-of-Program Student Learning Outcomes

## Objective

4. Demonstrate knowledge of frequently prescribed medications utilized in treating mental illness. (1, 4, 5, 6, 7)\*

Weeks of Course:	1	2	3	4	5	6	7	8	9//Make Up	Final
a. Discuss the safe administration of medication while observing the six rights of medication administration. <b>(responding)</b>	NA	S	S							
b. Demonstrate ability to discuss the uses and implication of psychotropic medications. <b>(responding, reflecting)</b>	NA	S	S							
c. Identify the major classification of psychotropic medications. <b>(interpreting)</b>	NA	S	S							
d. Identify common barriers to maintaining medication compliance. <b>(reflecting)</b>	NA	S	S							
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications. <b>(responding, reflecting)</b>	NA	S	S							
Faculty Initials	FB	FB								

**Comments:** Week 2 (4b)- Good job with discussion of patient's medications and appropriate implications. FB

\* End-of-Program Student Learning Outcomes

## Objective

5. Develop an awareness of community Mental Health resources and services. (5, 6, 7, 8)\*

Weeks of Course:	1	2	3	4	5	6	7	8	9//Make Up	Final
a. Identify the need for the community resources-detox unit available to patients with a mental illness. <b>(noticing, interpreting)</b>	NA	NA	NA							
b. Discuss recommendations for referrals to appropriate community resources and agencies. <b>(reflecting)</b>	NA	NA	NA							
c. Attend Erie County Health Department Detox Unit observing the care of a patient with mental illness-substance abuse. <b>(Community Agency Observation-Detox Unit)</b>	NA	NA	NA							
d. Attend Narcotics/Alcoholics Anonymous meeting. <b>(Alcoholics/Narcotics Anonymous at the Artisans of Sandusky Observation)</b>	NA	NA	NA							
Faculty Initials	FB	FB								

Comments:

\* End-of-Program Student Learning Outcomes

**Objective**

6. Demonstrate satisfactory proficiency when using informatics and techniques in the assessment of patients with a mental illness diagnosis. (1, 2, 3, 4, 6, 8)\*

Weeks of Course:	1	2	3	4	5	6	7	8	9//Make Up	Final
<b>Competencies:</b>	NA	S	S							
a. Demonstrate competence in navigating the electronic health record. <b>(responding)</b>	NA	S	S							
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record. <b>(responding)</b>	NA	S	S							
c. Demonstrate the use of technology to identify mental health resources. <b>(responding)</b>	NA	S	S							
Faculty Initials	FB	FB								

**Comments:**

\* End-of-Program Student Learning Outcomes

## Objective

7. Evaluate self-participation in patient care experiences with the focus on safety, ethical, legal, and professional responsibilities. (7)\*

Weeks of Course:	1	2	3	4	5	6	7	8	9//Make Up	Final
a. Identify your strengths for care delivery of the patient with mental illness. <b>(reflecting)</b>	NA	S	S							
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care. <b>(responding)</b>	NA	S	S							
c. Illustrate active engagement in self-reflection and debriefing. <b>(reflecting)</b>	NA	S	S							
d. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE” – attitude, commitment, and enthusiasm during all clinical interactions. <b>(responding)</b>	NA	S	S							
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. <b>(responding)</b>	NA	S	S							
f. Comply with the standards outlined in the FRMCSN policy, “Student Conduct While Providing Nursing Care.” <b>(responding)</b>	NA	S	S							
Faculty Initials	FB	FB								

### Comments:

**7a- (week 2) 6/15/22** Strengths for myself this week would be the ability to sit and listen to a patient’s true concerns and needs. Being an open ear was very important to my patients this week, and I was able to approach them in a non-judgmental manner and allow them to vent. **Great strength, active listening is very important, being an active listener is often just what an individual needs and sometimes is difficult to do. Active listening is a form of therapeutic communication. FB**

**7a- (week 3) 6/24/22** Strengths for myself this week would be being able to create a trusting relationship with my patient in 1-S. By creating a sense of universality with my patient (without oversharing or reversing roles), I told my patient how much she reminded me of my sister. My patient feels hopeless and that taking her life is the best option. I told her my sister feels the same way I would be lost without her, and that people would be just as hurt too if she were to end her life. I felt like this openness and genuineness of conversation made her feel more comfortable talking with me.

Firelands Regional Medical Center School of Nursing  
Care Map Grading Rubric

Course Objective: Synthesize concepts related to psycho-pathology, health assessment data, evidence based practice, and the nursing process using clinical judgment skills to plan and care for patients with mental illness.	<b>Student Name:</b> Livia Suresh  <b>Date:</b> 6/15/2022
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**Top Nursing Priority:** Risk for Suicide r/t verbal suicidal ideation

		3 Points >75% Complete	2 Points 50-75% Complete	1 Point <50% Complete	0 Points 0% Complete	Comments
Noticing	Identify all abnormal assessment findings, <u>subjective and objective</u>	3				Great job providing all subjective and objective data obtained during your assessment of the patient.
	Identify all abnormal lab finds/diagnostic tests	3				
	Identify all risk factors	3				Very thorough list of all risk factors provided.
	Highlight all related/relevant data in the noticing boxes				0	No data related to the priority problem is highlighted such as some of data provided in the assessment findings.
Interpreting	List all nursing priorities	3				
	Highlight the top <u>mental health</u> nursing priority	3				
	Identify all potential complications	3				Nice job presenting potential complications.

	Highlight potential complications relevant to top <b>mental health</b> nursing priority				0	All complications related to the priority nursing problem, therefore all should have been highlighted.
	Identify signs and symptoms to monitor for each complication		2			For each complication that was listed there should have been signs and symptoms provided.
Responding	List all nursing interventions relevant to top <b>mental health</b> nursing priority	3				
	Interventions are prioritized		2			Prioritizing interventions should always start with an assessment and then based off of that data you will carry out orders and provide education.
	All interventions include a frequency	3				
	All interventions are individualized and realistic	3				Great job individualizing and all interventions were realistic for this patient.
	An appropriate rationale is included for each intervention	3				
Reflecting	List the reassessment findings for the top <b>mental health</b> nursing priority	3				
	Reflection includes one of the following statements: <ul style="list-style-type: none"> <li>Continue plan of care</li> <li>Modify plan of care</li> <li>Terminate plan of care</li> </ul> <b>Discuss pertinent Social Determinants of Health for your patient</b>	3				Great job providing a list of all the social determinants of health.
48-33 points = Satisfactory 32-17 points = Needs Improvement ≤ 16 points = Unsatisfactory		<b>Total Points Earned: 40/48</b> <b>Comments: Overall great job, Satisfactory completion.</b> <b>Faculty Initials: FB</b>				

Firelands Regional Medical Center School of Nursing  
Psychiatric Nursing 2022  
Simulation Evaluations

<b><u>vSim Evaluation</u></b>	Linda Waterfall (Anxiety/Cultural Scenario) (*1,2,3,4,5)	Sharon Cole (Bipolar Scenario) (*1,2,3,4,5)	Sandra Littlefield (Borderline Personality Disorder Scenario) (*1,2,3,4,5)	George Palo (Alzheimer's Disorder) (*1,2,3,4,5)	Randy Adams (PTSD Scenario) (*1,2,3,4,5)
Performance Codes:  S: Satisfactory  U: Unsatisfactory					
Evaluation	S				
Faculty Initials	FB				
<b>Remediation:</b> Date/Evaluation/Initials	NA				

\* Course Objectives

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Psychiatric Nursing**

**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:

