

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

**Student:**

Tamica Ivey

**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)
6/16/2022	2	Did not turn vSim reflection questions in on time	6/16/2022 1230
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 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.

Objective										
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	Final
<b>Competencies:</b>	N/A	S	S	n/a	S	n/a	N/A			
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>	N/A	S	S	n/a	S	n/a	N/A			
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. <b>(interpreting)</b>	N/A	S	S	n/a	S	n/a	N/A			
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>	N/A	S	S	n/a	S	n/a	N/A			
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care <b>(noticing)</b>	N/A	S	S	n/a	S	n/a	N/A			
e. Recognize social determinants of health and the relationship to mental health. <b>(reflecting)</b>	N/A	S	S	n/a	S	n/a	N/A			
f. Develop and implement an appropriate nursing therapy group activity. <b>(responding)</b>	N/A	N/A	S	n/a	S	n/a	N/A			
g. Develop a geriatric physical/mental health assessment and education plan. <b>(Geriatric Assessment) (responding)</b>					N/A					
Faculty Initials	FB	FB	DC	LM	DC	BL	BL			
Clinical Location	N/A	1S	1S	N/A	Hospice	No Clinical	DETOX			

\* 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

**Week 3 1 c,d – You did well communicating and respecting patients and their narratives. Proper use of therapeutic communication. DC**

<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> 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>	N/A	S	S	n/a	S	n/a	N/A			
b. Identify patient's subjective and objective findings including labs, diagnostic tests, and risk factors. <b>(noticing, recognizing)</b>	N/A	S	S	n/a	S	n/a	N/A			
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. <b>(noticing, interpreting)</b>	N/A	S	S	n/a	S	n/a	N/A			
d. Formulate a prioritized nursing care map utilizing clinical judgment skills. <b>(noticing, interpreting, responding, reflecting)</b>	N/A	S	S	n/a	S	n/a	N/A			
e. Apply the principles of asepsis and standard precautions. <b>(responding)</b>	N/A	S	S	n/a	S	n/a	N/A			
f. Practice use of standardized EBP tools that support safety and quality. <b>(noticing, responding)</b>	N/A	S	S	n/a	S	n/a	N/A			
Faculty Initials	FB	FB	DC	LM	DC	BL	BL			

**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

**Week 3 2 a-c, e,f –You did well communicating the patient’s history and reason for admission. DC**

\* End-of-Program Student Learning Outcomes

<b>Objective</b>										
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	<b>Final</b>
a. Illustrate professionally appropriate and therapeutic communication skills in interactions with patients, and families. <b>(responding)</b>	N/A	S	S	n/a	S	n/a	N/A			
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>	N/A	S	S	N/a	S	n/a	N/A			
c. Identify barriers to effective communication. <b>(noticing, interpreting)</b>	N/A	S	S	n/a	S	n/a	N/A			
d. Construct effective therapeutic responses. <b>(responding)</b>	N/A	S	S	n/a	S	n/a	N/A			
e. Construct a satisfactory patient-nurse therapeutic communication. <b>(Nursing Process Study) (responding, reflecting)</b>					S					
f. Posts respectfully and appropriately in clinical discussion groups. <b>(responding, reflecting)</b>	N/A	S	S	n/a	S	n/a	<del>N/A</del> S			
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. <b>(responding)</b>	N/A	S	S	n/a	S	n/a	<del>N/A</del> S			
h. Teach patient/family based on readiness to learn and patient needs. <b>(responding, reflecting)</b>	N/A	S	S	n/a	S	n/a	N/A			
Faculty Initials	FB	FB	DC	LM	DC	BL	BL			

**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

**Week 3 3 a-h – Good job on both of your CDGs for this week. You did well with therapeutic communication and were professional at all times. DC**

\* End-of-Program Student Learning Outcomes

Week 7-3(f) Tamica, you did an excellent job with your CDG for your Detox clinical experience this week. Your responses were very thorough and reflected much thought. I am glad you enjoyed your experience on this unit. Keep up all your great work! BL

## 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>	N/A	N/A	S	n/a	S	n/a	N/A			
b. Demonstrate ability to discuss the uses and implication of psychotropic medications. <b>(responding, reflecting)</b>	N/A	S	S	n/a	S	n/a	N/A			
c. Identify the major classification of psychotropic medications. <b>(interpreting)</b>	N/A	S	S	n/a	S	n/a	N/A			
d. Identify common barriers to maintaining medication compliance. <b>(reflecting)</b>	N/A	S	S	n/a	S	n/a	N/A			
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications. <b>(responding, reflecting)</b>	N/A	S	S	n/a	S	n/a	N/A			
Faculty Initials	FB	FB	DC	LM	DC	BL	BL			

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

**Week 3 4 a-h – You correlated the medications to the patient's medical needs and easily communicated contraindications/S.E. DC**

\* 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>	N/A	N/A	S	n/a	S	n/a	S			
b. Discuss recommendations for referrals to appropriate community resources and agencies. <b>(reflecting)</b>	N/A	N/A	S	n/a	S	n/a	S			
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>	N/A	N/A	N/A	n/a	N/A	n/a	S			
d. Attend Narcotics/Alcoholics Anonymous meeting. <b>(Alcoholics/Narcotics Anonymous at the Artisans of Sandusky Observation)</b>	N/A	N/A	S	n/a	N/A	n/a	N/A			
Faculty Initials	FB	FB	DC	LM	DC	BL	BL			

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>	N/A	S	S	n/a	S	n/a	N/A			
a. Demonstrate competence in navigating the electronic health record. <b>(responding)</b>	N/A	S	S	n/a	S	n/a	N/A			
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record. <b>(responding)</b>	N/A	S	S	n/a	S	n/a	N/A			
c. Demonstrate the use of technology to identify mental health resources. <b>(responding)</b>	N/A	S	S	n/a	S	n/a	N/A			
Faculty Initials	FB	FB	DC	LM	DC	BL	BL			

**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>	N/A	S-NI	S	n/a	S	n/a	N/A			
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>	N/A	S	S	n/a	S	n/a	<del>N/A</del> S			
c. Illustrate active engagement in self-reflection and debriefing. <b>(reflecting)</b>	N/A	S	S	n/a	S	n/a	N/A			
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE" – attitude, commitment, and enthusiasm during all clinical interactions. <b>(responding)</b>	N/A	S	S	n/a	S	n/a	<del>N/A</del> S			
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. <b>(responding)</b>	N/A	S	S	n/a	S	n/a	<del>N/A</del> S			
f. Comply with the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care." <b>(responding)</b>	N/A	S	S	n/a	S	n/a	<del>N/A</del> S			
Faculty Initials	FB	FB	DC	LM	DC	BL	BL			

**Comments:** Week 2 (7a)- Please identify a strength for 1-S, Hospice, and Sandusky Artisans clinical experiences. FB

7 (A) Week 2 : I feel like my strength for week two was my ability to therapeutically communicate with my patient. I felt really good being able to talk to her and discuss some of her childhood trauma. I really got to know her and develop a therapeutic relationship with her.

7 (A) Week 3: ( Artisans) My strength for this week was being able to open up and share in a group setting. I was nervous at first but I overcame my fear and was able to share my thoughts and feelings about my life experiences. I gained a lot of support from my peers and I am more inclined to share.

(1S) My strength in 1S this week was my ability to connect to my patient in a therapeutic way. I remained professional and was able to recognize the need to provide information about myself to the patient only when it was necessary to assist her in coping strategies that she could use for her own situation. **You are truly a natural at therapeutic communication! DC**

**Week 5** Week 5 (3f)- Tamica, you did a great job on your reflection responses for the Hospice clinical experience. You provided substantive responses to each question. You have satisfactorily met the requirements for this clinical. Great job! LM

**7(a) Week 5 ( Hospice) My strength for this week was being able to recognize my feelings about the hospice experience. I understood how I felt about hospice care from my prior experience in a hospice clinical as an LPN. Hospice care is a specialty that isn't one of my favorites but I salute the nurse who decide to become one.**

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> Tamica Ivey <b>Date:</b> 6/15/2022				
<b>Top Nursing Priority:</b> Self-directed harm/other directed harm/violence						
		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		2			Objective data related to the priority problem is not highlighted.
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 <u>mental health</u> nursing priority	3				All complications related to the priority nursing problem, 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	3				Great job prioritizing interventions including assessment, safety measures, and medication administration.
	All interventions include a frequency			1		Frequencies were provided for one intervention.
	All interventions are individualized and realistic	3				Great job individualizing and all interventions and they 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		2			Address all assessment findings individually including subjective and objective patient findings.
	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 your patient's social determinants of health.
48-33 points = Satisfactory 32-17 points = Needs Improvement ≤ 16 points = Unsatisfactory		<b>Total Points Earned: 43/48</b> <b>Comments: Overall great job, Satisfactory completion.</b> <b>Faculty Initials: FB</b>				

<b>Criteria</b>	<b>Ratings</b>				<b>Points Earned</b>
Criterion #1 Process Recording is organized and neatly completed	5 Points Typed process recording with spelling and grammar correct.	3 Points Typed process recording with 5 or less spelling and grammar mistakes.	1 Points Typed process recording with 5 or more spelling and grammar mistakes.	0 Points Process recording is not typed with 10 or more spelling and grammar mistakes.	<b>3</b>
Criterion #2 Assessment	7 Points Identifies pertinent patient background, current medical and psychiatric history. Provides a self-assessment of thoughts and feelings prior and during therapeutic communication interaction with patient. Identifies the milieu and effects on patient.	5 Points Identifies areas of assessment but incomplete data provided in 2 of the 4 areas. Provides a self- assessment of thoughts and feelings prior and during therapeutic communication interaction with patient. Identifies the milieu and effects on patient.	3 Point Identifies areas of assessment but incomplete data provided in 3 of the 4 areas. Provides a self- assessment of thoughts and feelings prior and during therapeutic communication interaction with patient. Identifies the milieu and effects on patient.	0 Points Missing data in all 4 areas of assessment.	<b>7</b>
Criterion #3 Mental Health Nursing Diagnosis (priority problem)	8 Points Identifies priority mental health problem (not a medical diagnosis) providing at least 5 potential complications.	5 Points Identifies Priority mental health problem provides at least 4 potential complications.	3 Point Identifies priority mental health problem provides at least 3 potential complications.	0 Points Does not provide priority mental health problem and/or less than 3 potential complications.	<b>8</b>
Criterion #4 Nursing Interventions	10 Points Identifies all pertinent nursing interventions (at least 5) in priority order including a rationale and timeframe. Interventions must be individualized and realistic. Identifies a therapeutic communication goal	6 Points Identifies 4 or less nursing interventions in priority order including a rationale and time frame. Interventions are not individualized and/or realistic. Identifies a therapeutic communication goal.	4 Point Identifies 4 or less nursing interventions but not prioritized and/or no rationale or time frame provided. Interventions are not individualized and /or realistic. Identifies a therapeutic communication goal.	0 Points Identifies less than 4 interventions, not prioritized, individual, realistic, no rationale, no time frame. No therapeutic communication goal.	<b>6</b>
Criterion #5 Process Recording	15 Points Provides direct quotes for all interchanges. Nonverbal and Verbal behavior is described for all interactions. Students thoughts and feelings concerning	10 Points Direct quotes are not provided. Nonverbal and Verbal behavior is described for at least 7 interactions. Student	5 Point Direct quotes are not provided. Nonverbal and Verbal behavior is described for at least 5 interactions. Student	0 Points Direct quotes are not provided. Nonverbal and Verbal behavior is not described for less than half of the	<b>10</b>

	each interaction is provided.	thoughts and feelings concerning at least 5 interactions are provided.	thoughts and feelings concerning at least 5 interactions are provided.	interactions. Student thoughts and feelings for less than half of the interactions provided.	
Criterion #6 Process Recording	20 Points Analysis of each interaction providing type of communication (therapeutic or nontherapeutic) and technique (exploring, focusing, reflecting, formulating a plan of action, etc.) and example from interactions.	15 Points Analysis of each interaction providing type of communication (therapeutic or nontherapeutic), and technique (exploring, focusing, reflecting, formulating a plan of action, etc.) and no example from interactions provided.	10 Point Analysis of each interaction providing type of communication (therapeutic or nontherapeutic), no technique (exploring, focusing, reflecting, formulating a plan of action, etc.) and/or no example from interactions provided.	0 Points Analysis not provided for each interaction	<b>15</b>
Criterion #7 Process Recording	10 Points Communication has a natural beginning and ending; the conversation flows from sentence to sentence and has a logical conclusion. There are at least 10 interchanges between patient and student.	6 Points Communication has a natural beginning and ending; the conversation flows from sentence to sentence and has a logical conclusion. There are at least 7 interchanges between patient and student.	4 Points Communication has a natural beginning and ending; the conversation flows from sentence to sentence and has a logical conclusion. There are at least 5 interchanges between patient and student.	0 Points There was less than 5 interchanges between patient and student provided.	<b>10</b>
Criterion #8 Evaluation	15 Points Self-evaluation of communication with patient. Identify at least 3 strengths and 3 weaknesses of therapeutic communication.	10 Points Self-evaluation of communication with patient. Identified 2 strengths and 2 weaknesses of therapeutic communication.	5 Point Self-evaluation of communication with patient. Identified 1 strength and 1 weakness of therapeutic communication.	0 Points No self-evaluation was provided.	<b>15</b>
Criterion #9 Evaluation	10 Points Identify at least 3 barriers to communication including interventions or communication that could have been done differently. Identify all pertinent social determinants of health.	6 Points Identify at least 2 barriers to communication including interventions or communication that could have been done differently. Identify all pertinent social determinants of health.	4 Point Identify at least 2 barriers to communication did not include interventions or communication that could have been done differently. Did not identify any pertinent social determinants of health.	0 Points Identify at least 1 barrier to communication did not include interventions or communication that could have been done differently. Did not identify any pertinent social determinants of health.	<b>10</b>

<p>Total Possible Points= 100 points  <b>77-100 points= Satisfactory completion.</b>  76-53 points= Needs Improvement  &lt; 53 points= Unsatisfactory</p> <p>Faculty comments: Tamica, excellent job with your Nursing Process Study. Points were deducted for just a few minor spelling and grammar errors throughout the assignment. For the nursing interventions, you did not provide a rationale or timeframe for any of the interventions you listed. For your process recording, there were some quotes missing for the responses, and you did not provide an example from the interactions for your analysis as to why it was therapeutic or non-therapeutic and for the technique you used (See pg. 116 in your textbook for an example). Overall, the assignment was nicely done and met the requirements for satisfactory completion.</p>				<p><b>Total Points:</b></p>	<p><b>84/100</b></p>
				<p><b>Faculty Initials:</b></p>	<p><b>BL</b></p>

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

<b><u>vSim Evaluation</u></b>  Performance Codes:  <b>S:</b> Satisfactory  <b>U:</b> Unsatisfactory	Linda Waterfall (Anxiety/Cultural Scenario) (*1,2,3,4,5)	Sharon Cole (Bipolar Scenario) (*1,2,3,4,5)	Live Simulation (Alcohol Substance Use) (*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)
	<b>Date:</b> <b>6/16/2022</b>	<b>Date:</b> <b>6/30/2022</b>	<b>Date:</b> <b>7/6-7/2022</b>	<b>Date:</b> <b>7/8/2022</b>	<b>Date:</b> <b>7/14/2022</b>	<b>Date:</b> <b>7/28/2022</b>
Evaluation	<b>U</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	
Faculty Initials	<b>FB</b>	<b>LM</b>	<b>BL</b>	<b>DC</b>	<b>BL</b>	
<b>Remediation:</b> <b>Date/Evaluation/Initials</b>	<b>S</b> <b>6/16/2022</b> <b>FB</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	

\* Course Objectives

Firelands Regional Medical Center School of Nursing  
Psychiatric Nursing-2022

**Lasater Clinical Judgment Rubric Scoring Sheet**

STUDENT NAME: P. Gregg, J. Guseman, T. Ivey, L. Jenks OBSERVATION DATE/TIME: 07/06/2022 SCENARIO #: 1

CLINICAL JUDGMENT					OBSERVATION NOTES
<b>COMPONENTS NOTICING:</b>					
8. Focused Observation:	E	A	D	B	Notices abrasions on patient
9. Recognizing Deviations from Expected Patterns:	E	A	D	B	Notices patient's blood pressure is elevated
h. Information Seeking:	E	A	D	B	Seeks out information from patient regarding reason for admission and home life
					Notices patient is agitated
					Notices patient complaining of auditory hallucinations
					Notices patient needs medication for withdrawal symptoms
<b>INTERPRETING:</b>					
10. Prioritizing Data:	E	A	D	B	Interprets CIWA score as 4
i. Making Sense of Data:	E	A	D	B	Interprets CIWA score accurately as 20
					Does not prioritize giving Lorazepam after CIWA Scale is performed
					Interprets CIWA protocol correctly for medication administration
<b>RESPONDING:</b>					
11. Calm, Confident Manner:	E	A	D	B	Introduces self to patient
12. Clear Communication:	E	A	D	B	Obtains vital signs
j. Well-Planned Intervention/ Flexibility:	E	A	D	B	Discusses patient's reason for admission with her
k. Being Skillful:	E	A	D	B	Utilizes therapeutic communication with the patient
					Medication nurse verifies patient
					Medication nurse discusses medications with patient
					Performs brief mental status evaluation

	<p>Performs CAGE Assessment</p> <p>Medication nurse performs CIWA Scale</p> <p>Introduces self to patient</p> <p>Obtains vital signs</p> <p>Performs CIWA Scale</p> <p>Performs brief mental health exam</p> <p>Administers Lorazepam 4 mg PO</p> <p>Reassesses patient after administration of Lorazepam</p> <p>Does not provide any education to patient related to substance abuse or support groups</p> <p>Utilizes therapeutic communication with patient</p>
<p><b>REFLECTING:</b></p> <p>13. Evaluation/Self-Analysis: E A D B</p> <p>I. Commitment to Improvement: E A D B</p>	<p>Identified strengths and areas of improvement for performance.</p> <p>Reflected on the importance of providing education to the patient about substance abuse and community resources available.</p> <p>Reflected on the importance of providing education when it is appropriate.</p> <p>Reflected on the importance of therapeutic communication.</p>
<p><b>SUMMARY COMMENTS:</b></p> <p><b>Satisfactory completion of the simulation scenario is a score of “Developing” or higher in all areas of the rubric.</b></p> <p><b>E= Exemplary</b></p> <p><b>A= Accomplished</b></p> <p><b>D= Developing</b></p> <p><b>B= Beginning</b></p>	<p><i>Lasater Clinical Judgement Rubric: Information provided relates to the Clinical Judgement Rubric based on comments listed above from student performance. Refer to Lasater’s Clinical Judgement Rubric for more detailed information.</i></p> <p><b>Noticing:</b> Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient’s situation from the patient and family to support planning interventions; occasionally does not pursue important leads.</p> <p><b>Interpreting:</b> Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful data. In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.</p>

**Responding:** Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.

**Reflecting:** Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives. Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses.

E = exemplary, A = accomplished, D = developing, B = Beginning

Based off of Lasater's Clinical Judgment Rubric

**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: