

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

**Student:** Hailey Giles

**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 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	n/a	s	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	n/a	s	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	n/a	s	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	n/a	s	s	s	n/a			
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care <b>(noticing)</b>	n/a	s	n/a	s	s	n/a	n/a			
e. Recognize social determinants of health and the relationship to mental health. <b>(reflecting)</b>	n/a	s	n/a	s	s	n/a	n/a			
f. Develop and implement an appropriate nursing therapy group activity. <b>(responding)</b>	n/a	S NA	n/a	s	n/a	n/a	n/a			
g. Develop a geriatric physical/mental health assessment and education plan. <b>(Geriatric Assessment) (responding)</b>					n/a					
Faculty Initials	BL	BL	FB	FB	DC	BL	BL			
Clinical Location	n/a	AA/NA 1 South	n/a	1 South	simulation	hospice	detox			

\* End-of-Program Student Learning Outcomes

**Comments:**

Week 2-1(e) Hailey, great job identifying and discussing your patient’s social determinants of health in both your CDG and Nursing Care Map. BL  
 Week 4 (1a,e) Great job being able to discuss and identify your patient’s mental illness disorder and the relationship to an appropriate environment for your patient. You also understand the patient’s social determinants of health and how that affects the mental health of this patient. (1f) Great job with beach ball activity addressing feelings/life skills. The activity was fun and engaging for the patient’s learn how to manage their feelings in a positive way by thinking of things that bring them joy or happiness. 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> 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	n/a	s	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	n/a	s	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	n/a	s	s	s	n/a			
d. Formulate a prioritized nursing care map utilizing clinical judgment skills. <b>(noticing, interpreting, responding, reflecting)</b>	n/a	s	n/a	S NA	n/a	n/a	n/a			
e. Apply the principles of asepsis and standard precautions. <b>(responding)</b>	n/a	s	n/a	s	s	s	n/a			
f. Practice use of standardized EBP tools that support safety and quality. <b>(noticing, responding)</b>	n/a	s	n/a	s	n/a	s	n/a			
Faculty Initials	BL	BL	FB	FB	DC	BL	BL			

**Comments:**

Week 2-2(d) Excellent job formulating a prioritized Nursing Care Map for your patient this week utilizing your clinical judgment skills. Please see the Nursing Care Map Rubric at the end of this document for my feedback. BL

\* End-of-Program Student Learning Outcomes

Week 4 (2b)- Excellent job providing a very thorough list of laboratory results, their significance, and appropriate rationales. (2d) This competency was completed in week 2 with CDG requirement for day 2, therefore rating changed to a NA. Make sure you are rating each competency completed during the corresponding week. FB

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>	n/a	s	n/a	s	s	s	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 NA	n/a	n/a	n/a	n/a	n/a			
c. Identify barriers to effective communication. <b>(noticing, interpreting)</b>	n/a	s	n/a	s	s	s	n/a			
d. Construct effective therapeutic responses. <b>(responding)</b>	n/a	s	n/a	s	s	s	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 NI	n/a	s	n/a	s	n/a S			
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. <b>(responding)</b>	n/a	s	n/a	s	s	s	n/a S			
h. Teach patient/family based on readiness to learn and patient needs. <b>(responding, reflecting)</b>	n/a	s	n/a	s	s	n/a	n/a			
Faculty Initials	BL	BL	FB	FB	DC	BL	BL			

**Comments:**

Week 2-3(a,d,f) Hailey, you did an excellent job actively listening and therapeutically communicating with all the patients this week. You also did an excellent job with all of your CDG posts, including your Nursing Care Map. Unfortunately, I did have to change competency 3(f) to an “NI” because you did not include an in-text citation or a reference in your Nursing Care Map. Remember, all CDGs need both an in-text citation and reference in order to be graded as satisfactory. Please let me know if you have any questions. BL

\* End-of-Program Student Learning Outcomes

Week 4 (3f)- CDG was posted on time following CDG grading guidelines. FB

Week 6-3(f) Hailey, you did an excellent job with your Hospice Reflection Journal. I'm glad you learned a lot during this experience and enjoyed your time spent there. Thank you so much for sharing your thoughts and feelings about the experience. BL

Week 7-3(f) Hailey, 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	s	n/a	s	s	n/a	n/a			
b. Demonstrate ability to discuss the uses and implication of psychotropic medications. <b>(responding, reflecting)</b>	n/a	s	n/a	s	s	n/a	n/a			
c. Identify the major classification of psychotropic medications. <b>(interpreting)</b>	n/a	s	n/a	s	s	n/a	n/a			
d. Identify common barriers to maintaining medication compliance. <b>(reflecting)</b>	n/a	s	n/a	s	n/a	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	n/a	s	s	n/a	n/a			
Faculty Initials	BL	BL	FB	FB	DC	BL	BL			

### Comments:

Week 2-4(a-e) Excellent job demonstrating knowledge of frequently prescribed medications utilized in treating mental illness through one-on-one discussion with your instructor during clinical. BL

Week 4 (4a-e) Great job identifying implications for use of medications for your assigned patient. You also demonstrated knowledge of classification, side effects, nursing interventions, and barriers to medication compliance. 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>	n/a	S NA	n/a	n/a	n/a	n/a	n/a S			
b. Discuss recommendations for referrals to appropriate community resources and agencies. <b>(reflecting)</b>	n/a	s	n/a	s	n/a	n/a	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	s	n/a	n/a	n/a	n/a	n/a			
Faculty Initials	BL	BL	FB	FB	DC	BL	BL			

### Comments:

Week 2-5(d) Excellent job with your CDG for your NA/AA clinical experience. Your responses were very detailed and reflected much thought. I am glad you enjoyed this experience and learned a lot. BL

\* 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	n/a	s	n/a	n/a	n/a			
a. Demonstrate competence in navigating the electronic health record. <b>(responding)</b>	n/a	s	n/a	s	n/a	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 NA	n/a	s	n/a	n/a	n/a			
c. Demonstrate the use of technology to identify mental health resources. <b>(responding)</b>	n/a	s	n/a	s	n/a	n/a	n/a			
Faculty Initials	BL	BL	FB	FB	DC	BL	BL			

**Comments:**

Week 2-6(a) Great job this week navigating Meditech to research information in your patient's electronic health record and medication record. BL

Week 4 (6a-c) Great job demonstrating satisfactory navigation and documentation in the electronic medical record for nursing therapy patient participation. FB

\* 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	n/a	s	s	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>	n/a	s	n/a	s	s	s	n/a S			
c. Illustrate active engagement in self-reflection and debriefing. <b>(reflecting)</b>	n/a	s	n/a	s	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	n/a	s	s	s	n/a S			
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. <b>(responding)</b>	n/a	S NI	n/a	s	s	s	n/a S			
f. Comply with the standards outlined in the FRMCSN policy, “Student Conduct While Providing Nursing Care.” <b>(responding)</b>	n/a	s	n/a	s	s	s	n/a S			
Faculty Initials	BL	BL	FB	FB	DC	BL	BL			

### Comments:

**Week 2: My strength of care this week was being a listening ear to the patients and making them feel comfortable enough to open up to me. Great job, Hailey! BL**

Week 2-7(e) This competency was changed to an “NI” as it relates to responsibility. Unfortunately, your CDG for Day 1 in 1 South was not submitted by the appropriate due date and time. Going forward, please be sure to submit your assignments on time and double check the due dates and times. If you have any questions, please do not hesitate to ask. BL

**Week 4: My strength of care this week was using therapeutic communication during conversations, I feel like I am finally understanding how to properly use it. Hailey, great job with developing and implementing therapeutic communication skills during your clinical rotation this week. Keep up the great work. FB**

**Week 5: During simulation this week my strength was problem solving. I was confused about the MAR regarding medications and I called pharmacy for clarification.**

**Week 6: During my clinical at hospice my strength was keeping my emotions in and remaining professional when washing up a patient who had passed. Great job, Hailey! It can be very difficult to process those emotions at times. I'm glad you were able to have a clinical experience in a hospice setting to help you better understand the nursing care required at end-of-life. Keep up all your great work. BL**

**Week 7: my strength during detox was being attentive and listen to the nurse and case manager when they were explaining the process of detox. Great job! BL**

Firelands Regional Medical Center School of Nursing  
Care Map Grading Rubric

Course Objective: <b>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>		<b>Student Name: Hailey Giles</b> <b>Date: 06/16-06/17/2022</b>				
<b>Top Nursing Priority: Social isolation/Impaired social interaction</b>						
		3 Points >75% Complete	2 Points 50-75% Complete	1 Point <50% Complete	0 Points 0% Complete	Comments
Noticing	Identify all abnormal assessment findings, <b>subjective and objective</b>	3				Excellent job including all abnormal subjective and objective assessment findings for your patient.
	Identify all abnormal lab finds/diagnostic tests	3				Great job including the patient's Vitamin D level. Research has shown that individuals with low Vitamin D tend to be at higher risk for depression.
	Identify all risk factors	3				
	Highlight all related/relevant data in the noticing boxes	3				
Interpreting	List all nursing priorities	3				Great job listing all your nursing priorities! You may also consider including ineffective coping as well.
	Highlight the top <b>mental health</b> nursing priority	3				Social isolation/Impaired social interaction
	Identify all potential complications	3				
	Highlight potential complications relevant to top <b>mental health</b> nursing priority	3				
	Identify signs and symptoms to monitor for each complication				0	Remember to identify signs and symptoms to monitor for each complication. This would include new symptoms that you would monitor for to ensure early detection of a developing complication.
Responding	List all nursing interventions relevant to top <b>mental health</b> nursing priority	3				
	Interventions are prioritized	3				
	All interventions include a frequency		2			Remember to include a frequency for all of your nursing interventions.
	All interventions are individualized and realistic	3				

	An appropriate rationale is included for each intervention		2			Remember to include rationales for all of your nursing interventions.
Reflecting	List the reassessment findings for the top <b>mental health</b> nursing priority			1		There is reassessment data missing. Remember to include all reassessment data related to subjective and objective findings, as well as labs and diagnostic tests.
	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>			1		You would also want to include the patient's lack of income because he is unemployed. It would also be important to note that the patient may have decreased literacy when it comes to healthcare. This may affect his ability to be compliant with a medication regimen. Lastly, you would want to include the fact that the patient does not have much of a support system at home either.
48-33 points = Satisfactory 32-17 points = Needs Improvement ≤ 16 points = Unsatisfactory		Total Points Earned: <b>39/48</b> Comments: <b>Satisfactory Nursing Care Map. Great job! Please review feedback for areas in need of improvement in the future.</b> Faculty Initials: <b>BL</b>				

Firelands Regional Medical Center School of Nursing  
Psychiatric Nursing-2022

**Lasater Clinical Judgment Rubric Scoring Sheet**

STUDENT NAME: J. Fide, E. Gibson, H. Giles, J. West    OBSERVATION DATE/TIME: 07/06/2022    SCENARIO #: 1

CLINICAL JUDGMENT						OBSERVATION NOTES
<b>COMPONENTS NOTICING:</b>						
1. Focused Observation:	E	A	D	B		Attempts to seek out information related to patient's reason for admission
2. Recognizing Deviations from Expected Patterns:	E	A	D	B		Notices blood pressure is elevated
a. Information Seeking:	E	A	D	B		Notices patient is agitated
						Seeks out information related to patient's alcohol use
						Notices patient is having visual hallucinations
						Notices patient has a high blood pressure
						Notices patient is agitated
<b>INTERPRETING:</b>						
3. Prioritizing Data:	E	A	D	B		Interprets CIWA score as 8
b. Making Sense of Data:	E	A	D	B		Does not administer Lorazepam per protocol for CIWA score of 8 (Should administer 2 mg PO)
						Prioritizes brief mental health exam and CIWA Scale
						Interprets CIWA score as 39
						Interprets the CIWA protocol appropriately (4 mg of Lorazepam PO)
<b>RESPONDING:</b>						
4. Calm, Confident Manner:	E	A	D	B		Introduces self to patient
5. Clear Communication:	E	A	D	B		Obtains vital signs
c. Well-Planned Intervention/ Flexibility:	E	A	D	B		Performs a brief mental health exam
d. Being Skillful:	E	A	D	B		Uses therapeutic communication with the patient
						Performs CAGE Assessment

	<p>Performs CIWA Scale</p> <p>Remains calm with patient</p> <p>Calls physician with assessment information, no orders needed</p> <p>Medication nurse verifies patient</p> <p>Introduces self to patient</p> <p>Performs a brief mental health exam</p> <p>Performs CIWA Scale</p> <p>Attempts to use therapeutic communication with patient</p> <p>Obtains vital signs</p> <p>Medication nurse verifies patient</p> <p>Administers Lorazepam 4 mg PO</p> <p>No education provided to patient</p>
<p><b>REFLECTING:</b></p> <p>6. Evaluation/Self-Analysis: E    A    D    B</p> <p>e. 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> Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In simple, common, or familiar situations, is able to compare the patient's data patterns with those known and to develop or explain intervention plans; has difficulty, however, with even moderately difficult data or situations that are within the expectations of students;</p>

inappropriately requires advice or assistance.

**Responding:** Is tentative in the leader role; reassures patients and families in routine and relatively simple situations, but becomes stressed and disorganized easily. 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. Is hesitant or ineffective in using nursing skills.

**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

Criteria	Hailey Giles			
	Ratings			
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.
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	5 Points Identifies areas of assessment but incomplete data provided in 2 of the 4 areas. Provides a self-assessment of thoughts and	3 Point Identifies areas of assessment but incomplete data provided in 3 of the 4 areas. Provides a self-assessment of thoughts and	0 Points Missing data in all 4 areas of assessment.

	communication interaction with patient. Identifies the milieu and effects on patient.	feelings prior and during therapeutic communication interaction with patient. Identifies the milieu and effects on patient.	feelings prior and during therapeutic communication interaction with patient. Identifies the milieu and effects on patient.	
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.
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.
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 each interaction is provided.	10 Points Direct quotes are not provided. Nonverbal and Verbal behavior is described for at least 7 interactions. Student thoughts and feelings concerning at least 5 interactions are provided.	5 Point Direct quotes are not provided. Nonverbal and Verbal behavior is described for at least 5 interactions. Student thoughts and feelings concerning at least 5 interactions are provided.	0 Points Direct quotes are not provided. Nonverbal and Verbal behavior is not described for less than half of the 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
Criterion #7 Process Recording	10 Points Communication has a natural	6 Points Communication has a	4 Points Communication has a	0 Points There was less than 5

	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.	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.	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.	interchanges between patient and student provided.
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.
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.
Total Possible Points= 100 points 77-100 points= Satisfactory completion. 76-53 points= Needs Improvement < 53 points= Unsatisfactory		<b>Total Points:</b>		
Faculty comments: <b>Excellent job! Satisfactory completion of Nursing Process Study.</b>				
<b>Faculty Initials:</b> <b>FB</b>				

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> 6/16/2022	<b>Date:</b> 6/30/2022	<b>Date:</b> 7/6-7/2022	<b>Date:</b> 7/8/2022	<b>Date:</b> 7/14/2022	<b>Date:</b> 7/28/2022

Evaluation	S	S	S	S	S	
Faculty Initials	BL	FB	BL	DC	BL	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	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: