

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

Student:

Lauren Jenks

Final Grade: **Satisfactory**

Semester: **Summer Session**

Date of Completion: **7/31/2022**

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:

L. Malfara, MSN, RN

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
Competencies:	NA	NA	S	S	NA	NA	S	S	NA	S
a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder. (noticing)	NA	NA	S	S	NA	NA	S	S	NA	S
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. (interpreting)	NA	NA	NA	NA	NA	NA	S	S	NA	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. (responding)	NA	NA	NA	S	NA	NA	S	S	NA	S
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care (noticing)	NA	NA	S	S	S	NA	S	S	NA	S
e. Recognize social determinants of health and the relationship to mental health. (reflecting)	NA	NA	S	S	S	NA	S	S	NA	S
f. Develop and implement an appropriate nursing therapy group activity. (responding)	NA	NA	NA	NA	NA	NA	NA	S	NA	S
g. Develop a geriatric physical/mental health assessment and education plan. (Geriatric Assessment) (responding)					S			NA	NA	S
Faculty Initials	LM	LM	FB	LM	DC	BL	DC	LM	LM	LM
Clinical Location	NA	No clinical	Erie County Detox Unit, Sandusky Artisans	Stein Hospice	Simulation	No clinical	1 South	1 South	No Clinical	

* End-of-Program Student Learning Outcomes

Comments:

Week 7 1 (a-g): Great job this week! DC

Week 8 (1a-f) - Lauren, you demonstrated an understanding of the correlation between your patient's mental and physical health and their mental health disorder through conversations with your patient and Meditech research. You also correlated the various therapies your patient was receiving to their mental health disorder. You developed and implemented a nursing therapy group activity. You encouraged all of the patients to actively participate. Great job! LM

Objective										
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	Final
Competencies: a. Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. (noticing)	NA	NA	NA	NA	S	NA	S	S	NA	S
b. Identify patient's subjective and objective findings including labs, diagnostic tests, and risk factors. (noticing, recognizing)	NA	NA	NA	NA	S	NA	S	S	NA	S
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. (noticing, interpreting)	NA	NA	S	S	S	NA	S	S	NA	S
d. Formulate a prioritized nursing care map utilizing clinical judgment skills. (noticing, interpreting, responding, reflecting)	NA	NA	NA	NA	NA	NA	S	NA	NA	S
e. Apply the principles of asepsis and standard precautions. (responding)	NA	NA	S	S	S	NA	S	S	NA	S
f. Practice use of standardized EBP tools that support safety and quality. (noticing, responding)	NA	NA	S	S	S	NA	S	S	NA	S
Faculty Initials	LM	LM	FB	LM	DC	BL	DC	LM	LM	LM

Comments:

* End-of-Program Student Learning Outcomes

Week 7 2 (a-f): You communicated to me about your patient and their history. You appropriately connected their information and saw the “bigger picture.”DC

Week 8 (2a-c)- Lauren, you appropriately obtained a detailed health history on your patient, identified various assessment findings, and recognized your patient’s coping mechanisms throughout the clinical experience. Great job! LM

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. (responding)	NA	NA	S	S	S	NA	S	S	NA	S
b. Demonstrate professional and appropriate communication with the treatment team by using the SBAR format for handoff communication during transition of care. (responding)	NA	NA	NA	NA	S	NA	S	S	NA	S
c. Identify barriers to effective communication. (noticing, interpreting)	NA	NA	S	S	S	NA	S	S	NA	S
d. Construct effective therapeutic responses. (responding)	NA	NA	S	S	S	NA	S	S	NA	S
e. Construct a satisfactory patient-nurse therapeutic communication. (Nursing Process Study) (responding, reflecting)					NA			S	NA	S
f. Posts respectfully and appropriately in clinical discussion groups. (responding, reflecting)	NA	NA	S	S	NA	NA	S	S	NA	S
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. (responding)	NA	NA	S	S	S	NA	S	S	NA	S

* End-of-Program Student Learning Outcomes

h. Teach patient/family based on readiness to learn and patient needs. (responding, reflecting)	NA	NA	NA	S	S	NA	S	S	NA	S
Faculty Initials	LM	LM	FB	LM	DC	BL	DC	LM	LM	LM

Comments: Week 3 (3f)- CDG posts regarding clinical experiences for Sandusky Artisans and Erie County Health Department Detox Unit were completed on time and following all requirements provided on CDG rubric, great job! FB

Week 4 (3f)- Lauren, 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

Week 7 3 f: Good job on your discussion post this week. DC

Week 8 (3a, f)- Lauren, you continually interacted with the patients on the 1-South unit and provided therapeutic communication with each patient interaction. You provided substantive CDG responses for day 3 and day 4 of your clinical experience on the behavioral health unit. Excellent job! LM

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

Comments:

Week 7 4 a-e: Good job connecting your patient's prescribed medications and how they apply to their diagnosis. DC

Week 8 (4a-e)- Lauren, you discussed and understood the various medications your patient was receiving. You were able to accurately identify which medications were specific to the patient's psychiatric condition along with potential side effects. Excellent job! LM

* 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. (noticing, interpreting)	NA	NA	S	NA	NA	NA	S	S	NA	S
b. Discuss recommendations for referrals to appropriate community resources and agencies. (reflecting)	NA	NA	NA	NA	NA	NA	S	S	NA	S
c. Attend Erie County Health Department Detox Unit observing the care of a patient with mental illness-substance abuse. (Community Agency Observation-Detox Unit)	NA	NA	S	NA	NA	NA	NA	NA	NA	S
d. Attend Narcotics/Alcoholics Anonymous meeting. (Alcoholics/Narcotics Anonymous at the Artisans of Sandusky Observation)	NA	NA	S	NA	NA	NA	NA	NA	NA	S
Faculty Initials	LM	LM	FB	LM	DC	BL	DC	LM	LM	LM

Comments: Week 3 (5c,d)- Great job with CDG post related to clinical experience at Sandusky Artisans and the Erie County Health Department Detox Unit. These clinical experiences are great learning experiences and provides you with knowledge regarding resources available for patients. FB

Week 7 5 a,b: Excellent communication and discussion about resources with your patients. DC

Week 8 (5b) – Lauren, you provided appropriate mental health resources to your patient and discussed this in your CDG post this week. Great job! LM

* 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
Competencies:	NA	NA	NA	NA	NA	NA	S	S	NA	S
a. Demonstrate competence in navigating the electronic health record. (responding)	NA	S	NA	S						
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record. (responding)	NA	NA	NA	NA	NA	NA	S	S	NA	S
c. Demonstrate the use of technology to identify mental health resources. (responding)	NA	NA	NA	NA	NA	NA	S	S	NA	S
Faculty Initials	LM	LM	FB	LM	DC	BL	DC	LM	LM	LM

Comments:

Week 8 (6a-c)- Lauren, you accurately navigated through the EMR while on 1-South this week. You also identified various mental health resources for your patient and for other patients with mental health issues. Great job! LM

* End-of-Program Student Learning Outcomes

* 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. (reflecting)	NA	NA	S	S	S	NA	S	S	NA	S
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care. (responding)	NA	NA	S	S	S	NA	S	S	NA	S
c. Illustrate active engagement in self-reflection and debriefing. (reflecting)	NA	NA	NA	S	S	NA	S	S	NA	S
d. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE” – attitude, commitment, and enthusiasm during all clinical interactions. (responding)	NA	NA	S	S	S	NA	S	S	NA	S
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (responding)	NA	NA	S	S	S	NA	S	S	NA	S
f. Comply with the standards outlined in the FRMCSN policy, “Student Conduct While Providing Nursing Care.” (responding)	NA	NA	S	S	S	NA	S	S	NA	S
Faculty Initials	LM	LM	FB	LM	DC	BL	DC	LM	LM	LM

Comments:

7a.

Week 3: A few of my strengths during the Sandusky Artisans clinical rotation was active listening, making eye contact while the client was explaining their struggles within the past week, showing acceptance as they listed their personal strengths, and voicing respect as I was very thankful everyone allowed me to be a part of sharing their stories and attending the meeting with them. **Great job with participation, acting in a professional manner, and exhibiting ACE during your clinical experiences this week. FB**

Week 4: My strengths during the Stein Hospice clinical were overall sufficient as I used therapeutic communication techniques when having a conversation with the patients and I provided palliative care allowing the patient to be as comfortable as possible during their stay at Stein Hospice. **You did an excellent job encouraging your patient to go out and enjoy the sunshine! Excellent care, Lauren! LM**

Week 5: My strength during the simulation was administering Lorazepam to during decrease my patient’s anxiety levels through the withdraw process.

Week 7: My strength during 1South was gaining courage to interact with patients within the floor. I gained courage to communicate with a pt who frightened me with his action. I was proud of myself to build the courage to face fears and go out of my comfort zone during this clinical rotation and communicate therapeutically. **You did a great job and appeared comfortable talking with everyone! DC**

Week 8: My strength during my second 1South clinical was that I really went out of my way to build therapeutic relationships with the patients. I tried to include everyone in any activities I was involved in to try and make everyone feel welcomed and involved during their length of stay at the behavioral unit. I also led a nursing therapy group for my first time, in which, I felt went very successful as the patients told me they really enjoyed my bingo game. **Lauren, you did an excellent job trying to include everyone in your nurse-lead group activity! LM**

Final evaluation: Lauren, you have satisfactorily completed all of the required assignments for this semester. You have gained knowledge in understanding the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder. You applied therapeutic communication throughout the semester with your patients. I wish you the best as you continue onto the next semester of the nursing program. Keep up the great work! LM

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Course Objective:		Student Name: Lauren Jenks Date: 7/28/22				
Top Nursing Priority: Risk for Suicide						
		3 Points >75% Complete	2 Points 50-75% Complete	1 Point <50% Complete	0 Points 0% Complete	Comments
Noticing	Identify all abnormal assessment findings, subjective and objective	3				All abnormal assessment findings, diagnostics and risk factors are present. DC
	Identify all abnormal lab finds/diagnostic tests	3				
	Identify all risk factors	3				
	Highlight all related/relevant data in the noticing boxes	3				
Interpreting	List all nursing priorities	3				All nursing priorities are listed and the top mental health priority is highlighted. DC
	Highlight the top mental health nursing priority	3				
	Identify all potential complications	3				
	Highlight potential complications relevant to top mental health nursing priority	3				
	Identify signs and symptoms to monitor for each complication	3				
Re	List all nursing interventions relevant to top mental health nursing priority	3				All appropriate nursing interventions are listed,

sponding	Interventions are prioritized	3				prioritized, and provide rationales. They are individualized to this specific patient. DC
	All interventions include a frequency	3				
	All interventions are individualized and realistic	3				
	An appropriate rationale is included for each intervention	3				
Reflecting	List the reassessment findings for the top mental health nursing priority	3				All reassessment factors present. DC
	Reflection includes one of the following statements: <ul style="list-style-type: none"> Continue plan of care Modify plan of care Terminate plan of care Discuss pertinent Social Determinants of Health for your patient	3				
48-33 points = Satisfactory 32-17 points = Needs Improvement ≤ 16 points = Unsatisfactory		Total Points Earned:48 Comments:Lauren – Great job on your care plan! You are satisfactory for this semester! Faculty Initials:DC				

Geriatric Assessment Rubric
2022

Student Name: Lauren Jenks

Date: 07/05/2022

Clinical Assessment Rubric

Mental/Physical Health Status Assessment

	Points Possible	Points Received
Physical Assessment	4	4
Geriatric Depression Scale (short form) Assessment	4	4
Short Portable mental status questionnaire	4	4
Geriatric Health Questionnaire	2	2
Time and change test	4	4
Cognitive Assessment (Clock Drawing)	4	4
Falls Risk Assessment (Get Up and Go)	4	4
Brief Pain inventory (Short form)	2	2
Nutrition Assessment (Determine Your Nutritional Health)	4	4
Instrumental ADL/ Index of Independence in ADL	4	4
Medication Assessment	4	4
Points	40	40

Education Assessment

	Points Possible	Points Received
Learning Needs Identified and Prioritized (3)	10	10
Priorities pertinent to learning needs (3)	5	5
Nursing interventions related to learning needs (5)	10	10
Points	25	25

Education Plan

	Points Possible	Points Received
Education Prioritization and Barriers to Education	5	5
Teaching Content and Methods used for Education	10	10
Evaluation of Education Plan	10	10
Education Resources attached	10	10
Points	35	35

Total Points 100/100

Lauren, excellent job with your Geriatric Assessment! You have been graded as satisfactory. Keep up all your hard work! BL

Criteria	Ratings				Points Earned
	5 Points	3 Points	1 Points	0 Points	
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.	5
Criterion #2 Assessment	7 Points Identifies pertinent patient background, current medical and psychiatric history. Provides a	5 Points Identifies areas of assessment but incomplete data provided	3 Point Identifies areas of assessment but incomplete data provided	0 Points Missing data in all 4 areas of assessment.	7

	self-assessment of thoughts and feelings prior and during therapeutic communication interaction with patient. Identifies the milieu and effects on patient.	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.	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.		
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.	8
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.	10
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.	15

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	20
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.	10
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.	15
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.	10
Total Possible Points= 100 points 77-100 points= Satisfactory completion 76-53 points= Needs Improvement < 53 points= Unsatisfactory				Total Points:	100/100

Faculty comments: **Satisfactory completion of the Nursing Process Study. Your assignment was very well done.
Excellent job, Lauren!**

Faculty Initials: **BL**

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**

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

Based off of Lasater's Clinical Judgment Rubric

CLINICAL JUDGMENT

COMPONENTS NOTICING:

1. Focused Observation:	E	A	D	B
2. Recognizing Deviations from Expected Patterns:	E	A	D	B
a. Information Seeking:	E	A	D	B

OBSERVATION NOTES

Notices abrasions on patient

Notices patient's blood pressure is elevated

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

INTERPRETING:

3. Prioritizing Data:	E	A	D	B
b. Making Sense of Data:	E	A	D	B

Interprets CIWA score as 4

Interprets CIWA score accurately as 20

Does not prioritize giving Lorazepam after CIWA Scale is performed

Interprets CIWA protocol correctly for medication administration

RESPONDING:

4. Calm, Confident Manner:	E	A	D	B
5. Clear Communication:	E	A	D	B
c. Well-Planned Intervention/ Flexibility:	E	A	D	B
d. Being Skillful:	E	A	D	B

Introduces self to patient

Obtains vital signs

Discusses patient's reason for admission with her

Utilizes therapeutic communication with the patient

Medication nurse verifies patient

Medication nurse discusses medications with patient

Performs brief mental status evaluation

Performs CAGE Assessment

Medication nurse performs CIWA Scale

Introduces self to patient

Obtains vital signs

Performs CIWA Scale

Performs brief mental health exam

Administers Lorazepam 4 mg PO

Reassesses patient after administration of Lorazepam

Does not provide any education to patient related to substance abuse or support groups

Utilizes therapeutic communication with patient

REFLECTING:

6. Evaluation/Self-Analysis:	E	A	D	B
e. Commitment to Improvement:	E	A	D	B

Identified strengths and areas of improvement for performance.

Reflected on the importance of providing education to the patient about substance abuse and community resources available.

Reflected on the importance of providing education when it is appropriate.

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

<u>vSim Evaluation</u>	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)
Performance Codes: S: Satisfactory U: Unsatisfactory						
Evaluation	S	S	S	S	S	S
Faculty Initials	LM	LM	BL	<u>DC</u>	BL	LM
Remediation: Date/Evaluation/Initials	NA	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: Lauren Jenks August 1, 2022