

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2022**

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

Student:

Semester: **Fall**

Final Grade: Satisfactory/Unsatisfactory

Date of Completion:

Faculty: **Frances Brennan**, MSN, RN; **Lora Malfara**, MSN, RN; **Amy Rockwell**, MSN, RN;
Brittany Lombardi, MSN, RN
Teaching Assistant: **Chandra Barnes**, BSN, RN; **Nick Simonovich**, 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 in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a “S, NI, U, or NA”. If the student does not self-rate, then it is an automatic “U”. A student who submits the clinical evaluation tool late will be rated as “U” in the appropriate competency(s) for that clinical week. Whenever a student receives a “U” in a competency, it must be addressed with a comment as to why it is no longer a “U” the following week. If the student does not state why the “U” is corrected, it will be another “U” until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. If the final performance code is unsatisfactory or needs improvement in any one of the competencies, a grade of unsatisfactory is given. If a pattern of unsatisfactory performance occurs after performing the competency satisfactorily, this also constitutes a grade of unsatisfactory. An unsatisfactory or needs improvement as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.

METHODS OF EVALUATION:

- | | |
|--|---------------------|
| Skills Lab Checklists | Faculty Feedback |
| Care Map Grading Rubric | Documentation |
| Administration of Medications | Clinical Reflection |
| Simulation Scenarios | |
| Skills Demonstration | |
| Evaluation of Clinical Performance Tool | |
| Clinical Discussion Group Grading Rubric | |
| Lasater Clinical Judgment Rubric | |
| Skills Lab Competency Tool | |

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
Faculty’s Name			Initials
Chandra Barnes			CB
Frances Brennan			FB
Brittany Lombardi			BL
Lora Malfara			LM
Amy Rockwell			AR
Nicholas Simonovich			NS

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

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

UNSATISFACTORY CLINICAL PERFORMANCE

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

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

OTHER

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

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

Objective																		
1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*																		
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:																		
a. Identify spiritual needs of patient (Noticing).																		
b. Identify cultural factors that influence healthcare (Noticing).																		
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).				N/A	S	N/A	S											
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).				N/A	S	N/A	S											
			CB	NS	CB	CB	BL											
			Meditech Orientation	No Clinical Experiences	4N 74	NA	3T 73											

Clinical Location:
Patient age

Comments

Week 5(1c): Jade, great job respecting your patient's needs this week in clinical. CB

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																		
2. Summarize knowledge of anatomy, physiology, chemistry, nutrition, psychosocial and developmental principles in performance of basic physical assessment through use of clinical judgment skills. (3,4, 5)*																		
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:						N/A	S											
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).																		
b. Use correct technique for vital sign measurement (Responding).				N/A	S	N/A	S											
c. Conduct a fall assessment and institute appropriate precautions (Responding).						N/A	S											
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).																		
e. Collect the nutritional data of assigned patient (Noticing).																		
f. Demonstrates appropriate insertion, maintenance, and removal of NG tube (Responding).																		
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).																		
			CB	NS	CB	CB	BL											

Comments

Week 5(2b): Jade, you did a great job assessing your patients vital signs, using the proper technique. CB

Week 7-2(a-c) Excellent job this week obtaining vital signs and performing a head to toe assessment on your patient. Your assessment was efficient and accurate. Remember to take a radial pulse on your patient rather than using the monitor to assess the patient's rate. You did a nice job completing a Fall Risk assessment on your patient and initiating appropriate precautions. Keep up all your great work! BL

*** End-of-Program Student Learning Outcomes**

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

3. Select communication techniques and appropriate boundaries with patients, families, and health care team members. (1,2,3,4,6,7)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:						N/A	S											
a. Receive report at beginning of shift from assigned nurse (Noticing).						N/A	S											
b. Hand off (report) pertinent, current information to the next provider of care (Responding).				N/A	N/A	N/A	N/A											
c. Use appropriate medical terminology in verbal and written communication (Responding).				N/A	S	N/A	S											
d. Report promptly and accurately any change in the status of the patient (Responding).				N/A	S	N/A	S											
e. Communicate effectively with patients and families (Responding).				N/A	S	N/A	S											
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).				N/A	S	N/A	S											
			CB	NS	CB	CB	BL											

Comments

Week 5(3e): You did an excellent job communicating with your patient this week! CB

Week 7-3(a,e) Great job taking report on your patient for the first time. In the future, I would recommend using an actual report sheet rather than a blank piece of paper to take report. Report sheets are designed to ensure all pertinent information about the patient is being obtained and then later handed off to the next nurse. This aids in keeping the patient safe. You did a great job this week communicating with your patient and her family while performing your head to toe assessment. BL

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																		
4. Exemplify advanced searches in accessing electronic health care information and documenting patient care. (1,4,8)*																		
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:				N/A	S	N/A	S											
a. Document vital signs and head to toe assessment according to policy (Responding).																		
b. Document the patient response to nursing care provided (Responding).																		
c. Access medical information of assigned patient in Electronic Medical Record (Responding).			S	N/A	S	N/A	S											
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).			S	N/A	N/A	N/A	S											
e. Provide basic patient education with accurate electronic documentation (Responding).																		
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						N/A	S											
*Week 3 –Meditech Expanse			CB	NS	CB	CB	BL											

Comments

Week 3 4(c,d) – Satisfactory for listening attentively and actively participating in the Meditech orientation clinical. You showed beginning competence in the ability to access a patient’s EHR, document care in an intervention, and locate patient data. You were able to access Lexicom to locate patient education materials. Additionally, nursing policies and procedures were located on the health system intranet. Great job! NS/CB

Week 5(4a,c): Great job with documentation of your patient’s vital signs this week. You were also able to look at your patients trends to compare the vital sign results. CB

Week 7-4(a,c,f) Excellent job this week with all of your documentation! Your documentation was very thorough and accurate. Remember to utilize your Meditech Guidelines to assist you in areas that you may be unsure on how to document appropriately. You did a great job with your Meditech scavenger hunt assignment which

helped you become more familiar with navigating your patient's EHR. Your CDG was very thorough and well done. You did a great job discussing safety concerns related to your patient's room, as well as recognizing abnormal data during your assessment. Nice job replying to a peer as well. BL

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

5. Exemplify psychomotor skills and nursing care safely using evidence-based practice. (3,4,5,7,8)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:				N/A	S	N/A	S											
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).				N/A	S	N/A	S											
b. Apply the principles of asepsis and standard/infection control precautions (Responding).				N/A	S	N/A	S											
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).																		
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).				N/A	S	N/A	S											
e. Organize time providing patient care efficiently and safely (Responding).				N/A	S	N/A	S											
f. Manages hygiene needs of assigned patient (Responding).																		
g. Demonstrate appropriate skill with wound care (Responding).																		
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						N/A	S											
			CB	NS	CB	CB	BL											

Comments

Week 5(5b): Jade, great job foaming in and out every time you entered and exited your patient room. By doing this, you are reducing the transmission of germs, decreasing the chance of infection for your patient. CB

Week 6: I did not have clinical and that is the reason I put N/A for all things.

****You must document the location of the pull station and extinguisher here for clinical #2 experience.**

Week 7: The fire extinguisher and the pull station were located by each other next to room 3010. It was also located next to the stairs. Great job! BL

Week 7-5(e) Jade, you did a great job this week completing your vital signs and head to toe assessment safely and efficiently. Keep up the great work! BL

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																		
6. Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*																		
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding). *See Care Map Rubric at end of tool																		
			CB	NS														

Comments

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																		
7. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*																		
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:																		
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).																		
b. Recognize patient drug allergies (Interpreting).																		
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).																		
d. Administer oral, intramuscular, subcutaneous, and intradermal medications using correct techniques (Responding).																		
e. Review the patient record for time of last dose before giving prn medication (Interpreting).																		
f. Assess the patient response to prn medications (Responding).																		
g. Document medication administration appropriately (Responding).																		
*Week 11: BMV			CB	NS														

Comments

* End-of-Program Student Learning Outcomes
 Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

8. Exemplify professional conduct through self-reflection, responsibility for learning, and goal setting. (1,5,7)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:				N/A	S	N/A	S											
a. Reflect on areas of strength** (Reflecting)				N/A	S	N/A	S											
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)				N/A	S	N/A	S											
c. Incorporate instructor feedback for improvement and growth (Reflecting).				N/A	S	N/A	S											
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).				N/A	S	N/A	S											
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).				N/A	S	N/A	S											
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).				N/A	S	N/A	S											
g. Comply with patient's Bill of Rights (Responding).				N/A	S	N/A	S											
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).				N/A	S	N/A	S											
i. Actively engage in self-reflection. (Reflecting)				N/A	S	N/A	S											
*			CB	NS	CB	CB	BL											

**** Must have different written example each week of clinical/lab. You must explain your plan for how you will improve. Example, "I am having a difficult time with obtaining a manual BP. I will get a BP cuff from Amy and practice manual BP's with at least three members of my family this week." Please ensure that you answer this section in-depth with your plan of action. Each week must be different.**

Week 7 Strength: My strength this week was communicating with the patient about the head to toe assessment. I am improving on my communication skills. **Excellent job!**

Week 7: Weakness: My weakness this week was feeling confident with my head to toe assessment. I will practice my head to toe assessment on friends and family members the next couple weeks to become more comfortable. **Jade, you did a great job performing your first head to toe assessment on a real patient. It is definitely a much different experience than performing a head to toe assessment in the skills lab. The more clinical experiences that you have, the more comfortable you will become with assessing patients. This is a great plan to help improve your confidence. Keep up all your hard work! BL**

I did not have my first clinical yet, that is why I put N/A for everything.

Week 6, I did not have clinical this week, that is why I put N/A for everything.

Week 5 Strength- My strength was obtaining the vital signs, I felt very comfortable with doing that as I am a PCT and have to take vital signs throughout the day. **Jade, I am glad you felt comfortable in obtaining vital signs. Your role as a PCT will help with being comfortable in many situations. CB**

Week 5 Improvement- I need to improve on my communication skills. I was not confident of speaking with a patient, I will practice communicating better and more often over the next few weeks with family members and in class. **Jade, the more experience you have in the nursing student role, the better your communication skills will be.**

You have a great plan to help with your area of improvement. CB

Week 5(8i): **Great job on your clinical reflection assignment. You will find that being a PCT will allow for you to be more comfortable in some situations, yet being in the role of a student nurse still feeling nervous. Nervous is not a bad feeling, it means that you care and want to do well. You will find the more experience you have in this role, the easier things will become, and will be second nature. Keep up the great work! CB**

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Week 10 or 12:

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Student Name:		Course Objective:					
Date or Clinical Week:							
Criteria		3	2	1	0	Points Earned	Comments
Noticing	1. Identify all abnormal assessment findings. (subjective and objective)	(lists at least 7*) *provides explanation if < 7	(lists 5-6)		(lists < 5 or gives no explanation)		
	2. Identify all abnormal lab findings/diagnostic tests.	(lists at least 3*) *provides explanation if < 3			(lists < 3 or gives no explanation)		
	3. Identify all risk factors.	(lists at least 5*) *provides explanation if < 5	(lists 4)	(lists 3)	(lists < 3 or gives no explanation)		
	4. Highlight all of the related/relevant data from the Noticing boxes to develop a priority nursing problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
Interpreting	5. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	6. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)		
	7. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists at least 2)		(lists < 2)		
Responding	8. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	9. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete		
	10. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete		

	11. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete		
	12. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete		
Reflecting	13. List the reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete		
	14. Evaluation includes one of the following statements: <ul style="list-style-type: none"> • Continue plan of care • Modify plan of care • Terminate plan of care 	Complete			Not complete		
<p>Total Possible Points= 42 points 42-30 points = Satisfactory 29-18 points = Needs Improvement* < 18 points = Unsatisfactory*</p> <p>*Total points adding up to less than or equal to 29 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.</p> <p>Faculty/Teaching Assistant Comments:</p>						<p>Total Points:</p>	
						<p>Faculty/Teaching Assistant Initials:</p>	

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

<u>Simulation Evaluation</u>	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
	Date:	Date:
Performance Codes: S: Satisfactory U: Unsatisfactory		
Evaluation (See Simulation Rubric)		
Faculty Initials		
Remediation: Date/Evaluation/Initials		

* Course Objectives

- A. Reflect on an area of strength after observing/participating in each simulation scenario.**
- B. Recognize one area for improvement and set a goal to meet this need.**

The goal must include what you will do to improve, how often you will do this, and when you will complete the goal (example- "I forgot to raise the head of the bed when the patient began having trouble breathing. I will review the proper nursing interventions for dyspnea in the textbook and on skyscape twice before the next simulation scenario").

Simulation #1:

A.

B.

Faculty/TA comments:

Simulation #2:

A.

B.

Faculty/TA comments:

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2022

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: _____