

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

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

**Student:**

**Final Grade: Satisfactory/Unsatisfactory**

**Semester:** **Fall**

**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)
<b>Faculty's Name</b>			<b>Initials</b>
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.**

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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
<b>Competencies:</b>																		
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).				NA	S	NA	S											
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).				NA	S	NA	S											
			CB	NS	CB	CB	BL											
<b>Clinical Location:</b> <b>Patient age</b>			Meditech Orientation	No Clinical Experiences	4N 67yo	NA	3T 62 yo											

**Comments**

**Week 5(1c): Taylor, 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
<b>Competencies:</b>						NA	S											
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						NA	S											
b. Use correct technique for vital sign measurement (Responding).				NA	S	NA	S											
c. Conduct a fall assessment and institute appropriate precautions (Responding).						NA	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): Taylor, 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, performing a head to toe assessment, and conducting a fall assessment on your patient. Your head to toe assessment was organized and systematic. You also did an excellent job instituting appropriate precautions since your patient was a high fall risk. 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
<b>Competencies:</b>						NA	<del>NA</del>											
a. Receive report at beginning of shift from assigned nurse (Noticing).							S											
b. Hand off (report) pertinent, current information to the next provider of care (Responding).				NA	NA	NA	NA											
c. Use appropriate medical terminology in verbal and written communication (Responding).				NA	S	NA	S											
d. Report promptly and accurately any change in the status of the patient (Responding).				NA	S	NA	NA											
e. Communicate effectively with patients and families (Responding).				NA	S	NA	S											
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).				NA	S	NA	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. The more experience you get with receiving hand off report, the more comfortable you will become with where all the information should be placed on the report sheet. You did a great job this week communicating with your patient 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
<b>Competencies:</b>				NA	S	NA	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	NA	S	NA	S											
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).			S	NA	NA	NA	NA											
e. Provide basic patient education with accurate electronic documentation (Responding).																		
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						NA	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



Comments

**Week 5(5b): Taylor, 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**

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

**Week 7(5H): Fire extinguisher and pull station located at exit stair #2. Fire extinguisher between room 3018.2-3019.1. Pull station to the left of room 21. Fire extinguisher by front desk/ nurses station. Great job! BL**

Week 7-5(e) Taylor, 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
<b>Competencies:</b> 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
<b>Competencies:</b>																		
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
<b>Competencies:</b>				NA	S	NA	S											
a. Reflect on areas of strength** (Reflecting)				NA	S	NA	S											
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)				NA	S	NA	S											
c. Incorporate instructor feedback for improvement and growth (Reflecting).				NA	S	NA	S											
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).				NA	S	NA	S											
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).				NA	S	NA	S											
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).				NA	S	NA	S											
g. Comply with patient's Bill of Rights (Responding).				NA	S	NA	S											
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).				NA	S	NA	S											
i. Actively engage in self-reflection. (Reflecting)				NA	S	NA	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 5-

Strength- Able to obtain vital signs and document them appropriately in patients chart with confidence. **You did a great job with documentation of your patient's vital signs this week. Great job! CB**

Improvement- My area of improvement would be communication. I will work on my communication skills by talking with 2-3 family members while at home and gaining more confidence in my communication skills by next clinical. **Taylor, you will find communication comes easier with time and experience. You have a great plan in place for your area of improvement. CB**

Week 5(8i): **Excellent job on your clinical reflection assignment. I know that it can be a little nerve wracking going into a new environment you are not familiar with and meeting new people. You did not let your nerves get the best of you. You did a great job during your first clinical. Keep up the great work! CB**

**Week 7 -**

Strength- Able to perform head-to-toe assessment with confidence and communicate with patient.

Weakness- My area of weakness would be charting the head-to-toe assessment, I felt that I needed a lot of guidance on where to put certain information. I will work on this by practicing more documentation skills in lab over the next two weeks so that by next clinical I am more confident and need less guidance. **Taylor, you did an excellent job in clinical this week. The more experience you get with documentation, the easier it will become for you. This is a great plan to help you improve. Remember to utilize your Meditech Guidelines to help you with your documentation as well. Keep up all your great work! BL**

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**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
<b>Noticing</b>	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		
<b>Interpreting</b>	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)		
<b>Responding</b>	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"> <li>Continue plan of care</li> <li>Modify plan of care</li> <li>Terminate plan of care</li> </ul>	Complete			Not complete		
<p>Total Possible Points= 42 points  42-30 points = Satisfactory  29-18 points = Needs Improvement*  &lt; 18 points = Unsatisfactory*</p> <p><b>*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.</b></p> <p><b>Faculty/Teaching Assistant Comments:</b></p>						<p><b>Total Points:</b></p>	
						<p><b>Faculty/Teaching Assistant Initials:</b></p>	

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

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

\* 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:

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**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: \_\_\_\_\_