

**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)
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:								NA		NA	NA							
a. Identify spiritual needs of patient (Noticing).								NA		NA	NA							
b. Identify cultural factors that influence healthcare (Noticing).								NA		NA	NA							
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).				S	N/A	N/A	S	S		NA S	NA							
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).				S	N/A	N/A	S	S		S	NA							
			CB	NS	CB	CB	CB	NS		LM								
			Meditech Orientation	4N 90	N/A	N/A	3T 68	Mid term			NA							

Clinical Location:
Patient age

Comments

Week 4 1(c,d) – Gary, nice job this week interacting with a patient for the first time in the clinical setting. You were able to respect your patient's preferences values, and needs when entering the room to obtain vital signs. You used Maslow's to determine the importance of assessing vital signs and meeting the physiological needs of your patient first. NS

Week 7(1d): Gary, great job this week using Maslow's Hierarchy of needs, allowing your patient to eat lunch before you performed your head-to-toe assessment. CB

Week 9 1(c, d)- Gary, you did a great job this week on 4North. You coordinated your patient's care based on his needs throughout the day. You respected his privacy by keeping the door closed and curtain drawn. You also followed Maslow's hierarchy of needs by addressing your patient's physical needs first, then addressed his safety and security needs. Please remember to include the clinical location and patient age at the bottom of each clinical week column. Please add this information to the week 9 column. Nice job! LM

* 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	S		S	NA							
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).																		
b. Use correct technique for vital sign measurement (Responding).				S	N/A	N/A	S	S		S	NA							
c. Conduct a fall assessment and institute appropriate precautions (Responding).						N/A	S	S		S	NA							
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).								NA		NA	NA							
e. Collect the nutritional data of assigned patient (Noticing).								NA		S	NA							
f. Demonstrates appropriate insertion, maintenance, and removal of NG tube (Responding).								NA		NA	NA							
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).								NA		NA S	NA							
			CB	NS	CB	CB	CB	NS		LM								

Comments Week 4 2(b) – This week you were able to use the skills learned in the lab and the content learned in theory to apply your knowledge in the clinical setting. You successfully obtained vital signs on a live patient for the first time, something to be proud of! You utilized correct technique to obtain accurate measurements and noticed reading of: (Temp – 97.8, HR 73 upon palpation, RR 14, Spo2 95% on RA and BP 118/73). Great job! NS

Week 7 (2a,b,c): Great job this week conducting your first head-to-toe assessment on a real patient. You also did a great job obtaining a set of vital signs and performing a fall assessment on your patient. CB

Week 9 2(a, b, c, g)- Gary, you properly performed a head-to-toe assessment on your patient this week. You followed correct technique while obtaining vital signs and understood the variations from normal. You performed a Johns Hopkins fall risk assessment on your patient and correctly documented your findings. I gave you an “S” for competency 2g because you are beginning to research and interpret your patient’s diagnostic studies to help formulate a care map. You needed this information for your CDG this week. Great job! LM

*** 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	S		S	NA							
a. Receive report at beginning of shift from assigned nurse (Noticing).						N/A	S	S		S	NA							
b. Hand off (report) pertinent, current information to the next provider of care (Responding).				N/A	N/A	N/A	N/A	NA		S	NA							
c. Use appropriate medical terminology in verbal and written communication (Responding).				S	N/A	N/A	S	S		S	NA							
d. Report promptly and accurately any change in the status of the patient (Responding).				S	N/A	N/A	S	S		S	NA							
e. Communicate effectively with patients and families (Responding).				S	N/A	N/A	S	S		S	NA							
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).				S	N/A	N/A	S	S		S	NA							
			CB	NS	CB	CB	CB	NS		LM								

Comments

Week 4 3(e) – Excellent job communicating effectively with your patient this week. You were able to enter the room confidently and initiated the therapeutic nurse-patient relationship with strong communication skills. This can be a challenging task the first time in the clinical setting; however, you exuded confidence and use appropriate communications skills to learn more about your patient. NS

Week 7(3a): Good job receiving hand off report. With experience and practice, you will become more comfortable receiving report and finding where all the information goes on the report sheet. CB

Week 9 3(a, b, e, f)- Gary, you received report at the beginning of the shift and recorded specific, pertinent information about your patient. You gave a hand-off report to your nurse at the end of the clinical day. You communicated effectively with your patient before, during, and after each task you performed on him throughout the day. You watched your patient's nurse pull the JP drain from your patient and assisted with the nurse's and patient's needs. Great job! LM

*** 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:				S	N/A	N/A	S	S		S	NA							
a. Document vital signs and head to toe assessment according to policy (Responding).								S		NA	NA							
b. Document the patient response to nursing care provided (Responding).								NA		NA	NA							
c. Access medical information of assigned patient in Electronic Medical Record (Responding).			S	S	N/A	N/A	S	S		S	NA							
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).			S	S NA	N/A	N/A	S NA	S		NA	NA							
e. Provide basic patient education with accurate electronic documentation (Responding).								NA		NA	NA							
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						N/A	S	S		S	NA							
*Week 3 – Meditech Expanse			CB	NS	CB	CB	CB	NS		LM								

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 4 4(a,d) – Good work with your documentation. You were able to communicate your findings related to vital signs in the electronic health record which allowed the health care team access to the most up to date patient information. Your documentation was factual and accurate. (d) – this competency was changed to “NA” because you did not have the opportunity to access patient education materials on the intranet during this clinical experience. NS

Week 7(4a,f): Gary, you did a good job with documenting your first head-to-toe assessment. Remember during clinical, while documenting, to have your meditech guidelines with you to ensure that you are documenting all of the pertinent information for your patient. You did a great with your first clinical discussion group. The fact that your patient had an ID bracelet that was illegible and there was another one in the room, is a huge safety issue. Like you said, what if the patient would need identified in a hurry, and you can't read it. Also you did a great job in your peer response, discussing the standardized colored wristbands that are used for different meanings. I changed the competency 4d to a “NA” due to not looking up education for your patient. CB

Week 9 4(a, c, f)- Gary, you appropriately documented your patient's vital signs and assessment findings in Meditech. There were some areas that were not completed in your documentation but we discussed this and you properly completed the documentation. You accurately accessed information in your patient's chart to help you complete the CDG post and properly care for your patient. You provided appropriate responses to each CDG question. You correctly completed an initial CDG post and a peer post. You met the word count requirements for both posts, but please be cognizant of this. Your peer post had exactly 100 words, which is the minimum. Overall, you did a great job! LM

* 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:				S	N/A	N/A	S	S		S	NA							
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).				S	N/A	N/A	S	S		S	NA							
b. Apply the principles of asepsis and standard/infection control precautions (Responding).				S	N/A	N/A	S	S		S	NA							
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).								NA		NA	NA							
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).				S	N/A	N/A	S	S		S	NA							
e. Organize time providing patient care efficiently and safely (Responding).				S	N/A	N/A	S	S		S	NA							
f. Manages hygiene needs of assigned patient (Responding).								NA		S	NA							
g. Demonstrate appropriate skill with wound care (Responding).								NA			NA							
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						N/A	S	S			NA							
			CB	NS	CB	CB	CB	NS		LM								

Comments

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

Week 4 5(b,d) – Nice job performing hand hygiene when entering and exiting the patient’s room, demonstrating the application of asepsis and standards precautions. You were able to manage your first aspect of patient care in the clinical setting without complications. NS

Week 7 (5h) Fire extinguishers were located: 3018.1 and 3019.1, by Exit Staircase 1, Next to nurses station, and another by staircase 2. Pull alarms were across from 3020, by exit staircase 1, and by staircase 2. Thank you for documenting the fire pull stations and the fire extinguisher locations on 3T. CB

Week 9 5(a, d, e, f)- Gary, you demonstrated correct body mechanics while caring for your patient. You managed basic patient care by preparing your patient’s bag bath for her and assisted your patient with hygiene care. You also organized your time efficiently and safely. Great job! LM

* 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								NA										
			CB	NS	-	-	-	NS	--	LM								

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:								NA										
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).								NA										
b. Recognize patient drug allergies (Interpreting).								NA										
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).								NA										
d. Administer oral, intramuscular, subcutaneous, and intradermal medications using correct techniques (Responding).								NA										
e. Review the patient record for time of last dose before giving prn medication (Interpreting).								NA										
f. Assess the patient response to prn medications (Responding).								NA										
g. Document medication administration appropriately (Responding).								NA										
*Week 11: BMV			CB	NS	-	-	-	NS	--	LM								

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

**** 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 4 Strength: I felt very comfortable communicating with the patient and building rapport. Awesome strength to note! With this being your first time in the clinical setting in the hospital environment, demonstrating the ability to effectively communicate is something worth noting. This is a new area of professional practice for you and you are taking on a new role as a clinician. Having the ability to form a connection with your patient through good communication on your first day is something to be proud of. Keep up the hard work! NS

Week 5 Weakness: Overall confidence in myself. Practice role playing with friends and families, and visit hospital to familiarize myself with environment by next clinical experience. Nice use of reflection! With this being your first experience, it is not uncommon to feel a lack of confidence in yourself and your abilities. You will notice how much your confidence improves with each experience. The best thing you can do to improve is practice. Your plan for improvement should serve you well moving forward. Good job last week! NS

Week 4 8(i) – I appreciate the insight provided in your reflection assignment. Overall it sounds like you had a good first experience, which is great to hear! You hit on some important topics related to the nursing profession. Noting how we have the ability to impact others while caring for them really opens your eyes to the importance of your role. Putting yourself into the role of the patient or a family member of a patient is an awesome way to ensure you are understanding the significance of what you are doing. We are caring for others during their most vulnerable and sometimes worst moments of their life. Nobody likes to lay in a hospital bed, but if you have someone that is genuinely compassionate and cares about you, it makes the experience tolerable. It's great to hear that your patient has experienced good care throughout his stay. That's what nursing is all about, caring for others. It's unfortunate that short staffing was mentioned on multiple occasions during your experience. While this is something that health care has been dealing with since even before the pandemic, it doesn't need to be discussed in the open. This can paint a bad picture for patients and visitors if this is overheard. Being aware of these conversations and how they can be overheard will benefit you moving forward and is something you can strive to avoid. I commend you for your efforts in returning to school and striving to make a difference in patient's lives! Thank you for sharing your thoughts, I look forward to watching you accomplish your goals! NS

Week 5: I will address the week 5 U in 8f by marking due dates for clinical tools on my assignment calendars and will submit ahead of time.

Week 5 (8f): Gary, thank you for taking accountability and giving yourself a "U" due to submitting your clinical tool after the due date and time. I think that marking clinical tool due dates and times on your calendar is a great reminder to make sure you submit it on time. If your clinical tool is submitted by the due date and time for week 6, you may give yourself an "S" or "NA" whichever is applicable. CB

Week 7 Strength: I felt I did a good job familiarizing myself with using informatics to access patient information, and checking necessary vitals, labs, and contact information. Gary, you will find that informatics in nursing is a great resource for so many things you will utilize. CB

Weakness. I need to continue to work on head to toe assessment and get more comfortable with establishing a routine that works for me. I will continue to practice on family and friends. Gary, you will find with continued practice and experience, the head-to-toe assessment does get easier. You have come up with a great plan to feel more comfortable. CB

Midterm – Gary, you are satisfactory in all related competencies at this point in the semester, nice work! Review the comments throughout your tool, reflect on your strengths and weaknesses listed from your first two clinical experiences, and keep working hard to achieve your goals in the second half of the semester!! We look forward to watching you continue to grow in your nursing abilities and assisting you in achieving your goals. NS

Week 9 Strength: I took report asked questions of the RN I was assigned to, and felt comfortable giving report as well as updating her throughout the clinical experience to any changes in vitals, or patient needs that I was not able to provide myself. Gary, you did an excellent job on the clinical unit this week! LM

Week 9 Weakness: I need to be more aware of patient's bed/chair alarms and making sure to disable prior to moving patient. Twice helped patient to the restroom and forgot to turn off the chair alarm. This is an excellent area for improvement. How will you improve upon this? What is your action plan? Please note how you will improve and what your action plan will be each week (See above directions under objective 8). LM

Week 9 plan of improvement and plan of action, I will check each patient's bed prior to getting them up for the restroom or ambulating. I will write myself a note on my patients report and look at it to remind myself to check. GB 11/3/2022

* 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: _____