

EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2022

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student:

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

Faculty: Kelly Ammanniti, MSN, RN; Monica Dunbar MSN, RN;
 Brian Seitz, MSN, RN, CNE

Faculty eSignature:

DIRECTIONS FOR USE:

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S)**, **Needs Improvement (NI)**, **Unsatisfactory (U)**, and **Not Available (NA)**. The faculty member will initial if in agreement with the student’s evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written on the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a “S, NI, or U”. If the student does not self-rate, then it is an automatic “U”. A student who submits the clinical evaluation tool late will be rated as “U” in the appropriate competency(s) for that clinical week. Whenever a student receives a “U” in a competency, the following week it must be addressed with a comment as to why it is no longer a “U”. If the student does not state why the “U” is corrected, then it will be another “U” until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. If the final performance code is unsatisfactory in any one of the competencies, a grade of unsatisfactory is given. If a pattern of unsatisfactory performance occurs after performing the competency satisfactorily, this also constitutes a grade of unsatisfactory. An unsatisfactory as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.

METHODS OF EVALUATION:

- Care Maps
- Patient/Family Education
- Preparedness for Clinical/Clinical Performance
- Online Clinical Discussion Groups
- Administration of Medications
- Nursing Skills Completion of Clinical Performance Tool
- Written Reports of Clinical Experiences
- Documentation
- Conferences with the Faculty
- Lasater Clinical Judgment Rubric
- vSim
- Simulation Scenarios

Absence: (Refer to Attendance Policy)

| Date | Number of Hours | Comments | Make-up (/Date/Time) |
|------|-----------------|----------|----------------------|
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| Faculty’s Name | Initials |
|-----------------|----------|
| Kelly Ammanniti | KA |
| Brian Seitz | BS |
| Monica Dunbar | MD |
| | |
| | |

7/8/2022 KA

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 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, 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 instructor 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. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)* | | | | | | | | | | | | | | | | | | |
| Weeks of Clinical | 1 | 2 | 3 | 4 | 5 | 6 | 7 | Midterm | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | Make up | Final |
| | 9/2 | 9/9 | 9/16 | 9/23 | 9/30 | 10/7 | 10/14 | | 10/21 | 10/28 | 11/4 | 11/11 | 11/18 | 11/25 | 12/2 | 12/9 | | |
| Competencies: | | NA | N/A | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| a. Provide care utilizing techniques and diversions appropriate to the patient's level of development. | | NA | N/A S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| b. Provide care using developmentally appropriate communication. | | NA | N/A | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| c. Use systematic and developmentally appropriate assessment techniques. | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment) | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/S | N/A | |
| e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)* | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| Clinical Location Age of patient | | NA | LC | BV | BG | REG | FT | S | Webe lo | FT | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| | | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | | | | | | | |

Comments:

9/16 – Intimacy vs isolation. My reason for choosing this stage of growth and development is because of the patient's drug abuse history. She has been clean for a few years and now is making better decisions by isolating for herself and daughter to build a better life for the both of them. BS

Week 3- 1a- Good job discussing one of the patients you and the lactation consultant worked with. BS

9/23 – Industry vs inferiority. My reason for this stage is because these children were at the age where school and social interaction is important to them. Also, confidence is huge so once we were done completing the screenings for each child I was sure to give them positive feedback. **Good job. BS**

Week 4- 1k- You did a nice job of discussing the beliefs and values you noticed while in the Bellevue Schools. Nice job also detailing the education you provided to the students related to hearing and vision screening. BS

9/30- Industry vs. inferiority. My reason for this is because social interaction was huge for these children. They wanted to compete with each other while completing an assignment and was looking for rewards and praise afterwards. **Good observation. BS**

Week 5- 1b,e- Nice job utilizing developmentally appropriate communication strategies while communicating with the children at the Boys and Girls Club. Nice job also of providing examples of ways in which you adjusted your communication technique while interacting with the kids. BS

10/7 – Intimacy vs. Isolation. My reason for this stage is because she was a young adult and her marital status said, “life partner”. Seems as if she’s in a strong intimate relationship. **BS**

Week 6 – 1a – You did a wonderful job providing holistic care to the mother you were assigned in Labor and Delivery this week. 1c – You did a nice job observing the nurse during the assessment process of the laboring patient.

10/14 - Integrity vs. Despair – I chose this because one of my patients that visited the ER had an extensive history. He was at the end stages of two different cancers. He mentioned he was a 3-pack a day smoker and he would drink but once he stopped drinking all these diagnoses came about. He also mentioned that he did it to himself, so he was kind of full of regrets. **Unfortunately, many people do not realize how bad they are hurting themselves until their disease processes are well-advanced. BS**

Week 7- 1a- You did a good job describing one of the patients you helped care for during your time in the FT ER. It certainly sounds like an interesting case. BS

10/21 - Industry vs. inferiority. I chose this one because the webeles were at an age where accomplishing tasks and receiving feedback is important to them such as earning badges. **Yes, good job. BS**

10/28 - Trust vs. Mistrust. I chose this one because the patient was a newborn baby. The baby was trying to learn who to trust while outside of mom uterus. I think the skin to skin contact with mom and dad helped establish some trust and comfort. **Yes, I’m sure it did! BS**

Week 9- 1a- Nice job discussing you OB patient this week and explaining what you got to witness while on clinical. 1d- Nice job also of discussing an important safety concern for maternity nursing. BS

| Objective | | | | | | | | | | | | | | | | | | |
|--|-----|-----|------|------|------|------|-------|---------|-------|-------|------|-------|-------|-------|------|------|--------|-------|
| 1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)* | | | | | | | | | | | | | | | | | | |
| Weeks of Clinical | 1 | 2 | 3 | 4 | 5 | 6 | 7 | Midterm | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | Makeup | Final |
| | 9/2 | 9/9 | 9/16 | 9/23 | 9/30 | 10/7 | 10/14 | | 10/21 | 10/28 | 11/4 | 11/11 | 11/18 | 11/25 | 12/2 | 12/9 | | |
| Competencies: | | NA | N/A | N/A | N/A | S | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| f. Describe psychological changes in response to the expectant mother's pregnancy. Maternal | | NA | N/A | N/A | N/A | S | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| g. Discuss prenatal influences on the pregnancy. Maternal | | NA | N/A | N/A | N/A | S | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| h. Identify the stage and progression of a woman in labor. Maternal | | NA | N/A | N/A | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| i. Discuss family bonding and phases of the puerperium. Maternal | | NA | N/A | N/A | N/A | S | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| j. Identify various resources available for children and the childbearing family. | | NA | S | N/A | N/A | S | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| l. Respect the centrality of the patient/family as core members of the health team. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| | | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | | | | | | | |

Comments:

Week 6- 1h – You were able to identify the stages of labor your patient was progressing through and watched the care of the patient from the moment of induction to delivery of the newborn. 1l – You were able to witness the labor process and how the healthcare provider, nurses, and patient's support people work together to provide the best experience possible for the patient during the laboring process. KA

Week 7- 1k- You were able to identify and discuss a cultural implication to consider when planning care for your patient in the FT ER.

Week 9- 1i- Great job discussing examples of family bonding you witnessed in the clinical setting and also identifying the phase of postpartum adjustment this new mother was experiencing. BS

| Objective | | | | | | | | | | | | | | | | | | |
|--|-----|-----|----------|------|------|------|----------|---------|-------|-------|------|-------|-------|-------|------|------|---------|-------|
| 2. Integrate principles of decision-making in utilizing evidenced-based practice in the nursing process in providing care for the childbearing family and children encompassing cultural sensitivity and diversity. (1,2,3,4,5)* | | | | | | | | | | | | | | | | | | |
| Weeks of Clinical | 1 | 2 | 3 | 4 | 5 | 6 | 7 | Midterm | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | Make up | Final |
| | 9/2 | 9/9 | 9/16 | 9/23 | 9/30 | 10/7 | 10/14 | | 10/21 | 10/28 | 11/4 | 11/11 | 11/18 | 11/25 | 12/2 | 12/9 | | |
| a. Engage in discussions of evidenced-based nursing practice. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| b. Perform nursing measures safely using Standard precautions. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | NN/A |
| c. Perform nursing care in an organized manner recognizing the need for assistance. | | NA | N/A S | S | S | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| d. Practice/observe safe medication administration. | | NA | N/A | N/A | N/A | N/A | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose. | | NA | N/A | N/A | N/A | N/A | N/A S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| f. Utilize information obtained from patients/families as a basis for decision-making. | | NA | S | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| g. Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.** (Noticing, Interpreting, Responding, Reflecting) (List Below)* | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| | | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | | | | | | | |

Comments:

9/16 – A social determinant of health I seen this week was with a client who was a first-time mom who was previously a drug abuser. Transportation seemed to be an issue for her. All her appointments had to be made around her mother schedule. **Good observation. BS**

Week 3- 2c- Nice job helping to provide education to the new mother on how to get a better latch, which will make the breastfeeding experience better for both mother and child. BS

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

9/23 - A social determinant of health that was noticed this week were a few children who reported that they were glasses, but they were broken or lost and haven't gotten new ones. BS

9/30 A social determinant of health that was noticed this week was the education of some of the children. Some of the children did not know a lot of the basic things like their age or some of the basic words on the word search activity we were doing. Yes, it is pretty obvious some of the children are falling behind. BS

Week 5- 2g- You did a nice job of identifying two social determinants of health and discussing how they could affect the children at the Boys and Girls Club, either now or in the future. Nice work! BS

10/7 A social determinant of health that was noticed this week was economic stability. She was worked part time as a production clerk, now has two kids, and a home to take care of. Yes, without some outside help this could become an overwhelming problem, further contributing to her depression. BS

Week 6 – 2c – You were able to work with your assigned nurse to read and identify EMF monitor strips of your laboring patient. KA

10/14 - A social determinant of health that was observed this week was a patient not being able to perform a breathing treatment at home because his machine did not work anymore. He needed a new one but needed to see if insurance will over a new one or not. Good example! BS

Week 7- 2e- Per your assigned ER nurse, you were able to provide PO medications, IM injection, remove medications from a vial and ampule, and administer IV fluids, nice job. BS

10/21 – A social determinant of health that was identified this week was lack of transportation. Some of the webelos parents had to drive 30min-1hr to Sandusky and a lot of webelos were not in attendance. Good point Dorresha. BS

10/28 – A social determinant of health that was identified this week was mom being a full-time worker with two older children who are in school so childcare is now something they have to consider. Yes, this a very real, and often expensive component, of having children. BS

| Objective | | | | | | | | | | | | | | | | | | |
|---|-----|-----|------|------|------|------|-------|---------|-------|-------|------|-------|-------|-------|------|------|---------|-------|
| 3. Summarize the legal, moral and ethical issues related to care of children and the child-bearing family. (2,6,7)* | | | | | | | | | | | | | | | | | | |
| Weeks of Clinical | 1 | 2 | 3 | 4 | 5 | 6 | 7 | Midterm | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | Make up | Final |
| | 9/2 | 9/9 | 9/16 | 9/23 | 9/30 | 10/7 | 10/14 | | 10/21 | 10/28 | 11/4 | 11/11 | 11/18 | 11/25 | 12/2 | 12/9 | | |
| a. Act with integrity, consistency, and respect for differing views. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| d. Critique examples of legal or ethical issues observed in the clinical setting. (List Below)* | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| | | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | | | | | | | |

Comments:

9/16- An ethical issue that was observed on the floor was a young mother that decided to bottle feed but still wanted to try breastfeeding. She explained that whatever milk she was able to express, she would add to the bottle. Instead of the lactation nurse educating the patient right then didn't say anything until we got into the office. **BS**

9/23- I think a legal or ethical issue for the hearing and vision clinical would be that once the student is rechecked for either hearing or vision and receive a referral, they do not have to follow up which could hinder the student's learning performance. **Good point Dorresha. BS**

9/30- An ethical issue that was observed at the boys and girls club was disciplinary actions given to the children. I think some of the adults who run the program could approach the children in a different manner. **You are not alone in thinking this. Unfortunately for some of the kids, this is the only place they do get any form of discipline. BS**

10/7 – An ethical issue that was observed on the clinical floor was calling the pt by the wrong pronouns. **Good observation Dorresha! BS**

10/14 – A legal/ethical issue that was observed this week at the ER clinical was being in a patient room and EMS came. While they were giving report, they stated the patient first and last name and we could hear from another room.

Week 7- 3b- According you your assigned ER nurse, you respected the privacy of patient health and medical information as required by federal HIPAA regulations.BS

10/21 – A legal or ethical issue would be parents taking pictures of the webelos during clinical. **Another good point, as we ourselves are not allowed to do this. BS**

10/28 – A legal issue that was observed this week was the nurse scanning the baby wristband to give meds before applying it to the baby wrist and ankle. **BS**

| Objective | | | | | | | | | | | | | | | | | | |
|---|-----|-----|----------|------|------|------|-------|---------|-------|-------|------|-------|-------|-------|------|------|--------|-------|
| 4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgement skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)* | | | | | | | | | | | | | | | | | | |
| Weeks of Clinical | 1 | 2 | 3 | 4 | 5 | 6 | 7 | Midterm | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | Makeup | Final |
| | 9/2 | 9/9 | 9/16 | 9/23 | 9/30 | 10/7 | 10/14 | | 10/21 | 10/28 | 11/4 | 11/11 | 11/18 | 11/25 | 12/2 | 12/9 | | |
| a. Develop and implement a priority care map utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting) | | NA | N/A | N/A | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| b. Develop and implement a plan of care utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting) | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| c. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care) | | NA | N/A | S | N/A | S | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| d. Summarize witnessed examples of patient/family advocacy. | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | NA | |
| e. Provide patient centered and developmentally appropriate teaching. | | NA | N/A S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| f. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding) | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| | | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | | | | | | | |

Week 3- 4e- You and the lactation nurse were able to provide valuable education to your patient to help make her breastfeeding experience a positive one. BS

Week 4- 4c,e- You were able to discuss how data from the hearing and vision screenings is obtained, tracked, and reported, and discuss some implications related to the information collected. You were also able to provide education to the kids during the screening process. BS

Week 5- 4e- Nice job of providing developmentally appropriate education to the children at the Boys and Girls Club and discussing examples of the education you provided. BS

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

Week 6- 4a,b- Great job developing and a priority care map utilizing the nursing process and clinical judgment. BS

Week 7- 4b- Good job prioritizing interventions for your ER patient. BD

Week 8- 4e- Great job providing developmentally appropriate education to the scouts on Webelo day. BS

| Student Name: D. Green | | Course Objective: | | | | | |
|--------------------------------------|--|---|--------------------|----------------|-------------------------------------|----------|---|
| Date or Clinical Week: Week 6 | | | | | | | |
| 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) | 3 | Nice job noticing/recognizing cues and highlighting data relevant to the priority problem. |
| | 2. Identify all abnormal lab findings/diagnostic tests. | (lists at least 3*) *provides explanation if < 3 | | | (lists < 3 or gives no explanation) | 3 | |
| | 3. Identify all risk factors. | (lists at least 5*) *provides explanation if < 5 | (lists 4) | (lists 3) | (lists < 3 or gives no explanation) | 3 | |
| | 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 | 3 | |
| Interpreting | 5. List all nursing priorities and highlight the top priority problem. | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | Good job analyzing cues, prioritizing hypotheses, and generating solutions as you identified the top priority problem and potential complications related to it. |
| | 6. Identify all potential complications for the top nursing priority problem. | (lists at least 3) | (lists 2) | | (lists < 2) | 3 | |
| | 7. Identify signs and symptoms to monitor for each complication. | (lists at least 3) | (lists at least 2) | | (lists < 2) | 3 | |
| Res | 8. List all nursing interventions relevant to the top nursing priority. | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | Nice job responding/taking action as you identified and |

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

| | | | | | | | |
|---|---|----------------|-----------------|----------------|--------------|--|---|
| pondering | 9. Interventions are prioritized | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | prioritized nursing interventions related to the top priority. |
| | 10. All interventions include a frequency | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | |
| | 11. All interventions are individualized and realistic | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | |
| | 12. An appropriate rationale is included for each intervention | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 3 | |
| Reflecting | 13. List the reassessment findings for the top nursing priority. | >75% complete | 50-75% complete | <50% complete | 0% complete | 3 | Good job evaluating outcomes related to the top priority. |
| | 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 | 3 | |
| <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: 42/42</p> <p>Faculty/Teaching Assistant Initials: Great work Dorresha! Satisfactory. BS</p> | |

| Objective | | | | | | | | | | | | | | | | | | |
|---|-----|-----|------|------|------|------|-------|---------|-------|-------|------|-------|-------|-------|------|------|---------|-------|
| 4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgement skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)* | | | | | | | | | | | | | | | | | | |
| Weeks of Clinical | 1 | 2 | 3 | 4 | 5 | 6 | 7 | Midterm | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | Make up | Final |
| | 9/2 | 9/9 | 9/16 | 9/23 | 9/30 | 10/7 | 10/14 | | 10/21 | 10/28 | 11/4 | 11/11 | 11/18 | 11/25 | 12/2 | 12/9 | | |
| g. Correlate the diagnostic tests with the patient's disease process. (noticing, interpreting, responding) | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| h. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding) | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| i. Correlate the medical treatment in relation to the patient's disease process. (noticing, interpreting, responding) | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| j. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding) | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| k. Correlate the patient's growth and developmental level in relation to the patient's disease process. (noticing, interpreting, responding) | | NA | N/A | N/A | N/A | S | S | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| | | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | | | | | | | |

Comments:

Week 7- 4g,h- Nice job discussing medications administered to your ER patient and interventions performed while providing care. BS

| Objective | | | | | | | | | | | | | | | | | | |
|--|-----|-----|------|------|------|------|-------|---------|-------|-------|------|-------|-------|-------|------|------|--------|-------|
| 5. Collaborating professionally with members of the health care team, child-bearing and child-rearing families, faculty, and peers through written, verbal and nonverbal methods, and by conferencing, networking, and posting through computer technology. (1,3,5,6,7,8)* | | | | | | | | | | | | | | | | | | |
| Weeks of Clinical | 1 | 2 | 3 | 4 | 5 | 6 | 7 | Midterm | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | Makeup | Final |
| | 9/2 | 9/9 | 9/16 | 9/23 | 9/30 | 10/7 | 10/14 | | 10/21 | 10/28 | 11/4 | 11/11 | 11/18 | 11/25 | 12/2 | 12/9 | | |
| a. Demonstrate interest and enthusiasm in clinical activities. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| b. Evaluate own participation in clinical activities. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| c. Communicate professionally and collaboratively with members of the healthcare team. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| d. Document assessment findings, interventions, and outcomes accurately in the electronic health record. | | NA | N/A | N/A | N/A | N/A | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding) | | NA | N/A | N/A | N/A | S | N/A | S | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R) | | NA | N/A | N/A | N/A | N/A | N/A | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| g. Consistently and appropriately post comments in clinical discussion groups. | | NA | S | N/A | S | N/A | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| | | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | | | | | | | |

Comments:

9/13/22-Dorresha Green with R.Smith. Excellent in all areas. No comments made.

Week 5- 5g- Great job on your Boys and Girls Club CDG. BS

Week 6 – 5a – You did a great job showing interest and enthusiasm while in OB. You sought out new learning experiences while on clinical. You were able to a vaginal delivery and two cesarean births while on clinical this week! KA

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

Week 6- 5g- Great job on your Care Map this week. BS

Week 7- 5a,g- Nice job discussing a new technology you encountered while in the Fisher-Titus ER as you completed your CDG.

Week 9- 5a- Good job discussing something new that you were able to experience in the clinical setting this week. 5e- Nice job also explaining how vaccinations are tracked in the electronic medical record, and issues related to tracking this information. BS

| Objective | | | | | | | | | | | | | | | | | | |
|---|-----|-----|------|------|------|------|-------|---------|-------|-------|------|-------|-------|-------|------|------|--------|-------|
| 6. Critique own strengths and areas for improvement modifying behaviors accordingly to achieve personal and professional goals. (7,8)* | | | | | | | | | | | | | | | | | | |
| Weeks of Clinical | 1 | 2 | 3 | 4 | 5 | 6 | 7 | Midterm | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | Makeup | Final |
| | 9/2 | 9/9 | 9/16 | 9/23 | 9/30 | 10/7 | 10/14 | | 10/21 | 10/28 | 11/4 | 11/11 | 11/18 | 11/25 | 12/2 | 12/9 | | |
| a. Recognize areas for improvement and goals to meet these needs. (List Below)* | | NA | S | S | S | U | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| b. Accept responsibility for decisions and actions. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| c. Demonstrate evidence of growth and self-confidence. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| d. Demonstrate evidence of research in being prepared for clinical. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| f. Describe initiatives in seeking out new learning experiences. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| g. Demonstrate ability to organize time effectively. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| i. Demonstrates growth in clinical judgment. | | NA | S | S | S | S | S | S | S | S | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| | | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | | | | | | | |

Comments:

9/16 – An area for improvement would be to be more knowledgeable in breastfeeding so that I am able to educate a new mother. While on clinical I learned a lot that I forgot mothers go through in the beginning such as latching problems and ways to obtain a better latch. I plan to review lactation consultant videos prior to my next clinical on OB floor. **Good plan Dorresha! BS**

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

9/23 – An area for improvement would be to work on the different approaches when instructing children of different ages. Moving forward I plan on finding ways to explain things easy and simple before the boys and girls club clinical. **Yes, kids do need a lot of explaining. BS**

9/30 - An area for improvement would be to figure out ways to keep kids engaged in activities without losing authority. With the younger kids with was surprisingly easier keeping them engaged by asking them questions but with the other kids I needed to figure out a different approach because the questions didn't work. I plan to look into communication techniques and approaches for grade school kids. **Great idea Dorresha! BS**

10/7 – An area for improvement for this clinical would be more hands on with the babies after delivery and asking to listen to the baby heart and lungs. I observed a lot of the labor side of things and there were times when my clinical nurse did assess the baby. Next time, I will be more confident and ask if I could assess the babies more. **Yes, the nurses will pick-up on your interest and will be willing to guide you through the process. BS**

Week 6- 6a- You received a U in this competency for not giving yourself a rating. I'm sure this is just an oversight but please respond below as to how you will prevent this from happening in the future. BS

In the future I will review my clinical tool thoroughly before submitting it to my drop box. **BS**

10/14 - An area of improvement this week was being about to educate the patient on one of the meds we administered. The nurse educated me on the med before drawing it up from the ampule but when I went to give it to the patient, I informed the patient on the name of the med but couldn't remember exactly what it was for because we gave several med. Next time, I will use my resources and do my research. **Good point, it is always important to know why you are giving a medication. BS**

10/21 – An area of improvement when presenting to younger kids be talking slower to be sure the kids can understand the information. I noticed after presenting to the first group I talked a little fast. So for the next group I slowed down and gave them more eye contact. Next time, I will ask questions in between to keep them engaged. **Good idea, we're all guilty of doing this sometimes BS**

10/28 – An area for improvement is being more confident when handling babies. While assisting with bathing the baby, I was being very gentle while the baby was crying and tense that it was kind of difficult to keep washing him up. In the future, I plan to just be more confident and understand that I'm not hurting the baby in any way. **Good plan Dorresha, babies are definitely resilient. BS**

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

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2022
Skills Lab Competency Tool

| Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory | Lab Skills | | | | | | | | | | | | | | |
|---|--|----------------------------------|---------------------------------------|----------------------------|--------------------------|----------------------------|------------------------|-------------------------------------|--------------------------------|-------------------------------|------------------------------|--------------------------|---------------------|----------------------------------|------------------------------------|
| | Adult Head to Toe Assessment (*1, 2, 5, 6) | Breastfeeding and Bottle Feeding | Breast Assessment (*1, 2, 3, 4, 5, 6) | Circumcision Care (*1,2,6) | Broselow Tape (*1,2,3,5) | Leopold's (*1, 2, 3, 5, 6) | APGAR (*2, 3, 4, 5, 6) | Ballard Assessment (*2, 3, 4, 5, 6) | Pediatric Vital Signs (*1,4,5) | Pediatric Lab Values (*1,4,5) | C-Section Care (*1, 2, 5, 6) | Health Literacy (*2,5,6) | Safety (*1,2,3,5,6) | Postpartum Assessment (*1, 2, 6) | Newborn Bath and Cord Care (*2, 4) |
| | Date: 8/30 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 | Date: 8/31 |
| Evaluation | S | S | S | S | S | S | S | S | S | S | S | S | S | S | S |
| Faculty Initials | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS | BS |
| Remediation: Date/Evaluation/Initials | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA |

* Course Objectives

| Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory | Lab Skills | | | | | | | | |
|---|---------------------------------|------------------------------|-------------------------------|----------------------------------|---|---------------------------------------|-------------------------------------|-------------------------|---------------------------|
| | Fundus Assessment (*1, 2, 5, 6) | Lochia Assessment (*1, 2, 4) | Pain Assessment (*1, 2, 5, 6) | Newborn Assessment (*1, 2, 5, 6) | Postpartum and Newborn DC Ed (*1, 2, 6) | Pregnancy History (*1, 2, 3, 4, 5, 6) | Newborn Thermo. (*1, 2, 3, 4, 5, 6) | EDD (*1, 2, 3, 4, 5, 6) | Meditech (*1, 2, 3, 5, 6) |
| | Date: 8/31 | Date: 8/31 | Date: 9/1 | Date: 9/1 | Date: 9/1 | Date: 9/1 | Date: 9/1 | Date: 9/1 | Date: 9/1 |
| Evaluation | S | S | S | S | S | S | S | S | S |
| Faculty Initials | BS | BS | BS | BS | BS | BS | BS | BS | BS |
| Remediation: Date/Evaluation/Initials | NA | NA | NA | NA | NA | NA | NA | NA | NA |

* Course Objectives

Comments:

Week 1 – You completed the online self-study portion of lab satisfactorily and actively participated in all in person lab components. You were able to demonstrate your knowledge and skills related to the Maternal Child Nursing lab areas covered. Keep up the good work! KA/MD/BS

Head-to-Toe Check-off – You satisfactorily demonstrated a head-to-toe assessment on the manikin without difficulty. KA/MD/BS

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2022
Simulation Evaluations

| Simulation Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory | Simulation | | | | | | | | | | | |
|--|--|--|---|--|--|-------------------------------------|---|--|--|--|---|---|
| | Pregnancy and PP Simulation (*1, 2, 3, 5, 6) | vSim Maternity Case 1 (*1, 2, 3, 5, 6) | Shoulder Dystocia and Newborn Care (*1, 2, 3, 5, 6) | vSim Maternity Case 4 (*1, 2, 3, 5, 6) | Patient Care Safety Escape Room (*1, 2, 3, 5, 6) | Empathy Simulation (*1, 2, 3, 5, 6) | Pediatric Respiratory Simulation (*1, 2, 3, 5, 6) | vSim Pediatric Case 5 (*1, 2, 3, 5, 6) | Pediatric GI Simulation (*1, 2, 3, 5, 6) | vSim Pediatric Case 4 (*1, 2, 3, 5, 6) | Student Developed Simulation (*1, 2, 3, 5, 6) | Comprehensive Simulation (*1, 2, 3, 5, 6) |
| | Date: 9/20 & 9/21 | Date: 10/3 | Date: 10/6 | Date: 10/17 | Date: 10/20 | Date: 10/13 | Date: 11/3 | Date: 11/8 | Date: 11/15 & 11/16 | Date: 11/30 | Date: 11/30 | Date: 12/6 |
| Evaluation | S | S | S | S | S | S | S | | | | | |
| Faculty Initials | BS | BS | BS | BS | BS | BS | BS | | | | | |
| Remediation: Date/Evaluation/Initials | NA | NA | NA | NA | NA | NA | NA | | | | | |

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: D. Green

OBSERVATION DATE/TIME: 9/20/2022

SCENARIO #: PPH

| CLINICAL JUDGMENT | | | | | OBSERVATION NOTES |
|--|---|---|---|---|---|
| COMPONENTS NOTICING: (1, 2, 5)* | | | | | <p style="color: red;">Remember to identify patient. Starts with VS. Fetal monitor applied to monitor HR and contractions. Inquires about pain level. Inquires about prenatal care. Patient identified, FSBS checked- 200.</p> <p style="color: blue;">Remember to identify patient. Begins assessment, VS. Inquires about pad/bleeding. Bleeding is noticed. Patient orientation determined.</p> |
| • Focused Observation: | E | A | D | B | |
| • Recognizing Deviations from Expected Patterns: | E | A | D | B | |
| • Information Seeking: | E | A | D | B | |

| | |
|---|--|
| <p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B | <p>Contractions interpreted as regular. FSBS interpreted as being high.</p> <p>Bleeding noted to be abnormal, fundal massage initiated. HR noted to be high. Following massage, HR noticed to be trending down and patient verbalizes relief.</p> |
| <p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B | <p>Discusses the importance of prenatal care, smoking cessation. Patient is assisted to left side. Call to provider (remember to identify yourself and SBAR report) to report glucose, nitrates in urine. THC use. Orders received (not read back). Mona informed of US to confirm dates. Education provided regarding marijuana use. Medications prepared, education provided (Procardia in this case is given to stop contractions by relaxing smooth muscle). Patient identified and medications administered, IV fluid started.</p> <p>When bleeding noticed, fundal massage is begun. Call to provider about bleeding and boggy fundus. Orders received and read back. Importance of fundal massage explained to partner. Medications prepared, patient identified, medications administered.</p> |
| <p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B | <p>Team reflected on the scenarios, discussed what the team members noticed, how they interpreted the information, and how they responded. Discussed the importance of teamwork and communication. SBAR communication discussed. Risk factors for PPH were discussed. Team discussed aspects of the case they felt went well, such as working together as a team and communication among team members. Also discussed aspects they might change, communication with partner and physician, researching medication uses, and being more relaxed and comfortable.</p> |
| <p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p> | <p>You are satisfactory for this scenario, nice work! BS</p> |

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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: D. Green

OBSERVATION DATE/TIME: 10/6/2022

SCENARIO #: SD

| CLINICAL JUDGMENT | | | | | | OBSERVATION NOTES |
|---|--|--|--|--|--|--|
| <p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B | | | | | | <p>Pain assessed. Patient is identified. Fetal monitor assessed. Contractions noted. Vaginal exam. Head to toe assessment begun as medication nurse hangs antibiotic- good teamwork. Mona expresses need to push. Crowning noticed. Baby noted to be stuck.</p> |
| <p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B | | | | | | <p>Pain 8/10 interpreted as needing medication. Contractions every 2 minutes. Vaginal exam- 5cm, 80% interpreted as progression. Crowning interpreted- birth imminent. Apgar interpreted- 9. Fundus firm and midline interpreted as normal</p> |
| <p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B | | | | | | <p>Team introduces members. Nubain prepared, patient identified, Nubain administered IM. Non-pharmacological measures encouraged. Allergies checked, antibiotic prepared and administered. Music offered and provided. Education provided regarding antibiotic. Call to provider to report crowning. Head is delivered and stops. McRoberts, suprapubic pressure, hands and knees, attempt to remove posterior arm, rotational, evaluate for episiotomy. Call to provider. Provider arrives. Baby is delivered, suctioned, skin to skin, cord clamped, placenta delivered and examined. Pain reassessed. Baby is removed to warmer, dried, suctioned, measured, weighed. Apgar obtained. Vitamin K administered and erythromycin applied properly. Baby returned to mother. Fundus assessed.</p> |
| <p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B | | | | | | <p>Team discussion of the scenario. The case was summarized, discussed risk factors for shoulder dystocia and the steps of the HELPER mnemonic. Team discussed the importance of teamwork and communication. Team did a nice job of working together and communicating among themselves and with the patient/visitor. Discussed ways in which infants can lose body heat and the importance of conserving heat.</p> |

| | |
|---|--|
| <p>SUMMARY COMMENTS: E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p> | <p>Nice work! You are satisfactory for this scenario. BS</p> |
|---|--|

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Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO: Empathy Simulation

STUDENT NAME: D. Green

OBSERVATION DATE/TIME: 9/13/2022

| | |
|---|--|
| <p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B | <p>You reflected on many aspects of your time wearing the empathy belly. Your responses were thoughtful and reflective on how you felt and you compared your experience to a real pregnancy.</p> <p>Great job.</p> <p>I enjoyed seeing your pregnancy photo!</p> |
| <p>SUMMARY COMMENTS: E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p> | <p>Comments</p> <p>You are satisfactory for this simulation. BS</p> |

*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: D. Green

OBSERVATION DATE/TIME:

10/20/2022

SCENARIO: Escape Room

| CLINICAL JUDGMENT | | | | | | OBSERVATION NOTES |
|---|--|--|--|--|--|---|
| <p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B | | | | | | <p>Noticed patient safety issues throughout the room. These included sharps container on bed, patient hanging off the bed, bed not locked, armband not on patient, syringe, and side rails not up. Noticed the assessment findings in the patient assessment supporting the need for a breathing treatment. Noticed math problems in the box and recognized the need to solve. Noticed some boxes needed a code and one needed a key.</p> |
| <p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B | | | | | | <p>Interpreted the risk in the safety issues for the patient and recognized the need to be fixed. Interpreted the need to work as a group to solve problems and find clues. Interpreted the need to complete the dosage calculation to administer the correct amount of IV fluids. Interpreted the need to administer meds and the need to call HCP to administer the correct doses.</p> |
| <p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B | | | | | | <p>Responded to safety issues by correcting each of them to provide a safe environment for the patient's care. Responded to instructor cues regarding environment and problem solving. Responded to HCP orders and picked the correct dosage of medication for the patient. Flexible with plan of care and looking for clues as well as communicating with one another effectively. Responded to the patient's respiratory distress by providing the patient with the ordered breathing treatment.</p> <p>Responded to the healthcare providers order and programed the IV to the correct rate and administered the prescribed IV fluids.</p> |
| <p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B | | | | | | <p>Worked together with communication and idea sharing. Collaborated and provided suggestions to one another to make sense of riddles, math formulas, medications, and treatments.</p> |

| | |
|--|---|
| <p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p> | <p>You are successful in this simulation as you were able to provide a safe environment for the patient. You were also able to work together as a team to solve the math formulas and give appropriate dosages of medications. Good job! BS</p> |
|--|---|

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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: D. Green OBSERVATION DATE/TIME: 11/3/2022 SCENARIO #: Ped Resp

| CLINICAL JUDGMENT | | | | | | OBSERVATION NOTES |
|---|--|--|--|--|--|--|
| <p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B | | | | | | <p>Team enters and begins assessment. VS. T- 101.5. Team inquires about pain. CO throat pain. Pain assessed. Blood glucose assessed. Lung sounds reassessed.</p> <p>Team returns at 1600. Patient CO throat pain. Temp- 102.2. Patient begins to cough and CO chest pain. Patient indicates that symptoms are improving. Lung sounds reassessed.</p> |
| <p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B | | | | | | <p>T- 101.5 recognized as high. Safety concerns identified in crib. Pain level interpreted as mild. Lung sounds interpreted. FSBS- 80- interpreted as normal.</p> <p>Lung sounds assessed as diminished (stridor). Retractions noted.</p> |

| | |
|---|--|
| <p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B | <p>When mom arrives, she is given update on condition. Team discussing and calculating medications. Double checked cetirizine time. Call to provider to double check dosages- ibuprofen (130 mg.) amoxicillin- safe dose provided. New orders received (remember to read back). Patient identified. Ibuprofen, amoxicillin, and cetirizine prepared and administered appropriately. Education provided regarding antibiotic compliance, also management of croup. Education provided about not smoking around child.</p> <p>Accessory muscle use recognized. O2 applied. Call to provider to update on condition. Orders received (remember to read back). Patient identified, dexamethasone prepared and administered. (Breathing treatment first?) Call to provider to follow up on acetaminophen order (good job), new order received (remember to read back order). Acetaminophen prepared and administered.</p> |
| <p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B | <p>Team reflected on the scenario. Discussed aspects of the case that the team felt went well, such as developmentally appropriate communication with the patient. Also discussed the importance of double-checking medication doses so as not to under- or over-medicate a patient. Team caught 3 of 4 medication errors- great job! Also discussed the importance of reading back orders to the provider. Each member verbalized an important takeaway point from the scenario.</p> |
| <p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p> | <p>Nice work! You are satisfactory for this scenario. BS</p> |

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EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 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: _____