EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2023

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Melinda Pickens

Final Grade: **Satisfactory/Unsatisfactory**

Semester: **Spring**

Date of Completion:

Faculty: **Dawn Wikel,** MSN, RN, CNE**; Lora Malfara,** MSN, RN**; Kelly Ammanniti,** MSN, RN, CHSE**; Monica Dunbar,** MSN, RN**; Nick Simonovich,** MSN, RN

Faculty eSignature:

Teaching Assistant: **Rachel Haynes,** BSN, RN

DIRECTIONS FOR USE:

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S), Needs Improvement (NI), Unsatisfactory (U), and Not Available (NA).** The faculty member will initial if in agreement with the student's evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written on the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, 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". 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 Competency Tool & Skills Checklists
Simulation, Prebriefing, PEARLS Debriefing, & Reflection Journals
Nursing Care Map Rubric
Meditech Documentation
Clinical Debriefing
Clinical Discussion Group Grading Rubric
Evaluation of Clinical Performance Tool
Lasater's Clinical Judgment Rubric & Scoring Sheet
Virtual Simulation Scenarios

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)

Faculty's Name	Initials
Kelly Ammanniti	**KA**
Monica Dunbar	**MD**
Rachel Haynes	**RH**
Lora Malfara	**LM**
Nick Simonovich	**NS**
Dawn Wikel	**DW**

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

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials	Remediation & Instructor Initials
1/26/23	Ineffective Airway Clearance	S/KA	NA	NA
2/2/2023	Impaired Physical Mobility	Satisfactory/MD	NA	NA

Note: Students are required to submit two satisfactory care maps over the course of the semester. If the care map is not evaluated as satisfactory upon initial submission, the student may revise the care map based on instructor feedback/remediation and resubmit until satisfactory. At least one care map must be submitted prior to midterm.

Objective

1. Illustrate correlations to demonstrate the pathophysiological alterations in adult patients with medical-surgical problems. (2,3,4,5)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies: a. Analyze the involved patho-physiology of the patient's disease process. (Interpreting)			S	S	S	N/A	S	N/A									
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	S	S	N/A	S	N/A									
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	S	S	N/A	S	N/A									
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			S	S	s	N/A	S	N/A									
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	S	s	N/A	S	N/A									
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			S	S	s	N/A	S	N/A									
g. Assess developmental stages of assigned patients. (Interpreting)			S	S	s	~~N/A~~ S	S	N/A									
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	S	s	~~N/A~~ S	S	N/A									
Indicate your clinical site as well as your patient's age and primary medical diagnosis in this box weekly.	Meditech, FSBS, IV Pump Session		3T 52, SOB, pneumonia, pneumothorax	Rehad, 68, Left CVA	4N, 78, KIDNEY STONE	ECSS, 65 and older	3T, 76, HTN urgency and confusion	N/A									
Instructors Initials	**RH**		**KA**	**MD**	**NS**	**RH**	**RH**										

Comments: During week 1, the Meditech, FSBS, and IV pump sessions were all considered clinical hours. You came prepared to each of them and demonstrated competency accordingly. For this reason, you have earned an S for this competency. RH

Week 3 – 1a , b, c, e– You did a nice job discussing on clinical your patient's disease process and what nursing was doing to help the patient. You were able to discuss symptoms we were monitoring and managing in your patient as well as pertinent labs for your patient diagnosis. KA
Week 3 – 1d – You did a nice job reviewing all your medications before you administered them to the patient. You were able to discuss the reason why the patient was taking the medication as well as what we were monitoring the patient for. You also were able to discuss what information was needed to determine if the medication should be administered (i.e. blood pressure, pulse). KA

Week 5 1(a-h) – Melinda, you were well prepared for clinical this week and demonstrated a desire to learn and enhance your knowledge. You did a nice job of researching and discussing your patient's admitting diagnosis of renal calculi, including the pathophysiology involved. You correlated his symptoms or urinary retention, pain, and dark/concentrated urine as a result of the large, partially obstructing stone noted on ultrasound. We discussed potential treatment options and nursing implications. Great job identifying the use of tamsulosin and the importance of IV hydration. Nice job making correlations with your patient's disease process and the care required! NS

Week 6 (1g): This competency was performed during the ECSC clinical by specifically tailoring your interactions to an older adult; therefore, S. (1h)- You were prepared for the ECSC clinical by planning, bringing materials for, and implementing an interactive activity for the older adults present at the senior center; therefore, S. RH

Week 7 1(a-h): You were well prepared for clinical this week and showed great time management skills in your team leader role. You were able to look up all medications for all patients and do medication pass with each team member. You also discussed each patient with your team members to get an understanding of what their disease process was. RH

Objective

2. Perform physical assessments as a method for determining deviations from normal. (3,4,5)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies: a. Perform inspection, palpation, percussion, and auscultation in the physical assessment of assigned patient. (Noticing)			S	S	S	N/A	S	N/A									
b. Conduct a fall assessment and implement appropriate precautions. (Noticing)			S	S	S	~~N/A~~ S	S	N/A									
c. Conduct a skin risk assessment and implement appropriate precautions and care. (Noticing)			S	S	S	N/A	S	N/A									
d. Communicate physical assessment. (Responding)			S	S	S	N/A	S	N/A									
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			S	S	S	N/A	S	N/A									
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		S	S	S	N/A	S	N/A									
	RH		**KA**	**MD**	**NS**	**RH**	**RH**										

Comments: Week 1 (2f)- By attending the Meditech clinical update & providing your full, undivided attention during the demonstration of documenting insulin, IV solutions, saline flushes and IV site assessments you are satisfactory for this competency. NS

Week 3 – 2a, d – You did a nice job thoroughly assessing you patient and notifying your nurse of any pertinent information. KA
Week 3 – 2f – You utilized the EMR to research your patient and determine what care needed to be provided to your patient throughout the day. KA

Week 5 2(a,d,e) – Nice work with your assessments this week, noticing numerous deviations from normal. You appropriately prioritized and focused your assessment on his GU system. You noticed some urinary retention, pain, and concentrated/dark colored urine. You appropriately strained the urine after each urinary event to monitor for the passing of the renal calculi. You also focused your assessment on his pain and discomfort, communicating your findings in a timely manner, and using appropriate assessment skills for his disease process and the care required. Nice job. NS

Week 6 (2b): This competency was completed when interacting with the older adults at the ECSC clinical experience, assisting during lunch with mobility and managing a lunch tray, etc.; therefore, S. Please make sure you are reflecting on all competencies in this tool on a weekly basis, to ensure you are accurately and completely evaluating

your experience and performance. RH

Week 7 2(a-f): you did a thorough head to toe assessment on your patient and you were able to communicate any changes to the patient's nurse. You also completed fall/safety assessment on your patient. During your team leader role, you checked charting on all patients and you were able to communicate to your team members what charting needed to be fixed or added for complete charting. RH

Objective

3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies: a. Perform standard precautions. (Responding)	S		S	S	S	~~N/A~~ S	S	N/A									
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	S	S	~~N/A~~ S	S	N/A									
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			S	S	S	~~N/A~~ S	S	N/A									
d. Appropriately prioritizes nursing care. (Responding)			S	S	S	~~N/A~~ S	S	N/A									
e. Recognize the need for assistance. (Reflecting)			S	S	S	~~N/A~~ S	S	N/A									
f. Apply the principles of asepsis where indicated. (Responding)	S		S	S	S	~~N/A~~ S	S	N/A									
g. Demonstrate appropriate skill with Foley catheter insertion, maintenance, & removal (Responding)			N/A	N/A	S	N/A	N/A	N/A									
h. Implement DVT prophylaxis (early ambulation, SCDs, and ted hose) based on assessment and physicians' orders (Responding)			S	S	S	N/A	S	N/A									
i. Identify the role of evidence in determining best nursing practice. (Interpreting)	S		S	S	S	~~N/A~~ S	S	N/A									
j. Identify recommendations for change through team collaboration. (Reflecting)			S	S	S	~~N/A~~ S	S	N/A									
	RH		**KA**	**MD**	**NS**	**RH**	**RH**										

Comments: By attending the IV Pump clinical and providing your full, undivided attention and active participation during the demonstration of the Alaris pump, documentation of IV site maintenance and recognition of potential IV complications, you are satisfactory for this competency. LM

Week 3 – 3b – You did a great job with the new skill of administering medications thorough a PEG tube. You reviewed information about the PEG tube before administering the medications to ensure the proper procedure was performed. KA

Week 5 3(f,g) – An exciting week and experience, your first foley catheter insertion! You were well-prepared to discuss the required steps associated with foley catheter insertion. You identified the importance of maintaining sterility throughout the procedure to reduce complications. During the insertion you maintained your composure, promoted comfort to the patient, maintained aseptic and sterile technique, and successful placed the catheter into the bladder on your first attempt. Following insertion, you provided peri-care, secured the catheter to the leg with the STAT-Lock device, and ensured the foley bag was hung below the level of the bladder without kinks. I thought you did an excellent job with your first sterile nursing skill! NS

Week 6: (3a, b, c, d, e, f, i, j) You got an S for these topics because you did use standard precautions (washing hands when soiled etc) and you did perform skills with safety in mind. You were able to prioritize your time by following a schedule and sticking to it. You were also able to identify what seniors needed assistance and helped them accordingly. You were able to identify what needed to be changed for your activity based on the senior's ability level and you were able to collaborate with a peer to organize the day. RH

Week 7 3(c, d) You did well prioritizing your time and organizing your day at team leader. All team members were able to pass medications within a timely manner and everyone was able to take a lunch break. Good job! RH

Objective

3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	MakeUp	Final
Competencies: k. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			S	S	S	N/A	S	N/A									
l. Ensure patient safety through proper use of EHR, IV flow sheet, and BMV. (Responding)			S	S	S	N/A	S	N/A									
m. Calculate medication doses accurately. (Responding)			S	S	S	N/A	S	N/A									
n. Administer IV therapy, piggybacks, IV push, and/or adding solution to a continuous infusion line. (Responding)			N/A	N/A	S	N/A	N/A	N/A									
o. Regulate IV flow rate. (Responding)	S		N/A	N/A	S	N/A	N/A	N/A									
p. Flush saline lock. (Responding)			S	N/A	S	N/A	N/A	N/A									
q. D/C an IV. (Responding)			N/A	N/A	S	N/A	~~S~~ NA	N/A									
r. Monitor an IV. (Noticing)	S		S	N/A	S	N/A	S	N/A									
s. Perform FSBS with appropriate interventions. (Responding)	S		S	S	N/A	N/A	N/A	N/A									
	RH		**KA**	**MD**	**NS**	**RH**	**RH**										

Comments: You were able to demonstrate understanding of the rationale of FSBS and the use of the glucometer. You were able to perform a Quality Control check of the glucometer as well as demonstrate skills and knowledge required of proper sample ID, collection, and handling of blood. DW

Week 3 – 3k – You did a nice job administering your medications this week. You observed the rights of medication administration and was able to answer all questions about your medications. You had the opportunity to pass PO and IV medications this week. You performed the medication administration process with beginning dexterity. KA

Week 3 – 3p – You did a nice job flushing your patient's IV this week and ensuring patency of the IV line. You were able to document this appropriately in the EMR. KA

Week 3 – 3r – You did a nice job monitoring your patient's IV site this week and documenting your assessment in the EMR. KA
Week 3 – 3s – You did a great job performing the FSBS skill on your patient and reviewing the MAR to determine the need for insulin related to the results. KA

Week 5 3(k-s) – Great job with medication administration this week! You were well-prepared by reviewing each medication and discussing the implications, side effects, and nursing assessments required. You communicated well with your patient and ensured safety measures were in place and performed, including the 3 safety checks and 6 patient rights. You gained experience administering PO medications using the BMV process appropriately. You performed a saline flush and IVP using appropriate aseptic technique, administering the IVP at the prescribed rate to prevent complications. Great job with your subcutaneous injections, identifying appropriate needle size and injection location in the subcutaneous tissue. You also gained experience programming an IV pump and accurately recording fluid intake in the IV spreadsheet. Overall a very successful week! NS

Week 7 3(k-s): Great job with medication administration. You took the time to look up all medications and educated your patient on each of them. You were very patient and willing to explain each medication multiple times, as she was confused while we did medication pass. You used your resources to look up information and educated your patient thoroughly on each one. I changed discontinuing an IV to NA because I was not sure you discontinued one during clinical. You did monitor one though. Good job! RH

Objective

4. Use therapeutic communication techniques to establish a baseline for nursing decisions. (1,5,7)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies: a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)			S	S	S	S	S	N/A									
b. Communicate professionally and collaboratively with members of the healthcare team using hand-off communication techniques. (SBAR) (Responding)			S	S	S	N/A	S	N/A									
c. Report promptly and accurately any change in the status of the patient. (Responding)			S	S	S	~~N/A~~ S	S	N/A									
d. Maintain confidentiality of patient health and medical information. (Responding)			S	S	S	~~N/A~~ S	S	N/A									
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			S	S	S	S	S	N/A									
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			S	S	S	~~N/A~~ S	S	N/A									
g. Provide a clear, organized hand-off report to your patient's next provider of care. (Responding)			S	S	S	~~N/A~~ S	S	N/A									
			KA	**MD**	**NS**	**RH**	**RH**										

Comments:

Week -3 – 4b, g – You did a nice job keeping your nurse up-to-date on all pertinent information throughout the day. You also provided the nurse with a concise report at the end of the day before leaving. KA

Week 3 – 4e – Melina, you did a good job picking a pertinent article and reviewing it in your CDG. You were able to relate it to your patient and share such great information with your classmates. Remember in your reference only the first letter of the first word of the article title is capitalized. You did a nice in-text citation. Remember to include the page number or paragraph number (if there are no page numbers) in the in-text citation when using a direct quote. Keep up the nice work! KA

Week 5 4(b,c) – Good work in your communication and collaboration with other members of the health care team. You stayed in contact and provided updates with your team leader. You quickly reported your patient's increased pain levels to the assigned RN to ensure timely pain management treatment. During the foley catheter insertion you communicated and collaborated with your peers well for a successful insertion while also promoting comfort to the patient. NS

Week 5 4(e) - Overall you did a nice job with your CDG this week, meeting all the necessary requirements for a satisfactory evaluation. See my comments on your posts for further details/comments. I appreciate the insight and additional research provided in your response post to Kenny. Great use of supplemental resources to enhance your knowledge. Some tips for APA formatting in the future: in your response post, you would use the Mayo Clinic as the authoring organization. The in-text citation for your response post would be (Mayo Clinic, 2023). For your initial post, be sure to *italicize* the journal title and volume: *Journal of Wound Ostomy and Continence Nursing*, *48*(6), 545–552. Just some tips for future success. Nice job! NS

Week 6: You got an S in (4c, d, f, g). This is because you were able to report any changes of the residents to the staff working. You also maintained confidentiality of the resident's names or health diagnoses. You were given information from staff about the residents, which would qualify as a report, and you were able to report back to them upon completion of your day. RH

Week 7: 5(b) You were very professional when acting as team leader and you were able to communicate well with each member of your team as well as staff on the unit. RH

Objective

5. Implement patient education based on teaching needs of patients and/or significant others. (1,6)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies: **a. Describe a teaching need of your patient.**** (Reflecting)			S	S	S	S	S	N/A									
b. Utilize appropriate termino-logy and resources (Lexicomp, UpToDate, Dynamic Health, Skyscape) when providing patient education. (Responding)			S	S	S	S	S	N/A									
			KA	**MD**	**NS**	**RH**	**RH**										

****5a & b- You must address this competency in the comments below for all clinicals on 3T, 4N, or Rehab- describe the patient education you provided; be specific- include the topic, method of delivery, reason for teaching need, materials to support learning through above resources (if applicable), and method used to validate learning.**
Example: Education related to orthostatic hypotension (changing positions slowly by sitting at the side of the bed or chair for a few minutes before moving to another position, utilizing the walker when ambulating) was provided to my patient through discussion and demonstration. This was necessary to maintain patient safety as he/she was experiencing a drop-in blood pressure and dizziness when getting out of bed. A patient education sheet was printed from Lexicomp and given to the patient. The teach back method was used to validate learning.

Comments:

Week 3 A and B – My patient I was able to educate on the importance of staying hydrated to help move secretions. She was coughing but unable to cough up secretions. I learned from my Lewis textbook that having patients staying hydrated can help to move those secretions out. I brought her in apple juice and water then had her teach back to me the importance of her staying hydrated. I also administered a medication that helps to mobilize secretions and on skyscape it also stated to have the patient stay hydrated to move the secretions. Great job! She took your education to heart and was trying to stay hydrated like you taught her. KA
Week 4 A and B – I was able to teach my patient on the importance of using the incentive spirometer. I told him about the importance of it since he has limited mobility from his stroke and how it helps to promote full lung expansion. That the incentive spirometer was also to help prevent any further complications as well. The resources I used for this knowledge was from both my Lewis's Med-Surg textbook as well as information learned from lecture classes in Nursing Foundations. Great! MD
WEEK 5 A AND B – I was able to educate my patient on the importance of staying hydrated to help him produce more urine and kind of build of pressure to help move/ flush out the kidney stone that he was currently trying to pass. I found my information to be able to education my patient on Lexicomp under discharge instructions. Very good! This was an important educational topic based on his admitting diagnosis and potential for complications. It was evident that your patient understood your teachings as he frequently mentioned that he was consuming water based on your discussion. Nice job!! NS
Week 6 A and B – My teaching for the week was to help seniors at the senior center to craft and make a flower out of tissue paper. I obtained this knowledge from a pinterest video on how to make them. I practiced myself before class and then once in class, demonstrated and helped the senior citizens to make paper flowers themselves. RH
Week 7 A and B – A teaching need for my patient was the need for a transdermal nicotine patch. She is a smoker currently and was ordered a patch to still offer her the nicotine through the patch that she would normally get from smoking. I obtained my information that I educated my patient on the nicotine patch from skyscape. I educated her on the importance of having this patch to prevent her from having any withdrawal symptoms from lack of nicotine, and why the patch was important. She also asked how often she had to get the patch, and how long it lasted for and I was able to educate her on that based on what was entered in

the MAR. Good teaching topic! The patient was confused at first, but you educated her and she was more understanding by the time we were completed with medication administration.

Objective

6. Implement patient-centered plans of care utilizing the nursing process, clinical judgment, and consideration for cultural, ethnic, and social diversity. (2,3,4,5)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
a. Develop and implement a priority care map utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)			S	S	S	N/A	N/A	N/A									
b. **Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.**** (Noticing, Interpreting, Responding, Reflecting)			S	S	S	S	S	N/A									
			KA	**MD**	**NS**	**RH**	**RH**										

****6b- You must address this competency in the comments on a weekly basis. For <u>all</u> clinicals - provide an example of SDOH &/or cultural elements that influenced your patient's care; be specific.**

Comments:

See Care Map Grading Rubrics below.

Week 3 B – I would say that my patients Social Determinants of Health would be her education level as well as her socioeconomic class. She is disabled and in low class, this combined with her education level makes it hard for her to care for herself. By this I mean, even if she is able to get access to health care she has to be properly educated and understand her diagnosis to be able to properly take care of herself. She has a history of asthma and lives with her husband who smokes in the house. As a nurse it would be important to educate her on the effects and importance of limiting or avoiding that second hand smoke to help improve her asthma condition. Good thoughts. She has multiple factors that can negatively impact her health that should be considered when providing education and resources to assist with maintaining her health. KA

Week 3 – 6a – You satisfactorily completed your Care Map. See comments below in the rubric for full details. KA

Week 4 B- I would say that my patients Social Determinants of Health would be that he is retired and has a long list of health complications. Being retired he doesn't have to go out and be social. After having a stroke most people tend to become depressed and don't want to be social due to impaired mobility. It is important to have regular doctors appointments and have him screened for depression. He lives at home with his wife so he will have access or a ride to his appointments. He also is a retired police officer and has insurance through that still which helps improve his access to be able to obtain the proper health care. Awesome! MD

Week 5 B – My patient lived at home alone and he was older so this might play a role on him being able to get access to healthcare. Older adults tend to be more at risk for falls and he might now be able to get up or have access to a phone, which could affect his health. My patient however was aware of his medications and what he took them for, he knew all his medicines when told the name of them. By him knowing the medications that he takes he also understand the importance of why he needed to take them. Nice discussion on SODH! While he was certainly aware of his medical history and medication and an active participant in his overall health, there is still a risk for his age to cause determinants to his health. Nice job reflecting on this competency! NS

Week 6 B – Overall there was a large group of seniors from what I noticed not all of them drove , they mostly took the bus. I also noticed one lady had on a life alert, where if you fall you push the button and they send help to your house. This is important and plays a key role in their lives because without that life alert she wouldn't be able to get up without help, as she relies on that. This also ties in with them taking the bus that comes at a scheduled time, they still have to walk to the bus and the hospital if they need care. Or to schedule ahead, but if it is an emergency that isn't much of an option. So, access to healthcare for them is limited. Most of them had walkers or canes so walking was also harder for them, which plays a role in them getting to the bus stop as well. Good observations! Did you happen to notice if any of them had family members drop them off? While driving with impaired vision or other issues could be a safety issue, it could also be a falling issue for them to walk so far. RH

Week 7 B – My patient had several determinants of health such as housing, hunger, support, and education. She lives alone but has support from her two daughters that come over and help her get around, sort her medication for her and makes sure she takes it. She is educated on the medications that she takes and why she takes them, and she even takes them in a certain order. As for hunger, my patient stated that she often skips breakfast and lunch as she is typically not hungry. She does get food from meals on wheels but hasn't been eating much of their food they provide her with either. She is confused and sometimes forgets if she ate or not, and during clinical she forgot if she ordered lunch or not. I was able to find out that lunch was ordered and helped her try to eat and encouraged her. Good observations of her SDOH. While she is aware she is not eating much , what could be a way that we could help her increase her intake for her health? Possibly a high calorie snack or protein shake would be beneficial for her. RH

Objective

7. Illustrate professional conduct including self-examination, responsibility for learning, and goal setting. (7)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
a. Reflect on an area of strength. ** (Reflecting)	S		S	S	S	S	S	N/ A									
b. Reflect on an area for improvement and set a goal to meet this need.** (Reflecting)	S		S	S	S	~~S~~ NI	S	N/ A									
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		S	S	S	S	S	N/ A									
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		S	S	S	S	S	N/ A									
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S		S	S	S	S	S	N/ A									
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		S	S	S	S	S	N/ A									
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		S	S	S	S	S	N/ A									
h. Actively engage in self-reflection. (Reflecting)	S		S	S	S	S	S	N/ A									
	RH		**KA**	**MD**	**NS**	**RH**	**RH**										

****7a and 7b: You must address these competencies in the comments section on a weekly basis. Please write a different comment each week. Remember that a goal includes what you will do to improve, how often you will do it, and when you will do it by (example- "I had trouble remembering to do the three checks of the six medication rights prior to administering medications. I will review the six**

*End-of-Program Student Learning Outcomes

rights and medication administration content in the textbook twice before the next clinical. Additionally, I will request to meet with my clinical faculty member to practice preparing and administering at least three medications before the next clinical."

Comments:

Week 1 A: I felt that my strength this week was Finger Stick Blood Sugar. As a PCT at Firelands I have had a lot of hands-on practice with the glucometer and performing the safety checks and felt well prepared for the skill. RH

Week 1B: I felt that my weakness is the IV math. My plan is to practice my IV math daily utilizing the online and paper resources that were mentioned or provided in class. I will do this at least once a day for the next week to help improve my skill as well as accuracy. My problem is knowing what numbers exactly to plug in for what problems, and I feel with more practice the better I will get at it. I think this is a good plan to practice and keep up to date on your skills. RH

Week 3 A: I felt that my area of strength this week was being able to education my patient. I got to educate her on the importance of staying hydrated and coughing/deep breathing to help clear her airway and remove secretions. Great job! She listened and utilized the information instantly. KA

Week 3 B: I felt that my area of weakness was my charting. My goal is to go to the computer lab/remove my paper documents from class when we did charting, and familiarize myself with documenting. I will do this over the next week and will see improvement in my next clinical setting. If you need help or clarification let me know and I can help. KA

Week 4 A: This week I felt that my strength was being able to communicate with the patient. I was able to walk him through the importance of physical and occupational therapy as well as offer a listening ear in a time of need for him. You did an awesome job communicating with your patient! MD

Week 4 B: I felt that my area of weakness was learning how to use a wheelchair. The area in the hospital are a lot smaller than that in class. My goal is over the next week practice in lab with a wheelchair how to maneuver in tight corners and how to transfer a patient from a chair to a bed and a bed to a chair. I will do this over a weeks time and have a classmate help me for practice. Great goal! MD

Week 5 A: My area of strength for the week was being able to insert a foley catheter on a female patient and not break sterile field. This was a great learning experience and helped to build my knowledge as well as improve my skill. The perfect strength to note for this week! I thought you did an awesome job following the procedure appropriately and maintaining sterile field, while also promoting comfort for the patient. A job well done! NS

Week 5 B: My area of weakness for the week was knowing what to document as a nurses note. My plan is to practice writing nurses notes over the next week, as well as look up some examples of nurses notes to help improve my knowledge. Nice reflection and good plan for improvement moving forward! NS

Week 6 A: My area of strength for the week was being able to communicate with the clients and help them to engage in a new activity. It was a nice experience to help teach seniors how to make flowers and have a good time. RH

Week 6 B: My area of weakness for the week I would say would be the flower making that we picked out. While before going to clinical I thought that flowers from tissue paper would be an easy thing for most to do, then I quickly realized that most had issues with their fingers and fine motor skills. My plan is to look up different activities over the next week that would be less challenging for senior citizens and take into account this disability. Knowing what I know now about fine motor skills being a problem for those that are older, knowing what are some possible activities they might enjoy and would be easier for them to do. Remember when creating a goal that you need what you will improve upon, how often you will do it, and when you will do it by. You are missing a couple elements in this goal. RH

Week 7 A: My area of strength for the week was my ability to communicate with my nurse for my patients needs. The patient had several PRN medications for pain and the patient stated her pain was 8/10. I found the nurse and asked her which medication that she wanted me to give her. I also was able to communicate possible teaching needs for the patient and report off to the nurse as well.

Week 7 B: My area of weakness for the week was how to apply a transdermal patch. My plan before the next clinical rotation, is to review my textbook about the proper application of transdermal patches. I want to educate myself on what to assess and be aware of complications and what not to do. I had trouble with the application of the transdermal patch as I was unsure how to remove it from packaging, so I will also reach out to my instructors for further clarification after I review my notes for further clarification. This is a good goal, good use of resources. RH

Student Name: Melinda Pickens				**Course Objective:**			
Date or Clinical Week: 1/26/23							
Criteria		**3**	**2**	**1**	**0**	**Points Earned**	**Comments**
Noticing	1.Identify all abnormal assessment findings (subjective and objective); include specific patient data.	**(lists at least 7*) *provides explanation if < 7**	**(lists 5-6)**	**(lists 5-7 but no specific patient data included)**	**(lists < 5 or gives no explanation)**	3	Melinda, you did a very nice job completing the assessment, lab, and risk factors section. You included all pertinent information and highlighted all important areas in these sections. KA
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	**(lists at least 3*) *provides explanation if < 3**		**(lists 3 but no specific patient data included)**	**(lists < 3 or gives no explanation)**	3	
	3. Identify all risk factors relevant to the patient.	**(lists at least 5*) *provides explanation if < 5**	**(lists 4)**	**(lists 3)**	**(lists < 3 or gives no explanation)**	3	

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Interpreting	4. List all nursing priorities and highlight the top priority problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	You did a nice job choosing a nursing priority for your patient and identifying complications for the priority. All of the signs and symptoms were appropriate for the complication. KA
	5. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	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 2)**		**(lists < 2)**	3	
Responding	8. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	You did a terrific job individualizing and prioritizing your patient's nursing interventions. Excellent job with this section! KA
	9. Interventions are prioritized	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	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 all of the highlighted reassessment findings for the top nursing priority.	**>75% complete**	**50-75% complete**	**<50% complete**	**0% complete**	3	Great job including all your highlighted assessment and labs in your evaluation of the care map. KA
	14. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**	3	

Total Possible Points= 42 points
42-33 points = Satisfactory
32-21 points = Needs Improvement*
< 21 points = Unsatisfactory*
***Total points adding up to less than or equal to 32 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.**

Faculty/Teaching Assistant Comments: **Melinda, you satisfactorily completed your care map. Wonderful job! Keep up the terrific work with the second care map! KA**

Total Points: **42/42**

Faculty/Teaching Assistant Initials: KA

Student Name: Melinda Pickens							**Course Objective:**
Date or Clinical Week: 2/2/2023							
	Criteria	**3**	**2**	**1**	**0**	**Points Earned**	**Comments**
Noticing	1.Identify all abnormal assessment findings (subjective and objective); include specific patient data.	**(lists at least 7*) *provides explanation if < 7**	**(lists 5-6)**	**(lists 5-7 but no specific patient data included)**	**(lists < 5 or gives no explanation)**	3	All requirements met. MD
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	**(lists at least 3*) *provides explanation if < 3**		**(lists 3 but no specific patient data included)**	**(lists < 3 or gives no explanation)**	3	
	3. Identify all risk factors relevant to the patient.	**(lists at least 5*) *provides explanation if < 5**	**(lists 4)**	**(lists 3)**	**(lists < 3 or gives no explanation)**	3	
Interpreting	4. List all nursing priorities and highlight the top priority problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	All requirements met. MD
	5. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	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 2)**		**(lists < 2)**	3	
Responding	8. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	All requirements met. MD
	9. Interventions are prioritized	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	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	
Refl	13. List all of the highlighted reassessment findings for the top nursing priority.	**>75% complete**	**50-75% complete**	**<50% complete**	**0% complete**	3	All requirements met. MD

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	14. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**	3	

Total Possible Points= 42 points 42-33 points = Satisfactory 32-21 points = Needs Improvement* < 21 points = Unsatisfactory* ***Total points adding up to less than or equal to 32 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.** **Faculty/Teaching Assistant Comments:**	**Total Points: 42/42 Satisfactory MD** **Faculty/Teaching Assistant Initials:** MD

Firelands Regional Medical Center School of Nursing
Medical Surgical Nursing 2023
Skills Lab Competency Tool

Student name:								
Skills Lab Competency Evaluation Performance Codes: **S**: Satisfactory **U**:Unsatisfactory	**Lab Skills**							
	Week 1	**Week 1**	**Week 1**	**Week 1**	**Week 1**	**Week 2**	**Week 2**	**Week 9**
	IV Math (3,7)*	**Assessment** (2,3,4,5,7)*	**Insulin** (2,3,5,7)*	**Lab Day** (1,2,3,4,5,6,7)*	**IV Skills** (2,3,5,7)*	**Trach** (1,2,3,4,5,6,7)*	**EBP** (3,7)*	**Lab Day** (1,2,3,4,5,6,7)*
	Date: 1/11 or 1/12/23	**Date:** 1/10/23	**Date:** 1/10/23	**Date:** 1/11 or 1/12/23	**Date:** 1/13/23	**Date:** 1/18 or 1/19/23	**Date:** 1/18 or 1/19/23	**Date:** 3/13 or 3/14/23
Evaluation:	**S**	**S**	**S**	**S**	**S**	**S**	**S**	
Faculty/Teaching Assistant Initials	RH	RH	RH	RH	RH	RH	RH	
Remediation: Date/Evaluation/Initials								

*Course Objectives

Comments:

(IV Math)-You satisfactorily participated in the IV Math learning session on 1/10/23 as well as the assigned IV Math practice questions and the IV Math Application lab on 1/11/23 or 1/12/23. KA/DW
(Assessment)- You were able to satisfactorily demonstrate the Basic Head to Toe Assessment during lab. KA/RH
(Insulin)- You were able to correctly prepare an insulin pen and administer subcutaneous insulin. Insulin requirements were accurately identified and calculated through the corrective scale and carbohydrate coverage orders. MD
(Lab Day)- You satisfactorily completed the mandatory lab review of nursing foundational skills. This was achieved through simulating care for a patient in a scenario requiring competency in assessment, communication, medication administration (including PO and IM injection), nasogastric tube insertion and maintenance, patient mobility and hygiene, use of PPE for Contact Isolation, wound care, and foley insertion. NS/LM
(IV Skills)- You have satisfactorily completed the IV lab including a saline flush, IV push, hanging a primary and secondary IV solution, adjusting a flow rate to run by gravity, discontinuing IV solution, and monitoring the IV site for infiltration, phlebitis, and signs of complication. NS/MD/RH
Week 2:

(EBP Lab)- You actively participated in the online searching process for evidence-based practice literature, as well as reviewing example articles to determine appropriate selection and information needed when summarizing a research article. LM/LK
(Trach Care & Suctioning 1/18/2023) - During this lab, you satisfactorily demonstrated competence with tracheal airway suctioning and tracheostomy care. You did an excellent job of explaining the procedure to your patient. You have a strong understanding of sterility and maintaining a sterile field. You were confident in the steps and therefore, both skills were performed efficiently. Keep up the good work! DW

Firelands Regional Medical Center School of Nursing
Medical Surgical Nursing 2023
Simulation Evaluations

Simulation Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Student Name:**							
	vSim- Vincent Brody (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	**vSim**- Juan Carlos (Pharmacology) (*1, 2, 3, 4, 5, 6)	**vSim**- Marilyn Hughes (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Simulation #1 (Musculoskeletal & Resp) (*1, 2, 3, 4, 5, 6, 7)	Simulation #2 (GI & Endocrine) (*1, 2, 3, 4, 5, 6, 7)	**vSim**- Stan Checketts (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	**vSim**- Harry Hadley (Pharmacology) (*1, 2, 3, 4, 5, 6)	**vSim**- Yoa Li (Pharmacology) (*1, 2, 3, 4, 5, 6)
	Date: 1/30/23	**Date: 2/13/23**	**Date: 2/24/23**	**Date: 3/1 or 3/2/23**	**Date: 4/12 or 4/13/23**	**Date: 4/17/23**	**Date: 4/27/23**	**Date: 5/1/23**
Evaluation	S	S	S					
Faculty/Teaching Assistant Initials	KA	RH	RH					
Remediation: Date/Evaluation/Initials	NA	NA	NA					

* Course Objectives

Comments:

EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2023

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 and Date:
-

`12/9/2022