EVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing- 2023
Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: | Caitlyn Silas | **Final Grade: Satisfactory/Unsatisfactory**

Semester: Summer Session   **Date of Completion:**

Faculty: Brian Seitz MSN, RN, Fran Brennan MSN, RN, Chandra Barnes MSN, RN,
Nick Simonovich MSN, RN, Brittany Lombardi MSN, RN, Kelly Ammanniti MSN, RN
Teaching Assistants: Rachel Haynes BSN, RN   **Faculty eSignature:**

DIRECTIONS FOR USE:
Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S), Needs Improvement (NI), Unsatisfactory (U), and Not Available (NA).** The faculty member will initial if in agreement with the student's evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written 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:

Clinical Patient Profile
Meditech Documentation
Evaluation of Clinical Performance Tool
Onsite Clinical Debriefing
Online Discussion Rubric
Nursing Process Recording Rubric
Geriatric Assessment Rubric
Lasater Clinical Judgment Rubric
Virtual Simulation scenarios
Participation in adjunctive therapies (N.A./A.A.; Erie County Detox Unit, Hospice inpatient care)
EBP Presentations
Hospice Reflection Journal
Observation of Clinical Performance
Clinical Nursing Therapy Group
Nursing Care Map Rubric

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)

Initials	Faculty Name
BS	Brian Seitz MSN, RN, CNE
FB	Frances Brennan, MSN, RN
KA	Kelly Ammanniti MSN, RN, CHSE
BL	Brittany Lombardi MSN, RN, CNE
NS	Nick Simonovich MSN, RN
CB	Chandra Barnes MSN, RN
RH	Rachel Haynes BSN, RN

* End-of-Program Student Learning Outcomes

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

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

UNSATISFACTORY CLINICAL PERFORMANCE

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

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

OTHER

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

* End-of-Program Student Learning Outcomes

Objective

	1. Apply the principles of psychiatric theory in the care of adolescent to geriatric patients with a mental illness diagnosis. (1, 2, 3, 5, 6, 7, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
Competencies: a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder. **(noticing)**		N/A	S	S	N/A	S	N/A			
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. **(interpreting)**		N/A	S	S	N/A	S	N/A			
c. Provide culturally and spiritually competent care within the scope of nursing that meets the needs of assigned patients from diverse cultural, racial and ethnic backgrounds. **(responding)**		N/A	S	S	N/A	S	N/A			
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care **(noticing)**		N/A	S	S	N/A	S	N/A			
e. Recognize social determinants of health and the relationship to mental health. **(reflecting)**		N/A	S	S	N/A	S	N/A			
f. Develop and implement an appropriate nursing therapy group activity. **(responding)**		N/A	N/A	N/A	N/A	S	N/A			
g. Develop a geriatric physical/mental health assessment and education plan. (**Geriatric Assessment**) **(responding)**					S					
Faculty Initials		BL	CB	RH	NS	NS				
Clinical Location		No Clinical	Detox Artisan's	Hospice	No Clinical/ GA	1 South	1 South			

* End-of-Program Student Learning Outcomes

Comments:

Week 3(1a,c,d): Excellent job attending and actively participating in your Sandusky Artisans clinical experience this week. You did a great job discussing the current trends in substance abuse, as well as the need for related mental health programs in your CDG. You also did a great job discussing barriers to cultural and spiritual competent care at the Erie County Health Department Detox Unit CDG. Keep up all the hard work! CB

Week 5 1(g) – Satisfactory completion of the geriatric health assessment and education plan. See attached grading rubric for more details. KA

Week 6 1(b,e) – Nice job discussing the prescribed medications aimed at treating your patient's mental health disorder. You were thorough in identifying the rationale and side effects of each medication. Good discussion on SDOH that have an impact on your patient's overall mental health and well-being. You noted how his financial constraints are increasing his stress levels. Additionally, you did well identifying how his living situation and instability negatively is impacting his mental health. Good thoughts! NS

* End-of-Program Student Learning Outcomes

Objective

2. Synthesize concepts related to psychopathology, health assessment data, evidenced based practice and the nursing process using clinical judgment skills to plan and care for patients with mental illness. (1, 2, 3, 4, 5, 6, 7, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
Competencies: a. Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. **(noticing)**		N/A	N/A	S	N/A	S	N/A			
b. Identify patient's subjective and objective findings including labs, diagnostic tests, and risk factors. **(noticing, recognizing)**		N/A	N/A	N/A	N/A	S	N/A			
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. **(noticing, interpreting)**		N/A	S	S	N/A	S	N/A			
d. Formulate a prioritized nursing care map utilizing clinical judgment skills. **(noticing, interpreting, responding, reflecting)**		N/A	N/A	N/A	N/A	N/A	N/A			
e. Apply the principles of asepsis and standard precautions. **(responding)**		N/A	N/A	S	N/A	S	N/A			
f. Practice use of standardized EBP tools that support safety and quality. **(noticing, responding)**		N/A	N/A	S	N/A	S	N/A			
Faculty Initials		BL	CB	RH	NS	NS				

Comments:

Week 6 2(a,c) – You were thorough in describing your patient's background history and how it played a role in his current admission. NS

* End-of-Program Student Learning Outcomes

Objective

3. Refine basic verbal and nonverbal therapeutic communication skills when interacting with patients, families, and members of the health care team. (1, 2, 3, 5, 7, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	**Final**
a. Illustrate professionally appropriate and therapeutic communication skills in interactions with patients, and families. **(responding)**		N/A	S	S	N/A	S	N/A			
b. Demonstrate professional and appropriate communication with the treatment team by using the SBAR format for handoff communication during transition of care. **(responding)**		N/A	N/A	S	N/A	S	N/A			
c. Identify barriers to effective communication. **(noticing, interpreting)**		N/A	S	S	N/A	S	N/A			
d. Construct effective therapeutic responses. **(responding)**		N/A	S	S	N/A	S	N/A			
e. Construct a satisfactory patient-nurse therapeutic communication. (**Nursing Process Study**) **(responding, reflecting)**					N/A					
f. Posts respectfully and appropriately in clinical discussion groups. **(responding, reflecting)**		N/A	S	S	N/A	S	N/A			
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. **(responding)**		N/A	S	S	N/A	S	N/A			
h. Teach patient/family based on readiness to learn and patient needs. **(responding, reflecting)**		N/A	N/A	S	N/A	S	N/A			
Faculty Initials		BL	CB	RH	NS	NS				

Comments:
Week 3(3f): Caitlyn, great job this week with your CDG for Sandusky Artisans and Erie County Health Department Detox Unit.   You provided intext citations and appropriate references. CB
Week 4: 3(f): great job with your reflection journal this week. Your experience with hospice seems to have changed your views on everything they can offer and you said you would definitely recommend this to your patients. That is amazing! RH

* End-of-Program Student Learning Outcomes

Week 6 3(a,c,d) – Very nice job this week with your communication and interactions with patients on the unit. On numerous occasions it was noticed that you were offering yourself for therapeutic communication, sat with patients, empathized with them, and made them feel safe and comfortable opening up to you. Nice work making connections and helping the patients during their difficult moments. One particular incidence stood out, as your patient on day 2 experienced a triggering event. You took her aside and spnt a considerable amount of time talking and listening to her. Nice job de-escalating the situation and helping calm her nerves. NS

Week 6 3(f) – Excellent work with your CDGs this week. You provided descriptive details and supported your thoughts with reputable resources. All criteria were met for a satisfactory evaluation based on the CDG grading rubric. Job well done! NS

* End-of-Program Student Learning Outcomes

Objective

4. Demonstrate knowledge of frequently prescribed medications utilized in treating mental illness. (1, 4, 5, 6, 7)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
a. Discuss the safe administration of medication while observing the six rights of medication administration. **(responding)**		N/A	N/A	S	N/A	S	N/A			
b. Demonstrate ability to discuss the uses and implication of psychotropic medications. **(responding, reflecting)**		N/A	N/A	S	N/A	S	N/A			
c. Identify the major classification of psychotropic medications. **(interpreting)**		N/A	N/A	S	N/A	S	N/A			
d. Identify common barriers to maintaining medication compliance. **(reflecting)**		N/A	N/A	S	N/A	S	N/A			
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications. **(responding, reflecting)**		N/A	N/A	S	N/A	S	N/A			
Faculty Initials		BL	CB	RH	NS	NS				

Comments:
Week 4: 4(a)- good job passing medications with your hospice nurse. RH

Week 6 4(b,c,e) – Nice job researching your patient's medications this week. You provided good details in your discussion of the medications. You understood the implications of each for your assigned patient, identified important side effects to monitor for, and discussed nursing implications and educational topics to discuss with your patient. NS

* End-of-Program Student Learning Outcomes

Objective

5. Develop an awareness of community Mental Health resources and services. (5, 6, 7, 8)*											

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
a. Identify the need for the community resources-detox unit available to patients with a mental illness. **(noticing, interpreting)**		N/A	N/A	N/A	N/A	S	N/A			
b. Discuss recommendations for referrals to appropriate community resources and agencies. **(reflecting)**		N/A	~~N/A~~ S	N/A	N/A	S	N/A			
c. Attend Erie County Health Department Detox Unit observing the care of a patient with mental illness-substance abuse. **(Community Agency Observation-Detox Unit)**		N/A	S	N/A	N/A	N/A	N/A			
d. Attend Narcotics/ Alcoholics Anonymous meeting. **(Alcoholics/Narcotics Anonymous at the Sandusky Artisans Recovery Center (Observation)**		N/A	S	N/A	N/A	N/A	N/A			
Faculty Initials		BL	CB	RH	NS	NS				

Comments:
Week 3(5b,c,d) You did a great job attending and actively participating in your Sandusky Artisans and Erie County Health Department Detox Unit clinical experience this week. Your CDGs were very well done and you did an excellent job discussing the current trends in substance abuse, as well as the need for related mental health programs. You accurately identified risk factors associated with substance abuse, and shared your thoughts and feelings about working with patients who are dealing with substance abuse.   You were able to explain the process of admission into the detox and ways the healthcare professionals assist patients with their sobriety. Great job! CB

* End-of-Program Student Learning Outcomes

Objective

6. Demonstrate satisfactory proficiency when using informatics and techniques in the assessment of patients with a mental illness diagnosis. (1, 2, 3, 4, 6, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
Competencies: a. Demonstrate competence in navigating the electronic health record. **(responding)**		N/A	N/A	N/A	N/A	S	N/A			
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record. **(responding)**		N/A	N/A	N/A	N/A	S	N/A			
c. Demonstrate the use of technology to identify mental health resources. **(responding)**		N/A	N/A	N/A	N/A	S	N/A			
Faculty Initials		BL	CB	RH	NS	NS				

Comments:

Week 6 6(a) – All documentation was completed accurately based on the nursing therapy group provided. NS

* End-of-Program Student Learning Outcomes

Objective

7. Evaluate self-participation in patient care experiences with the focus on safety, ethical, legal, and professional responsibilities. (7)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
a. Identify your strengths for care delivery of the patient with mental illness. **(reflecting)**		N/A	N/A	S	N/A	S	N/A			
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care. **(responding)**		N/A	N/A	S	N/A	S	N/A			
c. Illustrate active engagement in self-reflection and debriefing. **(reflecting)**		N/A	N/A	S	N/A	S	N/A			
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE" – attitude, commitment, and enthusiasm during all clinical interactions. **(responding)**		N/A	S	S	N/A	S	N/A			
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. **(responding)**		N/A	S	S	N/A	S	N/A			
f. Comply with the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care." **(responding)**		N/A	S	S	N/A	S	N/A			
Faculty Initials		BL	CB	RH	NS	NS				

Comments:
Week 4: 7(c)- You did great with your reflection journal this week. You were able to explain your experience and how it impacted your current and future nursing care. RH

Firelands Regional Medical Center School of Nursing
Nursing Care Map Rubric

Student Name:		Course
Date or Clinical Week:		Objective:

	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)**		
	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. 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)**		
Interpreting	4. List all nursing priorities and highlight the top priority problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	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**		
	6. Identify all potential complications for the top nursing priority problem.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**		
	7. Identify signs and symptoms to monitor for each complication.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**		
Responding	8. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	9. Interventions are prioritized	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	10. All interventions include a frequency	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	11. All interventions are individualized and realistic	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	12. An appropriate rationale is included for each intervention	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		

		>75% complete	50-75% complete	<50% complete	0% complete		
Reflecting	13. List all of the highlighted reassessment findings for the top nursing priority.	**>75% complete**	**50-75% complete**	**<50% complete**	**0% complete**		
	14. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**		

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:**
	Faculty/Teaching Assistant Initials:

Geriatric Assessment Rubric
2023

Student Name: _Caitlyn Silas_   Date: __6/26/2023____

Clinical Assessment Rubric

Mental/Physical Health Status Assessment

	Points Possible	Points Received
Physical Assessment	4	4
Geriatric Depression Scale (short form) Assessment	4	4
Short Portable mental status questionnaire	4	4
Geriatric Health Questionnaire	2	2
Time and change test	4	4
Cognitive Assessment (Clock Drawing)	4	4
Falls Risk Assessment (Get Up and Go)	4	4
Brief Pain inventory (Short form)	2	2
Nutrition Assessment (Determine Your Nutritional Health)	4	4
Instrumental ADL/ Index of Independence in ADL	4	4
Medication Assessment – If medications are on the BEERS List not identified on medication list.	4	3
Points	40	39

Education Assessment

	Points Possible	Points Received
Learning Needs Identified and Prioritized (3) – Not written in diagnosis format like example.	10	8
Priorities pertinent to learning needs (3)	5	5
Nursing interventions related to learning needs (5) – This section is written more as patient outcomes versus nursing interventions.	10	5
Points	25	18

Education Plan

	Points Possible	Points Received
Education Prioritization and Barriers to Education	5	5
Teaching Content and Methods used for Education	10	10
Evaluation of Education Plan	10	10
Education Resources attached	10	10
Points	35	35

Total Points _92/100_____

Caitlyn, you satisfactorily completed your Geriatric Assessment. Overall you did a great job completing all areas of the assessment. See comments above on areas for improvement. Keep up the nice work! KA

You must receive a total of 77 out of 100 points to receive a "S" grade on the Evaluation of Clinical Performance tool. Due date can be located on the clinical schedule.

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

vSim Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	Linda Waterfall (Anxiety/Cultural Scenario) (*1,2,3,4,5)	Sharon Cole (Bipolar Scenario) (*1,2,3,4,5)	Sandra Littlefield (Borderline Personality Disorder Scenario) (*1,2,3,4,5)	Live Adult Mental Health Simulation (Alcohol Withdrawal) (*1,2,3,4,5)	George Palo (Alzheimer's Disorder) (*1,2,3,4,5)	Randy Adams (PTSD Scenario) (*1,2,3,4,5)
	Date: 6/9/2023	**Date:** 6/23/2023	**Date:** 6/30/2023	**Date:** 7/5/2023	**Date:** 7/7/2023	**Date:** 7/21/2023
Evaluation	S	S	S	S		
Faculty Initials	BL	RH	NS	NS		
Remediation: **Date/Evaluation/Initials**	NA	N/A	NA	NA		

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: A=Assessment Nurse; M=Medication Nurse

STUDENT NAME(S): Briana Busby (A) Caitlyn Silas (M)
GROUP #: 2
SCENARIO: 2
OBSERVATION DATE/TIME(S): 7/5/2023 0920-1035

CLINICAL JUDGMENT	OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)* • Focused Observation: E A D B • Recognizing Deviations from	Introduced self and role when entering the room. Identified patient for safety. Initiated therapeutic relationship. Noticed anxiety. Focused observation on patient's anxiety. Sought further information

Expected Patterns: E **A** D B • Information Seeking: **E** A D B	on alcohol use. Explored stressors related to substance use. Noticed abnormal brief mental health evaluation. Noticed anxiety, noticed tremors, noticed diaphoresis, noticed hallucinations, noticed agitation, noticed confusion, etc. Focused observation on vital signs.
INTERPRETING: (2, 4)* • Prioritizing Data: **E** A D B • Making Sense of Data: E **A** D B	Prioritized assessment on patient's alcohol use. Prioritized brief mental health evaluation assessment. Prioritized CIWA assessment. Made sense of brief mental health evaluation being abnormal. Made sense of CIWA assessment with interpreted score of 18. Prioritized Ativan administration as substitution therapy. Made sense of correct dosage per protocol (4mg).
RESPONDING: (1, 2, 3, 5)* • 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	Completed the brief mental health evaluation in full. Good therapeutic communication with the patient. Identified support system. CIWA assessment completed in full. Good teamwork and collaboration with assessment nurse and med nurse to determine appropriate medication options. Encouraged group therapy attendance. Good education provided on Ativan rationale for the detox process. Good communication with the patient. Med safety performed. Verified appropriate dosage per protocol. Ensured complete swallowing of medications. Discussed importance of re-evaluating within one hour. Community resource education provided on NA/AA. Good education on non-pharmacological therapies for anxiety.
REFLECTING: (6)* • Evaluation/Self-Analysis: E **A** D B • Commitment to Improvement: E **A** D B	Each member of the group actively participated during debriefing. Appropriate questions were asked. Identified rationale behind decision making. Identified use of clinical judgment during the scenario. Each group member discussed strengths and weaknesses in their performance. Alternate choices were discussed for improvement in the future.
SUMMARY COMMENTS: * = Course Objectives	Lasater Clinical Judgement Rubric Comments:

Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.

E= Exemplary

A= Accomplished

D= Developing

B= Beginning

Objectives:

1. **Demonstrate effective therapeutic communication while interacting with patient admitted for an acute mental health crisis. (1, 2, 3)***

2. **Utilize the CIWA scale to assess a patient with a history of substance abuse. (1, 2)***

3. **Determine appropriate medication administration steps utilizing the CIWA scale. (4)***

4. **Provide patient with appropriate education on community support and resources. (5)***

* Course Objectives

Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family.

Interpreting: Focuses on the most relevant and important data useful for explaining the patient's condition. In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.

Responding: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families. Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.

Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered. Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses.

Satisfactory completion of Mental Health simulation scenario.

EVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing

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: