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

Student: Allison Martin

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)**		S	S	NA	S	NA	NA			
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. **(interpreting)**		S	S	NA	S	NA	NA			
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)**		S	S	NA	S	NA	NA			
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care **(noticing)**		S	S	NA	S	NA	NA			
e. Recognize social determinants of health and the relationship to mental health. **(reflecting)**		S	S	NA	S	NA	NA			
f. Develop and implement an appropriate nursing therapy group activity. **(responding)**		NA	NA	NA	S	NA	NA			
g. Develop a geriatric physical/mental health assessment and education plan. (**Geriatric Assessment**) **(responding)**					S					
Faculty Initials		RH	KA	KA	KA	BS	BL			
Clinical Location		DETOX 6/7/23 HOSPICE 6/8/23	ARTISANS 6/12/23	No Clinical	1 SOUTH 6/27-6/28	No Clinical	No Clinical			

* End-of-Program Student Learning Outcomes

Comments:

Week 3 – 1a & 1d – Allison, you did a great job discussing substance use disorder and how it relates to mental health and other physical and environmental aspects regarding the patient's health. You highlighted risk factors to considering related to substance use disorder. You explained the importance of community services such as the Sandusky Artisans Center and how the group can have a positive impact on the patient with addiction. KA

Week 5 – 1a – Allison, you thoroughly explained what schizoaffective disorder is and its causes. Your patient was having medication adjustments and group therapy to help treat and support her during this time of great stress. KA

Week 5 – 1e – Allison, you were able to discuss how your patient's lack of emotional support and lack of coping skills make it difficult to manage her mental health appropriately. Other social determinants of health that you discussed affecting your patient's overall mental health included her living situation. KA

Week 5 – 1f – Allison, you did a nice job developing a nursing therapy group for the inpatient psychiatric unit. The emotions in a jar activity was well received and allowed the patients to both reflect on their feeling and discuss them with the group. I know this wasn't your original idea but it turned out great! Wonderful job! KA

* 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)**		S	NA	NA	S	NA	NA			
b. Identify patient's subjective and objective findings including labs, diagnostic tests, and risk factors. **(noticing, recognizing)**		S	S	NA	S	NA	NA			
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. **(noticing, interpreting)**		S	S	NA	S	NA	NA			
d. Formulate a prioritized nursing care map utilizing clinical judgment skills. **(noticing, interpreting, responding, reflecting)**		NA	NA	NA	NA	NA	NA			
e. Apply the principles of asepsis and standard precautions. **(responding)**		S	NA	NA	S	NA	NA			
f. Practice use of standardized EBP tools that support safety and quality. **(noticing, responding)**		S	S	NA	S	NA	NA			
Faculty Initials		RH	KA	KA	KA	BS	BL			

Comments:

Week 5 – 2a & 2b – Allison, you thoroughly researched your patient and was able to connect your patient's medical and psychiatric history to her recent admission for schizoaffective disorder. KA
Week 5 – 2b – Allison, you discussed how your patient had minimal lab work but the importance of different lab work that should be drawn due to the medication she was currently taking, Great job! KA
Week 5 – 2f – Allison you discussed routine patient safety checks, specially designed bathroom doors, routine room checks, and the enclosed area in the special care unit and how they work together to develop a culture of safety on the psychiatric unit. KA

* 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)**		S	S	NA	S	NA	NA			
b. Demonstrate professional and appropriate communication with the treatment team by using the SBAR format for handoff communication during transition of care. **(responding)**		~~NA~~ S	NA	NA	S	NA	NA			
c. Identify barriers to effective communication. **(noticing, interpreting)**		S	S	NA	S	NA	NA			
d. Construct effective therapeutic responses. **(responding)**		S	S	NA	S	NA	NA			
e. Construct a satisfactory patient-nurse therapeutic communication. (**Nursing Process Study**) **(responding, reflecting)**					NA					
f. Posts respectfully and appropriately in clinical discussion groups. **(responding, reflecting)**		S	S	NA	S	NA	NA			
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. **(responding)**		S	S	NA	S	NA	NA			
h. Teach patient/family based on readiness to learn and patient needs. **(responding, reflecting)**		S	NA	NA	S	NA	NA			
Faculty Initials		RH	KA	KA	KA	BS	BL			

Comments:

Week 2: 3(b)-during your hospice clinical, you were able to communicate using SBAR during report as well as if the healthcare provider needed to be called. RH

* End-of-Program Student Learning Outcomes

Week 3 – 3f – Allison, you did a nice job responding to all the CDG questions related to your clinical experience at the Sandusky Artisans this past week. You were thoughtful with your responses and supported your information with a reputable reference and in-text citation. Keep up the great work! KA

Week 5 – 3f – Allison, you responded to all CDG questions for your 1 South clinical thoroughly and thoughtfully. You were able to discuss some excellent points on your patient's medical history and medication history. You included two appropriate resources and an in-text cited for both. Keep up the terrific work! KA

* 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)**		S	NA	NA	S	NA	NA			
b. Demonstrate ability to discuss the uses and implication of psychotropic medications. **(responding, reflecting)**		NA	NA	NA	S	NA	NA			
c. Identify the major classification of psychotropic medications. **(interpreting)**		NA	NA	NA	S	NA	NA			
d. Identify common barriers to maintaining medication compliance. **(reflecting)**		S	NA	NA	S	NA	NA			
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications. **(responding, reflecting)**		NA	NA	NA	S	NA	NA			
Faculty Initials		RH	KA	KA	KA	BS	BL			

Comments:

Week 5 – 2 – 4a, 4b, & 4e – Allison, you researched your patient's medications and were able to discuss the side effects and nursing considerations for each one. It is amazing the number of medications your patient was on that had a psychiatric side effect. You completed medication administration on the patient efficiently and accurately observing the rights of medication administration. You thoroughly researched your medications and were well versed on each one before you administered them. KA

* 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)**		S	S	NA	S	NA	NA			
b. Discuss recommendations for referrals to appropriate community resources and agencies. **(reflecting)**		S	~~NA~~ S	NA	S	NA	NA			
c. Attend Erie County Health Department Detox Unit observing the care of a patient with mental illness-substance abuse. **(Community Agency Observation-Detox Unit)**		S	NA	NA	NA	NA	NA			
d. Attend Narcotics/ Alcoholics Anonymous meeting. **(Alcoholics/Narcotics Anonymous at the Sandusky Artisans Recovery Center (Observation)**		NA	S	NA	NA	NA	NA			
Faculty Initials		RH	KA	KA	KA	BS	BL			

Comments:

Week 2: 5(a, c)- You attended the detox clinical on 6/7/2023 and turned in all necessary paperwork. You also completed the clinical discussion group for this experience. RH

Week 3 – 5a, 5b, & 5d – Allison, you did a great job discussing the importance of community resources like the Sandusky Artisans and how they help individuals with addiction find support through recovery. KA

* End-of-Program Student Learning Outcomes

* 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)**		NA	NA	NA	S	NA	NA			
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record. **(responding)**		NA	NA	NA	S	NA	NA			
c. Demonstrate the use of technology to identify mental health resources. **(responding)**		S	S	NA	S	NA	NA			
Faculty Initials		RH	KA	KA	KA	BS	BL			

Comments:

* 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)**		~~NA~~ S	NA	NA	S	NA	NA			
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care. **(responding)**		S	S	NA	S	NA	NA			
c. Illustrate active engagement in self-reflection and debriefing. **(reflecting)**		~~NA~~ S	S	NA	S	NA	NA			
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE" – attitude, commitment, and enthusiasm during all clinical interactions. **(responding)**		S	S	NA	S	NA	NA			
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. **(responding)**		S	S	NA	S	NA	NA			
f. Comply with the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care." **(responding)**		S	S	NA	S	NA	NA			
Faculty Initials		RH	KA	KA	KA	BS	BL			

Comments:

Week 2: 7(a)- I changed this to "S" due to the fact that you should have interacted with a patient at the detox center. What is one strength you feel you had from this interaction? What is something you can improve upon? RH
Week 2: 7(c)- You had engagement with self-reflection in your CDG post when evaluating your feelings, attitudes, and responses to patients in this setting. RH

Firelands Regional Medical Center School of Nursing
Nursing Care Map Rubric

Student Name:	**Course Objective:**
Date or Clinical Week:	

	Criteria	**3**	**2**	**1**	**0**	**Points Earned**	**Comments**
Noticing	1.Identify all abnormal assessment findings (subjective and objective); 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**		
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: _Allison Martin_ 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	4	4
Points	40	40

Education Assessment

	Points Possible	Points Received
Learning Needs Identified and Prioritized (3)	10	10
Priorities pertinent to learning needs (3)	5	5
Nursing interventions related to learning needs (5)	10	10
Points	25	25

Education Plan

	Points Possible	Points Received
Education Prioritization and Barriers to Education	5	5
Teaching Content and Methods used for Education	10	5

Evaluation of Education Plan	10	10
Education Resources attached	10	10
Points	35	35

Total Points _95/100_____

Great work on your Geriatric Assessment, Allison! Missed 5 points for not having education topics for your identified learning needs. BS

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.

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME(S): A. Martin (M), E. McCloy (A)
GROUP #: 5-2
SCENARIO: Alcohol/Substance Abuse Scenario
OBSERVATION DATE/TIME(S): 7/6/2023 0800-0915

CLINICAL JUDGMENT	OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)* • Focused Observation: E **A** D B • Recognizing Deviations from Expected Patterns: E **A** D B • Information Seeking: E **A** D B	Introduced self/role and identifies patient upon entering the room. Focused observation on vital signs. Noticed bruises and abrasions. Noticed tremors. Noticed increased anxiety. Noticed BP 142/92. HR 105. Noticed nervousness. Noticed visual hallucinations. Noticed agitation. Recognized CIWA score of 14 as elevated from previous score. Recognized brief mental status evaluation is different than before.
INTERPRETING: (2, 4)* • Prioritizing Data: E **A** D B • Making Sense of Data: E **A** D B	Prioritized obtaining VS, HR and BP interpreted as abnormal. Prioritized need to obtain CIWA score with result of 14. Recognized need for medication (Ativan). Prioritized the need to perform brief mental health evaluation.
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	CIWA assessment performed. Patient complaining of seeing things that are not there, requests a drink. Ativan prepared, patient educated on medication and why it is given. Medication administered- 4mg) Brief mental statue evaluation performed. Therapeutic communication
REFLECTING: (6)* • Evaluation/Self-Analysis: E **A** D B • Commitment to Improvement: E **A** D B	Group members actively participated during debriefing. Appropriate questions were asked. Each group member discussed what they felt were strengths and weaknesses in their performance. Alternate choices were discussed for improvement in the future. Each member verbalized something they would do differently if they were to do the scenario again.

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** **You are satisfactory for this scenario. Nice work! BS**	Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes subtle patterns and deviations from expected patterns in data and uses these to guide the assessment. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family. Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. 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: Is tentative in the leader role; reassures patients and families in routine and relatively simple situations, but becomes stressed and disorganized easily. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. 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

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: 7/5-6/2023**	**Date: 7/7/2023**	**Date: 7/21/2023**
Evaluation	S	S	S	S	S	
Faculty Initials	RH	KA	KA	BS	BS	
Remediation: Date/Evaluation/Initials	N/A	NA	NA	NA	NA	

* Course Objectives

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: