

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

**Student:** Lyndsey Sitterly

**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		
<b>BS</b>	<b>Brian Seitz MSN, RN, CNE</b>		
<b>FB</b>	<b>Frances Brennan, MSN, RN</b>		
<b>KA</b>	<b>Kelly Ammanniti MSN, RN, CHSE</b>		
<b>BL</b>	<b>Brittany Lombardi MSN, RN, CNE</b>		
<b>NS</b>	<b>Nick Simonovich MSN, RN</b>		
<b>CB</b>	<b>Chandra Barnes MSN, RN</b>		
<b>RH</b>	<b>Rachel Haynes BSN, RN</b>		

\* 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.

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
<b>Competencies:</b>		N/A	N/A	N/A S	S	N/A	N/A			
a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder. <b>(noticing)</b>		N/A	N/A	N/A	S	N/A	N/A			
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. <b>(interpreting)</b>		N/A	N/A	N/A	S	N/A	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. <b>(responding)</b>		N/A	S	S	S	N/A	N/A			
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care <b>(noticing)</b>		N/A	N/A	S	S	N/A	N/A			
e. Recognize social determinants of health and the relationship to mental health. <b>(reflecting)</b>		N/A	N/A	S	S	N/A	N/A			
f. Develop and implement an appropriate nursing therapy group activity. <b>(responding)</b>		N/A	N/A	N/A	S	N/A	N/A			
g. Develop a geriatric physical/mental health assessment and education plan. <b>(Geriatric Assessment) (responding)</b>					S					
Faculty Initials		RH	CB	KA	RH	BS	BL			
Clinical Location		NO CLI NI CAL	Hospice (Sandusky Artisans cancelled)	Erie County Detox Unit, Sandusky Artisans	1 South	NO CLI NI CAL	NO CLI NI CAL			

\* End-of-Program Student Learning Outcomes

**Comments:**

Week 3(1c): Great job providing culturally and spiritually competent care during your hospice clinical experience. CB

Week 4 – 1a & 1d – Lyndsey, 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 explained the importance of community services such as the Sandusky Artisans Center as well as other types of group therapy that would be beneficial for patients with substance use disorder. KA

Week 4 – 1c – Lyndsey, you did a nice job discussing spiritual and cultural care related to the detox center and how resources may not be easily visible or available to these individuals. KA

Week 5: 1(a)- you did a great job discussing pathophysiology of your patient's diagnosis this week. RH

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

**Comments:**

Week 4 – 2c – Lyndsey, you were able to discuss and identify ways individuals that utilize the detox center can help achieve self-care related to their addiction. KA  
 Week 5: 2(a, b)- you did a good job gathering a health history on your patient as well as looking at your patient’s lab findings and diagnostic testing that is related to your patient’s 1 south admission. RH.

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

**Comments:**

Week 3(3f): Lyndsey, you did an excellent job with your Hospice Reflection Journal. I'm glad you learned a lot during this experience and enjoyed your time spent there. Thank you so much for sharing your thoughts and feelings about the experience. CB

\* End-of-Program Student Learning Outcomes

Week 4 – 3f – Lyndsey, you responded to all CDG questions related to the detox center and the Sandusky Artisans with thorough and well thought out responses. You supported your information with references and in-text citations. Remember when in-text citing a direct quotation to include a page number or a paragraph number if there are no page numbers in the in-text citation. Also, for APA it should be titled “References” versus “Works Cited”. Keep up the nice work! KA

Week 5: 3(f)- Good job with your CDG this week. You answered all questions thoroughly and had good discussion related to your patient. RH.

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

### Comments:

Week 5: 4(a, b, c, e)- you did a great job with medication administration this week. You had quite the list of medications to look up this week. You did a great job looking them up and discussing them with me as well as the patient. You took your time and needed little to no assistance. Keep up the good work! RH

\* 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. <b>(noticing, interpreting)</b>		N/A	N/A	S	S	N/A	N/A			
b. Discuss recommendations for referrals to appropriate community resources and agencies. <b>(reflecting)</b>		N/A	N/A	S	S	N/A	N/A			
c. Attend Erie County Health Department Detox Unit observing the care of a patient with mental illness-substance abuse. <b>(Community Agency Observation-Detox Unit)</b>		N/A	N/A	S	N/A	N/A	N/A			
d. Attend Narcotics/Alcoholics Anonymous meeting. <b>(Alcoholics/Narcotics Anonymous at the Sandusky Artisans Recovery Center (Observation))</b>		N/A	N/A (leaders of meeting had conference in Mount Vernon, rescheduled)	S	N/A	N/A	N/A			
Faculty Initials		RH	CB	KA	RH	BS	BL			

**Comments:**

Week 4 – 5a & 5c – Lyndsey, you discussed many aspects about the detox center including the admission process and the different roles of healthcare personnel at the facility. You were insightful when discussing the benefits of this resource to our community. KA

Week 4 – 5b & 5d – Lyndsey, 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

## 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
<b>Competencies:</b>		N/A	N/A	N/A	S	N/A	N/A			
a. Demonstrate competence in navigating the electronic health record. <b>(responding)</b>		N/A	N/A	N/A	S	N/A	N/A			
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record. <b>(responding)</b>		N/A	N/A	N/A	S	N/A	N/A			
c. Demonstrate the use of technology to identify mental health resources. <b>(responding)</b>		N/A	N/A	N/A	S	N/A	N/A			
Faculty Initials		RH	CB	KA	RH	BS	BL			

### Comments:

Week 5: 6(a, b, c)- You used the EHR to gather background information on your patient as well as used the EMAR to administer medications. You did so with little to no assistance. Great job! RH

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

**Comments:**

Week 3(7c,e) Excellent job this week during your hospice clinical experience. You did a great job completing your reflection journal. Comments from the RN you were assigned to in Hospice: Excellent and Satisfactory in all areas. Keep up all your great work! CB

Week 4 – 7a & 7c – Lyndsey, you did a nice job reflecting on your experience at the detox center and were able to openly discuss your feelings about mental health and the benefits of community resources for individuals with substance use disorder and other mental health conditions. Great job! KA

Week 5: 7(c)- You were an active participant in debriefing and reflected on your experience on the unit over the two days. You were also able to identify somethings to change or improve upon during your next clinical day. 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	
<b>Noticing</b>	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)		
<b>Interpreting</b>	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)		
<b>Respo</b>	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		

<b>n i d</b>	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		
<b>Reflecting</b>	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: <ul style="list-style-type: none"> <li>• Continue plan of care</li> <li>• Modify plan of care</li> <li>• Terminate plan of care</li> </ul>	Complete			Not complete		
<p>Total Possible Points= 42 points  42-33 points = Satisfactory  32-21 points = Needs Improvement*  &lt; 21 points = Unsatisfactory*  <b>*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.</b></p> <p><b>Faculty/Teaching Assistant Comments:</b></p>						<p><b>Total Points:</b></p>	
						<p><b>Faculty/Teaching Assistant Initials:</b></p>	

Geriatric Assessment Rubric  
2023

Student Name: \_Lynsey Sitterly\_

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 – I assumed the little stars/x's by the meds were identifying those on the BEERS List. In the future it would be better to make them easier to identify.	4	4
Points	40	40

**Education Assessment**

	Points Possible	Points Received
Learning Needs Identified and Prioritized (3) – Not written in diagnosis format like example with related to section.	10	8
Priorities pertinent to learning needs (3)	5	5
Nursing interventions related to learning needs (5)	10	10
Points	25	23

## 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 98/100

Lyndsey, you satisfactorily completed your Geriatric Assessment. Overall you did a wonderful job completing all areas of the assessment. See comments above on areas for improvement. You should be proud of the education you provided your patient! 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.

## Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME(S): O. Arthur (M/), L. Sitterly (A), P. Stacy (A)

GROUP #: 6

SCENARIO: Alcohol/Substance Abuse Scenario

OBSERVATION DATE/TIME(S): 7/6/2023 0920-1035

CLINICAL JUDGMENT	OBSERVATION NOTES
<p><b>COMPONENTS NOTICING: (1, 2, 5)*</b></p> <ul style="list-style-type: none"> <li>• Focused Observation: E <b>A</b> D B</li> <li>• Recognizing Deviations from Expected Patterns: E <b>A</b> D B</li> <li>• Information Seeking: E <b>A</b> D B</li> </ul>	<p>Introduced self and identifies patient when entering the room. Focused observation on vital signs. Sought information on normal BP range. Noticed elevated BP of 152/78.</p> <p>Recognized the need to perform CIWA (1) scale and brief mental status evaluation.</p> <p>Recognized the need to perform CAGE questionnaire.</p> <p>Did not notice/address bruises.</p> <p>Introduced self/role and identifies patient upon entering the room. Focused observation on vital signs.</p>

	<p>BP- 158/82. Patient CO seeing spiders. Asks questions to determine orientation. Identifies need for brief mental status evaluation. Notices agitation and patient CO itching. Bruises not questioned.</p> <p>Patient requests beer.</p> <p>Recognized need for CIWA score</p>
<p><b>INTERPRETING: (2, 4)*</b></p> <ul style="list-style-type: none"> <li>• Prioritizing Data: E A <b>D</b> B</li> <li>• Making Sense of Data: E <b>A</b> D B</li> </ul>	<p>Prioritizes the need for CIWA assessment. Score- 1.</p> <p>Prioritizes need for brief mental status evaluation.</p> <p>Prioritized the need for brief mental health evaluation.</p> <p>Did not interpret bruises as a priority</p> <p>Realizes patient is hallucinating.</p> <p>Prioritized need for brief mental status evaluation. CIWA score interpreted to be 22.</p>
<p><b>RESPONDING: (1, 2, 3, 5)*</b></p> <ul style="list-style-type: none"> <li>• Calm, Confident Manner: E <b>A</b> D B</li> <li>• Clear Communication: E <b>A</b> D B</li> <li>• Well-Planned Intervention/ Flexibility: E <b>A</b> D B</li> <li>• Being Skillful: E <b>A</b> D B</li> </ul>	<p>Asks patient about alcohol history.</p> <p>Performs CIWA assessment appropriately. Performs brief mental status evaluation. Correctly identifies CIWA score of 1.</p> <p>Performs CAGE questionnaire.</p> <p>Medications prepared, explained to patient, education provided about amitriptyline and metoprolol. Medications administered.</p> <p>Did not address loss of friend.</p> <p>Brief mental status started. Instructs patient that alcohol is not available.</p> <p>In response to CIWA score of 22, medication prepared, patient identifies, and medication administered. Explained to patient that it won't take effect immediately.</p> <p>Explained to patient about alcohol tolerance.</p>
<p><b>REFLECTING: (6)*</b></p> <ul style="list-style-type: none"> <li>• Evaluation/Self-Analysis: E <b>A</b> D B</li> <li>• Commitment to Improvement: <b>E</b> A D B</li> </ul>	<p>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.</p> <p>Discussed the importance of addressing education/resources, bruising, and loss of friend.</p>

**SUMMARY COMMENTS: \* = Course Objectives**

**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**

**Lasater Clinical Judgement Rubric Comments:**

**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:** Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful 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:** Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. 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 commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses

/e360/apps/v9/releases/1685066305/public/upload/firelands/media/dropbox/118859-l.sitterly-week7clinicaltool.docx

## Simulation Evaluations

<b><u>vSim Evaluation</u></b>  Performance Codes:  <b>S:</b> Satisfactory  <b>U:</b> 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)
	<b>Date:</b> 6/9/2023	<b>Date:</b> 6/23/2023	<b>Date:</b> 6/30/2023	<b>Date:</b> 7/5-6/2023	<b>Date:</b> 7/7/2023	<b>Date:</b> 7/21/2023
Evaluation	S	S	S	S	S	
Faculty Initials	RH	KA	RH	BS	BS	
Remediation: Date/Evaluation/Initials	N/A	NA	N/A	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: