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

**Student:** | Tabitha Thom |

**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) |
|---|---|---|---|
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| 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.

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\* 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:**<br>a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder. **(noticing)** |  | NA | S | S | S | NA | S |  |  |  |
| b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. **(interpreting)** |  | NA | S | S | NA | 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)** |  | NA | S | S | ~~NA~~ <span style="color:red">S</span> | NA | S |  |  |  |
| d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care **(noticing)** |  | NA | S | S | S | NA | ~~NA~~ <span style="color:red">S</span> |  |  |  |
| e. Recognize social determinants of health and the relationship to mental health. **(reflecting)** |  | NA | S | S | ~~NA~~ <span style="color:red">S</span> | NA | S |  |  |  |
| f. Develop and implement an appropriate nursing therapy group activity. **(responding)** |  | NA | ~~S~~ <span style="color:red">NA</span> | S | NA | NA | NA |  |  |  |
| g. Develop a geriatric physical/mental health assessment and education plan. (**Geriatric Assessment**) **(responding)** |  |  |  |  | NA |  |  |  |  |  |
| Faculty Initials |  | <span style="color:red">BL</span> | <span style="color:red">RH</span> | <span style="color:red">BS</span> | <span style="color:red">NS</span> | <span style="color:red">CB</span> | <span style="color:red">BL</span> |  |  |  |
| Clinical Location |  | No Clinical | 1 South | 1 South | Erie County Detox/ <span style="color:red">NPS</span> | No Clinical | Sandusky Artisans & Hospice |  |  |  |

* End-of-Program Student Learning Outcomes

**Comments:**

Week 3: 1(a)- great job discussing the pathophysiology of your patient's diagnosis and the contributing factors. You also did great with identifying social determinates of health related to you patient. I changed 1(f) to NA because you did not do your therapy group activity this week. RH

Week 4- 1e,f- Nice job including social determinants of health with your nursing care map and identifying a community resource that your patient could benefit from. Nice job also developing and implementing an appropriate nursing therapy group activity. BS

Week 5 1(c,e) – You were able to discuss the implications of culture and spirituality in your detox CDG this week. You also made a great point related to SDOH and how insurance plays a large role in the services received through the Detox center. NS

Week 7-1(a,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. 1(c) Great job providing culturally and spiritually competent care during your hospice clinical experience. BL

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

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

| Faculty Initials | | BL | RH | BS | NS | CB | BL | | | |
|---|---|---|---|---|---|---|---|---|---|---|

**Comments:**

Week 3: 2(a, b) Great job giving a medical and psychiatric history of your patient, including previous admissions to 1 south with their reasonings/admitting diagnosis. RH

Week 4- 2a,b,c,d- Great job correlating your assessment data with your patient's medical and psychiatric history and identifying the priority problem and potential complications. Nursing interventions were provided and prioritized with rationales included. You also did a nice job evaluating the plan of care and identified social determinants of health that affect the patient. Nice work! BS

\* 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)** | | NA | S | S | S | NA | S | | | |
| 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 | S | NA | NA | NA | | | |
| c. Identify barriers to effective communication. **(noticing, interpreting)** | | NA | S | S | S | NA | S | | | |
| d. Construct effective therapeutic responses. **(responding)** | | NA | S | S | S | NA | S | | | |
| e. Construct a satisfactory patient-nurse therapeutic communication. (**Nursing Process Study)** **(responding, reflecting)** | | | | | S | | | | | |
| f. Posts respectfully and appropriately in clinical discussion groups. **(responding, reflecting)** | | NA | S | S | S | NA | S | | | |
| g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. **(responding)** | | NA | S | S | S | NA | S | | | |
| h. Teach patient/family based on readiness to learn and patient needs. **(responding, reflecting)** | | NA | S | S | NA | NA | NA | | | |
| Faculty Initials | | BL | RH | BS | NS | CB | BL | | | |

**Comments:**
Week 3: 3(c)- Great job discussing  important factors that relate to the culture of safety on the unit. RH

Week 4- 3a,b,c,d- Nice job discussing your patient's group participation and the group dynamics. Nice job also describing the ways in which participation in the groups is intended to benefit the patients. You also did a nice job discussing the therapeutic communication techniques you use when interacting with your patient. BS

\* End-of-Program Student Learning Outcomes

Week 5 3(e) – Good work with your nursing process recording assignment related to therapeutic communication. 85/100 points were received for a satisfactory evaluation. See comments provided throughout the document and on the attached grading rubric for more details. RH

Week 5 3(f) – Very nice work with your CDG this week related to your Detox experience. See the private feedback comments sent through Edvance for more details. All criteria were met for a satisfactory evaluation per the CDG grading rubric. NS

Week 7-3(f) Tabitha, 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. Satisfactory completion of your Sandusky Artisans CDG this week also. Keep up all the great work! BL

* End-of-Program Student Learning Outcomes

## Objective

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

**Comments:**

Week 3: 4(a, b, e,)- Good job with medication administration this week. You observed all six rights as well as educated your patient on the medicaitons they were receiving. You were able to discuss what each medication was for as well as side effects to monitor for. RH

Week 4- 4a,b,c,e- Nice job administering medications this week in the psychiatric department. Medication classifications were determined, uses and implications were discussed, as were side-effects, appropriate nursing interventions, and important safety implications related to the use of psychotropic medications. BS

Week 7-4(a-e) Excellent job administering medications with the RN during your hospice clinical. BL

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

**Comments:**

Week 5  5(a-c) – Good thoughts provided in your CDG this week related to  the importance of identifying community resources and providing education on them for client's in the Detox unit. Appropriate recommendations were discussed with an emphasis on the importance of providing them to a vulnerable population. NS
Week 7-5(b,d) You did a great job attending and actively participating in your Sandusky Artisans clinical experience this week. Your CDG was 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. Keep up all your hard work! BL

* 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:** <br> a. Demonstrate competence in navigating the electronic health record. **(responding)** | | NA | S | S | NA | NA | NA | | | |
| b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record. **(responding)** | | NA | S | S | NA | NA | NA | | | |
| c. Demonstrate the use of technology to identify mental health resources. (**responding**) | | NA | S | S | NA | NA | S | | | |
| Faculty Initials | | BL | RH | BS | NS | CB | BL | | | |

**Comments:**

Week 3: 6(a, b, c)- You did well nagivating the EHR for information regarding your patient as well as using the EMAR for medication administration. RH

Week 4- 6c- You were able to utilize technology to identify an important community resource that could benefit your patient manage her mental health issues. BS

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

**Comments:**
Week 3: 7(b)- great job discussing safety and the culture of safety on the unit. RH
Week 4- 7d- Professional behavior observed at all times while on the clinical floor. BS
Week 7-7(c,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 in all areas. BL

## Firelands Regional Medical Center School of Nursing
## Nursing Care Map Rubric

| **Student Name:** Tabitha Thom | **Course Objective:** | Synthesize concepts related to psycho-pathology, health assessment data, evidence |
|---|---|---|
| **Date or Clinical Week:** 4 | | based practice, and the nursing process using clinical judgment skills to plan and care for patients with mental illness. |

| | 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 | Nice work identifying all subjective and objective abnormal assessment findings, lab values and diagnostics, and relevant risk factors. |
| | 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 | Nice job identifying nursing priorities and correlating it to assessment data. Nice job also of identifying potential complications. Signs/symptoms for complications not provided. |
| | 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)** | 0 | |
| **Responding** | 8. List all nursing interventions relevant to the top nursing priority. | **> 75% complete** | **50-75% complete** | **< 50% complete** | **0% complete** | 3 | Excellent job providing a prioritized list of nursing interventions with rationales! |
| | 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 | Good, complete evaluation. |
| | 14. Evaluation includes one of the following statements:<br>• Continue plan of care<br>• Modify plan of care<br>• Terminate plan of care | **Complete** | | | **Not complete** | 3 | |

| | |
|---|---|
| Total Possible Points= 42 points<br>42-33 points = Satisfactory<br>32-21 points = Needs Improvement*<br>< 21 points = Unsatisfactory*<br>**\*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.**<br><br>**Faculty/Teaching Assistant Comments:** | **Total Points: 39/42**<br>Satisfactory. BS |
| | **Faculty/Teaching Assistant Initials:**<br>Nice work Tabitha! BS |

| Criteria | Ratings | | | | Points Earned |
|---|---|---|---|---|---|
| Criterion #1<br>Process Recording is organized and neatly completed | 5 Points<br>Typed process recording with spelling and grammar correct. | 3 Points<br>Typed process recording with 5 or less spelling and grammar mistakes. | 1 Points<br>Typed process recording with 5 or more spelling and grammar mistakes. | 0 Points<br>Process recording is not typed with 10 or more spelling and grammar mistakes. | 5 |
| Criterion #2<br>Assessment | 7 Points<br>Identifies pertinent patient background, current medical and psychiatric history. Provides a self-assessment of thoughts and feelings prior and during therapeutic communication interaction with patient. Identifies the milieu and effects on patient. | 5 Points<br>Identifies areas of assessment but incomplete data provided in 2 of the 4 areas. Provides a self-assessment of thoughts and feelings prior and during therapeutic communication interaction with patient. Identifies the milieu and effects on patient. | 3 Point<br>Identifies areas of assessment but incomplete data provided in 3 of the 4 areas. Provides a self-assessment of thoughts and feelings prior and during therapeutic communication interaction with patient. Identifies the milieu and effects on patient. | 0 Points<br>Missing data in all 4 areas of assessment. | 7 |
| Criterion #3 Mental Health Nursing Diagnosis (priority problem) | 8 Points<br>Identifies priority mental health problem (not a medical diagnosis) providing at least 5 potential complications. | 5 Points<br>Identifies Priority mental health problem provides at least 4 potential complications. | 3 Point<br>Identifies priority mental health problem provides at least 3 potential complications. | 0 Points<br>Does not provide priority mental health problem and/or less than 3 potential complications. | 8 |
| Criterion #4<br>Nursing Interventions | 10 Points<br>Identifies all pertinent nursing interventions (at least 5) in priority order including a rationale and timeframe. Interventions must be individualized and realistic. Identifies a therapeutic communication goal | 6 Points<br>Identifies 4 or less nursing interventions in priority order including a rationale and time frame. Interventions are not individualized and/or realistic. Identifies a therapeutic communication goal. | 4 Point<br>Identifies 4 or less nursing interventions but not prioritized and/or no rationale or time frame provided. Interventions are not individualized and /or realistic. Identifies a therapeutic communication goal. | 0 Points<br>Identifies less than 4 interventions, not prioritized, individual, realistic, no rationale, no time frame. No therapeutic communication goal. | 10 |
| Criterion #5<br>Process Recording | 15 Points<br>Provides direct quotes for all interchanges. Nonverbal and Verbal behavior is described for all interactions. Students thoughts and feelings concerning each interaction is provided. | 10 Points<br>Direct quotes are not provided. Nonverbal and Verbal behavior is described for at least 7 interactions. Student thoughts and feelings concerning at least 5 interactions are provided. | 5 Point<br>Direct quotes are not provided. Nonverbal and Verbal behavior is described for at least 5 interactions. Student thoughts and feelings concerning at least 5 interactions are provided. | 0 Points<br>Direct quotes are not provided. Nonverbal and Verbal behavior is not described for less than half of the interactions. Student thoughts and feelings for less than half of the interactions provided. | 15 |

| Criterion | | | | | Score |
|---|---|---|---|---|---|
| Criterion #6 Process Recording | **20 Points** Analysis of each interaction providing type of communication (therapeutic or nontherapeutic) and technique (exploring, focusing, reflecting, formulating a plan of action, etc.) and example from interactions. | **15 Points** Analysis of each interaction providing type of communication (therapeutic or nontherapeutic), and technique (exploring, focusing, reflecting, formulating a plan of action, etc.) and no example from interactions provided. | **10 Point** Analysis of each interaction providing type of communication (therapeutic or nontherapeutic), no technique (exploring, focusing, reflecting, formulating a plan of action, etc.) and/or no example from interactions provided. | **0 Points** Analysis not provided for each interaction | **20** |
| Criterion #7 Process Recording | **10 Points** Communication has a natural beginning and ending; the conversation flows from sentence to sentence and has a logical conclusion. There are at least 10 interchanges between patient and student. | **6 Points** Communication has a natural beginning and ending; the conversation flows from sentence to sentence and has a logical conclusion. There are at least 7 interchanges between patient and student. | **4 Points** Communication has a natural beginning and ending; the conversation flows from sentence to sentence and has a logical conclusion. There are at least 5 interchanges between patient and student. | **0 Points** There was less than 5 interchanges between patient and student provided. | **10** |
| Criterion #8 Evaluation | **15 Points** Self-evaluation of communication with patient. Identify at least 3 strengths and 3 weaknesses of therapeutic communication. | **10 Points** Self-evaluation of communication with patient. Identified 2 strengths and 2 weaknesses of therapeutic communication. | **5 Point** Self-evaluation of communication with patient. Identified 1 strength and 1 weakness of therapeutic communication. | **0 Points** No self-evaluation was provided. | **0** |
| Criterion #9 Evaluation | **10 Points** Identify at least 3 barriers to communication including interventions or communication that could have been done differently. Identify all pertinent social determinants of health. | **6 Points** Identify at least 2 barriers to communication including interventions or communication that could have been done differently. Identify all pertinent social determinants of health. | **4 Point** Identify at least 2 barriers to communication did not include interventions or communication that could have been done differently. Did not identify any pertinent social determinants of health. | **0 Points** Identify at least 1 barrier to communication did not include interventions or communication that could have been done differently. Did not identify any pertinent social determinants of health. | **10** |

Total Possible Points= 100 points
77-100 points= Satisfactory completion.
76-53 points= Needs Improvement
< 53 points= Unsatisfactory

**Total Points:**

**85**
**S**

Faculty comments: Good job on your nursing process. You lost points due to providing generalized benefits and weaknesses of therapeutic communication rather than self-reflection of YOUR strengths and weaknesses.

**Faculty Initials:**

**RH**

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

| vSim Evaluation<br><br>Performance Codes:<br><br>**S**: Satisfactory<br><br>**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:**<br>**6/9/2023** | **Date:**<br>**6/23/2023** | **Date:**<br>**6/30/2023** | **Date:**<br>**7/5-6/2023** | **Date:**<br>**7/7/2023** | **Date:**<br>**7/21/2023** |
| Evaluation | S | S | S | S | S | |
| Faculty Initials | BL | BS | NS | CB | CB | |
| **Remediation:**<br>**Date/Evaluation/Initials** | NA | NA | NA | NA | NA | |

\* Course Objectives

# Lasater Clinical Judgment Rubric Scoring Sheet

**Student Roles: A=Assessment Nurse; M=Medication Nurse; O=Observer (Course Specific)**

STUDENT NAME(S): Melinda Pickens (M) Tabitha Thom(A)
GROUP #: 3
SCENARIO: 1
OBSERVATION DATE/TIME(S): 7/5/2023 1040-1155

| CLINICAL JUDGMENT | OBSERVATION NOTES |
|---|---|
| **COMPONENTS NOTICING: (1, 2, 5)\***<br><br>• Focused Observation:    E    A    D    B<br>• Recognizing Deviations from<br>   Expected Patterns:    E    A    D    B<br>• Information Seeking:    E    A    D    B | Focused observation on vital signs. Introduced self and role when entering the room.<br><br>Sought further information related to patient admission.<br><br>Noticed bruising and abrasions. Sought further information related to patient fall.<br><br>Noticed ETOH level in the blood.<br><br>Noticed denial of substance use.<br><br>Noticed mild anxiety. Noticed mascara running (crying), sought further information related to mood state.<br><br>Sought information on appetite and sleep.<br><br>Sought information from patient for med safety (name, DOB, allergies).<br><br>Noticed orders appropriately on eMAR. |
| **INTERPRETING: (2, 4)\***<br><br>• Prioritizing Data:    E    A    D    B<br>• Making Sense of Data:    E    A    D    B | Prioritized vital sign assessment. Made sense of elevated blood pressure.<br><br>Prioritized focused assessment on patient fall, mental status, and forgetfulness related to fall.<br>Prioritized brief mental health evaluation.<br>Prioritized CAGE questionnaire. Made sense of problem with substance use.<br>Prioritized CIWA assessment. Made sense of CIWA assessment interpretation score as 4 (mild anxiety). |

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| **RESPONDING: (1, 2, 3, 5)***<br><br>- Calm, Confident Manner:    E   **A**   D   B<br>- Clear Communication:     **E**   A   D   B<br>- Well-Planned Intervention/<br>  Flexibility:      E   **A**   D   B<br>- Being Skillful:     E   **A**   D   B | Performed brief mental health evaluation based on patient's responses. Completed in full. Nice job.<br><br>Performed full CAGE questionnaire.<br><br>Good eye contact and therapeutic communication during assessments.<br><br>Used open-ended questions to explore further. Encouraged participation in group therapy activities. Explored patient's thoughts. Good motivational interviewing.<br><br>Encouraged participation in community support groups.<br><br>Educated on medications to be administered. Good dosage calculation on BP pills. Educated on the need for vitamins. Explained to patient each medication to be administered. Important for potential paranoia.<br><br>Offered self for therapeutic communication. Sat with patient to explore feelings further. |
| **REFLECTING: (6)***<br><br>- Evaluation/Self-Analysis:   E   **A**   D   B<br>- 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**<br><br>**Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.**<br><br>**E= Exemplary**<br><br>**A= Accomplished**<br><br>**D= Developing**<br><br>**B= Beginning**<br><br>**Objectives:**<br>   1.  **Demonstrate effective therapeutic communication while interacting with patient admitted for an acute mental health crisis. (1, 2, 3)***<br>   2.  **Utilize the CIWA scale to assess a patient with a history of substance abuse. (1, 2)***<br>   3.  **Determine appropriate medication administration steps utilizing the CIWA scale. (4)***<br>   4.  **Provide patient with appropriate education on community** | Lasater Clinical Judgement Rubric Comments:<br><br>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. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads.<br><br>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.<br><br>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding.<br><br>Reflecting: 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. |

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| **support and resources. (5)***<br><br>**\* Course Objectives** | **Satisfactory completion of Mental Health simulation scenario** |

**EVALUATION OF CLINICAL PERFORMANCE TOOL**
**Psychiatric Nursing**

**Firelands Regional Medical Center School of Nursing**

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: