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

Student: **Taylor Fox**

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)**		NA	S	S	S	S	NA	NA	NA	
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. **(interpreting)**		NA	S	S	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	S	NA	NA	NA	
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care **(noticing)**		NA	S	S	S	S	NA	NA	NA	
e. Recognize social determinants of health and the relationship to mental health. **(reflecting)**		NA	S	S	S	S	NA	NA	NA	
f. Develop and implement an appropriate nursing therapy group activity. **(responding)**		NA	NA	S	NA	NA	NA	NA	NA	
g. Develop a geriatric physical/mental health assessment and education plan. (**Geriatric Assessment**) **(responding)**					NA			NA	NA	
Faculty Initials		BL	BS	BS	NS	CB	NS			
Clinical Location		NA	1South	1South	Detox & Artisans	Hospice	NA	NA	NA	

* End-of-Program Student Learning Outcomes

Comments:

Week 3- 1a,e- Nice job discussing the pathophysiology of your patients diagnosis and some of its potential contributing factors. Nice job also discussing potential risk factors for depressive disorders. BS

Week 4- 1e,f- Nice job including social determinants of health on 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 6(1c): Great job providing culturally and spiritually competent care during your hospice clinical experience. CB

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

Comments:

Week 3- 2a,b- Good job discussing your patient's medical and psychiatric history. You also provided reasons and circumstances surrounding her current admission. BS

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

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

Comments:

Week 3- 3c- Nice job discussing important factors that create a culture of safety specific to the psychiatric setting. BS

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) – Excellent work with your nursing process recording assignment related to therapeutic communication. 100/100 points were received for a satisfactory evaluation. See comments provided throughout the document and on the attached grading rubric for more details. NS
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 6(3f): Taylor, 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

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

Comments:

Week 3- 4a,b,e- Nice work this week administering medications while observing the six rights and of documenting administration. Great job also discussing the uses and implications of psychiatric medications. You also did a nice job discussing the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications. Important lab values for your patient were provided, as were rationales for those values. Nice job! BS

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

* 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	S	NA	NA	NA	
b. Discuss recommendations for referrals to appropriate community resources and agencies. **(reflecting)**		NA	S	S	S	S	NA	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)**		NA	NA	NA	S	NA	NA	NA	NA	
d. Attend Narcotics/ Alcoholics Anonymous meeting. **(Alcoholics/Narcotics Anonymous at the Sandusky Artisans Recovery Center (Observation)**		NA	NA	NA	S	NA	NA	NA	NA	
Faculty Initials		BL	BS	BS	NS	CB	NS			

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

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

Comments:

Week 4- 6c- You were able to utilize technology to identify an important community resource that could benefit your patient with her substance use and her sobriety. 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	S	NA	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)**		NA	S	S	S	S	NA	NA	NA	
c. Illustrate active engagement in self-reflection and debriefing. **(reflecting)**		NA	S	S	NA	~~NA~~ S	NA	NA	NA	
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	S	NA	NA	NA	
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. **(responding)**		NA	S	S	S	S	NA	NA	NA	
f. Comply with the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care." **(responding)**		NA	S	S	S	S	NA	NA	NA	
Faculty Initials		BL	BS	BS	NS	CB	NS			

Comments:

Week 3- 7b- You did a good job listing the steps taken on the psychiatric unit that promote a culture of safety. BS

Week 4- 7d- Professional behavior observed at all times while on the clinical floor. BS

Week 6(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 in all areas. Keep up all your great work! CB

Firelands Regional Medical Center School of Nursing
Nursing Care Map Rubric

Student Name: Taylor Fox **Date or Clinical Week:** Week 4				**Course Objective:**	Synthesize concepts related to psycho-pathology, health assessment data, evidence 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 (related to the suicide attempt) and their associated symptoms.
	5. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	6. Identify all potential complications for the top nursing priority problem.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**	3	
	7. Identify signs and symptoms to monitor for each complication.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**	3	
Responding	8. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	Nice job providing a prioritized list of interventions.
	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: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**	3	

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

Faculty/Teaching Assistant Comments:

Total Points: **42/42**
Satisfactory. BS

Faculty/Teaching Assistant Initials:
Nice work Taylor! BS

Criteria	Ratings				Points Earned
Criterion #1 Process Recording is organized and neatly completed	5 Points Typed process recording with spelling and grammar correct.	3 Points Typed process recording with 5 or less spelling and grammar mistakes.	1 Points Typed process recording with 5 or more spelling and grammar mistakes.	0 Points Process recording is not typed with 10 or more spelling and grammar mistakes.	5
Criterion #2 Assessment	7 Points 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 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 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 Missing data in all 4 areas of assessment.	3
Criterion #3 Mental Health Nursing Diagnosis (priority problem)	8 Points Identifies priority mental health problem (not a medical diagnosis) providing at least 5 potential complications.	5 Points Identifies Priority mental health problem provides at least 4 potential complications.	3 Point Identifies priority mental health problem provides at least 3 potential complications.	0 Points Does not provide priority mental health problem and/or less than 3 potential complications.	8
Criterion #4 Nursing Interventions	10 Points 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 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 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 Identifies less than 4 interventions, not prioritized, individual, realistic, no rationale, no time frame. No therapeutic communication goal.	10
Criterion #5 Process Recording	15 Points 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 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 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 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 #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.	15
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:**		96/100

Faculty comments: Nice work on your Nursing Process Study. I would have liked more background information included because there was a lot of it that was pertinent. Otherwise, very good!

Taylor Fox

Faculty Initials: BS

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	BL	BS	NS	CB	CB	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S): Taylor Fox (M), Elaynah Noftz (A)
GROUP #: 4
SCENARIO: 2
OBSERVATION DATE/TIME(S): 7/5/2023 1230-1345

CLINICAL JUDGMENT	OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5) *	Introduces selves and roles when entering the room.
• Focused Observation: E A D B	Noticed elevated blood pressure.
• Recognizing Deviations from Expected Patterns: E A D B	Sought information related to home and supporting environment.
• Information Seeking: E A D B	Noticed bruising and abrasions.
	Noticed tremoring, anxiety, agitation, diaphoresis, itching, numbness, hallucinations, confusion, etc.
	Identified patient name and DOB, allergies prior to administering medications.
	Sought information related to recent loss and stressors.
INTERPRETING: (2, 4) *	Prioritized vital sign assessment.
• Prioritizing Data: E A D B	Prioritized CIWA assessment based on withdrawal symptoms.
• Making Sense of Data: E A D B	Prioritized brief mental health evaluation.
	Made sense of CIWA assessment interpreting score of 18.
	Made sense of eMAR for CIWA protocol.
	Made sense of brief mental health evaluation assessment score.
RESPONDING: (1, 2, 3, 5) *	Teamwork and collaboration when entering the room to develop relationship with the patient and streamline communication.
• Calm, Confident Manner: E A D B	Educated on the need to perform a CIWA assessment.
• Clear Communication: E A D B	Encouraged patient to be open and honest.
• Well-Planned Intervention/ Flexibility: E A D B	Explored patient's feelings related to coping mechanisms other than substances.
• Being Skillful: E A D B	Educated on healthy coping mechanisms such as walking and exercise.
	Brief mental health evaluation completed in full.
	Appropriate dosage of Ativan (4mg) administered safely. Education provided.
	Offered selves to patient and asked open-ended questions.

	Therapeutic communication provided related to social support, coping mechanisms, etc. Offered self-regarding recent loss.
REFLECTING: (6) * • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Each member of the group actively participated during debriefing. Appropriate questions were asked. Identified rationale behind decision making. Identified use of clinical judgment during the scenario. Each group member discussed strengths and weaknesses in their performance. Alternate choices were discussed for improvement in the future.
SUMMARY COMMENTS: * = Course Objectives **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**	Lasater Clinical Judgement Rubric Comments: Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family. Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient's data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success. Responding: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families. Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy. Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered. Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses. **Satisfactory completion of Mental Health simulation scenario.**

EVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

I was given the opportunity to review my final clinical ratings in each course competency. I was given the opportunity to ask questions about my clinical performance. I have the following comments to make about my clinical performance/final clinical evaluation:

Student eSignature & Date: