

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

Student:

Melinda Pickens

Final Grade: **Satisfactory**

Semester: **Summer Session**

Date of Completion: **7/21/23**

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: **Rachel Haynes BSN, RN**

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.

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:		S	N/A	N/A	N/A	S	S	N/A	N/A	S
a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder. (noticing)		S	N/A	N/A	N/A	S	S	N/A	N/A	S
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. (interpreting)		N/A	N/A	N/A	N/A	S	S	N/A	N/A	S
c. Provide culturally and spiritually competent care within the scope of nursing that meets the needs of assigned patients from diverse cultural, racial, and ethnic backgrounds. (responding)		N/A	N/A S	S	N/A	S	S	N/A	N/A	S
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care (noticing)		S	S	S	N/A	S	S	N/A	N/A	S
e. Recognize social determinants of health and the relationship to mental health. (reflecting)		S	S	S	N/A	S	S	N/A	N/A	S
f. Develop and implement an appropriate nursing therapy group activity. (responding)		N/A	N/A	N/A	N/A	N/A	S	N/A	N/A	S
g. Develop a geriatric physical/mental health assessment and education plan. (Geriatric Assessment) (responding)					S			N/A	N/A	S
Faculty Initials		BL	KA	KA	NS	NS	KA	RH	RH	RH
Clinical Location		Sandusky Artisans	Erie county Detox	Hospice	N/A GA	1 south	1 south	N/A	N/A	

* End-of-Program Student Learning Outcomes

Comments:

Week 2-1(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. Keep up all your great work! BL

Week 3 – 1c – Melinda, you did a nice job discussing spiritual and cultural care related to the detox center and how the stigma related to mental health is a barrier to the usage of this great service. KA

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

Week 6 1(b,e) – Nice job discussing the prescribed medications aimed at treating your patient’s mental health disorder. You were thorough in describing the medication changes that occurred during his stay and identifying the rationale and side effects of each medication. Good discussion on SDOH that have an impact on your patient’s overall mental health. You identified social and financial stressors that could negatively impact his healing. NS

Week 7 – 1a – Melinda, you were able to discuss your patient’s diagnosis and the reason for her admission for the patient you cared for this week. KA

Week 7 – 1e – Melinda, you were able to discuss aspects of SDOH such as living in a group home and how it affects your patient ability to manage her mental health. KA

Week 7 – 1f – Melinda, you did a nice job developing a nursing therapy group for the inpatient psychiatric unit that was well received. Terrific job! KA

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

Comments:

Week 3 – 2c – Melinda, 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 6 2(A) – You were thorough in describing your patient's background history and how it played a role in his current admission. Good identification of family history and how it relates to his anxiety and depression. You correlated his mental health history and current admission with descriptive details. NS

* End-of-Program Student Learning Outcomes

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

Comments:

Week 2-3(f) Excellent job with your CDG this week! Your responses were very detailed and reflected much knowledge. BL

* End-of-Program Student Learning Outcomes

Week 3 – 3f – Melinda, you responded to all questions related to the detox center with thoughtful and thorough responses. You supported your information with a reference and an in-text citation and brought up some terrific points related to the detox center. 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. Keep up the nice work! KA

Week 6 3(a,c,d) – Very nice job this week with your communication and interactions with patients on the unit. On numerous occasions it was noticed that you were offering yourself for therapeutic communication, sat with patients, empathized with them, and made them feel safe and comfortable opening up to you. Nice work making connections and helping the patients during their difficult moments. NS

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

Week 7 – 3 a, c, d – Melinda, you discussed your patient’s paranoia and how it affected her ability to participate in group therapy this week. You also discussed your use of therapeutic communication to interact with your patient and how you specifically utilized the techniques of making observations, offering self, and giving recognition. KA
Week 7 – 3f –Melinda, you thoroughly responded to all CDG question this week on your 1 South clinical experience. You discussed you patient SDOH and different therapeutic communication techniques you used to interact with her. You included a reference and in-text citation to support your responses. Keep up the great work! KA

Week 8: 3(e): this was changed to “S” due to your submission of a satisfactory nursing process on 7/19/23/ 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. (responding)		N/A	N/A	N/A S	N/A	S	S	N/A	N/A	S
b. Demonstrate ability to discuss the uses and implication of psychotropic medications. (responding, reflecting)		N/A	N/A	N/A	N/A	S	S	N/A	N/A	S
c. Identify the major classification of psychotropic medications. (interpreting)		N/A	N/A	N/A	N/A	S	S	N/A	N/A	S
d. Identify common barriers to maintaining medication compliance. (reflecting)		N/A	S	N/A	N/A	S	S	N/A	N/A	S
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications. (responding, reflecting)		N/A	N/A	N/A	N/A	S	S	N/A	N/A	S
Faculty Initials		BL	KA	KA	NS	NS	KA	RH	RH	RH

Comments:

Week 4 – 4a – In your reflection journal you discussed the medication administration process including administration through the subcutaneous button and alternative uses for medications. KA

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

Week 7 – 4a, 4b, & 4e – Melinda, you researched your patient’s medications and were able to discuss the side effects and nursing considerations for each one. You completed medication administration on the patient efficiently and accurately observing the rights of medication administration. KA

* End-of-Program Student Learning Outcomes

Objective

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

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
a. Identify the need for the community resources-detox unit available to patients with a mental illness. (noticing, interpreting)		N/A	S	N/A	N/A	N/A	N/A	N/A	N/A	S
b. Discuss recommendations for referrals to appropriate community resources and agencies. (reflecting)		S	S	S	N/A	S	S	N/A	N/A	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)		N/A	S	N/A	N/A	N/A	N/A	N/A	N/A	S
d. Attend Narcotics/Alcoholics Anonymous meeting. (Alcoholics/Narcotics Anonymous at the Sandusky Artisans Recovery Center (Observation))		S	N/A	S						
Faculty Initials		BL	KA	KA	NS	NS	KA	RH	RH	RH

Comments:

Week 2-5(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

Week 3 – 5a & 5c – Melinda, 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

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

Comments:

Week 6 6(a) – you made good use of your time on the unit, navigating the EHR during appropriate down times to gather important health care related information on your patient this week. NS

Week 7 – 6c – Melinda, you did a nice job researching a resource specific to your patient this week. The Emily Program seems to have multiple resources and benefits for those suffering from eating disorders. Good job! KA

* End-of-Program Student Learning Outcomes

Objective

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

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

Comments:

Week 3 – 7a & 7c – Melinda, you did a nice job reflecting on your experience at the detox center and where 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 4 – 7c – Melinda, you did a great job reflecting on your hospice experience and how it impacted you and your nursing care. I am glad you had this opportunity to see hospice and experience the many benefits on the in-patient unit. I am also happy to hear you learned about alternative uses to medication outside of its main therapeutic use. I am always amazed at how some medications can have one initial intention when developed and then have other potential uses once utilized more in the patient population. KA

Firelands Regional Medical Center School of Nursing
Nursing Care Map Rubric

Student Name: Melinda Pickens		Course Objective:					
Date or Clinical Week: Week 7							
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	Melinda, you did a nice job completing the noticing section and including all assessment findings, lab/diagnostic findings, and risk factors that were pertinent for your patient. KA
	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	Melinda you did a nice job identifying all appropriate nursing diagnosis and highlighting your priority diagnosis. You identified 3 appropriate complications and associated signs and symptoms for for each. KA
	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	
Respo	8. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	Melinda, you did a nice job including pertinent nursing interventions and ensuring they were timed and individualized. My only suggestion would
	9. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	

n i d	10. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	3	be to add an intervention related to encouraging group therapy and staff interaction. KA
	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	
R e f l e c t i n g	13. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	You did a nice job reevaluating all highlighted assessment findings you identified in the noticing section. KA
	14. Evaluation includes one of the following statements: <ul style="list-style-type: none"> • Continue plan of care • Modify plan of care • Terminate plan of care 	Complete			Not complete	3	
<p>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.</p> <p>Faculty/Teaching Assistant Comments: Melinda, you satisfactorily completed your care map. See comments above for further details. KA</p>						<p>Total Points: 42/42</p> <p>Faculty/Teaching Assistant Initials: KA</p>	

Geriatric Assessment Rubric
2023

Student Name: Melinda Pickens

Date: 6/26/23

Clinical Assessment Rubric
Mental/Physical Health Status Assessment

	Points Possible	Points Received
Physical Assessment	4	3
Geriatric Depression Scale (short form) Assessment	4	4
Short Portable mental status questionnaire	4	4
Geriatric Health Questionnaire	2	2
Time and change test	4	4
Cognitive Assessment (Clock Drawing)	4	4
Falls Risk Assessment (Get Up and Go)	4	4
Brief Pain inventory (Short form)	2	2
Nutrition Assessment (Determine Your Nutritional Health)	4	4
Instrumental ADL/ Index of Independence in ADL	4	4
Medication Assessment	4	3
Points	40	38

Education Assessment

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

Education Plan

	Points Possible	Points Received

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

Total Points 98

Good job on your geriatric assessment. You lost points due to not having all spaces filled out in the assessment piece and missing the route of the medications on the medication list. RH.

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.

Nursing Process Rubric

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.	7
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.	4
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	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	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	15

		interactions are provided.	interactions are provided.	for less than half of the interactions provided.	
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 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.	6

<p>Total Possible Points= 100 points</p> <p>77-100 points= Satisfactory completion. 76-53 points= Needs Improvement < 53 points= Unsatisfactory</p> <p>Faculty comments: Great conversation! Points were lost on interventions due to not listing any rationales. Points were also lost on barriers to communication because you only listed 2 when the requirement was 3.</p> <p>Faculty Initials:</p>	<p>Total Points:</p> <p>90 S</p> <p>RH</p>
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Psychiatric Nursing 2023
Simulation Evaluations

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

<p>CLINICAL JUDGMENT</p> <p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 	<p style="text-align: center;">OBSERVATION NOTES</p> <p>Focused observation on vital signs. Introduced self and role when entering the room.</p> <p>Sought further information related to patient admission.</p> <p>Noticed bruising and abrasions. Sought further information related to patient fall.</p> <p>Noticed ETOH level in the blood.</p> <p>Noticed denial of substance use.</p> <p>Noticed mild anxiety. Noticed mascara running (crying), sought further information</p>
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	<p>related to mood state.</p> <p>Sought information on appetite and sleep.</p> <p>Sought information from patient for med safety (name, DOB, allergies).</p> <p>Noticed orders appropriately on eMAR.</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Prioritized vital sign assessment. Made sense of elevated blood pressure.</p> <p>Prioritized focused assessment on patient fall, mental status, and forgetfulness related to fall.</p> <p>Prioritized brief mental health evaluation.</p> <p>Prioritized CAGE questionnaire. Made sense of problem with substance use.</p> <p>Prioritized CIWA assessment. Made sense of CIWA assessment interpretation score as 4 (mild anxiety).</p>
<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B 	<p>Performed brief mental health evaluation based on patient's responses. Completed in full. Nice job.</p> <p>Performed full CAGE questionnaire.</p> <p>Good eye contact and therapeutic communication during assessments.</p> <p>Used open-ended questions to explore further. Encouraged participation in group therapy activities. Explored patient's thoughts. Good motivational interviewing.</p> <p>Encouraged participation in community support groups.</p> <p>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.</p> <p>Offered self for therapeutic communication. Sat with patient to explore feelings further.</p>
<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>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.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Objectives:</p> <ol style="list-style-type: none"> Demonstrate effective therapeutic communication while interacting with patient 	<p>Lasater Clinical Judgement Rubric Comments:</p> <p>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.</p> <p>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.</p> <p>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</p>

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

for understanding.

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.

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:

N/A

Student eSignature & Date:

Melinda Pickens 7/23/2023