

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

Student: Olivia Arthur

Final Grade: **Satisfactory**

Semester: **Summer Session**

Date of Completion: **7/24/23**

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)
7/8/2023	1	Simulation survey not completed by due date.	7/10/2023
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	NA	S	NA S	NA	NA	NA	NA	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	NA	S	NA	NA	S	NA	NA	S
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. (interpreting)		S	NA	S	S	NA	NA	NA	NA	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)		S	NA	S	NA	NA	S	NA	NA	S
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care (noticing)		S	NA	S	NA S	NA	S	NA	NA	S
e. Recognize social determinants of health and the relationship to mental health. (reflecting)		S	NA	S	NA	NA	S	NA	NA	S
f. Develop and implement an appropriate nursing therapy group activity. (responding)		S	NA	S	NA	NA	NA	NA	NA	S
g. Develop a geriatric physical/mental health assessment and education plan. (Geriatric Assessment) (responding)					NA			NA S	NA	S
Faculty Initials	KA	KA	CB	NS	BS	BS	NS	RH	RH	RH
Clinical Location		1S	No Clinical	1S 75 y/o Female Psycho sis	Hospice/ Sandusky Artisans	Sim Lab Only	Detox	No Clinical	NO CLINICAL	

* End-of-Program Student Learning Outcomes

Comments:

Week 2 – 1a – Olivia, you thorough explained what major depressive disorder is and its causes. Your patient was having medication adjustments and group therapy to help treat and support her during this time of great stress. KA

Week 2 – 1f – Olivia, you did a nice job developing a nursing therapy group for the inpatient psychiatric unit. The positive affirmation paper chain was an excellent idea and well received by the patient on the unit. Terrific job! KA

Week 2 – 1e – Olivia, you were able to discuss how your patient’s current living situation is affecting her ability to manage her mental health appropriately. Other social determinants of health that you discussed affecting your patient’s overall mental health included her chronic illnesses and her being on disability. KA

Week 4 1(A) – Nice work this week taking the time to gather data to better understand your patient’s mental health condition. Although her hearing impairment made it difficult to gather data from her, you extensively review the chart to enhance your understanding. You asked questions, reviewed information, collaborated with the health care team and demonstrated a desire to better understand the situation. You were able to identify disturbed thought processes, delusions, and the potential of underlying dementia masking a mental health disorder. You also identified social determinants of health related to her relationship with her daughter, homelessness, and being in a state far from home. You discussed how this will impact her progress upon discharge. Good job! NS

Week 5- 1a-d- (SARRCC) Nice job explaining the current trends in substance abuse, discussing the need for mental health programs for substance abuse, and discussing characteristics of individuals with substance abuse problems. You also identified risk factors associated with substance abuse and the prevalent family dynamics often present with substance abuse. BS

Week 8: 1(g)- this what changed to “S” due to you turning in your geriatric assessment and getting a satisfactory grade. RH

Objective										
2. Synthesize concepts related to psychopathology, health assessment data, evidenced based practice and the nursing process using clinical judgment skills to plan and care for patients with mental illness. (1, 2, 3, 4, 5, 6, 7, 8)*										
Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
Competencies:		S	NA	S	NA	NA	NA	NA	NA	S
a. Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. (noticing)		S	NA	S	NA	NA	NA	NA	NA	S
b. Identify patient's subjective and objective findings including labs, diagnostic tests, and risk factors. (noticing, recognizing)		S	NA	S	S	NA	NA	NA	NA	S
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. (noticing, interpreting)		S	NA	S	NA	NA	NA 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	NA	NA	S
e. Apply the principles of asepsis and standard precautions. (responding)		S	NA	S	S	NA	NA	NA	NA	S
f. Practice use of standardized EBP tools that support safety and quality. (noticing, responding)		S	NA	S	S	NA	NA	NA	NA	S
Faculty Initials	KA	KA	CB	NS	BS	BS	NS	RH	RH	RH

Comments:

Week 2 – 2a & 2b – Olivia, you thoroughly researched your patient and was able to connect your patient's medical and psychiatric history to her recent admission for major depressive disorder. KA

Week 2 – 2b – Olivia, you discussed how your patient had minimal lab work but the importance of the toxicology and blood alcohol level she had drawn, You were able to point out the importance of a CB to rule out other medical conditions for your patient even though it was not completed. Great job! KA

Week 2 – 2f – Olivia you discussed confinement, structure, involvement, and validation and how they work together to develop a culture of safety on the psychiatric unit. KA

Week 4 2(a,b) – I noticed on numerous occasions the amount of detailed information that you were gathering based on her hospitalization. It was evident that you wanted to better understand what was occurring. Your care map submission demonstrated strong evidence to support the priority nursing problems. You were able to correlate her assessment findings and diagnostic testing that was performed, including the potential for a brain tumor to impact the current state of symptoms. (d) based on your research, assessments, and communication with the patient, you developed a satisfactory care map for the priority problem of disturbed thought process related to her paranoid delusions of persecution and religious fixation. See the completed care map grading rubric attached to this document for further comments. NS

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

Comments:

Week 2 – 3f – Olivia, you responded to all CDG questions for your 1 South clinical thoroughly and thoughtfully. You were able to discuss some excellent o=points on your patient’s medical history and medication history. You included two appropriate resources and an in-text cited for both. Remember only the first letter of the first word of the title of a book is capitalized in your reference. Keep up the terrific work! KA

* End-of-Program Student Learning Outcomes

Week 4 3(A) – Olivia, you did a great job with communication this week. You went out of your comfort zone to initiate therapeutic interactions with numerous patients on the unit. You discussed an awesome therapeutic exchange with a patient that had been on the unit for multiple weeks. You were able to utilize various techniques to help lift his spirits and improve self-esteem. Nice job! NS

Week 4 3(f) – You did a nice job responding with descriptive details to the first question prompt from 1south clinical day number 3. I appreciated the discussion on therapeutic communication techniques utilized and how they benefitted your patient. For proper APA formatting, you need more than just then link as the reference. Refer to Purdue OWL APA formatting resources to better learn how to reference appropriately. I know you’ve done APA referencing in previous courses and are aware the just the link itself is not sufficient. According to the CDG grading rubric, a “U” is given due to the second CDG prompt for the week pertaining to the care map not including an in-text citation and a reference. Since this was included as a CDG question, the CDG rubric must be followed in its entirety. A good place to reference and cite a resource on CDGs for care maps is the intervention section since most often a resource is utilized to gather that data. This will be expected in future course so I wanted to give you a heads up. If you have any questions don’t hesitate to reach out for further clarification. NS

Week 5- I was unaware that we had to include a citation for our care maps. To solve this issue, I will review the CDG grading rubric and ask any questions that I may formulate regarding the CDG grading rubric. For my next care map, I will be sure to include a citation.

Week 5- 3c,f,g- (SARRC) Nice job discussing your feelings and attitudes regarding working with individuals with substance abuse problems. Great job providing thorough responses on your CDG questions this week, nice work! Great work on your Nursing Process Study. BS

Week 7 3(f) –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

Objective										
4. Demonstrate knowledge of frequently prescribed medications utilized in treating mental illness. (1, 4, 5, 6, 7)*										
Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
a. Discuss the safe administration of medication while observing the six rights of medication administration. (responding)		S	NA	S	S	NA	NA	NA	NA	S
b. Demonstrate ability to discuss the uses and implication of psychotropic medications. (responding, reflecting)		S	NA	S	NA	NA	NA	NA	NA	S
c. Identify the major classification of psychotropic medications. (interpreting)		S	NA	S	NA	NA	NA	NA	NA	S
d. Identify common barriers to maintaining medication compliance. (reflecting)		S	NA	S	NA	NA	NA S	NA	NA	S
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications. (responding, reflecting)		S	NA	S	NA	NA	NA	NA	NA	S
Faculty Initials	KA	KA	CB	NS	BS	BS	NS	RH	RH	RH

Comments:

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

Week 4 4(a-e) - Nice job researching and understanding your patients’ medications this week. She was prescribed multiple medications this week, both for physical and mental health conditions. You discussed each medication appropriately identifying the intended use and nursing implications for each. Safety during medication administration was prioritized, ensuring all medications were administered and swallowed appropriately. NS

* End-of-Program Student Learning Outcomes

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

Comments:

Week 4 5(a,b) – Nice job identifying community resources available through the use of technology in your CDG post this week. NS

Week 5- 5b,d (SARCC)- You did a nice job describing the meeting platform at the Sandusky Artisans Recovery Community Center and discussing its effectiveness as a resource for individuals striving for sobriety. BS

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

Comments:

* End-of-Program Student Learning Outcomes

Objective

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

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
a. Identify your strengths for care delivery of the patient with mental illness. (reflecting)		S	NA	S	NA	NA	S	NA	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)		S	NA	S	NA	NA	S	NA	NA	S
c. Illustrate active engagement in self-reflection and debriefing. (reflecting)		S	NA	S	NA	NA	NA	NA	NA	S
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE" – attitude, commitment, and enthusiasm during all clinical interactions. (responding)		S	NA	S	S	NA	S	NA	NA	S
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (responding)		S	NA	S	S	NA	S	NA	NA	S
f. Comply with the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care." (responding)		S	NA	S	S	NA	S	NA	NA	S
Faculty Initials	KA	KA	CB	NS	BS	BS	NS	RH	RH	RH

Comments:

Firelands Regional Medical Center School of Nursing
Nursing Care Map Rubric

Student Name: Olivia Arthur		Course 2*					
Date or Clinical Week: Week 4		Objective:					
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	Eleven assessment findings and observations were identified and listed. Pertinent diagnostic testing was listed. Be aware that numerous other lab tests were performed at FTMC and were available for review in the chart. However, they were not relevant to the priority nursing problems. The MRI was the most pertinent and concerning finding related to the assessment findings and priorities. Due to limited information on the patient being from out of state and not in the right mental state to answer questions, the listed risk factors are all that are known.
	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	Five nursing priorities were listed. Consider including the priority of risk of harm to others due to her delusions focused on “communists” and “nazis” and her fixation with staff being armed with fire arms. All relevant data was appropriately highlighted pertinent to the top priority problem of disturbed thought process. Nice job with the potential complications section of the care map. You used your clinical judgment to identify potential problems that could arise from her disturbed thought process. Signs and symptoms were provided for each listed potential complication.
	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	A detailed list of twelve nursing interventions were listed. Each intervention provided is prioritized appropriately, includes an appropriate frequency, and are individualized and realistic to the patient situation. Appropriate rationale was provided.
	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	Consider additional interventions such as seeking clarification to the delusions, using positive reinforcement techniques, offering self, educate on thought stopping techniques, conveying acceptance, etc. Nice job evaluating your assessment findings and providing a summary of her needs. It was appropriately determined to continue to the plan of care with additional education and resources to provide to family.
	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	
	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	
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.							Total Points: 42/42 – Satisfactory Faculty/Teaching Assistant Initials: NS

Nursing Process Study

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.	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	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	0 Points Missing data in all 4 areas of assessment.	7

	Identifies the milieu and effects on patient.	during therapeutic communication interaction with patient. Identifies the milieu and effects on patient.	during therapeutic communication interaction with patient. Identifies the milieu and effects on patient.		
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.				Total Points:	100/10

76-53 points= Needs Improvement
< 53 points= Unsatisfactory

0

Faculty comments: **Great job on your Nursing Process Study, Olivia! Your responses were well thought-out and thorough, and provide a lot of reflection. Again, great job!**

Olivia Arthur

Faculty Initials: **BS**

Geriatric Assessment Rubric
2023

Student Name: **Olivia Arthur** _____

Date: **_7/21/2023_** _____

Clinical Assessment Rubric

Mental/Physical Health Status Assessment

Satisfactory BS

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

Education Assessment

	Points Possible	Points Received
Learning Needs Identified and Prioritized (3)	10	10
Priorities pertinent to learning needs (3)	5	5
Nursing interventions related to learning needs (5)	10	2
Points	25	17

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 92/100 BS_____

Nice work on your geriatric assessment assignment, Olivia. Points were only taken off for not having times and rationales for your interventions.

You must receive a total of 77 out of 100 points to receive a “S” grade on the Evaluation of Clinical Performance tool. Due date can be located on the clinical schedule.

Lasater Clinical Judgment Rubric Scoring Sheet

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

GROUP #: 6

SCENARIO: Alcohol/Substance Abuse Scenario

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

CLINICAL JUDGMENT	OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)*	Introduced self and identifies patient when entering the room. Focused observation on vital signs. Sought information on normal BP range.

<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>Noticed elevated BP of 152/78.</p> <p>Recognized the need to perform CIWA (1) scale and brief mental status evaluation.</p> <p>Recognized the need to perform CAGE questionnaire.</p> <p>Did not notice/address bruises.</p> <p>Introduced self/role and identifies patient upon entering the room. Focused observation on vital signs.</p> <p>BP- 158/82. Patient CO seeing spiders. Asks questions to determine orientation. Identifies need for brief mental status evaluation. Notices agitation and patient CO itching. Bruises not questioned.</p> <p>Patient requests beer.</p> <p>Recognized need for CIWA score</p>
<p>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>Prioritizes the need for CIWA assessment. Score- 1.</p> <p>Prioritizes need for brief mental status evaluation.</p> <p>Prioritized the need for brief mental health evaluation.</p> <p>Did not interpret bruises as a priority</p> <p>Realizes patient is hallucinating.</p> <p>Prioritized need for brief mental status evaluation. CIWA score interpreted to be 22.</p>
<p>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>Asks patient about alcohol history.</p> <p>Performs CIWA assessment appropriately. Performs brief mental status evaluation. Correctly identifies CIWA score of 1.</p> <p>Performs CAGE questionnaire.</p> <p>Medications prepared, explained to patient, education provided about amitriptyline and metoprolol. Medications administered.</p> <p>Did not address loss of friend.</p> <p>Brief mental status started. Instructs patient that alcohol is not available.</p> <p>In response to CIWA score of 22, medication prepared, patient identifies, and medication administered. Explained to patient that it won't take effect immediately.</p> <p>Explained to patient about alcohol tolerance.</p>

<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Group members actively participated during debriefing. Appropriate questions were asked. Each group member discussed what they felt were strengths and weaknesses in their performance. Alternate choices were discussed for improvement in the future. Each member verbalized something they would do differently if they were to do the scenario again.</p> <p>Discussed the importance of addressing education/resources, bruising, and loss of friend.</p>
<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"> 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)* <p>* Course Objectives</p> <p>You are satisfactory for this scenario. Nice work! BS</p>	<p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes subtle patterns and deviations from expected patterns in data and uses these to guide the assessment. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family.</p> <p>Interpreting: Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful data. In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.</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. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered. Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses</p>

/e360/apps/v9/releases/1701549781/public/upload/firelands/media/dropbox/118995-finaltool-arthur.docx

Simulation Evaluations

<u>vSim Evaluation</u> 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	U	S
Faculty Initials	KA	BS	BS	BS	BS	RH
Remediation: Date/Evaluation/Initials	NA	NA	NA	S	NA	NA

* Course Objectives

Week 6- Simulation survey not completed by due date and time. Survey is now completed. BS

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:

All of the clinical instructors were so helpful and encouraging throughout the semester. Appreciate everything you guys do to help us learn!

Student eSignature & Date: Olivia E. Arthur 07/24/2023