

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2023

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Kaden Troike

Semester: Fall

Faculty: Frances Brennan, MSN, RN; Amy Rockwell, MSN, RN;
Chandra Barnes, MSN, RN; Nick Simonovich, MSN, RN

Final Grade: Satisfactory/Unsatisfactory

Date of Completion:

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 in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, U, or NA". 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, it must be addressed with a comment as to why it is no longer a "U" the following week. If the student does not state why the "U" is corrected, 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 or needs improvement 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 or needs improvement 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:

Skills Lab Checklists	Faculty Feedback
Care Map Grading Rubric	Documentation
Administration of Medications Simulation Scenarios	Clinical Reflection
Skills Demonstration	
Evaluation of Clinical Performance Tool	
Clinical Discussion Group Grading Rubric	

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
Faculty's Name			Initials
Chandra Barnes			CB

Lasater Clinical Judgment Rubric

Frances Brennan	FB
Amy Rockwell	AR
Nicholas Simonovich	NS

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.

***Grey shaded weekly competency boxes do not need a student evaluation rating or faculty/teaching assistant initials.**

Objective

1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Clinical Experience																		
Competencies:								N/A		N/A								
a. Identify spiritual needs of patient (Noticing).								N/A		N/A								
b. Identify cultural factors that influence healthcare (Noticing).								N/A		N/A								
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						N/A	S	S		S								
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).						N/A	S	S		S								
						FB	NS	NS										
							3T, 71 years old			4N, 61 year old								
Clinical Location; Patient age**																		

Comments

****Document your clinical location and patient age in the designated box above.**

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

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

2. Summarize knowledge of anatomy, physiology, chemistry, nutrition, psychosocial and developmental principles in performance of basic physical assessment through use of clinical judgment skills. (3,4, 5)*

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Clinical Experience																		
Competencies:						N/A	S	S		S								
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						N/A	S	S		S								
b. Use correct technique for vital sign measurement (Responding).						N/A	S	S		S								
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).						N/A	N/A	N/A		S								
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).								N/A		S								
e. Collect the nutritional data of assigned patient (Noticing).								N/A		N/A								
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).								N/A		N/A								
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).								N/A		N/A								

					N/A FB	NS	NS												
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Comments

Week 7 2(a,b) – This week you were presented with a challenging patient to assess for the first time. Overall you did well, accepting the challenge, and noticed numerous deviations from normal. You were able to notice his hypotension, use of supplemental O2, left below the knee amputation, right toe amputations, and much more. Nice job being thorough in your assessment and documenting your findings. NS

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

3. Select communication techniques and appropriate boundaries with patients, families, and health care team members. (1,2,3,4,6,7)*

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Clinical Experience																		
Competencies:																		
a. Receive report at beginning of shift from assigned nurse (Noticing).						N/A	N/A	N/A		S								
b. Hand off (report) pertinent, current information to the next provider of care (Responding).						N/A	N/A	N/A		S								
c. Use appropriate medical terminology in verbal and written communication (Responding).						N/A	S	S		S								
d. Report promptly and accurately any change in the status of the patient (Responding).						N/A	N/A	N/A		S								
e. Communicate effectively with patients and families (Responding).						N/A	S	S		S								
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).						N/A	S	S		S								
						N/A FB	NS	NS										

Comments

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

4. Exemplify advanced searches in accessing electronic health care information and documenting patient care. (1,4,8)*

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Clinical Experience																		
Competencies:						N/A	S	S		S								
a. Document vital signs and head to toe assessment according to policy (Responding).						N/A	S	S		S								
b. Document the patient response to nursing care provided (Responding).						N/A	S	S		S								
c. Access medical information of assigned patient in Electronic Medical Record (Responding).		S				N/A	S	S		S								
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S						N/A		N/A								
e. Provide basic patient education with accurate electronic documentation (Responding).								N/A		N/A								
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						N/A	S NI	NI		S								
*Week 2 –Meditech		FB				N/A FB	NS	NS										

Comments

Week 6 (4c,d)- Satisfactory for listening attentively and actively participating in the Meditech orientation clinical. You showed beginning competence in the ability to access a patient's EHR, document care in an intervention, and locate patient data. You were able to access Lexicomp to locate patient education materials. Additionally, nursing policies and procedures were located on the Health system intranet. Great job! NS/CB/FB

Week 7 4(A) – overall good work documenting on a live patient for the first time. You were able to appropriately navigate the electronic health record and provided good detail in your charting. NS

Week 7 4(f) – Overall good work with your CDG responses. You provided good insight into the question prompts and supplemented your discussions with reputable resources. This competency was changed to “NI” due to not including an in-text citation in your initial post. Remember, to meet all criteria for a satisfactory evaluation, each response must include both an in-text citation and a reference. In your initial post, you included the reference from which the information was obtained, but did not include an in-text citation to demonstrate which information was sourced. An in-text citation would include the author(s) last name(s) and the publishing year immediately following the information you communicated from that particular resource. Purdue OWL for APA formatting is an excellent resource. Just to clarify, the NI is not for doing APA incorrectly, its for no including an in-text citation according to the CDG grading rubric. Let me know if you have questions pertaining to this competency! NS

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

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective
5. Exemplify psychomotor skills and nursing care safely using evidence-based practice. (3,4,5,7,8)*

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Clinical Experience																		
Competencies:						N/A	S	S		S								
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).						N/A	S	S		S								
b. Apply the principles of asepsis and standard/infection control precautions (Responding).						N/A	S	S		S								
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).								N/A		N/A								
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).						N/A	S	S		S								
e. Organize time providing patient care efficiently and safely (Responding).						N/A	S	S		S								
f. Manages hygiene needs of assigned patient (Responding).								N/A		S								
g. Demonstrate appropriate skill with wound care (Responding).								N/A										
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						N/A	S	S										
						N/A FB	NS	NS										

Comments

****You must document the location of the pull station and extinguisher here for your first clinical experience.**

Fire extinguisher- next to 3T information station on the left side. Pull station - next to 3T locker room. Thank you! NS

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																		
6. Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*																		
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding).								N/A		S								
								NS										

Comments

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

7. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*

[illegible]

Comments

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

8. Exemplify professional conduct through self-reflection, responsibility for learning, and goal setting. (1,5,7)*

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Clinical Experience																		
Competencies:						N/A	S	S		S								
a. Reflect on areas of strength** (Reflecting)																		
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)						N/A	S	S		S								
c. Incorporate instructor feedback for improvement and growth (Reflecting).						N/A	S	S		S								
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).						N/A	S	S		S								
e. 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								
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).						N/A U	S	S		S								
g. Comply with patient's Bill of Rights (Responding).						N/A	S	S		S								
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).						N/A	S	S		S								

i. Actively engage in self-reflection. (Reflecting)						N/A	S	S		S								
*						N/A FB	NS	NS										

**** Strength/weakness reflection (a,b): Must have different written example each week of clinical/lab. You must explain your plan for how you will improve. Example, “I am having a difficult time with obtaining a manual BP. I will get a BP cuff from Amy and practice manual BP’s with at least three members of my family this week.” Please ensure that you answer this section in-depth with your plan of action. Each week must be different.**

Week 6 (8f)- This competency was evaluated as “U” related to the late submission of the evaluation tool. You will need to be responsible for knowing the correct tool to post in your dropbox, and to post it by the designated time and day as listed in your syllabus. You must address the unsatisfactory evaluation as stated at the beginning of the evaluation tool. If not addressed it will remain a “U” until done appropriately. **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, it must be addressed with a comment as to why it is no longer a “U” the following week. If the student does not state why the “U” is corrected, it will be another “U” until the student addresses it.** FB

Week 6 Comment- I will make sure I am submitting my clinical evaluation tool in the correct dropbox and I will make sure to double-check my work and that it is in the right spot so this doesn’t happen again. **Thank you, Kaden! NS**

Week 7 - My strength this week was obtaining vital signs efficiently and effectively while communicating with my patient providing all the care that the patient requested, and thorough charting. **Awesome strengths to note for your first clinical experience! I thought you did very well with a complex assessment. You were confident entering the room and completed your nursing interventions in a timely manner. You were able to strike up conversation with your patient and learned more about him in the process. Job well done! NS**

Something I can improve on is not forgetting to ask about urination trends and finding the pulses faster to prevent the patient from becoming uncomfortable. I will continue to practice my head-to-toe assessment on family members and locate uncommon pulse locations faster on friends and family. **An excellent plan for improvement! Your speed and confidence in assessing patient’s will improve with experience. Remember, this was your first time. I think your plan for practicing on family members will help build that skill and confidence moving forward. Keep up the hard work! NS**

Week 9 - My strength this week was my head to toe, lots of improvement from the last clinical I remembered all the parts of the assessment that I forgot the first time. Another strength this week was my confidence to walk into the pt’s room, answering call lights, and helping other students drastically increased.

Something I can improve on is putting an in-text citation and reference in my CDG responses and communicating with the nurse more about my findings. I felt nervous to talk to her because I didn’t want to bother her because I knew she was busy or didn’t want to ask for help with the “simple things”.

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials
		*	*

Note: Students are required to submit one satisfactory care map by 11/20/2023 at 0800. If the care map is not evaluated as satisfactory upon initial submission, the student may revise the care map based on instructor feedback/remediation and resubmit one time to receive a satisfactory evaluation. ***See Attached Nursing Care Map Grading Rubric.**

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Student Name:				Course Objective: 6* Develop patient-centered plans of care utilizing the nursing process			
Date or Clinical Week:							
Criteria		3	2	1	0	Points Earned	Comments
Noticing	1. Identify all abnormal assessment findings. (subjective and objective)	(lists at least 7*) *provides explanation if < 7	(lists 5-6)		(lists < 5 or gives no explanation)		
	2. Identify all abnormal lab findings/diagnostic tests.	(lists at least 3*) *provides explanation if < 3			(lists < 3 or gives no explanation)		
	3. Identify all risk factors.	(lists at least 5*) *provides explanation if < 5	(lists 4)	(lists 3)	(lists < 3 or gives no explanation)		
	4. Highlight all of the related/relevant data from the Noticing boxes to develop a priority nursing problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
Interpreting	5. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	6. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)		
	7. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists at least 2)		(lists < 2)		

R e s p o n d i n g	8. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	9. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete		
	10. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete		
	11. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete		
	12. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete		
R e f l e c t i n g	13. List the reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete		
	14. Evaluation includes one of the following statements: - Continue plan of care - Modify plan of care - Terminate plan of care	Complete			Not complete		
Total Possible Points= 42 points 42-30 points = Satisfactory 29-18 points = Needs Improvement* < 18 points = Unsatisfactory* *Total points adding up to less than or equal to 29 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines. Faculty/Teaching Assistant Comments:							Total Points: Faculty/Teaching Assistant Initials:

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

<u>Simulation Evaluation</u> Performance Codes: S: Satisfactory U: Unsatisfactory	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
	Date: 11/7/2023 or 11/14/2023	Date: 11/27/2023 or 11/28/2023
Evaluation (See Simulation Rubric)		
Faculty Initials		

Remediation: Date/Evaluation/Initials		
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* Course Objectives

- A. Reflect on an area of strength after observing/participating in each simulation scenario.**
- B. Recognize one area for improvement and set a goal to meet this need.**

The goal must include what you will do to improve, how often you will do this, and when you will complete the goal (example- "I forgot to raise the head of the bed when the patient began having trouble breathing. I will review the proper nursing interventions for dyspnea in the textbook and on skyscape twice before the next simulation scenario").

Simulation #1:

A.

B.

Faculty comments:

Simulation #2:

A.

B.

Faculty comments:

EVALUATION OF CLINICAL PERFORMANCE TOOL Nursing Foundations – 2023

**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: _____Kaden Troike_____10/19/23_____