

**EVALUATION OF CLINICAL PERFORMANCE TOOL  
Nursing Foundations – 2023**

**Firelands Regional Medical Center School of Nursing  
Sandusky, Ohio**

**Student:**

**Final Grade: Satisfactory/Unsatisfactory**

**Semester: Fall**

**Date of Completion:**

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

**Faculty eSignature:**

**DIRECTIONS FOR USE:**

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S), Needs Improvement (NI), Unsatisfactory (U), and Not Available (NA)**. The faculty member will initial if in agreement with the student’s evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written 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            | Clinical Reflection |
| Simulation Scenarios                     |                     |
| Skills Demonstration                     |                     |
| Evaluation of Clinical Performance Tool  |                     |
| Clinical Discussion Group Grading Rubric |                     |
| Lasater Clinical Judgment Rubric         |                     |

**ABSENCE (Refer to Attendance Policy)**

Date	Number of Hours	Comments	Make Up (Date/Time)
<b>Faculty’s Name</b>			<b>Initials</b>
Chandra Barnes			CB
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.**

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Objective																		
1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*																		
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
<b>Competencies:</b>								NA		S	NA	S	NA					
a. Identify spiritual needs of patient (Noticing).								NA		S	NA	S	NA					
b. Identify cultural factors that influence healthcare (Noticing).								NA		S	NA	S	NA					
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						N/A	S	S		S	NA	S	NA					
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).						N/A	S	S		S	NA	S	NA					
						CB	CB	CB		FB	FB	FB						
						NA	3T 71	NA		3T 67	NA	3T 75	NA					

Clinical Location:  
Patient age\*\*

**Comments**

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

Week 7(1c,d) – Nice job this week interacting with a patient for the first time in the clinical setting. You were able to respect your patient's preferences, values, and needs when entering the room to obtain vital signs and a head to toe assessment. You used Maslow's to determine the importance of assessing vital signs and an assessment to meet the physiological needs of your patient first, great job! CB

Week 11 (1c)- Nice job considering your patient's preferences while coordinating appropriate care to ensure positive patient outcomes. FB

\* End-of-Program Student Learning Outcomes

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

**Objective**

1. 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)\*

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
<b>Competencies:</b>						N/A	S	S		S	NA	S	NA					
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						N/A	S	S		S	NA	S	NA					
b. Use correct technique for vital sign measurement (Responding).						N/A	S	S		S	NA	S	NA					
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).						N/A	N/A	NA		N/A S	NA	S	NA					
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).								NA		N/A S	NA	S	NA					
e. Collect the nutritional data of assigned patient (Noticing).								NA		N/A S	NA	S	NA					
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).								NA		N/A	NA	NA	NA					
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).								NA		N/A S	NA	S	NA					
						CB	CB	CB		FB	FB	FB						

**Comments**

Week 7(2a,b): This week you were able to use skills learned in the lab and take content learned in theory and combine them to apply your knowledge in the clinical setting. You were successful in obtaining vital signs and a head to toe assessment on a live patient for the first time. You were able to notice your patient had an abnormal respiratory rate and rhythm, and you were able to use your clinical judgement to further assess the situation by reviewing their previous vital sign findings. Great job!. CB

Week 9 (2a)- Great job with patient assessments during this clinical rotation. You provided very thorough and structured assessments. You were able to identify the appropriate focused assessment based on information gathered during the initial assessment. (2c) This competency was changed because you identified your patient as a low fall risk with a score of 6. Even though he presented with a low fall risk precautions were put in place such as the bed alarm to remind the patient to ask for stand by assistance. Make sure to identify all signs and symptoms that your patient presents with that contributed to their admission. For your assigned patient during this clinical rotation your patient presented to the hospital with abdominal pain and black stools, an appropriate priority problem could have been acute pain. (2d,g) These competencies were changed to a satisfactory because you assess the skin during your head to toe assessment. You discussed diagnostic testing (EGD) and patient status for your assigned patient providing nursing interventions and care needed on clinical and in your CDG. (2e) This competency was changed because you did assess nutritional status through the feeding method intervention. The patient was NPO for his procedure, but this was assessed and documented correctly. FB

Week 11 (2a,c,d)- You did a great job performing all assessments. You also demonstrated the ability to gather information from assessments performed to determine a priority problem for your assigned patient. After determining the priority problem, you implemented all necessary interventions. FB

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

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

**Objective**

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

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
<b>Competencies:</b>						N/A	N/A	NA		S	NA	S	NA					
a. Receive report at beginning of shift from assigned nurse (Noticing).						N/A	N/A	NA		S	NA	S	NA					
b. Hand off (report) pertinent, current information to the next provider of care (Responding).						N/A	N/A	NA		S	NA	S	NA					
c. Use appropriate medical terminology in verbal and written communication (Responding).						N/A	<del>N/A</del> S	S		S	NA	S	NA					
d. Report promptly and accurately any change in the status of the patient (Responding).						N/A	<del>N/A</del> S	S		S	NA	S	NA					
e. Communicate effectively with patients and families (Responding).						N/A	<del>N/A</del> S	S		S	NA	S	NA					
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).						N/A	<del>N/A</del> S	S		S	NA	S	NA					
						CB	CB	CB		FB	FB	FB						

**Comments**

Week 7(3e): Ava, you did a great job communicating effectively with your patient this week! I know this can be challenging for the first time in the clinical setting, however you were able to use appropriate communication skills to learn more about your patient. I changed competency c-f to a "S" because you completed all of this in clinical this week. CB

Week 9 (3a,b)- Great job receiving and providing pertinent information during shift report, and hand off report. Appropriate medical terminology was used during all communications provided. Good job communicating appropriately to staff RN and other health care disciplines when necessary. FB

Week 11 (3e)- Great job communicating with your patient this week, you did a great job meeting their needs and communicating in some therapeutic ways to gain the trust of your assigned patient. Communication comes in many forms and building that trusting relationship is very important to a successful plan of care. FB

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

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

**Objective**

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

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
<b>Competencies:</b>						N/A	S	S		S	NA	S	NA					
a. Document vital signs and head to toe assessment according to policy (Responding).						N/A	S	S		S	NA	S	NA					
b. Document the patient response to nursing care provided (Responding).						N/A	N/A S	S		S	NA	S	NA					
c. Access medical information of assigned patient in Electronic Medical Record (Responding).		S				N/A	S	S		S	NA	S	NA					
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S						S		S	NA	S	NA					
e. Provide basic patient education with accurate electronic documentation (Responding).								NA		N/A	NA	NA	NA					
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						N/A	S	S		S	NA	S	NA					
<b>*Week 2 –Meditech</b>		CB				CB	CB	CB		FB	FB	FB						

**Comments**

Week 2(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

Week 7(4 a,c,f): Good job with your documentation of vital signs and a head to toe assessment, you were very thorough and detailed. My only advice for documentation of the head to toe assessment is to make sure you click on the + sign in the top left corner every time so you don’t miss anything and always have the meditech guidelines with you to ensure you are documenting on the correct areas. Great job on your first CDG, you met all requirements of the grading rubric. Your intext citation for your original

post should be, (Potter et al., 2019, p.354). If you have additional questions regarding in-text citations or references, there is a APA list under clinical resources on Edvance360. I changed competency 4b to a “S” because documenting vitals and an assessment is documenting information related to the patient’s response to care. CB

Week 9 (4 a,b,c) Great job with head to toe assessment, vital signs, and focused assessment. You documented thoroughly and in a timely manner. Nice job accessing pertinent information and additional information within the electronic medical record. You were able to identify and gather important information regarding your patient’s problems and testing to provide an accurate plan of care, nice job! (4f)- CDG was appropriately posted following the CDG rubric, on time, and in a substantive manner. FB

Week 11 (4 a,b)- Great job with documentation this week with minimal editing needed. (4c)- You were able to access the medical record, gather pertinent information and interpret data. FB

\* End-of-Program Student Learning Outcomes

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

**Objective**

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

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
<b>Competencies:</b>						N/A	S	S		S	NA	S	NA					
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).						N/A	S	S		S	NA	S	NA					
b. Apply the principles of asepsis and standard/infection control precautions (Responding).						N/A	S	S		S	NA	S	NA					
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).								NA		NA	NA	NA	NA					
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).						N/A	N/A S	S		S	NA	S	NA					
e. Organize time providing patient care efficiently and safely (Responding).						N/A	S	S		S	NA	S	NA					
f. Manages hygiene needs of assigned patient (Responding).								NA		S	NA	S	NA					
g. Demonstrate appropriate skill with wound care (Responding).								NA			NA	NA	NA					
<b>h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).</b>						N/A	S	S										
						CB	CB	CB		FB	FB	FB						

Comments

**\*\*You must document the location of the pull station and extinguisher here for your first clinical experience. Fire extinguisher was across from room 3035 and pull station was across from room 3037 CB**

Week 9 (5 d,e)- Nice job with the management of the care you provided to your assigned patient. You organize your time appropriately to provide safe, efficient care while making sure to provide care that contributes to positive patient outcomes. (5f)- Nice job encouraging hygiene care for your assigned patient. Hygiene care is important and you might want to think of using a different approach for hygiene care next clinical. FB

Week 11 (5e) Great job managing time effectively to provide all necessary care for your patient. FB

\* End-of-Program Student Learning Outcomes

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

Objective																		
5. 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
<b>Competencies:</b>								NA		NA	NA	S	NA					
a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding).								CB		FB	FB	FB						

**Comments**

Week 9 (6a)- Great job providing patient centered care to your assigned patient during this clinical rotation. FB

Week 11 (6a)- Great job utilizing clinical judgement while providing care to your patient during this clinical rotation. FB

\* End-of-Program Student Learning Outcomes

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

**Objective**

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

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
<b>Competencies:</b>								NA					NA					
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).								NA					NA					
b. Recognize patient drug allergies (Interpreting).								NA					NA					
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).								NA					NA					
d. Administer oral, intramuscular, subcutaneous, and intradermal medications using correct techniques (Responding).								NA					NA					
e. Review the patient record for time of last dose before giving PRN medication (Interpreting).								NA					NA					
f. Assess the patient response to PRN medications (Responding).								NA					NA					
g. Demonstrate medication administration documentation appropriately using BMV (Responding).								NA				NA S	NA					
<b>*Week 11: BMV</b>								CB				FB						

**Objective**

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

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
<b>Competencies:</b>						U	S	U		S	NA	S	NA					
a. Reflect on areas of strength** (Reflecting)						U	S	S		S	NA	S	NA					
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)						U	S	S		S	NA	S	NA					
c. Incorporate instructor feedback for improvement and growth (Reflecting).						U	S	S		S	NA	S	NA					
d. Follow the standards outlined in the FRMCSN policy, “Student Code of Conduct” (Responding).						U	S	S		S	NA	S	NA					
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions (Responding).						U	S	S		S	NA	S	NA					
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).						U	S	S		S	NA	S	NA					
g. Comply with patient’s Bill of Rights (Responding).						U	S	S		S	NA	S	NA					
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).						U	S	S		S	NA	S	NA					
i. Actively engage in self-reflection. (Reflecting)						U	S	S		S	NA	S	NA					
*						CB	CB	CB		FB	FB	FB						

**Comments**

Week 11 (7g) - You are satisfactory for this competency by attending the Bedside Medication Verification (BMV) clinical orientation, actively listening, observing, and discussing accurate medication documentation and safe administration with the use of the BMV scanner. NS/CB/FB

\* End-of-Program Student Learning Outcomes

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

**\*\* 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(8a-i): Ava, you are receiving "U" for these competencies because you did not self-rate yourself. Please read the following carefully for week 7. 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. CB I understand why I received a U for week 6, I did not realize there was another page of ratings. In the future I will make sure to double check all pages to make sure they are filled out with my self-rating. Thank you for addressing the "U's" you received, and I double checking all work will be beneficial. CB

Week 7: 8a: I was having trouble remembering questions to ask during my head to toe assessment such as numbness and tingling in legs/arms, pain or tenderness in your abdomen, how frequently urination is happening, etc. To improve on this in the future I will write down everything I need to verbally say during a head to toe and I will look at this paper daily and say them out loud until I can remember all questions I need to ask. This is important because it is vital information you need to know about your patient. Ava, I do not see where you have listed a strength here for week 7, therefore I changed competency 8a to an "U". I think you have a great plan in place to help you remember pertinent questions that you need to ask your patient regarding areas of the assessment. CB

\* End-of-Program Student Learning Outcomes

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

Week 9(8a) Some areas of strength that I noticed during this clinical compared to last was that I was not as nervous to have a conversation with my patient as much as I was last time. I also felt like I did a good job of performing my assessment promptly and in a good order. Great job Ava, the more experience you get the better you will feel about communicating with your patient. Performing a head to toe assessment will also get better the more you perform it. Don't worry so much about doing it quickly, but rather being very thorough. FB

(8b) A weakness I would address for week 9 would be that I forgot 2 things in my assessment for Neuro: raising his eyebrows and smiling. I did not really think to do this because my patient was doing it spontaneously, but I realize the importance of them doing it on command. To fix this I will make a note for myself to remember this for next clinical. Good idea, I might also suggest to practice on family members or a stuffed animal. The more you do an assessment the better you will become and you will not forget parts of the assessment. I would also suggest to study the checklist provided in your lab folder. Keep up the good work! FB

Week 11: (8a) Some areas of strength that I noticed during this clinical was that I didn't forget anything on my second physical assessment, and I noticed 2 things that the nurse didn't even notice. I helped implement fall precautions and implemented a stat lock on his catheter to avoid tugging. Great job Ava, fall precautions are very important to protect patients and alert all health care providers that may come in contact with the patient of the patient's needs. You also recognized the need to place the stat lock on the patient's catheter to ensure positive patient outcomes. Keep up the great work. FB

(8b) A weakness I would address for this week would be that I did not implement fall precautions on the first day when they definitely should have been implemented. I also should have done a better assessment on day 1 to notice that he did not have a stat lock for his catheter. Also on the first day I forgot a couple things during my assessment but I remembered them for day 2. To help me remember this, I wrote a small note and looked at it before I started my assessment. When you are addressing your weaknesses make sure to be specific on how you will improve on the stated weakness. A suggestion for assessment skills would be to go over your assessment checklist several times, or practice assessment skills on a family member or stuffed animal. FB

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
<b>Noticing</b>	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		
<b>Interpreting</b>	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)		
<b>Responding</b>	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	> 75% complete	50-75% complete	< 50% complete	0% complete		

	included for each intervention											
<b>Reflecting</b>	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: <ul style="list-style-type: none"> <li>Continue plan of care</li> <li>Modify plan of care</li> <li>Discontinue plan of care</li> </ul>	Complete			Not complete							
	<b>Skills Lab</b>											
	<b>Competency Evaluation</b>											
	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.	<b>Week 1</b> (4)*	<b>Week 2</b> (3,5,8)*	<b>Week 3</b> (2,3,4,5,8)*	<b>Week 4</b> (2,3,4,5,8)*	<b>Week 5</b> (2,3,4,5,8)*	<b>Week 6</b> (1,3,3,4,5,8)*	<b>Week 7</b> (2,3,4,5,8)*	<b>Week 8</b> (2,3,4,5,8)*	<b>Week 9</b> (2,3,4,5,8)*	<b>Week 10</b> (2,3,4,5,6,8)*	<b>Week 11</b> (2,5,7)*
	Faculty/Teaching Assistant Comments:											
		<b>Date:</b> 8/21/2023	<b>Date:</b> 8/28/2023	<b>Date:</b> 9/6/2023	<b>Date:</b> 9/11/2023	<b>Date:</b> 9/18/2023	<b>Date:</b> 9/25/2023	<b>Date:</b> 10/2/2023	<b>Date:</b> 10/9/2023	<b>Date:</b> 10/16/2023	<b>Date:</b> 10/23/2023	<b>Date:</b> 10/31/2023
	Evaluation:	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>
	Faculty Initials	AR	AR	AR	NS	CB	AR	RH/AR	FB	HS	AR	AR
	Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
	Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

\*Course Objectives

Nursing Foundations 2023  
Skills Lab Competency Tool

Student Name: Ava Lawson

Comments:

**Week 1 (Technology Lab):**

During this lab you were able to satisfactorily navigate:

- Edvance360 Learning Management System.
- Skyscape Resource System.
- Assessment Technologies Institute (ATI) / Virtual Simulation (vSim) Systems.
- Guided tour of library and computer lab. AR

**Week 2 (Hand Hygiene; Vital Signs; PPE):**

During lab this week you were able to satisfactorily demonstrate:

- Appropriate hand hygiene utilizing hand sanitizer and soap/water.
- Accurate verbalization of procedure for donning & doffing PPE.
- Appropriate level of skill during guided practice with measurement of radial and brachial pulses, along with manual blood pressure. Vital signs skills will be observed 1:1 with faculty during Week 3. Keep up the good work! AR

**Week 3 (Vital Signs):**

Great job in the lab this week! You satisfactorily completed the vital sign check off during 1:1 observation, including oral temperature, radial pulse, respiratory rate, pulse oximetry, and blood pressure measurement. During the blood pressure measurement, you accurately obtained two out of two blood pressure results on the Vital Sim manikin. You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic vital signs. You were able to remind yourself to verify the patient's identity by asking for name and DOB and required one prompt as a reminder to raise the siderail and lower the bed prior to leaving the bedside and room. Your Meditech documentation related to vital signs had two omissions: "irregular" for pulse rhythm and "114/68" for blood pressure measurement. The remainder of the documentation was accurate and complete. Keep up the great work!! AR

**Week 4 (Assessment):**

Satisfactory with head to toe assessment guided practice, hand-off report activity, and Lexicomp/Intranet navigation activity. You will be observed 1:1 for Head to Toe Assessment competency during Week 5. NS

**Week 5 (Assessment; Mobility):**

Great job in lab this week! You have satisfactorily demonstrated a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall well done. You did require 1 prompt related to asking about numbness and tingling in extremities. You demonstrated friendly, professional, and informative communication. You were able to correctly identify the lung sounds as crackles. Great job! CB

Feedback on documentation this week: With this being the first time that you fully documented these interventions, there are some areas for improvement. You did a good job, overall, with your Meditech documentation. You documented on the interventions listed below; however, some areas were inaccurate and omitted. NS

- Vital signs: accurate and complete
- Pain: accurate and complete
- Safety and Falls: accurate and complete
- Physical Re-Assessment – omitted left ear documentation. Needs to add "labored" breathing to respiratory effort. Otherwise, accurate and complete.

Mobility Lab 9/21/2023: Satisfactory completion of mobility lab through demonstration of the following: Logrolling/turning a patient, lifting a patient in bed, repositioning from lying to sitting, repositioning from sitting to standing, stand/pivot transfer from a bed to a chair, ambulating with a walker, ambulating with crutches, ambulating with a cane, use of a gait belt, and safe use of a wheelchair. Proper body mechanics were utilized to promote safety for the health care worker and the patient. Great job with active participation throughout the duration of the lab. NS

**Week 6 (Personal Hygiene Skills):**

Satisfactory with patient hygiene, making an occupied bed, shaving, oral care, hearing aid care, application of ace wraps, TED Hose/SCD's, and clinical readiness scenario during guided practice. Completed Meditech documentation for Hygiene and Ted Hose. Keep up the great work! AR

**Week 7 (NG Skills: Insertion, Irrigation, and Removal; Feedings):**

Great job this week in lab demonstrating competence for Nasogastric Tube Insertion, Irrigation, and Removal through 1:1 observation. You are satisfactory in all NG skills. During insertion, you required one prompt related to checking the position of the tube in the back of the throat with a penlight. Excellent job securing the tube with your fingers while taping! You did not require any prompts during irrigation or removal! Great job! You were able to verbalize understanding of the difference between irrigation and flushing. You were able to practice administering intermittent tube feeding using the gravity method while also confirming tube placement with gastric residual. Additionally, you participated in the PO intake station for accurate calculation of carbohydrate intake, accurately measured gastric output through the NG tube, practiced assisting a visually impaired patient with their meal, and completed the assigned documentation in Meditech. Keep up the hard work! RH/AR

**Week 8 (Foley Skills: Insertion, Removal; Sterile Gloves; I&O, Documentation Lab):**

You did a great job in the lab this week and were satisfactory with the following skills: Sterile Glove Application, Foley Catheter Insertion (female), and Foley Catheter Removal. One prompt was needed for documentation of removal and urinary output in Meditech for removal of foley catheter. Great job! You maintained the sterile field throughout the Foley insertion, did not contaminate the catheter or your gloves at any point, and had very good communication with your "patient". Great job! You correctly verbalized the differences in catheter insertion for a male patient. Actively participated in the Intake and Output stations, and completed Meditech documentation related to Urinary Catheter Management and Intake & Output. Keep up the great work!!! FB

Documentation Lab – You have satisfactorily completed the documentation lab by actively participating in Meditech documentation related to vital signs, physical re-assessment, safety and falls, pain assessment, patient rounds, TED hose/SCD/Ace wrap, feeding method, Intake and Output, urinary catheter management, and writing a nurse note. You utilized your time wisely, asked appropriate questions, and gained experience with each intervention listed in preparation for clinical. Feedback and remediation were provided as needed during the documentation review. Great job! CB

**Week 9 (Dressing Change: Dry Sterile, Damp to Dry Packed, Stoma Skills):**

You have demonstrated competence in the skill of wound assessment and wound care through guided observation of Dry Sterile Dressing and 1:1 observation of Damp to Dry Packed Wound Dressing Change. During the Damp to Dry Packed Wound Dressing Change, you did not require any prompts and initiated/maintained the sterile field and followed aseptic technique throughout. A reminder to obtain the wound culture prior to drying the wound with gauze was given after the checkoff. You forgot to open the sterile applicators prior to putting on your sterile gloves but you realized this on your own. Your communication with the patient was excellent and you remained calm throughout the entire procedure. Documentation was completed related to wound care and patient rounds in the Meditech system. Additionally, you participated in the stoma care station to gain additional knowledge and skills. Clinical scenario questions were presented to the group with active participation from all students. Great job this week! HS

**Week 10 (Safety; Infection Control; Prioritization; Weight; Pressure Ulcer Prevention; Soft Restraints; Doppler BP):**

Satisfactory participation with the following stations: Prioritization, Patient Weight, Restraints, Doppler BP, Meditech documentation, and Patient Scenario involving Safety, Infection Control, and Pressure Ulcer Prevention. Keep up the hard work! AR

**Week 11 (Medication Lab):**

Satisfactory participation and performance of the following skills in the medication lab: Oral, IM, SQ, and ID medication administration; performance of IM injection on fellow student; performance of SQ & ID injection on practice sponge; use of and drawing medication out of ampule and vial; communication/accountability activity with awareness of allergies & dosage calculation. AR

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

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

\* 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. I noticed that the assessment nurse forgot to implement fall precautions after her assessment when the patient was on high fall risk.

B. An area of improvement as an observer would be that I should have taken better notes on the hand off report because during debrief there were a couple questions I could not answer. A goal I will get to improve this will be that I will make sure I have all my patient's information by asking necessary questions to the hand off nurse before I care for my patient.

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: \_\_\_\_\_