

**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)
Faculty’s Name			Initials
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.**

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
Competencies:								NA		S	S	NA	S	NA				
a. Identify spiritual needs of patient (Noticing).								NA		S	S	NA	S	NA				
b. Identify cultural factors that influence healthcare (Noticing).								NA		S	S	NA	S	NA				
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						S	NA	S		S	S	NA	S	NA				
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).						S	NA	S		S	S	NA	S	NA				
						CB	CB	CB		FB	FB	FB	FB					
						3T; 78 yrs old	NA	NA		3T; 75 yrs old	3T; 72 yrs old		3T; 83 & 85 yrs old					

Clinical Location:
Patient age**

Comments

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

Week 6(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 10 (1c)- Nice job considering your patient's preferences while coordinating appropriate care to ensure positive patient outcomes. FB

Week 12 (1c)- Great job being respectful of patient's values and wishes while coordinating care for 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

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

Comments

Week 6(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 a high BP reading,

and you were able to use your clinical judgement to further assess the situation by reviewing their trending vital signs, where you noticed their BP had been running high. Great job! Competency C was changed to a “NA” because you did not conduct or document a safety assessment. CB

Week 9 (2a,c,d)- 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. An area of improvement for this week could have been also to assess if the patient had any other signs or symptoms such as dyspnea with exertion or at rest. Great job identifying the fall risk for your assigned patient and ensuring all precautions were in place. Make sure to assess all lab data and correlate with patient priority problem. Look for levels that were abnormal or not in the usual set of laboratory orders. FB

Week 10 (2a,c,d)- You did a great job performing all assessments especially the abnormal lungs sounds heard during the respiratory assessment. 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. (2f) Great job maintaining care for the nasogastric tube your patient possessed during the clinical rotation. You recognized the misplacement of the tube during your assessment and informed myself and the patient’s primary RN. This was a great use of critical thinking, communication, and implementation that resulted in a better outcome for your assigned patient. Keep up the good work! FB

Week 12 (2a,c,d)- You did a great job performing appropriate assessments. You provided pertinent information from assessments, labs, and diagnostic testing to determine a priority problem for your assigned patient. Associated interventions were implemented that were relevant to the priority problem based off of information gathered. (2g) Great job interpreting the lab data and diagnostic procedures that provides substantial information for the priority problem. Keep up the good work! 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
Competencies:						§ NA	NA	NA		S	S	NA	S	NA				
a. Receive report at beginning of shift from assigned nurse (Noticing).						§ NA	NA	NA		S	S	NA	S	NA				
b. Hand off (report) pertinent, current information to the next provider of care (Responding).						§ NA	NA	NA		S	S	NA	S	NA				
c. Use appropriate medical terminology in verbal and written communication (Responding).						S	NA	S		S	S	NA	S	NA				
d. Report promptly and accurately any change in the status of the patient (Responding).						S	NA	S		S	S	NA	S	NA				
e. Communicate effectively with patients and families (Responding).						S	NA	S		S	S	NA	S	NA				
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).						S	NA	S		S	S	NA	S	NA				
						CB	CB	CB		FB	FB	FB	FB					

Comments

Week 6(3e): Hannah, 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. Competency A & B were changed to "NA" because you did not receive report from the nurse and you did not give hand off report at the end of clinical. 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 10 (3e)- Great job communicating with your patient this week, this patient was a challenge but you did a great job meeting his needs. (3d) Communication regarding the misplacement of your patient's NG tube was prompt and appropriate for positive patient outcomes. FB

Week 12 (3d,e)- You have demonstrated the ability to respond appropriately to any changes that may occur with your assigned patient. Reporting changes from assessments, vital signs, or symptoms has been prompt and to appropriate reporting structure. You have also displayed the ability to communicate appropriately with patients and their families. Great Job! 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
Competencies:						S	NA	S		S	S	NA	S	NA				
a. Document vital signs and head to toe assessment according to policy (Responding).						S	NA	S		S	S	NA	S	NA				
b. Document the patient response to nursing care provided (Responding).						S	NA	S		S	S	NA	S	NA				
c. Access medical information of assigned patient in Electronic Medical Record (Responding).		S				S	NA	S		S	S	NA	S	NA				
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S						S		S	S	NA	S	NA				
e. Provide basic patient education with accurate electronic documentation (Responding).								NA		S	S	NA	S	NA				
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						S	NA	S		S	S	NA	S	NA				
*Week 2 –Meditech		CB				CB	CB	CB		FB	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 6(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, and your in-text citation and reference were correct. 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. Your response to a peer was also within all guidelines. Keep up the great work. FB

Week 10 (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

Week 12 (4a,b)- You are progressive showing improvement with documentation. Documentation has been thorough and accurate with minimal editing required. (4c) You have displayed the ability to access the electronic health record and gather all relevant information. (4f) CDG posts are within the guidelines provided within the CDG rubric, nice job! 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
Competencies:						S	NA	S		S	S	NA	S	NA				
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).						S	NA	S		S	S	NA	S	NA				
b. Apply the principles of asepsis and standard/infection control precautions (Responding).						S	NA	S		S	S	NA	S	NA				
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).								NA		NA	S	NA	NA	NA				
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).						S	NA	S		S	S	NA	S	NA				
e. Organize time providing patient care efficiently and safely (Responding).						S	NA	S		S	S	NA	S	NA				
f. Manages hygiene needs of assigned patient (Responding).								NA		S	S	NA	S	NA				
g. Demonstrate appropriate skill with wound care (Responding).								NA			S	NA	NA	NA				
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						S	NA	S										
						CB	CB	CB		FB	FB	FB	FB					

Comments

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

Fire extinguisher location: 3T – across from room 3036 Fire pull location: 3T – 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. FB

Week 10 (5e) Great job managing time effectively to provide all necessary care for your patient, your assigned patient was a busy patient with many pertinent interventions implemented. Great job! FB

Week 12 (5 d,e)- You have demonstrated great management of care for your assigned patient making sure all pertinent interventions were completed. You organize your time appropriately to provide safe, efficient care to ensure positive patient outcomes. (5f)- Try to encourage hygiene care to patients, this is very important to not only make the patient feel better, but also for infection control. 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
Competencies:																		
a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding).								NA		S	S	NA	S	NA				
								CB		FB	FB	FB	FB					

Comments

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

Week 10 (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
Competencies:								NA					S	NA				
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).								NA					S	NA				
b. Recognize patient drug allergies (Interpreting).								NA					S	NA				
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).								NA					S	NA				
d. Administer oral, intramuscular, subcutaneous, and intradermal medications using correct techniques (Responding).								NA					S	NA				
e. Review the patient record for time of last dose before giving PRN medication (Interpreting).								NA					S	NA				
f. Assess the patient response to PRN medications (Responding).								NA					S	NA				
g. Demonstrate medication administration documentation appropriately using BMV (Responding).								NA				S	S	NA				
*Week 11: BMV								CB				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

Week 12 (7a)-Great job identifying the action, classification, rationale, and side effects of each medication administered during this clinical rotation. (7c,d)-You demonstrated the use of the six rights of medication administration and correctly administered oral medications to your assigned patient. (7g) Appropriate use of the barcode medication verification system was displayed along with correct and thorough documentation of medications administered. FB

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

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

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
Competencies:						S	NA	S		S	S	NA	S	NA				
a. Reflect on areas of strength** (Reflecting)								S		S	S	NA	S	NA				
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)						S	NA	S		S	S	NA	S	NA				
c. Incorporate instructor feedback for improvement and growth (Reflecting).						S	NA	S		S	S	NA	S	NA				
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).						S	NA	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).						S	NA	S		S	S	NA	S	NA				
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).						S	NA	S		S	S	NA	S	NA				
g. Comply with patient's Bill of Rights (Responding).						S	NA	S		S	S	NA	S	NA				
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).						S	NA	S		S	S	NA	S	NA				
i. Actively engage in self-reflection. (Reflecting)						S	NA	S		S	S	NA	S	NA				
*						CB	CB	CB		FB	FB	FB	FB					

**** 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 (8 a,b)

- A. I was able to make a good connection with my patient and build rapport with them based on a small conversation I had with them about their hobby of camping. This helped my patient feel more comfortable during the head to toe assessment and while obtaining vital signs. **Hannah, I am glad you were able to build a rapport with your patient and get to know a little bit about them, therefore in return making him feel more comfortable. CB**
- B. I lacked confidence in completing a head to toe assessment on my patient, so the process did not have good flow. I will practice a head to toe assessment on at least three family members/friends this week to focus on gaining confidence which will help the assessment to flow better. **Hannah, this is a great plan you have in order to feel more confident with your head to toe assessment. Don't be too hard on yourself, this was your first head to toe assessment on a real patient in the hospital setting, I know there were all kinds of nerves playing a factor in this. CB**

Week 6 9(8 a b)

- A. I successfully addressed the patient's needs regarding hygiene care and maintained a safe and clean environment in the patient's room. I was able to establish good communication with the patient and the care I provided was well organized and timely. I was able to complete a full head to toe assessment confidently this week. **Great job Hannah, Keep up the great work! FB**
- B. I struggled with charting in the patient's room because I was talking with the patient and building trust with them. While this is important for patient care, accurate and complete charting is an essential part of communicating with other healthcare professionals. I was able to re-enter the patient's chart and more accurately document my findings once I left the patient's room. I will practice more effective and detailed charting on my own time at least twice before clinicals next week. This will allow me to further familiarize myself with the details of charting that I overlooked while charting in the patient's room. **Good plan, I cannot stress enough how important documentation is when documenting in the Electronic Health Record. Practice and experience will assist with making sure you are accurate and complete with your documentation. FB**

Week 10 (8 a b)

- A. During report, it was noted that the patient's NG tube should be at 55 cm and they had clear lung sounds anterior and posterior throughout. During my head to toe assessment, I identified that the patient's NG tube had slipped out to 45 cm and correctly identified that they had rhonchi lung sounds anterior and posterior throughout. I notified the nurse in a timely manner and we advanced the NG tube to 61cm and ordered an x-ray to confirm placement. **Great job, your use of critical thinking and clinical judgement were correct. You realized the importance of your assessment findings and acted on them appropriately. FB**
- B. My patient had many abnormal assessment findings and laboratory values which made me feel very overwhelmed and caused me to have a hard time identifying the nursing priority. This made it hard for me to determine what was most important to be assessed during a focus assessment. I will at least two hours in Skyscape this week looking at nursing diagnoses and reading about nursing interventions. I will find three case studies in the school of nursing library and work to identify the nursing priority and nursing interventions. **Great idea, look at the primary reason your patient came into the hospital and start by putting all the pieces together. Assessment findings can all be related most likely in some fashion or another as it relates to the priority problem. FB**

Week 12 (8 a b)

- A. I successfully administered PO medications to the patient following the six rights and three checks. I successfully identified the reason for the medication and any side effects using Skyscape. I continued to monitor the patient after medications were given for any emergent reactions. **Great job with your first medication pass. You provided all medication classification, side effects, and assessments that were appropriate to the care of your patient. FB**
- B. I need to spend more time educating the patients under my care. I will answer patient questions and address areas for concern as they come up, but I do not take the initiative to educate the patient otherwise. I will spend time this week reviewing education pieces (fall prevention, increasing fluid intake, oxygen safety, coughing and deep breathing, skin breakdown prevention, etc.) and spend time educating at least two family members on chosen education piece and practice utilizing teach back. **Great idea, education is done in several ways through conversation and communication. After you have had conversation about a medication, procedure, or health topic remember to follow up to make sure they interpret the information correctly. It is also a good idea to provide written information for further reference. FB**

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

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)		
Responding	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											
Reflecting	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"> Continue plan of care Modify plan of care Discontinue plan of care 	Complete			Not complete							
	Skills Lab											
	Competency Evaluation											
	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.	Week 1 (4)*	Week 2 (3,5,8)*	Week 3 (2,3,4,5,8)*	Week 4 (2,3,4,5,8)*	Week 5 (2,3,4,5,8)*	Week 6 (1,3,3,4,5,8)*	Week 7 (2,3,4,5,8)*	Week 8 (2,3,4,5,8)*	Total Points: Week 9 (2,3,4,5,8)*	Week 10 (2,3,4,5,6,8)*	Week 11 (2,5,7)*
	Faculty/Teaching Assistant Comments:											
		Date: 8/21/2023	Date: 8/28/2023	Date: 9/6/2023	Date: 9/11/2023	Date: 9/18/2023 & 9/21/2023	Date: 9/25/2023	Date: 10/2/2023	Date: 10/9/2023	Date: 10/16/2023	Date: 10/23/2023	Date: 10/31/2023
	Evaluation:	S	S	S	S	S	S	S	S	S	S	S
	Faculty Initials	AR	AR	AR	NS	NS	NS	NS	NS	AR	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: Hannah Baum

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 three 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 did receive one prompt as a reminder to always verify your patient's identity prior to performing any care. The care you provided was calm and comforting. Your Meditech documentation related to vital signs 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 identifying for the presence of shortness of breath and/or cough with sputum. Otherwise, you did an excellent job. You demonstrated friendly, professional, and informative communication. Great work! NS

Feedback on documentation this week: With this being the first time that you fully documented these interventions, you did an excellent job paying close attention to detail!

- Vital Signs- Documentation was accurate and complete.
- Assessment- Documentation was accurate and complete.
- Safety- Documentation was accurate and complete.
- Pain- Documentation was 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! NS

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

Nice job this week in the skills lab demonstrating competence for Nasogastric Tube Insertion, Irrigation, and Removal through 1:1 observation. For the Insertion checklist, you did not require any prompts as you were able to remind yourself to plug the end of the tube when removing from the package. For irrigation, you did not require any prompts, nice work. For removal, you also did not require any prompts, well done. You did a great job verifying placement before each skill. You were able to verbalize understanding of the difference between irrigation and flushing and aspiration precautions. 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! NS

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. You did not require any prompts throughout the entire process, very well done! It was evident that you were well-prepared and executed the procedures well. You maintained the sterile field throughout the Foley insertion, and did not contaminate the catheter or your gloves at any point. 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. You independently completed the Meditech documentation for Urinary Catheter Management. Keep up the great work! NS
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. You did recognize that you contaminated your sterile glove and cotton tipped applicator at one point and immediately stated what you would do to correct this. Your communication with the patient was excellent. 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. Great job this week! AR

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

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

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. I correctly identified PO medications that were due for the patient. I recognized that the patient could not take Mucinex due to their productive cough which was a contraindication. I observed the six rights and three checks prior to giving PO medications and was able to tell the patient why they were taking the medications and any adverse side effects they may experience.
- B. We forgot to educate the patient on oxygen and coughing/deep breathing. The patient was on oxygen and was to be discharged later in the day. I will review respiratory education (especially safety for oxygen tanks) for patients twice this week.

Faculty comments: See rubric below.

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Kennedy Baker(A), Hannah Baum(M), Stevi Ward(O), Savannah Willis(O)

GROUP #: 1

SCENARIO: NF Simulation #1

OBSERVATION DATE/TIME(S): November 7, 2023 0800-0900

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
NOTICING: (1,2,4,6,7) *						
• Focused Observation:	E	A	D	B		Assessment nurse introduced self and role. Identified patient with name and date of birth when entering the room for patient safety.
• Recognizing Deviations from Expected Patterns:	E	A	D	B		Noticed temp 99.2, SpO2 of 91% RA, HR 81, RR 18, B/P 130/74.
• Information Seeking:	E	A	D	B		Noticed Spo2 at 91% on RA. Did not seek further information on patient's cough (remediated during debriefing).
						Pain assessment performed.
						Noticed crackles upon auscultation.
						Noticed tissues in patient's bed. Noticed yellow sputum in the tissues.
						Noticed redness to heels when patient complained of pain.

	<p>Recognized proper safety protocol during assessment and medication administration by properly raising HOB and adjusting bed height.</p> <p>Medication nurse introduced self and role when entering the room. Performed 6 rights of medication administration by using the BMV scanning system for patient safety. Accurately identified patient name and date of birth. Information obtain from patient about how medications are taken at home. Remember to ask about allergies. Noticed indications for atorvastatin and multivitamin. Noticed potential adverse reactions and side effects.</p>
<p>INTERPRETING: (1,2,4,6,7) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Prioritized respiratory status.</p> <p>Interpreted low SpO2 of 91% as requiring oxygen per physician's order.</p> <p>Interpreted crackles as related to diagnosis of pneumonia (fluid in lungs).</p> <p>Prioritized medication safety practicing 6 rights of medication administration.</p> <p>Interpreted side effects of medications appropriately.</p> <p>Prompted by patient to ask about medication allergies.</p>
<p>RESPONDING: (1,2,3,4,5,6,7) *</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 <li style="padding-left: 20px;">B 	<p>Practiced standard precautions with hand hygiene before entering the room.</p> <p>Promptly performed a head-to-toe assessment.</p> <p>Collaborative communication between assessment and medication nurse.</p> <p>Communicated with patient about interventions being performed, with questions answered appropriately.</p> <p>Good therapeutic communication utilized by the assessment and medication nurse while with the patient.</p> <p>Responded to low SpO2 of 91% by applying oxygen at 2L per nasal cannula as per physician's orders.</p> <p>Responded to redness of the bilateral heels by initiating a pillow to offload pressure.</p> <p>Encouraged patient to cough and deep breath.</p> <p>Re-evaluated SpO2 after oxygen applied.</p> <p>Appropriately used the BMV scanning system for medication safety. Communicated medications to be administered.</p> <p>Consider educating patient on smoking cessation, home oxygen therapy, and incentive spirometer.</p>

<p>REFLECTING: (1,2,4,5,6,8) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Observers provided good insight during debriefing. Noticed the good infection control measures. Discussed initiating O2 via nasal cannula for low Spo2 per orders. Discussed strengths of both the assessment nurse and medication nurse. Constructive feedback was provided. Identified potentially having the patient sit up in bed to improve lung expansions to improve Spo2 levels. Observers discussed potential educational needs related to the scenario. Noticed the implementation of the six medication rights. Identified positive communication between team members and with the patient.</p> <p>Participated well in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas for improvement and discussed ways to make improvements in the future. Good discussions amongst all members of the team. Nice job!</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “Beginning” 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>Scenario Objectives:</p> <ul style="list-style-type: none"> • Demonstrate collaborative communication with patients and healthcare team members (1,3,8) * • Differentiate between need for complete head to toe versus focused assessment and execute accordingly (1,5,6,8) * • Select and administer prescribed oral and intramuscular medications following the six rights (1,4,5,7) * • Identify and provide accurate patient education (1,2,3,4,5,7) * • Recognize patient oxygenation and pain control needs and provide appropriate interventions (2,4,5,6,7) * 	<p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing:</p> <p>Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs.</p> <p>Recognizes most obvious patterns and deviations in data and uses these to continually assess.</p> <p>Makes limited efforts to seek additional information from the patient and family; often seems not to know what information to seek and/or pursues unrelated information.</p> <p>Interpreting:</p> <p>Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful data.</p> <p>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:</p> <p>Generally, displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations.</p> <p>Generally, communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport.</p> <p>Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments.</p>

	<p>Displays proficiency in the use of most nursing skills; could improve speed or accuracy.</p> <p>Reflecting:</p> <p>Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered.</p> <p>Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses.</p>
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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:

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Student eSignature & Date: _____