

**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	N/A	S	N/A	S				
a. Identify spiritual needs of patient (Noticing).								NA		S	N/A	S	N/A	S				
b. Identify cultural factors that influence healthcare (Noticing).								NA		S	N/A	S	N/A	S				
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						S	N/A	S		S	N/A	S	N/A	S				
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).						S	N/A	S		S	N/A	S	N/A	S				
						CB	CB	CB		FB	FB	FB	FB					
						3T Age: 72	NA	NA		3T Age: 90	N/A	3T Age: 92	N/A	3T Age: 69				

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

able to use your clinical judgement to further assess the situation by reviewing their trending vital signs, where you noticed their temperature had been running higher.  
Great job! CB

Week 9 (2a,c)- 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. Great job identifying the fall risk for your assigned patient and ensuring all precautions were in place. Make sure to identify a priority problem instead of using a medical diagnosis. For your assigned patient that presented with a UTI, an appropriate priority problem would have been impaired urinary elimination. You discussed testing and patient status for your assigned patient providing nursing interventions and care needed on clinical and in your CDG. 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	N/A	S	N/A	S				
a. Receive report at beginning of shift from assigned nurse (Noticing).						N/A	N/A	NA		S	N/A	S	N/A	S				
b. Hand off (report) pertinent, current information to the next provider of care (Responding).						N/A	N/A	NA		S	N/A	S	N/A	S				
c. Use appropriate medical terminology in verbal and written communication (Responding).						S	N/A	S		S	N/A	S	N/A	S				
d. Report promptly and accurately any change in the status of the patient (Responding).						S	N/A	S		S	N/A	S	N/A	S				
e. Communicate effectively with patients and families (Responding).						S	N/A	S		S	N/A	S	N/A	S				
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).						S	N/A	S		S	N/A	S	N/A	S				
						CB	CB	CB		FB	FB	FB	FB					

**Comments**

Week 6(3e): Paige, 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. 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>						S	N/A	S		S	N/A	S	N/A	S				
a. Document vital signs and head to toe assessment according to policy (Responding).						S	N/A	S		S	N/A	S	N/A	S				
b. Document the patient response to nursing care provided (Responding).						S	N/A	S		S	N/A	S	N/A	S				
c. Access medical information of assigned patient in Electronic Medical Record (Responding).		S				S	N/A	S		S	N/A	S	N/A	S				
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S						S		S	N/A	S	N/A	S				
e. Provide basic patient education with accurate electronic documentation (Responding).								NA		S	N/A	S	N/A	S				
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						S	N/A	S		S NI	N/A	S	N/A	S				
<b>*Week 2 –Meditech</b>		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 for the first time on a live patient. 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. Also, documenting in your patient’s room will help you if there are any areas you may have forgot to assess. Great

job on your first CDG, you met all requirements of the grading rubric, and the proper intext citation for the Potter and Perry textbook is, (Potter et al., 2019). There is a list of APA style references for you on edvance360. 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 missing the reference, therefore was not a substantive post. Make sure to follow the CDG rubric provided under resources in Edvance360. FB

Week 9 follow-up: f- I will ensure that a way that I will improve will be to triple check when I copy and paste my CDG from a Word document to Edvance everything transfers over correctly. 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
Competencies: Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).						S	N/A	S		S	N/A	S	N/A	S				
a. Apply the principles of asepsis and standard/infection control precautions (Responding).						S	N/A	S		S	N/A	S	N/A	S				
b. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).								NA		N/A	N/A	N/A	N/A	S				
c. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).						S	N/A	S		S	N/A	S	N/A	S				
d. Organize time providing patient care efficiently and safely (Responding).						S	N/A	S		S	N/A	S	N/A	S				
e. Manages hygiene needs of assigned patient (Responding).								NA		S	N/A	S	N/A	S				
f. Demonstrate appropriate skill with wound care (Responding).								NA			N/A	N/A	N/A	S				
<b>g. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).</b>						S	N/A	S						X				
						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.** 5h. Fire extinguisher across from room 3036. Fire pull station 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

Week 13 (C): Maintained external female catheter (PureWick).

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

\* 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
<b>Competencies:</b>						S	N/A	S		S	N/A	S	N/A	S				
a. Reflect on areas of strength** (Reflecting)						S	N/A	S		S	N/A	S	N/A	S				
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)						S	N/A	S		S	N/A	S	N/A	S				
c. Incorporate instructor feedback for improvement and growth (Reflecting).						S	N/A	S		S	N/A	S	N/A	S				
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).						S	N/A	S		S	N/A	S	N/A	S				
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).						S	N/A	S		S	N/A	S	N/A	S				
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).						S	N/A	S		S	N/A	S	N/A	S				
g. Comply with patient's Bill of Rights (Responding).						S	N/A	S		S	N/A	S	N/A	S				
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).						S	N/A	S		S	N/A	S	N/A	S				
i. Actively engage in self-reflection. (Reflecting)						S	N/A	S		S	N/A	S	N/A	S				
*						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: 8A: My strength for this clinical was getting accurate vital signs and documenting them correctly. Paige, great job utilizing the skills that you have learn and applying your knowledge of meditech to document vital signs correctly. CB

8B: My weakness for clinical was being overly nervous when assessing my first patient. I will continue to practice my skills in the lab, at home and with friends at least twice a week to ensure that I get more comfortable in the clinical setting. Paige, I know that the first time clinical can be overly intimidating and that you are a bag of nerves, but I think you have a great plan in place to ensure that you get your confidence up and that you have a plan moving forward when performing a head to toe assessment. CB

Week 7: 8A: N/A CB

8B: N/A CB

Week 9: 8A: My strength for this clinical was that I overcame my fear of the unknown and answered a few call lights that I had no idea who it was for or what it was. Although it was something as simple as helping a patient to the bathroom or just getting them a blanket, it got me to be a little bit more comfortable in this new healthcare setting. Great job, the more you put yourself out there and experience more situations the more comfortable you will become. FB

8B: My weakness for this clinical was navigating through medi-tech to document everything since I am not so familiar with it. I will continue to practice in skills lab with my documenting as well as watch my assigned RN and nursing instructors document to get more comfortable and familiar with documenting everything for my patient as right and accurate as possible. Documentation can be difficult, but it is so very important. You want to make sure you are documenting accurately, correctly, and in a timely manner. Practice will help you become familiar with all areas that need you document on. Therefore, practicing in the lab or library will definitely be valuable to you. FB

Week 10: 8A: N/A

8B: N/A

Week 11: 8A: My strength for this clinical was documenting. Last clinical I did not navigate and document that well on medi-tech but by practicing and getting more comfortable with navigating through medi-tech I only missed one section of my documentation on accident but did so much better and felt so comfortable doing it. Great job, documentation does get better the more you actually complete it on a real patient. FB

8B: My weakness for this clinical was not being as assertive with my patient as I was the day before. The first day of clinical instead of asking her if she wanted a bath, I respectfully insisted it was time for her bath and she complied and was more than happy to help me. The day she was being discharged I told her it was going to be time for a quick bath, and she insisted on not getting a bath because she was going home. Next time I will tell my patient that a bath is still necessary even if they are going home and insist on getting their body washed up. I will continue to try and be more assertive with my patient and if they do refuse after I am a little bit more assertive, I will educate as much as possible even if they are going home to ensure they are still getting cleaned in my care. I will continue to work on this with my patient for next clinical. Hygiene care is very important and even if a patient is to be discharged a partial bath could be of benefit. Educating patients about the importance of hygiene care can provide them with insight as to why it is so important for many reasons.

Week 12: 8A: N/A

8B: N/A

Week 13: 8A: I personally think for this weeks clinical it was one of my best. My strength for this clinical was finally feeling comfortable and starting to think like a nurse a little bit. I demonstrated proper hygiene and education to my patient. I determined when it was time to reposition my patient as well as give her a bag bath to not have dirt or anything on her skin, as well as maintained her external catheter and brief to prevent skin breakdown or a UTI.

8B: My weakness for this clinical isn't totally a bad weakness. Personally, for me, I think my weakness was having a few nerves when it came to passing meds. Although it was exciting, I was nervous about not remembering what the medication was for or if I would potentially grab the wrong med or forget to scan it, ect. I think being overly cautious and being a bit nervous for meds is better than being overly confident and flying through those important steps and making unchangeable mistakes. I will continue to use my 6 rights of medication be cautious when picking the right med dose, checking if it's for the right patient, for the right time, right documentation as well as the right route. I will not let my nervous get to me but will also not suppress them so I can ensure every time to triple check everything with extra caution.

\* End-of-Program Student Learning Outcomes

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
<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>Lab Skills</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>Total Points:</b> <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> 9/18,21/2023	<b>Date:</b> 9/26/2023	<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	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>NS</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>NS</b>	<b>NS</b>	<b>AR</b>	<b>AR</b>
	Remediation: Date/Evaluation/Initials	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>
	Remediation: Date/Evaluation/Initials	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>

\*Course Objectives

Nursing Foundations 2023  
Skills Lab Competency Tool

Student Name: Paige Knupke

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. Remember to always verify what the patient's blood pressure has been running prior to obtaining the measurement. You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic vital signs. You did not require any prompts throughout the entire checkoff! Your Meditech documentation related to vital signs was accurate and complete, however you did not change the time to 0715 as instructed. I can show you in the lab this week how to change the time in Meditech. Overall, you were well-prepared for your checkoff! 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):**

Awesome job in lab this week! You have satisfactorily performed a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall very well done. You paid close attention to detail and were clearly well-prepared. You did not require any prompts throughout your assessment, nice work! You demonstrated professional and informative communication. You were able to correctly identify the lung sounds as crackles. Job well done!

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. Please review each area of documentation within the next two weeks so you can examine areas that were omitted. I want you to feel comfortable and confident with Meditech documentation.

- Vital signs: accurate and complete.
- Safety: accurate and complete.
- Pain: accurate and complete.

- Physical Re-assessment: Other than the areas noted below, the remainder of the assessment documentation was accurate and complete.
  - HEENT: omitted comment “no throat complaints”.
  - Psychosocial: omitted ineffective coping statement “I just don’t feel like taking my meds anymore when I am at home”.
  - Respiratory: omitted “tachypnea” for pattern and “shallow” for depth; omitted “inspiratory/expiratory diminished” for right posterior lower lobe.
  - Cardiovascular: omitted “no” for within defined parameters; left upper extremity- added “pitting” to left upper extremity documentation (should have only been nonpitting).
  - Musculoskeletal: omitted comment “limited movement to left arm and shoulder, sling intact”.
  - Gastrointestinal: omitted “no” from within defined parameters.
  - Genitourinary: omitted “anuria” as a symptom. AR

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. AR

**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. You did not require any prompts!! 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! 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. You recognized broken sterile field during insertion and verbalized how you would correct it, nice job. One prompt was required related to emptying the urine drainage bag and assessing the urine characteristics prior to removing the catheter. Overall, good work! 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, one prompt was required related to labeling the dressing change with your initials, date, and time. You were able to remind yourself to place the waterproof pad under the wound prior to cleansing. One prompt was required related to pouring the sterile saline over the gauze prior to putting on sterile gloves to prevent potential contamination. You were very conscious of your sterile field throughout the procedure. Job well done! 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! NS

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

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. An area of strength for me was identifying the rights of medication as in the right medication, the right route, the right dose and the right patient and the right documentation throughout the assessment as well as assessing the patient's vitals before administering any of her medications.
- B. An area of improvement for me was to double check the time the medication needed to be administered as well as double check for any allergies the patient has. A goal for me to meet this need in next simulation is to double check the MAR for the right medication time that it needs to be administered as well as right after identifying the right patient ask them right away what the patients allergies are. I will continue to go over the 6 rights of medication in our powerpoint slides to ensure I have all of them when administering meds.

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: \_\_\_\_\_