SEVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2023

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Cameron Beltran

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

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: a. Identify spiritual needs of patient (Noticing).								NA		~~NA~~ S	S	NA	S	NA			NA	
b. Identify cultural factors that influence healthcare (Noticing).								NA		~~NA~~ S	S	NA	S	NA			NA	
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						S	NA	S		S	S	NA	S	NA			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			NA	
						CB	CB	CB		FB	FB	FB	FB	FB				
Clinical Location; Patient age**						79 3T	NA	NA		76 3T	61 3T	NA	67 3T					

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 9 (1a,b)- Cameron, these competencies were changed to a satisfactory rating because you were able to identify the needs of this patient during a very difficult time in his life. You recognized how his prognosis was affecting him in a spiritual and cultural manner, and provided support in a manner that was appropriate for the time and situation. Great job! FB

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: a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						S	NA	S		S	S	NA	S	NA			NA	
b. Use correct technique for vital sign measurement (Responding).						S	NA	S		S	S	NA	S	NA			NA	
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).						~~S~~ NA	NA	NA		S	S	NA	S	NA			NA	
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).								NA		~~NA~~ S	S	NA	S	NA			NA	
e. Collect the nutritional data of assigned patient (Noticing).								NA		S	S	NA	S	NA			NA	
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).								NA		NA	NA	NA	NA	NA			NA	
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).								NA		~~NA~~ S	S	NA	S	NA			NA	
						CB	CB	CB		FB	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 low SpO2 reading,

and you were able to assess the situation and noticed your patient didn't have their nasal cannula in their nose. Great job! Competency C was changed to a "NA" because you did not conduct or document a safety assessment. 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 access all lab values and identify their relevance to your patient's status. There were several abnormal lab values on your assigned patient this week. (2d,g) These competencies were changed to a satisfactory because you assisted with hygiene care, assessing the skin as you performed this care. You discussed testing and patient status for your assigned patient providing nursing interventions and care needed on clinical and in your CDG. FB

Week 10 (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. (2g) Great job interpreting the lab data and diagnostic procedures that provides substantial information for the priority problem. 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: a. Receive report at beginning of shift from assigned nurse (Noticing).						NA	NA	**NA**		S	S	NA	S	NA			NA	
b. Hand off (report) pertinent, current information to the next provider of care (Responding).						NA	NA	**NA**		S	S	NA	S	NA			NA	
c. Use appropriate medical terminology in verbal and written communication (Responding).						S	NA	**S**		S	S	NA	S	NA			NA	
d. Report promptly and accurately any change in the status of the patient (Responding).						S	NA	**S**		S	S	NA	S	NA			NA	
e. Communicate effectively with patients and families (Responding).						S	NA	**S**		S	S	NA	S	NA			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			NA	
						CB	CB	**CB**		FB	FB	FB	FB	FB				

Comments

Week 6(3e): Cameron, 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 10 (3e)- Great job communicating with your patient this week, this patient was a challenge but you did a great job meeting his 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

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: a. Document vital signs and head to toe assessment according to policy (Responding).						S	NA	**S**		S	S	NA	S	NA			NA	
b. Document the patient response to nursing care provided (Responding).						S	NA	**S**		S	S	NA	S	NA			NA	
c. Access medical information of assigned patient in Electronic Medical Record (Responding).		S				~~NA~~ S	NA	**S**		S	S	NA	S	NA			NA	
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S						**S**		S	S	NA	S	NA			NA	
e. Provide basic patient education with accurate electronic documentation (Responding).								NA		NA	NA	NA	NA	NA			NA	
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						S	NA	**S**		S	S	NA	S	NA			NA	
*Week 2 –Meditech		CB				CB	CB	**CB**		FB	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. My 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. Remember there is a citation reference guide available 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 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) Your initial CDG post was within the guidelines provided within the CDG rubric, nice job! Make sure you reference how to provide an in-text citation, the peer post did not have an in-text citation that was appropriate. You cannot provide a reference but need to review the material and either provide a direct quote or paraphrase information that you obtained from the reference. 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: a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
b. Apply the principles of asepsis and standard/infection control precautions (Responding).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).								NA		NA	NA	NA	NA	NA			NA	
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
e. Organize time providing patient care efficiently and safely (Responding).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
f. Manages hygiene needs of assigned patient (Responding).								NA		S	S	NA	S	NA			NA	
g. Demonstrate appropriate skill with wound care (Responding).								NA			NA	NA	S	NA			NA	
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						U ~~NA~~	NA	S						NA				
						CB	**CB**	**CB**		**FB**	**FB**	**FB**	**FB**	**FB**				

Comments

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

Week 6(5a,b,d,e,h): Cameron, you did not self-evaluate for any competency in objective 5. Please make sure you read the following directions carefully. If the student does not self-rate a competency the competency is graded "U." A "U" in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance

tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the “U”, the faculty member (s) will continue to rate the competency unsatisfactory. CB Fire pull station: by room 3037. Fire extinguisher: by room 3036 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 and providing hygiene care for your assigned patient. FB

Week 10 (5e) Great job managing time effectively to provide all necessary care for your patient. FB

Week 12 (5 c,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

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~~ S			NA	
								CB		FB	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

Week 13 (6a)- Satisfactory completion of Care map from week 12. See rubric below. 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: a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).								NA					S	NA			NA	
b. Recognize patient drug allergies (Interpreting).								NA					S	NA			NA	
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).								NA					S	NA			NA	
d. Administer oral, intra-muscular, subcutaneous, and intradermal medications using correct techniques (Responding).								NA					S	NA			NA	
e. Review the patient record for time of last dose before giving PRN medication (Interpreting).								NA					S	NA			NA	
f. Assess the patient response to PRN medications (Responding).								NA					S	NA			NA	
g. Demonstrate medication administration documentation appropriately using BMV (Responding).								NA				NA	S	NA			NA	
*Week 11: BMV								CB				FB	FB	FB				

Comments

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) Make sure to scan all

medications before opening of the medication packaging. You demonstrated appropriate use of the barcode medication verification system for patient identification and administration of medications was saved. 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:						U	**NA**	S		S	S	NA	S	NA			NA	
a. Reflect on areas of strength**(Reflecting)																		
b. **Reflect on areas for self-growth with a plan for improvement. ****(Reflecting)						U	NA	S		S	S	NA	S	NA			NA	
c. Incorporate instructor feedback for improvement and growth (Reflecting).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
g. Comply with patient's Bill of Rights (Responding).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
i. Actively engage in self-reflection. (Reflecting)						U ~~NA~~	NA	S		S	S	NA	S	NA			NA	
*						CB	CB	**CB**		FB	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-i): Cameron, you did not self-evaluate for any competency in objective 5. Please make sure you read the following directions carefully. If the student does not self-rate a competency the competency is graded "U." A "U" in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the "U", the faculty member (s) will continue to rate the competency unsatisfactory. CB

Next week I will make sure I submitted the right copy of my evaluation, the one that has all the boxes filled out, so that I do not receive any U's. **Cameron that is a good idea to ensure that all boxes are filled out every week before submitting your clinical tool. Please note to never change a rating made by a faculty member, you are to self-rate yourself for the following week. Let me know if you have any questions. CB**

Week7: 8a: I think I had good communication and was able to hold a conversation with my patient well. We talked about how she was feeling, her life experiences, and her hobbies. CB

8b:I need to work on my time management. My patient had a breathing treatment and I sat and watched her the first time. Next clinical I will be sure to have a timely manner and to collaborate with other team members to get our jobs done at the same time. CB

* End-of-Program Student Learning Outcomes

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

WEEK 9

Week 9: 8a: I think I did good at making sure my patient stayed comfortable. I made sure to throw all his trash away, refill his water, and help him change positions as needed throughout the day. Cameron, you provided excellent care to your assigned patient during this clinical rotation. Keep up the great work! FB

Week 9: 8b: I need to work on my documentation. I take a very long time and miss some of the sections sometimes. I will improve this by practicing during lab. Practice, practice, practice, this will get you very familiar with everything that needs to be completed. Documentation is very important and I cannot express this enough. You need to make sure to be accurate and complete with everything you document in the Electronic Health Record. FB

WEEK 10

Week 10: 8a: I think I did good at handling a patient that was very rude and mad at everyone. Even though he expressed that students were not able to care for him I did what I could to keep him comfortable while going in and getting done what I needed to. Great job with communication, sometimes when a patient seems rude or mad it is their way of dealing with their illness or frustrations of not feeling themselves. Good communication can be beneficial in many ways.

Week 10: 8b: I need to work on getting more comfortable with staying in the patient's room, even if it seems like they don't want me to. I will need to document more at the computer next to the bed so that I am not taking one from an RN in the hallway. You can stay at the bedside and provide privacy for your patient by pulling the curtain turning down the lights and leaving just the desk light on. It is important to chart thoroughly and accurately. While you are learning charting while in the room will assist you if you forget to do an assessment or intervention. FB

WEEK 12

Week 12: 8a: I think I did good at assessing lung sounds. I noticed something was off and identified it as wheezes. Fran helped me identify fine crackles. Great job with assessment skills and being able to recognize abnormal lung sounds. FB

Week 12: 8b: I think I need to improve on medication administration. I forgot to scan the meds for quite a few. I made sure to watch a video to further educate myself. For your first medication administration you do a good job. I think nerves got the best of you. Remember the rights of medication administration and concentrate on the actions you are performing. The more experience you gain in medication administration the better you will become. FB

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials
11/22/2023	Impaired Gas Exchange	* S/FB	* NA/FB

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: Cameron Beltran **Date or Clinical Week:** Week 12				**Course Objective:**	6. Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*		
Criteria		**3**	**2**	**1**	**0**	**Points Earned**	**Comments**
Noticing	1.Identify all abnormal assessment findings (subjective and objective); include specific patient data.	**(lists at least 7*) *provides explanation if < 7**	**(lists 5-6)**	**(lists 5-7 but no specific patient data included)**	**(lists < 5 or gives no explanation)**	3	Great job noticing all relevant data and identifying abnormal findings that are pertinent to your determination of priority problem for your assigned patient. Some areas for improvement would be make sure to include all abnormal findings. Missing assessment data was the chest discomfort with radiating pain to the arms and the edema was not highligted. A couple of risk factors not included were anemia, and obstructive sleep apnea (OSA).
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	**(lists at least 3*) *provides explanation if < 3**		**(lists 3 but no specific patient data included)**	**(lists < 3 or gives no explanation)**	3	
	3. Identify all risk factors relevant to the patient.	**(lists at least 5*) *provides explanation if < 5**	**(lists 4)**	**(lists 3)**	**(lists < 3 or gives no explanation)**	3	
Interpreting	4. List all nursing priorities and highlight the top priority problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	2	Good job with list of priority problems. Some additional priority problems that could have been provided on the list was fluid volume excess, fatigue, ineffective breathing pattern. Potential complications should be broken down with signs and symptoms provided. For example, Respiratory complications: decreased RR, decreased O2 sats, nasal flaring, increased CO2 levels. Anxiety might be another complication: nervousness, crying, altered attention, increased HR, increased BP. Impaired nutrition: food intake less than recommended daily allowance, decreased albumin, electrolyte imbalance, decreased total protein level.
	5. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	6. Identify all potential complications for the top nursing priority problem.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**	2	
	7. Identify signs and symptoms to monitor for each complication.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**	3	
Responding	8. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	2	Great job with interventions provided. Make sure interventions are individualized to your assigned patient and prioritized. Remember to assess first, then do or implement interventions based off of assessment, and educate last. Some additional interventions could have
	9. Interventions are prioritized	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	10. All interventions include a frequency	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	

	11. All interventions are individualized and realistic	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	12. An appropriate rationale is included for each intervention	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	included the administration of pertinent medications, assess the depth, and use of accessory muscles, observe for dyspnea, monitor vital signs, and encourage cough
Reflecting	13. List all of the highlighted reassessment findings for the top nursing priority.	**>75% complete**	**50-75% complete**	**<50% complete**	**0% complete**	1	The evaluation should be of all the highlighted assessment findings. These are the findings that are related to the priority problem.
	14. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**	3	

Total Possible Points= 42 points
42-33 points = Satisfactory
32-21 points = Needs Improvement*
< 21 points = Unsatisfactory*
***Total points adding up to less than or equal to 32 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.**

Faculty/Teaching Assistant Comments: Satisfactory completion, Great job with care map!

Total Points: 38

Faculty/Teaching Assistant Initials: FB

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

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

* 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 think my strength was communication. I was not afraid to talk to my partner and ask for help when I needed it.

B. I think I need to improve on staying calm. I let me nerves get to me and that altered my thought process. I had to go back and do a couple of things that I missed the first time. **Please see instructions highlighted in blue. You did not provide what you will do to improve, how often and when you will complete the goal.**

I will practice my head to toe assessments on my own at home before coming to my next simulation.

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): Cameron Beltran (A), Kaden Troike (M), Grace Catanese (O), Lindsey Steele (O)
GROUP #: 2
SCENARIO: NF #1
OBSERVATION DATE/TIME(S): 11/7/2023 0900-1000

CLINICAL JUDGMENT COMPONENTS					OBSERVATION NOTES
NOTICING: (1,2,4,6,7) *					Noticed alarm for low Spo2 of 91% on RA Recognized deviation from normal with oxygen status Asked name and DOB for patient safety when entering the room Medication nurse noticed orders in the MAR. Noticed BP 130/72, HR of 84, RR 18, temp 99.2 Sought information related to sputum production, color, etc. Medication nurse noticed order for guaifenesin Did not ask patient about allergies prior to medication. Did not look up medications prior to administration. Did not ask patient how she safely takes medication. Wristband scanned, but not confirmed with patient prior to administration. Noticed "whistling" or wheezing upon auscultation (set as crackles). Good teamwork and collaboration to confirm accurate lung sounds of crackles. Noticed tissues with yellow sputum in the bed. Noticed persistent, productive cough. Asked about last BM, normal characteristics, etc. Asked about urination and characteristics. For scheduled medication, allergies were assessed appropriately prior to administration. Did not notice reddened heels on assessment initially. When patient complained of pain performed focused assessment and noticed reddened heels. Asked patient about pain.
• Focused Observation:	E	A	D	B	
• Recognizing Deviations from Expected Patterns:	E	A	D	B	
• Information Seeking:	E	A	D	B	
INTERPRETING: (1,2,4,6,7) *					Interpreted low Spo2 appropriately. Prioritized low Spo2 initially. Prioritized vital signs after stabilizing Spo2. Prioritized PRN medication for persistent cough.
• Prioritizing Data:	E	A	D	B	
• Making Sense of Data:	E	A	D	B	

	Did not interpret abnormal lungs sounds accurately initially. After collaboration, correctly made sense of crackles.
RESPONDING: (1,2,3,4,5,6,7) * • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B	Introduced self and role as student nurse. Elevated HOB for SOB Initiated oxygen at 2L per nasal cannula for low Spo2. Asked patient if her breathing improved after intervention to determine effectiveness Provided some education on nasal cannula Good hand hygiene for infection control. Educated patient to keep sputum next time she coughs up Checked PERRLA, accommodation, conjunctiva, did not assess oral mucosa Good skin assessment, checking temperature, moisture, edema Good teamwork by assessment nurse assisting with medication administration. Good collaboration to confirm lung sounds. Looked, listened, then palpated for abdomen assessment. Nice job. Good communication with the patient throughout assessment. ROM assessed in all extremities. Consider timing of medication administration for safety purposes. Educated on potential side effects for scheduled medications. BMV Scanner used for patient safety. Responded to reddened heels by placing a pillow under the legs.
REFLECTING: (1,2,4,5,6,8) * • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Observers did a great job actively paying attention to detail throughout scenario. Constructive feedback was provided during debriefing. Observers provided good insight on safe medication administration, including the six rights of medication administration. Observers also praised students for initiating O2 via nasal cannula for low Spo2 per orders while also discussing the need for prompt intervention. Constructive feedback was provided related to areas for improvement. Good discussion and support amongst those performing in the scenario and the observers. Everyone 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. The assessment nurse and medication nurse demonstrated collaborative communication between the team members and the patient.

SUMMARY COMMENTS: * = Course Objectives **Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.** **E= Exemplary** **A= Accomplished** **D= Developing** **B= Beginning** **Scenario Objectives:** • Demonstrate collaborative communication with patients and healthcare team members (1,3,8) * • Execute accurate and complete head to toe assessment (1,5,6,8) * • Select and administer prescribed oral medications following the six rights (1,4,5,7) * • Identify and provide accurate patient education (1,2,3,4,5,7) *	Lasater Clinical Judgement Rubric Comments: Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads. Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse. Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of the most obvious data; monitors progress but is unable to make adjustments as indicated by the patient's response. Displays proficiency in the use of most nursing skills; could improve speed or accuracy. Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered. Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses. Satisfactory completion of NF Scenario #1.

Simulation #2:

A. I noticed a lot of the interventions or steps that they missed during med administration.

B. My weakness that I should have made more notes during the simulation instead of relying on memory of what I noticed. I will improve by making sure to write down everything I see.

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: _____