

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2023

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Karli Schnellinger

Semester: Fall

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

Final Grade: Satisfactory

Date of Completion: 12/4/2023

Faculty eSignature: Heather Schwerer, MSN, RN

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)
11/10/2023	1H	Sim #1 Survey not done	10/13/2023 1H
Faculty's Name			Initials
Chandra Barnes			CB
Frances Brennan			FB
Amy Rockwell			AR
Nicholas Simonovich			NS
Heather Schwerer			HS

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		NA	NA	S	NA	S			NA	S
a. Identify spiritual needs of patient (Noticing).								NA		NA	NA	S	NA	S			NA	S
b. Identify cultural factors that influence healthcare (Noticing).								NA		NA	NA	S	NA	S			NA	S
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						NA	S	S		S	NA	S	NA	S			NA	S
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).						NA	S	S		S	NA	S	NA	S			NA	S
Clinical Location: Patient age**						CB	FB	FB		HS	AR	AR	AR	HS			HS	HS
						NA	3T, 82			3T, 68	NA	3T, 64 3T, 41	NA	3T, 67			NA	

Comments

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

Week 7 (1c,d)- Great job showing respect for your patient's needs, being compassionate and kind while delivering care. You also demonstrated the appropriate use of Maslow's hierarchy of needs during the head to toe assessment performed on your patient during this clinical experience. FB

Week 9(1a,b):I changed both of these as each patient should have the spiritual and cultural needs assessed as many times they are done as you are completing your head to toe assessment, there just may not be anything major that is identified at that time. HS

Week 11 (1c,d)- You did a great job with all aspects of care on both your patients during clinical this week. You planned their care based on their individual conditions, needs, and preferences. It isn't easy having a new patient on your second day however you embraced the challenge and did a great job! AR

Week 13 (1c,d)- You did a nice job this week in providing care for your patient based on his preferences, and needs. You allowed him to assist in making those decisions such as when he wanted to wash up and how much he needed you to assist him. HS

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

Comments

Week 7 (2a,b)- Karli, you performed a systematic head to toe assessment and retrieved all vital signs within a timely manner. FB

Week 9 (2d): You conducted a skin assessment within your head to toe assessment. HS

Week 11 (a-d)- Excellent assessment skills on both your patients this week. You accurately noticed numerous abnormal findings on each patient (skin, edema, lung sounds, etc.), discussed with faculty, and were able to relate them to each patient's current condition and situation. Great job! (2g)- Great job "putting the pieces together" when researching and discussing diagnostic testing for each patient. Keep up the good work. AR

Week 13 (2a-e)- You did a great job this week identifying the abnormal assessment findings on your patient. You were also able to identify key information regarding his diet and additional education that he needed to prevent additional issues with his priority problem. (2f)- you did not care for a patient with an NG this week. HS

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

Comments

Week 7 (3 c,d,e) Great job with the use of medical terminology use while communicating with your patient, reporting abnormal findings, and communicating effectively with staff RN. FB

Week 9 (3c-f): Nice job communicating with the patient and the nurse caring for your patient. HS

Week 11 (3d)- You notified the RN quickly after taking the patient's temperature and finding it very elevated. Because of this the patient received prompt medication and treatment. Great job! (3e)- The communication with your patients each day was effective and comforting to them. Keep up the good work. AR

Week 13 (3b-f)- You communicated very well with the patient, his wife and the primary nurse this week. You were able to report off at the end of the shift and relay the important information including the patients blood pressure as you continued to have issues with it being low throughout your shift. You were able to assess the patient and pass on that the patient remained asymptomatic with the low BP. HS

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

Comments

Week 2(4c,d): Satisfactory for listening attentively and actively participating in the Meditech orientation clinical. You showed beginning competence in the ability to access a patient's EHR, document care in an intervention, and locate patient data. You were able to access Lexicomp to locate patient education materials. Additionally, nursing policies and procedures were located on the health system intranet. Great job! NS/CB

Week 7 (4 a,b,c) Satisfactory job with documentation of head to toe assessment and vital signs. Make note of areas you may have forgot to chart on during this clinical experience, so you can improve on for future clinicals. (4f) Your initial discussion post and response was completed on time and was substantial. An area of improvement would be the in-text citation and reference.

Examples: Reference- Potter, P., Perry, A., Stockert, P., & Hall, A. (2019). *Essentials for nursing practice* (9th ed.). Mosby. **Or** Venes, D. (2021). *Taber's cyclopedic medical dictionary* (24th ed). F. A. Davis Company: Skyscape Medpresso, Inc.

In-text citations- According to Jones (1998), "students often had difficulty using APA style, especially when it was their first time" (p. 199). **or** She stated, "Students often had difficulty using APA style" (Jones, 1998, p. 199), but she did not offer an explanation as to why. **Or** APA style is a difficult citation format for first-time learners (Jones, 1998, p. 199).

If you still need some assistance reference Purdue OWL. FB

Week 9 (4d, e): I changed both of these competencies to satisfactory because you did provide education to the patient based on safety and her diet as she was NPO due to potential testing. (4f): I agree the priority problem was a little more challenging for this patient. However, her leg edema was concerning I would also be concerned that she was NPO and diabetic and the issues that could arise with that. HS

Week 11 (4a,b)- Great job with all Meditech documentation on each patient this week. They both had numerous abnormal findings and you did a great job accurately documenting them. Keep up the good work. (4f)- Satisfactory clinical discussion group posting and reply to a peer. The information you provided was accurate and thorough. Be sure to consult an APA reference source such as Purdue Owl for the correct way to cite your textbook. AR

Week 13 (4a, b,c)- You did a nice job this week obtaining the information that you needed to care for your patient. You also did a great job documenting the care that you provided to the patient. (4f)- Nice job on your CDG, and peer response this week! HS

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

Comments

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

Week 7 5h: A pull station is located across from room 3037, and a fire extinguisher is located across from room 3036. **FB**

Week 9 (5d, e): You did a nice job prioritizing your time and completing all of the necessary care needed as well as gaining additional information from the patient and then utilizing the EHR to obtain more information on the patient. **HS**

Week 11 (5b,g)- Great job with your first wound care/dressing change in the clinical setting. You were also concerned for the patient's comfort throughout the dressing change. (5d,e)- The care you provided each patient was organized and you utilized your time wisely to complete everything. Great job! **AR**

Week 13 (5e, f)- You did a nice job organizing your care, especially as busy as your patient was with the frequent urination, and the amount of medications that he needed. You also made sure to address the hygiene needs appropriately. **HS**

* 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	NA	S	NA	S			NA	S
								FB		HS	AR	AR	AR	HS			HS	HS

Comments

Week 9 (6a): You did a nice job this week especially since your patient was not currently experiencing any symptoms however we discussed the potential complications that could occur due to her being NPO and diabetic. HS

Week 11 (6a)- Great job “putting all the pieces together” to develop a plan of care for each patient by utilizing clinical judgment. This will continue to get easier with each clinical experience. AR

Week 13 (6a)-Your patient this week had a lot going on and you did a nice job using your clinical judgment skills in order to develop a patient-centered plan of care. You were able to identify that he should not be eating potato chips and why he should not be doing so and you followed up by educating the patient and his wife on the importance of what things to avoid with his current priority problem. Nice job! HS

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

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

Week 13 (7a-g)- You did a great job with medication administration this week. You followed the 6 rights and 3 checks, researched each medication thoroughly and documented appropriately. Nice job! HS

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

**** 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 7 (8a) Clinical Strengths: I was able to successfully go into the patient's room and have a conversation with them before starting. I believe another strength for me was doing the vital signs because I felt very comfortable doing them and was able to chart right in the room once I was finished. **Great job, make sure to also look at any trending in vital signs.**

Week 7 (8b) Clinical Weakness: It was hard for me to listen to my patient's lung sounds. In order to improve this, I will practice every day on my family members this week to receive more practice in listening to lung sounds before my next clinical. **Great idea, you might also resource lung sounds online and listen to the different lung sounds. This will get better with experience and actually hearing the abnormal sounds on a patient. FB**

Midterm – Karli, you are satisfactory in all related competencies at this point in the semester, great job! Review the comments throughout your tool, reflect on your strengths and weaknesses listed from your first clinical experience, and continue working hard to improve on areas of improvement. These clinical experiences are for growth and progression of learning. Keep up the great effort, we look forward to assisting you on your nursing journey!! FB

Week 9 (8a) Clinical Strengths: This week in clinical a strength that I had was doing the head-to-toe assessment on my patient. The first week I was very nervous and forget several things while performing the assessment, but I felt more confident doing it this time around and did not forget to do anything during the assessment. **I would agree you did well with your assessment this week. I think that it was also very helpful that your patient was not very complicated. The assessment will become more complicated the more complex that the patient is. But I would agree we should continue to see growth each week with your assessment skills and your comfort level with the patient. HS**

Week 9 (8b) Clinical Weakness: Although I felt a lot more confident on charting for my patient this clinical, there are still some areas of improvement for me to work on to be more accurate when charting. To help with this I will read my interventions paper on what to chart and what not to chart, as well as getting on the test meditech in the computer lab and making myself more similar with the system. **I would agree the charting is a very challenging aspect associated with the patient care. Reviewing the requirements for documentation for clinical prior to clinical would be beneficial. HS**

Week 11 (8a) Clinical Strengths: I think one of the strengths for this week in clinical was definitely talking with my patient and finding out more about them. He was a little quiet when I first walked in in the morning, but as I was in there longer, he really opened up to me and I was able to relate to him. I felt very confident going into my patient's room and charting in the room. **I agree. Great job! AR**

Week 11 (8b) Clinical Weakness: I think one of my weaknesses for this week's clinical would be assessing the grade of pitting edema. To help improve this, I will review the grading scale to help clarify the difference between the types of pitting edema. **This is a good plan for improvement. It is often difficult to assess edema, especially to the extent your patient had it. Overall you did a great job this week. Keep it up!! AR**

Week 13 (8a) Clinical Strengths: I think one of the strengths I had for this clinical was being able to assess, measure, and record my patient's urine output every time I went into the room. Even though my patient wasn't on strict Is & Os, I felt it was important to measure because one of the main reasons he was in the hospital was because of the excess fluid in his legs. **Nice job! HS**

Week 13 (8b) Clinical Weakness: I think one of the weaknesses for this clinical was being able to correlate why my patient was receiving each medication that he was, since a lot of them were essentially part of the same category. I know I will get better at this as time goes on and we learn more about medications but something I could do to help improve this for next time would be to really sit down and dive into each medication and how it effects the body rather than just skimming the surface of them, that way I am ready to answer questions about each medication that my patient has. **Yes, you will continue to get more in-depth with the medications in each course. As you continue to advance you will gain more knowledge on the specifics on each medication, however you did a great job this week as we began the process. HS**

Final Clinical Comments- Karli, congratulations on completing your first semester of clinicals in nursing school with a satisfactory evaluation! Nice job! I have seen you grow so much in the clinical setting. You have increased your confidence and skill set with each clinical experience that you experienced. I have enjoyed watching you interact with your patients and other staff members within the hospital setting. You are able to identify your weaknesses and develop a plan to improve on them. You ask appropriate questions in order to gain a better understanding of the situation, which in turn improves patient care and your knowledge base. I look forward to seeing you continue to grow and increase your knowledge in the upcoming semesters. Great job and keep up the hard work! HS

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

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

Firelands Regional Medical Center School of Nursing
Nursing Foundations 2023
Skills Lab Competency Tool

Student Name: Karli Schnellinger

<u>Skills Lab</u> <u>Competency Evaluation</u> Performance Codes: S: Satisfactory U:Unsatisfactory		Lab Skills									
	Week 1 (4)*	Week 2 (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 (1,2,3,4,5,8)*	Week 7 (2,3,4,5,8)*	Week 8 (2,3,4,5,8)*	Week 9 (2,3,4,5,8)*	Week 10 (2,3,4,5,6,8)*	Week 11 (2,5,7)*
	Date: 8/21/2023	Date: 8/30/2023	Date: 9/8/2023	Date: 9/13/2023	Date: 9/20/2023 & 9/21/2023	Date: 9/27/2023	Date: 10/4/2023	Date: 10/11/2023	Date: 10/18/2023	Date: 10/25/2023	Date: 10/31/2023
Evaluation:	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	AR	AR	NS	NS	NS	NS	NS	NS	NS	NS/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

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):

Awesome work 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. The first blood pressure measurement was set at 148/92, and you identified it as 158/102, outside of satisfactory range. The second measurement was set at 106/68 and you interpreted it as 106/70, well done! The third measurement was set at 122/76 and you identified it as 118/78, well done! You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic vital sign assessments. You did not require any prompts throughout the whole check-off, awesome work! You provided accurate detail in your communication with the “patient”. Your documentation overall looked good, with one minor error. You documented the time as 1018 rather than 0715 as stated on the paper provided. Be sure to pay close attention to detail when documenting vital sign information. Keep up the great work!! NS

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 only required one prompt throughout your check-off related to assessing sensation of extremities by asking about presence of numbness and tingling. You correctly identified lung sounds as crackles, nice 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, there are some areas for improvement. You did a good job, overall, with your Meditech documentation. You documented on the interventions listed below with minimal omissions, great work. Please review each area of documentation so you can examine areas that were omitted. I want you to feel comfortable and confident with Meditech documentation.

- Pain – Accurate and Complete.
- Safety – omitted “Pneumonia” comment as reason for isolation.
- Vital signs – Accurate and complete.
- Physical Assessment – Omitted trachea description as “midline” under the HEENT assessment. Otherwise, accurate and complete.

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

Week 6 (Personal Hygiene Skills):

Satisfactory with patient hygiene, making an occupied bed, shaving, oral care, hearing aid care, application of ace wraps, TED Hose/SCD’s, and clinical readiness scenario during guided practice. Completed Meditech documentation for Hygiene and Ted Hose. Keep up the great work! 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 required two prompts: one to verbalize the need for a chest xray to confirm placement, and one to perform a focused GI assessment prior to insertion. For irrigation, one prompt was required related to labeling the irrigation equipment appropriately. For removal, you did not require any prompts as you were able to remind yourself to confirm placement as the first step. 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. No prompts were required throughout the whole process, great work! 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 were able to remind yourself to pat dry the wound after cleansing. 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

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials
11/1/2023	Impaired Gas Exchange	*S/HS	*NA

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: Karli Schnellinger				Course Objective: Develop patient-centered plans of care utilizing the nursing process (3,4,5,6,7)*			
Date or Clinical Week: Week 11							
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!
	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	Be sure to include chest x-ray results.
	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	Include obstructive sleep apnea (OSA).
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	Great job! All pertinent to your patient.
	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	Great job on the entire interpreting section!
	6. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)	3	
	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	3	All interventions are listed, prioritized, include a rationale and frequency. They are individualized and realistic for your patient. Great job!
	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	

Reflecting	13. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	2	Include diagnostic studies in this reflection (chest x-ray, pCO2, CO2). If there are no new results you will still include them and state that.
	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.						Total Points: 41 Excellent job on your care map!! Keep up the great work next semester!	
Faculty/Teaching Assistant Comments: Karli, The information you provided on your care map was accurate and thorough! I provided some suggestions for future care maps. AR						Faculty/Teaching Assistant Initials: AR	

Nursing Foundations 2023
Simulation Evaluations

<u>Simulation Evaluation</u> Performance Codes: S: Satisfactory U: Unsatisfactory	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
	Date: 11/7/2023	Date: 11/27/2023
Evaluation (See Simulation Rubric)	S	S
Faculty Initials	AR	HS
Remediation: Date/Evaluation/Initials	NA	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. As an observer, a strength that I had was I able to observe in a quiet manner and rather than notice all the negatives my fellow classmates were doing, I recognized all of the positive actions and interventions. Also, I read and understood the objectives to the scenario and it really helped me to know what was going on and what each role was supposed to be doing. This will help in my next simulation because I will be sure to read over and understand the objectives again several times before hand. **Great job. AR**
- B. I think as an observer, an area for improvement would be to try and really notice the things that the other students were missing during the simulation because it could help them realize and hopefully fix the mistake for next time. In order to do this, I will really pay attention my next simulation as an observer and provide positive feedback to others during the debriefing afterwards. **You will have opportunities next semester to be an observer and you will also feel more comfortable with simulation by then. Good ideas for improvement. AR**

Faculty comments:

Simulation #2:

- A. I think an area of strength I had this simulation was the communication between my partner and I. Although we both missed things that we should've done throughout the simulation, we were able to help each other out and ask questions and discuss what we had to do and how we had to do it. I also think our time management was pretty good as we were able to complete the entire simulation before the time limit was up, and we got through everything we needed to do. HS
- B. An area of improvement for me would be that I did not put the nasal cannula on right away when the patient was having trouble breathing, as well as not providing education to the patient on topics such as safety and ambulation. To help improve this for the future I will review the oxygenation chapter and interventions as well as reviewing the appropriate education that I would need to provide to my patient. I could also ask my partner for help if I was confused or not sure what to do in the situation. HS

Faculty comments:

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Tylie Dauch(M), Presley Stang(A), Kailee Felder(O), Karlie Schnellinger(O)

GROUP #: 3

SCENARIO: NF Simulation #1

OBSERVATION DATE/TIME(S): November 7, 2023 1000-1100

CLINICAL JUDGMENT COMPONENTS	<u>OBSERVATION NOTES</u>
NOTICING: (1,2,4,6,7) * • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B	Assessment nurse introduced self and role. Noticed temp 99.2, SpO2 of 91% RA, HR 81, RR 20, B/P 131. Noticed Spo2 at 91% on RA. Did not seek further information on patient's cough (remediated during debriefing). Pain assessment performed. Noticed abnormal lung sounds upon auscultation (wheezing; remediated during debriefing). Noticed tissues in patient's bed. Noticed yellow sputum in the tissues. Recognized proper safety protocol during assessment and medication administration by properly raising HOB and adjusting bed height. Medication nurse introduced self and role when entering the room. Accurately identified patient name and date of birth. Noticed indications for all medications ordered. Noticed potential adverse reactions and side effects.
INTERPRETING: (1,2,4,6,7) * • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Prioritized respiratory status. Interpreted low SpO2 of 91% as requiring oxygen per physician's order. Interventions of raising the head of the bed were attempted first. Interpreted abnormal lungs sounds as related to diagnosis of pneumonia. Promoted to assess bilateral heels after complaints of pain. Placed pillow under heels, did not assess heels (remediated during debriefing). Interpreted side effects of medications appropriately. Difficulty interpreting scheduled medications times and what medications should be given (remediated in debriefing).
RESPONDING: (1,2,3,4,5,6,7) *	Practiced standard precautions with hand hygiene before entering the room.

• 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	Promptly performed a head-to-toe assessment. Collaborative communication between assessment and medication nurse. Communicated with patient about interventions being performed, with questions answered appropriately. Responded to low SpO2 of 91% by raising the head of the bed and applying oxygen at 2L per nasal cannula as per physician's orders. Responded to the patient's complaints of pain to bilateral heels by initiating a pillow to offload pressure, did not assess for redness (remediated in debriefing) Remember to re-evaluate SpO2 after oxygen applied. Communicated all medications to patient, not ordered am medications. Consider when the patient informs you that a medication is taken at another time to communicate this with the physician (remediated during debriefing). Education provided to patient on use of home oxygen therapy and incentive spirometer. Consider teach back method as evaluation of patient's understanding of education.
REFLECTING: (1,2,4,5,6,8) * • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	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 cough and deep breath to improve Spo2 levels. Observers discussed other potential educational needs related to the scenario. Noticed the need for the use of the six medication rights. Identified positive communication between team members and with the patient. 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!
SUMMARY COMMENTS: * = Course Objectives Satisfactory completion of the simulation scenario is a score of "Beginning" or higher in all areas of the rubric. E= Exemplary A= Accomplished D= Developing B= Beginning	Lasater Clinical Judgement Rubric Comments: Noticing: Attempts to monitor a variety of subjective and objective data but is overwhelmed by the array of data; focuses on the most obvious data, missing some important information. Identifies obvious patterns and deviations, missing some important information; unsure how to continue the assessment. Makes limited efforts to seek additional information from the patient and family; often seems not to know what information to seek and/or pursues

Scenario Objectives: • 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) *	unrelated information. Interpreting: Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful data. In simple, common, or familiar situations, is able to compare the patient's data patterns with those known and to develop or explain intervention plans; has difficulty, however, with even moderately difficult data or situations that are within the expectations of students; inappropriately requires advice or assistance. 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.
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Student Roles: A=Assessment Nurse; M=Medication Nurse; O=Observer

STUDENT NAME(S) AND ROLE(S): Karli Schnellinger(A), Kailee Felder(M), Tylie Dauch(O), Presley Stang(O)

GROUP #: 3

SCENARIO: NF simulation #2

OBSERVATION DATE/TIME(S): 11/27/2023 1000-1100

CLINICAL JUDGMENT COMPONENTS	<u>OBSERVATION NOTES</u>
NOTICING: (1,2,4,6,7) * • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B	Identified self and role when entering the room. Identified patient's identification band for name and date of birth. Noticed VS T 99.5, RR 28. Noticed increased respiratory rate (28), sought information about shortness of breath, and raised the head of the bed. Noticed patient moaning, sought information related to pain (location, rating) and looked at patient's right side. Noticed SpO2 alarm sounding and applied O2 at 2L per nasal cannula for a SpO2 of 88% on RA. Medication nurse noticed PRN pain medication ordered in MAR. Medication nurse introduced self. Identified patient's identification band for name and date of birth. Sought information related to patient's allergies.
INTERPRETING: (1,2,4,6,7) * • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Made sense of low SpO2, applied O2 at 2L per nasal cannula. Prioritized patient's shortness of breath and difficulty breathing and raised the head of the bed. Medication nurse prioritized morphine over Percocet administration based on physician orders. Medication nurse made sense of the morphine order, correctly wasting excess medication and prioritizing needing a witness for the waste.

RESPONDING: (1,2,3,4,5,6,7) *					Communicated interventions to be performed. Communicated pertinent information to medication nurse. Remember to prioritize a thorough, focused respiratory assessment, a full set of vital signs, and a full pain assessment due to the patient's complaints. Responded to complaints of difficulty breathing by raising the head of the bed. Responded to low SpO2 alarm and SpO2 of 88% by applying O2 at 2L per nasal cannula. Prioritized reassessment of respiratory rate before and after medication nurse administered morphine. Medication nurse responded to pain rating 7/10 by administering prn pain medication. Medication nurse selected proper medication, dose, verified name and date of birth with patient, wristband, and BMV. Verified allergies. Prepped site, used 90-degree angle and aspirated appropriately. Provided patient education on medication related to effects/side effects. Used appropriate IM injection needle (22gx1") and appropriately engaged the safety cap using the table. Remember when prepping the site, you need to use aseptic technique. Remember when administering medications, the patient's wristband is scanned prior to any medications. Reassessment and evaluation of effectiveness of morphine completed, with patient rating pain 3/10 after medication administration. Overall good communication and teamwork.
• Calm, Confident Manner: • Clear Communication: • Well-Planned Intervention/ Flexibility: • Being Skillful: B	E E E	A A A	D D D	B B B	
REFLECTING: (1,2,4,5,6,8) *					Each member participated well in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas of strength and areas for improvement including, performing a focused assessment vs. a full head to toe assessment, performing a full pain assessment, education related to patient's condition, proper technique when performing an IM injection, and reassessment of a full set of vitals after administration of a narcotic. Each member of the team reflected on clinical judgement and critical thinking. Emotions, thoughts and feelings were explored. Each member of the team demonstrated a
• Evaluation/Self-Analysis: • Commitment to Improvement:	E E	A A	D D	B B	

	desire to improve nursing performance.
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) * • 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) *	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: Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful 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 Simulation #2.

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:

I loved going to clinicals this semester! The first couple were definitely nerve racking to say the least, but the instructors were always so helpful with everything and were always there if you needed them. Having never worked in a healthcare setting before, I can definitely say that these clinicals helped me realize that I chose the right career path!

Student eSignature & Date: _Karli Schnellinger 12/4/2023_____