

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2023

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Katherine Isaac

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: Amy Rockwell, 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	11/13/2023 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:								N/A		S	N/A	S	N/A	S			N/A	S
a. Identify spiritual needs of patient (Noticing).								N/A		S	N/A	S	N/A	S			N/A	S
b. Identify cultural factors that influence healthcare (Noticing).								N/A		S	N/A	S	N/A	S			N/A	S
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						N/A	S	S		S	N/A	S	N/A	S			N/A	S
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).						N/A	S	S		S	N/A	S	N/A	S			N/A	S
Clinical Location: Patient age**						CB	NS	NS		AR	AR	HS	AR	AR			AR	AR
						N/A	3T, 76			3T, 54	N/A	3T, 87	N/A	3T, 80			N/A	

Comments

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

Week 7 1(d) – Great job using Maslow's hierarchy of needs when caring for your patient this week. You addressed her physiological needs first by noting her hypertension and re-assessing for accuracy. You also helped to meet for elimination needs by assisting her to the bathroom following your assessment. NS

Week 9- Overall you did an excellent job caring for your complex patient while respecting his individual preferences and needs, including respecting his initial refusal of fall precautions. AR

Week 11(1c,d)- You did a great job in interpreting and responding to your patient based on her specific needs. She had been hospitalized for several days therefore it was important to allow her to have a say in the care that was being provided to her, you kept her preferences and needs in mind when organizing the care. HS

Week 13- Excellent in all areas of patient care this week! He had a lot going on and you took care of all his needs! Great job! AR

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

Comments

* End-of-Program Student Learning Outcomes

Week 7 2(a,d) – Awesome job with your first physical assessment on a real patient! You appropriately identified rhonchi when auscultating lungs sounds, and confirmed your findings by reviewing the chest CT that showed abnormalities. When obtaining vital signs, you noticed pretty significant hypertension in your patient. Great job reporting your findings and re-assessing your patient for accuracy. Job well done! NS

Week 9 (2a,b)- Excellent assessment skills on your complex patient! You noticed several abnormal findings and were able to discuss these in regards to his diagnosis and medical history. (2c)- You noticed your patient was a high risk for falls and realized the precautions were not in place. You proceeded to find out why and determined that the patient had refused them, tore off his wristband, etc. You eventually convinced the patient to allow the precautions and you initiated them. Great job! (2g)- You were able to interpret numerous diagnostic findings and related them to the patient's diagnosis and medical history. Keep up the great work! AR

Week 11 (2a) Nice job with your assessment, you took your time and were able to identify the differences compared to the information you had received in report. You noticed the lung sounds were not what was reported, you also noticed that the oxygen was higher than reported. HS

Week 13 (2a-d)- Great job with your complicated patient's assessment this week. You noticed numerous abnormalities, including skin issues and that he needed a sputum specimen which you obtained and sent to lab. (2g)- You spent time researching your patient's numerous diagnoses and diagnostic testing results, and were able to adequately discuss these with faculty and through CDG posting. Keep up the great work as you proceed to next semester! AR

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

Comments

Week 7 3(d) – Great job identifying abnormal vital signs and promptly reporting your findings to the instructor for further evaluation. Good noticing and interpreting skills this week! NS

Week 9 (3e,f)- Excellent communication with your patient, fellow students, healthcare team members, and instructors. You readily assisted others as needed. Great job! AR

Week 11 (3d) You identifying that the patient blood pressure was elevated and you immediately reported it to the nurse. (3f)- You assisted another patient with a bag bath when she placed the call light on requesting assistance, nice job being part of the team. HS

Week 13 (3d)- You reported to the RN when you found a skin tear on the patient's leg, and sought out the correct way to clean and apply a dressing. Great job! (3f)- You readily assisted others when you had time, even though it wasn't your patient. Great job! AR

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

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 3(f) – Awesome work with your CDG requirements this week. Your answers were thorough and well thought out. You included reputable resources to supplement your discussion, and did an excellent job with your APA formatting for in-text citations and references. All criteria were met for a satisfactory evaluation. See my comments on your post for further details. NS

Week 9 (4a,b)- Satisfactory Meditech documentation with minimum revision or assistance needed. (4f)- Satisfactory clinical discussion group posting while following the CDG Grading Rubric. The information you provided was accurate and complete, and the response to your peer provided new insight and information. Great job! Keep it up! AR

Week 11 (4a,b,c)- Nice job documenting your vital signs, assessment and obtaining the patient information from the Electronic Medical Record this week! (f)-Nice job on your CDG this week. HS

Week 13 (4a,b)- One your first clinical day this week you did have a few minor revisions to make in Meditech, however on day two you needed none! Great job! (4f)- Great job with your clinical discussion group posting and reply to peer. The information your provided was thorough and accurate. Keep up the great work next semester! AR

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

Comments

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

Week 7: F.E.: Next to room 3027, F.P.S: Across from elevator. Thank you! NS

Week 9 (5b,d,f)- While doing your initial vital signs and assessment you noticed the patient had been incontinent during the night (while still wearing his jeans from home). You recognized the need to perform hygiene care while respecting his preferences, maintaining standard precautions, etc. Great job! AR

Week 11 (5a)- You have given yourself a “NI” for this competency, and I believe it may be because you left the bed up in the air and came to find me. You identified this as a safety concern very quickly. If you give yourself an NI please explain so that all of the necessary information is available in order to evaluate you. (d,e,f)- Your patient required frequent trips to the bathroom to urinate because she was given a diuretic, this required you to prioritize your care. You were able to identify how to safely assist your patient to the bathroom with her oxygen tubing and the fact that she was weak. Nice job! HS

Week 13 (5b,c,g)- Excellent job caring for your patient’s foley catheter and performing appropriate and safe wound care! (5d,e)- The care you provided was organized and you had good time management. This will continue to get easier for you as you progress through next semester. Great job! AR

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).								N/A		S	N/A	S	N/A	S			N/A	S
								NS		AR	AR	HS	AR	AR			AR	AR

Comments

* End-of-Program Student Learning Outcomes

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

Week 9 (6a)- Excellent job utilizing your clinical judgment skills to care for your complex patient this week. You assured the plan of care fit your patient's needs and preferences. You will continue to grow these skills as you progress through the semester and program. AR

Week 11 (6a)-Great job utilizing your judgment skills as you identified that your patient was weak, and a high fall risk and then you based her care around those concerns. HS

Week 13 (6a)- Excellent use of clinical judgment skills to plan and care for your patient. Keep up the good work! AR

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

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- Satisfactory in all medication administration skills this week! You researched and discussed the medications, removed from the pyxis, followed the 6 rights and did 3 safety checks, utilized the BMV, and gave po meds and a SQ injection. Keep up the good work! AR

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

**** 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: My organized approach to the head to toe assessment. Great strength to note! This can be overwhelming to perform on a patient for the first time. Being organized in your approach helps to ensure that you don't miss any important findings and help you to be systematic in your approach. Nice job this week! NS

Week 7: I need to work on my confidence. I need to trust that I can do it. This competency was changed to "NI" due to limited information provided. Refer to the example about highlighted in yellow/red for directions. When reflecting on an area for improvement, you want to go beyond simply recognizing an area to improve. In the future, state how you can improve in this area, and what you will do to improve by the next clinical experience. That being said, confidence in yourself is something that will grow with each experience. Once you demonstrate to yourself that you have the abilities and knowledge to perform patient care, your confidence will begin to soar. I can't wait to see you progress throughout the semester, you are off to an excellent start! NS

Week 9: My strength was that even though the nurses were treating the patient as a low fall risk, I was able to inform the patient of the importance of putting the fall precautions in place and was able to initiate the protocols. This made a huge difference for this patient's safety! Great job! AR

Week 9: My weakness was time management. I struggled keeping up with time goals when it came to getting my assessments in a timely manner. I will continue working on my time management skills. These skills will continue to improve each week of clinical. You did a great job this week! AR

Week 9- Overall you did an excellent job in clinical this week! You will continue to be more comfortable with each subsequent clinical experience. Great job! AR

Week 11: My strength is that I advocated for my patient when she was in a lot of pain and made her need for pain relief known to the nurse. Great job! Yes, as the nurse we are an advocate for our patients. HS

Week 11: My weakness is that I walked away from the bed with the bed height still up. I was trying to get Heather's attention to come look at one of my observations. I acknowledge what I did wrong and fixed it immediately. In the future, I will pay better attention to safety and bed height. Yes, we did speak about this and the safety concerns that are associated with the bed being left up in the air without anyone next to the bed. Make sure to always confirm that the bed is at the lowest height prior to walking away from the bedside. HS

Week 11- Nice job this week in clinical, you were able to see the progress that your patient had made from one clinical day to the next. Each interaction with patients will help you gain confidence and knowledge. HS

Week 12- I understand that I was late turning this in. I gave myself a U for this reflection and in the future I will be sure to turn this in on time. (8f)- Katie I changed the "U" to competency 8f for responsibility. The statement you provided here is adequate and as long as you hand it in next week on time you will now be satisfactory. Thank you. AR

Week 13: Strength- This clinical, I have managed to accomplish better time-management and that I finished a thorough and accurate assessment by 07:25 am. You sure did. Great job! AR

Week 13: Weakness- I should have found more things to do to advance my skill set as well and research my medicines and my patient's symptoms more. AR

Final- Katie, it has been an absolute pleasure working with you this semester! You provide excellent patient care and have clinical judgment skills that are well beyond that of a foundational level student. Enjoy MSN and I look forward to working with you again in AMSN! Keep up the excellent work! AR

* End-of-Program Student Learning Outcomes

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

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials
11/20/2023	Impaired Gas Exchange	* S/HS/AR	* 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.**

11/20/2023- Satisfactory care map. See attached rubric. HS/AR

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Student Name: Katherine Isaac				Course Objective: Develop patient-centered plans of care utilizing the nursing process (3,4,5,6,7)*			
Date or Clinical Week: 11/7/2023							
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	A thorough list of patient specific assessment findings were listed (15), and you identified 11 as pertaining to the priority problem. Consider including her John Hopkins fall risk score, and her use of a walker. You identified 10 abnormal lab and diagnostic finding for your patient. Nice job identifying 9 risk factors specific to your patient. Another risk factor to consider would be that she lives alone.
	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	3	You identified 12 nursing priorities based on your assessment findings and risk factors, nice job! Impaired gas exchange was identified as the top nursing priority as a result of the patient being on oxygen, becoming short of breath and a decrease in SpO2 with exertion, non-productive cough and crackles upon auscultation of the lungs. You did a nice job identifying three potential complications based on the problem of impaired gas exchange. You also identified the signs and symptoms that the patient should be monitored for. All of the data you highlighted were appropriate areas of focus specific 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	
	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	You identified ten nursing interventions related to the priority problem. They were prioritized in order and included a frequency for each intervention. Each intervention was individualized to your patient and included a rationale with it.
	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	3	You did a nice job reassessing the original assessment findings you listed at the start of the care map, be sure to include any reassessments that may have occurred of lab values or if another CT had been performed. Based on the evaluation it would be appropriate to continue the plan of care for this patient.
	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:42
Faculty/Teaching Assistant Comments: Katie, you did a great job on your nursing care map! Nice job noticing all of the abnormal assessment findings and then interpreting them and responding. You made sure to include interventions that were specifically related to the patient. I can tell that you were able to put all of the pieces together and see the whole picture. Your care map is satisfactory, nice job! Please let me know if you have any questions. Great work! HS							Faculty/Teaching Assistant Initials: HS

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

Student Name: Katherine Isaac

<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: 8/31/2023	Date: 9/7/2023	Date: 9/15/2023	Date: 9/21/2023	Date: 9/29/2023	Date: 10/3/2023	Date: 10/9/2023 10/12/2023	Date: 10/19/2023	Date: 10/24/2023	Date: 10/31/2023
Evaluation:	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	AR	AR	AR	AR	AR	AR	DW/AR	AR	AR	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):

Great job in the lab this week! You satisfactorily completed the vital sign check off during 1:1 observation, including oral temperature, radial pulse, respiratory rate, pulse oximetry, and blood pressure measurement. During the blood pressure measurement, you accurately obtained two out of two blood pressure results on the Vital Sim manikin. You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic vital signs. You did require two prompts related to orthostatic vital signs: Take supine blood pressure in both arms and thereafter use the arm with the highest systolic, and after sitting and standing the patient, wait 1-3 minutes before obtaining the blood pressure and pulse. Your Meditech documentation related to vital signs was accurate and complete. Keep up the great work!! AR

Week 4 (Assessment):

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

Week 5 (Assessment; Mobility):

Awesome job in lab this week! You have satisfactorily performed a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall very well done. You paid close attention to detail and were clearly well-prepared. The pain assessment you completed was excellent! You did not require any prompts throughout your assessment, nice work! You demonstrated professional and informative communication. You identified the lung sounds as wheezes although they were set at crackles. We discussed the difference and you verbalized understanding. Job well done!

Feedback on documentation this week: With this being the first time that you fully documented these interventions, there are some areas for improvement. You did a good job, overall, with your Meditech documentation. You documented on the interventions listed below; however, some areas were inaccurate and omitted. Please review each area of documentation within the next two weeks so you can examine areas that were omitted. I want you to feel comfortable and confident with Meditech documentation.

- Vital signs: omitted pulse rate “105”.
- Pain: accurate and complete.
- Safety: omitted “pneumonia” as reason for isolation.
- Physical Re-Assessment: other than the areas listed below, your documentation was accurate and complete:
 - HEENT: omitted left ear documentation as “normal”; omitted “midline” for trachea; omitted comment “no throat complaints”.
 - Respiratory: omitted “symmetrical” for chest expansion.
 - Cardiovascular: omitted “palpation” as method for all pulse documentation; omitted all documentation for left upper extremity edema.
 - Integumentary: omitted “no” for patient wounds.
 - Gastrointestinal: omitted “daily” for frequency of bowel movement aids used; omitted “2-3 days” for nausea/vomiting duration. AR

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

Week 6 (Personal Hygiene Skills):

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

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

Great job this week in lab demonstrating competence for Nasogastric Tube Insertion, Irrigation, and Removal through 1:1 observation. You are satisfactory in all NG skills. You did not require any prompts, and provided excellent patient education and communication! Great job! You were able to verbalize understanding of the difference between irrigation and flushing. You were able to practice administering intermittent tube feeding using the gravity method while also confirming tube placement with

gastric residual. Additionally, you participated in the PO intake station for accurate calculation of carbohydrate intake, accurately measured gastric output through the NG tube, practiced assisting a visually impaired patient with their meal, and completed the assigned documentation in Meditech. Keep up the hard work! DW/AR

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

You did a great job in the lab this week and were satisfactory with the following skills: Sterile Glove Application, Foley Catheter Insertion (female), and Foley Catheter Removal. No prompts were needed throughout the entire process! Excellent job! You were able to recognize you touched the trash bag with your sterile glove, and that you would immediately obtain new gloves. During removal you reminded yourself to empty the urine from the bag and tubing prior to proceeding to remove the StatLock. You then maintained the sterile field throughout the Foley insertion, did not contaminate the catheter or your gloves at any point, and had very good communication with your “patient”. Great job! You correctly verbalized the differences in catheter insertion for a male patient. You actively participated in the Intake and Output stations, and completed Meditech documentation related to Urinary Catheter Management and Intake & Output. Keep up the great work!!! AR

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, while putting on your sterile gloves you touched the edge of the packet and contaminated the glove. You recognized this immediately and stated how you would correct it. Great job! You did require one prompt as a reminder to assess the wound for tunneling and undermining. Your communication with the patient was excellent, and you adapted very well to the close environment you were in. Documentation was completed related to wound care and patient rounds in the Meditech system. Additionally, you participated in the stoma care station to gain additional knowledge and skills. Great job this week! AR

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

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

Week 11 (Medication Lab):

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

8/17/2023

Firelands Regional Medical Center School of Nursing
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 or 11/14/2023	Date: 11/27/2023 or 11/28/2023
Evaluation (See Simulation Rubric)	S	S
Faculty Initials	AR	AR
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, I saw that the communication between Leah and Kylee were strong and that they consulted each other when needing help with both of their assigned jobs. **AR**
- B. Leah's area of improvement is to review her safety interventions. Kylee's area is to review how to maintain med safety, including what to do with pills that are already in the patient room and if she needs something else. **AR**

Faculty comments:

Simulation #2:

- A. I utilized my resources to learn about the different medications that I would potentially be using. I was able to help Hannah inform the patient that she had already received her blood pressure medications. I also was able to make the patient aware of potential side effects of the medicine that was being given. **Great job! AR**
- B. A weakness of mine was that I severely doubted myself which resulted in loss of whatever confidence in myself that I had. When I knew I had the right dose and was prepared to give the morphine, I began questioning my math and misreading the chart. I also forgot to get Hannah to help me waste a narcotic. In the future, I will recheck my medication math to be extra sure and I will pay attention to my chart better. I will also review med administration and when I would need a second nurse in the room with me. **The safest place to realize these issues is in the simulation lab, and you have set a good plan for improvement, which will carry over to safe patient care in the clinical setting! AR**

Faculty comments:

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Leah McNeely (A), Kylie Cheek (M), Katherine Isaac (O)

GROUP #: 6

SCENARIO: NF #1

OBSERVATION DATE/TIME(S): 11/7/2023 1400-1500

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	Noticed BP of 132/76, temperature of 99.2, Spo2 of 91%, HR 82, RR 18 Sought additional information related to cough. Asked about production of sputum with cough. Identified patient with name and DOB prior to administration of medication. Remember to ask about allergies prior to medication administration – information seeking. Noticed tissues in the bed with yellow sputum. Noticed redness to the heels Noticed crackles upon auscultation. Sought information on how the patient swallows medications. Sought additional information related to fell (symptoms such as dizziness)				
INTERPRETING: (1,2,4,6,7) * • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Made sense of provider orders related to low Spo2 level. Prioritized oxygenation appropriately by initiating O2 per orders. Made sense of medication orders in the MAR Made sense of crackles related to disease process of pneumonia. Remember to prioritize patient education related to medications. Interpreted reddened heels as altered skin integrity and need for intervention.				
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 when entering the room. Hand hygiene performed for infection control. Responded to low Spo2 by initiating oxygen at 2L per NC per physician orders Consider elevating the HOB for low Spo2 Educated patient to take deep breaths when applying oxygen Provided tissues to collect sputum Used BMV scanner for patient safety related to medication administration. Thorough HEENT assessment performed, oral mucosa, conjunctiva, etc. Neuro assessment performed including PERRLA. Remember to ask about orientation (person, place, time) Thorough skin assessment. Thorough extremity assessment.				

	Good focused bowel and urinary assessment. Looked, listened, then palpated. Good teamwork and communication related to roles. Elevated HOB for medication administration. Remember to look medications up prior to administering to provide education. Responded to reddened heels by placing pillow under the legs. Good communication with the patient throughout. Educated patient on crackles and pneumonia diagnosis. Safety assessment performed related to fall. Consider implementing safety precautions (yellow sign, socks, bed alarm, etc.)
REFLECTING: (1,2,4,5,6,8) * - Evaluation/Self-Analysis: E A D B - Commitment to Improvement: E A D B	Observer 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 observer. 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	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 subtle patterns and deviations from expected patterns in data and uses these to guide the assessment. 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. Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. 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

(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) *	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.
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Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Katherine Isaac (M), Hannah Castro (A), Leah McNeely (O), Kylie Cheek (O)

GROUP #: 10

SCENARIO: NF #2

OBSERVATION DATE/TIME(S): 11/28/2023 1300-1400

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
NOTICING: (1,2,4,6,7) *						Introduced self and role when entering the room.
• Focused Observation:	E	A	D	B		Noticed low Spo2 of 91%.
• Recognizing Deviations from Expected Patterns:	E	A	D	B		Sought information related to patient's complaint of pain. (location, rating, type, duration).
• Information Seeking:	E	A	D	B		Noticed pain 7/10.
						Noticed BP 140/82, Spo2 94% on 2L NC, temp 99.5, RR 26.
						Noticed tissue with sputum in the bed.
						Sought additional information on sputum production.
						Noticed PRN orders for pain relief.
						Remember to ask about allergies prior to medication administration.
						Noticed improved pain 3/10 after medication administration.
						Noticed crackles on auscultation.
INTERPRETING: (1,2,4,6,7) *						Prioritized oxygenation status when entering the room for low Spo2.
• Prioritizing Data:	E	A	D	B		Made sense of provider orders to maintain Spo2 >93%
• Making Sense of Data:	E	A	D	B		Made sense of low spo2 related to pneumonia and COPD diagnoses.
						Prioritized focused pain assessment.
						Prioritized vital sign assessment
						Made sense of RR being elevated related to disease processes.
						Prioritized focused respiratory assessment
						Made sense of PRN pain medication orders based on patient pain rating.
						Prioritized pain medication quickly to provide comfort.
						Made sense of potential side effects of morphine administration.
						Made sense of crackles being related to pneumonia.

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	
					Remember to confirm patient's name and DOB when entering the room for patient safety. This was remembered and corrected during the scenario. Elevated HOB for low oxygen status. Educated patient on applying oxygen (nasal cannula) for low Spo2. Focused pain assessment performed due to patient complaint. Be sure to look at the pain site to gather additional data. Performed focused respiratory assessment. Communicated vital sign results with the medication nurse. Medication nurse identified patient with name and DOB and compared with wristband. BMV scanner utilized. Educated patient on morphine being an opioid. Educated on IM injection. Dosage calculation performed accurately (2ml to be administered, 4mg). Some confusion related to dose in mg to be administered (stated 2mg, actual syringe 4mg). Remediated during scenario and administered accurately. Wasted excess medication. Remember to always have a witness when wasting narcotics. Educated on injection location. Educated on potential side effects (low BP, low HR, RR), drowsiness, dizziness. Cleaned site with alcohol swab with aseptic technique Injected at 90-degree angle, remember to aspirate for presence of blood prior to injecting, slowly injected. Needle safety performed. Educated on splinting with a pillow due to pain. Encouraged the patient to cough and deep breath to clear secretions. Re-assessed pain after medication to determine effectiveness. Encouraged water intake to clear secretions. Good communication from teammate to provide education. Re-assessed vital signs after medication administration to evaluate effectiveness. Communicated vital signs with medication nurse. Good communication with the patient related to comfort. Educated on smoking cessation. Educated on potential alternatives to smoking to help with cessation.
REFLECTING: (1,2,4,5,6,8) *					
• Evaluation/Self-Analysis: E	A	D	B		
• Commitment to Improvement:	E	A	D	B	
					Each member actively participated in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas for improvement related to prioritization and IM injections and discussed ways to make improvements in the future. Observers provided

	good insight on med safety and communication amongst team members and with the patient. Identified educational opportunities that were presented in the scenario. Reflected on clinical judgement and critical thinking that required. Emotions, thoughts and feelings were explored. Each member demonstrated a 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. Makes limited efforts to seek additional information from the patient. Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient’s data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success. 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. Interventions are tailored for the individual patient; monitors patient progress closely and is able to adjust treatment as indicated by patient 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.

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 felt as though all of the comments that were made were accurate and I have taken them into consideration and will continue to improve on the areas noted.

Student eSignature & Date: Katherine Isaac 12/04/2023