

**EVALUATION OF CLINICAL PERFORMANCE TOOL  
Nursing Foundations – 2023**

**Firelands Regional Medical Center School of Nursing  
Sandusky, Ohio**

**Student:** Essence Byrd

**Final Grade:** **Satisfactory**

**Semester:** **Fall**

**Date of Completion:** 12/4/2023

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

**Faculty eSignature:** **Nicholas A. Simonovich**,

**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)
12/2/2023	1H	Late Simulation #2 Survey	12/4/2023 1H
<b>Faculty’s Name</b>			<b>Initials</b>
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.**

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Objective																		
1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*																		
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
<b>Competencies:</b>								N/A		S	S	NA	S	NA			NA	S
a. Identify spiritual needs of patient (Noticing).								N/A		S	S	NA	S	NA			NA	S
b. Identify cultural factors that influence healthcare (Noticing).								N/A		S	S	NA	S	NA			NA	S
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).						NA	S	S		S	S	NA	S	NA			NA	S
						CB	NS	NS		NS	NS	NS	NS	NS			NS	NS
						NA	3T; 72			4N, 78F	4N 70M	NA, BMV	4N 72F	NA			NA	Final
	Clinical Location: Patient age**																	

**Comments**

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

Week 7 1(c) – Essence, you did a great job during your first patient interaction as a student nurse! You coordinated your assessments appropriately while respecting his needs. You were able to complete your physical assessment with his family members in the room and respected their presence. You also noted his desire not to communicate extensively and did not push for further communication. Overall well done! NS

Week 9 1(a-d) – Essence, great job this week coordinating your care based on your patients needs. With her being one day post-op following hip surgery, you were able to prioritize comfort related to her pain, mobility, and hygiene. You tailored your assessments around her pain, and prioritized her circulatory assessment on the effected extremity. Awesome job being independent in initiating hygiene care needs for her this week. I appreciated the initiative you took in much of the care that you provided. Job well done! NS

Week 10 1(a-h) – While caring for your patient for consecutive days this week, you were able to appropriately prioritize his needs based on Maslows and other priority frameworks. You recognized his past medical history and how it would impact his overall care. You did a great job of meeting both his physiological and psychosocial needs in your care. Nice work! NS

Week 12 1(c,d) – You did a nice job this week prioritizing your patient’s pain/discomfort following her hip procedure during your care. In the post-operative period, its important to promote activity to prevent complications, but can be difficult when the patient is experiencing pain. You used a comforting approach in your care to promote comfort through communication. You respected her needs to be in the chair in the morning and accommodated by performing your physical assessment while she was in a comfortable position. Your communication with her was strong throughout the week, helping to meet her psychosocial needs. Overall a great week to be proud of! NS

\* End-of-Program Student Learning Outcomes

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

**Objective**

1. Summarize knowledge of anatomy, physiology, chemistry, nutrition, psychosocial and developmental principles in performance of basic physical assessment through use of clinical judgment skills. (3,4, 5)\*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
<b>Competencies:</b>						NA	S	S		S	S	NA	S	NA			NA	S
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
b. Use correct technique for vital sign measurement (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).						NA	NA	N/A		S	S	NA	S	NA			NA	S
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).								N/A		S	S	NA	S	NA			NA	S
e. Collect the nutritional data of assigned patient (Noticing).								N/A		NA	S	NA	S	NA			NA	S
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).								N/A		NA	NA	NA	S NA	NA			NA	NA
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).								N/A		S	S	NA	S	NA			NA	S
						CB	NS	NS		NS	NS	NS	NS	NS			NS	NS

**Comments**

**Week 7 2(a) – Great job with your first head-to-toe assessment on a real patient! You were able to use a systemic approach to ensure all aspects were completed. You noticed deviations from normal and documented your findings appropriately. NS**

Week 9 2(a,c,g) – Overall you did very well with your assessments this week. You used your knowledge and skills to notice deviations from normal, including pain in her head from her recent fall, partially limited vision with the use of glasses, throat soreness following the surgery, pain and weakness in the effected extremity, normal circulatory assessment following hip surgery, chronic numbness and tingling, surgical wound to the right hip, use of a walker with ambulation, and the presence of an indwelling urinary catheter post-op. You communicated your findings very well in the patient’s chart with accurate and thorough documentation. You understood her safety concerns following surgery and described the factors that led to her risk for falls in your CDG. You were able to go through the diagnostic testing by reviewing the x-rays pre- and post-op and discussed the findings. NS

Week 10 2(a,b,g) – Your assessment this week was thorough, noticing deviations from normal and communicating your findings appropriately in the electronic health record. Nice job noticing tremors on your assessment, among other findings. You closely monitored his vital signs due to his multiple admissions for recurrent fevers. You noticed his slightly elevated temperature of 99.3 and communicated your findings appropriately. Good work discussing his low albumin levels related to his nutritional status and discussing his reluctance to consume the ordered supplements. NS

Week 10 2(d) – You were able to gain experience with providing wound care this week. You used good technique maintaining asepsis to prevent infection and appropriately dressed a wound according to physician’s orders. Good work! NS

Week 12 2(g) – You were able to review your patient’s xrays both pre- and post-op to identify the complexity of her surgical procedure and the nursing implications in the post-operative period. Your patient shared her picture of her new hardware for her hip, and she discussed the surgeon stating the severity of the arthritis that he was working with. This helped you to understand the limitations in her mobility and the pain she was experiencing to help plan your care. NS

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

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

**Objective**

2. Select communication techniques and appropriate boundaries with patients, families, and health care team members. (1,2,3,4,6,7)\*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
<b>Competencies:</b>						NA	NA	N/A		S	S		S	NA			NA	S
a. Receive report at beginning of shift from assigned nurse (Noticing).												NA						
b. Hand off (report) pertinent, current information to the next provider of care (Responding).						NA	NA	N/A		S	S	NA	S	NA			NA	S
c. Use appropriate medical terminology in verbal and written communication (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
d. Report promptly and accurately any change in the status of the patient (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
e. Communicate effectively with patients and families (Responding).						NA	NI	NI		S	S	NA	S	NA			NA	S
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
						CB	NS	NS		NS	NS	NS	NS	NS			NS	NS

**Comments**

I feel that I need Improvement for communicating effectively with the patient and family because aside from explaining what I was doing during my assessment I did not really talk much to the patient or their guests. I was extremely nervous and going forward I will make more of an effort to communicate with the patient outside of just explaining what I am doing to them. **Thank you for sharing your thoughts on this experience! This can be very overwhelming, learning how to communicate with patients in**

a vulnerable state. I appreciate the thoughtful reflection and plan moving forward. Give yourself some grace during these early clinicals as this is all a new learning experience. This will get more comfortable with each experience! NS

Week 9 3(b,e,f) – Nice work during hand-off report communication with the assigned RN. You utilized the SBAR sheet to identify pertinent information that the next provider of care would want to know. Your assigned RN said you did a great job. You communicated effectively with your patient throughout the day, forming a good therapeutic relationship. You were an accountable member of the health care team by performing assessments, interventions, and observing and assisting with therapy during her first time getting out of bed following surgery. Great job gaining new experiences! NS

Week 10 3(a,b) – Nice job this week in receiving and providing hand-off report. You are continuing to gain confidence in communicating the care provided and ensuring the off-going shift is aware of important details. You will continue to practice report during your time in the program to improve your confidence. Your nurse said you did a nice job! NS

Week 12 3(e) – You shared in debriefing that you are shy and that it takes time for you to come out of your comfort zone. I have noticed a big improvement throughout the semester in your comfort openly communicating with patients and your peers. You have made tremendous growth in feeling comfortable striking up conversation and connecting with your patients. It has been awesome to watch your confidence improve with each experience. Great job this week developing a connection with your patient and using your communication skills to provide patient-centered care. NS

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

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

**Objective**

3. Exemplify advanced searches in accessing electronic health care information and documenting patient care. (1,4,8)\*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
<b>Competencies:</b>							S	S		S	S	NA	S	NA			NA	S
a. Document vital signs and head to toe assessment according to policy (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
b. Document the patient response to nursing care provided (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
c. Access medical information of assigned patient in Electronic Medical Record (Responding).		S				NA	S	S		S	S	NA	S	NA			NA	S
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S						N/A		NA	S	NA	S	NA			NA	S
e. Provide basic patient education with accurate electronic documentation (Responding).								N/A		NA	S	NA	S	NA			NA	S
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						NA	S	S		S	S	NA	S	NA			NA	S
<b>*Week 2 –Meditech</b>		CB				CB	NS	NS		NS	NS	NS	NS	NS			NS	NS

**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(f) – Truly nice work with your CDG requirements this week. I appreciated the thought reflection responses and insight provided with each prompt. Your APA formatting was spot on, well done! All requirements were met for a satisfactory evaluation. NS

Week 9 4(a,b,c)- I was impressed with how thorough your documentation was this week. You were independent in navigating the health record and documenting your findings. Very good work! You accurately portrayed the care and assessments that were performed in order to communicate with the health care team. You asked appropriate questions to ensure your documentation was accurate. Job well done! NS

Week 9 4(f) – Very good work with your CDG this week. All criteria were met for a satisfactory evaluation. APA formatting looked good. See my comments on your posts for further details. NS

Week 10 4(F) – All criteria was met for a satisfactory evaluation for your CDG this week. You provided good descriptive details to help support your identified priority problem. APA formatting was spot on. Nice work with your response to Kennedy, supporting your discussion with a reputable resource. NS

Week 12 4(f) – You did an excellent job with your CDG this week. You provided great detail in your response to each question prompt. You appropriately identified impaired mobility as being your patient’s priority problem following her hip replacement surgery. Your analysis of each medication was well thought out with supporting details. Nice job using a reputable resource to identify the importance of TED hose, especially following an orthopedic procedure to reduce complications. I enjoyed your reflection on your medication administration experience. It is a good thing to have nerves and anxiety related to administering medications because it shows that you know the importance of maintaining safety and performing the appropriate assessment prior to administration. Consider including the administration of pain medications as interventions related to your priority problem. Additionally, are there any other non-pharmacological interventions that could be educated on or performed to help reduce pain and discomfort with mobility? Overall nice work. Good job adding to the conversation with additional insight in your response to Kyle. All criteria were met for a satisfactory evaluation. NS

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

Comments

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

The fire pull station is located on the wall directly across from the elevators next to the nurse director's office.

The Fire extinguisher is located on the wall to the right of the nurse's station. Thank you, Essence! Great job. NS

Week 9 5 (c) – You gained experience caring for a patient with a foley catheter this week. You noted the presence of the catheter, assessed the urine characteristics, and provided hygiene care to reduce the risk of catheter related infection. You also gained experience with emptying the drainage bag while maintaining asepsis. NS

\* End-of-Program Student Learning Outcomes

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

Objective																		
5. Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*																		
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
<b>Competencies:</b>								N/A		S	S	NA	S	NA			NA	S
a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding).								S		NS	NS	NS	NS	NS			NS	NS

**Comments**

Week 9 6(a) – Good job this week using clinical judgment skills to help formulate your plan of care. You effectively prioritized her circulatory assessment and promoted hygiene and mobility during the post-operative period. You used your assessment skills to make appropriate decisions throughout the day. NS

Week 10 6(A) – You used your clinical judgement and assessment skills to appropriately identify your patient’s priority problem as being related to impaired mobility. Nice job in your CDG discussing the factors that led to this determination. You implemented your plan of care appropriately to maintain safety while also encouraging movement to prevent deconditioning. NS

Week 12 6(A) – You were able to use your assessment skills and clinical judgment to appropriately identify your patient’s priority problem as being related to limited mobility following her hip replacement. You discussed appropriate interventions to implement and developed a plan of care aimed at promoting comfort and reducing potential complications. NS

\* End-of-Program Student Learning Outcomes

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

Objective																		
6. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*																		
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
<b>Competencies:</b>								N/A					S	NA			NA	S
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).								N/A					S	NA			NA	S
b. Recognize patient drug allergies (Interpreting).								N/A					S	NA			NA	S
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).								N/A					S	NA			NA	S
d. Administer oral, intramuscular, subcutaneous, and intradermal medications using correct techniques (Responding).								N/A					S	NA			NA	S
e. Review the patient record for time of last dose before giving PRN medication (Interpreting).								N/A					S	NA			NA	S
f. Assess the patient response to PRN medications (Responding).								N/A					S	NA			NA	S
g. Demonstrate medication administration documentation appropriately using BMV (Responding).								N/A				S	S	NA			NA	S
<b>*Week 11: BMV</b>								NS				NS	NS	NS			NS	NS

**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 12 7 (a-g) – Overall you did a very nice job with your first medication administration this week. You practiced the 6 medication rights and performed 3 safety checks prior to administering medications to your patient. You were prepared and demonstrated research on the medications you were to administer and understood the rationale, side effects, and nursing implications associated with each medication. You were able to gain experience with several oral medications. While administering medications you encouraged the patient to do so independently while also monitoring closely to ensure all medications were taken safely. You did a great job discussing each medication and ensuring the appropriate assessments were performed and communicated prior to administering each medication. Job well done! NS

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

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

2. Exemplify professional conduct through self-reflection, responsibility for learning, and goal setting. (1,5,7)\*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
<b>Competencies:</b>						NA	S	S		S	S	NA	S	NA			NA	S
a. Reflect on areas of strength** (Reflecting)						NA	S	S		S	S	NA	S	NA			NA	S
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)						NA	S	S		S	S	NA	S	NA			NA	S
c. Incorporate instructor feedback for improvement and growth (Reflecting).						NA	S	S		S	S	NA	S	NA			NA	S
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).						NA	S	S		S	S	NA	S	NA			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	S	NA	S	NA			NA	S
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
g. Comply with patient's Bill of Rights (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).						NA	S	S		S	S	NA	S	NA			NA	S
i. Actively engage in self-reflection. (Reflecting)						NA	S	S		S	S	NA	S	NA			NA	S
*						CB	NS	NS		NS	NS	NS	NS	NS			NS	NS

**\*\* 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 a: I believe that one of my strengths was using nursing judgement, I was able to see that during my assessment of vital signs that the BP came back a little on the higher end and I noticed that the patient had their feet crossed so I asked them to uncross their feet and reassessed their blood pressure where I then got a lower reading. This is a great strength to note, Essence! Noticing the use of clinical judgment in just your first patient interaction is awesome to see! You will be amazed at how much this clinical judgement skill improves with each experience. Your ability to reflect on the experience and notice the positives in your thought process is great to see. Nice job ensuring accurate vital signs were obtained! NS

Week 7 b: I think that one of my weaknesses was that I was extremely anxious while in the room and because of that I redid some of my assessments more than once and I also forgot to ask the patient if they used any assistive devices. I think next time I can improve this by just taking my time more and really checking to make sure that I am doing a thorough assessment and asking all the questions I should be asking. I think this will help with my confidence overall as a whole when it comes to patient care. Good reflection! You certainly aren't alone in these feelings. The nerves and anxiety show how important this is to you. Confirming you had addressed important aspects of the assessment by going over them a second time is great! You will improve with speed, accuracy, and confidence with each experience. Keep up the hard work! NS

Week 9 a: I believe that this week my area of strength was my ability to take initiative. I was communicating with my patient, and she mentioned wanting to comb her hair, so I offered to get her washed up for the day. She said yes and I assisted her in a bag bath and gave her supplies so that she could brush her teeth and comb her hair. The PCT ended up coming in to ask if she wanted to be washed up about thirty minutes later and we had already had it done. This is an awesome strength to note this week, Essence! I noted above in my comments how much I appreciated your initiative and willingness to take action independently. I am sure your patient appreciated this very much as well! This can be difficult, especially with it being your first full day in the clinical setting. Your ability to step out of a comfort zone and seek ways to help your patient will certainly benefit you moving forward. Great work! NS

Week 9 b: I think my weakness this week would be that I had to go back and remind myself of a few things that I had to do on my head-to-toe assessment. I feel that I need to work on better memorizing all the things that I must assess so that I do not have to keep going back as much and assessing things that I should have assessed on the previous areas. I will look back and study the steps of the head-to-toe assessment that we learned in class and in skills lab so that I can have a better memory of the few things that I continue to forget. Nice job reflecting back on your experience and identifying an area you would like to grow in. This is still all very new, and it is not uncommon to forget some things along the way. However, you noted this and developed a strong plan to help you improve moving forward. With each new experience you will gain new knowledge and comfort. Keep up the hard work! NS

Week 10 a: I believe my strength this week was my increased confidence. I was a lot more confident in knowing what I was doing this time around and I didn't have to ask as many questions as I did in past clinicals. I was more able to plan out the care for my patient on my own rather than having to be told what to do by the nurse and clinical instructors. This is wonderful to read! I am happy to hear that your confidence is improving with each experience. Having the autonomy to make your own decisions and plan care for the day is great in your second clinical experience of the semester. I thought you did a great job last week! NS

Week 10 b: I think a weakness this week would be the fact that I realized that I did not make a lot of conversation with my patient aside from communicating what I was doing and why I was doing it and I realized that I was doing it because of the fact that I was told my patient was autistic and although I know autism is a spectrum and there are different functional levels for the spectrum I was assuming that my patient wouldn't be talkative due to the fact that I have an autistic sister who is basically nonverbal. I think that was an example of me using my own previous experience with someone who has autism to prejudge my patients' desire to talk. Going forward I will remember that everyone with autism is different and although there are some who are nonverbal or just do not wish to talk there are some who are not that way. This is a really nice reflection, Essence. I appreciate the level of thought and consideration that went into your identified area for improvement. We use previous experiences in nursing to help guide our care. This requires us to reflect on our experiences to make the best decisions for our patients. I think your experience with Autism certainly gave your perspective and your reflection on how to improve in this area will help in the future. Nice job! Keep up the hard work! NS

Week 12 a: I think my strength this week would have to be how thorough I was when I was triple checking my meds before administering them to my patient. I tried to make sure that I had everything correct and use my knowledge of the 6 rights learned in lecture to ensure that I was doing my med administration correctly as well as my knowledge from dosage calc to make sure all the dosages were given correctly. **Awesome!! I thought you did a great job understanding the importance of maintaining safety with med administration and following the three checks and six rights. It was a very smooth medication administration process, especially for your first time! Job well done. NS**

Week 12 b: A weakness that I think I had this week was letting PT/OT basically kick me out of the room while they were working with the patient. I felt really discouraged afterwards because I kind of just said okay and left instead of at least asking to stay in the room and observe so that I could know what they wanted done for her mobility and how they wanted her to go about doing it. I will speak up next time and ask if I can help in any way or at least stand in and observe while that are doing physical therapy with the patient. **Very good reflection! This is challenging, because you are in the student role and it can be difficult to know when to speak up and when to be more reserved. This was unfortunate, as it is a good learning experience. However, you can learn from this as well in regards to teamwork and interprofessional collaboration. What they did was wrong, but it will help you learn how to handle these situations in the future! Keep up the hard work. NS**

Final Clinical Comments – Essence, **congratulations** on completing your first semester of clinical in nursing school with a satisfactory evaluation, certainly an accomplishment worth celebrating! It was an honor to work with you throughout this semester. You have shown tremendous growth in just this one semester and I am excited to see you continue to grow throughout your time here. From your first clinical day to your last, your confidence rose and your skills improved. It was awesome to watch as you put things together and light bulbs began to light up with clinical judgement and understanding your patients as a whole. You made great use of your time and put in the effort to learn more about your patients. You were honest with yourself and your areas of weakness, and you worked hard to improve on these areas through self-reflection. You asked good, appropriate questions to enhance your learning and to promote positive outcomes for your patients. It is evident that this means a lot to you and that you truly care about your patient's well-being. Overall you had a very successful first semester! I look forward to working with you next semester as you continue your journey and take one step closer to achieving your goals. Great job and keep up the hard work! NS

**\* 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
11-4-2023	Impaired Mobility	*NS	*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.**

<b>Student Name:</b> Essence Byrd		<b>Course Objective:</b> 6					
<b>Date or Clinical Week:</b> 11-4-2023							
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 15 abnormal assessment findings were listed with good detail. 11 abnormal diagnostic findings were identified and listed. 8 risk factors were identified based on the patient's past medical history, age, etc. You did a very nice job in the noticing section of the care plan, including all relevant details demonstrated through a thorough assessment. Great work!
	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	Ten nursing priorities were identified based on the patient care provided and abnormal assessment findings identified. Impaired physical mobility was appropriately identified as the top priority nursing problem as a result of his high-fall risk score, seizure precautions, past medical history, and altered mental status. Nice work identifying potential complications that could result from his impaired mobility. Three complications were listed. Signs and symptoms were identified for each potential complication to help the nurse be proactive in identifying problems where interventions could be performed. All relevant data based on the top priority problem were highlighted to support decision making. Nice work!
	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	
Res	8. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	13 nursing interventions were provided. Each abnormal assessment finding had an assessment intervention associated.

<b>Pondering</b>	9. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	Additional interventions were listed to help improve the identified priority problem and prevent complications from occurring. Interventions were prioritized appropriately with assessment interventions taking highest priority. Each intervention was realistic to the patient situation. A time frequency was included in all 13 interventions with appropriate rationale stated to help understand why they are being performed.	
	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		
<b>Reflecting</b>	13. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	All abnormal assessment findings were evaluated with updated findings listed in the evaluation section. Based on the patient's progress and remaining limitations, it was appropriately determined to continue the plan of care.	
	14. Evaluation includes one of the following statements: <ul style="list-style-type: none"> <li>• Continue plan of care</li> <li>• Modify plan of care</li> <li>• Terminate plan of care</li> </ul>	Complete			Not complete	3		
<p>Total Possible Points= 42 points  42-33 points = Satisfactory  32-21 points = Needs Improvement*  &lt; 21 points = Unsatisfactory*  <b>*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.</b></p> <p><b>Faculty/Teaching Assistant Comments: Essence, I can tell you put a lot of time and effort into understanding and developing your first care map. Your provided excellent detail in each section, demonstrated a good thought process and understanding, and followed each section of the grading rubric. I hope this experience helped tie together all aspects of clinical judgement in a patient care situation and allows you to visualize how each section is connected. You are off to a great start in putting the various pieces together. You are satisfactory in your care map submission and do not have to complete any remediation. Don't hesitate to reach out with any questions or concerns. Excellent work!! NS</b></p>							<b>Total Points: 42/42 - Satisfactory</b>	
							<b>Faculty/Teaching Assistant Initials: NS</b>	

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

Student Name: Seannita Byrd

<b>Skills Lab Competency Evaluation</b>	<b>Lab Skills</b>										
	<b>Week 1 (4)*</b>	<b>Week 2 (2,3,5,8)*</b>	<b>Week 3 (2,3,4,5,8)*</b>	<b>Week 4 (2,3,4,5,8)*</b>	<b>Week 5 (2,3,4,5,8)*</b>	<b>Week 6 (1,2,3,4,5,8)*</b>	<b>Week 7 (2,3,4,5,8)*</b>	<b>Week 8 (2,3,4,5,8)*</b>	<b>Week 9 (2,3,4,5,8)*</b>	<b>Week 10 (2,3,4,5,6,8)*</b>	<b>Week 11 (2,5,7)*</b>
	<b>Date:</b> 8/21/2023	<b>Date:</b> 8/30/2023	<b>Date:</b> 9/8/2023	<b>Date:</b> 9/13/2023	<b>Date:</b> 9/20,21/2023	<b>Date:</b> 9/27/2023	<b>Date:</b> 10/4/2023	<b>Date:</b> 10/11/2023, 10/12/2023	<b>Date:</b> 10/18/2023	<b>Date:</b> 10/25/2023	<b>Date:</b> 10/31/2023
Performance Codes: S: Satisfactory U: Unsatisfactory											
Evaluation:	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>
Faculty Initials	AR	AR	AR	NS	AR	NS	AR	AR	FB	NS/AR	AR
<b>Remediation: Date/Evaluation/Initials</b>	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
<b>Remediation: Date/Evaluation/Initials</b>	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 not require any prompts throughout the entire checkoff! Your Meditech documentation related to vital signs was accurate and complete. You were well-prepared for the checkoff. Keep up the great work!! AR

**Week 4 (Assessment):**

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

**Week 5 (Assessment; Mobility):**

Great job in lab this week! You have satisfactorily demonstrated a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall well done. You did require 1 prompt related to assessing facial symmetry by have the patient lift their eye brows and smile. You demonstrated friendly, professional, and informative communication. You were able to correctly identify the lung sounds as crackles. Great job!

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 “105” for heart rate; omitted “32” for respiratory rate.
- Pain – omitted “relaxation techniques” for pain management.
- Safety – accurate and complete.
- Physical Re-Assessment: Other than the areas below, all documentation was accurate and complete:
  - HEENT: omitted “none” from neck symptoms; omitted documentation that left ear was “normal”.
  - Cardiovascular: added “pitting” to left upper extremity edema documentation.
  - Gastrointestinal: omitted “nausea, vomiting, and constipation” from GI symptoms. 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! NS

**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. During insertion, you required one prompt related to performing a GI assessment on the patient prior to beginning the procedure. You were able to remind yourself to measure the tube prior to applying lubrication and attempting insertion. During irrigation you received one prompt related to the injection of air into the blue port of the tube. When injecting the air, you will not pull back and withdraw what you put in. During removal you required two prompts; one for remembering to aspirate gastric contents as one way to verify tube placement, and one prompt as a reminder to always raise the side rail before leaving the bedside and room. Excellent patient education and communication provided! Great job! You were able to verbalize understanding of the difference between irrigation and flushing. You were able to practice administering intermittent tube feeding using the gravity method while also confirming tube placement with gastric residual. Additionally, you participated in the PO intake

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

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

You did a great job in the lab this week and were satisfactory with the following skills: Sterile Glove Application, Foley Catheter Insertion (female), and Foley Catheter Removal. No prompts were needed throughout the whole process! Excellent job! You were able to state you touched the patient's leg with your sterile glove while placing the fenestrated drape, and would need to replace your sterile gloves. You maintained the sterile field throughout the remainder of the Foley insertion, did not contaminate the catheter, and had very good communication with your "patient". You were very thorough and detailed throughout the foley skills. 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, you did not require any prompts and initiated/maintained the sterile field and followed aseptic technique throughout. Your communication with the patient was excellent. Documentation was completed related to wound care and patient rounds in the Meditech system. Additionally, you participated in the stoma care station to gain additional knowledge and skills. Clinical scenario questions were presented to the group with active participation from all students. Great job this week! FB

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

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

**Week 11 (Medication Lab):**

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

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

<b><u>Simulation Evaluation</u></b>	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
	<b>Date:</b> 11/7/2023	<b>Date:</b> 11/27/2023
Performance Codes:  S: Satisfactory  U: Unsatisfactory		
Evaluation (See Simulation Rubric)	S	U *
Faculty Initials	CB	CB
<b>Remediation:</b> <b>Date/Evaluation/Initials</b>	NA	12/4/2023 S/NS

\* Course Objectives

- A. Reflect on an area of strength after observing/participating in each simulation scenario.
- B. Recognize one area for improvement and set a goal to meet this need.

The goal must include what you will do to improve, how often you will do this, and when you will complete the goal (example- "I forgot to raise the head of the bed when the patient began having trouble breathing. I will review the proper nursing interventions for dyspnea in the textbook and on skyscape twice before the next simulation scenario").

Simulation #1:

- A. An area of strength I believe that I have after this simulation was my communication and educational skills. I feel that I did well communicating with the patient and the Medication Nurse as well as doing well on educating the patient on the reasons for the head-to-toe assessment and the reason that we put fall precaution into place.**NS**
- B. An area of weakness I believe that I have after this simulation would be the fact that I at times get so overwhelmed that I forget important things. During the simulations I left the room without implementing the safety precautions of lowering the bed to the lowest setting and replacing the siderail after I had lowered it. I will make sure that all safety precautions are implemented prior to leaving the patients room in order to ensure the safety of the patient.**NS**

Faculty comments:

Simulation #2:

- A.  
An area of strength that I believe I have after this simulation is my ability to be able to help those who I am working with and my ability to catch things that could have possibly been missed.**NS**

C. An area of weakness that I feel I after this simulation is that although there were a lot of things that I did realize were missed by my classmates there were also things that I as the observer also missed because of the fact that I would be focusing on something else that was being done instead of focusing on the patient's response. Going forward I will make sure that I pay closer attention to the patients responses and to what the patient is expressing even when it is nonverbal. **NS**

Faculty comments: **Simulation #2 was evaluated as "U" due to late submission of the simulation #2 survey and late submission of the simulation reflection comments. Remediation was evaluated as "S" for remediation for turning the tool in and completing the simulation survey on 12/4/2023. NS**

## Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Jenny Bilbrey(M), Nikki Papenfuss(O), Seannita Byrd(A)

GROUP #: 5

SCENARIO: NF Simulation #1

OBSERVATION DATE/TIME(S): November 7, 2023 1300-1400

CLINICAL JUDGMENT COMPONENTS	OBSERVATION NOTES
<p><b>NOTICING: (1,2,4,6,7) *</b></p> <ul style="list-style-type: none"> <li>• Focused Observation:           E       A       D       B</li> <li>• Recognizing Deviations from Expected Patterns:           E       A       D       B</li> <li>• Information Seeking:           E       A       D       B</li> </ul>	<p>Assessment nurse introduced self and role. Identified patient with name and date of birth when entering the room for patient safety. Noticed temp 99.2, SpO2 of 91% RA, HR 78, RR 20, B/P 130/74. Noticed temp 99.2 as slightly elevated. Noticed Spo2 at 91% on RA. Did not seek further information on patient's cough.</p> <p>Pain assessment performed.</p> <p>Noticed crackles upon auscultation.</p> <p>Noticed tissues in patient's bed. Did not notice yellow sputum (remediated in debriefing).</p> <p>Medication nurse introduced self and role when entering the room. Performed 6 rights of medication administration by using the BMV scanning system for patient safety. Accurately identified patient name and date of birth. Information obtain from patient about how medications are taken at home. Asked patient about allergies.</p>
<p><b>INTERPRETING: (1,2,4,6,7) *</b></p> <ul style="list-style-type: none"> <li>• Prioritizing Data:           E       A       D       B</li> <li>• Making Sense of Data:       E       A       D       B</li> </ul>	<p>Prioritized respiratory status, seeking information related to breathing.</p> <p>Interpreted temp 99.2 as related to pneumonia diagnosis.</p> <p>Interpreted low SpO2 of 91% as requiring oxygen per physician's order.</p> <p>Interpreted crackles as related to diagnosis of pneumonia (fluid in lungs).</p> <p>Prioritized safety precautions related to recent fall.</p>

<p><b>RESPONDING: (1,2,3,4,5,6,7) *</b></p> <ul style="list-style-type: none"> <li>• Calm, Confident Manner: E A D B</li> <li>• Clear Communication: E A D B</li> <li>• Well-Planned Intervention/ Flexibility: E A D B</li> <li>• Being Skillful: E A D B</li> </ul>	<p>Practiced standard precautions with hand hygiene before entering the room.</p> <p>Promptly performed a head-to-toe assessment.</p> <p>Collaborative communication between assessment and medication nurse.</p> <p>Communicated with patient about interventions being performed, with questions answered appropriately.</p> <p>Good therapeutic communication utilized by the assessment and medication nurse while with the patient.</p> <p>Responded to low SpO2 of 91% by raising the head of the bed and applying oxygen at 2L per nasal cannula as per physician's orders.</p> <p>Responded to redness of the bilateral heels by initiating a pillow to offload pressure.</p> <p>Encouraged patient to cough and deep breath.</p> <p>Appropriately used the BMV scanning system for medication safety. Communicated medications to be administered.</p> <p>Difficulty answering questions related to reason medications are taken prompted by patient. Consider writing information about medications down and bringing it with you to the bedside. Remember to never leave medication unattended at the bedside.</p>
<p><b>REFLECTING: (1,2,4,5,6,8) *</b></p> <ul style="list-style-type: none"> <li>• Evaluation/Self-Analysis: E A D B</li> <li>• Commitment to Improvement: E A D B</li> </ul>	<p>Observers provided good insight during debriefing. Noticed the good infection control measures. Discussed initiating O2 via nasal cannula for low Spo2 per orders. Discussed strengths of both the assessment nurse and medication nurse. Constructive feedback was provided. Observers discussed potential educational needs related to the scenario. Noticed the implementation of the six medication rights. Identified positive communication between team members and with the patient.</p> <p>Participated well in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas for improvement and discussed ways to make improvements in the future. Good discussions amongst all members of the team. Nice job!</p>
<p><b>SUMMARY COMMENTS: * = Course Objectives</b></p> <p><b>Satisfactory completion of the simulation scenario is a score of “Beginning” or higher in all areas of the rubric.</b></p> <p><b>E= Exemplary</b></p> <p><b>A= Accomplished</b></p> <p><b>D= Developing</b></p> <p><b>B= Beginning</b></p>	<p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing:</p> <p>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.</p> <p>Identifies obvious patterns and deviations, missing some important information; unsure how to continue the assessment.</p> <p>Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads.</p> <p>Interpreting:</p> <p>Makes an effort to prioritize data and focus on the most important, but also attends to less relevant</p>

<p><b>Scenario Objectives:</b></p> <ul style="list-style-type: none"> <li>• Demonstrate collaborative communication with patients and healthcare team members (1,3,8) *</li> <li>• Differentiate between need for complete head to toe versus focused assessment and execute accordingly (1,5,6,8) *</li> <li>• Select and administer prescribed oral and intramuscular medications following the six rights (1,4,5,7) *</li> <li>• Identify and provide accurate patient education (1,2,3,4,5,7) *</li> <li>• Recognize patient oxygenation and pain control needs and provide appropriate interventions (2,4,5,6,7) *</li> </ul>	<p>or useful data.</p> <p>In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.</p> <p>Responding:</p> <p>Is tentative in the leader role; reassures patients and families in routine and relatively simple situations, but becomes stressed and disorganized easily.</p> <p>Generally, communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport.</p> <p>Develops interventions on the basis of the most obvious data; monitors progress but is unable to make adjustments as indicated by the patient's response.</p> <p>Is hesitant or ineffective in using nursing skills.</p> <p>Reflecting:</p> <p>Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered.</p> <p>Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses.</p>
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## Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Jennifer Bilbrey(A), Nikki Papenfuss(M), Tylie Dauch(O), Seannita Byrd(O)

GROUP #: 5

SCENARIO: NF simulation #2

OBSERVATION DATE/TIME(S): 11/27/2023 1300-1400

CLINICAL JUDGMENT COMPONENTS						OBSERVATION NOTES
<b>NOTICING: (1,2,4,6,7) *</b>						Introduced self and role. Identified patient's identification band for name and date of birth.
• Focused Observation:	E	A	D	B		Noticed VS T 99.5 HR 85 RR 14 B/P 139/81 SpO2 88% on RA. (promoted to reassess RR- new assessment RR 26).
• Recognizing Deviations from Expected Patterns:	E	A	D	B		Noticed SpO2 of 88% on RA. Applied oxygen at 2L per nasal cannula.
• Information Seeking:	E	A	D	B		Noticed tissues with yellow sputum.

	<p>Noticed cough and need to perform focused respiratory assessment.</p> <p>Noticed abnormal lung sounds as wheezes or rales (remediated in debriefing that lung sounds were crackles).</p> <p>Noticed patient moaning when coughing. Performed a focused pain assessment (rating, location, aggravating factors, what improves it). Remember to ask location and type of pain.</p> <p>Noticed after prompting from patient, pain medication needed before head to toe assessment completed.</p> <p>Medication nurse introduced self and role. Sought information seeking patient's name and date of birth while observing patient's identification band.</p> <p>Medication nurse recognized medication orders in MAR.</p> <p>Medication nurse sought information regarding location and rating of patient's pain.</p>
<p><b>INTERPRETING: (1,2,4,6,7) *</b></p> <ul style="list-style-type: none"> <li>• Prioritizing Data: E A D B</li> <li>• Making Sense of Data: E A D B</li> </ul>	<p>Prioritized vital sign assessment. Prioritized focused respiratory assessment. Prioritized pain assessment.</p> <p>Prioritized O2 administration with nasal cannula at 2L. Made sense of low SpO2.</p> <p>Prioritized pain management prior to finishing the head to toe assessment.</p> <p>After prompting, the medication nurse made sense of the morphine order, correctly wasting excess medication and prioritizing needing a witness for the waste.</p>
<p><b>RESPONDING: (1,2,3,4,5,6,7) *</b></p> <ul style="list-style-type: none"> <li>• Calm, Confident Manner: E A D B</li> <li>• Clear Communication: E A D B</li> <li>• Well-Planned Intervention/ Flexibility: E A D B</li> <li>• Being Skillful: E A D B</li> </ul>	<p>Communicated interventions to be performed.</p> <p>Communicated findings with medication nurse related to pain and vital signs.</p> <p>Medication nurse responded to increased pain by calling respiratory therapy requesting a breathing treatment. Prompted by respiratory therapy that a breathing treatment wasn't due and that it would not alleviate patient's pain.</p> <p>Medication nurse responded to pain rating 7/10 after prompting, and administered prn pain medication. Medication nurse selected proper medication, verified name and date of birth with patient, wristband, and BMV. Verified allergies. Prepped site and used 90-degree angle. Provided patient education on medication related to effects/side effects. Remember, before injecting medication, you need to aspirate to ensure there is no blood, and you have correct placement. Also, the proper IM injection needle to use is 22gx1".</p>
<p><b>REFLECTING: (1,2,4,5,6,8) *</b></p> <ul style="list-style-type: none"> <li>• Evaluation/Self-Analysis: E A D B</li> <li>• Commitment to Improvement: E A D B</li> </ul>	<p>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 including looking at the area where the pain is located, 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.</p>

	<p>Emotions, thoughts and feelings were explored. Each member of the team demonstrated a desire to improve nursing performance.</p>
<p><b>SUMMARY COMMENTS: * = Course Objectives</b></p> <p><b>Satisfactory completion of the simulation scenario is a score of “Developing” or higher in all areas of the rubric.</b></p> <p><b>E= Exemplary</b></p> <p><b>A= Accomplished</b></p> <p><b>D= Developing</b></p> <p><b>B= Beginning</b></p> <p><b>Scenario Objectives:</b></p> <ul style="list-style-type: none"> <li>• Demonstrate collaborative communication with patients and healthcare team members (1,3,8) *</li> <li>• Differentiate between need for complete head to toe versus focused assessment and execute accordingly (1,5,6,8) *</li> <li>• Select and administer prescribed oral and intramuscular medications following the six rights (1,4,5,7) *</li> <li>• Identify and provide accurate patient education (1,2,3,4,5,7) *</li> <li>• Recognize patient oxygenation and pain control needs and provide appropriate interventions (2,4,5,6,7) *</li> </ul>	<p>Lasater Clinical Judgement Rubric Comments:</p> <p>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.</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent 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.</p> <p>Responding: Is tentative in the leader role; reassures patients and families in routine and relatively simple situations, but becomes stressed and disorganized easily. Shows some communication ability (e.g., giving directions); communication with patients, families, and team members is only partly successful; displays caring but not competence. 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. Is hesitant or ineffective in using nursing skills.</p> <p>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.</p> <p><b>Satisfactory Completion of NF Simulation #2.</b></p>

**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:

These experiences were very helpful with my learning and application of what was being learned. The feedback that I have received over the weeks we have had clinical, and simulations have helped me greatly to understand what I need to improve on to become a better nurse in the future. I appreciate all the feedback I was given, and I feel that it will help me grow as a nurse.

Empty rectangular box for signature or date.

Student eSignature & Date: Seannita Essence Byrd 12/4/2023