EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2023

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Destiny Houghtlen

Final Grade: Satisfactory

Semester: Fall

Date of Completion: 11/30/2023

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

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

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)

Faculty's Name	Initials
Chandra Barnes	CB
Frances Brennan	FB
Amy Rockwell	AR
Nicholas Simonovich	NS
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: a. Identify spiritual needs of patient (Noticing).								NA		S	N/A	S	N/A	S			N/A	S
b. Identify cultural factors that influence healthcare (Noticing).								NA		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
						CB	CB	CB		HS	AR	AR	AR	HS			AR	AR
Clinical Location; Patient age**						N/A	76 F 3T	NA		67 M 3T	N/A	78 F 3T	N/A	72 M 3T				

Comments

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

Week 7(1c,d) – Nice job this week interacting with a patient for the first time in the clinical setting. You were able to respect your patient's preferences, values, and needs when entering the room to obtain vital signs and a head to toe assessment. You used Maslow's to determine the importance of assessing vital signs and an assessment to meet the physiological needs of your patient first, great job! CB

Week 9 (1c,d): You had a very interesting patient this week! Nice job noticing the key assessment findings that the patient had as well as interpreting them within the context of his history. He was a great patient as he was able to communicate with you and the way that he opened up to you and was honest about some of his decisions that are impacting his health. HS

Week 11 (1a-d)- Great job this week providing all aspects of care to your complex and somewhat non-compliant patient. You respected the patient's preferences and refusals and were able to provide the care she needed. It isn't easy caring for some patient's however you did a great job! Keep up the great work. AR

Week 13 (1c, d)- You did a nice job this week on both of your patients especially since they were very different in the care that was provided and the preferences and the needs that were identified for each patient. HS

* End-of-Program Student Learning Outcomes
Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

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

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

Comments

Week 7(2a,b): This week you were able to use skills learned in the lab and take content learned in theory and combine them to apply your knowledge in the clinical setting. You were successful in obtaining vital signs and a head to toe assessment on a live patient for the first time. You were able to notice your patient had pitting edema to their bilateral lower extremities, and you were able to use your clinical judgement to further assess the situation by reviewing their previous assessment findings. Great job!. CB

Week 9 (2d): I changed this to a satisfactory rating as you did complete a head to toe assessment on this patient as well as determine that the patient was not at risk for pressure ulcers based on his Braden score. HS

Week 11 (2a-d)- Excellent in all areas of assessment during both clinical days this week. You noticed abnormal assessment findings (numerous respiratory system findings) and utilizing clinical judgment you “put the pieces together” very well. Even though your patient was a low risk for falls you initiated the use of yellow safety socks for her. Great job! These skills will continue to develop even further with each subsequent clinical experience. (2g)- Great job researching and understanding the patient’s various abnormal diagnostic tests, with one example being the elevated CO2 along with her COPD diagnosis! Keep up the great work! AR

Week 13 (2a-d)- You were able to complete your head to toe assessment on your patient the first day even though he really did not want to participate, he preferred to sleep rather than being bothered. You were able to conduct a fall/safety assessment and maintain safety precautions for the patient and it was identified early on the importance on utilizing the bed alarm since the patient continued to get up on his own and was incontinent frequently regardless of the reminders that you provided to him. HS

* End-of-Program Student Learning Outcomes
Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: a. Receive report at beginning of shift from assigned nurse (Noticing).						N/A	N/A	**NA**		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	**NA**		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	N/A	**NA**		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	CB	**CB**		HS	AR	AR	AR	HS			AR	AR

Comments

Week 7(3e): Destiny, you did a great job communicating effectively with your patient this week! I know this can be challenging for the first time in the clinical setting, however you were able to use appropriate communication skills to learn more about your patient. CB

Week 9 (3e): You did a great job communicating with this patient. As you discovered while talking with him, that he was willing to open up regarding his history and some of the decisions that he has made and how they are now impacting his health. This was a great example of how effective communication can be when you approach the patient in a calm manner and allow time for him to open up. Nice job! HS

Week 11 (3e,f)- Excellent communication with your complex and somewhat non-compliant patient, along with fellow students and healthcare team members. You readily assisted others when time allowed, and always had a smile on your face. Great job! AR

Week 13 (3f)- You did a nice job this week, after identifying that you patient did not eat breakfast, nor had he ordered anything. You identified that he was a diabetic patient and that it was important for him to eat. You were able to talk him into ordering breakfast, and then found the hospitality associate and had her go back to the patients room so that he could order his breakfast. HS

* End-of-Program Student Learning Outcomes

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

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: 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	~~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).								NA		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	CB	**CB**		HS	AR	AR	AR	HS			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(4 a,c,f): Good job with your documentation of vital signs and a head to toe assessment, you were very thorough and detailed. My only advice for documentation of the head to toe assessment is to make sure you click on the + sign in the top left corner every time so you don't miss anything and always have the meditech guidelines with you to ensure you are documenting on the correct areas. Great job on your first CDG, you met all requirements of the grading rubric. Your intext citation for your original

post should be, (Potter et al., 2019, p.162). If you have additional questions regarding intext citations or references, there is a APA list under clinical resources on Edvance360. I changed competency 4b to a “S” because documenting vitals and an assessment is documenting information related to the patient’s response to care. CB

Week 9 (4f): Nice job overall with your CDG this week, however be sure to specifically address the priority problem as well as making sure that it is not a medical diagnosis. You did a nice job addressing the symptoms that the patient was experiencing, and including the citations. HS

Week 11 (4a,b)- Overall great job with your Meditech documentation over both clinical days. There were a few areas that required revision on the first day; on the second day you did not require revisions and showed improvement. With time you will become even more comfortable with documentation. (4f)- Satisfactory clinical discussion group posting and reply to a peer. Your posts were in-depth and provided an accurate summary of your patient. Keep up the great work! AR

Week 13 (4a, b, c)- You did a nice job using the EMR to retrieve the patient information that was need to care for the patient. Your documentation was very thorough this week. (4f)- You did a nice job this week on your CDG, and your response to your peer. Both posts consisted of a lot of important information, nice job as you continue to fit the pieces together. HS

* End-of-Program Student Learning Outcomes
Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

4. Exemplify psychomotor skills and nursing care safely using evidence-based practice. (3,4,5,7,8)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: 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			NA	S
b. Apply the principles of asepsis and standard/infection control precautions (Responding).						N/A	S	S		S	N/A	S	N/A	S			NA	S
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).								NA		N/A	N/A	N/A	N/A	N/A			NA	**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			NA	S
e. Organize time providing patient care efficiently and safely (Responding).						N/A	S	S		S	N/A	S	N/A	S			NA	S
f. Manages hygiene needs of assigned patient (Responding).								NA		S	N/A	S	N/A	S			NA	S
g. Demonstrate appropriate skill with wound care (Responding).								NA			N/A	N/A	N/A	N/A			NA	**NA**
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						N/A	S	S						N/A				S
						CB	**CB**	**CB**		**HS**	**AR**	**AR**	**AR**	**HS**			**AR**	**AR**

Comments

****You must document the location of the pull station and extinguisher here for your first clinical experience. A fire extinguisher is across from room 3035 and a pull station is located across from room 3037. CB**

Week 9 (5d,e): You did a nice job this week organizing your time in order to complete all of the patient care that needed to be performed as well as making sure to take time to gather information from the patient as well as the EHR. HS
Week 11 (5d,e)- The care you provided was organized and you had effective time management throughout both days of clinical. You completed everything completely and thoroughly. Great job! AR

Week 13 (5b,d) You responded to a patient that was not assigned to you, when you were walking by the room and observed the patient vomiting into his urinal. You immediately responded to the situation even though the patient was not assigned to you and you did not know the specifics on the patient. You followed the precautions identified on the door and responded appropriately in assisting the patient by obtaining an emesis bag for him to use. Nice job! HS
* End-of-Program Student Learning Outcomes
Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

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

Comments

Week 9 (6a): You did a nice job this week utilizing clinical judgement skills in order to develop the plan of care for your patient. The more comfortable you get with assessing your patient and noticing those abnormal assessment findings the easier it will be for you to develop that plan of care for the patient. You did a nice job identifying the irregular heart sounds this week and then identifying the bowel sounds compared to the lung sounds. HS

Week 11 (6a)- The plan of care you developed for your patient was appropriate to her condition and situation. You utilized clinical judgment skills as you planned and carried out the care. Keep up the great work! AR

Week 13 (6a)- Great job this week in using your clinical judgement skills in order to provide care for your patient. You were able to assess your patient and identify the priority problem and establish the plan of care around those areas. HS

* End-of-Program Student Learning Outcomes

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

Objective

6. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*

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

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: **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	**S**		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	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	N/A	S			N/A	**S**
*						CB	CB	**CB**		HS	AR	AR	AR	HS			AR	**AR**

Week 13 (7a-g)- Great job this week with medication administration. You followed all of the appropriate procedures in safely administering your patients ordered medications. You were able to look up the medications and find all of the necessary information prior to administering the medications. Nice job! HS

* End-of-Program Student Learning Outcomes

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

**** 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

One strength of mine was that I was able to effectively communicate with my patient. Destiny, you did a great job this week communicating with both of your patients. I know that it was probably a little frustrating having to change patients halfway through an assessment due to your original patient having testing done, but you did great. CB

One weakness of mine was that I did not feel as confident completing my head-to-toe assessment. I will practice my head-to-toe on two people in my family this week and read through the check list this week, so I am able to feel more comfortable. Destiny, this is a great plan to help you feel more confident in completing your head to toe assessment on real patients. I know the first couple of clinicals can be overwhelming, but you have a great plan in place to be successful. CB

* End-of-Program Student Learning Outcomes

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

Week 9

One strength of mine was that I was able to obtain a set of vital signs and understand if they were normal or abnormal for my patient by comparing them to the trend and communicating with the assigned nurse. You did a nice job reviewing the chart and communicating with the nurse assigned to the patient. HS

One weakness of mine was I was extremely nervous going into the patient's room for this clinical as a student nurse. I am going to look over my material more a couple days before clinical and also give myself more time in the morning, so I am able to work through my nerves and feel a little more comfortable. I would agree that nerves are a common concern when entering the patients' room for the first few weeks, and that will decrease as the weeks progress and as your knowledge continues to grow. I would like to see a more specific weakness in the weeks moving forward. HS

Week 11

One strength of mine was that I was able to document my head-to-toe assessment properly with no errors and I feel confident in my documenting. I agree! Great job! AR

One weakness of mine was I did not feel like I was able to be in my patient's room when other members of the healthcare team were in the room. I did not want to interrupt but I would like to hear what others say about my patient's status. I will improve on this by next clinical by being in my patient's room more often. I will also see if the nurse knows when other members of the healthcare team usually stop by patients' rooms. I will also plan on asking the patient ahead of time if they mind if I am in the room when others are in the room. This will ensure I am more comfortable coming in the room to listen or watch what others need to do or say. This is a good plan for improvement and it should become easier as you get more comfortable in the clinical setting. Overall you did an excellent job this week. Keep it up! AR

Week 13

One strength of mine was that I was able to safely administer PO medications to my patient and follow the 6 rights and 3 checks before giving the medications. You did a nice job with medication administration this week. HS

One weakness of mine was that I received in report that my patient was grouchy and slightly irritated. I was overthinking and extremely nervous to do anything with my patient because of this. I was more timid during my head-to-toe assessment and I had to go back in later to get more information which could have potentially upset the patient. I find it hard not to overthink about some of the things I get in report. I will improve on this by next clinical by going into my patient's room with an open mind and seeing how my day personally goes with the patient instead of basing it off someone else's experience.

Yes, it is always important to keep an open mind and not take others opinions as the truth. You did a great job this week with two very different patients. HS

Final- Destiny you have shown significant growth in the clinical setting throughout this semester. You are well-prepared to advance to the next semester and continue your journey to be a RN! Your calm and sweet personality, along with excellent clinical judgment skills, will carry you far! AR

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

Skills Lab Competency Evaluation 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:** 9/28/2023	**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	HS	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**

Student Name: Destiny Houghtlen

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, were well-prepared, and did an excellent job overall! 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):
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. The pain assessment you performed was excellent! You did require 2 prompts related to assessing the sclera and conjunctiva, and the location for the tricuspid valve. You were able to remind yourself to assess the lateral lung sounds on each side. You demonstrated friendly, professional, and informative communication. You were able to correctly identify the lung sounds as crackles vs. rhonchi; discussion was held regarding the difference between the two. 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: accurate and complete.
- Pain: omitted the pain management techniques taken.
- Safety: omitted “pneumonia” as the reason for isolation.
- Physical Re-Assessment- other than the areas listed below, the remainder of the documentation was accurate and complete:
    - HEENT: omitted “none” for neck symptoms; omitted “hearing difficulty” for right ear symptom; omitted left ear documentation “normal”; omitted “WNL” for gum condition; omitted “midline” for trachea; omitted comment “no throat complaints”.
    - Respiratory: document lung sounds for “throughout anterior & posterior” all under one entry (you put rhonchi under right posterior lower lobe instead).
    - Gastrointestinal: omitted “daily” for frequency of BM aids used. 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 during insertion or irrigation; one prompt was needed during removal as a reminder to flush the tube with 20mL of fluid prior to removal.

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! 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. One prompt was needed during insertion related to placing the StatLock on the foley catheter, measuring for correct placement, and then cleansing and prepping the skin. You 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, 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! HS

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

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials
11/20/2023	Impaired Gas Exchange	* S/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- Your care map is satisfactory. Excellent job! See attached rubric. AR

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Student Name: Destiny Houghtlen	**Course Objective:** Develop patient-centered plans of care utilizing the nursing process (3,4,5,6,7)*
Date or Clinical Week: Week 11	

	Criteria	**3**	**2**	**1**	**0**	**Points Earned**	**Comments**
Noticing	1.Identify all abnormal assessment findings (subjective and objective); include specific patient data.	**(lists at least 7*) *provides explanation if < 7**	**(lists 5-6)**	**(lists 5-7 but no specific patient data included)**	**(lists < 5 or gives no explanation)**	3	Cough- add if moist/dry, etc. and if any sputum.
	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	Great job!
	3. Identify all risk factors relevant to the patient.	**(lists at least 5*) *provides explanation if < 5**	**(lists 4)**	**(lists 3)**	**(lists < 3 or gives no explanation)**	3	Include COPD
Interpreting	4. List all nursing priorities and highlight the top priority problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	Great job!
	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	How do K+ and Ca++ levels relate to gas exchange?
	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	Great job!
	9. Interventions are prioritized	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	10. All interventions include a frequency	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	11. All interventions are individualized and realistic	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	#11- via inhalation, not PO #12- is an IV flush, not pertinent/needed
	12. An appropriate rationale is	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		

	included for each intervention					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	Include if SpO2 is on RA or oxygen
	14. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**	3	

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

Faculty/Teaching Assistant Comments:
Destiny. Your provided accurate and thorough information throughout your care map! I made a few suggestions for future care maps. AR

Total Points:
42. Excellent care map!!! Keep up the great work next semester.

Faculty/Teaching Assistant Initials: AR

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

Simulation Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
	Date: 11/7/2023 or 11/14/2023	**Date: 11/27/2023 or 11/28/2023**
Evaluation (See Simulation Rubric)	S	S
Faculty Initials	HS	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. My strength was I was able to correctly identify the patients' allergies before giving her the medication. HS

B. My weakness was I gave Mucinex which was a PRN medication when it did not need to be given because the patient had a productive cough. The Mucinex should have been given if the patient had a nonproductive cough. I will ensure I read the information on skyscape about the medications carefully. I am going to review medications on skyscape four times before the next simulation to ensure I am more comfortable with it. HS

Faculty comments:

Simulation #2:

A. My strength was that I noticed that the oxygen level was getting worse, and oxygen needed to be applied to the patient. Great job! AR

B. My weakness would be I need to be more talkative during debriefing and try to give good constructive feedback. I get nervous telling people what I think they did wrong or could improve on. I am going to improve on this by giving more constructive feedback during the future simulation. This is difficult for many students. With more practice you will find it gets easier. 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): Jennifer Collins (A), Destiny Houghtlen (M), Melisa Fahey (O), Joshua Hernandez (O)
GROUP #: 9
SCENARIO: NF #1
OBSERVATION DATE/TIME(S): 11/14/2023 1300-1400

CLINICAL JUDGMENT COMPONENTS					OBSERVATION NOTES
NOTICING: (1,2,4,6,7) *					Assessment nurse introduced self and role.
• Focused Observation:	E	A	D	B	Noticed cough and instructed patient to cough and deep breath after raising the head of the bed.
• Recognizing Deviations from Expected Patterns:	E	A	D	B	Information sought related to reason for hospitalization.
• Information Seeking:	E	A	D	B	Noticed temp 99.2, SpO2 87% on RA, HR 80, RR 18, B/P 130/82.
					Did not notice alarm for low Spo2.
					Pain assessment performed.
					Noticed abnormal lung sounds (wheezes- remediated in debriefing that lung sounds were crackles). Remember to listen to lung, heart, and bowel sounds on direct skin and not over the gown.
					Noticed the tissues in the patient's bed. Noticed the yellow sputum and asked how long cough and sputum production have been going on.
					Information sought regarding smoking habits and interest in possible nicotine patch.
					Noticed medication orders in MAR.
					Medication nurse introduced self and role when entering the room. Accurately identified patient's name/date of birth and allergies. 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.
					Noticed indications for atorvastatin and multivitamin. Noticed potential adverse reactions and side effects (reminder to write medications down and bring sheet in room with you, remediated during debriefing).

INTERPRETING: (1,2,4,6,7) * • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Did not prioritize low SpO2. Completed head to toe assessment before applying oxygen as per physician's order. Promoted to assess bilateral heels after complaints of pain. No assessment performed, placed pillow under heels. Interpreted medication orders in MAR. Prioritized medication safety practicing 6 rights of medication administration. Interpreted some side effects of medications appropriately.
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	Practiced standard precautions with hand hygiene before entering the room. Promptly performed a head-to-toe assessment. Communicated with patient about interventions being performed, with questions answered appropriately. Good therapeutic communication utilized by the assessment and medication nurse while with the patient. Responded to low SpO2 of 87% by raising the head of the bed and instructing patient to cough and deep breath. Appropriately used the BMV scanning system for medication safety. Communicated medications to be administered. Remember to never leave medication unattended at bedside. Great education provided on use of incentive spirometer and smoking cessation using the teach back method. Consider educating patient on fall precautions and home oxygen therapy.
REFLECTING: (1,2,4,5,6,8) * • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Observers provided good insight during debriefing. Noticed the good infection control measures. Discussed initiating O2 via nasal cannula for low Spo2 per orders. Discussed strengths of both the assessment nurse and medication nurse. Constructive feedback was provided. 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. Participated well in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas for improvement and discussed ways to make improvements in the future. Good discussions amongst all members of the team. Nice job!

SUMMARY COMMENTS: * = Course Objectives **Satisfactory completion of the simulation scenario is a score of "Beginning" or higher in all areas of the rubric.** **E= Exemplary** **A= Accomplished** **D= Developing** **B= Beginning** **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: Attempts to monitor a variety of subjective and objective data but is overwhelmed by the array of data; focuses on the most obvious data, missing some important information. Identifies obvious patterns and deviations, missing some important information; unsure how to continue the assessment. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads. Interpreting: Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful data. In simple, common, or familiar situations, is able to compare the patient's data patterns with those known and to develop or explain intervention plans; has difficulty, however, with even moderately difficult data or situations that are within the expectations of students; inappropriately requires advice or assistance. Responding: Is tentative in the leader role; reassures patients and families in routine and relatively simple situations, but becomes stressed and disorganized easily. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of the most obvious data; monitors progress but is unable to make adjustments as indicated by the patient's response. Is hesitant or ineffective in using nursing skills. 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.

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Melisa Fahey (A), Joshua Hernandez (M), Jennifer Collins (O), Destiny Houghtlen (O)
GROUP #: 8
SCENARIO: NF #2
OBSERVATION DATE/TIME(S): 11/28/2023 1000-1100

CLINICAL JUDGMENT COMPONENTS	OBSERVATION NOTES
NOTICING: (1,2,4,6,7) *	Identified patient with name and DOB when entering the room and compared with wristband.
• Focused Observation: E A D B	Noticed patient was in pain when entering the room.
• Recognizing Deviations from Expected Patterns: E A D B	Noticed Spo2 of 91% on RA.
• Information Seeking: E A D B	Sought information related to sputum production. Noticed tissues with sputum in the bed.
	Sought additional information on pain (duration, rating, location, radiating, alleviate/precipitating factors). Noticed pain 7/10.
	Noticed abnormal lung sounds upon auscultation.
	Noticed RR of 30.
	Medication nurse noticed PRN orders for pain medications. Noticed pain 7/10. Sought information from patient regarding pain medication preference
	Sought information on alcohol use with opioids.
	Noticed Spo2 dropped to 88% after removing oxygen.
	Medication nurse confirmed name and DOB with wristband.
	Sought information related to patient comfort.
INTERPRETING: (1,2,4,6,7) *	Prioritized pain assessment when entering the room
• Prioritizing Data: E A D B	Prioritized oxygenation status for Spo2 of 91% on RA. Made sense of provider order to maintain >93%.
• Making Sense of Data: E A D B	Prioritized focused pain assessment
	Consider administering pain medication prior to use of incentive spirometry due to patient discomfort.
	Prioritized focused respiratory assessment.
	Made sense of abnormal lung sounds. Did not interpret crackles.
	Prioritized vital signs assessment.
	Made sense of PRN pain medication orders for pain scale rating. Prioritized morphine administration over Percocet.
	Made sense of dosage calculation to be performed.
	Made sense of side effects of morphine and need to educate at a different time.
RESPONDING: (1,2,3,4,5,6,7) *	Good teamwork and collaboration to review the chart before entering the room.
• Calm, Confident Manner: E A D B	Identified self and role when entering the room.
• Clear Communication: E A D B	

• Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B	Administered oxygen at 2L via nasal cannula for Spo2 of 91% on RA. Encouraged patient to cough and deep breath. Encouraged use of incentive spirometer. Elevated HOB for shortness of breath. Focused respiratory and pain assessment completed. Medication nurse identified self and role when entering the room Educated patient on potential side effects related to opioids. Educated the patient on IM injection. Elevated heels on pillows to alleviate pressure. Removed oxygen after returned to 95%. Continually assessed Spo2. Re-applied oxygen when Spo2 dropped to 88%. Educated on splinting when coughing to relieve pain. Provided demonstration. Educated on coughing deep breathing to help with pneumonia. Educated on q4h order for morphine. Dosage calculation performed (2ml to be injected, 4mg). Wasted excess dose You must have a witness during wasting of narcotics. Cleaned site with alcohol swab, good aseptic technique. Used blunt tip needle, remember to use correct IM needle (20-23g, 1-1.5inch). Aspirated for presence of blood prior to injecting. Injected slowly. Never re-cap a needle after injected into a patient. BMV used for patient safety. Re-assessed pain after medication administration. Consider re-assessing vital signs after narcotic administration. Consider improved communication among team members when it comes to performing multiple interventions at once. The patient was receiving an injection while also having assessments performed which could be overwhelming to the patient.
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	Lasater Clinical Judgement Rubric Comments: Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. 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. Shows some communication ability (e.g., giving directions); communication with patients, families, and team members is only partly successful; displays caring. Interventions are tailored for the individual

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) *	patient; monitors patient progress closely and is able to adjust treatment as indicated by patient response. Is hesitant or ineffective in using nursing skills. 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:

Student eSignature & Date: _Destiny Houghtlen_____12/4/23____