

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2024**

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

Student:

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

Faculty: Kelly Ammanniti, MSN, RN, CHSE; Monica Dunbar DNP, RN;
CNE; Rachel Haynes MSN, RN, Brian Seitz, MSN, RN

Faculty eSignature:

DIRECTIONS FOR USE:

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S), Needs Improvement (NI), Unsatisfactory (U), and Not Available (NA)**. The faculty member will initial if in agreement with the student’s evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a “S, NI, U, or NA”. If the student does not self-rate, then it is an automatic “U”. A student who submits the clinical evaluation tool late will be rated as “U” in the appropriate competency(s) for that clinical week. Whenever a student receives a “U” in a competency, it must be addressed with a comment as to why it is no longer a “U” the following week. If the student does not state why the “U” is corrected, it will be another “U” until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. **An unsatisfactory or needs improvement as a final evaluation in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. Patterns of performance over the course of the semester will be utilized to determine the final competency evaluations. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.**

METHODS OF EVALUATION:

- Care Maps
- Patient/Family Education
- Preparedness for Clinical/Clinical Performance
- Online Clinical Discussion Groups
- Administration of Medications
- Nursing Skills Completion of Clinical Performance Tool
- Written Reports of Clinical Experiences
- Documentation
- Conferences with the Faculty
- Lasater Clinical Judgment Rubric
- vSim
- Simulation Scenarios

Absence: (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)
8/23/2024	5	H&V Online Orientation	8/23/2024

Faculty’s Name	Initials
Kelly Ammanniti	KA
Monica Dunbar	MD
Rachel Haynes	RH
Brian Seitz	BS

7/18/24 KA

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 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, 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.

SATISFACTORY CARE MAPS		
Date	Priority Nursing Problem/Diagnosis	Faculty's Initials
8/30/2024	Impaired gas exchange	BS

Objective																		
1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
Competencies:		S	N/A	N/A	S	N/A	S	S	S									
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		S	N/A	N/A	S	N/A	S	S	S									
b. Provide care using developmentally appropriate communication.		S	N/A	N/A	S	N/A	S	S	S									
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		S	N/A	N/A	S	N/A	S	S	S									
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		S	N/A	N/A	S	N/A	S	S	S									
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		S	N/A	N/A	S	N/A	S	S	S									
Clinical Location Age of patient		Firelands	N/A	N/A	Belleve Elementar	N/A	Fisher- Titus OB		ER Firelands									
		BS	BS	BS	BS	BS	BS	BS										

Comments: Week 2 – The stage is infant as this patient was not even 24 hours old according to Erikson's Stages. In the future please be sure to use Erikson's stages. For example, this infant would be in the trust vs. mistrust stage. BS

Week 2 – 1a – You did a wonderful job providing holistic care to the baby you were assigned to this week. 1c – You did a great job observing/assessing your assigned newborn utilizing developmentally appropriate assessment skills and reporting any abnormal findings. KA/BS

Week 5 – The stage is industry vs inferiority as these children were school-aged. BS

Week 4 – 1a, b, & c – You did a great job utilizing the techniques your learning through your training to complete hearing and vision screenings on the first graders this week. You asked appropriate questions and communicated with the students utilizing your knowledge in growth and development. KA

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

Week 7 – The mother was in the identity vs role confusion stage as she is 15 years old. BS

Week 7- FTMC OB Objective 1 B, C, D-This week you did an awesome job with providing developmentally appropriate care, appropriate assessment techniques, and developing safety measures to support your patient. MD

Week7- Great job discussing your patient in the OB department this week. BS

Week 8 – One of my patients was 4 years old and therefore is in the preschooler stage of growth and development which is initiative vs feelings of guilt.

Objective																		
1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
Competencies:																		
f. Describe psychological changes in response to the expectant mother's pregnancy. Maternal		S	N/A	N/A	N/A	N/A	S	S	S									
g. Discuss prenatal influences on the pregnancy. Maternal		S	N/A	N/A	N/A	N/A	S	S	S									
h. Identify the stage and progression of a woman in labor. Maternal		S	N/A	N/A	N/A	N/A	S	S	S									
i. Discuss family bonding and phases of the puerperium. Maternal		S	N/A	N/A	N/A	N/A	S	S	S									
j. Identify various resources available for children and the childbearing family.		S	N/A	N/A	N/A	N/A	S	S	S									
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		S	N/A	N/A	S	N/A	S	S	S									
l. Respect the centrality of the patient/family as core members of the health team.		S	N/A	N/A	S	N/A	S	S	S									
		BS	BS	BS	BS	BS	BS	BS										

Comments:

Week 6 – 1k – You did a nice job discussing with the school nurse about cultural beliefs of the school system you performed hearing and vision screening in. She discussed the emphasis of community and you were able to observe different aspects of the school that supported this culture. KA

Week 7- FTMC OB Objective 1i-This objective was met utilizing conversation and working with the postpartum mom and newborn. Great job! MD

Week 7- 1i- You did a great job discussing examples of family bonding you witnessed this week. BS

Objective																		
2. Integrate principles of decision-making in utilizing evidenced-based practice in the nursing process in providing care for the childbearing family and children encompassing cultural sensitivity and diversity. (1,2,3,4,5)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Engage in discussions of evidenced-based nursing practice.		S	N/A	N/A	S	N/A	S	S	S									
b. Perform nursing measures safely using Standard precautions.		S	N/A	N/A	S	N/A	S	S	S									
c. Perform nursing care in an organized manner recognizing the need for assistance.		S	N/A	N/A	S	N/A	S	S	S									
d. Practice/observe safe medication administration.		S	N/A	N/A	N/A	N/A	S	S	S									
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		S	N/A	N/A	N/A	N/A	S	S	S									
f. Utilize information obtained from patients/families as a basis for decision-making.		S	N/A	N/A	N/A	N/A	S	S	S									
g. Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.** (Noticing, Interpreting, Responding, Reflecting) (List Below)*		S	N/A	N/A	S	N/A	S	S	S									
		BS	BS	BS	BS	BS	BS	BS										

Comments: Week 2 – Patient exhibits social determinants of health regarding finances and ability to receive vital resources as his mother is 17 years old and did not know she was pregnant and therefore unprepared. Yes, from what I hear this young woman has many challenges ahead of her; financially, emotionally, domestically, the list goes on. Hopefully she has a good family support system, she’s going to need it. BS

Week 2 – 2b – You did a great job assessing and managing the patient’s IV fluids and site. You were able to work the nurses to ensure the IV fluids were calculated correctly before administering. 2d – You did a nice job following/observing the rights of medication administration in regards to the newborn you cared for. You assisted the nurse in ensuring the calculations were correct before administration. KA/BS

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

Week 5 – Some social determinants of health for children with hearing or vision issues can relate to finances or no access to a healthcare provider leaving their issue unsolved. BS

Week 4 – 2c – You were organized throughout the screening and assisted others quickly and efficiently when needed. You helped answer each other's questions and worked as a cohesive unit. Nice job! KA

Week 7 – My patient has many SDOH, and two major issues are finances as she is 15 and there is little opportunity for work and the lack of support as she has a very unstable home life. Yes, she has some struggles ahead. Many, many new responsibilities come with having a child. At just 15, hopefully she gets the help she needs. BS

Week 7- FTMC OB Objective 2 B, C, F-This week you did an awesome job performing standard precautions by performing hand hygiene and wearing gloves when appropriate. You also performed nursing care in an organized manner and you were able to gather information for the mother to obtain information on newborn. MD

Week 8 – Some social determinants of health for one of my patients this week are safety and support because she is mourning, and it may be unsafe for her to be responsible to look after her other young child at home. She had a miscarriage and already has a little one at home.

Objective																		
3. Summarize the legal, moral and ethical issues related to care of children and the childbearing family. (2,6,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Act with integrity, consistency, and respect for differing views.		S	N/A	N/A	S	N/A	S	S	S									
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		S	N/A	N/A	S	N/A	S	S	S									
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		S	N/A	N/A	S	N/A	S	S	S									
d. Critique examples of legal or ethical issues observed in the clinical setting. (List Below)*		S	N/A	N/A	S	N/A	S	S	S									
		BS	BS	BS	BS	BS	BS	BS										

Comments: Week 2 – An example of a legal/ethical issue is that my infant’s mother was not old enough to consent, but she could consent for her baby. This can cause issues if the babies mom wants something different than what her parental figure may want. Good point, Kennedy. Hopefully, her and her parents can manage things together. BS

Week 5 – A legal or ethical issue observed can be in relation to a child refusing hearing testing. This is because if they do not complete the testing it will be marked missing from the state, however, we cannot make a child participate. **Yes, this could be a problem. If a child does not test and really does have a sensory deficit it could lead to all sorts of misdiagnoses. Good point. BS**

Week 7 – Some legal issues observed in the clinical setting towards my patient was the confusion within the patient as to who was supposed to sign for her baby and if her own mother not having custody played a role in the legal side of the situation. **Yes there are no shortages of legal and ethical implications in this case. BS**

Week 7- FTMC OB Objective 3-This objective was met by you acting with integrity, providing privacy for the patient with HIPAA, and you performed at high standards with the code of conduct of the school. MD

Week 8 – Some potential legal issues include the lack of education between the ER nurses regarding how to handle the product of conception that my patient had passed. The specimen was sent to the lab when the patient wanted the funeral home to take over the situation. If the lab had already done testing, there may have been no chance for the funeral home to be involved.

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Develop and implement a priority care map and/or plan of care utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)		S	N/A	N/A	N/A	N/A	N/A	S	N/A									
b. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)		N/A	N/A	N/A	S	N/A	N/A	S	N/A									
c. Summarize witnessed examples of patient/family advocacy.		S	N/A	N/A	S	N/A	S	S	S									
d. Provide patient centered and developmentally appropriate teaching.		S	N/A	N/A	S	N/A	S	S	S									
e. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	S	N/A	S	S	S									
		BS	BS	BS	BS	BS	BS	BS										

Week 2- 4a- Great job utilizing the nursing process and your clinical judgment to develop and implement a priority care map for your newborn patient. BS

Week 6 – 4b – You worked with the nurse to gather information on the hearing and vision screenings utilizing the provided papers for documentation. You then helped alphabetize and document the information further on the required ODH documentation forms. This was a terrific help to the school nurse. 4d – You did a nice job educating the first graders as needed on the screening process and ensuring they were able to perform it correctly so the results would be valid. You were kind, caring, and professional with your interactions with the students. Keep up the nice work. KA

Week 7- FTMC OB Objective 4 C, D, and E-You were able to discuss advocacy for the patient, provide appropriate education for the patient, and analyze pathophysiology about the patient. MD

Student Name: K. Baker		Course Objective: Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children.					
Date or Clinical Week: Week 2							
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	Nice job listing abnormal observation and assessment findings based on your patient experience this week. Abnormal lab/diagnostic findings were also provided. Nice job reviewing and including pertinent risk factors related to your priority problem of impaired gas exchange.
	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	Three high priority nursing problems were identified. Impaired gas exchange was appropriately selected as the top priority problem. All relevant assessment data was highlighted pertinent to the priority problem. Three potential complications were identified, each supported with signs and symptoms to monitor for.
	5. State the goal for the top nursing priority.	Complete			Not complete	3	
	6. 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	
	7. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)	3	
	8. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)	3	
Responding	9. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	Nursing interventions related to the top priority were listed. Interventions were appropriately prioritized. Each listed intervention included a frequency and most had rationales. All listed interventions were individualized and realistic to the patient situation.
	10. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	11. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	12. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete	3	

Criteria		3	2	1	0	Points Earned	Comments
	13. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete	2	
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	An evaluation of all abnormal findings was provided along with a determination to continue the plan of care. (Suggestion- I understand that the lab values listed were probably the only values available, but I would suggest to include a statement in your evaluation they were unchanged or not re-drawn.)
	15. Evaluation includes one of the following statements: <ul style="list-style-type: none"> Continue plan of care Modify plan of care Terminate plan of care 	Complete			Not complete	3	

Reference

An in-text citation and reference are required.
The care map will be graded “needs improvement” if missing either the in-text citation or reference, but not both.
The care map will be graded “unsatisfactory” if both in-text citation and reference are not included.

Total Possible Points= 45 points
45-35 points = Satisfactory
34-23 points = Needs Improvement*
< 23 points = Unsatisfactory*
***Total points adding up to less than or equal to 34 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.**

*****Students that are not satisfactory after 2 attempts will be required to meet with course faculty for remediation. *****

Faculty/Teaching Assistant Comments: Kennedy, I hear you had quite an interesting day! Great work with your care map related to impaired gas exchange! See comments provided throughout the rubric. Let me know if you have any questions. Keep up the hard work! BS

Total Points: 44/45 Satisfactory

Faculty/Teaching Assistant Initials: BS

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
f. Correlate the diagnostic tests with the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	N/A	S	S	S									
g. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	N/A	S	S	S									
h. Correlate the medical treatment in relation to the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	N/A	S	S	S									
i. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	N/A	S	S	S									
j. Correlate the patient's growth and developmental level in relation to the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	N/A	S	S	S									
		BS	BS	BS	BS	BS	BS	BS										

Comments:

Week 2- 4f,g,h- Nice job making correlations with your patient's condition and their diagnostic tests and treatment. BS

Week 7- FTMC OB Objective 4 F and H-This week you did an awesome job with correlating diagnostic tests and medical treatment for the patients you took care of. MD

Objective																		
5. Collaborating professionally with members of the health care team, childbearing and child-rearing families, faculty, and peers through written, verbal and nonverbal methods, and by conferencing, networking, and posting through computer technology. (1,3,5,6,7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Demonstrate interest and enthusiasm in clinical activities.		S	N/A	N/A	S	N/A	S	S	S									
b. Evaluate own participation in clinical activities.		S	N/A	N/A	S	N/A	S	S	S									
c. Communicate professionally and collaboratively with members of the healthcare team.		S	N/A	N/A	S	N/A	S	S	S									
d. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		N/A	N/A	N/A	S	N/A	N/A	S	N/A									
e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding)		S	N/A	N/A	N/A	N/A	S	S	S									
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)		S	N/A	N/A	N/A	N/A	S	S	S									
g. Consistently and appropriately post comments in clinical discussion groups.		N/A S	N/A	N/A	S	N/A	S	S	S									
		BS	BS	BS	BS	BS	BS	BS										

Comments:

Week 2 – 5a – You did a great job showing interest and enthusiasm while in OB. You sought out new learning experiences while on clinical. You were the scribe when your patient went into respiratory distress and needed to be placed under the NRP protocol to help improve his respiratory status. Terrific job! KA/BS

Week 7- FTMC OB Objective 5 A, B, and C-You did an amazing job with being interested and enthusiastic in clinical, participating and communicating professionally during this clinical experience! MD

Week 7- 5a,e- You did a nice job explaining something new this week on clinical and explaining how vaccinations are tracked in the EMR. BS

Objective																		
6. Critique own strengths and areas for improvement modifying behaviors accordingly to achieve personal and professional goals. (7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Recognize areas for improvement and goals to meet these needs. (List Below)*		S	N/A	N/A	S	N/A	S	S	S									
b. Accept responsibility for decisions and actions.		S	N/A	N/A	S	N/A	S	S	S									
c. Demonstrate evidence of growth and self-confidence.		S	N/A	N/A	S	N/A	S	S	S									
d. Demonstrate evidence of research in being prepared for clinical.		S	N/A	N/A	S	N/A	S	S	S									
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		S	N/A U	N/A	S	N/A	S	S	S									
f. Describe initiatives in seeking out new learning experiences.		S	N/A	N/A	S	N/A	S	S	S									
g. Demonstrate ability to organize time effectively.		S	N/A	N/A	S	N/A	S	S	S									
h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.		S	N/A	N/A	S	N/A	S	S	S									
i. Demonstrates growth in clinical judgment.		S	N/A	N/A	S	N/A	S	S	S									
		BS	BS	BS	BS	BS	BS	BS										

Comments: Week 2 – I feel I need to improve on holding infants, I will do this by observing others as well as taking all opportunities to practice. A little practice and experience will increase your comfort when handling infants. I bet you will notice some improvement the next time. BS

Week 3- You received a U in this competency for not having submitted your tool by Friday at 0800. Please respond below regarding how you will prevent this from happening in the future. BS I will prevent this from happening in the future by completing my tool as soon as my clinical for the week is over or at the beginning of the week if I do not have clinical. BS

*End-of-Program Student Learning Outcomes

Week 5 – Something I will improve on is ensuring I am completing every single part of the testing as I kept finding myself forgetting to ask the children if they have glasses, I will improve on this in the future by making a list of everything I need to do and refer to it as needed. **Good plan. I make lists and reminders for just about everything. BS**

Week 7 – I could improve on comforting a mother while she is in labor, I found it difficult to find comforting words and I think I got better throughout the day, but I will review resources on therapeutic communication so next time I can provide better support. **Good idea Kennedy, but don't be too hard on yourself. This is a new situation and every laboring mother will have their own unique needs. BS**

Week 7- FTMC OB Objective 6-You have done very well obtaining this competency this week! You were able to demonstrate growth in all areas including decision making, being prepared for clinical, being professional, seeking out learning experiences, being organized, using an ACE attitude, and growing throughout the clinical experience. **AWESOME job! MD**

Kennedy, great work this first half of the semester. Keep it up! BS

Week 8 – I could improve on keeping my emotions within while in a patient's room, this is because I found myself tearing up when the nurses were explaining to my patient that she had a miscarriage. I want to remain as professional as possible to protect the emotions of my patient and I need to toughen up to do so.

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

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2024
Skills Lab Competency Tool

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills														
	Adult Head to Toe Assessment (*1, 2, 5, 6)	Breastfeeding and Bottle Feeding	Breast Assessment (*1, 2, 3, 4, 5, 6)	Circumcision Care (*1, 2, 6)	Broselow Tape (*1, 2, 3, 5)	Leopold's (*1, 2, 3, 5, 6)	APGAR (*2, 3, 4, 5, 6)	Breast Self-Exam (*1, 4, 5, 6)	Pediatric Vital Signs (*1, 4, 5)	Pediatric Lab Values (*1, 4, 5)	C-Section Care (*1, 2, 5, 6)	Health Literacy (*2, 5, 6)	Safety (*1, 2, 3, 5, 6)	Postpartum Assessment (*1, 2, 6)	Newborn Bath and Cord Care (*2, 4)
	Date: 8/20	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21
Evaluation	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills									
	Fundus Assessment (*1, 2, 5, 6)	Lochia Assessment (*1, 2, 4)	Pain Assessment (*1, 2, 5, 6)	Newborn Assessment (*1, 2, 5, 6)	Postpartum and Newborn DC Ed (*1, 2, 6)	Pregnancy History (*1, 2, 3, 4, 5, 6)	Newborn Thermo. (*1, 2, 3, 4, 5, 6)	EDD (*1, 2, 3, 4, 5, 6)	Meditech (*1, 2, 3, 5, 6)	Amazing Race (*1, 2, 3, 4, 5, 6)
	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/22	Date: 10/21
Evaluation	S	S	S	S	S	S	S	S	S	S
Faculty Initials	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

Comments:

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2024
Simulation Evaluations

Simulation Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Simulation												
	Pregnancy and PP Simulation (*1, 2, 3, 5, 6)	vSim Maternity Case 1 (*1, 2, 3, 5, 6)	Shoulder Dystocia and Newborn Care (*1, 2, 3, 5, 6)	vSim Maternity Case 4 (*1, 2, 3, 5, 6)	Patient Care Safety Escape Room (*1, 2, 3, 5, 6)	Pediatric Respiratory Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 5 (*1, 2, 3, 5, 6)	Pediatric GI Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 1 (*1, 2, 3, 5, 6)	Student Developed Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 4 (*1, 2, 3, 5, 6)	Comprehensive Simulation (*1, 2, 3, 5, 6)	Empathy Simulation (*1, 2, 3, 5, 6)
	Date: 9/12 & 9/19	Date: 9/23	Date: 9/26	Date: 10/7	Date: 10/17 & 10/18	Date: 10/24 & 10/31	Date: 11/4	Date: 11/5 & 11/6	Date: 11/15	Date: 11/19	Date: 11/22	Date: 11/22	Date:
Evaluation	S	S	S										
Faculty Initials	BS	BS	BS										
Remediation: Date/Evaluation/Initials	NA	NA	NA										

* Course Objectives

Comments:

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: A=Assessment Nurse; M=Medication Nurse; C=Charge

STUDENT NAME(S) AND ROLE(S): Baker (C), Dauch (M), Grosswiler (A)

GROUP #: 1

SCENARIO: Pregnancy and PPH

OBSERVATION DATE/TIME(S): 9/12/2024 0700-0830

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
<p>NOTICING: (1, 2, 5) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p>Patient identified. Notices 33-week gestation and contraction-like pain. Patient CO pain in abdomen rated at 5/10. VS. Mona begins CO being dizzy and lightheaded. Asks questions to determine cause. Notices soft uterus. Notices low BP, bleeding</p>
<p>INTERPRETING: (2, 4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p>Prioritized the need for education related to food, drink, and lifestyle choices. Prioritizes the need for FSBS-200: recognized as abnormal. Bleeding and low BP interpreted as abnormal. Prioritized the need to weigh peri-pad.</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> • 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 						<p>Fatal monitor applied. Patient repositioned to left side. Urine sample collected and sent to lab. Asks about prenatal vitamins, home preparation/readiness for newborn. Asks patient about dietary preferences and suggests alternate foods, provides related education. Call to lab for UA results. Obtains FSBS. Call to provider about urine results. Orders receives for fluids, Procardia, acetaminophen, and US to determine gestational age. Orders read back. Mona is educated about the importance of prenatal care. IV fluids prepared and initiated. Medications prepared, patient identified, allergies confirmed, and medications administered. Call to provider to question Procardia.</p> <p>Fundus massaged while team member phones provider to report boggy uterus and heavy bleeding. Orders received for methylergonovine, monitor VS. Peri-pad weighed: 600g. Situation is explained to patient to keep informed. Methylergonovine prepared, patient identified, allergies confirmed, medication administered. BP reassessed after a few minutes.</p>
<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 						<p>Team discussion of the scenarios. Team recognized the significance of teamwork and communication, and did well with each. Discussed the importance of SBAR communication when calling the provider. Also discussed risk factors for postpartum hemorrhage and that it is</p>

	ok to ask for help or offer help to team members. Discussed the importance of providing education to patients.
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “developing” or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Implement appropriate nursing interventions and test to monitor fetal well-being during pregnancy upon completion of nursing assessment. (1, 2, 3, 5)* 2. Demonstrate correct technique of uterine massage for postpartum assessment. (1, 2, 4, 5)* 3. Identify the signs and symptoms of postpartum hemorrhage (PPH) and implement appropriate management of the Postpartum Hemorrhage (PPH). (1, 2, 5)* 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (3, 5, 6)* 5. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* <p>*Course Objectives</p>	<p>You are Satisfactory for this scenario! BS</p> <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 Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs</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 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: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments Displays proficiency in the use of most nursing skills; could improve speed or accuracy</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>

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: A=Assessment Nurse; M=Medication Nurse; O=Observer (Course Specific)

STUDENT NAME(S) AND ROLE(S): Baker (A), Dauch (M), Grosswiler (C)

GROUP #: 1

SCENARIO: Shoulder Dystocia and Newborn Care

OBSERVATION DATE/TIME(S): 9/26/24 0700-0830

CLINICAL JUDGMENT COMPONENTS	<u>OBSERVATION NOTES</u>
<p>NOTICING: (Link to Course Objectives) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 	<p>Introduce self. Confirm pt name/DOB</p> <p>Pain assessment: rating, location, duration, factors worse/better, asks if wants pain medication.</p> <p>Ask about baby gestation</p> <p>Obtain vitals</p> <p>Did not assess cervix prior to nubain administration</p> <p>Reassess pain after nubain administration</p> <p>Notice decelerations on fetal monitor after administration of nubain. Check patient and identify need to delivery</p> <p>Notice baby is stuck, uses HELPERR maneuvers to deliver baby</p> <p>APGAR 1 minute: assess heartrate (142), respirations (48), tone, cry, color. Total: 9</p> <p>Reassess mother after delivery. Perform fundal assessment</p> <p>APGAR 5 minute:</p> <p>Assess newborn: check reflexes (plantar, sucking, rooting, morrow, Babinski). Skin assessment, fontanel assessment, clavicle assessment,</p>
<p>INTERPRETING: (Link to Course Objectives) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Offer nubain for pain relief due to not wanting epidural</p> <p>Interpret vitals a WDL</p> <p>Interpret fetal monitor as accelerations</p> <p>PCN administered prior to delivery</p> <p>Interpret fetal monitor changed to decelerations after nubain delivery</p>

<p>RESPONDING: (Link to Course Objectives) *</p> <ul style="list-style-type: none"> • 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 	<p>Verify allergies</p> <p>Pain administration: nubain. Explain that is a pain medication and is safe for baby. Verify name/DOB, verify allergies, scan pt and medication, use of correct needle, correct technique, use of needle safety.</p> <p>Antibiotic administration: explain for GBS+ status, hand primary bag below secondary bag, opened clamp, run at correct rate.</p> <p>Call healthcare provider when realize baby needs to be delivered. No organized SBAR.</p> <p>Call for help, McRoberts maneuver, suprapubic pressure, roll to hands and knees, internal rotation, evaluate for episiotomy, remove posterior arm</p> <p>Encourage mom to push</p> <p>Swaddle baby immediately after delivery, dry baby off, place under warmer</p> <p>Reassess mother after delivery.</p> <p>Medication administration: erythromycin and vitamin K injection. Check baby number matches mom number, put ointment on baby's eyes. IM injection: use of correct needle, correct dose, correct technique, use of needle safety.</p> <p>Call healthcare provider after delivery. No organized SBAR</p>
<p>REFLECTING: (Link to Course Objectives) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of scenario and interventions performed. Recognized teamwork, communication, and proper interventions. Discussion of interventions performed including HELPERR and types of heat loss for infant. Identified they could have put hat on baby for thermoregulation. Identified they should have checked cervix prior to administering nubain. Team could improve upon SBAR when calling healthcare provider for proper report of patient.</p>

<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of Developing or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Select physical assessment priorities based on individual patient needs. (1, 2)* 2. Identify risk factors for shoulder dystocia. (1, 2, 3, 4, 5)* 3. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the healthcare team. (1, 3, 5, 6)* 5. Identify ways in which heat loss occurs in infants. (1, 2, 4, 5)* 6. Implement appropriate nursing interventions upon completion of nursing assessment that support thermoregulation in the newborn. (1, 2, 5)* 	<p>You are Satisfactory in this simulation! RH</p> <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 most situations, interprets the patient's data. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient's data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.</p> <p>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 but not competence. Interventions are tailored for the individual patient; monitors patient progress closely and is able to adjust treatment as indicated by patient response. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.</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>
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EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2024
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: _____