EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2024

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Mallory Jamison

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

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

Faculty eSignature:

Teaching Assistant: Stacia Atkins, BSN, 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. **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:

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
Brittany Lombardi	BL

Stacia Atkins	SA

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	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Identify spiritual needs of patient (Noticing).									NA	S	S	NA				
b. Identify cultural factors that influence healthcare (Noticing).									NA	S	S	NA				
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						S	NA	NA	S	S	S	NA				
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).						S	NA	NA	S	S	S	NA				
		NS				BL	CB	CB	CB	HS	HS					
Clinical Location; Patient age** 3T 63		Meditech Orientation				3T (Age63)	NA	NA	NA	3T age 74	3T age 75	NA				

Comments

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

Week 6-1(c) Mallory, excellent job this week providing care to your patient while respecting his individual preferences, values, and needs. BL

Week 9 (1c, d)- You encouraged your patient to participate in the care based on her preferences when assisting her with eating and attempting to perform hygiene care. HS

Week 10 (1c,d)- You did a nice job planning your care around your patients preferences and needs. You made sure to ensure your patient had all of his hygiene needs were met including assisting him with a shower cap for his hair. 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	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						S	NA	NA	S	S	S	NA				
b. Use correct technique for vital sign measurement (Responding).						S	NA	NA	S	S	S	NA				
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).						~~S~~ NA	NA	NA	NA	S	S	NA				
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).									NA	S	S	NA				
e. Collect the nutritional data of assigned patient (Noticing).									NA	S	S	NA				
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).									NA	NA	NA	NA				
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).										~~NA~~ S	S	NA				
		NS				BL	CB	**CB**	CB	HS	HS					

Comments

Week 6-2(a,b) Great job this week utilizing the correct technique for vital sign measurement, and completing a systematic head to toe assessment on your assigned patient. Your head to toe assessment was thorough and done in a timely manner. You did a great job recognizing that you originally omitted part of your assessment (pedal pulses), and then went back to complete it. Being that this was your first time, it is normal to accidentally omit areas of your assessment. In the future, you will have more time at

the bedside, so if this were to occur again, it would be important to go back and collect the data like you did. 2(c) This competency was changed to “NA” because you did not have the opportunity to perform a fall/safety assessment and institute appropriate precautions for your patient this week in clinical. Going forward, you will have more opportunities to do this and become satisfactory. Keep up all your great work! BL

Week 9 (1a-d)- Good job with your assessment this week. You cared for a patient that had numerous tubes and drains that you had not seen prior. You did a nice job ensuring that they were documented within the chart as well. HS
(1g)- You were able to discuss some of the associated lab values based on your patients’ condition. HS

Week 10 (2a-e)- You did a great job performing all assessments, especially neuro and musculoskeletal on your patient. You also demonstrated the ability to gather information from assessments performed to determine a priority problem for your assigned patient. After determining the priority problem, you implemented all necessary interventions. 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	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Receive report at beginning of shift from assigned nurse (Noticing).						S	NA	NA	S	S	S	NA				
b. Hand off (report) pertinent, current information to the next provider of care (Responding).						NA	NA	NA	NA	S	S	NA				
c. Use appropriate medical terminology in verbal and written communication (Responding).						S	NA	NA	S	S	S	NA				
d. Report promptly and accurately any change in the status of the patient (Responding).						S	NA	NA	S	S	S	NA				
e. Communicate effectively with patients and families (Responding).						S	NA	NA	S	S	S	NA				
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).						S	NA	NA	S	S	S	NA				
		NS				BL	CB	**CB**	CB	HS	HS					

Comments

Week 6-3(e) You did an excellent job communicating with your patient this week during clinical, as well as providing discussion related to your communication in your CDG. BL

Week 9 (3a-f) You were able to get a report from the night shift nurse and update the nurse prior to leaving at the end of the shift. You did a nice job communicating with your patient and the other members of the healthcare team during the shift. HS

Week 10 (3a-f) Great job receiving and providing pertinent information during shift report, and hand off report. Appropriate medical terminology was used during all communications provided. Good job communicating appropriately to the primary RN and other health care disciplines when necessary. 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	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Document vital signs and head to toe assessment according to policy (Responding).						~~S~~ NI	NA	NA	NI	S	S	NA				
b. Document the patient response to nursing care provided (Responding).						S	NA	NA	S	S	S	NA				
c. Access medical information of assigned patient in Electronic Medical Record (Responding).		S				S	NA	NA	S	S	S	NA				
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S							S	~~U~~ NI	S	NA				
e. Provide basic patient education with accurate electronic documentation (Responding).									NA	~~NA~~ S	S	NA				
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						S	NA	NA	S	S	S	NA				
*Week 2 –Meditech		NS				BL	CB	**CB**	CB	HS	HS					

Comments

Clinical Week 9: I gave myself an unsatisfactory because I did not go into the intranet to access patient education material as I did not know we were supposed to do so.

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 6-4(a) Overall, you did a great job with your documentation this week in clinical. Your documentation for your head to toe assessment was thorough and accurate. For your vital sign's documentation, be sure to take your time and review your documentation before submitting. There were several measurements that were entered incorrectly that you had to change after review with the instructor. It is very important that these are entered correctly to give an accurate representation of the patient's status. With that being said, I know this was your first clinical experience and nerves are to be expected. Be sure to pay special attention to this moving forward. 4(c) Great job in your CDG discussing the use of informatics and technology in the clinical setting. You provided a nice description of how you utilized the patient's vital signs data to look for trends and identify any changes. 4(f) Satisfactory completion of your CDG this week. Keep up all your hard work! BL

Week 9 (4a) – You did a nice job documenting all of your assessment findings within the EMR. HS
(4d,e)- I changed these competencies because, your patient was being discharged and while we don't do the discharge instructions we are able to provide some education to the patient such as what signs and symptoms to look for regarding signs and symptoms of infection. You also encouraged your patient to cough and deep breath since he was spending a lot of time in the hospital bed. HS
(4e)-Nice job on your initial CDG post and response this week, you met all of the rubric requirements. I do encourage you to review the APA formatting example handout for your in-text citations. It looks like you have put a direct quote but finished with (…), if that is not the case you could consider paraphrasing the statement as an option as well. HS

Week 10 (4a-c)- You did a nice job documenting all of your assessment findings and vital signs within the EMR. You were also able to retrieve all of the necessary patient information from the chart. Documentation continues to improve with each clinical experience.
(4f)- You met all of the CDG rubric requirements for this week for both your initial and peer responses. You did a nice job associating your patient's current diagnosis as well as health history in order to identify the priority problem for him. 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	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).						S	NA	NA	S	S	S	NA				
b. Apply the principles of asepsis and standard/infection control precautions (Responding).						S	NA	NA	S	S	S	NA				
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).									NA	NA	NA	NA				
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).						S	NA	NA	S	S	S	NA				
e. Organize time providing patient care efficiently and safely (Responding).						S	NA	NA	S	S	S	NA				
f. Manages hygiene needs of assigned patient (Responding).									NA	S	S	NA				
g. Demonstrate appropriate skill with wound care (Responding).									NA		NA	NA				
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						S	NA	NA	S							
		NS				BL	CB	**CB**	**CB**	**HS**	**HS**					

Comments

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

- There is a fire pull station and fire extinguisher diagonally from the 3T east wing desk, at the front of a hallway. There is another fire pull station by the nurse director's office as well as another extinguisher by the stair exit next to room 3027. Great job! BL

Week 9 (5d,e,f)- Nice job working with a patient that had bilateral nephrostomy tubes and a urostomy which were both new to you. You did a great job looking up the necessary information prior to entering the patients room and then also incorporating the patient into the plan of care. HS

Week 10 (5d,e) You demonstrated great management of care for your assigned patient making sure all pertinent interventions were completed. You organized your time appropriately to provide safe, efficient care to ensure positive patient outcomes. Since you had the same patient for two days in a row, you were able to priority your second day more efficiently knowing some of the information from the previous day. 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	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding).									NA	S	S	NA				
		NS							CB	HS	HS					

Comments

Week 9 (6a)- You did a nice job utilizing clinical judgement skills based on your patient's priority problem and then identifying interventions specific to the patient and developing the plan of care. HS

Week 10 (6a)- Excellent job utilizing your clinical judgment skills to care for your patient this week. You assured the plan of care fit your patient's needs and preferences. You will continue to grow these skills as you progress through the semester and program. 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	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).									NA							
b. Recognize patient drug allergies (Interpreting).									NA							
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).									NA							
d. Administer oral, intra-muscular, subcutaneous, and intradermal medications using correct techniques (Responding).									NA							
e. Review the patient record for time of last dose before giving PRN medication (Interpreting).									NA							
f. Assess the patient response to PRN medications (Responding).									NA							
g. Demonstrate medication administration documentation appropriately using BMV (Responding).									NA			NA				
*Week 11: BMV		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	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Reflect on areas of strength**(Reflecting)						S	NA	NA	S	S	S	NA				
b. **Reflect on areas for self-growth with a plan for improvement. ****(Reflecting)						S	NA	NA	S	S	S	NA				
c. Incorporate instructor feedback for improvement and growth (Reflecting).						S	NA	NA	S	S	S	NA				
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).						S	NA	NA	S	S	S	NA				
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).						S	NA	NA	S	S	S	NA				
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).						S	NA	NA	S	S	S	NA				
g. Comply with patient's Bill of Rights (Responding).						S	NA	NA	S	S	S	NA				
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).						S	NA	NA	S	S	S	NA				
i. Actively engage in self-reflection. (Reflecting)						S	NA	NA	S	S	U	NA				
*		NS				BL	CB	**CB**	CB	HS	HS					

Comments

* 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.**

a. The area of strength that I felt I had for week six clinical was displaying a sense of confidence upon entering my patient's room. I made sure to not resist going into the room or put it off and instead conducted the vital signs and assessment with ease and acted professionally and confident with what I was doing toward the patient. You did a great job with your first clinical experience! Keep up all your hard work! BL

b. An area that week six clinical showed me I can use for growth is with ensuring to remember all aspects of my head to toe. This clinical made me realize that I forget some things during a physical assessment and that I need more practice with such. I can improve this by making sure to practice with at least two family/friends every week. Great job identifying an area for self-growth. This is a great plan to help you improve. BL

Week 6-8(i) Great job reflecting on your first clinical experience in your CDG this week. You provided a nice description of your thoughts and feelings before and after the experience. Keep up all your great work! BL

Week 9 a. The area of strength that I felt I had for clinical week 9 was improving my physical head to toe assessment skills to ensure that I didn't forget any aspects of the assessment. It seemed to come much easier to me this week and I felt more confident in doing so after further practicing the skill before this clinical. HS

Week 9 b. An area that I recognized I need some self-growth in from clinical week 9 was charting the physical assessment. This is because I accidentally charted completely through each area of the assessment even if it was within normal limits when you do not need to do so. I plan to improve this by taking advantage of any access we have to Meditech so that I can go into the physical reassessment intervention and get more comfortable with charting such correctly. The documentation will become easier with additional practice. HS

Week 10 a. The area of strength that I felt I had for clinical week 10 was developing a relationship with my patient. My patient was very kind and talkative so I felt like I was really able to get to know him and develop a personable relationship with him. HS

Week 10 b. An area for self-growth I recognized with clinical week 10 would still have to be the charting. I missed two small things on my charting so I need to keep working on this, and I plan on improving this further in the future by making sure I slow down my charting and recheck all of it before saving it. Double checking can help catch the areas that may have been missed or overlooked, especially with all of the interruptions that may occur. HS

Week 10 (8i)- You did not self-evaluate this competency therefore it is a U.

Week 11-addressing of Week 10 (8i). I received a U on week 10 8i because I missed this box and didn't fill it in with any evaluation. I don't have clinical for week 11 so it is an NA, but I am addressing it by ensuring that I will slow down when filling out future clinical tools and recheck my work to make sure that I did not miss any spots I was supposed to fill out.

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. HS

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials
		*	*

Note: Students are required to submit one satisfactory care map by 11/18/2024 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 by 11/25/2024 at 0800 to receive a satisfactory evaluation. ***See Attached Nursing Care Map Grading Rubric**

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Student Name:				**Course Objective:**			
Date or Clinical Week:							
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)**		
	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. 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)**		
Interpreting	4. List all nursing priorities and highlight the top priority problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	5. State the goal for the top nursing priority.	**Complete**			**Not complete**		
	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**		
	7. Identify all potential complications for the top nursing priority problem.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**		
	8. Identify signs and symptoms to monitor for each complication.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**		
Responding	9. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	10. Interventions are prioritized	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	11. All interventions include a frequency	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	12. All interventions are individualized and realistic	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		

	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**		
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	**>75% complete**	**50-75% complete**	**<50% complete**	**0% complete**		
	15. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**		

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 no in-text citation AND reference is 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:

Total Points:

Faculty/Teaching Assistant Initials:

Firelands Regional Medical Center School of Nursing
Nursing Foundations 2024
Simulation Evaluations

Simulation Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
	Date: 11/5/2024 or 11/12/2024	**Date: 11/25/2024 or 11/26/2024**
Evaluation (See Simulation Rubric)		
Faculty Initials		
Remediation: Date/Evaluation/Initials		

* Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 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: _____