**EVALUATION OF CLINICAL PERFORMANCE TOOL**
**Nursing Foundations – 2024**

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

**Student:** Saige Ruffing

**Final Grade: Satisfactory/Unsatisfactory**

**Semester: Fall**

**Date of Completion:**

**Faculty eSignature:**

**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

**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 | N/A | S | N/A | S | N/A | |
| b. Identify cultural factors that influence healthcare (Noticing). | | | | | | | | | NA | S | N/A | S | N/A | S | N/A | |
| c. Coordinate care based on respect for patient's preferences, values, and needs (Responding). | | | | | | S | N/A | N/A | S | S | N/A | S | N/A | S | N/A | |
| d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting). | | | | | | S | N/A | N/A | S | S | N/A | S | N/A | S | N/A | |
| | | | | | | CB | CB | CB | CB | NS | NS | NS | NS | NS | | |
| Clinical Location; Patient age** | | | | | | 3T 90 | NA | N/A | NA | 4N 75 | N/A | 4N 74 | N/A | 4N 75 | N/A | |

**Comments**

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

Week 6 (1c,d): Great job showing respect for your patient's needs, being compassionate and kind while delivering care. You also demonstrated the appropriate use of Maslow's hierarchy of needs during the head to toe assessment performed on your patient during this clinical experience, being you able to recognize physiological needs of your patient when performing head to toe assessment. CB

Week 9 1(c,d) – Good work this week coordinating your care effectively based on your patient's needs, wishes, and values. You addressed the physiological needs first through careful assessment then focused on her psychosocial needs through attentive communication and caring approach. You also were able to coordinate your care effectively around the various other health care disciplines (PT/OT) to ensure all of her needs were met. Well done! NS

Week 11 1(a-d) – You were able to coordinate your care effectively this week with good time management, prioritization, and respect for your patient's wishes and needs. You were timely with your assessments, ensuring her physiological needs were met. You noticed her refusal of SCDs and prioritized placement of ACE wraps to help with edema and circulation. On day two, you noticed your patient's hesitation with receiving nursing care by a student. You were still able to gather important data through assessment, then respected her wishes and collaborated with the assigned RN to ensure other care aspects were met. While this can be difficult as a student when a patient refuses care, I thought you handled the situation well and provided empathy in understanding her level of pain and did not take it personally. Good discussion during debriefing regarding this matter! NS

Week 13 1(a-d) – You were thrown a bit of a curveball to start the week when your assigned patient had to be switched after receiving report. You remained calm and found a new learning experience with your newly assigned patient. On day one, you cared for a patient from a different culture that created some communication barriers. You identified how her cultural factors could impact your plan of care and took on the challenge to learn more. You did a great job coordinating care for your assigned patient, using your communication skills to help her understand the plan of care and your role as the student nurse. You prioritized her oxygenation status and used appropriate prioritization to perform your care. On day 2, you cared for a patient with a current cancer diagnosis awaiting surgery. You developed a rapport with him by assisting the assigned RN the day before and continued your care on day 2 to help meet his needs. Overall great job! NS

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

**Objective**

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

| Clinical Experience | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | 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 | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| b. Use correct technique for vital sign measurement (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| c. Conduct a fall/safety assessment and institute appropriate precautions (Responding). | | | | | | ~~S~~ NA | N/A | **N/A** | NA | S | N/A | S | N/A | S | N/A | |
| d. Conduct a skin risk assessment and institute appropriate precautions (Responding). | | | | | | | | | NA | S | N/A | S | N/A | S | N/A | |
| e. Collect the nutritional data of assigned patient (Noticing). | | | | | | | | | NA | S | N/A | S | N/A | S | N/A | |
| f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding). | | | | | | | | | NA | S | N/A | N/A | N/A | N/A | N/A | |
| 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 | N/A | |
| | | | | | | CB | CB | **CB** | CB | NS | NS | NS | NS | NS | | |

**Comments**

Week 6(2a, b): Saige, you performed a systematic head to toe assessment and retrieved all vital signs within a timely manner. I changed competency “2c” to a “NA” because you did not perform a safety assessment during this clinical. CB

Week 9 2(a,c) – Good work this week in performing your assessments and appropriately determining the priority focused assessment at the end of your clinical experience. You noticed several deviations from normal in addition to normal assessment findings. In the HEENT assessment you noticed visual impairment with the use of reading glasses. In the psychosocial assessment you noticed feelings of stress with family as a support system. For the cardiovascular assessment, you noticed normal pulses and the use of telemetry monitoring. For the musculoskeletal system, you noticed an abnormal/unsteady gait with the use of a brace and walker for ambulation related to her recent back surgery. For the genitourinary system, you noticed the use of an indwelling foley catheter related to his recent procedure and to closely monitor output. Nice job noticing this week! NS
(c) you performed the Johns Hopkins safety assessment to determine she was a high fall risk as a result of her frequent falls at home. You did a great job in your CDG discussing the factors that led to this score and identifying potential safety concerns in the room. You were able to implement all of the appropriate precautions to maintain safety and promote positive outcomes. NS

Week 11 2(A) – Good job discussing and performing priority nursing assessment related to her knee procedure and subsequent tibia fracture. You were able to discuss the priority assessment of circulation to the affected extremity and identified the 6Ps related to potential compartment syndrome to monitor for. NS

Week 11 2(d,e) – You were able to conduct a thorough skin risk assessment this week related to your patient's post-operative status and limited mobility. You discussed the importance of maintaining skin integrity and implemented appropriate interventions to prevent skin breakdown. You were able to notice blistering of the skin on her leg and correlated this to increased swelling/edema and TED stocking that were too tight. Due to the skin breakdown and refusal of SCDs, you prioritized prevention of DVT by applying ACE wraps to help with the edema and circulation to her lower extremity. NS

Week 13 2(g) – you did a nice job this week discussing the diagnostic testing that was performed on your patient related to her oxygenation status. You were able to correlate her CXR with the symptoms she was experiencing and identified nursing interventions aimed at improving his respiratory status. You identified her sputum culture and the results, and correlated these diagnostic tests with the assessment findings that you noticed, such as diminished lung sounds, use of supplemental O2, persistent cough, etc. Overall nice job connecting the pieces between your assessment and the diagnostics performed. NS

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

**Objective**

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

| Clinical Experience | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | 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 | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| b. Hand off (report) pertinent, current information to the next provider of care (Responding). | | | | | | N/A | N/A | **N/A** | NA | S | N/A | S | N/A | S | N/A | |
| c. Use appropriate medical terminology in verbal and written communication (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| d. Report promptly and accurately any change in the status of the patient (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| e. Communicate effectively with patients and families (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| f. Participate as an accountable health care team member in the provision of patient centered care (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| | | | | | | CB | CB | **CB** | CB | NS | NS | NS | NS | NS | | |

**Comments**

Week 6(3a,c,d,e): Great job receiving hand off report on your patient. Good job using medical terminology while communicating with your patient, reporting abnormal findings, and communicating effectively with your staff RN. CB

Week 9 3(a,b) – You are beginning to gain more experience and confidence in receiving and providing hand-off report. You were able to utilize the SBAR sheet to update the assigned RN on your patient's status prior to leaving the floor. (e,f) – you communicated well with the patient, his family member, and the health care team throughout the day. You were accountable for your assessments and nursing interventions and participated as an active member of the health care team. Well-done! NS

Week 11 3(e,f) – You were presented with a challenging situation of your patient accepting and refusing care intermittently from a student nurse. Despite some of the negative comments provided by your patient related to your status as a student, you didn't let it impact your interactions with her. You used good communication to help her feel comfortable with your care, and did not push the issue when she refused. This can be difficult, but you did well discussing factors that related to her negativity such as the pain she was experiencing and the frustration of having to undergo another procedure. You were able to communicate with the assigned RN to ensure nursing interventions were performed while also promoting the comfort of your patient. NS

Week 13 3(e) – Great job providing therapeutic communication with language barriers. You took on the challenge to learn from the experience, and did well to develop a rapport and ensure patient understanding through communication. Additionally, you did well communicating with the assigned RN which provided the opportunity to perform news skills and learn through her experiences. NS

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

**Objective**

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

| Clinical Experience | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | 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 | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| b. Document the patient response to nursing care provided (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| c. Access medical information of assigned patient in Electronic Medical Record (Responding). | | S | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| d. Demonstrate beginning skill in accessing patient education material on intranet (Responding). | | S | | | | | | | S | S | N/A | S | N/A | S | N/A | |
| e. Provide basic patient education with accurate electronic documentation (Responding). | | | | | | | | | NA | S | N/A | NA | N/A | S | N/A | |
| f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| *Week 2 –Meditech | | CB | | | | CB | CB | **CB** | CB | NS | NS | NS | NS | NS | | |

**Comments**

Week 2(4c,d): Satisfactory for listening attentively and actively participating in the Meditech orientation clinical. You showed beginning competence in the ability to access a patient's EHR, document care in an intervention, and locate patient data. You were able to access Lexicomp to locate patient education materials. Additionally, nursing policies and procedures were located on the health system intranet. Great job! NS/CB

Week 6(4a,b,c,f): Satisfactory job with documentation of the head to toe assessment and vital signs of your patient. Make sure to note any areas you may have forgot to assess, so that assessments and documentation are thorough and accurate. You did a good job utilizing Meditech for documentation and to look up patient information. You completed your first cdg, meeting all requirements per the grading rubric, excellent job! CB

Week 9 4(f) - Overall you did a great job with your CDG this week! See my comments on your posts for further information. You did well to ensure all aspects of the CDG grading rubric were addressed. Both posts included an in-text citation and a reference using appropriate APA formatting. Your response post to Cathryn included additional thought and enhanced the conversation. Overall job well done meeting all criteria for a satisfactory evaluation. NS

Week 11 4(f) - Great work with your CDG prompts this week. See my comments on your posts for further details. All criteria were met for a satisfactory evaluation. NS

Week 13 4(a,b) – Your documentation looked very good this week! You are doing a great job of accurately portraying your assessment findings and communicating your findings in the electronic health record. You gained experienced on multiple occasions this week documenting a nurses note related to the care provided. Well done! NS

Week 13 4(f) – Very nice work with your CDG this week! You were descriptive in explaining the patient situation and made good correlations between her assessment, diagnostics, and priority nursing problem. You provided strong interventions based on her oxygenation status, such as elevating the head of the bed, encouraging fluid intake for the thick sputum, and educating on oxygenation. I enjoyed your reflection on your medication administration experience and am glad to hear that it was a positive learning experience! All criteria met for a satisfactory evaluation. NS

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

**Objective**

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

| Clinical Experience | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | 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 | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| b. Apply the principles of asepsis and standard/infection control precautions (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding). | | | | | | | | | NA | S | N/A | N/A | N/A | ~~S~~ NA | N/A | |
| d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| e. Organize time providing patient care efficiently and safely (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| f. Manages hygiene needs of assigned patient (Responding). | | | | | | | | | NA | S | N/A | S | N/A | S | N/A | |
| g. Demonstrate appropriate skill with wound care (Responding). | | | | | | | | | NA | | N/A | S | N/A | ~~S~~ NA | N/A | |
| **h. Document the location of fire pull stations and fire extinguishers. **** (Interpreting). | | | | | | S | N/A | **N/A** | S | | | | | | | |
| | | | | | | **CB** | **CB** | **CB** | **CB** | **NS** | NS | **NS** | NS | **NS** | | |

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

The location of fire pulls stations and fire extinguisher located in the hall next to room 3001 on the wall. CB

Week 6(5a,b): Great job utilizing correct body mechanics and raising the bed while performing an assessment. You did a great job ensuring that you foamed in/out when entering/exiting patients' rooms. CB

Week 9 5(b,c,d,e) – You were able to gain valuable experience this week in various different nursing assessments and skills. You were able to successfully discontinue an indwelling foley catheter using appropriate aseptic technique. The catheter balloon was drained by gravity, the urine output was measures and you assessed the urine characteristics, you educated the patient on the procedure and removed the catheter without complications, well done! You also gained experience in observing PT/OT work with your patient for hygiene and mobility needs. Additionally, you gained experience in switching the wound vac collection device to a portable unit for her Prevena wound vac. In each of these instances, you showed beginning dexterity, managed your time well, and promoted positive outcomes. NS

Week 11 5(d,f) – You did well managing various patient care situations this week. One in particular was related to a new order received to perform a bladder scan and insert a foley catheter if >300 was observed. In discussion, you noted that your patient had a Purwik in place and had great output during your time caring for her. You questioned this order as you did not notice any signs of urinary retention using good clinical judgment. You were able to assist the assigned RN with performing a bladder scan and the results matched your thought process. Additionally, you were able to address her hygiene needs both pre-operatively and post-operatively. A surgical bath was provided pre-operatively to reduce her risk of infection, and personal hygiene care was provided post-operatively to help with the healing process. NS

Week 13 5(c,g) – These competencies were changed to "NA" because you did not have the opportunity to care for a patient with a foley catheter this week and did not perform any wound care that I recall. NS

Week 13 5(b) – Great job implementing appropriate droplet precautions this week for your patient with pneumonia and neutropenic precautions for your patient undergoing chemotherapy. In all interactions, appropriate precautions were maintained and documented accordingly. On day one, you gained experience with researching why a patient was on precautions and promptly removing the precautions when isolation was no longer required. NS

* End-of-Program Student Learning Outcomes

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

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

**Comments**

Week 9 6(a) – Clinical judgement skills were utilized to identify a priority nursing problem based on the patient care provided and assessments performed. You correctly identified impaired mobility as a priority concern related to her post-operative status following surgery for her back. You also gathered information from the chart to identify her frequency of falls at home and discussed important safety measures to be implemented in the hospital setting. NS

Week 11 6(a) – You continue to enhance your clinical judgement skills with each clinical experience. This week you identified numerous nursing priorities and identified impaired mobility as your priority nursing problem related to her recent knee surgery and tibia fracture experienced during surgery leading to the need for a second procedure to be performed. Good work discussing the assessment findings and risk factors that supported your priority problem in your CDG. Your CDG demonstrated strong clinical judgement in correlating her risk factors, assessment findings, and overall condition. I was impressed with the level of detail provided in your responses! NS

Week 13 6(a) – Nice job with your clinical judgement this week focusing on impaired gas exchange for your patient with COPD, pneumonia, and high levels of oxygen. You were able to notice your patient's decreased oxygen saturation with any activity and observed the respiratory therapist as she discussed and implemented different oxygen delivery methods. You did well to correlate your respiratory assessment findings with abnormal diagnostics and described the nursing implications. Well done! NS

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

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

**Comments**

Week 11 (7g) - You are satisfactory for this competency by attending the Bedside Medication Verification (BMV) clinical orientation, actively listening, observing, and discussing accurate medication documentation and safe administration with the use of the BMV scanner. NS/CB

Week 13 7(a-g) – Great job with medication administration this week! You promoted the safety of your patient by observing the 7 rights of medication administration, performing the three safety checks, and utilizing the BVM scanner. You were tasked with administering numerous PO and one subcutaneous injection this week. You were well-prepared to discuss each medication by conducting research through skyscape. You answered questions appropriately and developed and understanding for why each medication was being administered. You ensured each medication was swallowed safely by being present at the bedside. You gained experience administering a subcutaneous injection, identifying the correct location, and implementing the correct technique. A PRN pain medication was administered. You reviewed the last dose of administration, ensured the correct time frame, and performed a follow up assessment of his pain and documented your findings accordingly. Well done! NS

* End-of-Program Student Learning Outcomes

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

**Objective**

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

| Clinical Experience | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | 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 | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| b. **Reflect on areas for self-growth with a plan for improvement. **** (Reflecting) | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| c. Incorporate instructor feedback for improvement and growth (Reflecting). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| g. Comply with patient's Bill of Rights (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding). | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| i. Actively engage in self-reflection. (Reflecting) | | | | | | S | N/A | **N/A** | S | S | N/A | S | N/A | S | N/A | |
| * | | | | | | CB | CB | **CB** | CB | NS | NS | NS | NS | NS | | |

**** Strength/weakness reflection (a,b): Must have different written example each week of clinical/lab. You must explain your plan for how you will improve. Example, "I am having a difficult time with obtaining a manual BP. I will get a BP cuff from Amy and practice manual BP's with at least three members of my family this week." Please ensure that you answer this section in-depth with your plan of action. Each week must be different.**

Week 6:

A. I feel that my area of strength was being able to communicate with my patient effectively and incorporate/tell my patient what was being done and what specific assessments I was going to be doing to them. Saige, it is so important to have effective communication with your patient, to ensure their safety and knowledge. Great job! CB
B. I feel that my area of growth could be practicing my head-to-toe assessment more, allowing myself to not forget small things that go along with the head to toe. Small things that I missed were having my patient smile/raise eyebrows, asking for name/date of birth, and I had trouble feeling the pedal pulses. I will continue to practice my head-to-toe assessment once a week on a family member. Focusing on the missed assessments every time along with all the steps of the head-to-toe. Saige, you have a good plan in place to ensure that you do not miss important assessment findings. You will find that the more you perform a head to toe assessment the little things you forgot will come naturally and you won't even have to think about it. CB

Week 6(8d, f,h): Excellent job following the student code of conduct, exhibiting professionalism while in the clinical setting, and ensuring that patient privacy was respected. CB

Week 9

A. I feel that my area of strength was being very confident with my clinical overall. Feeling confident taking out a catheter, helping with the wound vac, assessing my patient's pain, dressings, and focused assessment. I felt a lot more comfortable doing tasks that I felt more worried for last clinical. Awesome strengths to note! You were able to perform several skills this week in the clinical setting. Your eagerness to learn and apply the information learned in class and lab was evident. You were well-prepared to remove the catheter and did so in a very smooth process to promote comfort for your patient. You should be proud of your clinical week! Great job. NS
B. I feel that my area of growth could be practicing more documenting and being able to not forget to document some information. During my clinical I was preforming all the tasks correctly though I had to keep going back to document afterwards because I forgot to fill out some information on Meditech that was needed. Or I would forget to mark some boxes and must go into the system and change my mistakes. For the furthering clinicals I will try and do all my documenting at once, practice more in lab, and look more in depth at each section to make sure I didn't miss any information to better my documenting skills. You will find more comfort in documentation the more experiences that you have. It is not uncommon for a foundational level student to have to go back into the chart to document items that were missed. What I do appreciate is the fact that you did so independently and learned from the experience. I think you have a great plan moving forward to improve! NS

Week 11

A. I feel that my strength was documenting this week. I was able to document everything I needed within the patient's room with minor errors. Getting more comfortable with knowing what needs to be documented as I ask my patient questions. Not feeling rushed while doing documentation due to knowing where and what I am documenting on has been a big relief since the first clinical! Very good! Your documentation looked great this week and continues to improve. I am glad that you are seeing growth in this area to where it has become a strength! Your hard work is paying off, keep it up! NS

B. I feel that my area of growth could be standing up for myself more with the patients. Not saying that I should be rude/mean back to the patients but help the patient get an understanding that I am in school to be a nurse and can-do tasks just as well as a RN can. Helping my patient realize that I am there to help them and perform tasks as a nurse would. For the furthering clinicals I will speak up more and further educate to help the patient understand that I am in school and have learned and accomplished the tasks that their RN is doing. Good reflection! This was a difficult situation, as you did nothing wrong, yet your patient was somewhat rude towards you and reluctant to having you provide certain aspects of care. As we discussed in debriefing, it takes time to learn your "nurse voice" but will come with time. While we certainly don't want to be rude to the patient, there are ways to be firm in relaying the importance of certain interventions needing to be performed. Overall I thought you handled the situation very professionally and will learn from the experience. Good thoughts! NS

Week 13

A. I feel that my strength this week was being able to work around a task that is very hard for some people, a language barrier. I was still able to care for her needs and implement nursing interventions though I couldn't understand her all the time. I was able to also communicate with her family members and explain who I was and what I was doing. Her niece was with her and was able to help me communicate with my patient a little more and explain more in depth of what I was saying. Awesome strength to note this week! Your day started off a little chaotic in having to switch patients, but I am glad you had this opportunity. You took on the challenge with a desire to learn more about different cultures and language barriers. It seemed like you were able to develop a rapport with her and utilized resources such as her family member to help with communication. Great job with a challenging situation! NS

B. I feel that my area of growth is going to be passing meds. Not that I did anything horribly wrong, however it is very new task to learn and make sure that it is getting done properly is very important! I feel that passing meds more frequently at my upcoming clinicals is going to give me a great opportunity to learn more about meds in general and get a routine down to pass them in a timely manner, based off different patients needs. Anytime you do something new, nerves will creep in and impact your thought process. We emphasize the importance of safety with med administration and it seems like you understood this concept very well. With anything, when you do something for the first time, you won't have that same level of confidence as you do with things you have experience in. Now that your first one is out of the way, you can build upon your skills and confidence moving forward. Keep up the hard work! NS

* End-of-Program Student Learning Outcomes

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

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

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:<br>• Continue plan of care<br>• Modify plan of care<br>• 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**<br><br>Performance Codes:<br><br>**S**: Satisfactory<br><br>**U**: Unsatisfactory | Simulation #1 (2,3,5,8) * | Simulation #2 (2,3,5,7,8) * |
|---|---|---|
| | **Date: 11/5/2024** | **Date: 11/25/2024 or 11/26/2024** |
| Evaluation (See Simulation Rubric) | S | |
| Faculty Initials | NS | |
| **Remediation: Date/Evaluation/Initials** | NA | |

* Course Objectives

# Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Malone Phillips (O), Abigail McNulty (A), Saige Ruffing (M), Cathryn Palagyi (O)
GROUP #: 2
SCENARIO: NF #1
OBSERVATION DATE/TIME(S): 11/5/2024 1130-1230

| CLINICAL JUDGMENT COMPONENTS | Observation Notes |
|---|---|
| **NOTICING: (1,2,4,6,7) *** <br>• Focused Observation: E A D B <br>• Recognizing Deviations from Expected Patterns: E A D B <br>• Information Seeking: E A D B | **Focused observation** <br>Focused observation on safety when entering the room <br>Focused observation on patient's vital signs when entering the room. <br>Focused observation on patient's persistent cough. Focused observation on respiratory status. <br><br>**Recognizing deviations from expected patterns** <br>Noticed BP 131/75, HR 82, temp 99.2, RR 20, Spo2 of 91% <br>Noticed patient's persistent cough <br>Did not notice tissues with sputum initially. <br>Noticed crackles upon auscultation. <br>Did not notice reddened heels initially. When prompted, performed focused assessment and noticed redness. <br><br>**Information seeking** <br>Confirmed name and DOB, compared with wristband <br>Sought information related to mental status (orientation questions). <br>Sought information related to pain (0/10) <br>Sought additional information related to cough– sputum production, color, consistency, etc. <br>Sought additional information related to GI assessment (nausea, vomiting, stool characteristics) <br>Confirmed name and DOB prior to medication administration (compared with wrist band). <br>Asked patient how she takes her medications. |

| | |
|---|---|
| **INTERPRETING: (1,2,4,6,7) *** <br>• Prioritizing Data: E A D B <br>• Making Sense of Data: E A D B | **Prioritizing Data** <br>Prioritized vital sign assessment first. <br>Prioritized focused assessment on patient's persistent cough and shortness of breath. <br>Did not prioritize oxygen administration when first noticed low Spo2. Medication nurse applied oxygen with medication administration after assessment was completed. <br>**Making Sense of Data** <br>Interpreted low Spo2 accurately. Did not prioritize Spo2 below 93% initially (not making sense of providers order to maintain >93%). (Discussed in debriefing). <br>Interpreted crackles in the lungs related to pneumonia diagnosis. <br>Medication nurse prioritized oxygen administration. Made sense of physician order to maintain >93%. Oxygen initiated per nasal cannula at 2L. <br>Made sense of guaifenesin order for persistent cough. <br>Did not make full sense of atorvastatin (stated it is given for chest pain). |
| **RESPONDING: (1,2,3,4,5,6,7) *** <br>• Calm, Confident Manner: E A D B <br>• Clear Communication: E A D B <br>• Well-Planned Intervention/ Flexibility: E A D B <br>• Being Skillful: E A D B | **Calm, confident manner** <br>Demonstrated confidence in nursing actions and communication with patient and team member. <br>Answered patient's questions appropriately. <br>Good teamwork, collaboration, and communication between assessment and medication nurse. <br>**Clear communication** <br>Introduced self, role, and interventions to be performed when entering the room <br>Good job communicating vital sign results to the patient. <br>Good communication with the patient throughout. <br>Educated patient on pressure to heels and implemented pillow to relieve pressure. <br>Good teamwork, collaboration, and communication between assessment and medication nurse. <br>Educated patient on medications to be administered. <br>Education provided to not chew medications. <br>**Well-planned intervention/flexibility** <br>Focused assessment performed on patient's cough <br>Applied nasal cannula as ordered by physician to maintain Spo2 >93%. |

| | |
|---|---|
| | Focused re-assessment performed on the respiratory system. Noticed Spo2 at 94% on 2L.<br>Elevated HOB when shortness of breath was noticed.<br>Educated patient on pressure to heels and implemented pillow to relieve pressure.<br>Educated patient on medications to be administered.<br>Education provided to not chew medications. Used BMV scanner for patient safety.<br>Assessment nurse returned to perform a focused respiratory assessment after interventions performed.<br><br>**Being skillful**<br>Neuro assessment performed (orientation, numbness, tingling, etc).<br>Good HEENT assessment performed accurately.<br>Assessed skin turgor<br>Good integumentary assessment (temperature, moisture, edema, etc).<br>Good pulse assessment, compared bilaterally.<br>ROM assessed in all extremities.<br>Good heart and lung sound assessment in all appropriate locations.<br>Good GI assessment (Looked, listened, felt). Asked about last BM – sought additional information.<br>Good GU assessment<br>Assessed extremity strength (push/pull).<br>Safety assessment performed.<br>7 rights of medication administration observed and confirmed with team member.<br>Performed 3 safety checks.<br>Remember to look up side effects when administering medications. |
| **REFLECTING: (1,2,4,5,6,8) ***<br>• Evaluation/Self-Analysis: E A D B<br>• Commitment to Improvement: E A D B | Observers did a great job actively paying attention to detail throughout scenario. Constructive feedback was provided during debriefing. Observers provided good insight on safe medication administration, including the rights of medication administration. Observers also praised students for initiating O2 via nasal cannula for low Spo2 per orders while also discussing the need for prompt intervention. Constructive feedback was provided related to areas for improvement. Good discussion and support amongst those performing in the scenario and the observers.<br><br>Everyone participated well in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas for improvement and discussed ways to make improvements in the future. The assessment nurse and medication nurse demonstrated collaborative communication between the team members and the patient. |

**SUMMARY COMMENTS: * = Course Objectives**

**Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.**

**E= Exemplary**

**A= Accomplished**

**D= Developing**

**B= Beginning**

**Scenario Objectives:**

- Demonstrate collaborative communication with patients and healthcare team members (1,3,8) *
- Execute accurate and complete head to toe assessment (1,5,6,8) *
- Select and administer prescribed medications following the six rights (1,4,5,7) *
- Identify and provide accurate patient education (1,2,3,4,5,7) *

Lasater Clinical Judgement Rubric Comments:

Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Identifies obvious patterns and deviations, missing some important information. 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.

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. Develops interventions on the basis of relevant patient data. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.

Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered. Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses.

**Satisfactory completion of NF simulation #1.**

**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:** 8/19/2024 | **Date:** 8/27/2024 | **Date: 9/6/24** | **Date:** 9/11/2024 | **Date:** 9/18-19/2024 | **Date:** 9/25/2024 | **Date:** 10/2/2024 | **Date:** 10/9/2024 | **Date:** 10/16/2024 | **Date:** 10/24/2024 | **Date:** 10/29/2024 |
| Evaluation: | S | S | S | S | S | S | S | S | S | S | S |
| Faculty Initials | HS | HS | NS | AR | FB | AR | NS | FB | AR | 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**

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

Student Name: Saige Ruffing

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. HS

**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! HS

**Week 3 (Vital Signs):**

Awesome work 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 three blood pressure results on the Vital Sim manikin for a satisfactory evaluation. The first blood pressure measurement was set at 134/78, and you identified it as 138/80/64, which within the desired range for a satisfactory result. The second measurement was set at 102/66 and you interpreted it as 78/68, outside of the desired range. The third measurement was set at 156/92, and you interpreted it as 158/92– within the desired range! Be sure to continue practicing with manual blood pressures, focusing on reading the number lines accurately. You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic vital sign assessments. You only required one prompt throughout the whole checkoff related to obtaining a heart rate in addition to blood pressure with orthostatic vitals, great work! You provided accurate detail in your communication with the "patient". Your documentation was 100% accurate. Keep up the great work!! NS

**Week 4 (Assessment):**

Satisfactory with head to toe assessment guided practice, hand-off report activity, Lexicomp/Intranet navigation activity, and the assessment/safety activity utilizing your clinical judgment skills. Great job! You will be observed 1:1 for Head to Toe Assessment competency during Week 5. AR

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

Excellent job in lab this week! You have satisfactorily performed a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall very well done. You paid close attention to detail and were clearly well-prepared. You did not require any prompts throughout your assessment, nice work! You demonstrated professional and informative communication. Job well done! FB

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.

- **Pain**- omitted "9" for pain rating (put 9/10 under radiation comment); put "at rest" under associated symptoms comment rather than "precipitating event"
- **Vital signs**- Documentation was complete and accurate.
- **Safety**- Documentation was complete and accurate.
- **Physical reassessment**- Respiratory- omitted "not humidified"; Cardiovascular- omitted "left upper extremity, non-pitting, puffy"

Mobility Lab 9/19/2024: 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. FB

**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):**
Nice job this week in the skills lab demonstrating competence for Nasogastric Tube Insertion, Irrigation, and Removal through 1:1 observation. You did not require any prompts throughout the entire process. During removal, you were able to remind yourself when to properly remove the tape prior to removal. During the check-off, you recognized that the tape was removed too early and were able to reapply the tape to follow the proper sequence. You were able to verbalize understanding of the difference between irrigation and flushing and aspiration precautions. 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! NS

**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. You did not require any prompts during the sterile glove application, Foley catheter insertion or the removal of the catheter. You had very good communication with your "patient". Great job! You correctly verbalized the differences in catheter insertion for a male patient. 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!!! FB

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. 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 "clean" field and followed aseptic technique throughout. You were able to remind yourself to pat dry the wound and pour sterile saline over the packing gauze prior to putting on your "clean" gloves. As a reminder for the future, always verify the patients name/date of birth by looking at their ID band and be careful not to touch the inside of the gauze packages. 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! AR

**Week 10 (Safety; Infection Control; Prioritization; Weight; Pressure Ulcer Prevention; Soft Restraints; Doppler BP):**
Satisfactory participation with the following stations: Prioritization, Patient Weight, Restraints, Doppler BP, Meditech documentation, and Patient Scenario involving Safety, Infection Control, and Pressure Ulcer Prevention. Keep up the hard work! AR

**Week 11 (Medication Lab):**
Satisfactory participation and performance of the following skills in the medication lab: Oral, IM, SQ, and ID medication administration; performance of IM injection on fellow student; performance of SQ & ID injection on practice sponge; use of and drawing medication out of ampule and vial; communication/accountability activity with awareness of allergies & dosage calculation. AR

**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: _____