

**Er34EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2024**

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

Student: Cameron Beltran

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion: 11/26/2024

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

Faculty eSignature: Brian Seitz MSN, RN, CNE

DIRECTIONS FOR USE:

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

METHODS OF EVALUATION:

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

7/18/24 KA

Absence: (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)

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

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

Satisfactory (S): Safe; accurate each time, efficient, coordinated; confident, focuses on the patient; some expenditure of excess energy; within a reasonable time period; appropriate affective behavior; occasional supporting cues; minimal faculty feedback related to written clinical work.

UNSATISFACTORY CLINICAL PERFORMANCE

Needs Improvement (NI): Safe; accurate each time; skillful in parts of behavior; focuses more on the skill and self rather than the patient; inefficient, uncoordinated, anxious, worried, flustered at times; expends excess energy within a delayed time period, frequent verbal and occasional physical directive cues in addition to supportive cues; faculty feedback required in several areas of clinical written work.

Unsatisfactory (U): Failure to achieve the course competency, safe but needs faculty reminders constantly, not always accurate, unskilled, inefficient, considerable expenditure of excess energy, anxious, disruptive or omitting behaviors, focus on skills and/or self, continuous verbal and frequent physical cues, unsafe, performs at risk to patient/clients/others, unable to function, incomplete, erroneous, faulty, illegible clinical written work, no feedback sought from faculty or response to feedback not evident in submitted written work. If the student does not self-rate a competency the competency is graded "U." A "U" in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the "U", the faculty member (s) will continue to rate the competency unsatisfactory.

OTHER

Not Available (NA): The clinical experience which would meet the competency was not available

Grey shaded weekly competency boxes do not need a student evaluation rating or faculty/teaching assistant initials.

SATISFACTORY CARE MAPS		
Date	Priority Nursing Problem/Diagnosis	Faculty's Initials
8/30/2024	Ineffective breastfeeding	BS

Objective																		
1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
Competencies:		S	NA	NA	S	S	S	S	S	S	NA	NA	NA	NA	NA	NA	NA	S
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA	NA	NA	NA	NA	S
b. Provide care using developmentally appropriate communication.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA	NA	NA	NA	NA	S
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		S	NA	NA	S	S	S	S	NA	NA	NA	NA	NA	NA	NA	NA	NA	S
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		S	NA	NA	S	S	S	S	NA	NA	NA	NA	NA	NA	NA	NA	NA	S
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		S	NA	NA	S	S	S	U	S	S	NA	NA	NA	NA	NA	NA	NA	S
Clinical Location Age of patient		FIRELANDS OB. 1 DAY	NA	NA	Bellevue Elementary School, 1st	Fisher Titus ER, 28	Fisher Titus OB.		Lactation and St. Mary's, range of ages, Mothers and	Boys and Girls Club, k-	NA	NA	NA	NA	NA	NA	NA	S
		BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS

Comments:

Infancy stage, trust vs mistrust

This stage starts at birth, the baby learns to trust caregiver for stability **BS**

Week 2 – 1a – You did a wonderful job providing holistic care to the baby you were assigned to this week. **KA**

Week 2 – 1c – You did a great job assessing your assigned newborn utilizing developmentally appropriate assessment skills and reporting any abnormal findings. **KA**

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

Week 2- 1d – You were able to identify safety measures used to keep newborns safe on the OB unit and completed mother newborn verification process. KA

Week 5- School age, industry vs inferiority

This stage starts at 6 and goes to 11 years old BS

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

Early adulthood, intimacy vs isolation . This starts at age 19 and ends at 29. BS

Week 6- 1a- Nice job describing one of the patients you cared for at the FTMC ER and the care you provided to them. BS

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

Week 7- 1a- You did a nice job this week describing your patient this week. 1d- You also did a nice job discussing a safety concern in maternity nursing. 1e- You received a U in this competency for not providing Erikson’s stage of growth and development for your patient. Please respond below regarding how you will prevent this in the future. BS

Week 8- I will correct this U by making sure to type out the stage below before filling the S in so that I do not overlook it on the next tool. BS

Early adulthood, intimacy vs isolation . This starts at age 19 and ends at 29(lactation) BS

Week 8- 1a- Great job describing a patient visit that you made with the Lactation Nurse Consultant. Great job also of discussing the patient’s knowledge of the breastfeeding process. 1c- With help from the education you provided, you were able to see the baby latch on to the breast and hear her swallow. BS

Week 8 – 1a & 1b – You did a wonderful job working with the elementary children while on clinical at St. Mary’s Catholic School. You provided developmentally appropriate communication and adjusted your presentation to meet the needs of both the children K through 2nd and 3rd through 5th. Terrific job! KA/MD/RH/BS

Week 9 – The children from this week were School age, industry vs inferiority. This stage starts at 6 and goes to 11 years. BS

Week 9- 1b- Nice job adjusting your communication techniques to provide developmentally appropriate communication to the various age groups at the Boys and Girls Club. 1e- You were able to discuss some of the differences you noticed while working with children of various ages at the Boys and Girls Club. BS

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

Comments:

Week 2 – 2c – You did a wonderful job providing a baby bath to your assigned newborn. You monitored the newborn's temperature before and after bath as well as helped prevent hypothermia by utilizing appropriate warming techniques. 2d – You did a nice job following the rights of medication administration and was able to give an IM injection on the newborn. KA

Week 5 – 1k – You did a nice job discussing with the school nurse about cultural beliefs of the school system you performed hearing and vision screening in. She discussed the emphasis of community and you were able to observe different aspects of the school that supported this culture. KA

Week 6- 1k- You did a nice job discussing some potential cultural implications that should be considered when planning care for patients. BS

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

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

Week 7- 1i- You did a good job discussing examples of family bonding you witnessed and explaining the phase of postpartum adjustment your patient was in. BS

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

Comments:

The baby was shown to have great support from his family and a safe home to go to after discharge. (This will need to be more substantive in the future. BS

Week 5- Some children are do not have access to certain doctors or resources that provide glasses due to financial or insurance reasons. This can prevent their ability to learn and pay attention in class. Good example. BS

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

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

Week 6 – My patient had a supportive mom that brought her to the ER . This provided my patient with emotional support, which aids in the promotion of healthy recovery. Good point. Emotional support can be very beneficial for those experiencing medical issues. BS

Week 7- My patient had two incomes and a mother to support the baby financially when they got home from the hospital. This helps! Along with a new baby comes many new expenses. BS

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

Week 8- One patient that I helped with had insurance that was able to cover breast pumps that would help her with breast feeding. This positively affects her and her baby. BS

Week 8 – 2g – You worked with the children at St. Mary’s Catholic School and observed different cultural and social aspects that could impact their overall health and well-being. You provided education to meet the needs of this population to positively impact their health. KA/MD/RH/BS

Week 9 – A SDOH is the support system. Although the children may have had a parent to pick them up after and take them home, the parents of the children at this club are very busy and working hard to provide for them. Although there is financial support for the children there may not be time for emotional support. Yes, and this can lead to behavioral problems, problems in school, with relationships, and the list goes on... BS

Week 9- 2g- You did a nice job discussing two social determinants of health and how they could affect the children at the Boys and Girls Club. BS

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

Comments:

Nurses may have kept some information about a baby to spare their (who's feelings?) feelings and save stress. There was a baby experiencing respiratory stress and not all the information about his condition could have been relayed since it was under control. If this happened, it could be considered an ethical issue. **BS**

Week 5- A student's parent can object to a screening test for their child on religious grounds. If a religious objection is made, a written and signed statement must be given to the local school authority. This could be a problem because it will not be able to detect early signs of vision or hearing problems. **Yes, and with long-term consequences. BS**

Week 6 – Some patients are called “frequent flyers” and it is hard to tell if they are drug seeking or have real pain. We always believe the patient; however, the RN must be aware or signs. It is an ethical issue to not treat the patient for what they say, but also an issue to give a drug seeker medication. The RN said that this was a real problem, although she has never experienced it. **Yes, this is definitely an issue. An experienced nurse can pick up on some behaviors that are indicative of real pain, and in some cases, patients can complain of severe pain but are not showing any signs of actually being in pain. It is a tough situation though, and in most cases it is usually the best bet to treat what they say the pain is, at least initially. BS**

Week 7 – One patient agreed to have an epidural, but it did not work so they tried to do it again, but it refused. It was a problem because we could not force her to do it again but she was in agonizing pain, screaming and using all her energy. **Can't say I've had experience with this but I think I would take the epidural no matter what! BS**

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

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

Week 8- An ethical issue is forcing a mother to breastfeed that does not want to. Although it is in best interest for the baby, it does not respect the autonomy and rights of the mother. Good point. Because it is often encouraged, some feel that they are being told what to do and pressured into it when they really don't want to. BS

Week 8 – 3a & 3c – You were kind and respectful when interacting with children and staff at the school. All the teachers and the principal complimented your presentation and how wonderful you were with the children. Keep up the excellent work! KA/MD/RH/BS

Week 9- An ethical issue that might be faced is when a teacher sees signs of abuse. The teachers are probably mandatory reporters, but the parents remove the child from the club, depriving them of a safe place with a hot meal after school. Yes, and for some of these children, what they get to eat at the club is all they have until breakfast at school the next day. BS

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

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

Week 5 – 4b – You worked with the nurse to gather information on the hearing and vision screenings utilizing the provided papers for documentation. You then helped alphabetize and document the information further on the required ODH documentation forms. This was a terrific help to the school nurse. 4d – You did a nice job educating the first graders as needed on the screening process and ensuring they were able to perform it correctly so the results would be valid. You were kind, caring, and professional with your interactions with the students. Keep up the nice work. KA

Week 6- 4a- Great job listing some priority nursing interventions that were performed for your patient in the FTMC ER. BS

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

Week 8- 4d- You did a good job detailing the education provided to the patient regarding breastfeeding. BS

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

Week 8 – 4d – You worked with your classmates to develop a presentation on your assigned topic for the elementary students. Your teaching was fun, developmentally appropriate, and interactive. You utilized reputable resources to ensure the information was accurate that you presented. All the students were positively impacted by your education. Marvelous job! KA/MD/RH/BS

Week 9- 4d- You were able to provide developmentally appropriate education to children of various ages at the Boys and Girls Club. Nice job! BS

Student Name: C. Beltran		Course Objective: Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children.					
Date or Clinical Week: Week 2							
Criteria		3	2	1	0	Points Earned	Comments
Noticing	1. Identify all abnormal assessment findings (subjective and objective); include specific patient data.	(lists at least 7*) *provides explanation if < 7	(lists 5-6)	(lists 5-7 but no specific patient data included)	(lists < 5 or gives no explanation)	3	Nice job listing abnormal observation and assessment findings based on your patient experience this week. Several abnormal findings were identified and listed. Nice job reviewing and including pertinent risk factors related to your priority problem of ineffective breastfeeding.
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	(lists at least 3*) *provides explanation if < 3		(lists 3 but no specific patient data included)	(lists < 3 or gives no explanation)	3	
	3. Identify all risk factors relevant to the patient.	(lists at least 5*) *provides explanation if < 5	(lists 4)	(lists 3)	(lists < 3 or gives no explanation)	3	
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	Three high priority nursing problems were identified. Ineffective breastfeeding was appropriately selected as the top priority problem. All relevant assessment data was highlighted pertinent to the priority problem. Three potential complications were identified, each supported with signs and symptoms to monitor for.
	5. State the goal for the top nursing priority.	Complete			Not complete	3	
	6. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	7. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)	3	
	8. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)	3	
Responding	9. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	Nursing interventions related to the top priority were listed. Interventions were appropriately prioritized. Each listed intervention included a frequency and most contained a rationale. All listed interventions were individualized and realistic to the patient situation.
	10. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	11. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	12. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete	3	

*End-of-Program Student Learning Outcomes

Criteria	3	2	1	0	Points Earned	Comments	
13. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete	2		
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	An evaluation of all abnormal findings was provided along with a determination to continue the plan of care. I would suggest being a little more descriptive in your evaluation. Ex. Blood sugar is normal could be written- Current FSBS is 88. Calm quiet, and awake- Baby is resting quietly, is awake, and appears calm.
	15. Evaluation includes one of the following statements: <ul style="list-style-type: none"> Continue plan of care Modify plan of care Terminate plan of care 	Complete			Not complete	3	

Reference

An in-text citation and reference are required.

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

The care map will be graded “unsatisfactory” if both in-text citation and reference are not included.

Total Possible Points= 45 points

45-35 points = Satisfactory

34-23 points = Needs Improvement*

< 23 points = Unsatisfactory*

***Total points adding up to less than or equal to 34 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.**

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

Faculty/Teaching Assistant Comments: Cameron, great work with your care map related to ineffective breastfeeding. See comments provided throughout the rubric. Let me know if you have any questions. Keep up the hard work! BS

Please review Rachel’s email about citing references so as to not run into a problem in the future.

Total Points: 44/45 Satisfactory

Faculty/Teaching Assistant Initials: BS

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

Comments:

Week 2- 4f, g- These competencies are incorporated throughout your care map. BS

Week 6- 4f, g, h- You were able to discuss some diagnostic procedures and medications involved in the care of your ER patient. BS

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

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

Comments:

Week 2 – 5a – You did a great job showing interest and enthusiasm while in OB. You sought out new learning experiences while on clinical and were willing to assist and observe in all aspects of the OB unit. KA 5e – You did a nice job documenting the newborn assessment in the EMR for the first time. You asked appropriate questions to ensure you were able to document the assessments accurately. 5f – You provided hand off report to the appropriate nurse when leaving clinical at the end of shift and ensured they had the necessary information to provide continuity of care after we left. KA

Week 6- 5a- You were able to learn about a new way of disposing of narcotic medications during your time in the FTMC ER. Good job! BS

Week 6- Feedback from your ER preceptor: Cameron Beltran: marked satisfactory in all areas. Alison Hay, RN

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

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

Week 7- 5a- Nice job explaining the new things you were exposed to on clinical this week, it sounds like you had a good day. 5e- You also did a good job explaining how vaccines are tracked in the EMR. BS

Week 8 – 5a – You did a great job working the children at St. Mary’s Catholic School and not only did an excellent job presenting the education you developed but showed interest in the children and hearing what they had to say about your topic. The school and its students were very appreciative of everything you did. You should be proud of all your hard work! KA/MD/RH/BS

Week 9- 5a- You were active and engaged while providing education to the K-6 grade children at the Boys and Girls Club. BS

From your Lactation Nurse Consultant preceptor: Cameron Beltran: Marked excellent in all areas. Rebecca Smith RN, IBCLC

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

Comments:

- I need to improve on my confidence with picking a baby up and taking it from someone's arms. I will improve by next clinical by remembering that if I support the head, neck, and butt I can trust that I will not harm the baby. **Yes, we need to be careful, however they are very resilient. You will be more comfortable with time.**
BS
- I need to improve my head-to-toe check off on a baby, I will improve by next clinical by reminding my self not to forget to check the reflexes of the feet and legs.
Good plan. BS
- I need to improve on my patience. I was starting to get a little frustrated with a few children that would not follow the directions. Even though they heard the beep they would not raise their hand, and it took way longer than it should have to evaluate them. I will improve by remembering that some children take longer to

understand the same thing that a child of the same age might understand with ease. I will also keep in mind that some children just do not like to listen, and I just have to be more patient. **Yes, children can be frustrating, and this is just one example. BS**

I need to improve on patient comfort. A couple of patients were expressing strong feelings of “not wanting to go on”, or “wanting to end her suffering”, and I did not know what to say, except I am sorry. I will improve on this by reviewing therapeutic communication before my next clinical. **Good idea. It is good to think about these kinds of things because we never know what we are going to be faced with from day to day. BS**

I need to improve on answering patient and family questions on the spot. Even though I knew the answers, I was not confident enough to tell them and told them to ask the RN in fear of making a mistake. I will improve by being confident of my answers by next clinical. **Don't be too hard on yourself. Your comfort in these types of situations will come with time. BS**

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

Week 7- 6e- You received a U in this competency for not having your tool submitted by 0800 on 10/4/2024. Please respond below on how you will prevent this in the future. BS

**I will prevent this rating in the future by turning in my clinical on time each week, and double checking to make sure that I did so every Thursday night. BS
Cameron, nice work this first half of the semester. Keep up the good work! BS**

A goal for improvement is filling my entire clinical tool in and also turning it in on time, and I will get better at this by double checking and setting reminders each week. Sounds good, Cameron. Good plan. BS

I need to take the stage of development more into consideration when planning teaching for children. I did not consider the fact that some children may not yet know how to read at younger stages. I will improve by keeping in mind that some children are a little ahead or behind average expectations. Yes, although most children progress at relatively the same pace, it is important to identify those they may not be hitting their milestones so that interventions can be initiated if needed. BS

Week 9- 6d,e- You were prepared for your activities at the Boys and Girls Club and acted professionally at all times. BS

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

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

* Course Objectives

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

* Course Objectives

Comments:

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

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

* Course Objectives

Comments:

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Beltran (M), A. Drivas (C), Gresh (A)

GROUP #: 4

SCENARIO: Pregnancy and PPH

OBSERVATION DATE/TIME(S): 9/12/2024 1200-1330

CLINICAL JUDGMENT COMPONENTS					OBSERVATION NOTES
NOTICING: (1, 2, 5) * <ul style="list-style-type: none"> Focused Observation: E A D B Recognizing Deviations from 					Nurses enter and introduce self, identify patient. Inquiring about contractions. Pain reassessed following medication administration.

<p>Expected Patterns: E A D B</p> <ul style="list-style-type: none"> Information Seeking: E A D B 	<p>Mona CO feeling dizzy and lightheaded. VS reassessed. Notices low BP and rising HR. Bleeding discovered.</p>
<p>INTERPRETING: (2, 4) *</p> <ul style="list-style-type: none"> Prioritizing Data: E A D B Making Sense of Data: E A D B 	<p>Interpreted need for fetal monitor. Determined need for urine sample, FSBS. FSBS- 200, interpreted as above normal.</p> <p>HR interpreted as being high, BP low. Fundus recognized as boggy. Recognize need to massage fundus.</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> Calm, Confident Manner: E A D B Clear Communication: E A D B Well-Planned Intervention/ Flexibility: E A D B Being Skillful: E A D B 	<p>Asking pertinent questions regarding contractions. Patient repositioned to left side. Fetal monitor applied. Urine sample collected and sent. Call to lab for UA results. FSBS obtained-200. Call to provider. When prompted by provider, inquires about pregnancy history, complications. Orders received for fluids, Procardia, acetaminophen, US to verify dates, and education. Orders read back. Charge nurse explains new orders to patient. Medications prepared and administered. Call to radiology for abdominal US. Pain reassessed. Dietary history inquired about and education provided. THC and prenatal care also discussed.</p> <p>When bleeding discovered, fundal massage initiated. Call to provider to report new findings. Order received for methylergonovine. Methylergonovine prepared, side effects explained to patient, medication administered.</p>
<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> Evaluation/Self-Analysis: E A D B Commitment to Improvement: E A D B 	<p>Team discussion of the scenarios. Team recognized the significance of teamwork and communication, and did well with each. Discussed the importance of SBAR communication when calling the provider. Also discussed risk factors for postpartum hemorrhage and that it is ok to ask for help or offer help to team members. Discussed the importance of providing education to patients, which the team did a good job</p>

	of.
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “developing” or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Implement appropriate nursing interventions and test to monitor fetal well-being during pregnancy upon completion of nursing assessment. (1, 2, 3, 5)* 2. Demonstrate correct technique of uterine massage for postpartum assessment. (1, 2, 4, 5)* 3. Identify the signs and symptoms of postpartum hemorrhage (PPH) and implement appropriate management of the Postpartum Hemorrhage (PPH). (1, 2, 5)* 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (3, 5, 6)* 5. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* 	<p>You are Satisfactory for this scenario! BS</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs Recognizes most obvious patterns and deviations in data and uses these to continually assess Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments Displays proficiency in the use of most nursing skills; could improve speed or accuracy</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses</p>

*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Beltran (A), A. Drivas (M), Gresh (C)

GROUP #: 4

SCENARIO: Shoulder Dystocia and Newborn Care

OBSERVATION DATE/TIME(S): 9/26/24 1200-1330

CLINICAL JUDGMENT COMPONENTS	OBSERVATION NOTES
<p>NOTICING: (Link to Course Objectives) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 	<p>Introduce self. Identify patient name/DOB</p> <p>Pain assessment: rating, description</p> <p>Obtain vitals</p> <p>Listen to lung sounds and heart sounds, abdomen assessment, IV assessment</p> <p>Obtain cervical exam after phone call to provider but prior to nubain administration.</p> <p>APGAR 1 minute: cry, heart rate (assessed 117; actual was 136), respiratory rate (47), tone, color. Total: 9</p> <p>Performs post partum assessment on mom, assess fundus</p>
<p>INTERPRETING: (Link to Course Objectives) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Interpret vitals as WDL</p> <p>Interpret fetal monitor as accelerations and relate that to fetal well being</p> <p>Interpret immediate delivery</p>

					Identify all forms of thermoregulation for baby
RESPONDING: (Link to Course Objectives) *					
• Calm, Confident Manner:	E	A	D	B	Offer pain medication based on pain assessment. Education provided to mother on interactions of medication and monitoring done after administration
• Clear Communication:	E	A	D	B	
• Well-Planned Intervention/ Flexibility:	E	A	D	B	Call healthcare provider in regards to administer or not administer nubain to patient. Use good SBAR when calling healthcare provider.
• Being Skillful:	E	A	D	B	Education provided to mother and sister in regards to antibiotics and GBS+ status
					Medication administration: identify name/DOB, scan patient and medications, check allergies, PCN- hand secondary bag above primary bag, clean hub prior to hooking up to primary tubing, program pump appropriately, unclamp secondary tubing. Nubain- use correct needle size, correct technique, use of needle safety.
					Education provided to mother about risk for shoulder dystocia including risk factors mom has and possibility of having difficult birth.
					Call for help, McRoberts, suprapubic pressure, evaluate for episiotomy, roll to hands and knees, rotational maneuvers, remove posterior shoulder
					Did not call provider prior to delivery
					Immediately dry baby and wrap in blanket, placed baby in warmer, put hat on baby, offer skin to skin to mom after baby assessment done.
					Medication administration: education on vitamin K administration to baby and why necessary. Verify baby band and mom band, scan patient, scan medications, administer vitamin K as subcutaneous injection (should be IM, needle in

	<p>at 90 degrees and straight into muscle), use of needle saety, correct dose, correct needle size. Administration of erythromycin ointment done with correct technique.</p> <p>Education on caffeine intake and breastfeeding baby.</p> <p>Education on post partum depression and “baby blues”</p>
<p>REFLECTING: (Link to Course Objectives) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of scenario and interventions performed. Recognized teamwork, communication, and proper interventions. Discussion of interventions performed including HELPERR and types of heat loss for infant. Team remediated on correct needle size for IM injection on infant. Discussion on importance of calling healthcare provider when patient is pushing and after patient delivers as a healthcare provider should be present at this time.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of Developing or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Select physical assessment priorities based on individual patient needs. (1, 2)* 2. Identify risk factors for shoulder dystocia. (1, 2, 3, 4, 5)* 3. Implement appropriate nursing interventions upon 	<p>You are Satisfactory in this simulation! RH</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient’s situation from the patient and family to support planning interventions; occasionally does not pursue important leads.</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding. Develops interventions on the basis of the most obvious data; monitors progress but is unable to make adjustments as indicated by the patient’s response. Is hesitant or ineffective in using nursing skills.</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are</p>

<p>completion of nursing assessment. (1, 2, 5)*</p> <p>4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the healthcare team. (1, 3, 5, 6)*</p> <p>5. Identify ways in which heat loss occurs in infants. (1, 2, 4, 5)*</p> <p>6. Implement appropriate nursing interventions upon completion of nursing assessment that support thermoregulation in the newborn. (1, 2, 5)*</p>	<p>considered. Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses.</p>
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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **C. Beltran**

OBSERVATION DATE/TIME: **10/17-18/2024** SCENARIO: **Escape Room**

CLINICAL JUDGMENT						OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)*						<p>Noticed patient safety issues throughout the room. These included sharps container on bed, patient hanging off the bed, bed not locked, armband not on patient, syringe, and side rails not up. Noticed the assessment findings in the patient assessment supporting the need for a breathing treatment. Noticed math problems in the box and recognized the need to solve. Noticed some boxes needed a code and one needed a key.</p>
• Focused Observation:	E	A	D	B		
• Recognizing Deviations from Expected Patterns:	E	A	D	B		
• Information Seeking:	E	A	D	B		
INTERPRETING: (2, 4)*						<p>Interpreted the risk in the safety issues for the patient and recognized the need to be fixed. Interpreted the need to work as a group to solve problems and find clues. Interpreted the need to complete the dosage calculation to administer the correct amount of IV fluids. Interpreted the need to administer meds and the need to call HCP to administer the correct doses.</p>
• Prioritizing Data:	E	A	D	B		
• Making Sense of Data:	E	A	D	B		

<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B 	<p>Responded to safety issues by correcting each of them to provide a safe environment for the patient’s care. Responded to instructor cues regarding environment and problem solving. Responded to HCP orders and picked the correct dosage of medication for the patient. Flexible with plan of care and looking for clues as well as communicating with one another effectively. Responded to the patient’s respiratory distress by providing the patient with the ordered breathing treatment.</p> <p>Responded to the healthcare providers order and programed the IV to the correct rate and administered the prescribed IV fluids.</p>
<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Worked together with communication and idea sharing. Collaborated and provided suggestions to one another to make sense of riddles, math formulas, medications, and treatments.</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater’s Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Utilize the concepts of growth and development to identify concerns with patient safety and provide appropriate interventions to address safety concerns. (1, 3, 5)* 2. Administer medications utilizing the concepts of growth and development and the rights of medication administration to prevent errors in the process. (1, 2, 5)* 3. Collaborate with members of the healthcare team to provide safe, holistic, and comprehensive patient care. (1, 2, 4, 5, 6)* 4. Utilize SBAR communication in interactions with members 	<p>You are successful in this simulation as you were able to provide a safe environment for the patient. You were also able to work together as a team to solve the math formulas and give appropriate dosages of medications. Good job! KA/MD/RH/BS</p> <p>Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs Recognizes most obvious patterns and deviations in data and uses these to continually assess Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations Generally communicates well; explains carefully</p>

<p>of the health team. (5)*</p> <p>*Course Objectives</p>	<p>to patients; gives clear directions to team; could be more effective in establishing rapport Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments Displays proficiency in the use of most nursing skills; could improve speed or accuracy</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses</p>
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Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): **Beltran (C), A. Drivas (A), Gresh (M)**

GROUP #: **4**

SCENARIO: **Pediatric Respiratory**

OBSERVATION DATE/TIME(S): **10/24/24 1200-1330**

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
NOTICING: (1, 2, 5) *						Introduce self
• Focused Observation:	E	A	D	B		Ask about breathing, ask about pain (does not use faces scale or ask for a pain rating), ask about cough.
• Recognizing Deviations from Expected Patterns:	E	A	D	B		Identify needle, battery, and scissors in crib. Remove from crib.
• Information Seeking:	E	A	D	B		Respiratory assessment. Listen to lung sounds. Does not remove gown to visualize chest. Does move gown after done with respiratory assessment complete.
						Obtain vitals. Identify elevated temperature.

	<p>Verify symptoms with father report. Ask father questions about illness and how long has been present.</p> <p>Assess ears. Notice drainage from right ear. Assess throat. Notice red throat with moist mucous membranes</p> <p>Medication errors in chart not identified or investigated. Incorrect dose administered to child. During debriefing, medication safe dose identified by students in skyscape. Students then calculated safe dose range for this patient.</p> <p>Reassess pain in ears and throat after ibuprofen administration.</p> <p>Notice increased cough, ask about difficulty breathing. Begin respiratory assessment: listens to lung sounds over gown, after respiratory assessment complete lifts gown to inspect chest. Does identify retractions correctly</p> <p>Pain assessment: asks for rating using 1-10 scale but changes to faces scale.</p> <p>Reassess pain and breathing after acetaminophen and breathing treatment administered.</p> <p>Medication errors in chart not identified or investigated. Incorrect dose administered to child. During debriefing, medication safe dose identified by students in skyscape. Students then calculated safe dose range for this patient.</p>
<p>INTERPRETING: (2, 4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Calculate correct medication math for original orders in chart (amoxicillin and ibuprofen) but does not catch error in orders. Does not identify IV fluids are running too quickly.</p> <p>Correlate retractions with increased respiratory effort and respiratory distress</p>

	<p>Leaves patient in room alone with stridor</p> <p>Leaves room while child oxygenation is in 80s with no oxygen therapy</p> <p>Calculate correct medication math for original orders in chart for amoxicillin and acetaminophen but does not catch error in orders. Does not identify IV fluids are running too quickly. During debriefing, IVF maintenance rate identified and calculated. During debriefing, medication safe dose identified by students in skyscape. Students then calculated safe dose range for this patient.</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B 	<p>Move crib away from wall to prevent patient from grabbing unsafe items</p> <p>Gather information from father in regard to medical history. Provide education to father about limiting secondhand smoke exposure. Explain how can impact lungs and asthma.</p> <p>Does not close crib when leave room but catches it and returns to close crib.</p> <p>Call healthcare provider. SBAR not provided, just jumps into questions. Ask about cetirizine pill and ability to crush it. Ask about racemic epinephrine breathing treatment.</p> <p>Medication administration: ibuprofen, cetirizine, and amoxicillin. check patient, check medications, correct route, dose correct per order in chart.</p> <p>Raise head of bed to assist with breathing</p> <p>Call respiratory therapy for breathing treatment</p> <p>Does not apply oxygen for low pulse ox (88%)</p>

	<p>Medication administration: amoxicillin and acetaminophen. Check name/DOB, scan patient and medications. Correct dose per chart.</p> <p>Apply oxygen to child to increase pulse ox. (2L)</p> <p>Educate father on asthma triggers and what to watch for. Encourage keeping a journal. Educate on peak flow meter to assist with asthma control.</p> <p>Healthcare provider called nurses for update. SBAR very organized. Receive new order for dexamethasone. Do medication math with provider on phone for correct order. Readback order for verification.</p> <p>Medication administration: dexamethasone. Check name/DOB. Educate father on medication and why needed. Scan patient, scan medications, correct dose, correct route.</p>
<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of scenario and recognition of teamwork/communication. Identified lack of double-checking orders for medications. During debriefing all safe dose medications were checked and medication safe doses were calculated by all students. Discussed medication errors and how to identify/prevent doing so in their practice as nurses. Team provided great educate to father and child on illness as well as medications administered and what to watch for at home.</p>

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:

1. Select physical assessment priorities based on individual patient needs. (1, 2)*
2. Administer medications utilizing the concepts of growth and development and the rights of medication administration to prevent errors in the process. (1,2,5)*
3. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)*
4. Utilize the concepts of growth and development to provide therapeutic communication with the toddler and their family. (3, 5)*

You are Satisfactory for this scenario! RH

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. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Makes limited efforts to seek additional information from the patient and family; often seems not to know what information to seek and/or pursues unrelated information.

Interpreting: Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful data. In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.

Responding: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.

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

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: A=Assessment Nurse; M=Medication Nurse; C=Charge (Course Specific)

STUDENT NAME(S) AND ROLE(S): Beltran (M), A. Drivas (C), Gresh (A)

GROUP #: 4

SCENARIO: Pediatric GI

OBSERVATION DATE/TIME(S): 11/5/2024 1200-1330

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
NOTICING: (1, 2, 5) *						<p>Introduce self. Identify patient.</p> <p>Assess pain, assess abdomen. Ask about bruising on stomach.</p> <p>Begin to question story of falling off bike. Continue with head to toe skin assessment and notice bruising on right upper arm.</p> <p>Obtain vitals.</p> <p>Pain assessment using faces scale.</p> <p>Mother leaves room with charge nurse to sign paperwork and discuss illness. Inquire about bruising on Jack. Ask about feeling safe at home.</p> <p>Obtain vitals, complain of stomach pain</p> <p>Patient vomits, assess emesis as bile and Pedialyte.</p> <p>Repeat vitals after emesis</p> <p>Pain assessment with faces scale.</p> <p>Repeat vitals after IV bolus complete.</p>
• Focused Observation:	E	A	D	B		
• Recognizing Deviations from Expected Patterns:	E	A	D	B		
• Information Seeking:	E	A	D	B		
INTERPRETING: (2, 4)*						<p>Temperature: 102.5- interpret as elevated</p> <p>Skin turgor: elastic. Mucous membranes: slightly tacky. Interpreted as possible dehydration.</p> <p>Temperature 100.5- interpreted as improvement after acetaminophen.</p>
• Prioritizing Data:	E	A	D	B		
• Making Sense of Data:	E	A	D	B		

	<p>Temperature: 102.1- interpret as elevated Sin turgor tenting, interpret as dehydration. Mucous membranes tacky, interpret as dehydration Temperature recheck: 100.9- interpret as improved from interventions.</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B 	<p>Education on proper hand hygiene and how to prevent spread of illness through home. Medication administration: cetirizine. Educate on what medication is for. Verify name/DOB, scan patient, scan medication. Correct medication math. Call lab for stool sample results. Stool is positive for rotavirus. Place patient in contact precautions. Call healthcare provider. Update provider on assessment findings and how suspicious of abuse. Update on rotavirus results. Receive order for right arm xray, consult to case management, and encouraged to separate mom from child to further question child. Asked for clarification on acetaminophen order and proper/safe dosing. Repeat all orders back for verification. Offer gown and PPE to mother Education provided to mom about smoking around children and smoking cessation especially while pregnant. Medication administration: acetaminophen. Check name/DOB, educate on what it is for, scan medication, scan patient. Educate patient on proper handwashing after using bathroom. Call case management due to suspicious bruising and suspect for abuse. Update mother on case management consult.</p> <p>Call healthcare provider. Update that he has had no output since morning. Flush IV to ensure patency Acetaminophen administration: acetaminophen. Verify name/DOB, scan patient, scan medication. Correct medication</p>

	<p>math. Call healthcare provider. Provide update from last assessment. Receive new order for IVF bolus and maintenance fluids. Receive new order for Zofran and ibuprofen. Read orders back for verification. Medication administration: IVF and Zofran. verify name/DOB, scan patient, scan medication. Correct medication math. Push IV Zofran slowly. Program pump correctly for bolus.</p>
<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussed the scenario. Also discussed importance of checking recommended doses of medications to ensure safe dose is ordered. Discussed contact precautions and education on how to prevent spreading illness at home. SBAR communication used while calling members of the healthcare team. Recognized need to contact someone to investigate bruising and signs of abuse. Identify need to also investigate abuse on mother as well.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “developing” or higher in all areas of the rubric.</p> <p>E= Exemplary A= Accomplished D= Developing B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 6. Select physical assessment priorities based on individual patient needs. (1, 2)* 7. Provide quality, patient-centered care in an organized, 	<p>Nice work! You are satisfactory for this scenario. RH</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes subtle patterns and deviations from expected patterns in data and uses these to guide the assessment. Actively seeks subjective information about the patient’s situation from the patient and family to support planning interventions; occasionally does not pursue important leads.</p> <p>Interpreting: Focuses on the most relevant and important data useful for explaining the patient’s condition. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient’s data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.</p>

<p>safe manner to a toddler with gastroenteritis. (1, 2, 4, 5)*</p> <p>8. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)*</p> <p>9. Utilize the concepts of growth and development to identify concerns in assessment findings associated with potential child abuse and make appropriate referrals as necessary. (1, 3, 5)*</p> <p>10. Utilize interpersonal skills in the interactions with patients, families, and members of the health team. (3, 5)*</p> <p>*Course Objectives</p>	<p>Responding: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families. Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered. Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses.</p>
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Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO: Empathy Simulation

STUDENT NAME: C. Beltran

OBSERVATION DATE/TIME: 11/7/2024

<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>You reflected on many aspects of your time wearing the empathy belly. Your responses were thoughtful and reflective on how you felt and you compared your experience to a real pregnancy.</p> <p>Great job.</p>
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<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Simulation Objectives:</p> <ol style="list-style-type: none"> 1. Identify common possible discomforts of the pregnancy and how to empathize with the pregnant patient and childrearing family. (1, 2, 6)* 2. Describe how patient-centered care is dependent on past medical history, cultural history, social history, and pregnancy/birth history. (1, 2, 4)* 3. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)* <p>Developing to accomplished is required for satisfactory completion of this simulation.</p>	<p>Comments</p> <p>You are satisfactory for this simulation. BS</p>
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*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **C. Beltran** OBSERVATION DATE/TIME: **11/19/24** SCENARIO #: **Student Developed Scenarios**

CLINICAL JUDGMENT					OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)*					<p>Noticed deviations from normal with physical assessment and inquiry. Information seeking regarding patient condition as well as with parent/support person at bedside when appropriate.</p> <p>When developing your scenario, you noticed the important</p>
• Focused Observation:	E	A	D	B	
• Recognizing Deviations from Expected Patterns:	E	A	D	B	

<ul style="list-style-type: none"> • Information Seeking: E A D B 	<p>assessment aspects to include for a patient/support person with your assigned diagnosis.</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Was able to interpret data pieces and prioritize accordingly.</p> <p>For each scenario, care was given in gathering details needed in order to phone the healthcare provider and provide SBAR.</p> <p>When developing your scenario, you interpreted the expected path of the disease process and necessary nursing interventions to include in the patient's care.</p>
<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B 	<p>Responded with communication that was collaborative between roles. Clear communication was utilized between colleagues.</p> <p>Clear communication was utilized with family and layman's terms were utilized when appropriate.</p> <p>Responded with interventions that were planned accordingly and verbalized when necessary.</p> <p>Skill in identifying focused assessments as well as timely reassessments were utilized.</p> <p>Family members and others of the healthcare team were kept up to date on patient condition and given education for current condition as well as for preventative measures.</p> <p>In response to your assigned disease process you developed a comprehensive simulation that encompasses aspects of assessment, interprofessional communication, and nursing interventions appropriate for the patient scenario you developed.</p>
<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Reflected with a self-analysis of assessment and analysis of data to identify missing pieces of the scenario.</p> <p>Actively participated in providing constructive feedback to all groups observed throughout the simulation.</p>

<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater’s Clinical Judgment Rubric</p> <p>Developing or higher in all areas is required for satisfactory completion of this simulation.</p> <p>Objectives</p> <ol style="list-style-type: none"> 1. Select physical assessment priorities based on individual patient needs. (1, 2)* 2. Provide quality, patient-centered care in an organized, safe manner to patients and families. (1, 2, 4, 5)* 3. Prioritize patient care of the patient after end-of-shift report. (2, 5)* 4. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* 5. Utilize the concepts of growth and development to provide therapeutic communication with the patient and family. (1, 3, 5, 6)* 6. Utilize interpersonal skills in the interactions with patients, families, and members of the health team. (3, 5)* 	<p>The student developed scenarios were completed successfully. You are satisfactory for this simulation. KA/MD/BS/RH</p>
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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **Cameron Beltran**, Grace Catanese, Karli Schnellinger, Savanah Willis OBSERVATION DATE/TIME: 11/22/24 SCENARIO: Comprehensive Simulation

<p>CLINICAL JUDGMENT</p> <p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B 	<p>OBSERVATION NOTES</p> <p>You noticed suspicious bruising on patient and patient’s physical appearance and psychosocial status as deviation from normal.</p> <p>You noticed environmental concerns throughout the home that would be safety hazards.</p>
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<ul style="list-style-type: none"> Information Seeking: E A D B 	<p>You noticed abnormal family functioning as you progressed through the simulation.</p> <p>You noticed the signs of respiratory distress and dehydration in the children.</p> <p>In the mother encounter you noticed suspicious bruising on the mother's face and neck. You also noticed the poor environment with chips, pop, rats, spider, and cockroaches scattered throughout the room. You also obtained vital signs and performed a BUBBLE LE assessment during your visit. Additionally, you noticed that the mother had a unprescribed medications, is a current cigarette smoker, and had a dysfunctional family dynamic when having conversations on home life.</p> <p>Noticed multiple bugs in kitchen. Noticed exposed cleaning supplies that kids could get into. Noticed expired infant formula. Noticed lack of nutritious foods in the refrigerator. Noticed open beer bottles. Witnessed father preparing bottle.</p> <p>You provided a thorough assessment to the children of the household recognizing concerns of an asthma attack in the 8-year-old and dehydration and failure to thrive in the newborn.</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> Prioritizing Data: E A D B Making Sense of Data: E A D B 	<p>You interpreted there were multiple safety concerns as well as education opportunities throughout the family unit.</p> <p>You were able to interpret safety and health issues with each member of the family.</p> <p>You interpreted the need to seek out further information on the health, safety, and environmental concerns found throughout the home visit.</p> <p>You interpreted acute respiratory status changes and lethargy as major assessment concerns in the children in this home environment.</p> <p>In the mother encounter you interpreted the suspicious bruising on the mother's face for physical abuse from her partner. You identified there were educational opportunities for abused women and children. You were also able to interpret the safety concerns throughout the room with the environment, unprescribed medications, cigarette smoking, and her high blood pressure from not taking her medications. Additionally, you interpreted her BUBBLE LE assessment to tailor appropriate information for education. You encouraged the mother to discuss more of her dysfunctional family dynamic.</p> <p>Interpreted conditions in the kitchen as being dirty, messy, and unsafe for children. Interpreted exposed cleaning supplies as dangerous for children. Interpreted the lack of nutritious foods as not ideal for the family. Interpreted multiple empty beer bottles as potential alcohol abuse. Interpreted father's bottle preparation method to</p>

	be inadequate (formula expired, not using the correct quantity).			
<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B 	<p>You responded to patient’s admission of abuse calmly without judgement. Communicated alternatives clearly and empathetically.</p> <p>You responded with intervention regarding safety of children; flexible and creative with ideas and interviewing each member of the family.</p> <p>You responded by prioritizing the safety and health concerns of each family member and seeking further treatment for them.</p> <p>You sought further information regarding potential abuse from all members of the family.</p> <p>You were respectful and calm in communicating with potential abuser. Coping skills were discussed.</p> <p>You responded to safety, psychosocial issues calmly. You were confident in your approach to each family member.</p> <p>In the mother encounter you educated on the abuse and that it is not her fault. You discussed options for insurance such as Medicaid/Medicare and the importance of having these for medical care. You provided information on not taking unprescribed medications and to lock up all medications so the children do not have access to them. You discussed the importance of taking her prescribed medications (labetalol and Zoloft) everyday and provided resources for delivery services for receiving her medications as well as grocery services. When you performed your BUBBLE LE assessment, you discovered that the mother was breastfeeding occasionally and provided resources for her to obtain a breast pump along with breast care information. Awesome job in the mother encounter!</p> <p>Educated father that cleaning supplies should not be stored in places where the children could get access to them. Educated father to pay attention to expiration dates and how to properly and safely prepare a bottle. Educated that there are resources available to assist with healthy food choices.</p> <p>You recognized the need for involvement by CPS, law enforcement, and hospitalization for medical treatment of both children.</p> <p>You recognized that you only had consent to treat the mother in this situation and sought maternal consent to call for medical assistance and treat the children of the household.</p> <p>You recognized the need and ability to educate the 8-year-old son in the family and educated him on proper baby care and safety concerns in the environment.</p> <p>You recognized the crib may not be the safest option for the newborn in the household and placed the infant in a low-lying clean dresser drawer.</p>			

<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Group discussion of how reviewing the chart during prebrief assisted with developing a plan for the “home visit.” Discussion of what they noticed in mother’s room including abuse, poor nutrition, unlabeled medications, and the filth. The group did a full post-partum assessment on the mother and educated her on post-partum depression as well as a safety plan/resources for abused women. They also educated on breastfeeding since she was reporting poor breastfeeding success, as well as educated on importance of not taking unprescribed medication. During discussion of the partner visit the group noticed the differing stories and were mindful of how to talk to the partner. They also noticed the excessive alcohol present as well as the inappropriate photos on the refrigerator. The group did remove the photos and say those should not be posted as they are concerning. They educated on proper storage of cleaning supplies, bottle preparation, importance of checking expiration dates, and proper nutrition. They offered resources such as WIC and food stamps. When attempting to educate on reduction of alcohol intake, the partner stated he did not have a problem and would not listen to education provided. Discussion of the children’s visit was centered arounds safety. The lack of safety in the room included pillow/lack of safe sleep habits, juice in the baby bottle, and filth. The group noticed that Jack was in respiratory distress and Jill was failure to thrive so they were able to send the children and mom to the ER for further treatment. Team lead discussion with little prompting and were able to have good discussion about their assessment findings and interventions.</p> <p>Upon completion of the simulation, you created an education plan focused on Monica for safety, nutrition, and post-partum depression/baby blues.</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater’s Clinical Judgment Rubric</p> <p>Developing or higher in all areas is required for satisfactory completion of this simulation.</p> <p>Objectives</p> <ol style="list-style-type: none"> 1. Provide quality, patient-centered care in an organized, safe manner. (1, 2, 4, 5)* 2. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* 	<p>Excellent job in communicating without judgement and providing appropriate education, information regarding resources, and intervention for family.</p> <p>You are satisfactory for this scenario. KA/MD/BS/RH</p>

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| <ol style="list-style-type: none">3. Utilize the concepts of growth and development to provide therapeutic communication with the family unit. (3, 5)*4. Identify safety measures for the family unit in the home setting. (1,3,5)*5. Demonstrate thorough environmental assessment in the home setting. (1,3,5)* | |
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*Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2024
Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

I was given the opportunity to review my final clinical ratings in each course competency. I was given the opportunity to ask questions about my clinical performance. I have the following comments to make about my clinical performance/final clinical evaluation:

Student eSignature & Date: ___Cameron Beltran 11-26-24_____