MAdisEVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing- 2025
Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Madison Wright **Final Grade: Satisfactory**

Semester: Summer Session **Date of Completion:**

Faculty: Brian Seitz MSN, RN, CNE, Nicholas Simonovich MSN, RN, Kelly Ammanniti MSN, RN, CHSE
Rachel Haynes MSN, RN
Teaching Assistant: Stacia Atkins BSN, RN

Brian Seitz MSN, RN, CNE

Faculty

eSignature:

DIRECTIONS FOR USE:

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

METHODS OF EVALUATION:

Clinical Patient Profile
Meditech Documentation
Evaluation of Clinical Performance Tool
Onsite Clinical Debriefing
Online Discussion Rubric
Nursing Process Recording Rubric
Geriatric Assessment Rubric
Lasater Clinical Judgment Rubric
Virtual Simulation scenarios
EBP Presentations
Hospice Reflection Journal
Observation of Clinical Performance
Clinical Nursing Therapy Group
Nursing Care Map Rubric

ABSENCE (Refer to Attendance Policy)

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

Initials	Faculty Name
BS	Brian Seitz MSN, RN, CNE
NS	Nicholas Simonovich, MSN, RN
KA	Kelly Ammanniti MSN, RN, CHSE
RH	Rachel Haynes MSN, RN

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| SA | Stacia Atkins BSN, RN |

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.

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Objective

	1. Apply the principles of psychiatric theory in the care of adolescent to geriatric patients with a mental illness diagnosis. (1, 2, 3, 5, 6, 7, 8)*									

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	**Final**
Competencies: a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder. **(noticing)**	NA	S	NA	S	S	S	S	NA	NA	S
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder. **(interpreting)**	NA	S	NA	S	~~NA~~ S	S	S	NA	NA	S
c. Provide culturally and spiritually competent care within the scope of nursing that meets the needs of assigned patients from diverse cultural, racial and ethnic backgrounds. **(responding)**	NA	S	NA	S	NA	S	S	NA	NA	S
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care **(noticing)**	NA	S	NA	S	S	S	S	NA	NA	S
e. Recognize social determinants of health and the relationship to mental health. **(reflecting)**	NA	S	NA	S	NA	S	S	NA	NA	S
f. Develop and implement an appropriate nursing therapy group activity. **(responding)**	NA	S	NA	~~S~~ NA	NA	NA	NA	NA	NA	S
g. Develop a geriatric physical/mental health assessment and education plan. (**Geriatric Assessment**) **(responding)**				NA				S		S
Faculty Initials	NS	BS	SA	SA	BS	NS	BS	BS	BS	BS
Clinical Location	No Clinical	1 South	No Clinical	1 South	Artisans	Detox	Hospice	No Clinical		

Comments:

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Week 2- 1a- You did a nice job explaining the pathophysiology of your client's diagnosis. 1c,e- You also did a great job of describing the milieu and how it can assist clients to regain their independence as they strive for self-care and discussed the social determinants of health and how they can affect a person's mental health. 1f- You did an awesome job implementing your nursing therapy group, The patients were engaged and interactive. BS

Week 4 (1a-e)- Great job with your CDG this week! Nice job discussing your client's mental health history and providing resources related to their diagnosis! I changed 1f to "NA" since you did not provide the activity this week.SA

Week 5- 1a- You did a great job identifying and discussing various risk factors often associated with substance abuse and some of the family dynamics often prevalent when substance abuse is present. 1b- You also discussed some of the characteristics that are often present in those with substance abuse issues. 1d- Nice work discussing the need for mental health programs and strategies to help those in recovery. Examples of several programs were also included. BS

Week 6 1(c) – Nice work discussing potential barriers to culturally and spiritually competent care at the Erie County Detox Center. You identified the lack of religious services available at the detox center as a potential barrier to continued recovery beyond the detoxification process. You were able to identify the importance of religion to some clients and incorporating religious services could provide hope and positive behaviors. Spirituality can play a very important role in recovery and would be great for the detox center to incorporate. I wonder if they provide access to the Bible or other religious documents for the clients while they are there. Good thoughts! NS

Week 6 1(d) – Good discussion provided related to assisting clients in regaining independence at the Detox center. You were able to identify the importance of therapies provided at the center aimed at identifying positive coping mechanisms to improve their quality of life. You also focused on the importance of maintaining structure that can be beneficial in achieving self-care with daily hygiene and nutrition. Allowing clients the ability to check in and out of the detox center also provides a sense of independence in their recovery. As you identified, sometimes the clients overall physical health during detoxification can impact their ability to perform self-care such as hygiene. It's great to hear that the nurses are active in helping clients achieve this level of care. Well done! NS

Week 7- 1a- You did a nice job describing the environment during your time at Hospice. As you discussed, it is typically calm and peaceful inside the hospice unit, and the nurse and staff there do a very good job at maintaining it. You also discussed that the nurses there have several roles they must play at once. From taking care of the patient's needs to pain control to providing support to many family members, and sometimes all at once. Nice work! BS

Week 8- 1g- Madison, Great work on your Geriatric Assessment. The assessments were all thoroughly done and you provided an education plan based off of your client's identified needs. Nice work! BS

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Objective

2. Synthesize concepts related to psychopathology, health assessment data, evidenced based practice and the nursing process using clinical judgment skills to plan and care for patients with mental illness. (1, 2, 3, 4, 5, 6, 7, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
Competencies: a. Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. **(noticing)**	NA	S	NA	S	NA	NA	S	NA	NA	S
b. Identify patient's subjective and objective findings including labs, diagnostic tests, and risk factors. **(noticing, recognizing)**	NA	S	NA	S	NA	NA	S	NA	NA	S
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. **(noticing, interpreting)**	NA	S	NA	S	S	S	S	NA	NA	S
d. Formulate a prioritized nursing plan of care utilizing clinical judgment skills. **(noticing, interpreting, responding, reflecting)***	NA	S	NA	S	NA	NA	NA	NA	NA	S
e. Apply the principles of asepsis and standard precautions. **(responding)**	NA	S	NA	S	NA	S	S	NA	NA	S
f. Practice use of standardized EBP tools that support safety and quality. **(noticing, responding)**	NA	S	NA	S	NA	S	S	NA	NA	S
Faculty Initials	NS	BS	SA	SA	BS	NS	BS	BS	BS	BS

*When completing the 1South Care Map CDG & Geriatric Assessment refer to the Care Map Rubric.

Comments:

Week 2- 2a,b,f- You did a nice job summarizing your client's psychiatric and medical history and the reason for their current admission. You also did a great job identifying factors that create a culture of safety in the psychiatric setting. BS

Week 4 (2a-f)-You were able to obtain a health history along with the mental health issues impacting your client. You were also able to use both subjective and objective findings to assist in developing a plan of care for the patient. SA

Week 5- 2c- You did a nice job discussing the current trends in substance abuse that are prevalent across the country. BS

Week 6 2(c) – Nice work in your discussion related to the roles of the healthcare team at the Detox center. You were able to identify their role in helping clients identify and utilize positive coping mechanisms for their substance use disorder. Coping skills such as breathing techniques and coloring were identified as an important aspect of the recovery process. Well done! NS

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Objective

3. Refine basic verbal and nonverbal therapeutic communication skills when interacting with patients, families, and members of the health care team. (1, 2, 3, 5, 7, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
a. Illustrate professionally appropriate and therapeutic communication skills in interactions with patients, and families. **(responding)**	NA	S	NA	S	S	S	S	NA	NA	S
b. Demonstrate professional and appropriate communication with the treatment team by observing the SBAR format for handoff communication during transition of care. **(responding)**	NA	S	NA	S	NA	NA	S	NA	NA	S
c. Identify barriers to effective communication. **(noticing, interpreting)**	NA	S	NA	S	S	S	S	NA	NA	S
d. Develop effective therapeutic responses. **(responding)**	NA	S	NA	S	S	S	S	NA	NA	S
e. Develop a satisfactory patient-nurse therapeutic communication. **(Nursing Process Study)** **(responding, reflecting)**				S				NA	NA	S
f. Posts respectfully and appropriately in clinical discussion groups. **(responding, reflecting)**	NA	S	NA	S	S	S	S	NA	NA	S
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations. **(responding)**	NA	S	NA	S	NA	S	S	NA	NA	S
h. Teach patient/family based on readiness to learn and patient needs. **(responding, reflecting)**	NA	S	NA	S	NA	S	S	NA	NA	S
Faculty Initials	NS	BS	SA	SA	BS	NS	BS	BS	BS	BS

Comments:
Week 2- 3c- You were able to identify several barriers to effective communication and discuss ways to develop a successful nurse-client relationship. BS
Week 4 (3a-h)- You did a nice job using therapeutic communication skills when interacting with the clients. You successfully met the requirements for your CDG postings for both days. SA

Week 5- 3f- Nice work on your CDG this week. Your responses to the questions were thorough and well thought-out. BS

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Week 6 3(f) – Your CDG responses to the Detox center question prompts provided good insight and were supported with the use of a reputable resource. I appreciated the in-depth responses provided, demonstrating good understanding of the information and a deeper level of learning. I enjoyed reading through your responses and learning about your experience. All criteria were met for a satisfactory evaluation. Well done! NS

Week 7 – 3f – You did a nice job reflectively responding to all the CDG questions related to your experience at hospice. Thank you for sharing your personal thoughts prior to attending, and then reflecting on those following your experience. You were thorough and thoughtful with your responses. Keep up the great work! BS

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Objective

4. Demonstrate knowledge of frequently prescribed medications utilized in treating mental illness. (1, 4, 5, 6, 7)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
a. Observe &/or administer medication while observing the six rights of medication administration. **(responding)**	NA	S	NA	S	NA	S	S	NA	NA	S
b. Demonstrate ability to discuss the uses and implication of psychotropic medications. **(responding, reflecting)**	NA	S	NA	S	NA	S	S	NA	NA	S
c. Identify the major classification of psychotropic medications. **(interpreting)**	NA	S	NA	S	NA	S	S	NA	NA	S
d. Identify common barriers to maintaining medication compliance. **(reflecting)**	NA	S	NA	S	NA	S	S	NA	NA	S
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications. **(responding, reflecting)**	NA	S	NA	S	NA	NA	S	NA	NA	S
Faculty Initials	NS	BS	SA	SA	BS	NS	BS	BS	BS	BS

Comments:

Week 2- 4 a,b,c,d,e- You did a great job providing a list of all medications prescribed for your client and discussed implications for their use, major classifications, common side effects, and significant nursing interventions/assessments associated with each medication. You also identified barriers to medication compliance through completion of your CDG this week. BS

Week 4 (4a-e)- This week you were able to observe medication pass with the administering nurse on the unit. Great job working with the nurse and asking appropriate questions! SA

* End-of-Program Student Learning Outcomes

Objective

5. Develop an awareness of community Mental Health resources and services. (5, 6, 7, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	**Final**
a. Identify the need for the community resources- detox unit available to patients with a mental illness. **(noticing, interpreting)**	NA	NA	NA	NA	NA	S	NA	NA	NA	S
b. Discuss recommendations for referrals to appropriate community resources and agencies. **(reflecting)**	NA	NA	NA	NA	S	S	NA	NA	NA	S
c. Collaborate with the Erie County Health Department Detox Unit while observing the care of a patient with mental illness-substance abuse. **(Community Agency Observation-Detox Unit) ****	NA	NA	NA	NA	NA	S	NA	NA	NA	S
d. Recognize and describe the need for substance abuse recovery resources. **(Alcoholics/Narcotics Anonymous at the Sandusky Artisans Recovery Center (Observation)**	NA	NA	NA	NA	S	NA	NA	NA	NA	S
Faculty Initials	NS	BS	SA	SA	BS	NS	BS	BS	BS	BS

**Alternative Assignment
Comments:

Week 5- 5b,d- You did a great job describing the setting at the meeting you attended at the Sandusky Artisans Recovery Center. It sounds like it was a positive experience and that you learned a lot. It really is a wonderful resource for those who are trying to get/stay sober. Nice work! BS

Week 6 5(b) – Its great to hear that you found the detox center to be a beneficial resource for the community. Great job focusing on the importance of being patient-centered and involving the clients in all decisions being made. One of the most important aspects of recovery follows the detoxification process. You

* End-of-Program Student Learning Outcomes

were able to highlight the referrals that are made for clients to attend rehabilitation facilities once their detox is complete. This is a major step towards long-term success. NS

Week 6 5(c) – Good work demonstrating professionalism during your interactions with clients and staff at the detox center. You were able to collaborate with a community agency to identify the processes in place aimed at helping those in need of assistance with substance use disorder recovery. NS

* End-of-Program Student Learning Outcomes

Objective

	6. Demonstrate satisfactory proficiency when using informatics and techniques in the assessment of patients with a mental illness diagnosis. (1, 2, 3, 4, 6, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
Competencies: a. Demonstrate competence in navigating the electronic health record. **(responding)**	NA	S	NA	S	NA	NA	NA	NA	NA	S
b. Demonstrate satisfactory documentation utilizing the electronic health record. **(responding)**	NA	S	NA	NA	NA	NA	NA	NA	NA	S
c. Demonstrate the use of technology to identify mental health resources. **(responding)**	NA	S	NA	S	NA	NA	NA	NA	NA	S
Faculty Initials	NS	BS	SA	SA	BS	NS	BS	BS	BS	BS

Comments:
Week 2- 6a- You were able to utilize the electronic health record to research your client's history, their medications, and treatments. BS
Week 4 (6a,c)- You appropriately navigated the electronic health record to research information for your client's care map and CDG discussions. SA

* End-of-Program Student Learning Outcomes

Objective

7. Evaluate self-participation in patient care experiences with the focus on safety, ethical, legal, and professional responsibilities. (7)*

Weeks of Course:	1	2	3	4	5	6	7	8	Make Up	Final
a. Identify your strengths for care delivery of the patient with mental illness. (reflecting)	NA	S	NA	S	NA	NA	NA	NA	NA	S
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care. (responding)	NA	S	NA	S	NA	S	S	NA	NA	S
c. Illustrate active engagement in self-reflection and debriefing. (reflecting)	NA	S	NA	S	S	S	S	NA	NA	S
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE" – attitude, commitment, and enthusiasm during all clinical interactions. (responding)	NA	S	NA	S	S	S	S	NA	NA	S
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (responding)	NA	S	NA	S	S	S	S	NA	NA	S
f. Comply with the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care." (responding)	NA	S	NA	S	S	S	S	NA	NA	S
Faculty Initials	NS	BS	SA	SA	BS	NS	BS	BS	BS	BS

Objective 7a: Provide a comment for the highlighted competency each week of your 1 South clinical. Put "NA" for the weeks not assigned to 1 South.

Comments:

Week 2: 7a) My biggest strength in this clinical was being able to communicate with my patient about coping mechanisms that will help her in times of need. She really loved to talk, and I found that was a way for her to cope with the feelings she was having. She was withdrawn from groups and found it more productive for her mental health to be speaking about her issues. I recommend that if she has no one to talk to due to everyone being at the group therapy, she could journal her thoughts down if there was no one around. Great reflection, Madison, and great recommendation also!
 Week 2- 7b- You did a nice job noticing factors on the psychiatric floor that helped to create an overall culture of safety on the unit. 7d- Professional behavior was observed at all times while on 1-South. BS

Week 5- 7c- You provided a thorough reflection of your experience at the Sandusky Artisans Recovery Center experience, nice work! BS

* End-of-Program Student Learning Outcomes

Week 4: My strength for this clinical was curbing conversation topics that were not beneficial/may cause issues. For example, my client would find himself getting caught up in topics that made him angry or upset. I was able to turn the conversation around to focus on positives or change the topic completely. I felt as if I did a good job compared to what I originally expected I would do before starting these clinicals. Great job with your communication! SA

Week 6 7(c) – I appreciated the insight provided in your detox center CDG and reflection. Specific to the question related to evaluating your feelings, attitudes, and responses at the detox center, I thought you did a great job exploring your feelings before, during, and after the experience. You were open and honest regarding your feelings and it seems that you had a beneficial learning experience! Its great to hear about the passion that the nurses at the health department portrayed and that you were able to witness a more positive nurse-client interaction and great teamwork amongst the various health care professionals that participate in their care. Great thoughts on incorporating a healthcare provider that specialized in psychiatry that could benefit the clients. Well done! NS

Week 7 7c- Madison, you did a great job reflecting on your clinical experience at Hospice. BS

Madison, Great work this semester! Keep it up, only 2 semesters to go! BS

* End-of-Program Student Learning Outcomes

Date	Nursing Priority Problem	Evaluation & Instructor Initials	Remediation & Instructor Initials
06/17/2025	Risk for Suicidal Behavior	S/SA	

Care Map Evaluation Tool**
Psych
2025

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

Comments:

* End-of-Program Student Learning Outcomes

Firelands Regional Medical Center School of Nursing
Nursing Care Map Rubric-1 South

Student Name: Madison Wright		**Course Objective:**					
Date or Clinical Week: 06/17/2025							

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	You provided a thorough list of assessment, lab findings and risk factors pertinent to your patient
	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	You did a nice job interpreting the nursing priorities for the patient and then identifying the priority. You identified a goal related to the priority problem.
	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	You did a nice job identifying specific interventions for this patient that directly related to the priority problem. You included a very thorough in-depth list.
	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	

5/15/2025

	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	3	Rationales are appropriate for each intervention.
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	Nice job with the evaluations of the abnormal assessment findings to your client.
	15. Evaluation includes one of the following statements: • 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 no in-text citation or 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: 45/45 Satisfactory** **Faculty/Teaching Assistant Initials:** SA

5/15/2025

Student Name: M. Wright__   Date: _7/15/2025_____

Clinical Assessment Rubric

Mental/Physical Health Status Assessment

	Points Possible	Points Received
Physical Assessment	4	4
Geriatric Depression Scale (short form) Assessment	4	4
Short Portable mental status questionnaire	4	4
Geriatric Health Questionnaire	2	2
Time and change test	4	4
Cognitive Assessment (Clock Drawing)	4	4
Falls Risk Assessment (Get Up and Go)	4	4
Brief Pain inventory (Short form)	2	2
Nutrition Assessment (Determine Your Nutritional Health)	4	4
Instrumental ADL/ Index of Independence in ADL	4	4
Medication Assessment	4	4
Points	40	40

Education Assessment

	Points Possible	Points Received
Learning Needs (Purpose) Identified and Prioritized (3)	10	10
Goals and Outcomes Identified (2)	5	5
Points	15	15

Education Plan

	Points Possible	Points Received
Teaching Content	10	10
Methods of Instruction	10	10

Education Resources attached	10	10
Barriers to Education Plan	5	5
Evaluation of Education Plan	10	10
Points	45	

An in-text citation and reference are required.	---	---

Total Points 100/100 Satisfactory. BS

You must receive a total of 77 out of 100 points to receive a "S" grade on the Evaluation of Clinical Performance tool. Due date can be located on the clinical schedule.

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

Firelands Regional Medical Center School of Nursing
Nursing Care Map Rubric- Geriatric Assessment

Student Name: M. Wright	Course Objective:	Synthesize concepts related to psycho-pathology, health assessment data, evidence based practice, and the nursing process using clinical judgment skills to plan and care for patients with mental illness.
Date or Clinical Week: 7/7/2025		

	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 identifying abnormal assessment findings and risk factors supporting your priority problem of risk for falls.
	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	Nursing priorities listed and priority problem identified, goal statement provided. Relevant assessment data highlighted and potential complications identified with signs and symptoms for each complication provided.
	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	Interventions are prioritized and realistic for the client with frequencies provided. All interventions include a rationale.
	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	

5/15/2025

	Criteria	3	2	1	0	Points Earned	Comments
Reflecting	13. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	Evaluations complete. All highlighted assessment findings have been reevaluated.
	15. Evaluation includes one of the following statements: • 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 no in-text citation or 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:** Maddie, Great job on your geriatric assessment and care map! BS	**Total Points:** 45/45 Satisfactory. BS **Faculty/Teaching Assistant Initials:** BS

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Nursing Process Grading Rubric
Firelands Regional Medical Center School of Nursing
Psychiatric Nursing
2025

Student Name: Madison Wright   **Clinical Date: 06/05/2025**

Criterion #1 **Process Recording is organized and neatly completed** **(5 points total)** • Typed process recording (2) • Correct grammar and spelling (3)	**Total Points: 5** **Comments:**
Criterion #2 **Assessment (7 points total)** • Identifies pertinent client background, current medical and psychiatric history (3) • Provides self-assessment of thoughts and feelings prior and during therapeutic communication interaction with client (2) • Identifies the milieu and effects on client (2)	**Total Points: 7** **Comments:** You did a great job discussing your client's background and their medical and psychiatric history. Nice job also sharing your self-assessment of your thoughts and feelings before and after your encounter and discussing the milieu.
Criterion #3 **Mental Health Nursing Diagnosis** **(8 points total)** • Identifies priority mental health problem (4) • Provides at least five relevant/related data findings (2) • Provides at least five potential complications with signs and symptoms (2)	**Total Points: 8** **Comments:** Great job identifying your client's priority (Risk of suicide) mental health problem(s) and providing relevant data findings with potential complications identified. Signs and symptoms for the complications were included.
Criterion #4 **Nursing Interventions** **(10 points total)** • Identifies at least 5 pertinent nursing interventions in priority order, including a rationale and timeframe (7) • Identifies a therapeutic communication goal (3)	**Total Points: 10** **Comments:** Nice job compiling a list of prioritized nursing interventions with rationales and timeframes. Therapeutic communication goal provided.
Criterion #5 **Process Recording** **(15 points total)** • Provides direct quotes for all interchanges (3) • Verbal and nonverbal behavior is described for all interactions (6) • Students thoughts and feelings concerning each interaction is provided (6)	**Total Points: 15** **Comments:** Great job on your process recording! Direct quotes provided for all interchanges, verbal and non-verbal behavior is discussed for all interactions as are your thoughts and feelings concerning each interaction.
Criterion #6	**Total Points: 20**

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Process Recording **(20 points total)** • Analysis of each interaction providing type of communication (therapeutic/nontherapeutic) (6) • Provides technique for each interaction (exploring, probing, etc.) (6) • Provides explanation for interactions (8)	**Comments:** Each interaction evaluated properly. Correct techniques identified for each interaction with descriptive explanations provided.
Criterion #7 **Process Recording** **(10 points total)** • Communication has a natural beginning and ending; the conversation flows from sentence to sentence and has a logical conclusion (6) • There are at least 10 interchanges between the client and student (4)	**Total Points: 10** **Comments:** Conversation has a good, natural flow. Appropriate number of interactions included.
Criterion #8 **Evaluation** **(15 points total)** • Self-evaluation of communication with client (5) • Identify at least 3 strengths and 3 weaknesses of therapeutic communication (10)	**Total Points: 15** **Comments:** Great job exploring strengths and weaknesses related to your use of therapeutic conversation. It can be hard to communicate effectively considering the subject, but you did very well.
Criterion #9 **Evaluation** **(10 points total)** • Identify at least 3 barriers to communication including interventions or communication that could have been done differently (5) • Identify all pertinent social determinants of health (5)	**Total Points: 10** **Comments:** You did a great job identifying barriers to communication you noticed while interacting with your client. You also did a nice job discussing social determinants of health relevant to your client's situation.
Criterion #10 **Reference/Citation** • An in-text citation and reference are required. • If not present, missing components will need to be added and the assignment re-submitted.	
Total possible points = 100 77-100 = Satisfactory ≤ 76= Unsatisfactory *Students that are not satisfactory after 2 attempts will be required to meet with course faculty for remediation. * **Course Objective:** 2. Synthesize concepts related to psycho-pathology, health assessment data, evidence-based practice, and the nursing process using clinical judgment skills to plan and care for clients with mental illness. (1,2,3,4,5,6,7,8).*	**Total Points:** 100/100 Satisfactory. BS **Comments:** Excellent work, Madison! BS

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Course Objective: 3. Refine basic verbal and nonverbal therapeutic communication skills when interacting with patients, families, and members of the health care team. (1,2,3,5,7,8).* **Clinical Competency:** 2(d) Formulate a prioritized nursing plan of care utilizing clinical judgment skills. **(noticing, interpreting, responding, reflecting)** **Clinical Competency: 3(e**) Develop a satisfactory patient-nurse therapeutic communication. (**Nursing Process Study) (responding, reflecting)** *End-of-Program Student Learning Outcomes	

Firelands Regional Medical Center School of Nursing
Psychiatric Nursing 2025
Simulation Evaluations

Students Name:					
Performance Codes: **S**: Satisfactory **U**: Unsatisfactory			**Evaluation**	**Faculty Initials**	**Remediation Date/Evaluation/Initials**
Date: **6/6/2025**	vSim (Linda Waterfall) (Nursing-Mental Health) (*1, 2, 3, 4, 5, 6,7)	Pre-Quiz, Scenario, SBAR, and Post Quiz	S	BS	NA
Date: **6/13/2025**	vSim (Sharon Cole) (Nursing-Mental Health) (*1, 2, 3, 4, 5, 6,7)	Pre-Quiz, Scenario, SBAR, and Post Quiz	S	SA	NA
Date: **6/20/2025**	vSim (Li Na Chen Part 1) (Nursing-Mental Health) (*1, 2, 3, 4, 5, 6,7)	Pre-Quiz, Scenario, SBAR, and Post Quiz	S	SA	NA
Date: **6/20/2025**	vSim (Li Na Chen Part 2) (Nursing-Mental Health) (*1, 2, 3, 4, 5, 6,7)	Pre-Quiz, Scenario, SBAR, and Post Quiz	S	SA	NA
Date: **6/25-26/2025**	Live Simulation (*1, 2, 3, 4, 5, 6,7)	Scenario	S	BS	NA
		Reflection Journal	S	BS	NA
		Survey	S	BS	NA
Date: **6/27/2025**	vSim (Sandra Littlefield) (Nursing-Mental Health) (*1, 2, 3, 4, 5, 6,7)	Pre-Quiz, Scenario, SBAR, and Post Quiz	S	BS	NA
Date: **7/3/2025**	vSim (George Palo) (Nursing-	Pre-Quiz, Scenario, SBAR, and Post Quiz	S	NS	NA

			S	BS	NA
	Mental Health) (*1, 2, 3, 4, 5, 6,7)				
Date: **7/18/2025**	vSim (Randy Adams) (Nursing-Mental Health) (*1, 2, 3, 4, 5, 6,7)	Pre-Quiz, Scenario, SBAR, and Post Quiz	S	BS	NA

* Course Objectives
 Comments:

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: A=Assessment Nurse; M=Medication Nurse
STUDENT NAME(S) AND ROLE(S): Lexi Bores (M) Madison Wright (A)
GROUP #: 8   Part 1
SCENARIO: Alcohol Substance Use Simulation
OBSERVATION DATE/TIME(S): 06/26/2025 1230-1330

CLINICAL JUDGMENT COMPONENTS	OBSERVATION NOTES
NOTICING: (1,2,5)*	Introduced self and role when entering the room to develop trust.
• Focused Observation: E A D B	Sought information related to admission to mental health unit
• Recognizing Deviations from Expected Patterns: E A D B	Noticed patient's anxiety. Sought further information related to thoughts and feelings.
• Information Seeking: E A D B	Asked about normal blood pressure
	Noticed BP 150/88 related to anxiety
	Explored feelings of anxiety.
	Sought knowledge and use of mental health resources
	Noticed recent loss and life stressors.
	Explored CAGE questionnaire results with the patient.
	Sought information related to suicidal ideations.
	Noticed patient grieving and negative coping mechanisms.

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INTERPRETING: (2,4)*	Prioritized vital signs, interpreted HTN related to anxiety.
• Prioritizing Data: E A D B • Making Sense of Data: E A D B	Prioritized CAGE questionnaire. Made sense of positive results relating to potential problem with substances Prioritized CIWA assessment Interpreted CIWA score as 5 Made sense of the mar and medications to be administered
RESPONDING: (1,2,3,5)*	Initiated therapeutic communication when entering the room
• 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	Good use of therapeutic communication techniques. Offered self. Empathy demonstrated throughout Therapeutic communication provided with education related to mental health services. CAGE questionnaire performed. CIWA assessment performed. Educated patient on medications to be administered one by one. Educated on potential side effects of antidepressant Educated on community resources available for substance use disorder Provided resources related to stress and coping.
REFLECTING: (1,2,5)*	Group members actively participated during debriefing. Appropriate questions were asked. Each group member discussed what they felt were strengths and weaknesses in their performance. Alternate choices were discussed for improvement in the future. Each member verbalized something they would do differently if they were to do the scenario again.
• Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	
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**	Lasater Clinical Judgement Rubric Comments: Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family. Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent

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B= Beginning
 	
Scenario Objectives:
 	
    • **Demonstrate effective therapeutic communication while interacting with patient admitted for an acute mental health crisis. (1, 2, 3)***
 	
    • **Utilize the CIWA scale to assess a patient with a history of substance abuse. (1, 2)***
 	
    • **Determine appropriate medication administration steps utilizing the CIWA scale. (4)***
 	
    • **Provide patient with appropriate education on community support and resources. (5)***
	data. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient's data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.
	
	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.
	
	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 the simulation scenario. Great job! BS

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EVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing
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:

Madison Wright 7-19-25