

**EVALUATION OF CLINICAL PERFORMANCE TOOL  
Maternal Child Nursing – 2025**

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

**Student:**

**Final Grade:** Satisfactory/Unsatisfactory

**Semester:** Fall

**Date of Completion:**

**Faculty:** Kelly Ammanniti, MSN, RN, CHSE; Monica Dunbar DNP, RN;  
Rachel Haynes MSN, 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:**

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

**Absence: (Refer to Attendance Policy)**

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

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

7/11/25 KA

**PERFORMANCE CODE**

**SATISFACTORY CLINICAL PERFORMANCE**

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

**UNSATISFACTORY CLINICAL PERFORMANCE**

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

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

**OTHER**

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

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

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

<b>Objective</b>																		
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
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
<b>Competencies:</b>																		
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		N/A	N/A	N/A	N/A	S												
b. Provide care using developmentally appropriate communication.		N/A	N/A	N/A	S	S												
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		N/A	N/A	N/A	N/A	S												
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		N/A	N/A	N/A	N/A	S												
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		N/A	N/A	N/A	S	S												
<b>Clinical Location Age of patient</b>		No clinical	No clinical	Empathy Sim	BG Club/Sim Variety of	Fisher Triplex CD												
	KA	KA	KA	KA	KA													

\*\*Evaluate these competencies for the offsite clinicals: ER: All, H&V: 1A, B, E BG Club: 1B, E Flu: All

**Comments:**

Week 5: The stage of growth and development for this group was industry vs. inferiority because these were school age children. As I was interacting with them, they should a sense of self-confidence while competing and they showed inferiority when they didn't know and got quiet. They also showed a sense of self-worth through the time and starting to find what they are confident with. Great job identifying the appropriate Erikson's stage for the school-age population. KA

Week 5: 1b- You did a great job interacting with the children at the Boys and Girls Club while using developmentally appropriate communication. This can be a chaotic and challenging environment, but your group did well and kept the kids engaged. BS

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

Week 6- The stage of growth and development for this group was trust vs. mistrust because we were working with newborns. As for newborns, they identify trust in their parents to provide nourishment and their basic needs they cannot provide for themselves. Also finding comfort in their parents in times of need and identifying who provides this for them.

<b>Objective</b>																		
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
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
<b>Competencies:</b>		N/A	N/A	N/A	N/A	S												
f. Describe psychological changes in response to the expectant mother's pregnancy. <b>Maternal</b>		N/A	N/A	N/A	N/A	S												
g. Discuss prenatal influences on the pregnancy. <b>Maternal</b>		N/A	N/A	N/A	N/A	S												
h. Identify the stage and progression of a woman in labor. <b>Maternal</b>		N/A	N/A	N/A	N/A	S												
i. Discuss family bonding and phases of the puerperium. <b>Maternal</b>		N/A	N/A	N/A	N/A	S												
j. Identify various resources available for children and the childbearing family.		N/A	N/A	N/A	N/A	S												
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		N/A	N/A	N/A	S	S												
l. Respect the centrality of the patient/family as core members of the health team.		N/A	N/A	N/A	N/A	S												
	KA	KA	KA	KA	KA													

\*\*Evaluate these competencies for the offsite clinicals: ER: 1K, L H&V: 1J, K BG Club: 1K Flu: 1 K, L

**Comments:**

Week 5: 1k- While interacting with the children at the Boys and Girls Club you did a great job acknowledging their perspectives, diversity, ages, and cultural factors, which all influence their behavior. 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
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Engage in discussions of evidenced-based nursing practice.		N/A	N/A	N/A	N/A	S												
b. Perform nursing measures safely using Standard precautions.		N/A	N/A	N/A	N/A	S												
c. Perform nursing care in an organized manner recognizing the need for assistance.		N/A	N/A	N/A	N/A	S												
d. Practice/observe safe medication administration.		N/A	N/A	N/A	N/A	S												
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		N/A	N/A	N/A	N/A	N/A												
f. Utilize information obtained from patients/families as a basis for decision-making.		N/A	N/A	N/A	N/A	S												
g. <b>Identify factors associated with Social Determinants of Health (SDOH) &amp;/or cultural elements that have the potential to influence patient care.**</b> (Noticing, Interpreting, Responding, Reflecting) <b>(List Below)*</b>		N/A	N/A	N/A	S	S												
	KA	KA	KA	KA	KA													

\*\*Evaluate these competencies for the offsite clinicals: ER: All H&V: 2B, C, G BG Club: 2G Flu: 2B, C, D, F, G

**Comments:**

Week 5: Some SDOH for this group would be the lack of attention span which makes it difficult to educate them. Another SDOH is that they are school-aged kids which makes it hard to educate them on their health when they can't really provide transportation and make appointments as needed to keep up with their health until they are older. It is mainly dependent on their caregiver and what their caregiver considers right and wrong. **Great points! This population depends largely on their caregivers therefore it is important to consider these factors in relation to the family as a whole when wanting to impact the child. KA**

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

Week 6- Some SDOH that I saw was a women smoking during her pregnancy and not having the correct education for smoking while pregnant. Another SDOH is another patient came in thinking she was in labor because she did not have the right education between false labor (Braxton hicks) and active labor. This patient also did not speak English, so it was had to communicate because she did not have an interpreter with her. SO the biggest SDOH between both patient was the lack of knowledge they had while pregnant.

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
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Act with integrity, consistency, and respect for differing views.		N/A	N/A	N/A	S	S												
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		N/A	N/A	N/A	S	S												
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		N/A	N/A	N/A	S	S												
d. Critique examples of legal or ethical issues observed in the clinical setting. (List Below)*		N/A	N/A	N/A	S	S												
	KA	KA	KA	KA	KA													

\*\*Evaluate these competencies for the offsite clinicals: ER: All H&V: All BG Club: All Flu: All

**Comments:**

Week 5- The only issue observed during this clinical experience was the right to adolescents' privacy because they are being watched by staff the whole time and the only time, they are given privacy is in the bathroom. Other than that, the adolescents are being questioned about home lives, their families and what is being done while they are with staff is being communicated with parents/caregivers.

Week 5: 3a,c- At the Boys and Girls Club, you acted with integrity, consistency, and respect for differing views and perspectives.

Week 6- With my OB clinical we only had one inpatient the time that we were there and she had a cesar birth. I didnt see her sign a consent form and I didn't see if she was fully educated on the surgery. The only thing I could really say is her baby came out unresponsive and she wasn't told until she was back in her room so that could be the only issue I seen the whole clinical. It would be not being informed about the care given to her child at the time.



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
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Develop and implement a priority care map and/or plan of care utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)		N/A	N/A	N/A	N/A	S												
b. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)		N/A	N/A	N/A	N/A	N/A												
c. Summarize witnessed examples of patient/family advocacy.		N/A	N/A	N/A	N/A	N/A												
d. Provide patient centered and developmentally appropriate teaching.		N/A	N/A	N/A	S	S												
e. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A												
	KA	KA	KA	KA	KA													

\*\*Evaluate these competencies for the offsite clinicals: ER: 4A, C, D, E H&V: 4B, D BG Club: 4D Flu: 4B, D

**Comments:**

Week 5: The patient-centered and developmentally appropriate teaching we did was to give the students a task to complete and while doing the task it gave them a sense of accomplishment when getting the correct answer. We also gave them a certain task to complete to finish the medical matching game and giving them feedback after letting them make their own choice of where they wanted to put their matching piece. **I am glad the medical matching game was a hit. What was your topic? Was it what is a nurse? With the way it sounds like the planned activity benefited the children you worked with. KA**

**Week 5: 4d- As you no doubt noticed at the Boys and Girls Club, when providing teaching to kids of various ages, we must continually adjust our approach based on their developmental level. BS**

Week 6- The patient centered and developmentally appropriate teaching we did was postpartum care after her cesarian and what some expected findings would be and what would be signs to let a nurse or provider know of. We also educated her on some of the milestones she should see in her newborns life within the first month of life.

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



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
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
f. Correlate the diagnostic tests with the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A												
g. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A												
h. Correlate the medical treatment in relation to the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A												
i. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A												
j. Correlate the patient's growth and developmental level in relation to the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A												
	KA	KA	KA	KA	KA													

\*\*Evaluate these competencies for the offsite clinicals: ER: 4F, G, H H&V: N/A BG Club: N/A Flu: N/A

Comments:

<b>Objective</b>																		
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
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Demonstrate interest and enthusiasm in clinical activities.		N/A	N/A	N/A	S	S												
b. Evaluate own participation in clinical activities.		N/A	N/A	N/A	S	S												
c. Communicate professionally and collaboratively with members of the healthcare team.		N/A	N/A	N/A	N/A	S												
d. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		N/A	N/A	N/A	N/A	N/A												
e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding)		N/A	N/A	N/A	N/A	N/A												
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)		N/A	N/A	N/A	N/A	S												
g. Consistently and appropriately post comments in clinical discussion groups.		N/A	N/A	N/A	N/A	N/A												
	KA	KA	KA	KA	KA													

\*\*Evaluate these competencies for the offsite clinicals: ER: 5A, B, C, F, G H&V: 5A, B, C BG Club: 5A, B Flu: 5A, B, C

**Comments:**

Week 5: 5a,b- You showed interest and enthusiasm as you presented your material to the children at the Boys and Girls Club. Nice work! BS

Objective																		
6. Critique own strengths and areas for improvement modifying behaviors accordingly to achieve personal and professional goals. (7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Recognize areas for improvement and goals to meet these needs. (List Below)*		N/A	N/A	N/A	S	S												
b. Accept responsibility for decisions and actions.		N/A	N/A	N/A	S	S												
c. Demonstrate evidence of growth and self-confidence.		N/A	N/A	N/A	S	S												
d. Demonstrate evidence of research in being prepared for clinical.		N/A	N/A	N/A	S	S												
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		N/A	N/A	N/A	S	S												
f. Describe initiatives in seeking out new learning experiences.		N/A	N/A	N/A	S	S												
g. Demonstrate ability to organize time effectively.		N/A	N/A	N/A	S	S												
h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.		N/A	N/A	N/A	S	S												
i. Demonstrates growth in clinical judgment.		N/A	N/A	N/A	S	S												
	KA	KA	KA	KA	KA													

\*\*Evaluate these competencies for the offsite clinicals: ER: All H&V: All BG Club: All Flu: All

**Comments:**

Week 5: An area I could improve on is finding a better way of assisting younger people with tasks and not treating them as if they are too little to know certain things. A goal is to provide education for certain age group with the correct way of how they learn and I will do this by working with my young family and helping them with task and using the correct teaching methods that corresponds to their age group within the next week. Practice makes perfect. Working with different age groups and interacting with them is a great way to learn how to adapt your teaching for different developmental levels. KA

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

Week 5: 6e- Professional behavior was observed throughout your time at the Boys and Girls Club this week. BS

Week 6- An area I could improve on is caring for the newborn and better understanding of newborn assessments. I know some parts of how to assess newborns, but I am not confident in being able to do it without being walked through it. My goal to improve this skill would be to watch the videos provided on newborn care again and practice it on my baby until I feel confident enough for my next OB clinical.

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

Student Name:		Course 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)*					
Date or Clinical Week:							
Criteria		3	2	1	0	Points Earned	Comments
Noticing	1. Identify all abnormal assessment findings (subjective and objective); include specific patient data.	(lists at least 7*) *provides explanation if < 7	(lists 5-6)	(lists 5-7 but no specific patient data included)	(lists < 5 or gives no explanation)		
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	(lists at least 3*) *provides explanation if < 3		(lists 3 but no specific patient data included)	(lists < 3 or gives no explanation)		
	3. Identify all risk factors relevant to the patient.	(lists at least 5*) *provides explanation if < 5	(lists 4)	(lists 3)	(lists < 3 or gives no explanation)		
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	5. State the goal for the top nursing priority.	Complete			Not complete		
	6. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	7. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)		
	8. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)		
Responding	9. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	10. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete		
	11. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete		

	12. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete		
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Criteria		3	2	1	0	Points Earned	Comments
	13. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete		
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete		
	15. Evaluation includes one of the following statements: <ul style="list-style-type: none"> <li>Continue plan of care</li> <li>Modify plan of care</li> <li>Terminate plan of care</li> </ul>	Complete			Not complete		

**Reference**

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

<b>Total Points:</b>
<b>Faculty/Teaching Assistant Initials:</b>

Firelands Regional Medical Center School of Nursing  
Maternal Child Nursing 2025  
Skills Lab Competency Tool

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

\* Course Objectives

<b>Skills Lab Competency</b> <u>Evaluation</u> Performance Codes: S: Satisfactory U: Unsatisfactory	<b>Lab Skills</b>									
	Fundus Assessment (*1, 2, 5, 6)	Lochia Assessment (*1, 2, 4)	Pain Assessment (*1, 2, 5, 6)	Newborn Assessment (*1, 2, 5, 6)	Postpartum and Newborn DC Ed (*1, 2, 6)	Pregnancy History (*1, 2, 3, 4, 5, 6)	Newborn Thermo. (*1, 2, 3, 4, 5, 6)	EDD (*1, 2, 3, 4, 5, 6)	Meditech (*1, 2, 3, 5, 6)	Amazing Race (*1, 2, 3, 4, 5, 6)
	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 10/20
Evaluation	S	S	S	S	S	S	S	S	S	
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	KA	
<b>Remediation:</b> Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	

\* Course Objectives

Comments:

Firelands Regional Medical Center School of Nursing  
Maternal Child Nursing 2025  
Simulation Evaluations

<b>Simulation Evaluation</b> Performance Codes: S: Satisfactory U: Unsatisfactory	<b>Simulation</b>												
	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 3 (*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)
	<b>Date:</b> 9/11 & 9/18	<b>Date:</b> 9/22	<b>Date:</b> 9/25 & 10/2	<b>Date:</b> 10/6	<b>Date:</b> 10/16 & 10/17	<b>Date:</b> 10/23 & 10/30	<b>Date:</b> 11/3	<b>Date:</b> 11/4 & 11/5	<b>Date:</b> 11/18	<b>Date:</b> 11/18	<b>Date:</b> 11/21	<b>Date:</b> 11/21	<b>Date:</b> 9/15
	Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz			Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz	
Scenario Evaluation	S	S											S
Survey	S												S
Faculty Initials	KA	KA											KA
<b>Remediation:</b> <b>Date/Evaluation/</b> <b>Initials</b>	NA	NA											NA

\* Course Objectives

Comments:

The student has satisfactorily completed the assigned vSim and met the established objectives by obtaining at least 80% on the scenario (including SBAR), and post-simulation quiz by the due date and time.

vSim Objectives

9/22/2025 vSim Maternity Case 1

1. Performs focused antepartum assessment of patient with severe preeclampsia. (1, 2, 4)\*
2. Recognizes signs and symptoms of severe preeclampsia (hypertensive disorders). (1, 2)\*
3. Communicates severe preeclampsia to the interprofessional team. (1, 2, 3, 5)\*

4. Administers prescribed antihypertensive medication (magnesium sulfate). (1, 2, 3, 5)\*
  5. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)\*
- \* Course Objectives

10/6/2025 vSim Maternity Case 4

1. Select physical assessment priorities based on individual patient needs. (1, 2)\*
  2. Recognizes signs and symptoms of umbilical cord prolapse. (1, 2, 5)\*
  3. Performs emergent nursing management strategies for umbilical cord prolapse. (1, 2, 3, 4, 5)\*
  4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)\*
- \* Course Objectives

11/3/2025 vSim Pediatric Case 3

1. Identify and describe patient history, physical assessment findings, and diagnostic information related to dehydration.
2. Prioritize and implement evidence-based nursing interventions that are culturally and situation appropriate for the pediatric patient.
3. Implement clinical orders, patient safety measures, and provide education using therapeutic and confidential communication for the pediatric patient and family members.

\*Course Objectives

11/18/2025 vSim Pediatric Case 1

1. Select physical assessment priorities based on individual patient needs. (1, 2)\*
2. Recognize signs and symptoms of seizure activity. (1, 2)\*
3. Demonstrate appropriate nursing interventions for a patient experiencing a seizure. (1, 2, 3, 4, 5, 6)\*
4. Demonstrate therapeutic communication skills when interacting with children and their families. (1, 3, 5, 6)\*
5. Discuss how social determinants of health can influence the management of a chronic illness. (2, 3)\*

\* Course Objectives

11/21/2025 vSim Pediatric Case 4

1. Select physical assessment priorities based on individual patient needs. (1, 2)\*
2. Identifies developmentally appropriate and culturally competent nursing interventions based on patient care needs. (1, 2, 4)\*
3. Prioritizes patient safety measures and appropriate nursing interventions for a patient with an acute sickle cell pain crisis. (1, 2, 3, 4, 5)\*
4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)\*

\* Course Objectives

**Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO: Empathy Simulation**

STUDENT NAME: Abbi Foote

OBSERVATION DATE/TIME: 9/15/25

<p><b>REFLECTING: (6)*</b></p> <ul style="list-style-type: none"> <li>• Evaluation/Self-Analysis: <b>E</b>      A      D      B</li> <li>• Commitment to Improvement: <b>E</b>      A      D      B</li> </ul>	<p>You reflected on many aspects of your time caring for the newborn simulator. Your responses were thoughtful and reflective on how you felt and you compared your experience to caring for a real newborn.</p> <p>Great job.</p> <p>I enjoyed seeing your photo!</p>
<p><b>SUMMARY COMMENTS:</b></p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p><b>Simulation Objectives:</b></p> <ol style="list-style-type: none"> <li>1. Identify common challenges associated with caring for a newborn and how to empathize with the childrearing family. (1, 2, 6)*</li> <li>2. Describe how patient-centered care is dependent on past medical history, cultural history, and social history. (1, 2, 3, 4)*</li> <li>3. Describe your psychological and social response to the simulation and how it impacts the care provided to the newborn patient and childrearing family. (1, 5, 6)*</li> </ol> <p><b>Developing to accomplished is required for satisfactory completion of this simulation.</b></p>	<p><b>Comments</b></p> <p><b>You are satisfactory for this simulation.</b></p>

\*Course Objectives

## Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Foote (C), Papenfuss (A), Shelley (M)

GROUP #: 9

SCENARIO: Pregnancy and PPH

OBSERVATION DATE/TIME(S): 9/18/2025 1000-1130

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
<p><b>NOTICING: (1, 2, 5) *</b></p> <ul style="list-style-type: none"> <li>• Focused Observation:           E        <b>A</b>        D        B</li> <li>• Recognizing Deviations from Expected Patterns:           E        <b>A</b>        D        B</li> <li>• Information Seeking:           E        <b>A</b>        D        B</li> </ul>						<p>Noticed VS appear WNL. Inquires about pain. Patient requests mountain dew. Recognizes the need for FHM. Recognizes FSBS of 225 (high). UA results- + for THC, glucose, nitrates.</p> <p>Mona CO feeling dizzy and lightheaded. VS reassessed. Notices low BP and rising HR. Bleeding discovered. Begins fundal massage. Notices uterus is firming up in response to fundal massage. BP reassessed, and improving.</p>
<p><b>INTERPRETING: (2, 4) *</b></p> <ul style="list-style-type: none"> <li>• Prioritizing Data:           E        <b>A</b>        D        B</li> <li>• Making Sense of Data:       E        <b>A</b>        D        B</li> </ul>						<p>Prioritizes the need for FSBS. Interprets contractions on the FHM. FSBS- 225, interpreted as being high. Patient assisted to left side to promote comfort. Interprets UA results as abnormal.</p> <p>HR interpreted as being high, BP low. Fundus recognized as boggy. Recognize need to massage fundus. Interprets need to weigh pads. BP interpreted to ne improving. Recognizes heavy bleeding.</p>
<p><b>RESPONDING: (1, 2, 3, 5) *</b></p> <ul style="list-style-type: none"> <li>• Calm, Confident Manner:    E        <b>A</b>        D        B</li> <li>• Clear Communication:       E        <b>A</b>        D        B</li> <li>• Well-Planned Intervention/ Flexibility:                   E        <b>A</b>        D        B</li> <li>• Being Skillful:               E        <b>A</b>        D        B</li> </ul>						<p>Name and DOB verified. Patient questioned about contractions/pain. VS, assessment. Patient questioned about drug/THC use, past pregnancies, history of gestational diabetes (GD), prenatal care, usual dietary choices. Urine sent to lab. FHM applied. Patient assisted to left side. Obtains additional information in preparation to call the HCP. Call to HCP (<b>Great job with report!</b>). Orders received for nifedipine, acetaminophen, IV fluids, US to verify dates. Orders read back. Call to request US. UA results received. Medications prepared. Call to HCP to report UA results and to question nifedipine order. Order clarifies, medications prepared, allergies confirmed. Medications administered.</p> <p>Patient CO being dizzy, BP assessed. Perineal area assessed. Notices blood, calls for help. Fundal massage initiated. Call to HCP, order received for methylergonovine. Patient identified, methylergonovine prepared and administered. Keep needle cover on until ready to administer.</p>
<p><b>REFLECTING: (6) *</b></p> <ul style="list-style-type: none"> <li>• Evaluation/Self-Analysis:   E        <b>A</b>        D        B</li> </ul>						<p>Team discussion of the scenarios. Team recognized the significance of teamwork and communication, and did well with each. Discussed the use of calcium channel blockers to stop contractions. Discussed the importance of SBAR communication when calling the provider. Also</p>

<ul style="list-style-type: none"> <li>• Commitment to Improvement: E      A      D      B</li> </ul>	<p>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 needle safety to prevent accidents. Discussed the importance of providing education to patients.</p>
<p><b>SUMMARY COMMENTS: * = Course Objectives</b></p> <p><b>Satisfactory completion of the simulation scenario is a score of “developing” or higher in all areas of the rubric.</b></p> <p><b>E= Exemplary</b></p> <p><b>A= Accomplished</b></p> <p><b>D= Developing</b></p> <p><b>B= Beginning</b></p> <p><b>Scenario Objectives:</b></p> <ol style="list-style-type: none"> <li>1. Implement appropriate nursing interventions and test to monitor fetal well-being during pregnancy upon completion of nursing assessment. (1, 2, 3, 5)*</li> <li>2. Identify social determinates of health and provide education and resources for pregnancy (1, 3, 4, 5)*</li> <li>3. Identify the signs and symptoms of postpartum hemorrhage (PPH) and implement appropriate management of the PPH. (1, 2, 4, 5)*</li> <li>4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)*</li> </ol> <p>*Course Objectives</p>	<p><b>You are Satisfactory for this scenario! BS</b></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>

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Maternal Child Nursing – 2025**  
**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: \_\_\_\_\_