

**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

7/11/25 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.

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials	Remediation & Instructor Initials
8/27/2025	Acute Pain	S/RH	N/A	N/A

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
	8/22	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		
Competencies:		S	NA	NA	NA	NA	S											
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		S	NA	NA	NA	NA	S											
b. Provide care using developmentally appropriate communication.		S	NA	NA	S	NA	S											
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		S	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	NA	NA	S											
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		S	NA	NA	S	NA	S											
Clinical Location Age of patient		FTMC OB	No	No Clinical	Boys and Girls club	No Clinical	Firelands OB: 26											
	RH	RH	RH	RH	RH	RH												

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

Comments:

1E: Mom would be in the early adulthood/ middle age group, which is intimacy v. isolation, or generativity v. stagnation. Establishing intimacy and relationships with others and contribute to society and being apart of a family. I chose these stages based off of her age and the way she is in a relationship that has been for a short time, as well as starting a family. **Great job! Based on your interactions with the patient, which do you feel that she would fall into? RH**

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

FTMC OB Objective 1 A, B, C, D: This week in OB you had the opportunity to work with a laboring mother, a postpartum mother and newborns. You did an awesome job with providing appropriate care and communication for the developmental stage of the patients, and provided systematic and developmentally appropriate assessment techniques. We discussed some of the safety measures of each of the patients as well such as fall risk with the patient with the spinal headache and circumcision safety with a newborn. Great job! MD

1E week 5: I noticed the children were in industry vs. inferiority stage, which is that children will develop a sense of pride in their accomplishments and abilities. They develop the ability to learn how things work and to understand and organize. I chose this because of the age of the kids as well as how creative they all were. They all seemed very interested in learning new things and doing them. I had many volunteers and all wanted to be the best at any activity we did. I tried my best to make them feel included in the learning and that they all were doing very well. Great explanation RH

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

Week 7: Baby is in the trust vs. mistrust because they rely on their caregivers to meet their needs. Mom is in intimacy vs. isolation, she has formed a deep relationship with her partner and they chose to have 2 children, building on this relationship and trust in building a family.

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
	8/22	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		
Competencies:		S	NA	NA	NA	NA	S											
f. Describe psychological changes in response to the expectant mother's pregnancy. Maternal		S	NA	NA	NA	NA	S											
g. Discuss prenatal influences on the pregnancy. Maternal		S	NA	NA	NA	NA	S											
h. Identify the stage and progression of a woman in labor. Maternal		S	NA	NA	NA	NA	S											
i. Discuss family bonding and phases of the puerperium. Maternal		S	NA	NA	NA	NA	S											
j. Identify various resources available for children and the childbearing family.		S	NA	NA	NA	NA	S											
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		S	NA	NA	S	NA	S											
l. Respect the centrality of the patient/family as core members of the health team.		S	NA	NA	NA	NA	S											
	RH	RH	RH	RH	RH	RH												

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

Comments:

FTMC OB Objective 1 J, K, L: During our day in OB, you were able to identify resources available for a postpartum mother that we provided mother/newborn education to including healthcare providers and discussed utilizing support systems. You were also able to receive a different perspective on gestational carriers by learning about the process with the unit secretary and asking questions to the parents of a newborn from a gestational carrier who were from London. We provided a newborn bathing demo for these parents and we were able to use their products that they brought with them for the bath along with learning about their culture and some of the differences of London versus the US. Awesome job! MD

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.		S	NA	NA	NA	NA	S											
b. Perform nursing measures safely using Standard precautions.		S	NA	NA	NA	NA	S											
c. Perform nursing care in an organized manner recognizing the need for assistance.		S	NA	NA	NA	NA	S											
d. Practice/observe safe medication administration.		S	NA	NA	NA	NA	S											
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		NA	NA	NA	NA	NA	S											
f. Utilize information obtained from patients/families as a basis for decision-making.		S	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	NA	S											
	RH	RH	RH	RH	RH	RH												

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

Comments:

2G: The patient I took care of qualified for WIC and was going to use their services after birth. To qualify for this there is a financial requirement to apply for this. Meaning that money is a stressor for her and her significant other. This could possibly influence patient care in the future. **Good observation, their financial issues could also impact their ability to pay for medical bills as well. RH**

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

FTMC OB Objective 2 A, B, C, F: This week we had conversation on evidenced-based practices, performed standard precautions, organize care and recognized when assistance was needed, and utilize information for decision making. Great job! MD

2G Week 5: This program is meant for kids after school from kindergarten through 5th grade. Most kids in the program come because their parents get out of work later than when their kids' school day ends. Kids like to tell you everything and multiple kids told me about how they do not see their dads or moms at all and that they live somewhere else. So, this puts many of the parents of these kids in situations where they are single parents, which does limit the parents' time with their children, money, and other resources. The boys and girls club is a wonderful program where the kids can spend time in a safe environment where they play, receive snacks, and are supervised by safe adults. **Many of these parents also work more than one job to support their family. RH**

2G Week 7: The mom I was taking care of had issues breastfeeding her baby, she utilized donor milk to help feed baby. When at home if she is still having trouble with baby latching, she will either need donor milk or may need to transition to formula feeding. To make sure baby is getting the nutrients needed. This can be an issue for mom because it may be difficult to afford these solutions, or even more difficult to find someone to donate milk to them.

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.		S	NA	NA	S	NA	S											
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		S	NA	NA	S	NA	S											
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		S	NA	NA	S	NA	S											
d. Critique examples of legal or ethical issues observed in the clinical setting. (List Below)*		S	NA	NA	S	NA	S											
	RH	RH	RH	RH	RH	RH												

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

Comments:

3D: Ethical/ legal issues I observed was that Fisher Titus does surrogacy births. With this process being such a grey area there is only one county judge in the area that is willing to file and sign these proceedings/ contracts. The baby is given a social security number and is a US citizen from being born here and then is sent with the intended parents back to where they live. Often from other countries. Which is also odd to see. Those who explained this process to me did not understand this. I have not seen/experienced a surrogate delivering in another country, I have seen it where it was in the US for another US couple, but this is very interesting! RH

FTMC OB Objective 3 A, B, C: Great job with acting with integrity and respecting different views on care of the patients we had this week in clinical! You were also able to respect health and medical information and followed the Student Code of Conduct policy! MD

3D Week 5: The only legal and ethical issue I noticed was that some of the children used inappropriate language and at times were inappropriate. I was asked some questions and told some things that were slightly concerning to me as well. I feel like the ethical issue lies in me saying something about it and determining what to say to them. It also poses an ethical issue in my opinion for what kids say around other kids and what they do with their phones around them as well. There is possibly some inappropriate things that are happening between them every afternoon they're together. This can be a huge issue. There was recently an issue at a local school with minors using cell phones to share inappropriate content, which did become a legal matter. RH

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

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

Week 7: A legal/ ethical issue I noticed was that the unit is on lock down to everyone including staff that does not work in the department, however I feel like the nurses open the door for everyone, I didn't notice them stopping and asking people who they were there to see before letting them in or even after once they make it to the desk or nurses station. Possibly I missed the nurses talking to them before letting them on the unit. It is a big safety issue for mom and baby due to the possibility of baby being removed from the unit or unsafe personnel coming onto the unit.

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)		S	NA	NA	NA	NA	S											
b. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)		NA	NA	NA	NA	NA	S											
c. Summarize witnessed examples of patient/family advocacy.		S	NA	NA	NA	NA	S											
d. Provide patient centered and developmentally appropriate teaching.		S	NA	NA	S	NA	S											
e. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)		S	NA	NA	NA	NA	S											
	RH	RH	RH	RH	RH	RH												

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

Comments:

4D: Educated alongside other students and clinical instructor on newborn care at home, bathing, and mom self-care. I touched on bathing, baby vaccinations, and check-up appointments post discharge. Great topics! RH
 FTMC OB Objective 4 C, E: Great job analyzing pathophysiology of your patient's disease process! You also did a great job witnessing examples of patient advocacy when we were providing the bath demonstration to the newborn with the parents from London! You were also able to witness advocacy for your laboring patient who was requesting an epidural for pain management! MD

4D Week 5: We educated on what a nurse is, and I educated on how to use ace wraps, and what ace wraps are used for. Did you let them try on themselves or others? I bet they would have loved that. RH

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

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 7: I helped educate on the purpose of keeping up with scheduled pain medications to keep pain managed. After she refused a time ordered dose of Motrin at noon and a few hours later asked for pain medications because of back pain. I assisted with education on breastfeeding as well, when mom was having trouble latching.

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)		S	NA	NA	NA	NA	S											
g. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding)		S	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	NA	S											
i. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding)		S	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	NA	S											
	RH	RH	RH	RH	RH	RH												

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

Comments:

FTMC OB Objective 4 F, G, H, I, J: During our clinical day we were able to obtain this objective with a newborn who was receiving sepsis work up due to a traumatic delivery and symptoms they were experiencing. We were able to correlate blood glucose and temperature challenges the newborn was experiencing to a possible diagnosis along with the medications being administered. You also did a great job putting pieces together with circumcision care and a patient with a spinal headache. Awesome job!
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
	8/22	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.		S	NA	NA	S	NA	S											
b. Evaluate own participation in clinical activities.		S	NA	NA	S	NA	S											
c. Communicate professionally and collaboratively with members of the healthcare team.		S	NA	NA	NA	NA	S											
d. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		S	NA	NA	NA	NA	S											
e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding)		S	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	NA	S											
g. Consistently and appropriately post comments in clinical discussion groups.		S	NA	NA	NA	NA	S											
	RH	RH	RH	RH	RH	RH												

**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:

FTMC OB Objective 5 A, B, C, F: During this clinical experience you were able to evaluate your participation in activities and communicate professionally with the care you provided your patients with the nursing staff. You demonstrating awesome enthusiasm in clinical with excitement with watching a newborn circumcision, various nursing assessments including 24-hour newborn testing, and bathing demonstration. The anesthesiologist stated he was excited about your enthusiasm during the epidural placement and was happy to assist with your learning! Amazing job this week! MD

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

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)*		S	NA	NA	S	NA	S											
b. Accept responsibility for decisions and actions.		S	NA	NA	S	NA	S											
c. Demonstrate evidence of growth and self-confidence.		S	NA	NA	S	NA	S											
d. Demonstrate evidence of research in being prepared for clinical.		S	NA	NA	S	NA	S											
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		S	NA	NA	S	NA	S											
f. Describe initiatives in seeking out new learning experiences.		S	NA	NA	S	NA	S											
g. Demonstrate ability to organize time effectively.		S	NA	NA	S	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	NA	S											
i. Demonstrates growth in clinical judgment.		S	NA	NA	S	NA	S											
	RH	RH	RH	RH	RH	RH												

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

Comments:

6A: An area of improvement I want to meet is I want to work on my baby assessment skills and assessing heart rate. I plan to watch the video on advance for assessment, practice at clinical for assessment and heart rate, and practice heart rate on the sim baby. **Let any of us know when you want to practice on the sim baby and we can open the sim lab and set her up for you! RH**

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

FTMC OB Objective 6 D, E, F, G, H, I: I am so proud of you for being prepared for clinical, exhibiting professional behavior, actively seeking out new learning experiences, your organization, and growth in clinical judgment! You did an awesome job displaying an ACE attitude in clinical this week! Keep up the amazing work! MD

6A Week 5: An area of improvement for me is sometimes when communicating with the kids I felt like I didn't know how to respond to them, or like I was communicating with older kids when I was with the younger kiddos. I haven't been around kids that young in a long time. For future clinicals I will research communication skills with kids of this age group and when at clinical I will talk with them more to get more practice. Talking with young kids can be a difficult thing to do when it is not done often. We forget their level of understanding and how communicating with them is a little different. RH

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

Week 7: An area of improvement I want to work on is educating myself on breastfeeding techniques. I felt out of place when watching the nurses educate mom on how to improve the baby's latch. I plan to look up resources and videos on how as a student nurse I can help better educate moms.

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

Student Name: C. Meyer			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: 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	1. very comprehensive list of assessment findings. Was this mother already delivered? What was her fundal assessment? 3. 14.95 hour labor, not pregnancy
	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	6. Your current vitals in your assessment findings do not indicate pain, but if you were monitoring them, what would each of her vitals due if she was having more pain?
	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	9. For intervention 1: what vitals are you specifically looking for? What do you anticipate them doing?
	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	

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	
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	3	14. No re-evaluation of WBC, platelets, or Hgb is necessary due to not being a highlighted item.
	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:

Total Points: 45/45

Faculty/Teaching Assistant Initials: RH

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

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills														
	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	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH
Remediation: Date/Evaluation/Initials	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

* 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: 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	RH	RH	RH	RH	RH	RH	RH	RH	RH	
Remediation: Date/Evaluation/Initials	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

* Course Objectives

Comments:

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2025
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 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)
	Date: 9/18	Date: 9/22	Date: 10/2	Date: 10/6	Date: 10/17	Date: 10/30	Date: 11/3	Date: 11/5	Date: 11/18	Date: 11/18	Date: 11/21	Date: 11/21	Date: 9/11
		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	RH	RH											RH
Remediation: Date/Evaluation/ Initials	N/A	N/A											N/A

* 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: C. Meyer

OBSERVATION DATE/TIME: 9/11/2025

<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 style="color: red;">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 style="color: red;">Great job.</p> <p style="color: red;">I enjoyed seeing your pregnancy photo!</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater’s Clinical Judgment Rubric</p> <p style="color: red;">Simulation Objectives:</p> <ol style="list-style-type: none"> <li style="color: red;">1. Identify common possible discomforts of the pregnancy and how to empathize with the pregnant patient and childrearing family. (1, 2, 6)* <li style="color: red;">2. Describe how patient-centered care is dependent on past medical history, cultural history, and social history. (1, 2, 3, 4)* <li style="color: red;">3. Describe your psychological and social response to the simulation and how it impacts the care provided to the pregnant patient and child-bearing family. (1, 5, 6)* <p style="color: red;">Developing to accomplished is required for satisfactory completion of this simulation.</p>	<p>Comments</p> <p style="color: red;">You are satisfactory for this simulation.</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): Meyer (C), Ruffing (M), Wright (A)

GROUP #: 10

SCENARIO: Pregnancy and PPH

OBSERVATION DATE/TIME(S): 9/18/2025 1200-1330

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
<p>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 • Information Seeking: E A D B 						<p>Begins assessment with VS, pain assessment. Fetal heart monitor applied. Patient requests a mountain dew, nurse recommends clear liquids until determination is made regarding contractions. Notices FSBS-225. UA results analyzed- +for THC, glucose, nitrates.</p> <p>Mona CO feeling dizzy and lightheaded. VS assessed. Notices low BP and rising HR. Bleeding discovered. Begins fundal massage. Notices uterus is firming up in response to fundal massage. BP reassessed. Pad weighed- 600 g.</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>Pain rated at 4/10. Prioritizes need to send urine to lab. FHM interpreted to have contractions present. Prioritizes assisting patient to left side. Prioritizes the need to acquire FSBS. FSBS- 225- interpreted as being high. UA results interpreted 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 be improving. Engaging with patient during fundal massage to keep her informed.</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>Patient identified. Begins assessment- VS. Urine sent to lab. Patient assisted to left side. Patient questioned about history/prenatal care. Patient is offered assistance with scheduling an appointment with OB/GYN. Dietary education related to diabetes management provided. Call to HCP with update, orders received for IV fluid, nifedipine, acetaminophen, US to verify date. Orders read back. Medications prepared, patient identified, medications administered. Need for IV fluid explained to patient, IV fluid initiated. Patient questioned about THC use, education provided.</p> <p>Fundus immediately massaged upon discovery of bleeding. Calls to team for assistance. Call to provider to report low BP, high HR, bleeding, dizziness, boggy uterus. Good report. Order received for methylergonovine. Patient identified, allergies confirmed, Methylergonovine prepared (4 ml drawn up- 1 ml is the correct dose- make sure to double-check) and administered. BP reassessed. Call to patient's wife</p>

	to update. Fundus firming up. Call to HCP to report improving symptoms.
<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.</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. Implement appropriate nursing interventions and test to monitor fetal well-being during pregnancy upon completion of nursing assessment. (1, 2, 3, 5)* 2. Identify social determinates of health and provide education and resources for pregnancy (1, 3, 4, 5)* 3. Identify the signs and symptoms of postpartum hemorrhage (PPH) and implement appropriate management of the PPH. (1, 2, 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)* <p>*Course Objectives</p>	<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 commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate 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: _____