EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2025

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Mariah Robinson

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

Faculty: **Frances Brennan**, MSN, RN; **Amy Rockwell**, MSN, RN;
Chandra Barnes, MSN, RN; **Nick Simonovich,** MSN, RN
Heather Schwerer, MSN, RN; **Brittany Lombardi,** MSN, RN, CNE

Faculty eSignature:

Teaching Assistant: Stacia Atkins, BSN, RN

DIRECTIONS FOR USE:

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

METHODS OF EVALUATION:

Skills Lab Checklists
Care Map Grading Rubric
Administration of Medications
Simulation Scenarios
Skills Demonstration
Evaluation of Clinical Performance Tool
Clinical Discussion Group Grading Rubric
Lasater Clinical Judgment Rubric
Faculty Feedback
Documentation
Clinical Reflection

ABSENCE (Refer to Attendance Policy)

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

Faculty/Teaching Assistant's Name	Initials
Chandra Barnes	CB
Frances Brennan	FB
Amy Rockwell	AR
Nicholas Simonovich	NS
Heather Schwerer	HS
Brittany Lombardi	BL

Stacia Atkins	SA

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

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

UNSATISFACTORY CLINICAL PERFORMANCE

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

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

OTHER

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

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

Objective

1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Identify spiritual needs of patient (Noticing).										S	S	NA				
b. Identify cultural factors that influence healthcare (Noticing).										S	S	NA				
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).							NA	S	S	S	S	NA				
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).							NA	S	S	S	S	NA				
Faculty/TA Initials		NS					CB	CB	CB	FB	FB					
Clinical Location; Patient age**		Meditech Orientation					NA	3T 45	N/A	3T 71	3T 92 (day 1) 78(day 2)	N/A				

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

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

Comments:

Week 8(1c,d): Great job showing respect for your patient's needs, being compassionate and kind while delivering care. You also demonstrated the appropriate use of Maslow's hierarchy of needs during the head to toe assessment performed on your patient during this clinical experience, being you able to recognize physiological needs of your patient when performing head to toe assessment. CB

Week 9 (1a,b)-Mariah, you were able to identify the needs of this patient through the gathering of objective and subjective data.. You recognized how their prognosis was affecting them in a spiritual and cultural manner, and provided support in a manner that was appropriate for the time and situation. Great job! FB

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).							NA	**NI**	NI	S	S	NA				
b. Use correct technique for vital sign measurement (Responding).							NA	**S**	S	S	S	NA				
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).										S	S	NA				
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).										S	S	NA				
e. Collect the nutritional data of assigned patient (Noticing).										S	S	NA				
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).										NA	NA	NA				
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).										S	S	NA				
Faculty/TA Initials		NS					CB	**CB**	CB	FB	FB					

Week 10 (1c)- Nice job considering your patient's preferences while coordinating appropriate care to ensure positive patient outcomes. You are also recognizing care needs based on Maslow's hierarchy of needs and critically thinking through assessments and diagnostic testing. FB

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

Comments:

Week 8(2a,b): Great job this week performing your first head to toe assessment on a real patient. You performed a systematic head to toe and retrieved all vital signs within a timely manner. Moving forward if you self-rate anything other than a “S” please leave an explanation of why. I will leave your rating of “NI” for your head to toe assessment, but this was the first time on a real patient, and I think you did an excellent job. CB

Week 9(g) An example of findings specific to this patient was a venous doppler that was positive for DVT and patient was showing signs of pitting edema +2 which is known to cause edema due to blocked blood flow leading to fluid buildup. Also, a wound culture and sensitivity was performed which showed two moderate bacteria’s indicating an infection for which in this case the patient was admitted for infection of surgical site from previous surgery. For (f) my patient didn’t have an NG tube, so that is why theres an NA.

Week 9 (2a,c)- Great job with patient assessments during this clinical rotation. You provided very thorough and structured assessments. You were able to identify the appropriate focused assessment based on information gathered during the initial assessment. Great job identifying the fall risk for your assigned patient and ensuring all precautions were in place. Make sure to access all lab values, and diagnostic testing to determine the relevance to your patient’s status. FB

Week 10(g) An example of a specific finding would be from an ultrasound for gallbladder; it was found that the pt had gallstones, and right pleural effusion which is a buildup of excess fluid between the layers of the pleura which in this case could have impacted the pts spo2 levels because of less lung surface available to deliver oxygen efficiently. The dropping of her SPO2 could have been for several factors such as dilaudid, htn, blood glucose levels, immobility and diminished lung sounds. (f) I didn’t have a pt with NG tube.

Week 10 (2a,c,d)- You did a great job performing all assessments. You also demonstrated the ability to gather information from assessments performed to determine a priority problem for your assigned patient. After determining the priority problem, you implemented all necessary interventions. You are demonstrating the ability to use clinical judgment and critical thinking, putting information together from assessments and diagnostic testing, great job! Keep up the great work! FB

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Receive report at beginning of shift from assigned nurse (Noticing).							NA	**S**	S	S	S	NA				
b. Hand off (report) pertinent, current information to the next provider of care (Responding).										S	S	NA				
c. Use appropriate medical terminology in verbal and written communication (Responding).							NA	**S**	S	S	S	NA				
d. Report promptly and accurately any change in the status of the patient (Responding).							NA	**S**	S	S	S	NA				
e. Communicate effectively with patients and families (Responding).							NA	**S**	S	S	S	NA				
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).							NA	**S**	S	S	S	NA				

Faculty/TA Initials		NS					CB	**CB**	CB	FB	FB					

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

Comments:

Week 8(3a,c,d,e): Great job receiving hand off report on your patient. Good job using medical terminology while communicating with your patient, reporting abnormal findings, and communicating effectively with your staff RN. CB

Week 9 (3a,b)- Great job receiving and providing pertinent information during shift report, and hand off report. Appropriate medical terminology was used during all communications provided. Good job communicating appropriately to staff RN and other health care disciplines when necessary. Get very familiar with report sheet and don't be afraid to ask questions if you are missing information or don't understand something being reported. FB

Week 10 (3e)- Great job communicating with your patient this week. Communication comes in many forms and building a trusting relationship is very important to a successful plan of care. FB

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Document vital signs and head to toe assessment according to policy (Responding).							NA	**S**	S	S	S	NA				
b. Document the patient response to nursing care provided (Responding).							NA	**S**	S	S	S	NA				
c. Access medical information of assigned patient in Electronic Medical Record (Responding).*		S					NA	**S**	S	S	S	NA				
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).*		S							S	S	S	NA				
e. Provide basic patient education with accurate electronic documentation (Responding).										S	S	NA				
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).							NA	**S**	S	S	S	NA				
*Week 2 –Meditech Orientation **Faculty/TA Initials**		NS					CB	**CB**	CB	FB	FB					

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

Comments:

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

Week 8(4a,b,c,f): Satisfactory job with documentation of the head to toe assessment and vital signs of your patient. Make sure to note any areas you may have forgot to assess, so that assessments and documentation are thorough and accurate. You did a good job utilizing Meditech for documentation and to look up patient information. You completed your first cdg, meeting all requirements per the grading rubric, excellent job! CB

Week 9 (4 a,b,c) Great job with head to toe assessment, vital signs, and focused assessment. You documented thoroughly and in a timely manner. Good job accessing pertinent information and additional information within the electronic medical record for the one of the first times. Accessing information will get easier the more experience you get with the EHR. You were able to identify and gather important information regarding your patient's problems and testing to provide an accurate plan of care, nice job! (4f)- CDG was appropriately posted following the CDG rubric, on time, and in a substantive manner. Your response to a peer also followed all the CDG rubric guidelines. Keep up the great work. FB

Week 10 (4 a,b)- Great job with documentation this week with minimal editing needed. (4c)- You were able to access the medical record, gather pertinent information and interpret data. (4f)- Your discussion post was complete and thorough providing supporting data for the priority problem. You also completed a substantial comment to one of your peers. FB

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).							NA	**S**	S	S	S	NA				
b. Apply the principles of asepsis and standard/infection control precautions (Responding).							NA	**S**	S	S	S	NA				
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).										NA	NA	NA				
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).							NA	**S**	S	S	S	NA				
e. Organize time providing patient care efficiently and safely (Responding).							NA	**S**	S	S	S	NA				
f. Manages hygiene needs of assigned patient (Responding).										S	S	NA				
g. Demonstrate appropriate skill with wound care (Responding).											S	NA				
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).							NA	**S**	S							
Faculty/TA Initials		NS					CB	CB	CB	FB	FB					

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

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

Comments: I found the pull station and extinguisher both at the entrance of 3T double doors and once you walk in its there also one of each when you get past the double doors. Great job! CB

Week 8(5a,b): Great job utilizing correct body mechanics and raising the bed while performing an assessment. You did a great job ensuring that you foamed in/out when entering/exiting patients' rooms. CB

Week 9 For (c) I didn't perform anything with foley due to my patient did not have one.

Week 9 (5 d,e)- Nice job with the management of the care you provided to your assigned patient. You organize your time appropriately to provide safe, efficient care while making sure to provide care that contributes to positive patient outcomes. FB

Week 10 for (c) I didn't perform anything with a foley due to my pt didn't have one, however my pt did have a purwick and I did have to adjust it a few times due to it making a bubbling sound indicating it was not in the right position. (g) when it comes to wound care, I didn't directly need to perform wound care dressing changes but I ensured the pt was repositioned q2h, the pt had a mepilex patch on that is changed q3days but I observed it to make sure there was no visible drainage, or that it wasn't soiled.

Week 10 (5e) Great job managing time effectively to provide all necessary care for your patient and meeting all basic care needs. (5f) Great job offering and/or encouraging hygiene care for your assigned patients. FB

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

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

Comments:

Week 9 (6a)- You provided care to your assigned patient using information gained through the semester in theory and lab. The care provided used clinical judgment and the established plan of care for your patient, great job! FB

Week 10 (6a)- Great job utilizing clinical judgement while providing care to your patient during this clinical rotation. It is wonderful to see you apply the knowledge you have gained in theory to the care of your patients at the bedside. FB

Objective

6. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*

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

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

Comments:

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: **a. Reflect on areas of strength****(Reflecting)							NA	**S**	S	S	S	NA				
b. **Reflect on areas for self-growth with a plan for improvement. ****(Reflecting)							NA	**S**	S	S	S	NA				
c. Incorporate instructor feedback for improvement and growth (Reflecting).							NA	**S**	S	S	S	NA				
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).							NA	**S**	S	S	S	NA				
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).							NA	**S**	S	S	S	NA				
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).							NA	**S**	S	S	S	NA				
g. Comply with patient's Bill of Rights (Responding).							NA	**S**	S	S	S	NA				
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).							NA	**S**	S	S	S	NA				
i. Actively engage in self-reflection. (Reflecting)							NA	**S**	S	S	S	NA				
Faculty/TA Initials		NS					CB	**CB**	CB	FB	FB					

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

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

Comments:

Week 8: My strength was being able to effectively communicate with the patient, despite being nervous upon entering the room because it flowed naturally once in the room. You had great communication skills with your patient and did an amazing job despite your nerves! CB

My weakness would be that I was trying to remember every little thing that I overlooked the simplest things such as for the head-to-toe assessment questions I forgot to ask about passing gas, and I also forgot to palpate the abdomen, pt did say it was tender but I overlooked it. To improve that I will make sure that I go through the full head-to-toe assessment a few times until I can feel more confident without forgetting. With experience, all the different questions and steps of the head to toe assessment will be second nature, but you have a good plan in place to help with remembering. CB

Week 8(8a,b,d,f,h,i): Excellent job following the student code of conduct, exhibiting professionalism while in the clinical setting, and ensuring that patient privacy was respected. Great job reflecting on your first clinical in your cdg, keep up all of your hard work! CB

Week 9-My strength going into the patients room was feeling confident because the patient just so happened to have a negative pressure wound vac which we just went over in class, although I didn't perform any wound changes or documentation for the output I thought it was a great experience to reflect on because I had gained some knowledge about the pump and how it worked first hand. As far as self-growth goes, I plan on learning more about different types of wounds, dressings, and how to confidently assess to my pts needs further down line for improvement. Mariah, when you are providing an area of improvement, provide a plan on how you are going to achieve improvement. Example: I need to improve on documentation in the health record, I will practice over the next week in the library lab at least 3 times before the next clinical day. FB

Week 10 My strength this week was being able to identify an issue and utilize time management, what I mean by this is when I did my VS for my pt her SPO2 was down to 84, I calmly went and got the nurse to address the situation and we administer 2L of O2 and the pt was stabilized after. I plan on utilizing my critical thinking to help with self-growth in concepts of understanding theres a problem and addressing the situation promptly, which will be good when it comes to prioritization. Mariah, you are doing a great job assessing your patients and noticing abnormalities. When you are identifying a weakness or area of improvement try to focus on a plan to improve on a weakness. If critical thinking is an area that you might want to improve on you might research a different disease process before the next clinical and ask yourself questions such as why and how a disease occurs. FB

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

Note: Students are required to submit one satisfactory care map by 11/17/2025 at 0800. If the care map is not evaluated as satisfactory upon initial submission, the student may revise the care map based on instructor feedback/remediation and resubmit one time by 11/24/2025 at 0800 to receive a satisfactory evaluation. ***See Attached Nursing Care Map Grading Rubric**

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Student Name:	**Course Objective:**
Date or Clinical Week:	

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

	Criteria	3	2	1	0	Points Earned	Comments
	13. An appropriate rationale is included for each intervention	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	**>75% complete**	**50-75% complete**	**<50% complete**	**0% complete**		
	15. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**		

Reference

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

Faculty/Teaching Assistant Initials:

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

Student Name:					
Performance Codes: **S**: Satisfactory **U**: Unsatisfactory			**Evaluation** ***(Refer to LCJR)**	**Faculty Initials**	**Remediation Date/Evaluation/Initials**
Date: **11/4/25** **or** **11/11/25**	Simulation #1 (2,3,5,8) *	Scenario			
		Survey			
Date: **11/24/25** **or** **11/25/25**	Simulation #2 (2,3,5,7,8) *	Scenario			
		Survey			

* Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 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: _____