

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2025

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student:

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

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).							S	NA	S	S	S	NA				
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).							S	NA	S	S	S	NA				
Faculty/TA Initials		NS					SA	CB	CB	NS	NS					
Clinical Location; Patient age**		Meditech Orientation					3T, pt age 88	NA	N/A	4N, pt age 80	4N, pt age 77 & 83	NA				

* 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 7(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 able to recognize physiological needs of your patient when performing head to toe assessment. SA

Week 9 1(c,d) – You did a very nice job this week coordinating your care effectively based on your patient's preference, values, and needs. Due to your patient's injury, he required assistance with ADLs. You were able to coordinate these needs in a timely manner, ensuring his self-esteem was addressed with hygiene care. You noticed some

functional incontinence due to his non-weight bearing status, and used a comforting approach in ensuring he was cleaned up promptly. You also implemented measures at ensuring his physiological and safety needs were met. Well done! (d) you were able to utilize Maslow's as a guiding framework for performing your nursing interventions. You addressed his physiological needs first through careful assessment and vital sign measurement. You also ensured his nutritional needs were met by assessing his intake, noting limited intake which you discovered was a result of him normally only eating two meals per day. You also addressed his self-esteem by assisting with personal hygiene care. Great job! NS

Week 10 1(a) – This week you were able to gain experience in identifying and respecting the spiritual needs of your patient. On day 2, when preparing to administer the prescribed enema, you noticed that the Priest was in the room with your patient. You respected her spirituality and allowed her time to pray with the Priest to address her needs without interrupting. NS

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).							S	NA	S	S	S	NA				
b. Use correct technique for vital sign measurement (Responding).							S	NA	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).										N/A	N/A S	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					SA	CB	CB	NS	NS					

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Comments:

Week 7(2a,b): McKinley, you performed a systematic head to toe assessment and retrieved all vital signs within a timely manner. Great job! SA

Week 9 2(a) – Good work with your head-to-toe assessment this week. With each experience you will continue to gain more comfort in identifying normal vs. abnormal. This week you were able to note numerous deviations from normal. You noticed abnormal HEENT assessment findings, including white patches to the tongue and palate and missing teeth. You noticed abnormal respiratory findings such as shallow and pain with cough. You interpreted this as being related to his three broken ribs and discussed measures to help relieve pain when cough, understanding the important of opening his airway due to his immobility. You also noticed abnormal cardiovascular assessment findings such as delayed cap refill in his left foot, which you interpreted as a result of his lower extremity injury and splint in place. Neurologically, you noticed dizziness and weakness to the left lower extremity as a result of his injury. You noted a leg fracture with use of a splint device, and the use of a cane at home. You noticed his non-weight bearing status due to the fracture. For his integumentary assessment, you noticed coolness to the extremity, and performed a follow up assessment to determine adequate circulation. Overall you did a great job! NS

Week 9 2(c) – A safety and falls assessment was completed using the Johns Hopkins Fall Risk assessment tool, noting a score of 13 indicating a high fall risk. You did well to explain the factors that led to the score and described nursing measures that were implemented to promote safety. Good job recognizing that fall precautions were not in place. You responded by implementing the necessary precautions and discussing the potential implications of not ensuring these measures were in place. Nice job promoting safety for your patient! NS

Week 9 2(g) – You did a nice job in discussing and identifying abnormal diagnostic findings on your patient. You were able to notice the fracture to his leg upon reviewing the xray, noting the importance of non-weight bearing to prevent further complications. You also were able to discuss the identified rib fractures leading to pain with coughing. You used good clinical judgment in discussing the importance of promoting lung expansion with coughing and deep breathing to prevent respiratory complications. NS

Week 10 2(f) – This competency was changed to “S” because you had the opportunity to care for a patient with an NG tube in place. Although you did not get to insert or discontinue the NG tube (☹️) you still assessed for placement and maintained the NG tube in the clamped position. You gained experience documenting on the gastric tube intervention related to your findings. NS

Week 10 2(g) – You were able to review and discuss the xray findings on your patients this week. With both being admitted for gastrointestinal problems, you were able to correlate the findings of the xray and the implications such as the need for an NG tube, and the need for an enema and digital disimpaction. NS

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:							S	NA	S	S	S	NA				
a. Receive report at beginning of shift from assigned nurse (Noticing).									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).							S	NA	S	S	S	NA				
d. Report promptly and accurately any change in the status of the patient (Responding).							S	NA	S	S	S	NA				
e. Communicate effectively with patients and families (Responding).							S	NA	S	S	S	NA				
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).							S	NA	S	S	S	NA				
Faculty/TA Initials		NS					SA	CB	CB	NS	NS					

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

Comments:

Week 7(3a,c,d,e): Great job receiving hand off report on your patient. Good job using medical terminology while communicating with your patient, reporting all findings, and communicating effectively with your staff RN. SA

Week 9 3(e) – I thought you did an excellent job with communication this week, Kinley! You were actively engaged with your patient, myself, your peers, and other members of the health care team. You were able to establish a rapport with your patient through communication to ensure he felt safe in your care. I appreciate your teamwork and willingness to allow your classmates to assist with transferring and hygiene, very well done! NS

Week 9 3(d,f) – You stayed in communication with the assigned nurse and promptly reported any abnormal findings. You noticed that your patient’s fall precautions were not in place and promptly reported this and ensured that all precautions were initiated for safety. Great job being an accountable member of the health care team! NS

Week 10 3(e) – Communication a major strength of yours this week as evidenced by the statements made by your patient regarding the care that was provided. It is always nice to get recognized by coworkers, bosses, etc., however, the most meaningful recognition you will experience is compliments from your patients. The fact that your patient made it a point to tell you about the impact you made demonstrates the rapport you were able to develop through strong communication. Well done! NS

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:									S							
a. Document vital signs and head to toe assessment according to policy (Responding).							S	NA	S	S	NA					
b. Document the patient response to nursing care provided (Responding).							S	NA	S	S	NA					
c. Access medical information of assigned patient in Electronic Medical Record (Responding).*		S					S	NA	S	S	NA					
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).*		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).							S NI	NA	NI	S	S	NA				
*Week 2 –Meditech Orientation		NS					SA	CB	CB	NS	NS					
Faculty/TA Initials																

* 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 7(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 most requirements per the grading rubric. I changed 4f to “NI” as your APA formatting on the initial and peer responses are incorrect. Refer to the APA formatting resource that is in edvance for correct format use. SA

Week 9: My NI from week 7 is no longer an NI as I have looked over and corrected my understanding of the APA formatting for my cdg post as well as for the replies. You did a great job this week! NS

Week 9 4(a) – Overall you were very accurate with the details provided in your assessment documentation. All other documentation interventions were completed timely and accurately. Remember our conversation about checking “yes” or “no” to defined parameters for each body system. Otherwise, well done! NS

Week 9 4(f) – As far as responding to the question prompts this week, I thought you did a really nice job demonstrating clinical judgment and understanding of the patient’s situation. I appreciated the details provided that will help your fellow classmates learn from the experience. Refer to my comments back to your initial post and response post for more details. All criteria were met on the CDG grading rubric for a satisfactory evaluation. Well done! NS

Week 10 4(f) – Great work with your CDG again this week. I have provided feedback directly to you in your initial and response post, see those comments for more details. You met all criteria on the CDG grading rubric. Keep it up! NS

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).							S	NA	S	S	S	NA				
b. Apply the principles of asepsis and standard/infection control precautions (Responding).							S	NA	S	S	S	NA				
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).										N/A	N/A	NA				
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).							S	NA	S	S	S	NA				
e. Organize time providing patient care efficiently and safely (Responding).							S	NA	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).							S	NA	S							
Faculty/TA Initials		NS					SA	CB	CB	NS	NS					

* 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: There is a fire extinguisher by room 3027 and a pull station across from room 3020, there is one of each by exit stair 2. Thank you! SA

Week 7(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. SA

Week 9 5(a,d,e,f) – Great job implementing appropriate and safe body mechanics when transferring your patient from the bed to the bedside commode. You followed appropriate orders by maintaining non-weight bearing status to his left leg. You ensured the use of a gait belt, communicated with the patient upon transfer, and promoted safety throughout for both yourself and the patient. (d) I thought you did a very nice job this week with time management and organization. This can be difficult early on in your nursing career as tasks and assessments take longer to complete. However, you stayed organized and on track which allowed you to learn through researching the chart. Nice job! (f) – You consistently maintained the hygiene needs of your patient this week, ensuring he was cleaned up promptly following incontinent episodes. You also did well to ensure to had clean linens and was provided a bath. Great work! NS

Week 10 5(b,d,g) – You were able to experience various new skill opportunities this week! With each you were able to demonstrate beginning levels of competence. First, you were able to administer a tap water enema. You discussed the appropriate steps, and with guidance you were able to perform the procedure correctly. You also gained experience with wound care, assisting your fellow classmate with several dressing changes. You maintained appropriate aseptic technique and follow standard precautions to protect yourself and the patient. NS

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	NS	NS					

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Comments:

Week 9 6(a) – As I have discussed throughout my comments on your clinical tool and in your CDG post, you demonstrated strong clinical judgement skills throughout the day. You developed a plan of care that was patient-centered based on his needs, and followed up on important assessment data quickly. You correctly identified his impaired mobility as a priority nursing problem. Beyond this, you demonstrated excellent clinical judgment skills in our discussion. You discussed medications that he was taking, risk factors, interventions to prevent complications, and much more. I was impressed with your thought process this week! NS

Week 10 6(a) – You were able to identify dysfunctional gastrointestinal motility as the priority problem for both of your patients this week. These were related to a small bowel obstruction and constipation with impaction. You were able to discuss priority assessments, nursing interventions, and evaluation methods to determine effectiveness of the plan of care. NS

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, intramuscular, 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	NS	NS					

* 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)							S	NA	S	S	S	NA				
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)							S	NA	S	S	S	NA				
c. Incorporate instructor feedback for improvement and growth (Reflecting).							S	NA	S	S	S	NA				
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).							S	NA	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).							S	NA	S	S	S	NA				
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).							S	NA	S	S	S	NA				
g. Comply with patient's Bill of Rights (Responding).							S	NA	S	S	S	NA				
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).							S	NA	S	S	S	NA				
i. Actively engage in self-reflection. (Reflecting)							S	NA	S	S	S	NA				
Faculty/TA Initials		NS					SA	CB	CB	NS	NS					

* 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: (a) I feel really good and comfortable talking to patients and getting a conversation going as well as believe I'm good with doing vitals but (b)I still am not the greatest with focusing while obtaining manual pulses, I will continue to practice on my family members and my friends to ensure that my

results are accurate each time I assess vitals. I also want to continue going over and practicing head to toe assessments each week just to make sure I don't forget anything when doing it on actual patients.

Those are good goals to have for future clinicals!

Week 7(8d,f,h): Excellent job following the student code of conduct, exhibiting professionalism while in the clinical setting, and ensuring that patient privacy was respected. I have changed 8f to a "U" for the incorrect tool submitted, which resulted in a late tool submission. "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." SA

Week 8: I have made sure I have the correct copy of the clinical tool. Thank you! CB

Week 9 (8a): This week I felt a lot more comfortable and confident when doing my head to toe assessment as well as just communicating with the patient, I also feel I did a good job with documentation. Excellent strengths to note! I completely agree. You had a great week of clinical and demonstrated strong nursing care. I thought you did well to answer my questions and were well-prepared. Your communication was awesome this week! NS

(8b) I think I could improve on my medical terminology so when the nurse is giving me report I remember to use the terms instead of wanting to write out the full word so I remember it, i'll do this by going over and re- writing the terms in my med term book. **Good use of reflection to identify an area for improvement! Report can be a very overwhelming experience early on in your career. The nurses will discuss things that are beyond what you have learned and it can lead to uncertainty and confusion. You noted a great plan to help reduce the stress of writing everything down. Utilizing med term and abbreviations can help reduce the amount of information you are writing, allowing you to focus on the information being presented. Good thoughts and plan for improvement. Keep up the hard work! NS**

Week 10 (8a):This week I felt really good and I got to experience a lot, I think I did a good job of communicating with my patient and getting what I needed while also giving myself the time to document everything and go through the patients chart to see what information I could get. (8 b) I could improve on my confidence when doing things for the first time, even though I know it will always be hard for the first time I still want to be able to do things and not back away from getting the experience. I will do this with more and more practice with everything. I these reflections, Kinley! I am glad that you were able to gain knowledge with new experiences. I am also very happy for you regarding the comments made by your patient. Those are special moments that you will carry with you throughout your career. You clearly made a positive impact on her! As for the area of weakness, I can empathize with your hesitancy with certain skills. Doing new things for the first time is scary, especially on a real patient in real situations. I like that you reflected on this being an area you want to improve upon. Jump at the opportunity to perform new skills, that's how you will get more comfortable in the future. Keep up the hard work! NS

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					
Date or Clinical Week:		Objective:					
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: <ul style="list-style-type: none"> 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 <small>*(Refer to LCJR)</small>	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: _____