

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
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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	S			
b. Identify cultural factors that influence healthcare (Noticing).										S	S	NA	S			
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).							NA	S	S	S	S	NA	S			
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).							NA	S	S	S	S	NA	S			
Faculty/TA Initials		NS					CB	BL	BL	FB	FB	FB	FB			
Clinical Location; Patient age**		Meditech Orientation					N/A	3T (81)		3T(82)	3T (73) 3T (72)	N/A	3T (91) 3T (54)			

* 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:

10/03/2025. No clinicals this week

Week 8-1(c,d) Great job this week showing respect for your patient's individual preferences, values, and needs while providing care. In your CDG, you did a nice job identifying your patient's abnormal assessment findings and priority concerns. This demonstrates the early development of clinical judgment, which is essential for safe and effective nursing practice. BL

Week 9 (1a,b)-Cassie, 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

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

Week 12 (1c,d)- Great job being respectful of patient's values and wishes while coordinating care for your patient during this clinical rotation. You have demonstrated the use of Maslow's hierarchy of needs to provide appropriate care for your assigned patient. 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	S	S	S	NA	S				
b. Use correct technique for vital sign measurement (Responding).							NA	S	S	S	NA	S				
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).									NA	S	S	NA	S			
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).									NA	S	S	NA	S			
e. Collect the nutritional data of assigned patient (Noticing).									NA	S	S	NA	S			
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).									NA	NA	NA	NA	NA			
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).									NA	S	S	NA	S			
Faculty/TA Initials		NS					CB	BL	BL	FB	FB	FB	FB			

* End-of-Program Student Learning Outcomes

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

Comments:

Week 8-2(a,b) Great job this week using correct techniques for measuring vital signs and completing a systematic head to toe assessment on your assigned patient. Your assessment was thorough and accurate. BL

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 (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. FB

Week 12 (2a,c,d)- You did a great job performing appropriate assessments. You provided pertinent information from assessments, labs, and diagnostic testing to determine a priority problem for your assigned patient. Associated interventions were implemented that were relevant to the priority problem based off of information gathered. (2g) Great job interpreting the lab data and diagnostic procedures that provides substantial information for the priority problem. Keep up the good 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:							NA	S	S	S	S	NA	S			
a. Receive report at beginning of shift from assigned nurse (Noticing).									NA	S	S	NA	S			
b. Hand off (report) pertinent, current information to the next provider of care (Responding).									NA	S	S	NA	S			
c. Use appropriate medical terminology in verbal and written communication (Responding).							NA	S	S	S	S	NA	S			
d. Report promptly and accurately any change in the status of the patient (Responding).							NA	S	S	S	S	NA	S			
e. Communicate effectively with patients and families (Responding).							NA	S	S	S	S	NA	S			
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).							NA	S	S	S	S	NA	S			
Faculty/TA Initials		NS					CB	BL	BL	FB	FB	FB	FB			

* End-of-Program Student Learning Outcomes

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

Comments:

Week 8-3(e) Excellent job communicating with your patient during clinical this week. You also did a great job reflecting on and discussing your communication in your CDG as well. BL

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

Week 12 (3d,e)- You have demonstrated the ability to respond appropriately to any changes that may occur with your assigned patient. Reporting changes from assessments, vital signs, or symptoms has been prompt and to the appropriate reporting structure. You have also displayed the ability to communicate appropriately with patients and their families. Great Job! 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	S			
b. Document the patient response to nursing care provided (Responding).							NA	S	S	S	S	NA	S			
c. Access medical information of assigned patient in Electronic Medical Record (Responding).*		S					NA	S	S	S	S	NA	S			
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).*		S							NA	S	S	NA	S			
e. Provide basic patient education with accurate electronic documentation (Responding).									NA	S	S	NA	S			

f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).							NA	S	S	S	S	U	NA	S			
*Week 2 –Meditech Orientation		NS					CB	BL	BL	FB	FB	FB	FB	FB			
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 8-4(a) Excellent job with your documentation this week in clinical. Your documentation for both your vital signs and head to toe assessment were thorough and accurate. As discussed in clinical, a friendly reminder that for any body system that is found to be normal based on the defined parameters in Meditech, you do not need to document any further information. You can select "yes" for normal, and then move on to the next system. 4(c) Great job in your CDG discussing the use of informatics and technology in the clinical setting. You provided a nice description of how you utilized the patient's vital signs data to look for trends and identify any changes. 4(f) Satisfactory completion of your CDG this week. Great job! BL

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 received a "U" for this competency related to the late post to one of your peers. You will need to address this per the instructions provided on page 1 of the clinical performance tool. **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.** FB

Week 11: I was late to submitting last week's reply to a peers' clinical discussion post. In the future, I will make sure to promptly respond to a post to avoid this occurring again. A nice reminder could be set as an alarm on your phone or using a calendar reminder that you look at first thing in the morning. Thank you for addressing. FB

Week 12 (4a,b)- You are progressively showing improvement with documentation. Documentation has been thorough and accurate with minimal editing required. (4c) You have displayed the ability to access the electronic health record and gather all relevant information. (4f) Your initial CDG post and peer response was within the guidelines provided within the CDG rubric, nice job! 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	S			
b. Apply the principles of asepsis and standard/infection control precautions (Responding).							NA	S	S	S	S	NA	S			
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).									NA	NA	NA	NA	NA			
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).							NA	NI	NI	S	S	NA	S			
e. Organize time providing patient care efficiently and safely (Responding).							NA	NI	NI	S	S	NA	S			
f. Manages hygiene needs of assigned patient (Responding).									NA	S	S	NA	S			
g. Demonstrate appropriate skill with wound care (Responding).									NA		NA	NA	NA			
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting)							NA	S	S							
Faculty/TA Initials		NS					CB	BL	BL	FB	FB	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:

Fire extinguisher is located across from room 3036 and the pull station is located across room 3037. Great job! BL

Week 8-5(d,e) During this clinical experience, you demonstrated a good understanding of measuring vital signs and performing a head to toe assessment, but you faced challenges staying organized and managing interruptions. It's normal to feel flustered or unsure when things do not go as planned, and with practice, you will build confidence in handling multiple tasks smoothly. Focus on planning ahead, using checklists, and prioritizing tasks to help you be more efficient. With continued practice and reflection after each experience, you'll continue to grow your skills and perform more confidently. Self-awareness is an important part of learning, and I commend you for recognizing the need for improvement. BL

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 (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

Week 12 (5 c,d,e)-You have demonstrated great management of care for your assigned patient making sure all pertinent interventions were completed. You organize your time appropriately to provide safe, efficient care to ensure positive patient outcomes. (5f)- Try to encourage hygiene care to patients, this is very important to not only make the patient feel better, but also for infection control. 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).									NA	S	S	S NA	S			
Faculty/TA Initials		NS							BL	FB	FB	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. FB

Week 11 (6a)- This competency was changed because you did not have a clinical rotation this week. Make sure you are thoroughly reading each competency to self-rate yourself accordingly. FB

Week 12 (6a)- You are demonstrating the ability to apply knowledge that you have gained in theory and use clinical judgment skills while delivering patient centered care to your assigned patients. Great job! 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).									NA				S			
b. Recognize patient drug allergies (Interpreting).									NA				S			
c. Practice the rights of medication administration and safety checks prior to medication administration (Responding).									NA				S			
d. Administer oral, intra-muscular, subcutaneous, and intradermal medications using correct techniques (Responding).									NA				S			
e. Review the patient record for time of last dose before giving PRN medication (Interpreting).									NA				S			
f. Assess the patient response to PRN medications (Responding).									NA				S			
g. Demonstrate medication administration documentation appropriately using BMV (Responding).									NA			S	S			
*Week 11: BMV		NS							BL			FB	FB			
Faculty/TA Initials																

* End-of-Program Student Learning Outcomes

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

Comments:

Week 11: I had BMV lab and learned how medication is safely administered to patients using Pixis.

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

Week 11 (7g) - You are satisfactory for this competency by attending the Bedside Medication Verification (BMV) clinical orientation, actively listening, observing, and discussing accurate medication documentation and safe administration with the use of the BMV scanner. NS/CB/SA

Week 12 (7a)-Great job identifying the action, classification, rationale, and side effects of each medication administered during this clinical rotation. (7c,d)-You demonstrated the use of all rights of medication administration and correctly administered oral medications to your assigned patient. (7g) You demonstrated appropriate use of the barcode medication verification system for patient identification and administration of medications was saved. 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 7(8a-i): Cass, you did not self-rate yourself for these competencies, therefore you receive a “U”. Please be sure to address this competency next week when completing your tool. The following are directions from page 1 of the tool: *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.* CB

Week 7: I did not self-rate using the clinical tool which resulted in an unsatisfactory rating. I will correct this by carefully reviewing each section to ensure I fully address every objective. I will continue to implement this in my future clinicals. CV **Thank you! BL**

Week 8:

- A. I felt comfortable asking my instructor for clarification before integrating anything I wasn’t sure about. I also feel confident that I connected well with my patient, communicated clearly, and showed genuine interest in his care. **Great job! Although communication may seem simple, it can sometimes be challenging in the hospital setting. You demonstrated strong interpersonal skills by taking the time to converse with your patient during your assessment. Remember, even brief conversations can show that you care and help build rapport, while also providing valuable information for your clinical evaluation. Keep up the great work! BL**
- B. One challenge I faced was time management during my assessment due to multiple interruptions. Moving forward, I’ll stay more focused, anticipate delays, and adjust my workflow to be more efficient. My goal is to deliver thorough care while staying on track, prioritizing patient care and safety. **I appreciate your honesty in recognizing the challenge you faced with time management during your assessment. It’s normal to encounter interruptions, especially as you’re developing your clinical workflow. Your plan to stay focused, anticipate delays, and adjust your approach shows strong self-awareness and a commitment to growth. With continued practice, you will become more efficient while maintaining thorough, safe, and patient-centered care. Keep up all your hard work! BL**

Week 8-8(i) You did a wonderful job reflecting on your first clinical experience in your CDG this week. You provided a nice description of your thoughts and feelings before and after the experience. Keep up all your great work! BL

Week 9:

- A. I was able to complete a thorough and efficient head to toe assessment and engage in meaningful conversations with my patient. I was also able to complete a 1:1 feed. **Great job with the care you provided this week. You were very patient and compassionate with the care you provided your assigned patient. Keep up the good work. FB**
- B. I didn’t ask for assistance with repositioning my patient to assess his back and perineal area. A PCT eventually came in to check on the patient and we turned the patient at that time. Next time, I’ll make sure to proactively ask for help in order to ensure patient safety and maintain proper body mechanics. Another weakness I had this week was regarding this clinical tool. I initially completed it on my phone and had a technical difficulty which resulted in me having to restart this whole week’s document on a computer. Moving forward, I will only complete this tool on my laptop to avoid this issue and to ensure my assignments are in on time **Do not be afraid to ask for help, back injuries are very common for nurses. The use of assistance and proper body mechanics will help you and the patient. Using your computer is the best option for uploading these tools, the formatting of them can get terrible if not done a computer, save yourself the frustration. FB**

Week 10:

- A. This week, I was able to connect well with my patients. I listened to their concerns and built trust, which helped me understand their needs better. I also used clinical judgment to figure out their priority problems and start my care plan. I improved my time management this week and I am getting more comfortable in clinical and MAR. **Great job, you are doing a wonderful job providing care and using critical thinking skills to ensure positive patient outcomes. FB**
- B. I’d like to become more active on the unit by answering call lights, helping other nurses/students, and taking advantage of any opportunity to shadow procedures. I also need to improve on my organization. This is an ongoing process for me that I am taking steps towards strengthening. **Don’t be afraid to assert yourself and look out for new learning experiences. Seeking out new learning opportunities will help you grow through experience. FB**

Week 10 (8f)- You received a “U” for this competency because your clinical performance tool was submitted late. Please address this per the instructions found on page 1. **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. FB**

Week 11: I did not submit my clinical tool on time which resulted in an unsatisfactory rating for week 10. I will correct this by completing and submitting my clinical tool promptly after I have clinicals. **Thank you for addressing, use some sort of a reminder calendar or alarm. FB**

Week 11 (8c,i) These competencies were changed because you did not have a clinical rotation this week. FB

Week 12:

- A. This week I was able to advocate and assist my patient in hygiene and ambulation. I had very different patients on Wednesday and Thursday and was able to connect and communicate effectively with them, which gave me confidence in my care. I think that I improved my timeliness for both patients this week. I made sure to ask for help when I needed it. **You have progressed greatly over the semester. Never be afraid to ask for help when needed.**
- B. This week, one area I struggled with was completing all components of a thorough head to toe assessment on my second patient. I want to improve how I communicate the importance of the full assessment to patients so I can gather complete data and accurately inform the healthcare provider of any changes in their condition. **There are always interruptions and sometimes patients are not up to it. You can work on doing head to toe assessments on family members. The quicker you get at doing the head to toe the easier it will be on you and the patient. Explain to the patient what you have to do and be timely, don't drag out the assessment. Getting the assessment completed quickly is going to be important. You should be able to do a head to toe assessment in 15 minutes. 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 L.C.JR)	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

Skills Lab Competency Tool

Student Name: Cassidy Verlie

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U:Unsatisfactory		Lab Skills										
	Week 1 (4)*	Week 2 (2,3,5,8)*	Week 3 (2,3,4,5,8)*	Week 4 (2,3,4,5,8)*	Week 5 (2,3,4,5,8)*	Week 6 (1,2,3,4,5,8)*	Week 7 (2,3,4,5,8)*	Week 8 (2,3,4,5,8)*	Week 9 (2,3,4,5,8)*	Week 10 (2,3,4,5,6,8)*	Week 11 (2,5,7)*	
	Date: 8/18/2025	Date: 8/25/2025	Date: 9/3/2025	Date: 9/8/2025	Date: 9/15/2025	Date: 9/22/2025	Date: 9/29/2025	Date: 10/6,8/ 2025	Date: 10/13/2025	Date: 10/20/2025	Date: 10/28/2025	
	Evaluation:	S	S	S	S	S	S	S	S	U	S	S
	Faculty Initials	HS	HS	AR	AR	FB	AR	HS	AR	AR	AR	AR
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	10/13/2025 S AR	NA	NA	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	

*Course Objectives

Comments:

Week 1 (Technology Lab): During this lab you were able to satisfactorily navigate:

- Edvance360 Learning Management System.
- Skyscape Resource System.
- Assessment Technologies Institute (ATI) / Shadow Health.
- Guided tour of library and computer lab. HS

Week 2 (Hand Hygiene; Vital Signs; PPE): During lab this week you were able to satisfactorily demonstrate:

- Appropriate hand hygiene utilizing hand sanitizer and soap/water.
- Accurate verbalization of procedure for donning & doffing PPE.

Appropriate level of skill during guided practice with measurement of radial and brachial pulses, along with manual blood pressure. Vital signs skills will be observed 1:1 with faculty during Week 3. Keep up the good work! HS

Week 3 (Vital Signs):

Excellent work in the lab this week! You satisfactorily completed the vital sign check off during 1:1 observation, including oral temperature, radial pulse, respiratory rate, pulse oximetry, and blood pressure measurement. During the blood pressure measurement, you accurately obtained two out of two blood pressure results on the Vital Sim manikin. The first blood pressure measurement was set at 132/74 and you identified it as 130/70. The second measurement was set at 146/82 and you interpreted it as

146/80. Great job! You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic vital sign assessments. One prompt was needed as a reminder to always identify your patient by asking name and date of birth prior to completing any care. You provided great communication with the “patient”. You did a great job with your first Meditech documentation, however you omitted “84” as the pulse rate. The remainder of your documentation was accurate and complete. I noted that you documented two times. For the future, rather than documenting twice you will need to edit/update your first entry. Keep up the great work!! AR

Week 4 (Assessment):

Satisfactory with head to toe assessment guided practice, hand-off report activity, Lexicomp/Intranet navigation activity, and the assessment/safety activity utilizing your clinical judgment skills. Great job! You will be observed 1:1 for Head to Toe Assessment competency during Week 5. AR

Week 5 (Assessment; Mobility):

Great job in lab this week! You have satisfactorily demonstrated a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall well done. You did require 1 prompt related to assessing urine color and appearance. A second prompt was required for the use of an ambulatory aid. You demonstrated friendly, professional, and informative communication. You were able to correctly identify the lung sounds as wheezes. Great job!

Feedback on documentation this week: With this being the first time that you fully documented these interventions, there are some areas for improvement. You did a good job, overall, with your Meditech documentation. You documented on the interventions listed below; however, some areas were inaccurate and omitted. Please review each area of documentation within the next two weeks so you can examine areas that were omitted. I want you to feel comfortable and confident with Meditech documentation.

- **Pain-** Documentation complete and accurate.
- **Vital signs-** omitted heart rate of 99, respiratory rate of 22, and blood pressure of 98/64.
- **Safety-** documented “no” to bed alarm which should be “yes; documented “yes” to chair alarm which should be “no.”
- **Physical reassessment-** HEENT (eye)- both eyes are equal, so you could document under bilateral eyes instead of each eye separately. Psychosocial- comment “My husband died two weeks ago” should be documented in the expressed/other feelings comment box. Respiratory- omitted respiratory symptom of difficulty coughing; documented both thin and thick sputum consistency. Cardiovascular- you do not document monitored patient until your last semester because you have not been taught heart rhythms; omitted edema note- toes to knee bil. and the entire left upper extremity. Neurological- omitted understands concepts under cognition comprehension ability; omitted right and left leg strength. Dysphagia screen documented NPO, instead of NO: Previously passed. Integumentary- omitted “no” to does the patient have wounds. Gastrointestinal- omitted use of daily bowel movements aids used; omitted “witnessed” to emesis.

Mobility Lab 9/18/2025: Satisfactory completion of mobility lab through demonstration of the following: Logrolling/turning a patient, lifting a patient in bed, repositioning from lying to sitting, repositioning from sitting to standing, stand/pivot transfer from a bed to a chair, ambulating with a walker, ambulating with crutches, ambulating with a cane, use of a gait belt, and safe use of a wheelchair. Proper body mechanics were utilized to promote safety for the health care worker and the patient. Great job with active participation throughout the duration of the lab. FB

Week 6 (Personal Hygiene Skills):

Satisfactory with patient hygiene, making an occupied bed, shaving, oral care, hearing aid care, application of ace wraps, TED Hose/SCD’s, and clinical readiness scenario during guided practice. Completed Meditech documentation for Hygiene and Ted Hose. Keep up the great work! AR

Week 7 (NG Skills: Insertion, Irrigation, and Removal; Feedings): Great job this week in lab demonstrating competence for Nasogastric Tube Insertion, Irrigation, and Removal through 1:1 observation. You are satisfactory in all NG skills. During insertion you did require one prompt, regarding checking the position of the tube in the back of the throat with a penlight. You did require one prompt during irrigation, after instilling the irrigate solution, immediately pull back on the syringe and aspirate an equal amount of gastric content into the syringe as initially instilled into the tube (30ml). No prompts needed during removal. Great job! You were able to verbalize understanding of the difference between irrigation and flushing. You were able to practice administering intermittent tube feeding using the gravity method while also confirming tube placement with gastric residual. Additionally, you participated in the PO intake station for accurate calculation of carbohydrate intake, accurately measured gastric output through the NG tube, practiced assisting a visually impaired patient with their meal, and completed the assigned documentation in Meditech. Keep up the hard work! HS

Week 8 (Foley Skills: Insertion, Removal; Sterile Gloves; I&O, Documentation Lab):

You did a great job in the lab this week and were satisfactory with the following skills: Sterile Glove Application, Foley Catheter Insertion (female), and Foley Catheter Removal. One prompt was needed during insertion related to labeling of the foley bag after insertion. As a reminder, after inserting the catheter keep the bag/tubing close to the bed rather than lifting them into the air. This will help prevent a CAUTI from occurring. Two prompts were required during removal related to pulling the 10 mL syringe plunger back to 0.5 mL before deflating the balloon, and always hold the catheter at the labia as the fluid is draining by gravity. You did remind yourself to empty the urine from the tubing and drainage bag prior to beginning the removal process. You maintained the sterile field throughout the Foley insertion, and did not contaminate the catheter or your gloves at any point. You correctly verbalized the differences in catheter insertion for a male patient. You also actively participated in the Intake and Output stations, and completed Meditech documentation related to Urinary Catheter Management and Intake & Output. Keep up the great work! AR

Documentation Lab – You have satisfactorily completed the documentation lab by actively participating in Meditech documentation related to vital signs, physical re-assessment, safety and falls, pain assessment, patient rounds, TED hose/SCD/Ace wrap, feeding method, Intake and Output, urinary catheter management, and writing a nurse note. You utilized your time wisely, asked appropriate questions, and gained experience with each intervention listed in preparation for clinical. Great job! CB

Week 9 (Wound Care: Dry Sterile, Damp to Dry Packed, Stoma Skills):

With remediation, you have demonstrated competence in the skill of wound assessment and wound care through guided observation of Dry Sterile Dressing and 1:1 observation of Damp to Dry Packed Wound Dressing Change. During your initial 1:1 observation of the Damp to Dry Packed Wound Dressing Change, the following areas were not met at a satisfactory level: when sterile supplies were being opened, and throughout the dressing change, you reached over the supplies numerous times and did not recognize this as contamination; the outside package of the sterile gloves touched opened sterile supplies and you did not recognize this as contamination; forgot to open the cotton-tipped applicators prior to putting on the sterile gloves. You did receive one prompt related to assessing the wound for tunneling and undermining. Documentation was completed related to wound care and patient rounds in the Meditech system. Additionally, you participated in the stoma care station to gain additional knowledge and skills. AR

10/13/2025: Remediation for Damp to Dry Packed Wound Dressing Change was completed at a satisfactory level, based on discussion and correct demonstration of the components list above. You did maintain the sterile field throughout. Great job. AR

Week 10 (Safety; Infection Control; Prioritization; Weight; Pressure Ulcer Prevention; Soft Restraints; Doppler BP):

Satisfactory participation with the following stations: Prioritization, Patient Weight, Restraints, Doppler BP, Meditech documentation, and Patient Scenario involving Safety, Infection Control, and Pressure Ulcer Prevention. Keep up the hard work! AR

Week 11 (Medication Lab):

Satisfactory participation and performance of the following skills in the medication lab: Oral, IM, SQ, and ID medication administration; performance of IM injection on fellow student; performance of SQ & ID injection on practice pad/sponge; use of and drawing medication out of ampule and vial; communication/accountability activity with awareness of allergies & dosage calculation. AR

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: _____