EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2025

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Keira Keoghan

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	NA	S	NA	S		
b. Identify cultural factors that influence healthcare (Noticing).										S	NA	S	NA	S		
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).							S	NA	S	S	NA	S	NA	S		
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).							S	NA	S	S	NA	S	NA	S		
Faculty/TA Initials		NS					BL	CB	CB	FB	FB	FB	FB			
Clinical Location; Patient age**		Meditech Orientation					3T, 85yo	NA	N/A	3T, 71yo	NA	3T, 83yo	NA	3T, 84yo & 3T, 87yo		

* 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 7-1(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 finding and priority concern. This demonstrates the early development of clinical judgment, which is essential for safe and effective nursing practice. BL

Week 9 (1a,b)-Keira, 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 11 (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

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	NA	S	NA	S		
b. Use correct technique for vital sign measurement (Responding).							S	NA	S	S	NA	S	NA	S		
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).										S	NA	S	NA	S		
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).										S	NA	S	NA	S		
e. Collect the nutritional data of assigned patient (Noticing).										S	NA	S	NA	S		
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).										S	NA	~~S~~ NA	NA	NA		
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).										S	NA	S	NA	S		
Faculty/TA Initials		NS					BL	**CB**	CB	FB	FB	FB	FB			

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

Comments:

Week 7- 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 completed in a timely manner. You demonstrated great clinical judgment by recognizing the elevated blood pressure reading on the NIBP machine and confirming it with a manual measurement. 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 11 (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! (2f) This competence was changed because your assigned patient did not have an NG tube. Make sure you are thoroughly reading each competency and self-rating appropriately. 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).							S	NA	S	S	NA	S	NA	S		
b. Hand off (report) pertinent, current information to the next provider of care (Responding).										S	NA	S	NA	S		
c. Use appropriate medical terminology in verbal and written communication (Responding).							S	NA	S	S	NA	S	NA	S		
d. Report promptly and accurately any change in the status of the patient (Responding).							S	NA	S	S	NA	S	NA	S		
e. Communicate effectively with patients and families (Responding).							NI	NA	NI	S	NA	S	NA	S		
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).							S	NA	S	S	NA	S	NA	S		
Faculty/TA Initials		NS					BL	**CB**	CB	FB	FB	FB	FB			

* End-of-Program Student Learning Outcomes

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

Comments:

(e) I feel that during my first clinical, I struggled a little bit with confidence when communicating with my patient, this made it challenging to explain procedures effectively to my patient.

Week 7-3(e) You did a great job recognizing an important area for growth, and it’s completely normal to feel less confident when communicating with patients at first. The fact that you’re aware of this and eager to improve shows strong self-awareness and professionalism. With each clinical experience, your confidence and communication skills will continue to grow. 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 11 (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).							S	NA	S	S	NA	S	NA	S		
b. Document the patient response to nursing care provided (Responding).							S	NA	S	S	NA	S	NA	S		
c. Access medical information of assigned patient in Electronic Medical Record (Responding).*		S					S	NA	S	S	NA	S	NA	S		
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).*		S							S	S	NA	S	NA	S		
e. Provide basic patient education with accurate electronic documentation (Responding).										S	NA	S	NA	S		
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).							S	NA	S	S	NA	S	NA	S		
*Week 2 –Meditech Orientation **Faculty/TA Initials**		NS					BL	**CB**	CB	FB	FB	FB	FB			

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

Comments:

Week 2- 4(c,d) Great job listening attentively and actively participating in the Meditech orientation clinical. You demonstrated beginning competence in accessing a patient's EHR, documenting care in an intervention, and locating patient data. You were able to access Lexicomp and locate patient education materials, as well as find nursing policies and procedures on the health system intranet. Great job! NS/CB/BL

Week 7-4(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. 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 to look for trends and identify any changes. 4(f) Satisfactory completion of your CDG this week. Keep up all your hard work! 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 11 (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).							S	NA	S	S	NA	S	NA	S		
b. Apply the principles of asepsis and standard/infection control precautions (Responding).							S	NA	S	S	NA	S	NA	S		
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).										S	NA	~~S~~ NA	NA	S		
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).							S	NA	S	S	NA	S	NA	S		
e. Organize time providing patient care efficiently and safely (Responding).							S	NA	S	S	NA	S	NA	S		
f. Manages hygiene needs of assigned patient (Responding).										S	NA	S	NA	S		
g. Demonstrate appropriate skill with wound care (Responding).											NA	S	NA	S		
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).							S	NA	S							
Faculty/TA Initials		NS					BL	CB	CB	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: The fire extinguisher was located to the left of the nursing coordinator/nurse station desk on 3T. The fire pull station was located behind the nursing coordinator/nurse station desk. Great job! 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 11 (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. You also assisted a fellow student with hygiene care, great job being a team player. (5c) Make sure you are rating yourself on competencies that were actually performed during the clinical experience. This competency was changed because your assigned patient did not have a foley catheter this week. 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	NA	S	NA	S		
Faculty/TA Initials		NS							CB	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 11 (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).													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).												S	NA	S		
*Week 11: BMV **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 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

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	NA	S	NA	S		
b. **Reflect on areas for self-growth with a plan for improvement. ****(Reflecting)							S	NA	S	S	NA	S	NA	S		
c. Incorporate instructor feedback for improvement and growth (Reflecting).							S	NA	S	S	NA	S	NA	S		
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).							S	NA	S	S	NA	S	NA	S		
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	NA	S	NA	S		
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).							S	NA	S	S	NA	S	NA	S		
g. Comply with patient's Bill of Rights (Responding).							S	NA	S	S	NA	S	NA	S		
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).							S	NA	S	S	NA	S	NA	S		
i. Actively engage in self-reflection. (Reflecting)							S	NA	S	S	NA	S	NA	S		
Faculty/TA Initials		NS					BL	**CB**	CB	FB	FB	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 7:

(a) I can confidently receive vital signs on a patient using the equipment in the hospital setting, I will continue to practice taking vital signs to perfect my ability to do so. Great job, Keira! I'm glad you feel comfortable performing this skill on an actual patient. You did a great job during your first clinical experience! You recognized the need to obtain a manual blood pressure, and did so with appropriate and accurate technique. BL

(b) I am having a hard time feeling confident when it comes to communicating with patients. This makes it slightly more difficult to explain procedures clearly and effectively. To improve, I am going to practice patient interactions with my peers and observe experienced nurses while also seeking feedback from my instructors. It's great that you're able to reflect on your communication skills and identify some strategies for improvement. Practicing with peers, observing experienced nurses, and seeking feedback are excellent ways to build confidence and become more effective in explaining tasks and procedures. Great job taking initiative and showing dedication. With continued practice, your communication skills will grow stronger with each experience—keep up all your great work! BL

Week 7-8(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 can perform a head-to-toe assessment thoroughly, as well as accurately documenting findings within it that were relevant. I will make sure that I can keep my assessments in the future just as systematically approached by continually practicing completing it on my peers and relearning the aspects of a head-to-toe assessment. Great job with assessment this week, the more you practice and complete assessments the easier it will become. FB

(b) I am having a difficult time refocusing during the time with my patient as I was frequently interrupted, this caused small mistakes like re-checking my documentation multiple times or even forgetting something and having to go back. To prevent this from happening in the future, I will pause after interruptions and remain organized to keep my focus intact. Interruptions can be very distracting and get you off track. Making notes might help you stay on track and not forget pertinent information. You might also try to practice the head to toe assessment on family members to get yourself very familiar with it so you won't forget any portions of it. FB

Week 11:

(a) I can recognize and prioritize my patient's pain while also providing compassionate care. I will continue to strengthen this skill in the future by giving myself more practice on careful observations, active listening, and making sure that I advocate for the comfort of my patients in all clinical experiences. Great job with your assigned patient. You were able to understand what the patient was experiencing and provided great care to the patient. FB

(b) I found myself feeling a little uncertain at times when it came to taking care of a patient with multiple health issues. At times, I would second-guess myself with decision-making and would have to be reassured by instructor before moving forward. To improve from this, I will seek guidance when needed, reflect on my clinical decisions, and take on more responsibility slowly with patients dealing with complex health conditions. Your patient had a lot of issues going on, do not ever be afraid to ask questions. It may assist you to real delve into the patient chart to understand the issues of concern. You can also investigate and research different disease processes and how they interconnect to one another. FB

Week 13:

(a) I can stay calm and focused while performing hands-on skills like foley catheter insertion as I can communicate clearly with my patient. I will continue to strengthen this skill by practicing thorough preparation before each procedure and maintaining a patient-centered approach when it comes to being in all clinical situations.

(b) I am finding struggle with time management while balancing my patient care tasks and preparing for procedures. As I often feel rushed or even unsure on how to prioritize certain steps. To improve on this, I will work on organizing my tasks earlier, using checklists when needed, and practicing more efficient planning during each clinical shift.

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	S	FB	NA
		Survey	S	FB	NA
Date: 11/24/25 or 11/25/25	Simulation #2 (2,3,5,7,8) *	Scenario			
		Survey			

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: A=Assessment Nurse; M=Medication Nurse

STUDENT NAME(S) AND ROLE(S): Kaylee Altomare (A), Keira Keoghan (M)
GROUP #: 2
SCENARIO: NF #1
OBSERVATION DATE/TIME(S): 11/4/2025 1130-1230

CLINICAL JUDGMENT COMPONENTS	OBSERVATION NOTES
NOTICING: (1,2,4,6,7) * • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B	**Focused observation** Obtains blood pressure and asks about pain. Focused observation on the cough and assesses history of cough. Observes soiled tissues in bed. Observes SpO2 is at 88% and educates client on pulse ox. But takes the pulse ox off and leaves client remaining flat. Continues to conduct head to toe assessment. Focused observation on abnormal lung sounds. Eventually focused observation on vital signs. Med nurse recognizes low SpO2 upon arrival and advises to place oxygen. Oxygen is applied. Eventually head of bed is elevated and pulse ox reapplied. Focused observation on SpO2 returning to normal limits. **Recognizing deviations** Noticed low Spo2 (88%) as abnormal. Noticed patient's cough, encouraged deep breaths. Noticed wheezing upon auscultation of lung sounds. Noticed shortness of breath. Did not notice redness to the heels during assessment. Noticed tissues with yellow sputum in the bed. **Information seeking** Confirmed name and date of birth when entering the room. Compared with the wrist band. Sought additional information related to cough and history. Sought information related to patient's pain (0/10). Sought information related to medication administration (verified name and DOB), performed 7 rights of medication administration. Asked if patient took medications with water. Remember to ask about allergies prior to medication administration. Educated on S/E of medications.
INTERPRETING: (1,2,4,6,7) * • Prioritizing Data: E A D B • Making Sense of Data: E A D B	**Prioritizing Data** Prioritized vitals obtained BP and SpO2 only after recognizing low SpO2 result. Did not prioritize focused assessment of respiratory system, continued

	focusing on patient's head to toe assessment. Prioritized researching medications to provide full patient education. **Making sense of Data** Interpreted Spo2 of 88% as below normal. Made sense of shortness of breath and cough related to pneumonia. Made sense of guaifenesin medication PRN order for persistent or non-productive cough Made sense of prescribed oral medications. Made sense of wheezing being related to pneumonia. Eventually raised head of bed after applying oxygen after finishing assessment.
RESPONDING: (1,2,3,4,5,6,7) * • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B	**Calm, confident manner** Confident with simple nursing actions and communication with patient and requires assistance from team member. **Clear communication** Introduced self and role when entering the room. Explained interventions to be performed. Good communication with the patient throughout. Good education on the need for oxygen related to Spo2 level. Educated patient on medication, dosage, and indication. Answered patient's questions appropriately with medication administration **Well-planned intervention/flexibility** Started with vitals, recognized low SpO2 and continued with head-to-toe assessment. Teammate reminded assessment nurse to apply oxygen. Focused assessment performed on patient's cough Encouraged the patient to deep breathe. Applied nasal cannula as ordered by physician to maintain Spo2 >93%. Remember to re-assess Spo2 after oxygen administration. Focused re-assessment performed on the respiratory system. Noticed Spo2 at 94% on 2L. Elevated HOB after completing assessment but recognized the cough and SpO2 of 88%.

	Being skillful Assessed numbness and tingling, or lower extremity strength (push/pull). Assessed neuro assessment. HEENT assessment performed partially. Respiratory assessment performed. Lung sounds auscultated skin to skin (6 locations, anterior only. Cardiovascular assessment missed. Gastrointestinal assessment partially completed, asked about last BM. GU assessment performed. Integumentary assessment partially complete. Musculoskeletal assessment completed. Circulation assessment completed. Elevated bed for proper body mechanics. Good hand hygiene. Used BMV scanner for medication safety.
REFLECTING: (1,2,4,5,6,8) * • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	**Evaluation/Self-Analysis** Everyone participated well in debriefing. Each member of the team reflected on the experience and asked appropriate questions. **Commitment to Improvement** Members of the team noticed areas for improvement and discussed ways to make improvements in the future. The assessment nurse and medication nurse demonstrated collaborative communication between the team members and the patient.
SUMMARY COMMENTS: * = Course Objectives **Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.** **E= Exemplary** **A= Accomplished** **D= Developing** **B= Beginning** **Scenario Objectives:** • Demonstrate collaborative communication with patients and	Lasater Clinical Judgement Rubric Comments: **Noticing** Focused Observation: Attempts to monitor a variety of subjective and objective data but is overwhelmed by the array of data; focuses on the most obvious data, missing some important information Recognizing Deviations: Recognizes most obvious patterns and deviations in data and uses these to continually assess Information Seeking: Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads **Interpreting** Prioritizing Data: Makes an effort to prioritize data and focus on the most

healthcare team members (1,3,8) * • Execute accurate and complete head to toe assessment (1,5,6,8) * • Select and administer prescribed oral medications following the six rights (1,4,5,7) * • Identify and provide accurate patient education (1,2,3,4,5,7) *	important, but also attends to less relevant or useful data Making Sense of Data: In simple, common, or familiar situations, is able to compare the patient's data patterns with those known and to develop or explain intervention plans; has difficulty, however, with even moderately difficult data or situations that are within the expectations of students; inappropriately requires advice or assistance **Responding** Calm, Confident Manner: Is tentative in the leader role; reassures patients and families in routine and relatively simple situations, but becomes stressed and disorganized easily Clear Communication: Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport Well-planned Intervention/Flexibility: Develops interventions on the basis of the most obvious data; monitors progress but is unable to make adjustments as indicated by the patient's response Being Skillful: Displays proficiency in the use of most nursing skills; could improve speed or accuracy **Reflecting** Evaluation/Self-Analysis: Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives Commitment to Improvement: Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses

Student Name: Keira Keoghan

Comments:

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

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:** 8/26/2025	**Date:** 9/5/2025	**Date:** 9/10/2025	**Date:** 9/17,18/ 2025	**Date:** 9/24/2025	**Date:** 10/1/2025	**Date:** 10/6,8/ 2025	**Date:** 10/15/2025	**Date:** 10/22/2025	**Date:** 10/28/2025
Evaluation:	**S**	**S**	**S**	**S**	**S**	**S**	**S**	**S-** 10/6/25 **U-**10/8/25	**S**	**S**	**S**
Faculty Initials	HS	HS	CB	AR	AR	HS	AR	AR	AR	AR	AR
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	10/8/2025 S AR	NA	NA	NA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

***Course Objectives**

- 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 three blood pressure results on the Vital Sim manikin. The first blood pressure measurement was set at 104/68 and you identified it as 100/62. The second measurement was set at 146/74 and you interpreted it as 138/74. The third measurement was set at 130/80 and you interpreted it as 128/78. Great job! You were able to verbally discuss the following measurements: axillary and

- Evance360

rectal temperature along with orthostatic vital sign assessments. You did not require any prompts during completion of your 1:1 observation and provided accurate detail in your communication with the "patient". You did a great job with your first Meditech documentation, being detailed and accurate. Keep up the great work!! CB

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 2 prompts related to assessing accommodation and exact locations of dorsalis pedis/posterior tibial pulses. As a reminder, always check the ID band as the client is telling you their name and date of birth. You demonstrated friendly, professional, and informative communication. You were able to correctly identify the lung sounds as wheezes. Great job! AR
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 pulse rate of 99.
- **Safety**- Documentation complete and accurate.
- **Physical reassessment**- HEENT – omitted trachea description of midline. Gastrointestinal- omitted use of daily bowel movements aids used. AR

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. AR

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! HS

Week 7 (NG Skills: Insertion, Irrigation, and Removal; Feedings):
Excellent 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. You did not require any prompts for the insertion, irrigation, or removal of the NG tube. Excellent patient education provided! 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 excellent work! AR

Week 8 (Foley Skills: Insertion, Removal; Sterile Gloves; I&O, Documentation Lab):
10/8/2025: Overall you did a great job in the lab this week. During your initial 1:1 checkoff you were satisfactory with the following skills: Sterile Glove Application and Foley Catheter Removal. You did not require any prompts with these skills. You were able to remind yourself to pull the syringe plunger back to 0.5 mL prior to attaching to the balloon port. During your initial 1:1 checkoff for Foley Catheter Insertion on a female, there were two incidents that led to contamination of the catheter and sterile urine sample which ended with an unsatisfactory evaluation. You did not recognize these as an issue until discussion following the insertion. When you cleansed the labial area with betadine swabs, you did not place your non-dominant hand in place on the patient, therefore this allowed the labia to close after each swipe; this led to contamination of the labial environment and therefore the catheter upon insertion. When you obtained the urine sample, you touched the rim of the lid and also laid it upside down, both leading to contamination of the lid and therefore the specimen. 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. AR
10/8/2025: Foley Catheter Insertion (female) remediation #1. Upon remediation related to the above issues, you satisfactorily verbalized and demonstrated the correct process for cleansing the labia with betadine swabs and handling of the sterile urine specimen container. Great job! AR

10/6/2025: 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):
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 the Damp to Dry Packed Wound Dressing Change, you did require two prompts: remember to always open the package of cotton tipped applicators prior to putting on sterile gloves; when opening the sterile glove package, you contaminated the ABD. As a reminder, when handling the 4X4's, touch the outer edges only. In addition, you did remind yourself to obtain the wound culture if ordered, and demonstrated/verbalized how to accomplish this. Your communication with the patient was excellent. 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. Great job this week! 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: _____