

**.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 as “S, NI, U, or NA”. If the student does not self-rate, then it is an automatic “U”. A student who submits the clinical evaluation tool late will be rated as “U” in the appropriate competency(s) for that clinical week. Whenever a student receives a “U” in a competency, it must be addressed with a comment as to why it is no longer a “U” the following week. If the student does not state why the “U” is corrected, it will be another “U” until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. **An unsatisfactory or needs improvement as a final evaluation in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. Patterns of performance over the course of the semester will be utilized to determine the final competency evaluations. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.**

METHODS OF EVALUATION:

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

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
Faculty/Teaching Assistant’s Name			Initials
Chandra Barnes			CB
Frances Brennan			FB
Amy Rockwell			AR
Nicholas Simonovich			NS
Heather Schwerer			HS

Brittany Lombardi	BL
Stacia Atkins	SA

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

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

UNSATISFACTORY CLINICAL PERFORMANCE

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

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

OTHER

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

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

Objective																
1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Identify spiritual needs of patient (Noticing).										S	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							SA	CB	CB	SA	SA	SA	SA			
Clinical Location; Patient age**							3T, 83 y/o	NA	NA	3T, 64 y/o	NA	3T, 49 y/o	NA	3T, 67 y/o		

* End-of-Program Student Learning Outcomes

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

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

Comments:

Week 7(1c,d): Great job showing respect for your patient's needs, being compassionate and kind while delivering care. You also demonstrated the appropriate use of Maslow's hierarchy of needs during the head to toe assessment performed on your patient during this clinical experience, being able to recognize physiological needs of your patient when performing head to toe assessment. SA

Week 9 (1c,d)- You did a great job coordinating your care effectively during your experience with a patient as a student nurse. You addressed your patient's needs and ensured accurate data was obtained in your vital sign and head-toe-assessment. You used Maslow's to prioritize your care and addressed their physiological needs through assessment. SA

Week 11 (1c,d)- You did a nice job this week providing a full head to toe assessment on your client. You also did a nice job recognizing your client's needs and providing that while he was in the hospital while respecting his values as well. Great job! SA

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).										NA	NA	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							SA	CB	CB	SA	SA	SA	SA			

* End-of-Program Student Learning Outcomes

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

Comments:

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

Week 9(a-d) You did a nice job this week completing your vital signs, head to toe assessment, fall/safety, and skin assessment. You were able to auscultate heart and lung sounds. You were also able to assess your client's pain from their fracture. SA

Week 11 (2a,c)- Great job with your client assessments during this clinical rotation. You provided very thorough and structured assessments each time. You were able to identify the appropriate focused assessment based on information gathered during the initial assessment. Great job identifying the AM-PAC score for your assigned client and ensuring all precautions were in place. You did a nice job accessing all lab values and testing to identify their relevance to your client's status. Remember to keep an eye on your abnormal vital signs and ensure those results are accurate with assessing and appropriate tools used before documenting an abnormal such as your client's blood pressure result. SA

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:							S	NA	S	S	NA	S	NA	S		
a. Receive report at beginning of shift from assigned nurse (Noticing).										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).							S	NA	S	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		
							SA	CB	CB	SA	SA	SA	SA			

Faculty/TA Initials

* End-of-Program Student Learning Outcomes

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

Comments:

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

Week 9 (a-f) You did a nice job receiving report from the previous shift and updating the nurse at the end of your shift. You did a good job communicating with other members of the healthcare team as well as your client. You keep the nurse informed regarding the updates of your client. SA

Week 11 (3a-f) You were able to get a report from the night and day shift nurse and updated the primary nurse prior to leaving at the end of the shift. You did a nice job communicating with your client and the other members of the healthcare team during the shift. You discovered the client was not weighed and was falsely documented and reported it appropriate to the primary nurse and obtained and documented a weight. You were also comfortable with staying in communication with the client and his wife on the matter and remained calm and professional. Nice job! SA

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:									S							
a. Document vital signs and head to toe assessment according to policy (Responding).							S	NA	S	NA	S	NA	S			
b. Document the patient response to nursing care provided (Responding).							S	NA	S	NA	S	NA	S			
c. Access medical information of assigned patient in Electronic Medical Record (Responding).*		S					S	NA	S	NA	S	NA	S			
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).*		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 NI	NA	S	NA	S	NA	S			
*Week 2 –Meditech Orientation		NS					SA	CB	CB	SA	SA	SA	SA			
Faculty/TA Initials																

* End-of-Program Student Learning Outcomes

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

Comments:

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

Week 7(4a,b,c,f): Satisfactory job with documentation of the head to toe assessment and vital signs of your patient. Make sure to note any areas you may have forgot to assess, so that assessments and documentation are thorough and accurate. You did a good job utilizing Meditech for documentation and to look up patient information. You completed your first cdg, meeting most requirements per the grading rubric. I changed 4f to "NI" as your reference is not correct in APA format. Be sure to refer to the resource in Edvance on appropriate referencing as well as the proper in-text citation if or when requiring a page number. SA

Week 9(4a,b,c) You did a good just this week documenting all of the care and interventions you provided to your patient within the EMR. Nice job on your initial CDG post and the peer response you met all of the rubric requirements and provided a thorough response to your peer. SA

Week 11 (4a,b,c)- You did a nice job documenting the care that you provided to your patient. You were also able to retrieve the necessary information from the chart regarding the client's history and other pertinent information. Nice catch on the client's mis-documented weight and helping with the situation. Your initial CDG post and peer response this week was well done, you met all of the rubric requirements including the intext citation and reference. SA

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).										NA	NA	NA	NA	NA		
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							SA	CB	CB	SA	SA	SA	SA			

* 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 extinguishers are at the end of the hallways near the stairs. Pull stations are also a little bit up the hallway. Thank you! SA

Week 7(5a,b): Great job utilizing correct body mechanics and raising the bed while performing an assessment. You did a great job ensuring that you foamed in/out when entering/exiting patients' rooms. SA

Week 9(5d,e)- You did a nice job going right in the patients room and getting your assessment completed. You did all of these tasks and maintained safety and encouraged independence from the patient. SA

Week 11 (5c)- You did an excellent job on demonstrating great management of care for your assigned client making sure all pertinent interventions were completed. You organized your time appropriately to provide safe, efficient care to ensure positive patient outcomes. Your client was independent and did not require much help from you but you were able to remain in the room and build a rapport while learning about his condition. SA

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									CB	SA	SA	SA	SA			

* End-of-Program Student Learning Outcomes

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

Comments:

Week 9 (6a)- You did a nice job utilizing clinical judgement skills based on your patient’s priority problem and then identifying interventions specific to the patient and developing the plan of care. SA

Week 11 (6a)- Excellent job utilizing your clinical judgment skills to care for your independent client this week. You assured the plan of care fit your client’s needs and preferences. SA

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, intramuscular, 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									CB			SA	SA			

* 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							SA	CB	CB	SA	SA	SA	SA			

* 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: I had some difficulty finding the different pulses like posterior tibial, dorsalis pedis, and brachial. I will practice more by finding them on different members of my family until I can do it like the back of my hand. I feel like my strongest point was being comfortable talking to the patient. Great plan for next

clinical. Remember if you are having trouble to reach out to one of us to help assist you or retrieve a doppler if needed. We always want to make sure we can feel/hear them as this could warrant a bigger issue at hand that may not have been there before!

Week 7(8d,f,h): Excellent job following the student code of conduct, exhibiting professionalism while in the clinical setting, and ensuring that patient privacy was respected. SA

Week 9 Comment: I feel like communication again was my strongest factor when it came to helping the patient. I was able to relate to the patient and get them to accept me. I noticed that some of the other services like respiratory the patient was getting annoyed at but he never seemed to get annoyed with me. **Your communication and rapport you developed was great! Nice job! SA**

I feel like my weakest point is relying too much on the chart to guide me on what to do / using it as a crutch at times. **Time management will get better with repetition. Remember you can begin your assessment as soon as you start taking their vitals by assessing their skin, asking questions to assess their cognition etc. You did a thorough assessment so nice job! SA**

Week 11 Comment: I feel again my communication and transparency to the patient is my strongest point and it makes the patient not annoyed by my constant presence in the room and sometimes invasive things that I have to do while they might be trying to relax. **I agree you did a great job by remaining in the room to do your job appropriately. It can be awkward especially when they were as independent as your client was. But your communication with him allowed him to understand what your role was and this developed a rapport of transparency and trust, something your client had been hesitant about. Nice job! SA**

I think my weak point this clinical was managing the strict I/O and making sure I was on top of measuring all of their fluid intake. Measuring the output was not as bad though. **That can be hard to manage but that is why we have the intervention list to follow on the EMR to remind us what duties are due. SA**

WEEK 13 COMMENT: I feel my medication administration was good and I feel like I was also good at recognizing need for high fall risk precautions even though the patient on a surface level looked fine. **They were on multiple antihypertensives which could have made them dizzy and made them fall and crack their skull open when ambulating say to the bathroom. My weak point was my knowledge on fistulas. I only know that they are for dialysis patients and not to take a blood pressure on the same arm as a fistula but not much else.**

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: <ul style="list-style-type: none"> Continue plan of care Modify plan of care Terminate plan of care 	Complete			Not complete		

Reference

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

Total Possible Points= 45 points
45-35 points = Satisfactory
34-23 points = Needs Improvement*
< 23 points = Unsatisfactory*
***Total points adding up to less than or equal to 34 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.**

*****Students that are not satisfactory after 2 attempts will be required to meet with course faculty for remediation. *****

Faculty/Teaching Assistant Comments:

Total Points:

Faculty/Teaching Assistant Initials:

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

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

* Course Objectives

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

Student Name: Michael Ingram

EVALUATION OF CLINICAL PERFORMANCE TOOL

Comments:

Skills Lab Competency Evaluation	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: 9/17/2025 9/18/2025	Date: 9/24/2025	Date: 10/1/2025	Date: 10/8/2025 10/6/2025	Date: 10/15/2025	Date: 10/22/2025	Date: 10/28/2025
Performance Codes: S: Satisfactory U: Unsatisfactory											
Evaluation:	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	HS	HS	BL	AR	HS	HS	HS	HS	AR	AR	AR
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

*Course Objectives

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):

Great job in lab this week! You successfully completed the vital signs check-off during 1:1 observation, including oral temperature, radial pulse, respiratory rate, pulse oximetry, and blood pressure measurement. During the blood pressure assessment, you accurately obtained two consecutive readings on the Vital Sim manikin. The first measurement was set at 100/60, and you recorded it as 96/60—within the acceptable range for accuracy. The second measurement was set at 136/70, and you interpreted it as 138/70, also well within the desired range.

In addition, you demonstrated strong knowledge by verbally discussing axillary and rectal temperature measurement, as well as orthostatic vital sign assessment. You required no prompting throughout the check-off and communicated clearly and appropriately with the “patient.” Your documentation was thorough and 100% accurate for the vital signs. Excellent work—keep it up! BL

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): Excellent job in lab this week! You have satisfactorily performed a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall very well done. You paid close attention to detail and were clearly well-prepared. You did not require any prompts throughout your assessment, nice work! You demonstrated professional and informative communication. Job well done! HS

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-** no need to document oxygen humidified when no oxygen is in use.
- **Safety-** omitted high fall risk comment of education completed.
- **Physical reassessment-** HEENT – documented visual impairment of no limitations instead of partially limited; omitted documentation for trachea description of midline. Respiratory- documented right posterior lower lobe lung sounds as diminished, wheezes, rhonchi instead of diminished; documented bilateral anterior/posterior throughout lung sounds as inspiratory and expiratory instead of expiratory.

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. HS

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): 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. You did require one prompt during insertion, be sure to hold onto the NG tube at the naris with your non-dominant hand, and check the position of the tube in the back of the throat with a penlight. You did not require any prompts for the irrigation or the removal of the NG tube. 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. You did not require any prompts throughout the procedure, nice work! You were able to remind yourself to assess for allergies to iodine or latex prior to removal. 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! NS
Documentation Lab – You have satisfactorily completed the documentation lab by actively participating in Meditech documentation related to vital signs, physical reassessment, 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 a prompt due to writing directly on the tape over the dressing which could have caused the patient pain and harm. You initiated/maintained the sterile field and followed aseptic technique throughout, and did an excellent job putting on your sterile gloves even though they were stuck to the package and each other! 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

**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: _____