

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2025**

**Firelands Regional Medical Center School of Nursing
Sandusky, Ohio**

Student: Seth Linder

Final Grade: Satisfactory

Semester: Fall

Date of Completion: 11/24/25

Faculty: Kelly Ammanniti, MSN, RN, CHSE; Monica Dunbar DNP, RN;
Rachel Haynes MSN, RN, Brian Seitz, MSN, RN, CNE

Faculty eSignature: Kelly Ammanniti MSN, RN, CHSE

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:

- Care Maps
- Patient/Family Education
- Preparedness for Clinical/Clinical Performance
- Online Clinical Discussion Groups
- Administration of Medications
- Nursing Skills Completion of Clinical Performance Tool
- Written Reports of Clinical Experiences
- Documentation
- Conferences with the Faculty
- Lasater Clinical Judgment Rubric
- vSim
- Simulation Scenarios

Absence: (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)
10/31/25	1	Late Survey	10/31/25 KA

Faculty’s Name	Initials
Kelly Ammanniti	KA
Monica Dunbar	MD
Rachel Haynes	RH
Brian Seitz	BS

7/11/25 KA

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 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, 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.

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials	Remediation & Instructor Initials
8/29/25	Acute Pain	S KA	NA	NA

Objective																		
1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
Competencies:		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	S	N/A	N/A	N/A		NA	S
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	S	N/A	N/A	N/A		NA	S
b. Provide care using developmentally appropriate communication.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	S	N/A	N/A	N/A		NA	S
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	N/A	N/A	N/A	N/A		NA	S
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	N/A	N/A	N/A	N/A		NA	S
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S
Clinical Location Age of patient		Fischer Titus OB 30	N/A	N/A	Boys & Girls Club	Fischer Titus ER 25	Firelands OB 38	NA	St. Mary's	N/A	Flu Clinical	H&V	N/A	N/A	N/A		NA	NA
	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA

**Evaluate these competencies for the offsite clinicals: ER: All, H&V: 1A, B, E BG Club: 1B, E Flu: All

Comments:

Week 2 (1e)- Middle adulthood, generativity vs. stagnation, because the patient is nurturing and creating the next generation by giving birth to her child. Nice job! KA FTMC OB Objective 1 A, B, C, D: This week in OB you had the opportunity to work with postpartum mother and newborns. You did an awesome job with providing appropriate care and communication for the developmental stage of the patients, and provided systematic and developmentally appropriate assessment techniques. We

***End-of-Program Student Learning Outcomes**

discussed some of the safety measures of each of the patients as well such as fall risk with the patient with the spinal headache and circumcision safety with a newborn. Great job! MD

Week 5 (1e)- Industry vs. Inferiority - Children build confidence by learning and practicing new skills, so fire safety education supports their sense of competence and accomplishment. Nice job correctly identifying the school-age population at BG club. KA

Week 5: 1b- You did a great job interacting with the children at the Boys and Girls Club while using developmentally appropriate communication. This can be a chaotic and challenging environment, but your group did well and kept the kids engaged. BS

Week 6 (1e)- Intimacy vs. Isolation - At this stage the focus is on forming close and meaningful relationships, and her health concerns may affect her ability to feel supported and connected. Nice job identifying the Erikson's stage for your patient in the ER. KA

Week 6 - 1a - You did a nice job discussing a patient you cared for with severe abdominal pain this week while on clinical in the ER department. KA

Week 7 (1e)- Trust vs. Mistrust – The newborn is in this stage of Eriksons growth and development because this is when care, feeding, and comfort from the mother help the baby develop a sense of security. If the baby's needs are not met, the baby may develop mistrust toward their caregivers. Nice job! KA

Week 7: 1(a-d)- This week you were able to provide care and communicate with your patients using developmentally appropriate techniques. You were able to care for and communicate with a postpartum mom. We discussed safety of the patients in regards to checking bands with mom/baby upon returning the newborn to the room. RH

Week 7 – 1a, d – You did a nice job discussing your patient this week in your CDG. You were able to identify your patient as being a gravida 4 para 4 and the baby's APGAR scores as 8/9. You discussed safety concerns in the OB setting including postpartum hemorrhage and how it can be sudden onset and needs to be identified and addressed promptly. KA

Week 8 (1e)- For fifth graders they are in the stage of industry vs. inferiority. This is where they develop confidence in a sense of competence through learning, completing tasks, and receiving encouragement from others. Good job! KA

Week 8 Objective 1B: In your group, you developed and communicated with the different ages of students utilizing your knowledge of growth and development along with responding appropriately to their questions. KA/MD/RH/BS

Week 10 (1e)- Generativity vs. Stagnation: Most of the hospital employees we gave flu shots to were adults in middle adulthood. In this stage they focus on contributing to society and caring for others. By the hospital employees getting the flu shot, they are demonstrating generativity by protecting the health of their patients, coworkers, and community. Good job! KA

Week 10- 1a,b- You did a great job communicating with the patients at the flu vaccine clinic. Your conversation helped to keep the clients calm throughout the process and you worked in an efficient manner to keep the line moving. Nice work! BS

Week 11 (1e)- Industry vs. Inferiority: First graders are in this stage, where they develop confidence and a sense of competence through learning and accomplishing tasks at school. Nice job! KA

H&V Objective 1a, b, & c – You did a great job utilizing the techniques you learned through your training to complete hearing and vision screenings on the high school students this week. You provided instruction, asked appropriate questions, and communicated with the students utilizing your knowledge of growth and development. MD

Objective																		
1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
Competencies:																		
f. Describe psychological changes in response to the expectant mother's pregnancy. Maternal		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
g. Discuss prenatal influences on the pregnancy. Maternal		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
h. Identify the stage and progression of a woman in labor. Maternal		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
i. Discuss family bonding and phases of the puerperium. Maternal		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
j. Identify various resources available for children and the childbearing family.		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	S	N/A	N/A	N/A		NA	S
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S
l. Respect the centrality of the patient/family as core members of the health team.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	N/A	N/A	N/A	N/A		NA	S
	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA

**Evaluate these competencies for the offsite clinicals: ER: 1K, L H&V: 1J, K BG Club: 1K Flu: 1 K, L

Comments:

FTMC OB Objective 1 J, K, L: During our day in OB, you were able to identify resources available for a postpartum mother that we provided mother/newborn education to including healthcare providers and discussed utilizing support systems. You were also able to receive a different perspective on gestational carriers by learning about the process with the unit secretary and asking questions to the parents of a newborn from a gestational carrier who were from London. We provided a newborn bathing demo for these parents and we were able to use their products that they brought with them for the bath along with learning about their culture and some of the differences of London versus the US. Awesome job! MD

Week 5: 1k- While interacting with the children at the Boys and Girls Club you did a great job acknowledging their perspectives, diversity, ages, and cultural factors, which all influence their behavior. BS

***End-of-Program Student Learning Outcomes**

Week 6 – 1k – You identified cultural implications that you observed while you were in the ER on clinical as reproductive health discussions and discussed your observations in your CDG response. KA

Week 7: 1(f-i) We discussed the changes in a woman’s body during pregnancy as well as looked at some charting from the OB/GYN office to discuss prenatal care during clinical. The nurses on the unit were able to point out which stages of labor the laboring patient was in. We also discussed the benefits of skin to skin and bonding with the mother. RH

Week 7: 1(j, k, l)- We were able to identify various resources that are provided to the family at the entrance of the unit at the ward clerk desk. It was also pointed out that all these resources are given to mothers upon discharge. You were able to provide care while also valuing the patient’s values and beliefs. We discussed circumcisions and the choice both mothers made to circumcise their children while in the hospital. RH

Week 7 – 1i – You described the mother being in the taking in phase of postpartum adjustment in your CDG and supported this with behaviors you observed. You also described bonding that occurred in the family unit during the postpartum period. KA

Week 8 Objective 1K: You provided opportunities for students to share their personal experiences related to your presentation topic. KA/MD/RH/BS

H&V Objective 1j, k – You did a great job collaborating with the school nurse and your fellow students to ensure each student was screened in a timely manner and keep the flow going. It was apparent also that the staff at the school were committed to serving the needs of the students. MD

Objective																		
2. Integrate principles of decision-making in utilizing evidenced-based practice in the nursing process in providing care for the childbearing family and children encompassing cultural sensitivity and diversity. (1,2,3,4,5)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Engage in discussions of evidenced-based nursing practice.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
b. Perform nursing measures safely using Standard precautions.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	S	N/A	N/A	N/A		NA	S
c. Perform nursing care in an organized manner recognizing the need for assistance.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	S	N/A	N/A	N/A		NA	S
d. Practice/observe safe medication administration.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	N/A	N/A	N/A	N/A		NA	S
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
f. Utilize information obtained from patients/families as a basis for decision-making.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	N/A	N/A	N/A	N/A		NA	S
g. Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.** (Noticing, Interpreting, Responding, Reflecting) (List Below)*		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S
	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA

**Evaluate these competencies for the offsite clinicals: ER: All H&V: 2B, C, G BG Club: 2G Flu: 2B, C, D, F, G

Comments:

Week 2 (2g)- Social Determinants of Health that could have potential to influence patient care would be economic stability because taking care of a baby can be very expensive when it comes to needs such as diapers, formula, or childcare. Another SDOH could be social and community context with cultural expectations around childbirth and motherhood such as role pressure. **Great thoughts. What are your thoughts about family support? KA**

***End-of-Program Student Learning Outcomes**

FTMC OB Objective 2 A, B, C, D, E, F: Awesome job this week with providing safe medication practices! You were able to identify the rights of medication administration along with providing and demonstrating the safety checks with administration including dosage. You were able to discuss the medications and why the patient was receiving them. You were also able to describe how to administer an IM injection and proficiently complete the administration without difficulty and minimal assistance. We also had conversation on evidenced-based practices, perform standard precautions, organize care and recognized when assistance was needed, and utilize information for decision making. Great job! MD

Week 5 (2g)- While teaching fire safety at the boys and Girls Club, I noticed that factors such as low-income housing, limited resources, and cultural or language barriers could impact how children apply safety education at home. This showed me the importance of using simple language, visuals, and hands on activities to make information accessible for all learners. Nice job! These factors can also influence the education you provide of certain topics related to their availability and access to different resources. KA

Week 6 (2g)- The patients care was influenced by health literacy and cultural sensitivity. The nurse responded by using clear explanations and encouraging questions, which helped the patient understand her diagnosis and discharge instructions. Nice job looking at the SDOH of health literacy. I think this is one that is often over looked for more obvious factors such as lack of support and financial instability. KA

Week 6 – 2b, c – You had the opportunity to work with Amber Farrell RN in the ER and she reported you were excellent with demonstrating your knowledge of your nursing skills and responsibilities while on clinical and had multiple opportunities to perform different nursing skills in the ER. KA

Week 6 – 2d – You had the opportunity to administer PO medications to the patient you worked with in the ER this week. KA

Week 7 (2g)- There are factors such as access to postpartum care, availability of social support, and cultural beliefs that could potentially influence the mothers ability to recover and follow medical recommendations. These can also influence how the mother is able to bond with the baby. As a nurse if you can recognize these, you will be able to provide culturally appropriate and individualized care. Nice thoughts. These are definitely concerns to recognize and address in this population. KA

Week 7: 2(a-f)- We were able to identify some evidence-based nursing practice taking place on the unit in regards to the blood transfusion on the unit. We discussed that mother and one other person get the same band as baby and how this is a safety measure in place to ensure the right baby is given to the right parents. You were able to perform a postpartum assessment with minimal assistance and you did great. You were able to administer PO medications and an IM injection on the mother and an IM injection on the newborn. You calculated the proper drug dosages related to these medications prior to administration. RH

Week 8 (2g)- Social determinants of health that may influence care for K-5 children include family income, access to healthcare, nutrition, safe housing, parental education, and cultural beliefs about health and illness. Great job identifying concerns to evaluate the school child for when working with them. KA

Week 10 (2g)- Social determinants of health that may influence the people at the hospital could be health literacy about vaccines. This could affect their willingness and understanding to participate in preventative health measures, impacting patient safety and quality of care. I agree. What people hear about vaccines true or not can strongly impact their decision to be vaccinated themselves. KA

Week 10- 2d- You did a great job safely administering flu vaccines at the flu vaccine clinic. BS

Week 11 (2g)- Social determinants of health like income, access to healthcare, and parent education can influence how these first grade students follow up with their hearing and vision health needs. Yes these are all factors related to hearing and vision. This is why the ODH requires hearing and vision screenings in the school system and have several free state programs helping families have access to exams by HCPs and free eyeglasses. KA

***End-of-Program Student Learning Outcomes**

H&V Objective 2b, c – You were organized throughout the screening and assisted others quickly and efficiently when needed. You did a great job working with your fellow students to ensure each student was screened appropriately and answering any questions they had. Nice work! MD

Objective																		
3. Summarize the legal, moral and ethical issues related to care of children and the childbearing family. (2,6,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Act with integrity, consistency, and respect for differing views.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S
d. Critique examples of legal or ethical issues observed in the clinical setting. (List Below)*		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S
	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA

**Evaluate these competencies for the offsite clinicals: ER: All H&V: All BG Club: All Flu: All

Comments:

Week 2 (3d)- An example of an ethical issue is with the patient that had the surrogate child. Some people argue that surrogacy can exploit women, and especially those in financial hardship, if they feel pressured to be surrogates for the money. **Great ethical concern. You can also think about it from a legal perspective and what if the surrogate decides they want to keep the baby, especially if her egg was used for conception. KA**
 FTMC OB Objective 3 A, B, C: Great job with acting with integrity and respecting different views on care of the patients we had this week in clinical! You were also able to respect health and medical information and followed the Student Code of Conduct policy! MD

Week 5 (3d)- I recognized the ethical responsibility to remain within my role as a student nurse and not provide instruction beyond fire safety education.

Week 5: 3a,c- At the Boys and Girls Club, you acted with integrity, consistency, and respect for differing views and perspectives.

Week 6 (3d)- Confidentiality can be a concern in an ER because conversations can easily be overheard. Nurses work hard to protect patient privacy. Another ethical issue was making sure there was informed consent for the CT scan and explaining the CT results and discharge plan clearly to the patient. **I can imagine the difficulty of keeping patient privacy in such a busy environment. KA**

Week 6 - 3a, b, c - You were professional and considerate with all the care you provided. You made sure to keep patient privacy and follow HIPPA regulations throughout the day. You also maintained all the standards in the FRMCSN code of conduct while in the ER. KA

***End-of-Program Student Learning Outcomes**

Week 7 (3d)- A legal/ethical issue observed in this clinical setting was the requirement for one of the fathers to have an affidavit to be listed on the newborns birth certificate. This shows the importance of following legal documentation procedures while also addressing the family's needs. Great identification. This is important so that the mother cannot just list someone as the father without their knowledge when the couple is not married. KA

Week 7: 3(a-c)- You did a great job acting with integrity and respecting differing views, maintaining HIPAA, and following the Student Code of Conduct. RH

Week 8 (3d)- An example of a legal or ethical issue in a K-5 school setting could be a breach of student confidentiality, such as a teacher discussing A child's personal or medical information with others who are not authorized to know. HIPPA related to medical information can be a concern for the teacher/school nurse in the school setting. KA

Week 8 Objective 3A-C: You were professional and considerate with all students and staff you came in contact with. You made sure to keep student privacy throughout the day. You also maintained all of the standards in the FRMCSN Code of Conduct while at the school. KA/MD/RH/BS

Week 10 (3d)- An ethical issue with the flu vaccinations could be ensuring the employees autonomy is respected while also making sure to have patient safety. Mandatory flu shot policies can create tension between personal beliefs and professional responsibility. Great thoughts. Sometimes people may feel pressured to become vaccinated because of the policy and the alternatives to getting an exception such as a potential for mandatory mask wearing if unvaccinated during flu season. KA

Week 11 (3d)- An ethical issue during the hearing and vision screening was providing equal attention and care to all students during their hearing and vision screenings regardless of their behavior and ability to follow directions. This is part of the ANA Code of Ethics. Nice job! KA

H&V Objective 3a, b, c – You were professional and considerate with all the screenings you provided. You made sure to keep student privacy and follow HIPPA regulations throughout the day. You also maintained all the standards in the FRMCSN code of conduct while at the school. MD

Objective																			
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																			
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final	
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28			
a. Develop and implement a priority care map and/or plan of care utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)		S	N/A	N/A	N/A	S	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S	
b. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	S	S	N/A	N/A	N/A		NA	S	
c. Summarize witnessed examples of patient/family advocacy.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S	
d. Provide patient centered and developmentally appropriate teaching.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S	
e. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S	
	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA

**Evaluate these competencies for the offsite clinicals: ER: 4A, C, E H&V: 4B, D BG Club: 4D Flu: 4B, D

Comments:

Week 2 (4d)- I provided one of the mothers on the unit with postpartum education over things such as how to feed the baby, how to bathe the baby, etc. The information was provided from a handout that was made for the nurses to use while educating the patients on the floor. Nice job! This is very important education for the postpartum mother and family. KA

FTMC OB Objective 4 C, E: Great job analyzing pathophysiology of your patient's disease process! You also did a great job witnessing examples of patient advocacy when we were providing the bath demonstration to the newborn with the parents from London! You also were able to witness advocacy with your postpartum mother who requested a blood patch for her spinal headache! MD

Week 2 – 4a – You did a great job satisfactorily completing your care map this week on the mother you cared for in postpartum. KA

***End-of-Program Student Learning Outcomes**

Week 5 (4d)- I provided education, to the kids at the Boys and Girls Club, on fire safety. We discussed topics such as how to use a fire extinguisher, stop drop and roll, and escape plans. Nice job! Did the students practice stop drop and roll? I bet they enjoyed that if they did. KA

Week 5: 4d- As you no doubt noticed at the Boys and Girls Club, when providing teaching to kids of various ages, we must continually adjust our approach based on their developmental level. BS

Week 6 (4d)- The nurse taught the patient about appendagitis and ovarian cysts using clear, simple language and explained how NSAIDs would help with pain and inflammation. She encouraged questions and reviewed the return precautions, supporting the patients autonomy. Great job explaining observed education. Was appendagitis new information to you or had you previously learned about this topic? KA

Week 6 – 4a, c – You did a great job identifying the top nursing interventions for your patient this week. You discussed how they responded to intervention and if it was effective or not. You were able to describe a situation of patient advocacy in the ER setting that you witnessed this week while on clinical related to the nurse advocating the patient completely understood the healthcare providers diagnosis and findings. KA

Week 7 (4d)- The nurse gave the patient education on postpartum self-care such as peri care, rest, nutrition, and how to manage pain at home. She also taught the mother about newborn things like safe sleep practices and when to call the health care provider. Great observation of the education provided to the postpartum mother. KA

Week 7: 4(b, c)- You were able to document your postpartum assessment and your newborn assessment that you completed during clinical. You also documented the 24 hour testing that we completed on the newborn. You were able to witness the mother and father of the baby request that the baby stays in the room with them as often as possible rather than having them in the nursery all day. RH

Week 8 (4d)- This Week at Saint Mary's School we taught grades K-5 on proper hygiene. We taught the class proper hygiene and quiz them with questions as well as doing a hand washing activity. We used fake germs and put them on the kids hands, then had them washed their hands the way we taught them to see if it was effective. Great job providing education to the students at St. Mary's. KA

Week 10 (4d)- Provide education that explains the purpose of the flu vaccine, how it reduces transmission in the hospital , possible side effects, and when to seek follow up care, while encouraging questions and respecting personal health beliefs. Nice job providing education during the flu clinic. KA

Week 10- 4b- You did a great job documenting the flu (and COVID) vaccines you administered at the flu clinic. BS

Week 11 (4d)- Using simple language and visuals to explain the purpose of the hearing and vision screenings and encouraging them to participate to see if they have trouble hearing or seeing in class. Also making the hearing and vision screening a fun experience by using fun glasses that make them less nervous. Greatjob providing education during hearing and vision screenings to the first graders. KA

H&V Objective 4b, d – You worked with the nurse to gather information on the hearing and vision screenings utilizing the provided papers for documentation. You then helped alphabetize and document the information further on the required ODH documentation forms. This was a terrific help to the school nurse. You did a nice job educating the elementary students as needed on the screening process and ensuring they were able to perform it correctly so the results would be valid. You were kind, caring, and professional with your interactions with the students. Keep up the nice work. MD

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
f. Correlate the diagnostic tests with the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	S	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
g. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	S	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
h. Correlate the medical treatment in relation to the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	S	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
i. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
j. Correlate the patient's growth and developmental level in relation to the patient's disease process. (noticing, interpreting, responding)		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA

**Evaluate these competencies for the offsite clinicals: ER: 4F, G, H H&V: N/A BG Club: N/A Flu: N/A

Comments:

FTMC OB Objective 4 F, G, H, I, J: During our clinical day we were able to obtain this objective with a newborn who was receiving sepsis work up due to a traumatic delivery and symptoms they were experiencing. We were able to correlate blood glucose and temperature challenges the newborn was experiencing to a possible diagnosis along with the medications being administered. You also did a great job putting pieces together with circumcision care and a patient with a spinal headache. Awesome job! MD

Week 6 – 4f, g, h – You did a nice job discussing the diagnostics, medical treatments, and medications that were performed on the patient you discussed in your CDG and how they related to their diagnosis. KA

***End-of-Program Student Learning Outcomes**

Week 7: 4(f-j)- Throughout the clinical day you were able to gather assessment findings that correlated with their diagnostic testing, pharmacotherapy, medical treatment, and their growth/development level. You were able to identify that the mother had pregnancy induced hypertension and when checking her morning vital signs you noticed her blood pressure was elevated. You asked if there was anything we could do for her to which she replied she really wanted to go home to her other kids. You were able to advocate for her to the nursing staff and healthcare provider in order for her to go home and relax rather than stress more in the hospital. RH

Objective																		
5. Collaborating professionally with members of the health care team, childbearing and child-rearing families, faculty, and peers through written, verbal and nonverbal methods, and by conferencing, networking, and posting through computer technology. (1,3,5,6,7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Demonstrate interest and enthusiasm in clinical activities.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S
b. Evaluate own participation in clinical activities.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S
c. Communicate professionally and collaboratively with members of the healthcare team.		S	N/A	N/A	N/A	S	S	S	N/A	N/A	S	S	N/A	N/A	N/A		NA	S
d. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding)		S	N/A	N/A	N/A	N/A	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)		S	N/A	N/A	N/A	S	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
g. Consistently and appropriately post comments in clinical discussion groups.		S NA	N/A	N/A	N/A	S U	S	S	N/A	N/A	N/A	N/A	N/A	N/A	N/A		NA	S
	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA

**Evaluate these competencies for the offsite clinicals: ER: 5A, B, C, F, G H&V: 5A, B, C BG Club: 5A, B Flu: 5A, B, C

Comments:

FTMC OB Objective 5 A, B, C, F: During this clinical experience you were able to evaluate your participation in activities and communicate professionally with the care you provided your patients with the nursing staff. You demonstrating awesome enthusiasm in clinical with excitement with watching a newborn circumcision, various nursing assessments including 24-hour newborn testing, and bathing demonstration. The anesthesiologist stated he was excited about your enthusiasm during the spinal blood patch placement and was happy to assist with your learning! Amazing job this week! MD

Week 2 – 5g – You completed your care map this week versus submitting your OB CDG questions therefore this competency is NA. KA

***End-of-Program Student Learning Outcomes**

Week 5: 5a,b- You showed interest and enthusiasm as you presented your material to the children at the Boys and Girls Club. Nice work! BS

Week 6 – 5a – You had the opportunity to see how to use a butterfly needle during a lab draw and its implications while on clinical in the ER. You worked with Amber Farrell RN in the ER and she marked you as excellent in all areas. She made the comment, “Student was very eager to learn new things and help out.” KA

Week 6 – 5f – You did a nice job writing a concise SBAR report related to your patient this week in the ER. The only addition would maybe include a full abdominal assessment in your assessment section. Nice job! KA

Week 6 – 5g – You thoughtfully responded to all required CDG questions related to your ER experience. You did not include an in-text citation or a reference to support your ideas. Remember you need to include both of these in your posts to receive a satisfactory. Please make sure to write how you will address receiving a U in this competency and prevent receiving this rating for this competency in the future. KA

Week 6 (5g) U - I received a U because I did not include an in-text citation or reference in my CDG. To prevent this in the future, I will use reliable resources, double check my work, and use proper citations before I submit my documents. KA

Week 7: 5(a, b, c, e, g)- This week you showed excitement about being able to care for a postpartum mom and her newborn as well as see a vaginal delivery. You did great with the postpartum and newborn assessment. You were able to professionally communicate with the staff on the unit. You were able to navigate meditech when finding information for your CDG and when charting. RH

Week 7 – 5a – You had the opportunity to see a vaginal delivery and look at the placenta postdelivery. You also learned hospital standards on gestational hypertension postdelivery. KA

Week 7 – 5e – You discussed the purpose for tracking vaccinations in the population and the usage of a statewide system to keep track of all immunizations administered. You identified the vaccines are entered in this system by the pediatrician’s office. KA

Week 7 – 5f – You did a nice job writing an SBAR for your patient in your CDG this week. It was clear and concise. I would add your patient’s perineal laceration into the assessment of your SBAR since you are discussing it in your recommendations. Other than that, you had a clear purpose and intention behind your SBAR. Great job! KA

Week 7 – 5g – You thoughtfully responded to all required CDG questions related to your OB experience. You included an in-text citation and a reference to support your ideas. You did a great job sharing your unique experience from the clinical setting. Keep up the excellent work! KA

Week 8 Objective 5A-B: You did a great job showing interest and enthusiasm while at the school this week. You asked questions throughout the day to the students to enhance their learning on the presentation topic. You communicated and collaborated with the staff professionally and worked together to ensure the students received accurate information. KA/MD/RH/BS

Week 10- 5a,c- You had a great attitude and positive demeanor while administering flu vaccinations at the flu clinic. You also communicated effectively with other members of the healthcare team to ensure positive patient outcomes. BS

H&V Objective 5a, b, c – You did a great job showing interest and enthusiasm while at the school this week. You asked questions throughout the day to seek out new information while on clinical. You communicated and collaborated with the school nurse and school staff professionally and worked together to ensure the students received the appropriate care. MD

Objective																			
6. Critique own strengths and areas for improvement modifying behaviors accordingly to achieve personal and professional goals. (7,8)*																			
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final	
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28			
a. Recognize areas for improvement and goals to meet these needs. (List Below)*		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S	
b. Accept responsibility for decisions and actions.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S	
c. Demonstrate evidence of growth and self-confidence.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S	
d. Demonstrate evidence of research in being prepared for clinical.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S	
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		S	N/A	N/A	S	S	S	S	S	N/A	S	S U	N/A S	N/A	N/A		NA	S	
f. Describe initiatives in seeking out new learning experiences.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S	
g. Demonstrate ability to organize time effectively.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S	
h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S	
i. Demonstrates growth in clinical judgment.		S	N/A	N/A	S	S	S	S	S	N/A	S	S	N/A	N/A	N/A		NA	S	
	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA

**Evaluate these competencies for the offsite clinicals: ER: All H&V: All BG Club: All Flu: All

Comments:

Week 2 (6a)- An area of improvement for me could be time management. I could work on this by creating a prioritized plan of care at the beginning of each clinical, and making sure that at least 90% of the tasks are completed on time. This is a great idea to help with time management. I hope it works when you implement it next time.
KA

***End-of-Program Student Learning Outcomes**

FTMC OB Objective 6 D, E, F, G, H, I: I am so proud of you for being prepared for clinical, exhibiting professional behavior, actively seeking out new learning experiences, your organization, and growth in clinical judgment! You did an awesome job displaying an ACE attitude in clinical this week! Keep up the amazing work! MD

Week 5 (6a)- An area of improvement for me this week could be making sure that the education is more interactive for the kids. I will apply this skill in future patient and community education opportunities to practice. This would be a good consideration when developing the education you are providing to the students at St. Mary's. The more interactive you make it, the more you will keep their attention. KA

Week 5: 6e- Professional behavior was observed throughout your time at the Boys and Girls Club this week. BS

Week 6 (6a)- An area of improvement for me this week could be improving my confidence with clinical skills such as collecting specimens. My goal is to seek more hands-on opportunities and clinical and ask for guidance from experienced nurses to build my confidence. The more skills and experiences you have the more confident you will become. The nurse you worked with did not notice this and commented how eager you were to learn. KA

Week 6 – 6e – You were identified as being actively engaged while in the ER. You actively demonstrated your knowledge and nursing skills while participating in clinical. You demonstrated excellent professionalism and communication skills. KA

Week 7 (6a)- An area of improvement for me this week could be confidence in doing newborn assessments. To work on this skill, I will practice while being supervised and review the textbook/skills videos to build more confidence. Great idea. If you ever want to use one of the simulators let me know. KA

Week 7: 6(c, e, f, g)- You maintained professional behavior while on clinical throughout the day. During the clinical day, you asked good questions to further your knowledge of the pregnant and postpartum patient. You were able to organize your time efficiently to care for your patient as well as see a birth during the day. RH

Midterm – You are satisfactory for clinical at midterm. You have had the opportunity to participate in a variety of clinicals during the first half of the semester. You have been able to address all clinical competencies during clinical in the first half. You interact well with patients and staff and always have a positive attitude. Keep up the excellent work in the second half of the semester and finish strong. KA

Week 8 (6a)- An area of improvement for me this week could be confidence in public speaking. A goal for me will be to practice presenting in front of peers, look for constructive feedback, and gradually take on more speaking roles to build confidence when teaching groups. Great idea. Practice makes perfect. KA

Week 8 Objective 6A-I: You came to the school ready and prepared to present your topic. You were enthusiastic and willing to share what you learned about your presentation topic to the students. You were organized and timely with your presentation throughout the day. You delivered all presentations with an ACE attitude. Awesome job! KA/MD/RH/BS

Week 10 (6a)- I need to improve my confidence and technique when administering IM injections, making sure for correct landmark and patient comfort. My goal is to practice under supervision, seek feedback from nurses, and review current guidelines so I can safely and efficiently administer vaccines with minimal discomfort to the patient. If you would like to use the skills lab for practice just let us know. KA

***End-of-Program Student Learning Outcomes**

Week 10- 6d,e,g- You may have been a bit nervous at first, but I could not tell and you performed well. You also worked in a timely manner to get all of the clients through the line. Professional behavior was observed at all time throughout the clinical experience. Nice work! BS

Week 11 (6a)- An area for improvement for me this week would be better communication skills with young children. My goal is to use more age-appropriate explanations and techniques to reduce anxiety and help them to cooperate during screenings. I will work on this goal by observing other people and practicing child friendly communication. Role-playing and practice are great ways to work on communication skills. KA

H&V Objective 6c, d, e, f, g, h, I – You came to clinical ready and prepared to learn. You were enthusiastic and displayed an ACE attitude while at the Clyde Elementary School. You were organized and timely with your hearing and vision screenings and documenting the findings on the provided forms. Terrific job! MD

Week 11 – 6e – Your clinical tool and H&V survey were not completed and turned in by Friday at 0800. Please make sure to write a comment on how you will prevent this in the future. Also, once you address this and submit your tool on time next week you will receive a satisfactory for this competency in week 12. KA

Week 11 (6e)- I received a U for not turning in my clinical tool and H&V survey by Friday at 0800. Going forward, I will make myself a deadline prior to the due date. I will make sure my things are turned in on Thursdays by 1700 each week, with calendar reminders. You were marked as satisfactory in this competency for week 12 since you completed the H&V survey as directed and addressed the U in this competency for week 11. KA

Final – Seth, you have satisfactorily completed the clinical portion of the Maternal Child Nursing Course. You have worked hard throughout the semester and have done an excellent job applying all the concepts you learned in class to the many clinical experiences you have had. You are a very conscientious student and do a great job at applying clinical judgment in your nursing practice. Keep up the wonderful work as you continue on to your last semester in the program. KA

***End-of-Program Student Learning Outcomes**

Student Name: Seth Linder		Course Objective: 4: Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*					
Date or Clinical Week: 2							
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)	3	You did a nice job listing all the abnormal assessment findings, lab findings, and risk factors for your patient. In the future consider putting the patient's fundal assessment in the assessment box even though it was normal since a fundus it not a normal thing to palpate on a nonpregnant woman. KA
	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	
	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)	3	
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	You did a nice job listing the patient's nursing priorities and highlighting the problem with the highest priority. You set a realistic goal. You highlighted the pertinent information. Consider highlighting the epidural in the assessment box since you are relating her pain to the spinal headache. You included pertinent complications and signs and symptoms the nurse should assess for related to your nursing priority. KA
	5. State the goal for the top nursing priority.	Complete			Not complete	3	
	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	3	
	7. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)	3	
	8. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)	3	
Responding	9. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	You did a nice job listing all nursing interventions relevant for the nursing priority. Interventions were prioritized, included frequency, were realistic, and were individualized. I would consider including an intervention related to dimming the lights and creating a quiet
	10. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	11. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	3	

	12. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete	3	environment since you highlighted a bright room in your assessment section. KA
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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	3	
Reflecting 14. List all of the highlighted reassessment findings for the top nursing priority. 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 	>75% complete	50-75% complete	<50% complete	0% complete	3	You did a great job reassessing all highlighted information in the assessment section. You stated you would discontinue the patient's plan of care. KA
	Complete			Not complete	3	

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: Nice job satisfactorily completing your care map. See comments above for suggestions to improve your care maps in the future. KA

Total Points: 45/45

Faculty/Teaching Assistant Initials: KA

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

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills														
	Adult Head to Toe Assessment (*1, 2, 5, 6)	Breastfeeding and Bottle Feeding (*1, 2, 3, 6)	Breast Assessment (*1, 2, 3, 4, 5, 6)	Circumcision Care (*1, 2, 6)	Broselow Tape (*1, 2, 3, 5)	Leopold's (*1, 2, 3, 5, 6)	APGAR (*2, 3, 4, 5, 6)	Breast Self-Exam (*1, 4, 5, 6)	Pediatric Vital Signs (*1, 4, 5)	Pediatric Lab Values (*1, 4, 5)	C-Section Care (*1, 2, 5, 6)	Health Literacy (*2, 5, 6)	Safety (*1, 2, 3, 5, 6)	Postpartum Assessment (*1, 2, 6)	Newborn Bath and Cord Care (*2, 4)
	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21
Evaluation	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills									
	Fundus Assessment (*1, 2, 5, 6)	Lochia Assessment (*1, 2, 4)	Pain Assessment (*1, 2, 5, 6)	Newborn Assessment (*1, 2, 5, 6)	Postpartum and Newborn DC Ed (*1, 2, 6)	Pregnancy History (*1, 2, 3, 4, 5, 6)	Newborn Thermo. (*1, 2, 3, 4, 5, 6)	EDD (*1, 2, 3, 4, 5, 6)	Meditech (*1, 2, 3, 5, 6)	Amazing Race (*1, 2, 3, 4, 5, 6)
	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 10/20
Evaluation	S	S	S	S	S	S	S	S	S	S
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

Comments:

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2025
Simulation Evaluations

Simulation Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Simulation												
	Pregnancy and PP Simulation (*1, 2, 3, 5, 6)	vSim Maternity Case 1 (*1, 2, 3, 5, 6)	Shoulder Dystocia and Newborn Care (*1, 2, 3, 5, 6)	vSim Maternity Case 4 (*1, 2, 3, 5, 6)	Patient Care Safety Escape Room (*1, 2, 3, 5, 6)	Pediatric Respiratory Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 3 (*1, 2, 3, 5, 6)	Pediatric GI Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 1 (*1, 2, 3, 5, 6)	Student Developed Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 4 (*1, 2, 3, 5, 6)	Comprehensive Simulation (*1, 2, 3, 5, 6)	Empathy Simulation (*1, 2, 3, 5, 6)
	Date: 9/11 & 9/18	Date: 9/22	Date: 9/25 & 10/2	Date: 10/6	Date: 10/16 & 10/17	Date: 10/23 & 10/30	Date: 11/3	Date: 11/4 & 11/5	Date: 11/18	Date: 11/18	Date: 11/21	Date: 11/21	Date: 9/18
		Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz			Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz		
Scenario Evaluation	S	S	S	S	S	U	S	U	S	S	S	S	S
Survey	S		S		S	S		S		S		S	S
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	S	NA	S	NA	NA	NA	NA	NA

* Course Objectives

Comments:

Pediatric Respiratory Simulation - Please see associated Lasater Rubric for details related to satisfactory completion of remediation. KA

Pediatric GI Simulation - Please see associated Lasater Rubric for details related to satisfactory completion of remediation. KA

The student has satisfactorily completed the assigned vSim and met the established objectives by obtaining at least 80% on the scenario (including SBAR), and post-simulation quiz by the due date and time.

vSim Objectives

9/22/2025 vSim Maternity Case 1

1. Performs focused antepartum assessment of patient with severe preeclampsia. (1, 2, 4)*
 2. Recognizes signs and symptoms of severe preeclampsia (hypertensive disorders). (1, 2)*
 3. Communicates severe preeclampsia to the interprofessional team. (1, 2, 3, 5)*
 4. Administers prescribed antihypertensive medication (magnesium sulfate). (1, 2, 3, 5)*
 5. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)*
- * Course Objectives

10/6/2025 vSim Maternity Case 4

1. Select physical assessment priorities based on individual patient needs. (1, 2)*
 2. Recognizes signs and symptoms of umbilical cord prolapse. (1, 2, 5)*
 3. Performs emergent nursing management strategies for umbilical cord prolapse. (1, 2, 3, 4, 5)*
 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)*
- * Course Objectives

11/3/2025 vSim Pediatric Case 3

1. Identify and describe patient history, physical assessment findings, and diagnostic information related to dehydration.
 2. Prioritize and implement evidence-based nursing interventions that are culturally and situation appropriate for the pediatric patient.
 3. Implement clinical orders, patient safety measures, and provide education using therapeutic and confidential communication for the pediatric patient and family members.
- *Course Objectives

11/18/2025 vSim Pediatric Case 1

1. Select physical assessment priorities based on individual patient needs. (1, 2)*
 2. Recognize signs and symptoms of seizure activity. (1, 2)*
 3. Demonstrate appropriate nursing interventions for a patient experiencing a seizure. (1, 2, 3, 4, 5, 6)*
 4. Demonstrate therapeutic communication skills when interacting with children and their families. (1, 3, 5, 6)*
 5. Discuss how social determinants of health can influence the management of a chronic illness. (2, 3)*
- * Course Objectives

11/21/2025 vSim Pediatric Case 4

1. Select physical assessment priorities based on individual patient needs. (1, 2)*
 2. Identifies developmentally appropriate and culturally competent nursing interventions based on patient care needs. (1, 2, 4)*
 3. Prioritizes patient safety measures and appropriate nursing interventions for a patient with an acute sickle cell pain crisis. (1, 2, 3, 4, 5)*
 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)*
- * Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Bower (C), Fahey (A), Linder (M)

GROUP #: 4

SCENARIO: Pregnancy and PPH

OBSERVATION DATE/TIME(S): 9/11/2025 1200-1330

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
<p>NOTICING: (1, 2, 5) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p>Noticed VS appear WNL. Notices rhythm on fetal monitor. Patient requests mountain dew and cheeseburger, states she is peeing a lot. Notices contractions on fetal monitor, and that they should not occur at 33 weeks. Recognizes UA with +THC, glucose, nitrates. Pain rated at 4/10.</p> <p>Mona CO feeling dizzy and lightheaded. VS reassessed. Notices low BP and rising HR. Bleeding discovered. Notices uterus is firming up in response to fundal massage.</p>
<p>INTERPRETING: (2, 4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p>Interprets the need for FSBS. FSBS 225- interpreted as being high. Prioritizes need for fetal monitor. UA results interpreted as abnormal. Prioritizes education on the effects of marijuana.</p> <p>HR interpreted as being high, BP low. Fundus recognized as boggy. Recognize need to massage fundus. Interprets need to weigh pads. BP interpreted to be improving with fundal massage.</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> • 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 						<p>Nurse enters room, identifies patient, begins assessment, VS. Inquires about past pregnancies. Urine sent to lab. Asks questions to determine past/present gestational diabetes. Educates mom about marijuana effects on fetus. Patient assisted to left side. Call to provider, orders received for IV fluid, Nifedipine, US to verify dates. Orders read back. Inquires about home safety. Nifedipine and acetaminophen prepared, patient identified, allergies confirmed, IV fluid initiated, acetaminophen administered. Call to HCP regarding nifedipine. Nifedipine administered.</p> <p>Patient identified. PPH noticed- (you should immediately massage fundus). Fundus massaged after delay. Mona asks for wife to be called. Call to provider to report bleeding, dizziness, boggy uterus. HCP asks how much blood lost. Weighs pad and calls back. Order received for methylergonovine. Methylergonovine prepared and administered. Orders received. Methylergonovine explained to patient. Allergies confirmed, patient identified, methylergonovine administered. BP reassessed.</p>

<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of the scenarios. Team recognized the significance of teamwork and communication, and did well with each. Discussed the importance of SBAR communication when calling the provider. Also discussed risk factors for postpartum hemorrhage and that it is ok to ask for help or offer help to team members. Discussed the importance of providing education to patients.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “developing” or higher in all areas of the rubric.</p> <p>E= Exemplary A= Accomplished D= Developing B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Implement appropriate nursing interventions and test to monitor fetal well-being during pregnancy upon completion of nursing assessment. (1, 2, 3, 5)* 2. Identify social determinates of health and provide education and resources for pregnancy (1, 3, 4, 5)* 3. Identify the signs and symptoms of postpartum hemorrhage (PPH) and implement appropriate management of the PPH. (1, 2, 4, 5)* 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)* <p>*Course Objectives</p>	<p>You are Satisfactory for this scenario! BS</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs Recognizes most obvious patterns and deviations in data and uses these to continually assess Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments Displays proficiency in the use of most nursing skills; could improve speed or accuracy</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses</p>

Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO: Empathy Simulation

STUDENT NAME: Seth Linder

OBSERVATION DATE/TIME: 9/18/25

<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>You reflected on many aspects of your time wearing the empathy belly. Your responses were thoughtful and reflective on how you felt, and you compared your experience to a real pregnancy.</p> <p>Great job.</p> <p>I enjoyed seeing your pregnancy photo!</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater’s Clinical Judgment Rubric</p> <p>Simulation Objectives:</p> <ol style="list-style-type: none"> 1. Identify common possible discomforts of the pregnancy and how to empathize with the pregnant patient and childrearing family. (1, 2, 6)* 2. Describe how patient-centered care is dependent on past medical history, cultural history, and social history. (1, 2, 3, 4)* 3. Describe your psychological and social response to the simulation and how it impacts the care provided to the pregnant patient and child-bearing family. (1, 5, 6)* <p>Developing to accomplished is required for satisfactory completion of this simulation.</p>	<p>Comments</p> <p>You are satisfactory for this simulation.</p>

*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Bower (M), Fahey (C), Linder (A)

GROUP #: 4

SCENARIO: Shoulder Dystocia and Newborn Care

OBSERVATION DATE/TIME(S): 9/25/25 1200-1330

CLINICAL JUDGMENT COMPONENTS	<u>OBSERVATION NOTES</u>
<p>NOTICING: (1,2,5) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 	<p>Obtain vitals</p> <p>Pain assessment: rating, location, duration</p> <p>Leopolds maneuver to identify baby's position</p> <p>Cervical exam done after calling the healthcare provider but before nubain administration</p> <p>Notice change in fetal strip after nubain administration</p> <p>Notice baby is stuck and begin HELPERR maneuvers</p> <p>APGAR 1 minute: 9</p> <p>Newborn assessment: thorough assessment (sucking, rooting, palmar)</p>
<p>INTERPRETING: (2,4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Interpret vitals as WDL</p> <p>Offer nubain as pain relief due to patient not wanting epidural</p> <p>Interpret fetal monitor as accelerations</p> <p>Prioritize antibiotics</p> <p>Interpret fetal monitor after nubain administration as decelerations. Correlate that to head compression</p>
<p>RESPONDING: (1,2,3,5) *</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B 	<p>Verify allergies when initially in room (medication nurse)</p> <p>Education provided about nubain and if it is safe for the baby</p> <p>Medication administration: penicillin- check name/DOB, scan patient, scan medication. Hand primary fluids below secondary fluids. Provide education about why getting this medication</p> <p>Call healthcare provider with update on patient status and ask about nubain administration.</p>

<ul style="list-style-type: none"> • Being Skillful: E A D B 	<p>Medication administration: nubain. Verify name/DOB, verify allergies, scan patient, scan medication, correct dose, correct needle used, correct technique, use of needle safety.</p> <p>Call healthcare provider, put patient in McRoberts position, suprapubic pressure, hands and knees, posterior arm, evaluate for episiotomy, rotational maneuvers</p> <p>Following delivery: dry off baby, place in warmer,</p> <p>Medication administration for baby: education provided to mom about vitamin K and erythromycin ointment. Gets consent to administer. Scan baby, scan medication, correct dose, correct needle size, correct technique, use of needle safety.</p>
<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of scenario and interventions performed. Group identified good communication throughout the simulation. The team was able to identify strengths and an area for improvement for future simulations. Some team members stated they would have liked to educate more on risk factors for shoulder dystocia prior to delivery to help prepare mom and support person. Emotional intelligence questions asked in relation to patient point of view and support person point of view. Questions also asked about student emotions and how that impacted their actions in their scenario. Reflection on how some emotions wanted to speed through their tasks but after taking a breath and slowing down in order to do tasks properly and efficiently to care for patient in best way possible.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of Developing or higher in all areas of the rubric.</p> <p>E= Exemplary A= Accomplished D= Developing B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Select physical assessment priorities based on individual patient needs. (1, 2)* 2. Identify risk factors and implement appropriate nursing interventions upon completion of focused nursing assessment. (1, 2, 3, 4, 5)* 	<p>You are Satisfactory in this simulation! RH</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient’s situation from the patient and family to support planning interventions; occasionally does not pursue important leads.</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.</p> <p>Reflecting: Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives. Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered.</p>

<p>3. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the healthcare team. (1, 3, 5, 6)*</p> <p>4. Identify and implement appropriate nursing interventions in which heat loss occurs in infants. (1, 2, 5)*</p>	
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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **Seth Linder**

OBSERVATION DATE/TIME: **10/16-17/2025** SCENARIO: **Escape Room**

CLINICAL JUDGMENT						OBSERVATION NOTES
<p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p>Noticed patient safety issues throughout the room. These included sharps container on bed, patient hanging off the bed, bed not locked, armband not on patient, syringe, and side rails not up. Noticed the assessment findings in the patient assessment supporting the need for a breathing treatment. Noticed math problems in the box and recognized the need to solve. Noticed some boxes needed a code and one needed a key.</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						

<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • 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 	<p>Responded to safety issues by correcting each of them to provide a safe environment for the patient's care. Responded to instructor cues regarding environment and problem solving. Responded to HCP orders and picked the correct dosage of medication for the patient. Flexible with plan of care and looking for clues as well as communicating with one another effectively. Responded to the patient's respiratory distress by providing the patient with the ordered breathing treatment.</p> <p>Responded to the healthcare providers order and programed the IV to the correct rate and administered the prescribed IV fluids.</p>
<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Worked together with communication and idea sharing. Collaborated and provided suggestions to one another to make sense of riddles, math formulas, medications, and treatments.</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Utilize the concepts of growth and development to identify concerns with patient safety and provide appropriate interventions to address safety concerns. (1, 3, 5)* 2. Administer medications utilizing the concepts of growth and development and the rights of medication administration to prevent errors in the process. (1, 2, 5)* 3. Collaborate with members of the healthcare team to provide safe, holistic, and comprehensive patient care. (1, 2, 4, 5, 6)* 4. Utilize SBAR communication in interactions with members of the health team. (5)* 	<p>You are successful in this simulation as you were able to provide a safe environment for the patient. You were also able to work together as a team to solve the math formulas and give appropriate dosages of medications. Good job! KA/MD/RH/BS</p> <p>Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs Recognizes most obvious patterns and deviations in data and uses these to continually assess Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments Displays proficiency in the use of most nursing skills; could improve speed or accuracy</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses</p>

*Course Objectives

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Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Bower (A), Fahey (M), Linder (C)

GROUP #: 4

SCENARIO: Pediatric Respiratory

OBSERVATION DATE/TIME(S): 10/23/25 1200-1330

CLINICAL JUDGMENT COMPONENTS	<u>OBSERVATION NOTES</u>
<p>NOTICING: (1, 2, 5) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 	<p>Notice safety issues in bed (medication, needle, scissors)</p> <p>Pain assessment (location, rating using FACES scale)</p> <p>Obtain vitals</p> <p>Respiratory assessment. Remove gown to visualize chest.</p> <p>GI assessment</p> <p>Throat assessment. Notice red throat and moist membranes</p> <p>Reassess vitals after ibuprofen administration</p> <p>Notice increased cough, notice abnormal vital signs (heart rate, oxygen saturation, respirations)</p> <p>Respiratory assessment. Notice stridor lung sounds, notice retractions</p> <p>Pain assessment (FACES scale, location)</p> <p>Reassess respiratory after breathing treatment</p>
<p>INTERPRETING: (2, 4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Interpret temperature elevated</p> <p>Interpret medication error with medication orders for acetaminophen and ibuprofen</p> <p>Administer ibuprofen because acetaminophen was already administered</p> <p>Interpret medication error with medication order for amoxicillin</p>

	<p>Correlate stridor and retractions to respiratory distress</p> <p>Interpret respirations as elevated, heart rate as elevated, and temperature as elevated.</p> <p>Stays in room while patient is experiencing stridor/respiratory distress</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> • 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 	<p>Remove unsafe items from bed. Offer age appropriate toy</p> <p>Call healthcare provider. Good SBAR provided. Clarify medication order for acetaminophen and ibuprofen. Readback new orders.</p> <p>Call respiratory for breathing treatment but order is not due yet.</p> <p>Call healthcare provider. Good SBAR provided. Clarify amoxicillin order. Reclarify acetaminophen and ibuprofen orders as well.</p> <p>Medication administration: verify name/DOB, verify allergies, provide education about each medication (ibuprofen, cetirizine, and amoxicillin), scan patient, scan medication</p> <p>Education provided to father about smoking/secondhand smoke and how can impact breathing. Education about how to calm coughing (cool night air, warm steam from shower, cool mist humidifier), increased fluids and how to make secretions thinner, signs and symptoms of respiratory distress.</p> <p>Call respiratory therapy for breathing treatment</p> <p>Call healthcare provider. Minimal SBAR provided. Requesting oxygen order. Receive order for oxygen therapy and for dexamethasone.</p> <p>Medication administration: verify name/DOB, verify allergies, educate what medication is for, scan patient, scan medication, correct dosage calculation</p>
<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of scenario and good communication between team members in simulation. Group identified good team work throughout scenario. Emotional intelligence questions asked about how students were feeling during the respiratory distress part of the scenario. Through discussion of scenario, group was able to identify three medication errors that were in the chart. Discussion of how orders are written and what resources are available to find safe dose ranges in practice (skyscape, pharmacy, Lexicomp). Discussion about IV fluids and what safe dose/fluid requirement for 24-hour period should be. All group members did correct dosage calculation to determine safe IV fluid rate. Group identified they missed this medication error. Discussion about how to report this medication error and how group members were feeling.</p>

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:

1. Select physical assessment priorities based on individual patient needs. (1, 2)*
2. Review appropriateness of prescribed medications for prevention of errors and administer medications utilizing the concepts of growth and development. (1,2,5)*
3. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)*
4. Utilize the concepts of growth and development to provide therapeutic communication with the toddler and their family. (3, 5)*

You are unsatisfactory in this scenario. Please refer to remediation assignment for further instructions. RH

Lasater Clinical Judgement Rubric Comments:

Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Makes limited efforts to seek additional information from the patient and family; often seems not to know what information to seek and/or pursues unrelated information.

Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.

Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Is hesitant or ineffective in using nursing skills.

Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered. Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered.

You have completed the remediation assignment related to proper medication administration and medication errors that pertained to your group’s performance in this simulation. Your assignment was completed satisfactorily, therefore you are now satisfactory for this simulation. RH

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Bower (M), Fahey (C), Linder (A)

GROUP #: 4

SCENARIO: Pediatric GI

OBSERVATION DATE/TIME(S): 11/4/2025 1200-1330

CLINICAL JUDGMENT COMPONENTS	OBSERVATION NOTES
<p>NOTICING: (1, 2, 5) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 	<p>Notices temp of 102.5. Notices bruise on abdomen. Jack CO stomach pain. Notices skin turgor is elastic, mucous membranes moist and pink. Notices additional bruising on leg. VS remeasured following medication administration.</p> <p>Jack CO stomach pain, rated 4/10. Jack vomits 100 mL. Mucous membranes pink and tacky. Cap refill < 3 sec. Temp 102.1</p>
<p>INTERPRETING: (2, 4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Temp interpreted as being high. Current hydration status is interpreted to be normal.</p> <p>Interpreted S/S of dehydration. BP interpreted as lower than previous readings. Temp elevated.</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> • 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 	<p>Patient identified, begins assessment, VS- temp 102.5. Patient requests something to drink, Pedialyte offered. Emesis basin provided. Pain assessed. Mom is questioned about any recent illnesses in the family. 130 mg suppository administered (under-dosed). Call to HCP to inquire about fluids and something for nausea. New orders received for new dose of acetaminophen and for Zofran. Orders read back. Zofran prepared and administered. Jack being questioned about suspicious bruises on abdomen. Call to CPS to report suspicious bruising, suggests to try and question Jack by himself. Mom goes to cafeteria. Jack is questioned about bruises when mom is out of the room, confirming that mom's friend is the perpetrator of the abuse. Jack requests food, banana and toast offered. Call to case management to report new findings. Mom is questioned further about the safety of the home environment. Mom is asked to speak privately in the hall. Potential support resources offered.</p> <p>Lab results + for rotavirus. Call to HCP to update and request IV fluids. New orders received for IV fluid bolus and maintenance fluid and acetaminophen. Reassessment. Medications prepared, patient identified, allergies confirmed. IV bolus initiated and maintenance fluid initiated, acetaminophen administered.</p>

<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> Evaluation/Self-Analysis: E A D B Commitment to Improvement: E A D B 	<p>Team discussion of the scenario. Teamwork and communication were great. Discussed the nurse's role when they discover a potential abuse situation, which was handled well during the scenario. Discussed the potential benefit of separating mom and child to have individual conversations with each. Team noticed the clinical signs of dehydration and reacted appropriately to request IV fluid from the HCP. Unfortunately, the first dose of acetaminophen was administered without verifying the recommended dose.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of "developing" or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> Select physical assessment priorities based on individual patient needs. (1, 2)* Provide quality, patient-centered care in an organized, safe manner to a toddler with gastroenteritis. (1, 2, 4, 5)* Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* Utilize the concepts of growth and development to identify concerns in assessment findings associated with potential child abuse and make appropriate referrals as necessary. (1, 3, 5)* Utilize interpersonal skills in the interactions with patients, families, and members of the health team. (3, 5)* <p>*Course Objectives</p>	<p>You are unsatisfactory in this scenario. Please refer to remediation assignment for further instructions. BS</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information Recognizes most obvious patterns and deviations in data and uses these to continually assess. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family</p> <p>Interpreting: Focuses on the most relevant and important data useful for explaining the patient's condition In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse</p> <p>Responding: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments Is hesitant or ineffective in using nursing skills</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses</p> <p>You have completed the remediation assignment related to proper medication administration and medication errors that pertained to your group's performance in this simulation. Your assignment was completed satisfactorily, therefore you are now satisfactory for this simulation. BS</p>

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **Seth Linder**

OBSERVATION DATE/TIME: **11/18/25** SCENARIO #: **Student Developed Scenarios**

CLINICAL JUDGMENT						OBSERVATION NOTES
<p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p>Noticed deviations from normal with physical assessment and inquiry. Information seeking regarding patient condition as well as with parent/support person at bedside when appropriate.</p> <p>When developing your scenario, you noticed the important assessment aspects to include for a patient/support person with your assigned diagnosis.</p> <p>Through the scavenger hunt you were able to notice various details of each of the ten scenarios simulated.</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p>You were able to interpret data pieces and prioritize accordingly.</p> <p>For each scenario, care was given in gathering details needed in order to phone the healthcare provider and provide SBAR.</p> <p>When developing your scenario, you interpreted the expected path of the disease process and necessary nursing interventions to include in the patient's care.</p> <p>You utilized clinical judgment to interpret appropriate responses to NCLEX style questions related to each scenario.</p>
<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • 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 						<p>Responded with communication that was collaborative between roles. Clear communication was utilized between colleagues.</p> <p>Clear communication was utilized with patient and family and layman's terms were utilized when appropriate.</p> <p>Responded with interventions that were planned accordingly and verbalized when necessary.</p> <p>Skill in identifying focused assessments as well as timely reassessments were utilized.</p> <p>Family members and others of the healthcare team were kept up to date on patient condition.</p> <p>Education was provided to patient and family on for current health status as well as for preventative measures.</p> <p>In response to your assigned disease process you developed a comprehensive simulation that encompasses aspects of assessment, interprofessional communication, and nursing interventions appropriate for the patient.</p> <p>You developed appropriate NCLEX questions for your scenario based on your disease process.</p>
<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 						<p>Reflected with a self-analysis of assessment and analyzation of data to identify missing pieces of the scenario.</p> <p>Actively participated in providing constructive feedback to all groups observed throughout the simulation.</p> <p>You developed debriefing questions specific to your scenario to assist your peers in reflecting on the importance of your simulation.</p>

SUMMARY COMMENTS:

E = exemplary, A = accomplished, D = developing, B = Beginning

Based off of Lasater's Clinical Judgment Rubric

Developing or higher in all areas is required for satisfactory completion of this simulation.

Objectives

1. Select physical assessment priorities based on individual patient needs. (1, 2)*
2. Provide quality, prioritized patient-centered care in an organized, safe manner to patients and families. (1, 2, 4, 5)*
3. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)*
4. Utilize the concepts of growth and development to provide therapeutic communication with the patient and family. (1, 3, 5, 6)*
5. Utilize interpersonal skills in the interactions with patients, families, and members of the health team. (3, 5)*

The student developed scenarios were completed successfully. You are satisfactory for this simulation. KA/MD/BS/RH

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: Jessica Bower, Seth Linder, Nikki Papenfuss, Brooke Schafer
Simulation

OBSERVATION DATE/TIME: 11/21/25 SCENARIO: Comprehensive

CLINICAL JUDGMENT						OBSERVATION NOTES
<p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p>In the mother encounter you noticed suspicious bruising on the mother’s face and neck. You also noticed the poor environment with chips, pop, rats, spider, and cockroaches scattered throughout the room. You obtained vital signs (proper sitting position utilized for BP) and asked if she was experiencing pain. Additionally, you noticed that the mother had an unprescribed medication, is a current cigarette smoker, and had a dysfunctional family dynamic when having conversations on home life. MD</p> <p>Noticed rodents and pizza boxes in kitchen. Noticed exposed cleaning supplies that kids could get into. Noticed expired infant formula. Noticed lack of nutritious foods in the refrigerator. Noticed open beer bottles. Witnessed father preparing bottle improperly and intervened. BS</p> <p>You noticed the signs of respiratory distress and dehydration in the children. You noticed environmental concerns throughout the home that would be safety hazards. You recognized the need and ability to educate the 8-year-old son in the family and educated him on no juice for the infant, no extra blankets in the crib, space heater usage, and no drinking of alcoholic beverages. You provided a thorough assessment to both the newborn and the 8-year-old brother. You asked excellent questions focusing on multiple concerns and gather further data on safety concerns and abuse. KA</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p>In the mother encounter you interpreted the suspicious bruising on the mother’s face for physical abuse from her partner. You identified there were educational opportunities for abused women and children. You were also able to interpret the safety concerns throughout the room with the environment, unprescribed medications, cigarette smoking. You connected the patient’s pain with the bruising around her eye. You encouraged the mother to discuss more of her dysfunctional family dynamic. MD</p> <p>Interpreted conditions in the kitchen as being dirty, messy, and unsafe for children. Interpreted exposed cleaning supplies as dangerous for children. Interpreted the lack of nutritious foods as not ideal for the family. Interpreted multiple empty beer bottles as potential alcohol abuse. Interpreted father’s bottle preparation method to be inadequate (formula expired, not using the correct quantity). BS</p> <p>You interpreted there were multiple safety concerns as well as education opportunities throughout the family unit. You interpreted the need to seek out further information on the health, safety, and environmental concerns found throughout the home visit. You interpreted acute respiratory status changes and lethargy as major assessment concerns in the children in this home environment. KA</p>
<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B 						<p>In the mother encounter you provided education on abuse resources and emotional support groups and safety plans along with encouraging her that the abuse is not her fault. You also provided education on smoking cessation, safer sleeping options for the newborn. You educated on not ingesting unlabeled medications and</p>

<ul style="list-style-type: none"> • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B 	<p>offered to dispose of it properly as well. You provided education on birth control to prevent another pregnancy and information on breastfeeding the newborn more frequently. Great job with the mother encounter! MD</p> <p>Educated father that cleaning supplies should not be stored in places where the children could get access to them. Educated father to pay attention to expiration dates and how to properly and safely prepare a bottle. Educated that there are resources available to assist with healthy food choices. BS</p> <p>You responded to safety, psychosocial issues calmly. You were confident in your approach to each family member. You sought further information regarding potential abuse from all members of the family. You responded by prioritizing the safety and health concerns of each family member and seeking further treatment for them. You responded with intervention regarding safety of children; flexible and creative with ideas and interviewing each member of the family. You provided a focused assessment to the children of the household recognizing concerns requiring immediate medical assistance. You recognized the need for involvement by CPS, law enforcement, and hospitalization for medical treatment of both children. You recognized that you only had consent to treat the mother in this situation and sought maternal consent to call for medical assistance and treat the children of the household. You did an excellent job providing thorough education the 8-year-old that was age appropriate. You provided interventions for the asthma attack including the child sit up higher. You removed excess toys and blankets from the crib, cleaned the area, and removed the bugs. KA</p>
<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Group discussion of how reviewing the chart during prebrief prepared them for the visit with the infant. The group felt the chart did not prepare them well for the visit with the mother or other family members. During visit with mother, they noticed the abuse she was enduring, her post-partum depression, alcohol, cigarettes, poor diet, the vermin, and unlabeled medication open on the table. Group stated they did a modified BUBBLELE assessment but did not ask about her incision and wish they would have. They provided education regarding follow up care, smoking cessation, cleaning the area, proper medication storage, proper nutrition, and information about birth control. They were able to provide resources about transportation to appointments, OHGO, WIC, and safe harbor. While interacting with the partner, they noticed the inappropriate drawings on the refrigerator, the unsecured cleaning supplies, copious amounts of beer, and more vermin. The group was able to educate the partner on how to properly make a bottle (heat up properly, correct amount of formula, not expired items), nutrition, and to secure cleaning supplies. They were able to provide resources regarding how to get out of an abusive situation (they believed mother was abuser at this point), how to get transportation assistance, and an exterminator. The group then moved onto the children's room and noticed the filth had continued. They noticed a variety of safety issues regarding unsafe sleep with the infant as well as inadequate or unsafe food (juice in the bottle, lack of food for older child). They noticed both children were in need of medical attention due to Jack's retractions and poor respiratory status and Jill's signs of dehydration and weight loss indicating failure to thrive. They were able to get consent from the mother and send both children and the mother to the hospital via squad and then to safe harbor. The group was able to lead discussion about their experience and interventions with minimal prompting. RH</p>

	<p>Upon completion of the simulation, you created an education plan focused on Monica for proper follow up care, house cleanliness, and substance abuse in the home.</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater’s Clinical Judgment Rubric</p> <p>Developing or higher in all areas is required for satisfactory completion of this simulation.</p> <p>Objectives</p> <ol style="list-style-type: none"> 1. Provide quality, patient-centered care in an organized, safe manner. (1, 2, 4, 5)* 2. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* 3. Utilize the concepts of growth and development to provide therapeutic communication with the family unit. (3, 5)* 4. Identify safety measures for the family unit in the home setting. (1,3,5)* 5. Demonstrate thorough environmental assessment in the home setting. (1,3,5)* <p>*Course Objectives</p>	<p>Excellent job in communicating without judgement and providing appropriate education, information regarding resources, and intervention for family.</p> <p>You are satisfactory for this scenario. KA/MD/BS/RH</p>

EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 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:

Great semester

Student eSignature & Date: ___Seth Linder _____11/24/2025