

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2025**

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

Student:

Final Grade: Satisfactory

Semester: Fall

Date of Completion:

Faculty: Frances Brennan, MSN, RN; Amy Rockwell, MSN, RN;
Chandra Barnes, MSN, RN; Nick Simonovich, MSN, RN
Heather Schwerer, MSN, RN; Brittany Lombardi, MSN, RN, CNE

Faculty eSignature:

Teaching Assistant: Stacia Atkins, BSN, RN

DIRECTIONS FOR USE:

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S)**, **Needs Improvement (NI)**, **Unsatisfactory (U)**, and **Not Available (NA)**. The faculty member will initial if in agreement with the student’s evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a “S, NI, U, or NA”. If the student does not self-rate, then it is an automatic “U”. A student who submits the clinical evaluation tool late will be rated as “U” in the appropriate competency(s) for that clinical week. Whenever a student receives a “U” in a competency, it must be addressed with a comment as to why it is no longer a “U” the following week. If the student does not state why the “U” is corrected, it will be another “U” until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. **An unsatisfactory or needs improvement as a final evaluation in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. Patterns of performance over the course of the semester will be utilized to determine the final competency evaluations. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.**

METHODS OF EVALUATION:

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

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
10/01/2025	0.75H	NG Tube Lab Documentation	09/26/2025
Faculty/Teaching Assistant’s Name			Initials
		Chandra Barnes	CB
		Frances Brennan	FB
		Amy Rockwell	AR
		Nicholas Simonovich	NS
		Heather Schwerer	HS
		Brittany Lombardi	BL

Stacia Atkins

SA

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

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

UNSATISFACTORY CLINICAL PERFORMANCE

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

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

OTHER

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

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

Objective																
1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Identify spiritual needs of patient (Noticing).										S	NA	S	NA	S	NA	S
b. Identify cultural factors that influence healthcare (Noticing).										S	NA	S	NA	S	NA	S
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).							S	NA	S	S	NA	S	NA	S	NA	S
Faculty/TA Initials		NS					BL	CB	CB	HS	HS	HS	HS	HS	HS	HS
Clinical Location; Patient age**		Meditech Orientation					3T 78	N/A	N/A	3T 82	No Clinical	3T 50	N/A	3T 58	N/A	FINAL

* End-of-Program Student Learning Outcomes

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

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

Comments:

Week 7-1(c,d) Great job this week showing respect for your patient's individual preferences, values, and needs while providing care. In your CDG, you did a nice job identifying your patient's abnormal assessment findings and priority concerns. This demonstrates the early development of clinical judgment, which is essential for safe and effective nursing practice. BL

Week 9 (1c,d) Great job showing respect for your patient's needs, while also being kind and compassionate. You also demonstrated the appropriate use of Maslow's hierarchy of needs during the head to toe assessment performed on your patient during this clinical experience, you were able to recognize physiological needs of your patient when performing the head to toe assessment. HS

Week 11 (1a,c,d) You spent time talking and listening to your patient, and then you were able to provide education to him based on his needs. You were able to incorporate his preferences and needs into the plan of care. You allowed him to have a say in the way that the care was provided while also educating him on the why certain interventions were being performed. HS

Week 13 (1a,c,d) Great job planning the care for your patient based around his preferences, values, and needs. As you noticed the patient became much more comfortable with you on the second day, and he was receptive to the care that you provided to him. HS

Objective

1. Summarize knowledge of anatomy, physiology, chemistry, nutrition, psychosocial and developmental principles in performance of basic physical assessment through use of clinical judgment skills. (3,4, 5)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
b. Use correct technique for vital sign measurement (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).										S	NA	S	NA	S	NA	S
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).										S	NA	S	NA	S	NA	S
e. Collect the nutritional data of assigned patient (Noticing).										S	NA	S	NA	S	NA	S
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).										S	NA	NA	NA	NA	NA	S
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).										S	NA	S	NA	S	NA	S
Faculty/TA Initials		NS					BL	CB	CB	HS	HS	HS	HS	HS	HS	HS

* End-of-Program Student Learning Outcomes

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

Comments:

Week 7- 2(a,b) Great job this week using correct techniques for measuring vital signs and completing a systematic head to toe assessment on your assigned patient. Your assessment was thorough and completed in a timely manner. BL

Week 9 (2a-e)- You did a great job performing all assessments, especially your focused gastrointestinal assessment and NG tube assessment. You also demonstrated the ability to gather information from assessments performed to determine a priority problem for your assigned patient. After determining the priority problem, you implemented all necessary interventions. HS

Week 11 (2a-d) You did a great job with your assessment this week! Your patient had several abnormal assessment findings and you were able to identify them, and document appropriately. You did a nice job completing his fall/safety and skin assessment and implementing the appropriate interventions for the plan of care based on your findings. (g)- Nice job identifying the elevated A1C level and how it was significant regarding the patient's history and his home diet. HS

Week 13 (2a-e) You did a nice job this week on your assessment. You immediately realized that you needed to focus on his respiratory assessment after receiving report and entering the patient's room. You were able to complete a thorough skin assessment and determine that he was a high fall risk based on his reason for admission of a syncopal episode. HS

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:							S	NA	S	S	NA	S	NA	S	NA	S
a. Receive report at beginning of shift from assigned nurse (Noticing).									S	NA	S	NA	S	NA	NA	S
b. Hand off (report) pertinent, current information to the next provider of care (Responding).										S	NA	S	NA	S	NA	S
c. Use appropriate medical terminology in verbal and written communication (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
d. Report promptly and accurately any change in the status of the patient (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
e. Communicate effectively with patients and families (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
Faculty/TA Initials		NS					BL	CB	CB	HS	HS	HS	HS	HS	HS	HS

* End-of-Program Student Learning Outcomes

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

Comments:

Week 7-3(e) Excellent job communicating with your patient during clinical this week. You also did a great job reflecting on and discussing your communication in your CDG as well. BL

Week 9 (3a-f) You were able to get a report from the night shift nurse and update the nurse prior to leaving at the end of the shift. You did a nice job communicating with your patient and the other members of the healthcare team during the shift. HS

Week 11 (3a,c,d,e) Great job receiving hand off report on your patient. Nice job using medical terminology while communicating with the other healthcare providers, reporting abnormal findings, and communicating effectively with the staff RN. HS

Week 13 (3a-f) You did an excellent job communicating with the primary nurse throughout the shift. You were able to utilize medical terminology to express your concerns during the medication pass related to the patient's vital signs and lab values. HS

Objective

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

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:									S							
a. Document vital signs and head to toe assessment according to policy (Responding).							S	NA	S	NA	S	NA	S	NA	NA	S
b. Document the patient response to nursing care provided (Responding).							NA	NA	N/A	S	NA	S	NA	S	NA	S
c. Access medical information of assigned patient in Electronic Medical Record (Responding).*		S					S	NA	S	NA	S	NA	S	NA	NA	S
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).*		S							S	NA	S	NA	S	NA	NA	S
e. Provide basic patient education with accurate electronic documentation (Responding).										S	NA	S	NA	S	NA	S
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).							S	NA	S	NA	S	NA	S	NA	NA	S
*Week 2 –Meditech Orientation		NS					BL	CB	CB	HS	HS	HS	HS	HS	HS	HS
Faculty/TA Initials																

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

Comments:

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

Week 7-4(a) Excellent job with your documentation this week in clinical. Your documentation for both your vital signs and head to toe assessment were thorough and accurate. 4(c) Great job in your CDG discussing the use of informatics and technology in the clinical setting. You provided a nice description of how you utilized the patient's vital signs and lab data to look for trends and identify any changes. 4(f) Satisfactory completion of your CDG this week. Keep up all your hard work! BL

Week 9 (4a,b,c) You did a nice job this week documenting all of the care and interventions you provided to your patient. HS
(4f)- Nice job on your initial CDG post and the peer response you met all of the rubric requirements and provided a thorough response to your peer. You included both an in-text citation and a reference however, you are not completing the in-text citation correctly it should either be a direct quote or a paraphrase from the reference. Please refer to the APA formatting example handout or reach out to faculty or Libby in the library if you have questions regarding this. Moving forward when thinking of a priority problem it should not be a medical diagnosis. Think of other options that would be considered for the patient such as impaired fluid volume, or impaired mobility. HS

Week 11(4 a,b,c) Great job documenting the head to toe assessment, vital signs, and focused assessment this week. You documented thoroughly and in a timely manner both days. Nice job accessing pertinent information and additional information within the electronic medical record. You were able to identify and gather important information regarding your patient's problems and testing to provide an accurate plan of care, nice job! Your patient had several abnormal findings within the results, nice job reviewing them and identifying their significance.
(4f)- Nice job on your initial CDG post and the peer response. You met all of the rubric requirements and provided a thorough response to your peer. I agree with the impaired skin integrity priority problem for the patient. You did a nice job pulling in the abnormal assessment findings along with his lab values and diagnostics. You were then able to connect how everything was tied together. HS

Week 13 (4a,b,c)- You did an excellent job documenting your vital signs and assessment. You were very efficient in managing your time and contentious in ensuring that you accurately documented all of the abnormal findings you noted during your head to toe assessment.
(4f)-You met all of the CDG rubric requirements for this week for both your initial post and your peer response. You did a nice job selecting a priority problem for the patient and listing all of the abnormal findings that led you to that problem. You were able to identify interventions specific to the problem and discuss your patients' medications along with their indication and specific assessments that are pertinent to the medication. HS

Objective																
4. Exemplify psychomotor skills and nursing care safely using evidence-based practice. (3,4,5,7,8)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:									S							
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
b. Apply the principles of asepsis and standard/infection control precautions (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).										NA	NA	NA	NA	NA	NA	NA
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
e. Organize time providing patient care efficiently and safely (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
f. Manages hygiene needs of assigned patient (Responding).										S	NA	S	NA	S	NA	S
g. Demonstrate appropriate skill with wound care (Responding).											NA	S	NA	NA	NA	S
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).							S	NA	S							S
Faculty/TA Initials		NS					BL	CB	CB	HS	HS	HS	HS	HS		HS

* End-of-Program Student Learning Outcomes

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

****You must document the location of the pull station and extinguisher here for your first clinical experience.**

**Comments: Witnessed a fire extinguisher on the wall located to the left of the welcome/coordinator desk on 3T unit, witnessed a fire pull-tab behind said desk.
Great job! BL**

Week 9 (5d,e) You demonstrated great management of care for your assigned patient making sure all pertinent interventions were completed. You organized your time appropriately to provide safe, efficient care to ensure positive patient outcomes. HS

Week 11 (5 b, d,e) Nice job organizing your time efficiently in order to get everything completed in a timely manner. You were fortunate and had the same patient for two days in a row, and you were able to organize your second day more efficiently knowing some of the information from the previous day. You were able to complete all of the care and prioritize your time efficiently so that you were able to complete the dressing change during the shift as well. (5e)- You did a nice job completing the dressing change with packing on the patients wound on his foot with minimal assistance while following the providers orders. HS

Week 13 (5d,e) You demonstrated great management of care for your assigned patient making sure all pertinent interventions were completed. You organized your time appropriately to provide safe, efficient care to ensure positive patient outcomes. Since you had the same patient for two days in a row, you were able to organize your second day more efficiently knowing some of the information from the previous day. HS

Objective

5. Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies: a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding).										S	NA	S	NA	S	S	S
Faculty/TA Initials		NS							CB	HS	HS	HS	HS	HS	HS	HS

* End-of-Program Student Learning Outcomes

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

Comments:

Week 9 (6a) Excellent job utilizing your clinical judgment skills to care for your patient this week. You assured the plan of care fit your patient’s needs and preferences. You will continue to grow these skills as you progress through the semester and program. HS

Week 11 (6a) Nice job using your clinical judgement skills and identifying the patient’s abnormal assessment findings along with his priority problem in order to establish interventions that were appropriate for the plan of care specific to him. HS

Week 13 (6a) You were able to utilize your assessment skills and clinical judgment skills in order to establish a patient centered plan of care specific to your patient. HS

Week 14 (6a) Nice job on your nursing care map! You are satisfactory. HS

Objective																
6. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).													NA	S	NA	S
b. Recognize patient drug allergies (Interpreting).													NA	S	NA	S
c. Practice the rights of medication administration and safety checks prior to medication administration (Responding).													NA	S	NA	S
d. Administer oral, intramuscular, subcutaneous, and intradermal medications using correct techniques (Responding).													NA	S	NA	S
e. Review the patient record for time of last dose before giving PRN medication (Interpreting).													NA	S	NA	S
f. Assess the patient response to PRN medications (Responding).													NA	S	NA	S
g. Demonstrate medication administration documentation appropriately using BMV (Responding).												NA S	NA	S	NA	S
*Week 11: BMV																
Faculty/TA Initials		NS							CB				HS	HS	HS	HS

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

Comments:

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

Week 13 (7a-g)- You did an excellent job with your first medication administration this week. You were able to identify why your patient was receiving each medication, potential side effects, and appropriate patient education. You followed the 7 rights of medication administration with 3 medication checks, verifying the correct patient and their allergies. You were able to utilize the BMV for medication administration documentation. You were able to administer several scheduled medications as well as a prn medication for pain. HS

Objective

2. Exemplify professional conduct through self-reflection, responsibility for learning, and goal setting. (1,5,7)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:									S	S	NA	S	NA	S	NA	S
a. Reflect on areas of strength** (Reflecting)							S	NA	S	S	NA	S	NA	S	NA	S
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)							S	NA	S	S	NA	S	NA	S	NA	S
c. Incorporate instructor feedback for improvement and growth (Reflecting).							S	NA	S	S	NA	S	NA	S	NA	S
d. Follow the standards outlined in the FRMCSN policy, “Student Code of Conduct” (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
g. Comply with patient’s Bill of Rights (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).							S	NA	S	S	NA	S	NA	S	NA	S
i. Actively engage in self-reflection. (Reflecting)							S	NA	S	S	NA	S	NA	S	NA	S
Faculty/TA Initials		NS					BL	CB	CB	HS	HS	HS	HS	HS	HS	HS

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

**** Strength/weakness reflection (a,b): Must have different written example each week of clinical/lab. You must explain your plan for how you will improve. Example, “I am having a difficult time with obtaining a manual BP. I will get a BP cuff from Amy and practice manual BP’s with at least three members of my family this week.” Please ensure that you answer this section in-depth with your plan of action. Each week must be different.**

Comments:

I was having a difficult time with confidence in my skill set. I will make sure I refresh my mind of the previous skills tested. I was having a hard time navigating through documenting the pain assessment in the patient room while presently doing the pain assessment, I will take my time when we practice documenting in labs to further my confidence level with the system. **Great job taking time to reflect on an area of improvement for future clinical experiences. It is completely normal to sometimes lack confidence in your overall skill set at the foundational level. As you gain more experience at the bedside, both your confidence and competence will grow stronger. Making time to practice skills outside of the clinical environment is great way to help increase confidence in the clinical setting. A friendly reminder that you are always welcome to practice your Meditech documentation (in the test environment) outside of lab time in the computer lab at the school as well. Keep up all your hard work! BL**

I felt strong with my communication and social skills. I was able to get the patient talking more about situations, and we had good professional conversations to “Break the ice,” so to speak. **Great job! You did an excellent job with your first clinical experience. Although communication may seem simple, it can sometimes be challenging in the hospital setting. You demonstrated strong interpersonal skills by taking the time to converse with your patient during your assessment. Remember, even brief conversations can show that you care and help build rapport, while also providing valuable information for your clinical evaluation. Keep up the great work! BL**

Week 7-8(i) You did a wonderful job reflecting on your first clinical experience in your CDG this week. You provided a nice description of your thoughts and feelings before and after the experience. Keep up all your great work! BL

Week 9- A strength I demonstrated this week was definitely my ability to provide patient care independently. I assisted with hygiene, repositioning, and safely transferring my patient to their chair after breakfast, while ensuring their IV lines and NG tubing were secure. I was able to maintain the patient’s comfort throughout the entire day of my time there, while feeling confident in doing so. **Great job! HS**

One area I would like to improve in is my organization. Although I managed my time well, I occasionally found it difficult to keep track of what and where I wrote notes on my clipboard... My pieces of paper became a cluster of “information dumping” and random notes my instructor gave me, and were not very well organized (not including our SBAR report sheet). I want to continue to develop my organizational skills by keeping patient information and additional notes in separate places. **Be sure to be specific on your plan for improvement, such as I will create a paper to write my notes on during the clinical day and I will review this three times prior to my next clinical. HS**

Week 11- I felt strong in doing the dressing change skill as well as assessing the wound on my patient. I felt very confident, prepared, and excited to perform the skills I had learned in the skills lab on my patient this week. I feel as though I did a good job. **You did an excellent job with the dressing change, and documenting the care provided. Nice job! HS**

One area I want to improve on is patient education, especially when it comes to explaining long-term diabetes management and wound care when my patient was planning on being discharged (specific to my clinical patient). He admitted to not taking good care of himself at home, which made me realize how important clear teaching is. I sometimes hesitate to educate patients because I don’t want to say something wrong, but I want to feel more confident with it. To improve, I plan to review teaching topics and practice explaining topics before my next clinical so I can educate patients more comfortably and effectively. **Education is key in the nursing profession, and this will get easier as you learn more in lecture to expand your knowledge base on the different disease processes. HS**

Week 13- I felt very confident about managing my time accordingly, effectively, and correctly. I was able to allow myself enough time between tasks, which gives me more opportunities to research my patient and be prepared. **You did a nice job this week! You went in immediately after receiving report to get started with your vital signs and assessment and were able to get everything documented in a timely manner. HS**

One area I know I can improve on is passing meds, even though I am learning and giving myself grace with learning to do something new, I would like to be more confident with meds and to feel confident answering any questions that my patient asks me about their medications... I know this will come with time and experience, but I will be making sure I'm fully prepared with all information on each medication by taking more time to research, critically think, and apply it specifically to my patient with my provided resources. **Medication pass will continue to become an easier process after you have more experiences. It will always be something that takes time and full concentration to avoid potential errors. HS**

Final comment- Karsyn, you did an excellent job this semester! You came to clinical each week ready to learn and grow from new experiences. You have grown throughout the semester in your confidence, knowledge, and skill set. You did not get the opportunity to insert, care for, or remove a Foley catheter, so please seek out these opportunities in your MSN semester. I look forward to seeing you continue to grow next semester. Great job this semester! HS

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials
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11/17/2025	Infection	S/HS	N/A
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Note: Students are required to submit one satisfactory care map by 11/17/2025 at 0800. If the care map is not evaluated as satisfactory upon initial submission, the student may revise the care map based on instructor feedback/remediation and resubmit one time by 11/24/2025 at 0800 to receive a satisfactory evaluation. ***See Attached Nursing Care Map Grading Rubric**

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Student Name: Karsyn Brewer		Course Objective: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*					
Date or Clinical Week: 11/17/2025							
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 provided a nice list of 10 abnormal assessment findings of your patient. You provided a significant list abnormal lab/diagnostic findings and risk factors.
	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 provided a good list of priorities for the patient and selected an appropriate top priority. Others to consider would be pain, and knowledge deficit. You stated an appropriate goal for the patient. You highlighted all of the related data to support the top priority problem. You did a nice job with the potential complications that could occur and the signs and symptoms to monitor the patient for.
	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 provided a thorough list of interventions specific to the priority problem and to the patient. You prioritized them and included a frequency for all but one. You provided a rationale appropriate for each intervention.
	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	
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.	>75% complete	50-75% complete	<50% complete	0% complete	3	You reassessed all of the abnormal assessment and lab/diagnostic findings. You determined that the plan of care could be discontinued.
	15. Evaluation includes one of the following statements: <ul style="list-style-type: none"> • Continue plan of care • Modify plan of care • Terminate plan of care 	Complete			Not complete	3	

Reference

An in-text citation and reference are required. **Both included in care map. HS**
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: Karsyn,
Great job on your first nursing care map! You were able to identify the priority problem based off of your abnormal assessment, lab findings/diagnostic tests and risk factors. You were able to determine interventions specific to the priority problem and individualize them to the patient. You were then able to re-evaluate your initial abnormal findings. Nice job! HS

Total Points:45/45

Faculty/Teaching Assistant Initials: HS

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

Student Name: Karsyn Brewer					
Performance Codes: S: Satisfactory U: Unsatisfactory			Evaluation *(Refer to LCJR)	Faculty Initials	Remediation Date/Evaluation/Initials
Date: 11/11/25	Simulation #1 (2,3,5,8) *	Scenario	S	HS	N/A
		Survey	S	HS	N/A
Date: 11/24/25 or 11/25/25	Simulation #2 (2,3,5,7,8) *	Scenario	S	HS	N/A
		Survey	S	HS	N/A

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Karsyn Brewer (M), Thomas Dendinger (A)

GROUP #: 5

SCENARIO: NF #1

OBSERVATION DATE/TIME(S): 11/11/2025 0800-0900

CLINICAL JUDGMENT COMPONENTS						OBSERVATION NOTES
<p>NOTICING: (1,2,4,6,7) *</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>Confirmed name and DOB, compared with wristband. Noticed BP 130/74, Spo2 of 89% on RA, temp 99.2, HR 78, RR 20 Focused observation on pain, reported as 0/10. Noticed wheezing when auscultating lung sounds (set as crackles). On re-assessment, noticed crackles. Noticed patient's cough. Asked about pain with cough. Asked patient about discomfort with abdomen palpation. Did not notice tissues with sputum. Did not notice redness to the heels. Asked patient about preference to take guaifenesin. Confirmed name and DOB with wristband prior to administering medications. Remember to ask about allergies.</p>
<p>INTERPRETING: (1,2,4,6,7) *</p> <ul style="list-style-type: none"> Prioritizing Data: E A D B 						<p>Prioritized vital signs when entering the room. Did not prioritize oxygen administration for Spo2 of 89% initially. Prioritized head to toe assessment after vital signs. Made sense of lung sounds being abnormal.</p>

<ul style="list-style-type: none"> • Making Sense of Data: E A D B 	<p>Med nurse prioritized oxygen administration for shortness of breath and low Spo2. Prioritized elevating HOB, coughing and deep breathing. Did not make sense of MAR related to albuterol already being administered by RT initially. Recognized already administered. Made sense of PRN guaifenesin. Made sense of it being an expectorant. Made sense of medications to be administered in AM. Made sense of dosages to be administered.</p>
<p>RESPONDING: (1,2,3,4,5,6,7) *</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>Introduced self and role when entering the room. Communicated vital sign results with the patient. Remember to raise the bed for body mechanics/safety. HEENT assessment performed. Looked in the mouth, felt around the ears and neck. Conjunctiva and sclera assessed. Neuro assessment performed (smile, raise eyebrows, remember to ask orientation questions). PERRLA noted. Remember to ask about numbness and tingling. Communicated with patient regarding assessments to be performed. Cardiovascular assessment performed (auscultated heart sounds). Respiratory assessment performed (auscultated anteriorly, laterally, posteriorly). Remember to ask about any respiratory symptoms such as shortness of breath, sputum production, etc. Good teamwork to elevate HOB for shortness of breath. Encouraged patient to cough and deep breath for low Spo2. ROM assessed in upper extremities. Initiated oxygen for low Spo2 at 2L per NC. Abdomen assessed, looked, listened, palpated. Asked about last BM, asked about flatus presence. Assessed GU system. Assessed urinary pattern, characteristics, and symptoms. Assessed skin of the lower extremities. Palpated for temperature, edema. Assessed pedal pulses bilaterally. Assessed ROM in lower extremities. Assessed push/pull of the feet. Remember to assess cap refill. Remember to assess bony prominence for skin breakdown. Communicated assessment results, ensured call light was within reach. Re-evaluated Spo2 after oxygen administration. Med nurse introduced self and role when entering the room. Used BMV scanner for med administration for safety. Educated patient on medications to be administered. Atorvastatin stated for heart (cholesterol). Educated on multivitamin. Educated on guaifenesin. Educated not to chew guaifenesin. Educated on potential side effects. Interrupted med administration for fall/safety questions. Assessed room for safety. Re-assessed lung sounds after interventions performed for low SpO2. Water provided for medication administration, elevated HOB for med administration. Good rapport with the patient. Educated on water intake for cough and secretions.</p>
<p>REFLECTING: (1,2,4,5,6,8) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B 	<p>Everyone participated well in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas for improvement and discussed ways to make improvements in the future. The assessment nurse and medication nurse demonstrated</p>

<ul style="list-style-type: none"> • Commitment to Improvement: E A D B 	<p>collaborative communication between the team members and the patient.</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> <ul style="list-style-type: none"> • Demonstrate collaborative communication with patients and healthcare team members (1,3,8) * • Execute accurate and complete head to toe assessment (1,5,6,8) * • Select and administer prescribed oral medications following the six rights (1,4,5,7) * • Identify and provide accurate patient education (1,2,3,4,5,7) * 	<p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Attempts to monitor a variety of subjective and objective data but is overwhelmed by the array of data; focuses on the most obvious data, missing some important information. Identifies obvious patterns and deviations, missing some important information. 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 simple, common, or familiar situations, is able to compare the patient’s data patterns with those known and to develop or explain intervention plans.</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 the most obvious data; monitors progress but is unable to make adjustments as indicated by the patient’s response. 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> <p>Satisfactory completion of NF Simulation #1.</p>

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: O=Observer

STUDENT NAME(S) AND ROLE(S): Karsyn Brewer (O), Thomas Dendinger (O)

GROUP #: 6

SCENARIO: NF #2

OBSERVATION DATE/TIME(S): 11/25/2025 0800-0900

<p>CLINICAL JUDGMENT COMPONENTS</p> <p>NOTICING: (1,2,4,6,7) *</p> <ul style="list-style-type: none"> Focused Observation: E A D B 	<p><u>OBSERVATION NOTES</u></p> <p>Noticed several observations in students' performance, both positive and negative.</p> <p>Noticed several abnormal assessment findings.</p> <p>Noticed numerous important interventions performed.</p> <p>Noticed the need for better hand hygiene.</p> <p>Noticed the need to prioritize applying oxygen to the patient sooner.</p> <p>Noticed the need to improve communication when providing education.</p> <p>Noticed the importance of verifying the patient's allergies before administering medications.</p> <p>Noticed the need to aspirate for the IM injection.</p> <p>Noticed the importance of collaboration amongst team members.</p>
<p>REFLECTING: (1,2,4,5,6,8) *</p> <ul style="list-style-type: none"> Evaluation/Self-Analysis: E A D B Commitment to Improvement: E A D B 	<p>Observers did a great job actively paying attention to detail throughout scenario. Constructive feedback was provided related to areas for improvement, as well as recognition for interventions performed well. Good discussion and support amongst those performing in the scenario and the observers.</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> <ul style="list-style-type: none"> Demonstrate collaborative communication with patients and healthcare team members (1,3,8) * Differentiate between need for complete head to toe versus focused assessment and execute accordingly (1,5,6,8) * Select and administer prescribed oral and intramuscular medications following the six rights (1,4,5,7) * Identify and provide accurate patient education (1,2,3,4,5,7) * Recognize patient oxygenation and pain control needs and provide appropriate interventions (2,4,5,6,7) * 	<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.</p> <p>Reflecting: Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives. Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses.</p> <p>Satisfactory completion of NF Simulation #2.</p>

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

Student Name: Karsyn Brewer

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U:Unsatisfactory	Lab Skills										
	Week 1 (4)*	Week 2 (2,3,5,8)*	Week 3 (2,3,4,5,8)*	Week 4 (2,3,4,5,8)*	Week 5 (2,3,4,5,8)*	Week 6 (1,2,3,4,5,8)*	Week 7 (2,3,4,5,8)*	Week 8 (2,3,4,5,8)*	Week 9 (2,3,4,5,8)*	Week 10 (2,3,4,5,6,8)*	Week 11 (2,5,7)*
	Date: 8/18/2025	Date: 8/26/2025	Date: 9/5/2025	Date: 9/10/2025	Date: 9/17/2025 9/18/2025	Date: 9/24/2025	Date: 10/1/2025	Date: 10/8/2025	Date: 10/15/2025	Date: 10/22/2025	Date: 10/28/2025
Evaluation:	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	HS	HS	NS	AR	BL	HS	NS	NS	HS	AR	AR
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

***Course Objectives**

Comments:

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

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

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

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

Appropriate level of skill during guided practice with measurement of radial and brachial pulses, along with manual blood pressure.

Vital signs skills will be observed 1:1 with faculty during Week 3. Keep up the good work! HS

Week 3 (Vital Signs):

Awesome work in the lab this week! You satisfactorily completed the vital sign check off during 1:1 observation, including oral temperature, radial pulse, respiratory rate, pulse oximetry, and blood pressure measurement. During the blood pressure measurement, you accurately obtained two out of three blood pressure results on the Vital Sim manikin for a satisfactory evaluation. The first blood pressure measurement was set at 134/78, and you identified it as 132/78, which was well within range for a satisfactory result. The second measurement was set at 110/68 and you interpreted it as 118/68, which was slightly out of range for a satisfactory result. The third measurement was set at 148/90, and you interpreted it as 150/92 – spot on! You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic vital sign assessments. You did not require any prompts throughout the check-off, well done! You provided accurate detail in your communication with the “patient”. Your documentation was 100% accurate. Keep up the great work!! NS

Week 4 (Assessment):

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

Week 5 (Assessment; Mobility):

Excellent job in lab this week! You demonstrated a systematic and thorough approach to the basic head to toe assessment. Your performance was organized, comprehensive, and overall very well done. Two prompts were required—one to assess extremity sensation (numbness, tingling, burning, etc.) and another to inspect breathing pattern. Your communication style was professional, clear, and approachable, creating a positive and informative interaction. Great job! BL

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2025

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

I was given the opportunity to review my final clinical ratings in each course competency. I was given the opportunity to ask questions about my clinical performance. I have the following comments to make about my clinical performance/final clinical evaluation:

I don't have any specific comments about my clinical performance other than I am pleased with how my experience was; I learned a lot, observed, and got to do more, which was very fulfilling for me. I'm happy with my experience overall.

Student eSignature & Date: ___Karsyn Brewer 12/1/2025___