EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2018

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Jennifer Pence Chapin

Semester: Fall

Final Grade: Satisfactory/Unsatisfactory

Date of Completion: 12/5/18

Faculty: **Kelly Ammanniti, MSN, RN; Brian Seitz, MSN, RN**
Teach Assistant: Elizabeth Woodyard, BSN, RN, CRN

Faculty eSignature:

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 on the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, or U". 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, the following week it must be addressed with a comment as to why it is no longer a "U". If the student does not state why the "U" is corrected, then it will be another "U" until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. If the final performance code is unsatisfactory in any one of the competencies, a grade of unsatisfactory is given. If a pattern of unsatisfactory performance occurs after performing the competency satisfactorily, this also constitutes a grade of unsatisfactory. An unsatisfactory as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. 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

Absence: (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)

Faculty's Name	Initials
Kelly Ammanniti	KA
Brian Seitz	BS
Elizabeth Woodyard	EW

8/9/18 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 instructor 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

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**
	8/24	8/31	9/7	9/14	9/21	9/28	10/5		10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30		
Competencies: a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.	NA	NA	NA	S	S	S												
b. Provide care using developmentally-appropriate communication.	NA	NA	NA	S	S	S												
c. Use systematic and developmentally appropriate assessment techniques.	NA	NA	NA	S	S	S												
d. Describe safety measures for various stages of development. (i. e. monitoring fall risks, restraints, and DVT assessment)	NA	NA	NA	S	S	S												
e. Identify stage of growth and development.	NA	S	NA	S	S	S												
	EW	EW	EW	EW	EW													
Clinical Location Age of patient		EC 31 MONTHS		OB 1 DAY OLD	OB 29 AND 3 DO Headstart	ER 3YO												

Comments:

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

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)* (Continued) S																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/24	8/31	9/7	9/14	9/21	9/28	10/5		10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30		
Competencies: **f.** Describe psychological changes in response to the expectant mother's pregnancy. **Maternal**	NA	NA	NA	S	S	NA												
g. Discuss prenatal influences on the pregnancy. **Maternal**	NA	S	NA	S	S	NA												
h. Identify the stage and progression of a woman in labor. **Maternal**	NA	NA	NA	S	S	NA												
i. Discuss family bonding and phases of the puerperium. **Maternal**	NA	S	NA	S	S	NA												
j. Identify various resources available for children and the childbearing family.	NA	S	NA	S	S	S												
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.	NA	S	NA	S	S	S												
l. Respect the centrality of the patient/family as core members of the health team.	NA	S	NA	S	S	S												
	EW	EW	EW	EW	EW													

Comments:

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

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. (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**
	8/24	8/31	9/7	9/14	9/21	9/28	10/5		10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30		
a. Engage in discussions of evidenced-based nursing practice.	NA	~~NA~~S	NA	S	S	S												
b. Perform nursing measures safely using Standard precautions.	NA	NA	NA	S	S	S												
c. Perform nursing care in an organized manner recognizing the need for assistance	NA	NA	NA	S	S	S												
d. Practice/observe safe medication administration.	NA	NA	NA	NA	S	S												
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.	NA	NA	NA	NA	S	S												
f. Utilize information obtained from patients/families as a basis for decision-making.	NA	NA	NA	S	S	S												
	EW	EW	EW	EW	EW													

Comments:
WK 2 2a Discussion post showed demonstration of evidence-based nursing practice. EW

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

Objective																		
3. Summarize the legal, moral and ethical issues related to care of children and the child-bearing 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**
	8/24	8/31	9/7	9/14	9/21	9/28	10/5		10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30		
a. Act with integrity, consistency, and respect for differing views.	NA	S	NA	S	S	S												
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.	NA	S	NA	S	S	S												
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"	NA	S	NA	S	S	S												
d. Critique examples of legal or ethical issues observed in the clinical setting.	NA	S	NA	S	S	S												
	EW	EW	EW	EW	EW													

Comments:

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

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgement 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**
	8/24	8/31	9/7	9/14	9/21	9/28	10/5		10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30		
a. Develop one priority nursing diagnosis.	NA	NA	NA	NA	S	S												
b. 4Formulate measurable goals for nursing diagnosis. **(noticing, interpreting, responding)**	NA	NA	NA	NA	S	S												
c. Formulate specific, individualized, and evidence-based interventions. **(noticing, interpreting, responding)**	NA	NA	NA	NA	S	S												
d. Evaluate plan of care, patient achievement of goal and revising plan when necessary **(noticing, interpreting, responding, reflecting)**	NA	NA	NA	NA	S	S												
e. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)	NA	NA	NA	NA	S	S												
f. Summarize witnessed examples of patient/family advocacy.	NA	NA	NA	S	S	S												
g. Provide patient centered and developmentally appropriate teaching.	NA	NA	NA	S	S	S												
h. Analyze the involved pathophysiology of the patient's disease process. **(noticing, interpreting, responding)**	NA	NA	NA	S	S	S												
	EW	EW	EW	EW	EW													

WK5 4C,D,F,G Jennifer, you did a very good job developing a plan of care to meet the needs of the both the mother and her infant. You were an advocate for the mother to other nurses. You should be very proud of the job you did this week.

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

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgement 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	Makeup	**Final**
	8/24	8/31	9/7	9/14	9/21	9/28	10/5		10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30		
i. Correlate the diagnostic tests with the patient's disease process. **(noticing, interpreting, responding)**	NA	NA	NA	NA	S	S												
j. Correlate the pharmacotherapy in relation to the patient's disease process. **(noticing, interpreting, responding)**	NA	NA	NA	NA	S	S												
k. Correlate the medical treatment in relation to the patient's disease process. **(noticing, interpreting, responding)**	NA	NA	NA	S	S	S												
l. Correlate the nutritional needs/diet in relation to the patient's disease process. **(noticing, interpreting, responding)**	NA	NA	NA	S	S	S												
m. Correlate the patient's growth and developmental level in relation to the patient's disease process. **(noticing, interpreting, responding)**	NA	NA	NA	S	S	S												
	EW	EW	EW	EW	EW													

*Advocacy is speaking on behalf of a patient in order to protect their rights and help them obtain needed information and services. i.e., the nurse calls the Dr for a pain medication because the patient is noticeably uncomfortable and has nothing ordered for pain.

Comments:

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

Objective																		
5. Collaborating professionally with members of the health care team, child-bearing 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**
	8/24	8/31	9/7	9/14	9/21	9/28	10/5		10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30		
a. Demonstrate interest and enthusiasm in clinical activities.	NA	S	NA	S	S	S												
b. Evaluate own participation in clinical activities.	NA	S	NA	S	S	S												
c. Present at all clinical sites neatly groomed and with appropriate identification and attire (according to school uniform policy).	NA	S	NA	S	S	S												
d. Communicate professionally and collaboratively with members of the healthcare team.	NA	NA	NA	S	S	S												
e. Document assessment findings, interventions, and outcomes accurately in the electronic health record.	NA	NA	NA	S	S	S												
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)	NA	NA	NA	S	S	S												
g. Consistently and appropriately post comments in clinical discussion groups.	NA	S	NA	S	S	S												
	EW	EW	EW	EW	EW													

Comments:

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

Wk2 5G Great discussion post; you thoroughly answered the questions. Very interesting case. EW
WK4 5G Discussion questions answered thoroughly. EW

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

Objective																		
6. Critique own strengths and areas for improvement modifying behaviors accordingly to achieve personal and professional goals. (7,8)* **S**																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/24	8/31	9/7	9/14	9/21	9/28	10/5		10/12	10/19	10/26	11/2	11/9	11/16	11/23	11/30		
a. Recognize areas for improvement and goals to meet these needs.	NA	S	NA	S	S	S												
b. Accept responsibility for decisions and actions.	NA	S	NA	S	S	S												
c. Demonstrate evidence of growth, and self-confidence.	NA	S	NA	S	S	S												
d. Demonstrate evidence of research in being prepared for clinical.	NA	S	NA	S	S	S												
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.	NA	S	NA	S	S	S												
f. Describe initiatives in seeking out new learning experiences.	NA	S	NA	S	S	S												
g. Demonstrate ability to organize time effectively.	NA	S	NA	S	S	S												
h. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions.	NA	S	NA	S	S	S												
i. Demonstrates growth in clinical judgment.	NA	S	NA	S	S	S												
	EW	EW	EW	EW	EW													

Comments:

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

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2018
Skills Lab Competency Tool

Skills Lab Competency Evaluation Peformance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Lab Skills**														
	Adult Head to Toe Assessment	oeNewborn Head	Child Head to Toe Assessment	, (*1, 2,Newborn	Newborn Head Assessment (*1,	ment (*1, Fundus	4)Baby Bath (*2,	Leopold's (*1, 2,	ssment (*1,Breast	6)APGAR (*2, 3,	5, 6)Med. Admin.	(*2, 4, 5)Kegals	Pregnancy History 4, 5, 6)	)Pain Assessment	, 2, 4, 5)Bonding
	Date: 8/21	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**
Evaluation	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW
Remediation: Date/Evaluation/Initials	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

* Course Objectives

Skills Lab Competency Evaluation Peformance Codes: **S**: Satisfactory **U**: Unsatisfactory		**Lab Skills**											
	sment (*1,Lochia	5, 6)Babies Video	(*1, 2,Gestational	ConsentInformed	2)Child Nutrition	(*1,2,3,5)Autism	)Immunizations(*	luesPediatric Lab	Pediatric Vital Signs 4,5)	5)Lead Poisoning	,5)Broselow Tape	6)Health Literacy	*1,2,3,5,6)Safety
	Date: 8/21	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**
Evaluation	S	S	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW	EW
Remediation: Date/Evaluation/Initials	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

* Course Objectives

Comments: You satisfactorily completed all competencies that were included in the Maternal Child Nursing Lab Day. You actively participated in the in Newborn and child head to toe assessment, newborn bath, fundal assessment, lochia assessment, Leopold's maneuver, breast assessment, medication administration, safety assessment, and Broselow tape stations. You also demonstrated your knowledge on newborn thermoregulation, newborn head assessment, APGAR scoring, Kegel's exercises, Pregnancy

history, pain assessment, mother-newborn bonding, gestational diabetes, informed consent, child nutrition, immunizations, pediatric lab values, pediatric vital signs, lead poisoning, and health literacy. You satisfactory completed your head-to-toe check-off. KA/BS/EW

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2018
Simulation Evaluations

vSim Evaluation Peformance Codes: **S**: Satisfactory **U**: Unsatisfactory	**VSim**									
	5, 6)Maternity Case 3	5, 6)Maternity Case 2	5, 6)Maternity Case 1	, 6)Maternity Case 5	, 6)Maternity Case 4	5, 6)Pediatric Case 2	5, 6)Pediatric Case 3	5, 6)Pediatric Case 5	5, 6)Pediatric Case 1	5, 6)Pediatric Case 4
	Date: 8/28	**Date: 9/17**	**Date: 9/24**	**Date: 10/1**	**Date: 10/8**	**Date: 10/22**	**Date: 10/29**	**Date: 11/5**	**Date: 11/9**	**Date: 11/19**
Evaluation	S									
Faculty Initials	EW									
Remediation: Date/Evaluation/Initials	N/A									

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: OBSERVATION DATE/TIME: SCENARIO #: 1 EFM

CLINICAL JUDGMENT	**OBSERVATION NOTES**
COMPONENTS NOTICING: (1, 2, 5)*	At the end of the simulation you were able to identify various fetal heart rate patterns.
• Focused Observation: E A D B	You were able to identify fetal heart rate patterns that were deviations that could potentially be harmful to the fetus.
• Recognizing Deviations from Expected Patterns: E A D B	Your group worked together to introduce yourselves, identify the patient, perform a focus assessment including a pain assessment, and gather a thorough pregnancy history.
• Information Seeking: E A D B	

INTERPRETING: (2, 4)* • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Based on the fetal heart rate patterns you were able to identify the appropriate treatment measures to correct the deviations. Through class discussion you were able to identify any additional steps your group may have missed and the appropriate order to perform all actions.
RESPONDING: (1, 2, 3, 5)* • 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	Correct steps to care for the various fetal heart rate patterns were identified. Communication to health care providers was identified including providing report utilizing SBAR. Able to identify different categories for heart rate patterns. Identified accelerations, late decelerations, variable decelerations, and early decelerations. Your group provided the necessary education to the patient to help address her concerns and to help her stay involved in the process.
REFLECTING: (6)* • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Reflection of the simulation shows retention and identification of materials and areas that need additional practice. Demonstrated ability to provide constructive criticism to classmates without being critical.
SUMMARY COMMENTS: **E= Exemplary** **A= Accomplished** **D= Developing** **B= Beginning**	**Comments** **You are satisfactory for this simulation.** Great job participating in the first simulation. Reading, identifying, and applying the correct techniques in fetal heart rate patterns is a skill that can take time to develop. You are well on your way.

/scholar_extra2/e360/apps/v8/releases/1537981967/public/upload/firelands/media/dropbox/61693-2018MCNTOOLWEEK6JenniferPenceChapin.docx

Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO #2 Shoulder Dystocia

STUDENT NAME: OBSERVATION DATE: 9/4/18

CLINICAL JUDGMENT	OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)* • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B	Recognition of a difficult delivery was the priority observation. Should dystocia was accurately observed. Assessment questions were identified correctly.
INTERPRETING: (2, 3)* • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Verbalization of the correct steps of HELPERR pneumonic.
RESPONDING: (2, 3, 4, 5, 6)* • 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	Correct steps to care for the patient experiencing shoulder dystocia were identified and verbalized. Clear communication with the patient and health care team was practiced. Follow up care was reflected on.

SUMMARY COMMENTS:	Comments
E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric **Developing to accomplished is required for satisfactory completion of this simulation.**	**You are satisfactory for this simulation.**

* Course Objectives **Lasater Clinical Judgment Rubric Scoring Sheet**

STUDENT NAME: OBSERVATION DATE/TIME: 9/17/18 SCENARIO #: 3 Pregnancy Complications

CLINICAL JUDGMENT	OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)*	After the first scenario, the class was able to identify all the critical errors that the nurse made during patient care. The class coached the nurse on the correct communication techniques and assessments needed to care for a patient experiencing complications during pregnancy.
• Focused Observation: E A D B	
• Recognizing Deviations from Expected Patterns: E A D B	
• Information Seeking: E A D B	
INTERPRETING: (2, 4)*	Using the information from the scenario your group was able to determine areas of teaching for the pregnant mother.
• Prioritizing Data: E A D B	
• Making Sense of Data: E A D B	

RESPONDING: (1, 2, 3, 5)* • 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	After determining teaching needs for the patient, your group was able to develop a prioritized and well thought out education plan for the patient.
REFLECTING: (6)* • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Reflection on the scenario brought up discussion on the kind of nurse you would want to be and how you would not want to act toward a patient.
SUMMARY COMMENTS: **E= Exemplary** **A= Accomplished** **D= Developing** **B= Beginning**	**Comments** **You are satisfactory for this simulation.** Great job participating in this group scenario. You actively participated in all areas of the scenario. Terrific job!

/scholar_extra2/e360/apps/v8/releases/1537981967/public/upload/firelands/media/dropbox/61693-2018MCNTOOLWEEK6JenniferPenceChapin.docx

EVALUATION OF CLINICAL PERFORMANCE TOOL

Maternal Child Nursing – 2017
Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

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

Student eSignature & Date: _____