

EVALUATION OF CLINICAL PERFORMANCE TOOL

Nursing Foundations – 2018

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

Student: Zachary Schoen

Semester: Fall

Faculty: Frances Brennan, MSN, RN;
 Dr. Michelle Bussard, PhD, RN, ACNS-BC, CNE; Nicole Lawrence, MSN, RN-BC, CNE;
 Amy Rockwell, MSN, RN; Nick Simonovich, BSN, RN; Lara, Wilken, MSN, RN

Final Grade: Satisfactory/Unsatisfactory

Date of Completion: December 5, 2018

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:

- Lasater Clinical Judgment Rubric
- Careplan Grading Rubric
- Documentation
- Skills Demonstration
- Administration of Medications
- Evaluation of Clinical Performance Tool
- Clinical Discussion Group Grading Rubric
- High-Fidelity Simulation
- Skills Lab Competency Tool
- Skills Lab Checklist
- Faculty Feedback

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
Faculty’s Name			Initials
Frances Brennan			FB
Dr. Michelle Bussard			MB
Nicole Lawrence			NL
Nicholas Simonovich			NS
Amy Rockwell			AR
Lara Wilken			LW

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/patients/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 boxes do not need a student evaluation rating.**

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	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:										S	S							
a. Identify spiritual needs of patient (Noticing).										S	S							
b. Identify cultural factors that influence healthcare (Noticing).										S	S							
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).			NA	NA	S	S		S		S	S							
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).			NA	NA	S	S		S		S	S							
			NS	NL	NL	NL		NL		LW								
Clinical Location					3T	3T				3N	3N							

Comments

Week 5-In the future, please remember to put the clinical location each week above. I added it for you in week 5. NL

Wk. 9 1(c): Zach, you did a great job this week prioritizing your patient's care to meet his needs, you were aware he wanted to go home and so you did what you needed to do in a timely manner without disturbing him too much. Great job! □ LW

* End-of-Program Student Learning Outcomes

Objective																		
2. 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	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:						NI		NI		S	S							
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						NI		NI		S	S							
b. Use correct technique for vital sign measurement (Responding).			NA	NA	S	S		S		S	S							
c. Conduct a fall assessment and institute appropriate precautions (Responding).						S		S		S	S							
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).										S	S							
e. Collect the nutritional data of assigned patient (Noticing).										NA	NA							
f. Demonstrates appropriate insertion & maintenance of NG tube (Responding).										NA	NA							
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).																		
			NS	NL	NL	NL		NL		LW								

Comments

Week 5 (3b)-You noticed that the blood pressure cuff in the room was not the correct size. You understood that this could result in an inaccurate blood pressure reading. You responded by retrieving the correct size cuff. Great job. NL

Wk. 9 2(b): Zach, you did an excellent job obtaining your vital signs as well as performing your head to toe assessment both confidently and promptly! ☐ LW

* End-of-Program Student Learning Outcomes

Objective																		
3. 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	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:						NA		NA		S	S							
a. Receive report at beginning of shift from assigned nurse (Noticing).						NA		NA		S	S							
b. Hand off (report) pertinent, current information to the next provider of care (Responding).			NA	NA	NA	NA		NA		S	NI							
c. Use appropriate medical terminology in verbal and written communication (Responding).			NA	NA	S	S		S		S	S							
d. Report promptly and accurately any change in the status of the patient (Responding).			NA	NA	S	S		S		S	S							
e. Communicate effectively with patients and families (Responding).			NA	NA	S	S		S		S	S							
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).			NA	NA	S	S		S		S	S							
			NS	NL	NL	NL		NL		LW								

Comments

Week 5 (3e)-You communicated to your patient what you would be doing prior to actually doing it. This aids in the patient's comfort and helps them to gain trust in you. Well done. NL

Week 6 (3c)-Your communication with your patient was composed, respectful, and friendly. It was apparent that your patient enjoyed talking with you! NL

Wk. 9 3(d,e,f): Zach, This week you noticed that your patient was having chest pain, you interpreted this something to be communicated to your instructor, you responded by informing the nurse and by recording what actions you took in a nurse's note. Great use of clinical judgment this week, as well as patient advocacy! Keep up the good work! LW

* End-of-Program Student Learning Outcomes

Objective																		
4. 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	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:						S		S		S	NI							
a. Document the head to toe assessment for assigned patient (Responding).										S NI	NI							
b. Document the patient response to nursing care provided (Responding).										S NI	NI							
c. Document according to policy (Responding).			NA	NA	S	S		S		S	S							
d. Access medical information of assigned patient in Electronic Medical Record (Responding).		S	NA	NA	S	S		S		S	S							
e. Show beginning skill in accessing patient education material on intranet (Responding).		S								S	S							
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).											S							
		NL	NS	NL	NL	NL		NL		LW								

Comments

Week 2 – orientation to Meditech 6.1

Week 5 (4d)-You accurately documented your vital signs in a timely manner. Also you remembered how to remove your patient from your status board at the end of the day. Great job on this first step of documentation in the real clinical environment! NL

Wk. 9 4(a,b): Zach, while you did a great job on clinical you still needed guidance in your documentation, this is to be expected for your very first clinical. The idea is that you recognize this, evaluate it and then improve on it in the upcoming weeks. I have no doubt that you will! You are already off to a great start! LW

* End-of-Program Student Learning Outcomes

Objective																		
5. 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	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:																		
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).			NA	NA	S	S		S		S	S							
b. Apply the principles of asepsis and standard precautions (Responding).			NA	NA	NI	S		S		S	S							
c. Demonstrates appropriate skill with foley catheter insertion and removal (Responding).										NA	NA							
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).			NA	NA	S	S		S		S	S							
e. Organize time providing patient care efficiently and safely (Responding).			NA	NA	S	S		S		S	S							
f. Manages a patient in physical restraints according to hospital policy (Responding).										NA	NA							
g. Manages hygiene needs of assigned patient (Responding).										NA	S							
h. Demonstrate appropriate skill with wound care (Responding).										NA	NA							
i. Document the location of fire pull stations and fire extinguishers.** (Interpreting).						S		S										

		NS	NL	NL	NL		NL		LW								
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Comments

I noticed two fire extinguishers on 3T. One was located at the end of the hallway near room 3010, while at the opposite end of the same hallway was another fire extinguisher, right outside room 3037. NL

****You must document the location of the pull station and extinguisher here for clinical #2 experience.**

* End-of-Program Student Learning Outcomes

Objective																				
Objective #6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*																				
	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final		
Clinical Experience Nursing care plan not appropriate to patient situation = 3 and automatic unsatisfactory rating						Total Points Comments														
Competencies: (3 points total) a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding).						Total Points Comments					NI									
b. Development of clinical judgment in high-fidelity simulation scenarios. Outcome: (Noticing, Interpreting, Responding, Reflecting)						Total Points Comments:														
c. Simulation Remediation (if needed)																				
Time Frame (1)																				
Nursing Interventions: (8 points total) Prioritized (1) What (1) How Often (1) When (1) Individualized (1) Realistic (1) Rationale (1) All pertinent interventions listed (1)						Total Points Comments:													Comments Week 10:	
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue/terminate (1) Signature (1)						Total Points Comments:														
Total possible points = 22 18-22 = Satisfactory care plan 13-17 = Needs improvement care plan <13 = Unsatisfactory care plan						Total Points for entire Care plan = Comments:														

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	
**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Total Points Comments
Nursing Diagnosis: (3 points) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points Comments
Goal and Outcome (6 points total) Goal Statement (1 point) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points Comments:
Nursing Interventions: (8 points total) Prioritized (1) What (1) How Often (1) When (1) Individualized (1) Realistic (1) Rationale (1) All pertinent interventions listed (1)	Total Points Comments:
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue/terminate (1) Signature (1)	Total Points Comments:
Total possible points = 22 18-22 = Satisfactory care plan 14-17 = Needs improvement care plan <13 = Unsatisfactory care plan	Total Points for entire Care plan = Comments:

Week 12:

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	
**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Total Points Comments
Nursing Diagnosis: (3 points) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points Comments
Goal and Outcome (6 points total) Goal Statement (1 point) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points Comments:
Nursing Interventions: (8 points total) Prioritized (1) What (1) How Often (1) When (1) Individualized (1) Realistic (1) Rationale (1) All pertinent interventions listed (1)	Total Points Comments:
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue/terminate (1) Signature (1)	Total Points Comments:
Total possible points = 22 18-22 = Satisfactory care plan 14-17 = Needs improvement care plan <13 = Unsatisfactory care plan	Total Points for entire Care plan = Comments:

Week 13:

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	
**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Total Points Comments
Nursing Diagnosis: (3 points) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points Comments
Goal and Outcome (6 points total) Goal Statement (1 point) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points Comments:
Nursing Interventions: (8 points total) Prioritized (1) What (1) How Often (1) When (1) Individualized (1) Realistic (1) Rationale (1) All pertinent interventions listed (1)	Total Points Comments:
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue/terminate (1) Signature (1)	Total Points Comments:
Total possible points = 22 18-22 = Satisfactory care plan 14-17 = Needs improvement care plan <13 = Unsatisfactory care plan	Total Points for entire Care plan = Comments:

Week 15:

Objective																		
7. 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	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:																		
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).																		
b. Recognize patient drug allergies (Interpreting).																		
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).																		
d. Administer oral, intra-muscular, subcutaneous, and intradermal medications using correct techniques (Responding).																		
e. Check the patient record for time of last dose before giving a prn dose (Interpreting).																		
f. Assess the patient response to prn medications (Responding).																		
g. Document medication administration appropriately (Responding).																		

Comments

* End-of-Program Student Learning Outcomes

Objective																		
8. 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	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies:			S	NA	S	S		S		S	S							
a. Reflect on areas of strength** (Reflecting)			NA															
b. Reflect on areas for self-growth with a plan for improvement.** (Reflecting)			S	NA	S	S		S		S	S							
c. Incorporate instructor feedback for improvement and growth (Reflecting).			S	NA	S	S		S		S	S							
d. Follow the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care" (Responding).			S	NA	S	S		S		S	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		S		S	S							
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).			S	NA	S	S		S		S	S							
g. Comply with patient's Bill of Rights (Responding).			NA	NA	S	S		S		S	S							
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).			NA	NA	S	S		S		S	S							
i. Actively engage in self-reflection. (Reflecting)			S	NA	S	S		S		S	S							
j.			NS	NL	NL	NL		NL		LW								

For my strengths this week I believe I did well in deflating the Sphygmomanometer valve efficiently and at a rate that was not too fast and not too slow. In auscultating for the systolic and diastolic sounds, I was able to effectively hear and state the values correctly.

As for my weakness, I did have a rather tough time palpating the Brachial artery. This was something that I practiced on myself and found it difficult to find the correct area. I will seek to improve on this task by further practicing on myself, my classmates in lab, and family members. I will search online for helpful videos and websites that showcase the correct or general area of the artery. I did have an easier time for the Radial pulse, but still did have some trouble/lengthy situations where it did take a decent amount of time to locate. The actions that I will take for improving palpation of the Brachial artery are identical to that of the Radial.

Week 3 Objective 8- Keep in mind this is the clinical evaluation tool, and although you may have addressed some of these competencies in the skills lab, they should not be addressed within the clinical evaluation. Since you did not have a clinical experience this week, the competencies have been changed to NA. Please refer to the skills lab evaluation for items pertaining to the lab experience this week. Thanks and keep up the hard work! NS

Week 5 Objective 8 A: In reflecting on my areas of strength, I was able to communicate with my patient in a way that benefited the both of us. When it came to my assessment of the patient's vital signs, I shared the results with her as soon as they were taken. Upon revealing to her what they were, I made sure to ask her if she had any concerns or questions with the readings. Her BP reading was rather high in terms of the normal variation (161/80). In noting this, I was aware that the values were high and found out that she had been running on the higher side during her stay (150 SBP). After communicating this finding with the current nurse, I did find that the patient has a history of hypertension and was taking medications for that. **Wonderful strength, I agree! NL**

Week 5 Objective 8 B: As for a weakness of mine, I realized that I did not provide my patient with privacy for my assessment. Whether it be nerves or feeling narrowed in on making sure I did everything in the correct manner, I failed to pull the curtain. To make sure that our patients get that sense of privacy that they deserve, this is something that needs to be accomplished every time you enter a room. To avoid this mistake next week, I will continue to roleplay interactions at home and in the skills lab, making sure to perform proper hand hygiene and move straight onto pulling the curtain closed and stating out loud the reasoning for doing so. I plan on enhancing my head-to-toe assessment skills over the weekend and that means practicing at least five times before my next clinical with family members. **With your thorough reflection and plan for improvement, I have complete confidence that you will improve on this recognized area for improvement! Zach, you did a nice job with your very first clinical. We look forward to watching you progress throughout the semester ☐ NL**

Week 6 Objective 8A: For my strength this week, I was aware to provide adequate privacy for my patient and his spouse. As soon as I practiced proper hand hygiene, I made sure to shut the door, as it was shut before entering the room. In doing so, this lets the patient feel a better sense of relief knowing what we are assessing and discussing in the room will stay between the parties in the room. They may feel more confident to express how they are feeling by realizing no distractions or wandering persons can be seen from the outside hallway. **What an important strength! NL**

Week 6 Objective 8B: In reflecting about what I can improve upon for my next clinical, I realized soon after that I did not check my patient's capillary refill on both his fingers and toes. I was not expecting my patient to be in tennis shoes and socks, so an adjustment had to be made in asking him to take those off. While not excusing the assessment from being done, it was just another situation that must be considered before entering a patient's room. Knowing that all circumstances will be unique, I must remind myself of this and to expect anything and everything before visiting a patient. In order to ensure this does not happen again, I will continue to practice on family members over the following weeks, trying to get at least 2 assessments in per week. Along with the practice, I will keep up with reading the book and viewing the video provided by Dr. Bussard to further cement all aspects inside my head. **Wonderful reflection, Zach! NL**

Midterm-Zach, at this point in the semester you are doing very well in clinical. You have all satisfactory competencies, with the exception of one "NI" competency. You display numerous strengths in the clinical setting, such as professionalism, eagerness to learn, and communication. Keep up the great work Zach! NL

Week 9 Objective 8A: For a strength in clinical this week, I believe I did a good job in advocating for my patient and his needs. As he was admitted due to chest pain, he wanted to find out when a cardiologist would visit. Knowing that he had constant pain, I made sure to maintain surveillance regarding his pain and to assess any changes that he may be experiencing. I not only relayed this information of the patient's pain rating to the nurse, but I kept up on trying to find out when the cardiologist would be in. I made sure to alert the patient several times that the cardiologist had not gotten back to us and when they found out, he (patient) would be brought up to speed too. **LW**
Wk. 9 8(a): Zach, you did an excellent job this week advocating for your patient! You also made great use of your clinical judgement related to his pain, as noted above. Additionally, you gave him the space he needed, when he needed it, but still managing to assess his pain as often as possible, for your first full clinical you did a great job! I am proud of you and you should be too! ☐ LW

Week 9 Objective 8B: As for my weakness goes, reacting to my patient with direct communication seemed like it could have been better. With my patient being in pain and just wanting to leave the hospital, I was cautious both verbally and physically when interacting with him. While I made sure to not downplay his concerns by any means (expressing my apologies, trying to keep him updated etc) I felt like I could have done a better job in providing reassurance. While I believe the best way to condition and strengthen my communication skills would be with clinical experience, I can still watch the good communication video Dr. Bussard provided for us, also going through the communication chapter in our book and our notes. LW

Wk. 9 8(b): Zach, I realize you may have not felt comfortable with your communication but from my standpoint being cautious verbally and physically were strengths, especially knowing he wanted to leave. I am pleased to read though, that if you felt as though you didn't communicate well and that you could improve that you have identified this and developed a plan to assist you with this in the future. You are off to a great start! Keep up the good work! □ LW

Week 10 Objective 8A: In reflecting upon last week's clinical and the most recent one, I can say with assurance that the communication provided to my patient was strong and professional. From entering the room, I could tell that I appeared more confident and engaged more with the patient. I know that each circumstance with a patient will be different, but this skill seemed to make the clinical run smoother. I listened to the stories my patient had to tell and my replies appeared to provide her with comfort. She did not hesitate to talk away whenever I was in the room and because of this, it helped in monitoring how she was progressing throughout the morning. As I was saying my goodbye, she was quick to state, "Awe you're leaving already?" I smiled and stated that being a student, we were only scheduled until a little past eleven and she commented that I was a very good student. I was sure to thank her and tell her that it meant a lot because it does. Praise like this only gets me more excited to help care for and comfort future patients.

Week 10 Objective 8B: An obvious weakness during this clinical week was my ability to change linens. This was something that truthfully, I was nervous to get into. It was my first time getting the opportunity to do so and I had not recalled the task since the week that we first learned it. After the help and guidance from Lara, it did come back to me and it was like having a, "Duh" moment. To become more confident in this skill, I have already practiced changing the sheets on my bed and mitering the corners. While it is not a true representation to the beds at the hospital, I will continue to read over this skill and practice in the skills lab whenever the opportunity arises, starting with the next lab session that I have.

**** 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 hard time with manual BP. I will get a BP cuff from Dawn 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.**

* End-of-Program Student Learning Outcomes

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2018**

**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: _____ 12/5/18

/scholar_extra2/e360/apps/v8/releases/1540573717/public/upload/firelands/media/dropbox/62429-TOOLSchoen2018Week10.docx
MB/DJ/AR/FB//df/6/2018