

EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2018

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Jennifer Pence Chapin

Semester: Fall

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

Final Grade: Satisfactory/Unsatisfactory

Date of Completion: 12/5/18

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	Fina l
	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:	NA	NA	NA	S	S	S	S	S	S	NA	S	NA						
a. Provide care utilizing techniques and diversions appropriate to the patient’s level of development.	NA	NA	NA	S	S	S	S	S	S	NA	S	NA						
b. Provide care using developmentally-appropriate communication.	NA	NA	NA	S	S	S	S	S	S	NA	S	NA						
c. Use systematic and developmentally appropriate assessment techniques.	NA	NA	NA	S	S	S	S	S	S	NA	S	NA						
d. Describe safety measures for various stages of development. (i. e. monitoring fall risks, restraints, and DVT assessment)	NA	NA	NA	S	S	S	S	S	S	NA	S	S						
e. Identify stage of growth and development.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
Clinical Location	EW	EW	EW	EW	EW	EW	EW	BS	BS	BS	BS							
Age of patient		EC 31 MONTHS		OB 1 DAY OLD	OB 29 AND 3 DO Headstar t	ER 3YO	HD, BGC		Lact 24		VISI ON SCREENING	Webelos						

Comments:

Week 10- 1e- You correctly identified the stage of growth and development of the adolescents you worked with. BS

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)																		
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:	NA	NA	NA	S	S	NA	S	S	NA	NA	NA	NA						
f. Describe psychological changes in response to the expectant mother's pregnancy. Maternal	NA	NA	NA	S	S	NA	S	S	NA	NA	NA	NA						
g. Discuss prenatal influences on the pregnancy. Maternal	NA	S	NA	S	S	NA	S	S	NA	NA	NA	NA						
h. Identify the stage and progression of a woman in labor. Maternal	NA	NA	NA	S	S	NA	S	S	NA	NA	NA	NA						
i. Discuss family bonding and phases of the puerperium. Maternal	NA	S	NA	S	S	NA	S	S	S	NA	NA	NA						
j. Identify various resources available for children and the childbearing family.	NA	S	NA	S	S	S	S	S	S	NA	NA	NA						
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.	NA	S	NA	S	S	S	S	S	S	NA	NA	NA						
l. Respect the centrality of the patient/family as core members of the health team.	NA	S	NA	S	S	S	S	S	S	NA	NA	NA						
	EW	EW	EW	EW	EW	EW	EW	BS	BS	BS	BS							

Comments:

WK7,1K Even if the patient's perspective in childbearing is not what we think it should be we must be respectful in our care. Nice job in presenting this issue without bias. EW

Week 8- 1a- Nice job discussing your experience with the Lactation Consultant nurse. 1j & k - Nice job discussing the topic of information taught the night of your Women's Education class and the parents' questions. BS

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	S	S	S	NA	NA	NA						
b. Perform nursing measures safely using Standard precautions.	NA	NA	NA	S	S	S	S	S	S	NA	S	NA						
c. Perform nursing care in an organized manner recognizing the need for assistance	NA	NA	NA	S	S	S	S	S	S	NA	S	NA						
d. Practice/observe safe medication administration.	NA	NA	NA	NA	S	S	S	S	S	NA	NA	NA						
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.	NA	NA	NA	NA	S	S	NA	S	NA	NA	NA	NA						
f. Utilize information obtained from patients/families as a basis for decision-making.	NA	NA	NA	S	S	S	S	S	S	NA	NA	NA						
	EW	EW	EW	EW	EW	EW	EW	BS	BS	BS	BS							

Comments:

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

WK6 2,F Described input mom gave regarding need for Decadron in decision making process.EW

Week 8- 2b- Good job discussing the success the new mom and baby were having with breastfeeding. BS

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	S	S	S	NA	S	S						
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"	NA	S	NA	S	S	S	S	S	S	NA	S	S						
d. Critique examples of legal or ethical issues observed in the clinical setting.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
	EW	EW	EW	EW	EW	EW	EW	BS	BS	BS	BS							

Comments:

WK7 3,D Good job presenting ethical issues from the clinical setting. The example you gave brought out a legal aspect too. EW
 Week 10- 3d- You brought up a potential ethical issue from the hearing and vision screenings. BS

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	NA	S	NA	NA	NA	NA						
b. Formulate measurable goals for nursing diagnosis. (noticing, interpreting, responding)	NA	NA	NA	NA	S	S	NA	S	NA	NA	NA	NA						
c. Formulate specific, individualized, and evidence-based interventions. (noticing, interpreting, responding)	NA	NA	NA	NA	S	S	NA	S	NA	NA	NA	NA						
d. Evaluate plan of care, patient achievement of goal and revising plan when necessary (noticing, interpreting, responding, reflecting)	NA	NA	NA	NA	S	S	NA	S	NA	NA	NA	NA						
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	NA	S	NA	NA	NA	NA						
f. Summarize witnessed examples of patient/family advocacy.	NA	NA	NA	S	S	S	NA	S	NA	NA	NA	NA						
g. Provide patient centered and developmentally appropriate teaching.	NA	NA	NA	S	S	S	NA	S	NA	NA	NA	NA						
h. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)	NA	NA	NA	S	S	S	NA	S	NA	NA	NA	NA						
	EW	EW	EW	EW	EW	EW	EW	BS	BS	BS	BS							

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.

WK 6 4 B,E Would like to see more measureable goals utilizing assessment info such as respirations, pulse ox, circulatory status secondary to work of breathing. EW

Week 8- 4g- You were able to provide the new mom with some valuable education related to breastfeeding, nice job! BS

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	Mak eup	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	Na	S	S	NA	NA	NA						
j. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding)	NA	NA	NA	NA	S	S	NA S	S	NA	NA	NA	NA						
k. Correlate the medical treatment in relation to the patient's disease process. (noticing, interpreting, responding)	NA	NA	NA	S	S	S	NA S	S	S	NA	NA	NA						
l. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding)	NA	NA	NA	S	S	S	NA	S	S	NA	NA	NA						
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	NA	S	S	NA	NA	NA						
	EW	EW	EW	EW	EW	EW	EW	BS	BS	BS	BS							

*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:

WK6 4K Nice job in listing the meds throughout the discussion and in the interventions list. I also believe the citation was helpful information. EW

WK 7 4J,K These competencies were completed satisfactorily as you were able to correlate the use of different types of birth control per patient need as well as differing tests and treatments for prenatal care. EW

Week 10- 4g- You explained the ease with which you were able to communicate with the adolescents at the hearing and vision screenings. BS

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	S	S	S	NA	S	S						
b. Evaluate own participation in clinical activities.	NA	S	NA	S	S	S	S	S	S	NA	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	S	S	S	NA	S	S						
d. Communicate professionally and collaboratively with members of the healthcare team.	NA	NA	NA	S	S	S	S	S	S	NA	S	S						
e. Document assessment findings, interventions, and outcomes accurately in the electronic health record.	NA	NA	NA	S	S	S	S	S	S	NA	NA	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	S	S	S	NA	NA	S						
g. Consistently and appropriately post comments in clinical discussion groups.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
	EW	EW	EW	EW	EW	EW	EW	EW	BS	BS	BS	BS						

Comments:

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

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	S	S	S	NA	S	S						
b. Accept responsibility for decisions and actions.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
c. Demonstrate evidence of growth, and self-confidence.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
d. Demonstrate evidence of research in being prepared for clinical.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
f. Describe initiatives in seeking out new learning experiences.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
g. Demonstrate ability to organize time effectively.	NA	S	NA	S	S	S	S	S	S	NA	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	S	S	S	NA	S	S						
i. Demonstrates growth in clinical judgment.	NA	S	NA	S	S	S	S	S	S	NA	S	S						
	EW	EW	EW	EW	EW	EW	EW	BS	BS	BS	BS							

Comments:

Jennifer Chapin with Julie Fletcher:

10-9-18 – Excellent in all areas. "Great job Jennifer, you have done an excellent job supporting and assisting out breastfeeding patients. Thank you!"

***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 Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills														
	Adult Head to Toe Assessment	Newborn Head to Toe Assessment	Child Head to Toe Assessment	Newborn Assessment (*1, 2)	Newborn Head Assessment (*1, 2)	Fundus Assessment (*1, 2)	Baby Bath (*2, 3)	Leopold's (*1, 2, 3, 4)	Breast Assessment (*1, 2)	APGAR (*2, 3, 4, 5)	Med. Admin. (*5, 6)	Kegals (*2, 4, 5)	Pregnancy History (*4, 5, 6)	Pain Assessment (*5, 6)	Bonding (*2, 4, 5)
	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 Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills												
	Lochia Assessment (*1, 2)	Babies Video (*5, 6)	Gestational Assessment (*1, 2)	Consent Informed	Child Nutrition (*2)	Autism (*1, 2, 3, 5)	Immunizations (*1, 2, 3, 5)	Pediatric Lab Values	Pediatric Vital Signs (*4, 5)	Lead Poisoning (*5)	Broselow Tape (*5)	Health Literacy (*6)	Safety Assessment (*1, 2, 3, 5, 6)
	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 Performance Codes: S: Satisfactory U: Unsatisfactory	VSim									
	5, 6)Maternity Case 3	5, 6)Maternity Case 2	5, 6)Maternity Case 1	5, 6)Maternity Case 5	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	S	S	S	S	S				
Faculty Initials	EW	BS	BS	BS	BS	BS				
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)* • Focused Observation: B E A D • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: B E A D	At the end of the simulation you were able to identify various fetal heart rate patterns. You were able to identify fetal heart rate patterns that were deviations that could potentially be harmful to the fetus. Your group worked together to introduce yourselves, identify the patient, perform a focus assessment including a pain assessment, and gather a thorough pregnancy history.			

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.

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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 mnemonic.
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: 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.	Comments You are satisfactory for this simulation.
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* Course Objectives **Lasater Clinical Judgment Rubric Scoring Sheet**

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

CLINICAL JUDGMENT 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	OBSERVATION NOTES 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.
INTERPRETING: (2, 4)* - Prioritizing Data: E A D B - Making Sense of Data: E A D B	Using the information from the scenario your group was able to determine areas of teaching for the pregnant mother.

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!

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Lasater Clinical Judgment Rubric Scoring Sheet: **SCENARIO #3 Post-Partum Hemorrhage**

STUDENT NAME: OBSERVATION DATE/TIME: 9/25/17 1300

CLINICAL JUDGMENT	OBSERVATION NOTES			
COMPONENTS NOTICING: (1, 2)* - Focused Observation: D B E A - Recognizing Deviations from Expected Patterns: E A D B - Information Seeking: E A D B	The class was able to provide accurate assessment and identification of a post partum hemorrhage. Correct assessment and communication techniques were utilized throughout the scenario. The class utilized the patient's chart to identify risk factors associated with post partum hemorrhage.			
INTERPRETING: (2, 4)* - Prioritizing Data: B E A D - Making Sense of Data: D B E A	The class was able to interpret the assessment data and identify the course of treatment for the patient.			
RESPONDING: (2, 3, 4, 5, 6)* - Calm, Confident Manner: B E A D - Clear Communication: D B E A - Well-Planned Intervention/ Flexibility: E A D B - Being Skillful: B E A D	The correct treatment measures were provided and discussed with the patient. Which medications are needed first, etc. Utilization of the hospital policy for post partum hemorrhage was discussed			

SUMMARY 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.	Comments You are satisfactory for this simulation. Terrific job actively participating and responding to the simulation in the simulation lab.
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*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO #4 Newborn Assessment and Thermoregulation

STUDENT NAME: OBSERVATION DATE/TIME: 10/1/18

CLINICAL JUDGMENT	OBSERVATION NOTES			
COMPONENTS NOTICING: (1, 2)* - Focused Observation: E A D B - Recognizing Deviations from Expected Patterns: E A D B - Information Seeking: E A D B	Recognition of a delivery was the priority observation. Newborn thermoregulation was compromised by fan, cold air, wet baby, window, not preheating surface, etc. Assessment questions were identified correctly. Assessing newborn after delivery was completed.			

INTERPRETING: (2, 4)* • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Verbalization of the correct steps of drying and warming a infant after birth to prevent cold stress. Information gathered from assessed was used to determine Apgar score.
RESPONDING: (1, 2, 3, 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 a newborn born and exposed to cold drafts after birth were identified and correctly demonstrated. Clear communication with the patient and health care team was practiced. Newborn's Apgar score used to determine and delivery proper interventions for the newborn
SUMMARY 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.	Comments You are satisfactory for this simulation.

*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO #5 Newborn with NAS

STUDENT NAME: **J. Chapin**

OBSERVATION DATE/TIME: 10/8/18

CLINICAL JUDGMENT	OBSERVATION NOTES			
COMPONENTS NOTICING: (1, 2)* • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B	Recognition of a child at risk for NAS was the priority assessment. Assessment questions were identified correctly. Assessing newborn the newborn using the NAS scale was performed. Appropriately assessed mother for the last time she took opioids/illicit drugs.			
INTERPRETING: (2, 4)* • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Verbalized of the correct steps of caring for the newborn and mother after the NAS scoring was completed. Information gathered from assessment of the newborn and mother was used to determine the newborns NAS score.			

RESPONDING: (1, 2, 3, 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 a newborn born exposed to drugs in utero were identified. Clear communication with the patient and health care team was practiced. Provided education to the mother on the NAS score, how to get help/treatment for addiction, and the steps she can take to best care for her infant.
SUMMARY 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.	Comments You are satisfactory for this simulation. BS Great job identifying the patients NAS score as well as providing education to the mother. Keep up the wonderful work! You did a nice job learning and implementing the NAS scale and policy.

*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **J. Chapin**

OBSERVATION DATE/TIME: **10/22/18**

SCENARIO #: **Post op T&A**

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 NA	Recognized increased swallowing, pain, and facial grimacing of patient. Recognized patient appearing uncomfortable in the position she was in the bed. Recognized the nurse not following the rights of medication administration.
INTERPRETING: (2, 4)* - Prioritizing Data: E A D B - Making Sense of Data: E A D B	Identified safety concerns and how to address them. Used assessment data to identify the patient having post-op complication of bleeding. Interpreted misuse of developmentally appropriate communication by the nurse.
RESPONDING: (1, 2, 3, 5)* - Calm, Confident Manner: E—A—D—B NA - Clear Communication: —E—A—D —B NA - Well-Planned Intervention/ Flexibility: E A D B - Being Skillful: —E—A—D —B NA	Developed appropriate patient specific interventions when writing care plan. Able to recognize inappropriate interventions performed by the nurse and verbalize the correct interventions in their place.
REFLECTING: (6)* - Evaluation/Self-Analysis: E A D B - Commitment to Improvement: E A D B	Reflected on areas of improvement for the nurse in the simulation. Choose appropriate foods for the nurse to use instead. Reflected on steps to correct medication errors from occurring.

SUMMARY COMMENTS: E= Exemplary A= Accomplished D= Developing B= Beginning	Comments You are satisfactory for this simulation. BS Terrific job participating and evaluating the care performed by the nurse in the scenario.
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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: _____