

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Psychiatric Nursing- 2019**  
**Firelands Regional Medical Center School of Nursing**  
**Sandusky, Ohio**

**Student: Ashleigh Lewis**

**Final Grade: Satisfactory/Unsatisfactory**

**Semester: Summer Session I**

**Date of Completion:**

**Faculty: Brian Seitz MSN, RN**

**Teaching Assistants: Nick Simonovich BSN, RN, Devon Cutnaw BSN, RN**

**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:**

- Clinical Patient Profile
- Documentation
- Evaluation of Clinical Performance Tool
- Onsite Clinical Debriefing
- Online Discussion Rubric
- Nursing Process Recording Rubric
- Geriatric Assessment Rubric
- Participation in adjunctive therapies (N.A./A.A.; Erie County Health Department Detox Unit, Hospice inpatient/outpatient care)
- EBP presentations
- Hospice Reflection Journal
- Virtual Simulation Scenarios

**ABSENCE (Refer to Attendance Policy)**

Date	Number of Hours	Comments
5/24/19	2	Sharon Cole vSim not submitted at due date and time. 2 Hours made up with submission on 5/24/19. NS
Initials	Faculty Name/Teaching Assistant	
BS	Brian Seitz MSN, RN	
NS	Nick Simonovich BSN, RN	
DC	Devon Cutnaw BSN, RN	

\* End-of-Program Student Learning Outcomes

## 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.

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Objective								
1. Apply the principles of psychiatric theory in the care of adolescent to geriatric patients with a mental illness diagnosis. (1, 2, 3, 5, 6, 7, 8)*								
Weeks of Course:	1	2	3	4	5	6	Make Up	Final
<b>Competencies:</b>	N/A	S						
a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder.	N/A	S						
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder.	N/A	S						
c. Provide culturally and spiritually competent care within the scope of nursing that meets the needs of assigned patients from diverse cultural, racial and ethnic backgrounds.	N/A	S						
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care	N/A	S						
e. Recognize normal versus non-normal behavior patterns in terms of developmental milestones. (Erickson).	N/a	S						
f. Develop and implement an appropriate nursing therapy group activity.	N/a	s						
g. Develop a geriatric physical/mental health assessment and education plan. <b>(Geriatric Assessment)</b>								
Faculty Initials	NS	NS						

\* End-of-Program Student Learning Outcomes

Clinical Location

N/A	1 south							
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**Comments:**

Week 2 objective 1 (a-d): Great job this week providing therapeutic communication and connecting with the patient's on the unit to build a trusting relationship. You understood the importance of the environment for mental health and encouraged patient's to socialize rather than isolate. You were able to discuss your observation experience with the ECT and were able to educate your fellow classmates on the desired effects for treatment of mental illness. NS

Objective								
2. Synthesize concepts related to psychopathology, health assessment data, evidenced based practice and the nursing process using clinical judgment skills to plan and care for patients with mental illness. (1, 2, 3, 4, 5, 6, 7, 8)*								
Weeks of Course:	1	2	3	4	5	6	Make Up	Final
<b>Competencies:</b>	n/a	S						
a. Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. <b>(noticing)</b>	n/a	S						
b. Identify the individual patient's symptoms related to the psychiatric diagnosis. <b>(interpreting)</b>	n/a	S						
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. <b>(noticing, interpreting)</b>	n/a	S						
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. <b>(noticing, interpreting, responding, reflecting)</b>	n/a	NI						

\* End-of-Program Student Learning Outcomes

e. Apply the principles of asepsis and standard precautions.	n/a	s						
Faculty Initials	NS	NS						

**Comments:**

Week 2 objective 2 (a-d): You utilized your time wisely and efficiently to assemble a health history through communication with your patient as well as accessing the EHR. I appreciate your efforts to connect with the patient's rather than spending all of your time at the nurse's station. The staff and patient's noticed your effort to provide therapeutic communication. Good job with your nursing care plan portion of the CDG. In the future, try to be a little more specific with your defining characteristics. Your selected AEB are appropriate they are just broad. Consider describing how your patient was impulsive, what kind of behavior changes he exhibited, what substances he uses, and what important relationship he lost. By being more specific with these defining characteristics, it will be easier to formulate specific goals for the patient. An NI was given for this competency because you did not respond to the CDG prompts for "Compose realistic, measurable outcomes for psychiatric nursing diagnoses use the SMART acronym" or "Provide an evaluation related to plan of care. See Senior Nursing Care Plan Rubric." NS

Objective								
3. Refine basic verbal and nonverbal therapeutic communication skills when interacting with patients, families, and members of the health care team. (1, 2, 3, 5, 7, 8)*								
Weeks of Course:	1	2	3	4	5	6	Make Up	Final
a. Illustrate professionally appropriate and therapeutic communication skills in interactions with patients, and families.	n/a	S						
b. Demonstrate professional and appropriate communication with the treatment team by using the SBAR format for handoff communication during transition of care.	n/a	S						
c. Identify barriers to effective communication. ( <b>noticing, interpreting</b> )	n/a	S						
d. Construct effective therapeutic responses.	n/a	S						
e. Construct a satisfactory patient-nurse therapeutic communication.	n/a	S						
f. Posts respectfully and appropriately in clinical discussion groups.	n/a	NI						
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.	n/a	S						
h. Teach patient/family based on readiness to learn and patient needs. ( <b>responding, reflecting</b> )	n/a	s						
Faculty Initials	NA	NS						

**Comments:**

3h. Week 2: This week I spoke with a patient on day 2 about her goals and what she would do to attain them. She wanted to lessen her anxiety and depression and decided she would start by drawing because for her she enjoyed it. **Awesome! NS**

\* End-of-Program Student Learning Outcomes

Week 3 objective 3 (a,d,e) – Again, excellent job this week communicating with not only your selected patient, but other patient’s that you encountered during your clinical experience. You were able to encourage participation in group, as well as social activities. In doing so, you were able to encourage therapeutic responses and undoubtedly helped the patient’s through a difficult time. NS

Week 3 objective 3 (f): An NI was given for this competency because you did not respond to the CDG prompts for “Compose realistic, measurable outcomes for psychiatric nursing diagnoses use the SMART acronym” or “Provide an evaluation related to plan of care. See Senior Nursing Care Plan Rubric.” You must answer all the questions provided in the CDG prompt to receive an “S” for this competency. Remember to read the instructions closely in the future. NS

Objective								
4. Demonstrate knowledge of frequently prescribed medications utilized in treating mental illness. (1, 4, 5, 6, 7)*								
Weeks of Course:	1	2	3	4	5	6	Make up	Final
a. Discuss the safe administration of medication while observing the six rights of medication administration.	n/a	S						
b. Demonstrate ability to discuss the uses and implication of psychotropic medications	n/a	S						
c. Identify the major classification of psychotropic medications.	n/a	S						
d. Identify common barriers to maintaining medication compliance.	n/a	S						
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications.	n/a	s						
Faculty Initials	NS	NS						

**Comments:**

Week 2 objective 4 (a-e): Early on in this semester, you are starting to familiarize yourself with the types of medications prescribed for mental illness. As the semester progresses, you will build upon your knowledge of medications and the side effects and safety issues related to psychotropic medications. During post-conference, you were able to participate in the discussion regarding medications and identified nursing interventions and side effects related to lithium carbonate. Great job. NS

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Objective								
5. Develop an awareness of community Mental Health resources and services. (5, 6, 7, 8)*								
Weeks of Course:	1	2	3	4	5	6	Make up	Final
a. Identify the need for the community resources available to patients with a mental illness.	n/a	S						
b. Discuss recommendations for referrals to appropriate community resources and agencies.	n/a	S						
c. Attend Erie County Health Department Detox Unit observing the care of a patient with mental illness-substance abuse. (Community Agency Observation-Detox Unit)	n/a	n/a						
d. Attend Narcotics/Alcoholics Anonymous meeting. (Alcoholics/Narcotics Anonymous at the Artisans of Sandusky Observation)	n/a	n/a						
Faculty Initials	NS	NS						

Comments:

\* End-of-Program Student Learning Outcomes

Objective								
6. Demonstrate satisfactory proficiency when using informatics and techniques in the assessment of patients with a mental illness diagnosis. (1, 2, 3, 4, 6, 8)*								
Weeks of Course:	1	2	3	4	5	6	Make up	Final
<b>Competencies:</b>		S						
a. Demonstrate competence in navigating the electronic health record.	n/a							
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record.	n/a	s						
Faculty Initials	NS	NS						

**Comments:**

Week 2 objective 6 (a): Great job this week gathering data on your patient to formulate your nursing diagnoses and related interventions. You were able to navigate through the EHR to supplement the information obtained through communication with your patient. This allowed you to have a better understanding of what your patient is coping with. NS

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Objective								
7. Evaluate self-participation in patient care experiences with the focus on safety, ethical, legal, and professional responsibilities. (7)*								
Weeks of Course:	1	2	3	4	5	6	Make up	Final
a. Identify your strengths for care delivery of the patient with mental illness <b>(cite on tool)</b>	n/a	S						
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care.	n/a	S						
c. Illustrate active engagement in self-reflection and debriefing.	n/a	S						
d. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE” – attitude, commitment, and enthusiasm during all clinical interactions.	n/a	S						
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect.	n/a	S						
f. Follow the standards outlined in the FRMCSN policy, “Student Conduct While Providing Nursing Care.”	n/a	s						
Faculty Initials	NS	NS						

**Comments:**

**7a. week 2**

**A strength I displayed was active listening. I did not interject when patients were talking to me I let them talk and I responded through verbal and nonverbal communication. Great job! Sometimes what they need the most is someone to simply listen to them. I thought you did a great job of being available to listen to multiple patients this week! NS**

Firelands Regional Medical Center School of Nursing  
Psychiatric Nursing 2019  
Simulation Evaluations

<u>vSim Evaluation</u>	vSim					
	Performance Codes:  <b>S:</b> Satisfactory  <b>U:</b> Unsatisfactory	(*1,2,3,4,5)(Rehab/ Acute Detox Scenario)Andrew Davis	(*1,2,3,4,5)(Bipolar Scenario)Sharon Cole	(*1,2,3,4,5)(Anxiety/Cultural Scenario)Linda Waterfall	(*1,2,3,4,5)(Borderline Personality Disorder Scenario)Sandra Littlefield	(*1,2,3,4,5)(Alzheimer's Disorder)George Palo
	<b>Date:</b> 5/21/19	<b>Date:</b> 5/24/19	<b>Date:</b> 5/31/19	<b>Date:</b> 6/7/19	<b>Date:</b> 6/14/19	<b>Date:</b> 6/21/19
Evaluation	S	U				
Faculty Initials	NS	NS				
Remediation: Date/Evaluation/Initials	NA	5/24/19 S NS				

\* Course Objectives

Sharon Cole: Submitted late. NS

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Psychiatric Nursing**

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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: