

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2019**

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

Student:

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

Faculty: Kelly Ammanniti, MSN, RN; Brian Seitz, MSN, RN

Teach Assistant: Elizabeth Woodyard, BSN, RN, CRN; Monica Dunbar BSN, RN; Cathy Matz BSN, RN

DIRECTIONS FOR USE:

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S)**, **Needs Improvement (NI)**, **Unsatisfactory (U)**, and **Not Available (NA)**. The faculty member will initial if in agreement with the student's evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written 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
Monica Dunbar	MD

8/15/19 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
	8/30	9/6	9/13	9/20	9/27	10/4	10/11		10/18	10/25	11/1	11/8	11/15	11/22	11/29	12/6		
Competencies:		NA	NA	S	NA	S												
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		NA	NA	S	NA	S												
b. Provide care using developmentally-appropriate communication.		NA	NA	S	NA	S												
c. Use systematic and developmentally appropriate assessment techniques.		NA	NA	S	NA	NA												
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		NA	NA	S	NA	NA												
e. Identify stage of growth and development (Erikson's Stages)(List Below)*		NA	NA	S	NA NI	S												
Clinical Location	MD	MD	MD	MD	MD													
Age of patient		W O M E N S E D U C A T I O N	NA	ER	FA M I L Y P R A C T I C E/ I M M U N I Z A T I O N S	Scho ol nurs e/ heari ng and visio n scree ning												

Comments:

Week 4 1E: Infancy Trust versus mistrust

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

Week 5 1E-You should have addressed this section this week. Please be sure to address it next week. MD I will make sure I do this from now on. And check to make sure I have it done.

Week 6 E) Toddlers/ school aged children

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
	8/30	9/6	9/13	9/20	9/27	10/4	10/11		10/18	10/25	11/1	11/8	11/15	11/22	11/29	12/6		
Competencies:																		
f. Describe psychological changes in response to the expectant mother's pregnancy. Maternal		NA	NA	NA	NA	NA												
g. Discuss prenatal influences on the pregnancy. Maternal		NA	NA	NA	NA	NA												
h. Identify the stage and progression of a woman in labor. Maternal		NA	NA	NA	NA	NA												
i. Discuss family bonding and phases of the puerperium. Maternal		NA	NA	NA	NA	NA												
j. Identify various resources available for children and the childbearing family.		NA	NA	NA	NA	NA												
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		NA	NA	S	S	S												
l. Respect the centrality of the patient/family as core members of the health team.		NA	NA	S	S	NA												
	MD	MD	MD	MD	MD													

Comments:

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
	8/30	9/6	9/13	9/20	9/27	10/4	10/11		10/18	10/25	11/1	11/8	11/15	11/22	11/29	12/6		
a. Engage in discussions of evidenced-based nursing practice.		NA	NA	S	S	S												
b. Perform nursing measures safely using Standard precautions.		NA	NA	S	S	S												
c. Perform nursing care in an organized manner recognizing the need for assistance.		NA	NA	S	NA	NA												
d. Practice/observe safe medication administration.		NA	NA	S	NA	NA												
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		NA	NA	S	NA	NA												
f. Utilize information obtained from patients/families as a basis for decision-making.		NA	NA	NA	NA	NA												
	MD	MD	MD	MD	MD													

Comments:

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
	8/30	9/6	9/13	9/20	9/27	10/4	10/11		10/18	10/25	11/1	11/8	11/15	11/22	11/29	12/6		
a. Act with integrity, consistency, and respect for differing views.		NA	NA	S	S	S												
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		S	NA	S	S	S												
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		S	NA	S	S	S												
d. Critique examples of legal or ethical issues observed in the clinical setting.		NA	NA	S	S	S												
	MD	MD	MD	MD	MD													

Comments:

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
	8/30	9/6	9/13	9/20	9/27	10/4	10/11		10/18	10/25	11/1	11/8	11/15	11/22	11/29	12/6		
a. Develop one priority nursing diagnosis.		NA	NA	S	NA	NA												
b. Formulate measurable goals for nursing diagnosis. (noticing, interpreting, responding)		NA	NA	S	NA	NA												
c. Formulate specific, individualized, and evidence-based interventions. (noticing, interpreting, responding)		NA	NA	S	NA	NA												
d. Evaluate plan of care, patient achievement of goal and revising plan when necessary. (noticing, interpreting, responding, reflecting)		NA	NA	S	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	NA												
f. Summarize witnessed examples of patient/family advocacy.		NA	NA	NA	NA	NA												
g. Provide patient centered and developmentally appropriate teaching.		NA	NA	NA	NA	NA												
h. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)		NA	NA	S	S	NA												
	MD	MD	MD	MD	MD													

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
	8/30	9/6	9/13	9/20	9/27	10/4	10/11		10/18	10/25	11/1	11/8	11/15	11/22	11/29	12/6		
i. Correlate the diagnostic tests with the patient's disease process. (noticing, interpreting, responding)		NA	NA	NA	S	NA												
j. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding)		NA	NA	S	NA	NA												
k. Correlate the medical treatment in relation to the patient's disease process. (noticing, interpreting, responding)		NA	NA	S	NA	NA												
l. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding)		NA	NA	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	S	NA	NA												
	MD	MD	MD	MD	MD													

Comments:

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
	8/30	9/6	9/13	9/20	9/27	10/4	10/11		10/18	10/25	11/1	11/8	11/15	11/22	11/29	12/6		
a. Demonstrate interest and enthusiasm in clinical activities.		S	NA	S	S	S												
b. Evaluate own participation in clinical activities.		NA	NA	S	S	S												
c. Present at all clinical sites neatly groomed and with appropriate identification and attire (according to school uniform policy).		S	NA	S	S	S												
d. Communicate professionally and collaboratively with members of the healthcare team.		NA	NA	S	S	S												
e. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		NA	NA	NA	NA	NA												
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)		NA	NA	S	NA	NA												
g. Consistently and appropriately post comments in clinical discussion groups.		S	S	S U	S	S												
	MD	MD	MD	MD	MD													

Comments:

Week 4 5G- In this week's CDG you did not include an in-text citation or a reference. Please make sure to include these next week. Make sure to address how you will prevent this from happening again in the following weeks to come. MD

Response- I will make sure I will include a reference and a citation. And also recheck my work before submitting it. Great job with your CDG this week! MD

Objective																		
6. Critique own strengths and areas for improvement modifying behaviors accordingly to achieve personal and professional goals. (7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/30	9/6	9/13	9/20	9/27	10/4	10/11		10/18	10/25	11/1	11/8	11/15	11/22	11/29	12/6		
a. Recognize areas for improvement and goals to meet these needs. (List Below)*		NA	NA	S	S	S												
b. Accept responsibility for decisions and actions.		NA	NA	S	S	S												
c. Demonstrate evidence of growth and self-confidence.		NA	NA	S	S	S												
d. Demonstrate evidence of research in being prepared for clinical.		NA	NA	S	S	S												
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		S	NA	S	S	S												
f. Describe initiatives in seeking out new learning experiences.		NA	NA	S	S	S												
g. Demonstrate ability to organize time effectively.		NA	NA	S	S	S												
h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.		S	NA	S	S	S												
i. Demonstrates growth in clinical judgment.		NA	NA	S	S	S												
	MD	MD	MD	MD	MD													

Comments:

Week 4 6A) My area for improvement this week would to slow myself down while a code is happening. I was over thinking putting a NG tube in, and it was just in a moment. But I know with time, and even when I took a deep breath and calmed myself down, I will become more confident in emergency situations. And trust my knowledge that I can do it. **This is a great goal! With more practice these skills will become easier and will be second nature. Keep practicing! You are doing a great job!**
MD

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

Week 5A) An area for improvement would be to continue to talk to patients while administering medications. Even though I did not give any for this clinical watching how the nurse would keep a conversation going with patients really helped relax them and make giving IM injections easier. That is something when I have given IM injections forget to do. So, it was a really good tip to carry with myself for the rest of my career. **This is a great goal! Very achievable! MD**

Week 6A) An area of improvement for this week is just to continue to work on how I talk to children. Just explain things different for each age group when I comes to what I am doing. Because with each age they understand tests differently and instructions differently. I will just continue to look at different ways to talk to each age group and practice it each week, when I am with children. I will then evaluate how they respond and go from there. Just continually growing and expanding my knowledge of children.

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

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2019
Skills Lab Competency Tool

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills														
	Adult Head to Toe Assessment (*1, 2, 5, 6)	Meditrech (* 1,2,3, 5, 6)	Pediatric Assessment (*1, 2, 5, 6)	Postpartum and Newborn DC Ed (*1, 2, 6)	(* 1, 2, 3, 6)NAS Scoring	(* 1, 2,6)Happiest Baby on the Block	Pediatric Emergency Triangle (* 1, 2, 6)	(*1,2,3,5)Broselow Tape	Med. Admin. (*1, 2, 3, 4, 5, 6)	APGAR (*2, 3, 4, 5, 6)	Breast Assessment (*1, 2, 3, 4, 5, 6)	(*1,2,3,5,6)Safety	(*1, 2, 3, 4, 5, 6)Pregnancy History	Pain Assessment (*1, 2, 5, 6)	(* 1,,2,6)Circumcision Care
	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:
Evaluation	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD
Remediation: Date/Evaluation/Initials															

* Course Objectives

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills													
	Lochia Assessment (*1, 2, 4)	Immunizations (*1,2,3)	(*1,4,5)Pediatric Lab Values	(*1,4,5)Pediatric Vital Signs	Newborn Assessment (*1, 2, 5, 6)	(*2,5,6)Health Literacy	Newborn Thermo. (*1, 2, 3, 4, 5, 6)	Newborn Bath and Cord Care (*2, 4)	Fundus Assessment (*1, 2, 5, 6)	Breastfeeding and Bottle Feeding (*1,2,3, 6)	Leopold's (*1, 2, 3, 5, 6)	Postpartum Assessment (* 1, 2, 6)	Ballard Assessment (*2, 3, 4, 5, 6)	(*1, 2, 5, 6)Med/Surg Skills Day
	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:
	8/29	8/29	8/29	8/29	8/29	8/29	8/29	8/29	8/29	8/29	8/29	8/29	8/29	9/12

Evaluation	S	S	S	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	MD													
Remediation: Date/Evaluation/Initials														

* Course Objectives

Comments:

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2019
Simulation Evaluations

vSim Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	vSim									
	(*1, 2, 3, 5, 6)Maternity Case 5	(*1, 2, 3, 5, 6)Maternity Case 2	(*1, 2, 3, 5, 6)Maternity Case 1	(*1, 2, 3, 5, 6)Maternity Case 3	(*1, 2, 3, 5, 6)Maternity Case 4	(*1, 2, 3, 5, 6)Pediatric Case 2	(*1, 2, 3, 5, 6)Pediatric Case 3	(*1, 2, 3, 5, 6)Pediatric Case 5	(*1, 2, 3, 5, 6)Pediatric Case 1	(*1, 2, 3, 5, 6)Pediatric Case 4
	Date: 9/10	Date: 9/16	Date: 9/30	Date: 10/7	Date: 10/11	Date: 10/28	Date: 11/4	Date: 11/11	Date: 11/18	Date: 11/25
Evaluation	S	S	S							
Faculty Initials	MD	MD	MD							
Remediation: Date/Evaluation/Initials										

* Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2019
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: _____