

**SEVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2020**

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

Student:
Semester:

Final Grade: Satisfactory/Unsatisfactory

Date of Completion:

Faculty: Frances Brennan, MSN, RN; Amy M. Rockwell, MSN, RN
Carmen Patterson, MSN, RN; Brian Seitz, MSN, RN
Teaching Assistant: Brittany Schuster, 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 Assignments
- Completion of Patient Care
- Meditech Documentation
- Observation of Clinical Performance
- Evaluation of Clinical Performance Tool
- Onsite Clinical Debriefing
- Clinical Discussion Rubric
- Preceptor Feedback
- Nursing Care Plan Rubric
- Skills Lab Checklists/ Competency Tool
- Lasater Clinical Judgment Rubric
- Virtual simulation scenarios

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
Initials	Faculty Name		
FB	Frances Brennan, MSN, RN		
CP	Carmen Patterson, MSN, RN		
AR	Amy Rockwell, MSN, RN		
BS	Brian Seitz, MSN, RN		
BSc	Brittany Schuster, BSN, RN		

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.

Objective

1. Engage in the coordination and delivery of nursing care measures to groups of patients and to patients with complex problems. (1,3,4,5,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
Competencies:	S	S	S														
a. Manage complex patient care situations with evidence of preparation and organization.	S	S	S														
b. Assess comprehensively as indicated by patient needs and circumstances.	S	S	S														
c. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care.	S	S	S														
d. Evaluate patient's response to nursing interventions.	S	S	S														
e. Interpret cardiac rhythm; determine rate and measurements	S	S	S														
f. Administer medications observing the six rights of medication administration.	S	S	S														
g. Perform venipuncture skill with beginning dexterity and evidence of preparation.	S NA	NA	NA														
h. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc.	S	S	S														
Faculty Initials	FB	FB	BSc														
onClinical																	

Comments:

Week 2: Pam, Great job interpreting all aspects of the care needed and provided to your complex patient this week. You administered IVP, SQ, and medications through a PEG tube observing all rights of administration. You also were aware of equipment alarms and responded appropriately to your current level of knowledge. (1g)- this competency was changed to a NA because you did not get the opportunity to perform a venipuncture skill. FB

Week 3: Pam, great job caring for a complex patient and engaging in all aspects of using clinical judgement and prioritization. FB

*End-of- Program Student Learning Outcomes

Week 4-1(f) Pam, you did an excellent job with your medication administration both days in clinical. You were very well prepared and knowledgeable about all of your medications. You also did a great job checking the patient's QTc before administering her Sotalol. BSc

Objective																	
2. Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care, evidence-based practice, and clinical judgment. (1,2,3,4,5,8)*																	
Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
Competencies:	S	S	S														
a. Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. CC (noticing, interpreting, responding)																	
b. Monitor for potential risks and anticipate possible early complications. CC (noticing, interpreting, responding)	S	S	S														
c. Recognize changes in patient status and take appropriate action. (noticing, interpreting, responding)	S	S	S														
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. CC (noticing, interpreting, responding, reflecting)	NA	NA	S NI														
e. Development of clinical judgment in high-fidelity simulation scenarios. (Noticing, Interpreting, Responding, Reflecting)																	
f. Incorporate the ABCDEF Standardized Bundle of interventions for assigned patient. CC (noticing, interpreting, responding)	S NI	S	NA														
Faculty Initials	FB	FB	BSc														

Comments:

2d. See Care Plan Rubric at the end of this document.

*End-of- Program Student Learning Outcomes

2e. See Clinical Simulation Rubric at the end of this document.

Week 2: Excellent job recognizing your patient’s disease process, correlating the symptoms, risks and complications. (2f)-this competency was changed to an NI, because you did not provide substantiate evidence from your assessments to evaluate your patient’s status using the ABCDEF bundle. You will need to explain in depth the reason you reached scores based off information obtained during your assessment of the patient. All tools provided should be addressed in your CDG. FB

Week 2 I revised my ABCDGEF bundle with additional information. PM

Week 3: Excellent job with revision provided on the ABCDEF bundle, evidence was provided to substantiate the findings suggested in your write up. Great job with pathophysiology CDG post this week. You provided a great amount of detail regarding the patient's history, admission status and how this all correlates to the admitting diagnosis. Great job recognizing the risk factors and the appropriate plan of care for this patient. All diagnostic studies were provided as well as significant lab work. FB

Week 4-2(d) Pam, you are off to a great start with your nursing care plan. Please see the Care Plan Rubric at the end of this document for my feedback. Revisions will need to be made in order to be graded as satisfactory. BSc

Objective																	
3. Plan leadership experiences with a mentor to impact team performance, patient safety, and quality indicators. (1,3,5,7,8)*																	
Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
Competencies:	NA	NA	NA														
a. Critique communication barriers among team members (Preceptorship)																	
b. Participate in QI, core measures, monitoring standards and documentation.	S	S	S														
c. Discuss strategies to achieve fiscal responsibility in clinical practice.	S	S	S														
d. Clarify roles & accountability of team members related to delegation. (Preceptorship)	NA	NA	NA														

*End-of- Program Student Learning Outcomes

e. Determine the priority patient from assigned patient population. (Preceptorship)	NA	NA	NA														
Faculty Initials	FB	FB	BSc														

Comments:

Week 4-3(c) You did a great job ensuring you used the PAR system appropriately when obtaining care items for your patient this week in clinical. This is just one important way to ensure fiscal responsibility in clinical practice. BSc

Objective

4. 4. Plan for a future in the nursing profession by analyzing information concerning employment, licensure, ethical, and legal issues in nursing focusing on accountability and respecting patient autonomy. (1,2,4,5)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
Competencies:	S	S	S														
a. Critique examples of legal or ethical issues observed in the clinical setting.																	
b. Engage with patients and families to make autonomous decisions regarding healthcare.	S	S	S														
c. Exhibit professional behavior in appearance, responsibility, integrity and respect.	S	S	S														
Faculty Initials	FB	FB	BSc														

Comments:

Week 2: (4a)- Great job with examples presented and active participation in discussion during post-conference. FB

Objective

5. Construct methods for self-reflection and critiquing healthcare systems, processes, practices and regulations on a weekly basis. (7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
Competencies:	S	S	S														
a. Reflect on your overall performance in the clinical area for the week.																	
b. Demonstrate initiative in seeking new learning opportunities.	S	S	S														
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc.).	S	S	S														
d. Perform Standard Precautions.	S	S	S														
e. Practice use of standardized EBP tools that support safety and quality.	S	S	S														
Faculty Initials	FB	FB	BSc														

Comments:

Week 2: (5c,e)- Great job providing examples and actively participating in discussion during post-conference. FB

Week 4-5(b)- This week you had the opportunity to watch your patient have a Cardioversion done. I hope you enjoyed this experience and learned a lot from it as well.
BSc

Objective

6. Engage with members of the healthcare team, patients, families, faculty, and peers through written, verbal and nonverbal methods, and by utilizing computer technology. (1,2,6,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
Competencies:	S	S	S														
a. Establish collaborative partnerships with patients, families, and coworkers.																	
b. Teach patients and families based on readiness to learn and discharge learning needs.	S	S	S														
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes.	S	S	S														
d. Deliver effective and concise hand-off reports.	S	S	S														
e. Document interventions and medication administration correctly in the electronic medical record.	S	S	S														
f. Consistently and appropriately posts in clinical discussion groups.	S	S	S NI														
Faculty Initials	FB	FB	BSc														

Comments:

Week 2: (6e) Excellent job with documentation in Meditech, it was complete and thorough. (6f)- CDG was posted on time and appropriate to guidelines. FB

Week 3: (6a,b,c) Great job collaborating with other healthcare disciplines to provide positive patient outcomes and providing teaching opportunities for your patient and family. FB

Week 4-6(e) You did a great job overall with all of your documentation this week in clinical. There were minor areas in which we discussed that needed to be changed, and you did a great job incorporating my feedback from Tuesday and applying it to your documentation on Wednesday. BSc

Week 4-6(f) Unfortunately, I had to change this competency to an "NI" because you did not include an in-text citation within your CDG for this week. Remember, per the Clinical Discussion Group Rubric, students must support opinions with data, articles, or textbooks, and include both an in-text citation and reference to be graded as satisfactory. BSc

Objective

7. Devise methods utilized by nursing to develop the profession, advance the knowledge base, ensure accountability, and improve the outcomes of care delivery. (1,3,4,6,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
Competencies:	S	S	S														
a. Value the need for continuous improvement in clinical practice based on evidence.																	
b. Accountable for investigating evidence-based practice to improve patient outcomes.	S	S	S														
c. Comply with the FRMCSN "Student Code of Conduct Policy."	S	S	S														
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.	S	S	S														
Faculty Initials	FB	FB	BSc														

Comments:

Skills Lab Evaluation Tool
AMSN
2020

Skills Lab Competency Evaluation	Lab Skills									
	(1,3,4,6)*IV Start	Blood Admin./IV Pumps 3,4,5,6)*	Delegation/Prioritization/	*Critical Care Meditech Document	3,4,5,6)*Physician Orders	(1,3,6,7)*Resuscitation	Central Line/Blood Draw/Ports/IV Push 4,6)*	Assessment/Head to Toe	ments/C/TECG/Telemetry	5,6)*ECG Measurements
Performance Codes: S: Satisfactory U: Unsatisfactory	Date: 1/7/20	Date: 1/7/20	Date: 1/9/20	Date: 1/9/20	Date: 1/9/20	Date: 1/9/20	Date: 1/10/20	Date: 1/10/20	Date: 1/10/20	Date: 1/10/20
Evaluation:	S	S	S	S	S	S	S	S	S	S
Faculty Initials	FB	FB	FB	FB	FB	FB	FB	FB	FB	FB
Remediation: Date/Evaluation/Initials										

***Course Objectives**

Comments:

IV Start Lab: Satisfactory participation in the IV Start lab, including practice with technique, initiation and discontinuation of IV site, and placement of IV dressing. AR/BS/CP/BSc

Blood administration/IV pump: Satisfactory participation practice with blood administration safety checks. Great job with priming tubing, secondary IV medication pump set up, and the use of the IV drug dose library. FB

Delegation & Prioritization: You have successfully completed your skills lab for delegation and prioritization. You satisfactorily prioritized care for multiple patients using multiple methods (i.e. Maslow's hierarchy of needs, ABC, and ABCD methods). You were able to appropriately delegate nursing tasks based on the skill level and scope of practice for each member of your team. You actively participated in the group discussion on delegation of nursing tasks and your team shared several important factors to consider when delegating, including scope of practice and skill level of the delegate, nursing laws, facility policy, and condition of the patient. Great job! CP

Meditech: Satisfactory completion of assessment documentation including physical re-assessment, safety and fall assessment, RN mechanical ventilator assessment, IV location assessment, and documentation editing. Great job! FB

Physician Orders: Satisfactory completion of physician order labs utilizing SBAR communication and taking orders over the phone. Good job! BS/BSc

Resuscitation Lab: Satisfactory participation in the practice of Hands-Only CPR, ventilation with bag- valve mask/Ambu bag, and review of crash cart and Code Blue team duties and documentation. AR

Central Line Dressing: Satisfactory central line dressing change using proper technique, as well as line flushing. FB

Infusaport Access & Central Line Cap Change & Line Draw: You were satisfactory in accessing an Infusaport device. You also satisfactorily demonstrated proper technique for CVAD cap change and satisfactorily demonstrated how to draw blood from a CVAD per hospital policy. CP

*End-of- Program Student Learning Outcomes

Head to toe: You are satisfactory for the head-to-toe assessment competency. Nice Job! BS/BSc

Blood administration/IV pump: Satisfactory participation practice with blood administration safety checks. Great job with priming tubing, secondary IV medication pump set up, and the use of the IV drug dose library. FB

ECG/Telemetry/Chest Tube: Satisfactory participation with review of monitoring tutorial and placement of

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	Decreased Cardiac Output R/T alteration in heart rhythm and conduction
**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Total Points Comments
Nursing Diagnosis: (3 points) Problem Statement (1)-1 Etiology (1)-1 Defining Characteristics (1)-1/2 Student Name: Pam McDonald	Total Points: 2.5 Comments: Great job! Nursing diagnosis is appropriate for your patient. Looking at your defining characteristics, they are not quite specific enough. For example, you listed dyspnea, but is it dyspnea on exertion or dyspnea at rest? Or is it both? For fatigue, you would want to word this as "Patient complains of feeling fatigued." Additionally, which peripheral pulses are you referring to? Radial or dorsalis pedis pulses? Clinical Date: 1/28-1/29/2029
Goal and Outcome (6 points total) Goal Statement (1 point)-0 Outcome: Specific (1)-1/2 Measurable (1)-1/2 Attainable (1)-1/2 Realistic (1)-1/2 Time Frame (1)-1	Total Points: 3 Comments: For your goal statement, this should be a positive statement regarding your nursing diagnosis. For example, "Patient will have increased cardiac output." Looking at your outcomes, these need to be SMART. Again, these should essentially be a positive statement of the defining characteristic. For example, "patient does not complain of feeling fatigue." "Patient will have normal heart sounds on auscultation (S ₁ and S ₂). You should not include anything regarding the blood pressure here if you did not include it in your defining characteristics.
Nursing Interventions: (8 points total) Prioritized (1)-1/2 What (1)-1 How Often (1)-1/2 When (1)-1/2 Individualized (1)-1 Realistic (1)-1 Rationale (1)-1 All pertinent interventions listed (1)-1	Total Points: 6.5 Comments: Great job listing pertinent nursing interventions for your patient. Looking at your prioritization, do you feel as if assessing the patient's heart sounds should be of higher priority than assessing the peripheral pulses? Additionally, remember you must include an example of a time that you are going to complete each of the interventions. For example, you could state "Educate patient on Heart Healthy Diet and the benefits daily (0900) before discharge."
Evaluation: (5 points total) Date (1)-1 Goal Met/partially/unmet (1)-1/2 Defining characteristics (1)-0 Plan to continue/modify/terminate (1)-1/2 Signature (1)-1 *End-of- Program Student Learning Outcomes	Total Points: 3 Comments: Pam, for your evaluation section of the care plan you are evaluating your outcomes not your nursing interventions. Additionally, there should be one generalized statement at the top of this section stating whether or not your goal was met, not met, or partially met. Then you would evaluate each of your outcomes below this, make a statement regarding whether you are continuing with your plan of care, modifying, or terminating, and then include your signature. There is not a separate goal met/partially/unmet statement for each outcome. Please let me know if you need further clarification on this.
Total possible points = 22	Total Points for entire Care plan = 15/22

Nursing Care Plan Grading Tool
AMSN
2020

Firelands Regional Medical Center School of Nursing
 Advanced Medical Surgical Nursing 2020
 Simulation Evaluations

vSim Evaluation	Rachael Heidebrink	Junetta Cooper	Mary Richards	Lloyd Bennett	Kenneth Bronson	Carl Shapiro
Performance Codes: S: Satisfactory U: Unsatisfactory						
Evaluation						
Faculty Initials						
Remediation: Date/Evaluation/ Initials						

* Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2020

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: