EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2020

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Hannah Schoen

Final Grade: **Satisfactory/Unsatisfactory**

Semester: **Spring**

Date of Completion:

Faculty: **Dawn Wikel,** MSN, RN, CNE**; Lora Malfara**, MSN, RN**; Kelly Ammanniti,** MSN, RN

Faculty eSignature:

Teaching Assistant: **Devon Cutnaw,** BSN, RN**; Monica Dunbar,** BSN, RN**;**
Nick Simonovich, BSN, RN**; Liz Woodyard,** BSN, RN, CRN

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:

Skills Lab Competency Tool & Skills Checklists

Simulation, Prebriefing, Debriefing, & Reflection Journals

Nursing Care Plan Rubric

Meditech Documentation

Clinical Debriefing

Clinical Discussion Group Grading Rubric

Evaluation of Clinical Performance Tool

Lasater's Clinical Judgment Rubric & Scoring Sheet

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)

Faculty's Name	Initials

Virtual Simulation Scenarios	**Kelly Ammanniti**	**KA**
	Devon Cutnaw	**DC**
	Monica Dunbar	**MD**
	Lora Malfara	**LM**
	Nick Simonovich	**NS**
	Dawn Wikel	**DW**
	Liz Woodyard	**EW**

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.

***Grey shaded boxes do not need a student evaluation rating or faculty member's initials.**

Date	Care Plan Diagnosis	Evaluation & Instructor Initials	Remediation & Instructor Initials	Remediation & Instructor Initials
1/22/20	Acute Pain R/T inflammation of the pancreas	S/EW	NA	NA
2/12/20	Activity Intolerance R/T Immobility			

Note: Students are required to submit two satisfactory care plans over the course of the semester. If the care plan is not evaluated as satisfactory upon initial submission, the student may revise the care plan based on instructor feedback/remediation and resubmit until satisfactory. At least one care plan must be submitted prior to midterm.

Objective																		
1. Illustrate correlations to demonstrate the pathophysiological alterations in adult patients with medical-surgical problems. (2,3,4,5)*																		
Weeks of the Course	1	2	3	4	5	6	7	8	**Midterm**	9	10	11	12	13	14	**Make Up**	**Make Up**	**Final**
Competencies: a. Analyze the involved patho-physiology of the patient's disease process. (Interpreting)			S	S	S	S												
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	S	S	S												
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	S	S	S												
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			S	S	S	S												
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	S	S	S												
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			S	S	S	S												
g. Assess developmental stages of assigned patients. (Interpreting)			S	S	S	S												
h. Demonstrate evidence of research in being prepared for clinical.	S		S	S	S	S												

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

(Noticing)																			
	Indicate your clinical site as well as your patient's age and primary medical diagnosis in this box weekly.	Medi tech, FSBS, D/C IV, IV Pump Sessions		4N22 Acute Pain R/T inflammation of the pancreas	3T79 Ineffective airway pattern R/T thick secretions	DHAC	3N88 Activity intolerance R/T immobility												
	Instructors Initials	NS	NS	EW	LM	NS													

Comments:

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

WK3 1A,B,C,D: Was able to correctly correlate the pathphysiology with the diagnostics done and the plan of care. EW
Week 4 (1b, c)- Hannah, you did a nice job correlating both of your patients' symptoms and pharmacotherapy to their disease processes. You formulated an accurate plan of care based on these findings. Great job! LM

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective																		
2. Perform physical assessments as a method for determining deviations from normal. (3,4,5)*																		
Weeks of the Course	1	2	3	4	5	6	7	8	**Midterm**	9	10	11	12	13	14	**Make Up**	**Make Up**	**Final**
Competencies: a. Perform inspection, palpation, percussion, and auscultation in the physical assessment of assigned patient. (Responding)			S	S	NA	S												
b. Conduct a fall assessment and implement appropriate precautions. (Responding)			S	S	NA	S												
c. Conduct a skin risk assessment and implement appropriate precautions and care. (Responding)			S	S	NA	S												
d. Communicate physical assessment. Responding)			S	S	NA	S												
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			S	S	NA	S												
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		S	S	NA	S												
	NS	**NS**	EW	LM	NS													

Comments:

Week 1 (2f)- By attending the Meditech clinical update & providing your full, undivided attention during the demonstration of documenting insulin, IV solutions, saline flushes and IV site assessments you are satisfactory for this competency. NS

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

WK3 A,D,F: Assessment details communicated as needed. Documentation accurate and complete with appropriate nurse note. EW
Week 4 (2a, f)- Hannah, you accurately performed a head-to-toe assessment on both of your patients and responded appropriately to their care needs. You charted in Meditech correctly and completed the required areas of documentation. Great job! LM

Objective

3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	14	Make Up	Make Up	Final
Competencies: a. Perform standard precautions. (Responding)	S		S	S	S	S												
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	S	S	S												
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			S	S	S	S												
d. Appropriately prioritizes nursing care. (Responding)			S	S	NA	S												
e. Recognize the need for assistance. (Interpreting)			S	S	S	S												
f. Apply the principles of asepsis where	S		S	S	S	S												

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

indicated. (Responding)																		
g. Implement the appropriate DVT prophylaxis interventions based on assessment and physicians orders. (Responding)			S	S	NA	S												
h. Identify the role of evidence in determining best nursing practice. (Interpreting)			S	S	S	S												
i. Identify recommendations for change through team collaboration. (Interpreting)			S	S	NA	S												
	NS	NS	EW	LM	NS													

Comments:
WK3 B,C,D: Was able to efficiently organize care as well as identify evidence based practice that applied to her patient in terms of her risk for developing diabetes. EW

Week 4 (3b, g)- Hannah, you demonstrated skillful and safe nursing measures throughout your clinical time this week for both of your patients. You provided care for a patient with new onset CHF and instituted proper interventions based on your assessment and the physician's orders. Great job! LM

Objective																		
3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)*																		
Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	14	Make Up	Make Up	Final
Competencies: j. Administer PO, SQ, IM, or ID medications observing the rights of medication			S	S	NA	S												

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

administration. (Responding)																		
k. Calculate medication doses accurately. (Responding)			NA	S	NA	S												
l. Administer IV therapy, piggybacks and/ or adding solution to a continuous infusion line. (Responding)			NA	NA	NA	S												
m. Regulate IV flow rate. (Responding)	S		NA	NA	NA	S												
n. Flush saline lock. (Responding)			NA	NA	NA	S												
o. D/C an IV. (Responding)	S		NA	NA	NA	NA												
p. Monitor an IV. (Responding)			S	S	NA	S												
q. Perform FSBS with appropriate interventions. (Responding)	S		NA	S	NA	NA												
	NS	**NS**	EW	LM	NS													

Comments:

Week 1 (3m,o)- By attending the D/C IV clinical and providing your full, undivided attention during the demonstration of both the Alaris pump, documentation of IV site maintenance and discontinuing a peripheral IV you are satisfactory for this competency. NS/EW (3q)-The student was able to demonstrate understanding of the rationale of FSBS and the use of the glucometer. The student was able to perform a Quality Control check of the glucometer as well as demonstrate skills and knowledge required of proper sample ID, collection and handling of blood. LM/DC
WK3 A,P: Nice work in discussing the need for an oral dose of potassium based on patient's lab values. Although unable to physically give the pill, the process of medication administration was done correctly. Was also able to discontinue a foley catheter without difficulty. EW
Week 4 (3j, k, p, q)- Hannah, you administered oral medications to one of your patients this week utilizing the 3 medication checks and performed the 6 rights of medication administration. You obtained a FSBS following proper protocol and displayed comfort and accuracy with this skill. You also administered a subcutaneous insulin injection following the proper protocol for administration. Great job! LM

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective																		
4. Use therapeutic communication techniques to establish a baseline for nursing decisions. (1,5,7)*																		
Weeks of the Course	1	2	3	4	5	6	7	8	**Midterm**	9	10	11	12	13	14	**Make Up**	**Make Up**	**Final**
Competencies: a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)			S	S	S	S												
b. Communicate professionally and collaboratively with members of the healthcare team. (Responding)			S	S	S	S												
c. Report promptly and accurately any change in the status of the patient. (Responding)			S	S	S	S												
d. Maintain confidentiality of patient health and medical information. (Responding)			S	S	S	S												
e. Consist			S	S	S	S												

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

ently and appropriately post comments in clinical discussion groups. (Reflecting)																		
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			S	S	NA	S												
g. Provide a clear, organized hand-off report to your patient's next provider of care. (Responding)			S	S	NA	S												
	NS	**NS**	EW	LM	NS													

Comments:

WK3 Communicated professionally with members of the healthcare team in terms of patient care as well as the need to discontinue a foley on another patient. CDG was very well written with a good article summary. EW
Week 4 (4a, b, e)- Hannah, you communicated effectively with your patients by explaining everything you were going to perform prior to doing the tasks. You also communicated effectively to other members of the healthcare team and promptly notified your RN and instructor of any changes in your patients' conditions. You provided a detailed, accurate CDG post this week! You also responded to a peer post and included a reference for each. An in-text citation was written accurately within your initial post. Great job! LM

Week 5 4e - Great jo with your CDG this week! You met all of the necessary criteria for a satisfactory evaluation. See your initial post for further comments. APA tip: For the in-text citation, include the author (or in this case Mayo Clinic) and the publication year in addition to the page number (only if using a direct quote). APA citation for your reference would be (Mayo Clinic, 2019, p. 1). Other than that, everything looked good! NS

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective																		
5. Implement patient education based on teaching needs of patients and/or significant others. (1,6)*																		
Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	14	Make Up	Make Up	Final
Competencies: **a. Describe a teaching need of your patient.**** (Reflecting)			S	S	S	S												
b. Utilize appropriate termino-logy and resources when providing patient education. (Responding)			S	S	S	S												
c. Evaluate health-related information on the intranet. (Responding)			S	S	S	S												
	NS	NS	EW	LM	NS													

****5a- You must address this competency in the comments on a weekly basis. For clinicals on 3T, 3N, 4N, or Rehab- describe the patient education you provided; be specific. For clinicals on alternative sites- describe a teaching need you identified.**

Comments:

Wk 3 5A: My patient needed patient education on her diet, because of her inflamed pancreas. She was made aware that she would need to follow a low fat diet to reduce inflammation and to lower her lipase lab count.

WK3 5A: Helping the patient identify high fat foods in her diet in order to follow a low fat diet plan is appropriate. EW

Wk 45A: My patient needed education about how his lifestyle of diet and exercise needed to be modified once discharged from the hospital. My patient was obese and has diabetes along with possible heart complications. It is important that he modifies these things so that more complicated and life threatening heart complications do not arise. This is a great teaching need for your patient, Hannah! You recognized the importance of educating your patient on diet and exercise, especially after his recent diagnosis of new onset CHF. Great job! LM

Wk 5 5A: A teaching need I identified while having clinical at an alternative site was to make sure proper hand hygiene was being preformed within the Digestive Health floor. Hand Hygiene is important to do before and after watching a procedure to reduce the risk of infection for the patient as well as the healthcare providers. NS

*End-of-Program Student Learning Outcomes

Wk 6 5A: My patient needed education on ambulating and position changing frequently. She was at risk for pressure ulcers, and it was important to get her up as much as possible to prevent skin breakdown while in bed. The movement of getting up to the chair or to the bathroom throughout the day was very important in her plan of care.

Objective																		
6. Implement patient-centered plans of care utilizing the nursing process and clinical judgment. (2,3,4,5)*																		
Weeks of the Course	1	2	3	4	5	6	7	8	**Midterm**	9	10	11	12	13	14	**Make Up**	**Make Up**	**Final**
a. Develop and implement a priority care plan utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)			S	S NA	NA	S												
b. Development of clinical judgment in high-fidelity simulation scenarios. (Noticing, Interpreting, Responding, Reflecting)																		
	NS	**NS**	EW	LM	NS													

Comments:

See Care Plan Grading Rubrics below.

Week 8- See Simulation Scoring Sheet below.

Week 13- See Simulation Scoring Sheet below.

*End-of-Program Student Learning Outcomes
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

1/23/2020
Acute Pain R/T inflammation of the pancreas AEB:

Defining Characteristics:

1. Upper Abdominal Pain of 5/10
2. Dyspnea on Exertion
3. Elevated Lipase Lab of 261
4. Low Potassium Lab of 3.3

Patient Outcomes: Patient will have no acute pain AEB:

1.Patient will have upper abdominal pain less than or equal to 3 on a 1-10 pain scale by discharge.

2. Patient will display no dyspnea on exertion by discharge.

3. Patient will have a lipase lab less than 200 by discharge.

4. Patient have a potassium level within the normal range of 3.5-5.0 by discharge.

Related Interventions:

1.Assess Vital Signs Q4hr (0800,1200,1600,2000)

Rationale: To assess that patients temperature, blood pressure, heart rate, temperature, SpO2 and respirations are within normal limits.

2. Assess patients abdomen for distention and bowel sounds Q4hr (0800,1200,1600,2000)

Rationale: To assess that patients abdomen is not distended and that all four quadrants have active bowel sounds within normal limits.

3. Assess upper abdominal pain Q4hr (0800,1200,1600,2000)

Rationale: To assess that patients upper abdominal pain has improvement and the assess effectiveness of pain medication after administration.

4. Administer potassium medication daily as ordered. Potassium Chloride ( )

Rationale: To increase patients potassium level with a goal of maintaining the level within normal range.

5. Encourage ambulation in the hallways TID and PRN (0900,1300,1700)

Rationale: To assess that patient does not display dyspnea on exertion or complain of upper abdominal pain while engaging in activity.

Goal Partially Met: Patient will continue care after discharge.

Hannah Schoen-SN FRMCC

Objective # 6a: Implement patient-centered plans of care utilizing the nursing process and clinical judgment. (2,3,4,5)*	**Students Name:** Hannah Schoen **Date:** January 23, 2020
****Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating**	**Nursing Diagnosis: Acute Pain R/T inflammation of the Pancreas aeb** **1. Upper Abdominal Pain of 5/10** **2. Dyspnea on Exertion** **3. Elevated Lipase Lab of 261** **4. Low Potassium Lab of 3.3**
Nursing Diagnosis: (3 points total) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points 3 Comments: Defining characteristics are appropriate. EW
Goal and Outcome (6 points total) Goal Statement (1) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points 6 Comments: Each outcome meets the SMART criteria. EW
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 6 Comments: All interventions are appropriate; however, points are deducted for not listing all pertinent interventions. Because your outcome involves lab levels like potassium and lipase, you want to include a daily lab order or monitoring as an intervention. Next, because we are discussing pain, does the patient have a prn medication you could give her? Or are there other pain relief techniques such as a heating pad or massage you may offer as an intervention? These are two areas that would need to be included to meet outcomes. EW
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue/terminate (1) Signature (1)	Total Points 3 Comments: Evaluation is appropriate; points deducted for not having defining characteristics in other words what did the patient exhibit that says the outcome was not achieved? Also, be sure to include an actual date. EW
Total possible points = 22 18-22 = Satisfactory care plan 17-14 = Needs improvement care plan $\leq$ 13 = Unsatisfactory care plan	Total Points for entire care plan = 18 Comments: Overall, good work! Please read over comments for suggestions for improvements. EW

*End-of-Program Student Learning Outcomes

Objective # 6a: Implement patient-centered plans of care utilizing the nursing process and clinical judgment. (2,3,4,5)*	**Students Name:** **Date:**
****Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating**	**Nursing Diagnosis:**
Nursing Diagnosis: (3 points total) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points Comments:
Goal and Outcome (6 points total) Goal Statement (1) 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 17-14 = Needs improvement care plan $\leq$ 13 = Unsatisfactory care plan	Total Points for entire care plan = Comments:

*End-of-Program Student Learning Outcomes

Objective																		
7. Illustrate professional conduct including self-examination, responsibility for learning, and goal setting. (7)*																		
Weeks of the Course	1	2	3	4	5	6	7	8	**Midterm**	9	10	11	12	13	14	**Make Up**	**Make Up**	**Final**
a. Reflect on an area of strength. ** (Reflecting)	S		S	S	S	S												
b. Reflect on an area for improvement and set a goal to meet this need.** (Reflecting)	S		S	S	S	S												
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		S	S	S	S												
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	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		S	S	S	S												
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		S	S	S	S												
g. Demonstrate the ability to give and	S		S	S	S	S												

*End-of-Program Student Learning Outcomes

receive constructive feedback. (Responding)																		
h. Actively engage in self-reflection. (Reflecting)	S		S	S	S	S												
	NS	NS	EW	LM	NS													

****7a and 7b: You must address these competencies in the comments section on a weekly basis. Please write a different comment each week. Remember that a goal includes what you will do to improve, how often you will do it, and when you will do it by (example- "I had trouble remembering to do the three checks of the six medication rights prior to administering medications. I will review the six rights and medication administration content in the textbook twice before the next clinical. Additionally, I will request to meet with my clinical faculty member to practice preparing and administering at least three medications before the next clinical."**

Comments:

Week 1: (7a) I felt that I had a strength in the area of performing a finger stick, and felt that I comprehended the material in a way that I understand it clearly. I have a grandmother who performs this every day due to diabetes which made me really familiar to it. I was able to perform this skill during lab. Great strength to note! This is a new skill that can take some time and practice to get comfortable with. Having some familiarity with it can certainly help. Talking with your grandmother to understand how the process of managing diabetes allows you to be more empathetic and understanding to your patient's. I am sure having to poke yourself multiple times a day cannot be easy. Great job reflecting! NS

Week 1: (7b) I felt that I could improve in the area of preparing IV bags and using the IV Pump, because the IV Lab was the first time I have ever gotten to be hands on with this kind of equipment. I will review the videos on edvance, and take time to look at the IV equipment that is at the school before the first clinical. Good area for improvement to note! Again, this is a brand-new skill. The dexterity of spiking, priming, and hanging fluids gets can be difficult at first, but the more you practice and observe, the easier it becomes. Remember to take advantage of the open lab day to get more practice. I think you have a good plan in place to be prepared for clinical next week! NS

Week 3: (7a) I felt that I had a strength in overcoming a bit of fear when having to remove a foley catheter on a patient. I completed this skill the textbook way, and feel very confident that if a future patient needs a catheter removed I could preform this skill accurately and without hesitation.

Week 3:(7b) I would like to improve on being able to find and choose a good evidenced based practice article. I spent multiple hours looking for an article this week, and became very frustrated. I would like to stop in and see Holly to help guide me in the right direction when it comes to picking articles. I was able to pick a great article for this weeks CDG, but I feel like it took more time and energy than it should of.
WK 37A,7B: You did a GREAT job removing the foley! I am confident you will continue to do it accurately! As far as the ebp article, with practice, this will get easier. The article you were able to find was great. Good work this week! EW

Week 4 (7a) I felt that I had a strength in engaging in a deep conversation with my patient on the second day who was fighting a battle with brain cancer. It truly brought a different perspective of nursing into my eyes, and just talking to her about her life made a huge impact in her attitude and care at the hospital. I am glad that you were able to have a conversation with your patient. She needed a listening ear and you were able to provide this. Great job! LM

Week 4(7b) I felt that I could show improve on my knowledge of knowing more about the medications that I am passing to patients. I did not spend adequate time looking up medications before passing them this week. I will make sure I spend adequate time next clinical to ensure I know the important information related to the medications I am giving to benefit both myself and the patient. This is an appropriate area for growth. I agree with your plan for improvement. LM

Week 5 (7a) I felt that I had a strength in being eager to learn from the medical professionals on the alternative sites. I am always excited to learn new things, and especially when I am unfamiliar with a specific department such as Digestive Health. I engaged in conversation with the nurses, nurse anesthetist as well as the physicians who performed the colonoscopy and EDG. Communication with the patients is just as important as communication with other medical staff, and I felt I really gained knowledge from asking questions. Awesome strength to note! It's amazing how much you can learn simply through communication. It seems like you utilized your time well and were able to learn from the experience beyond simply just watching the procedure. The same can be said in regards to patients. The better the communication, the more information you will be able to obtain to care for- and connect with your patient. Staff at alternative sites love students that are engaged and ask questions as it shows you are eager to learn. Great job! NS

Week 5 (7b) I felt that I could improve upon being able to understand more knowledge of a specific department before attending an alternative clinical. Before this digestive health clinical I had very little knowledge on the two procedures performed on patients, and wish I ha obtained a little more knowledge about them before attending for my own benefit. I will get a better understanding of the different clinical areas and their procedures before attending the next clinical. Good plan for improvement. I think having a baseline understanding of what you are going to be observing in the off site clinicals is a great way to allow yourself to get the most out of the experience. Keep up the hard work! NS

Week 6 (7a) I felt a strength when it came to communicating with other student nurses on the clinical day when I took the role of team leader. I felt I effectively communicated with my peers and prioritized care effectively. I was also able to become more comfortable with IVs this week after spiking a bag and performing a saline flush for the first time on clinical.

Week 6 (7b) I felt that I could improve on being able to prioritize patients while being a team leader. Although this was my first time taking on the role of team leader, I struggled in the area of prioritizing my list of patients. Next time as team leader, I will thoroughly go through patients history and diagnosis to ensure I prioritize correctly. I will remember the airway breathing and circulation (ABC) as the first thing to assess when prioritizing my patients.

Firelands Regional Medical Center School of Nursing
Medical Surgical Nursing 2020
Skills Lab Competency Tool

Skills Lab Competency Evaluation Performance Codes: **S**: Satisfactory **U**:Unsatisfactory	**Lab Skills**							
	Week 1	**Week 1**	**Week 1**	**Week 1**	**Week 1**	**Week 2**	**Week 3**	**Week 10**
	IV Math (3,7)*	**Assessment** (2,3,4,5,7)*	**Insulin** (2,3,5,7)*	**Lab Day** (1,2,3,4,5,6,7)*	**IV Skills** (2,3,5,7)*	**Trach** (1,2,3,4,5,6,7)*	**EBP** (3,7)*	**Lab Day** (1,2,3,4,5,6,7)*
	Date: 1/6 & 1/8/20	**Date:** 1/7/20	**Date:** 1/7/20	**Date:** 1/9/20	**Date:** 1/10/20	**Date:** 1/15/20	**Date:** 1/21/20	**Date:** 3/20/20
Evaluation:	**S**	**S**	**S**	**S**	**S**	**S**	**S**	
Instructor Initials	NS	NS	NS	NS	NS	NS	EW	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	

*Course Objectives

Comments:

Week 1
(IV Math)-You satisfactorily participated in the IV Math learning session on 1/6/20 as well as the assigned IV Math practice questions and the IV Math Application lab on 1/8/20. KA
(Assessment)- You were able to satisfactorily demonstrate the Basic Head to Toe Assessment during lab. EW/KA/DW
(Insulin)- You were able to correctly prepare an insulin pen and administer subcutaneous insulin. Insulin requirements were accurately identified and calculated through the corrective scale and carbohydrate coverage orders. MD
(Lab Day)- You satisfactorily completed the mandatory lab review of nursing foundational skills. This was achieved through simulating care for a patient in a scenario requiring competency in assessment, communication, medication administration (including PO and IM injection), nasogastric tube insertion and maintenance, patient mobility and hygiene, use of PPE for Contact Isolation, wound care, and foley insertion. NS/LM/MD
(IV Skills)- You have satisfactorily completed IV lab including a saline flush, hanging a primary and secondary IV solution, adjusting a flow rate to run by gravity, discontinuing IV solution, and monitoring the IV site for infiltration, phlebitis, and signs of complication. NS/EW

Week 2
(Trach Care & Suctioning) - During this lab, you were able to satisfactorily demonstrate competence with tracheostomy care and tracheostomy suctioning. The steps were completed in an appropriate sequence and sterility was maintained. You did not require any prompts, very well done! EW
WK 3 EBP Lab- You actively participated in the online searching process for evidence-based practice literature, as well as reviewing an example article to determine appropriate selection and information needed when summarizing a research article. DW

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

vSim Evaluation Peformance Codes: **S**: Satisfactory **U**: Unsatisfactory	**vSim**					
	Vincent Brody (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Juan Carlos (Pharmacology) (*1, 2, 3, 4, 5, 6)	Marilyn Hughes (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Stan Checketts (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Harry Hadley (Pharmacology) (*1, 2, 3, 4, 5, 6)	Yoa Li (Pharmacology) (*1, 2, 3, 4, 5, 6)
	Date: 1/27/20	**Date: 2/10/20**	**Date: 2/24/20**	**Date: 4/13/20**	**Date: 4/23/20**	**Date: 4/27/20**
Evaluation	S					
Faculty Initials	LM					
Remediation: Date/Evaluation/Initials	NA					

* Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
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 and Date:

lm 12/16/19