

**EVALUATION 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)
1/29/2020	6H	Missed Special Procedures due to illness	
1/30/2020	4H	Missed Infusion Center due to illness	
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:	NA	NA	NA	S	S	S											
a. Manage complex patient care situations with evidence of preparation and organization.	NA	NA	NA	S	S	S											
b. Assess comprehensively as indicated by patient needs and circumstances.	NA S	NA	NA	S	S	S											
c. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care.	S	NA	NA	S	S	S											
d. Evaluate patient's response to nursing interventions.	S	NA	NA	S	S	S											
e. Interpret cardiac rhythm; determine rate and measurements	NA	NA	NA	S NA	NA	S											
f. Administer medications observing the six rights of medication administration.	NA	NA	NA	S	S	S											
g. Perform venipuncture skill with beginning dexterity and evidence of preparation.	NA	NA	NA	NA	NA	NA											
h. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc.	NA	NA	NA	S	S	S											
Faculty Initials	AR	AR	AR	FB	BSc	FB											
onClinical	CD	QU ALI TY	Sick	4C	4P	ICU											

Comments:

Week 2: Comments per Cardiac Diagnostics preceptor- 1-15-20 – Excellent in all areas. Very attentive; great interaction with the patients.

(1b)- Satisfactory via CDG posting related to Cardiac Diagnostics clinical experience. Keep up the great work. AR

Week5: Removed arterial line with instructor supervision. Great job with removal of right radial arterial line and focused assessment during and after removal. FB

Week 5 (1e)- This competency was changed to a NA, because you have not turned in your ECG booklet with measurements and identification of different rhythms. FB

*End-of- Program Student Learning Outcomes

Week 6-1(a)-Excellent job this week managing your patient’s chest tube and all care associated with it. BSc

Week 6-1(f) Great job administering all your medications this week in clinical while observing the six rights of medication administration. You were very well prepared and organized both days. Additionally, you did an excellent job administering your IV-Push medication as well. Keep up the hard work! BSc

Week 7 Week 7- (1e) Satisfactory completion of ECG booklet. (1a) Great job with care provided to a complex intubated patient. (1f) Great job with medication administration including IVP and IVPB, observing the six rights of medication administration. FB

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:	NA	NA	NA	S NI	NA S	S											
a. Correlate relationships among disease process, patient’s history, patient symptoms, and present condition utilizing clinical judgment skills. CC (noticing, interpreting, responding)	NA	NA	NA	S	NA S	S											
b. Monitor for potential risks and anticipate possible early complications. CC (noticing, interpreting, responding)	NA	NA	NA	NA	NA	S											
c. Recognize changes in patient status and take appropriate action. (noticing, interpreting, responding)	NA	NA	NA	NA	NA	S											
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. CC (noticing, interpreting, responding, reflecting)	NA	NA	NA	NA	S NI	NA S											
e. Development of clinical judgment in high-fidelity simulation scenarios. (Noticing, Interpreting, Responding, Reflecting)	NA	NA	NA	NA	NA	NA				NA	NA	NA	NA		NA		
f. Incorporate the ABCDEF Standardized Bundle of interventions for assigned patient. CC (noticing, interpreting, responding)	NA	NA	NA	NA	NA	S											

*End-of- Program Student Learning Outcomes

Faculty Initials	AR	AR	AR	FB	BSc/ FB	BSc/ FB											
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Comments:

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

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

Week 5 (2a)- This competency was changed to a “NI” related to pathophysiology submitted. Sara, you did a great job providing information about your patient, but I will need you to correlate that information with what you found out about cardiomyopathy. Are his labs, diagnostic tests, medications, symptoms, history, and nursing interventions typical for the current diagnosis of cardiomyopathy? **FB** Week 6-2(a) Sara, your re-submission of the pathophysiology CDG provided great correlation of the patient's labs, diagnostic testing, sign and symptoms, and nursing interventions to the diagnosis of cardiomyopathy. You were able to tie all the pieces together and explain how this diagnosis effects all the body systems that were present with your assigned patient. Your competency will be updated to an "S". **FB**

Week 6-2(d) Sara, 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** Week 7-2(d) Please see the Care Plan Rubric at the end of this document for my feedback in relation to your revisions. **BSc**

Week 7-(2b,c,d) Great job contributing to discussion on possible complications, recognition of changes, priority nursing diagnosis for your assigned patient. (2f) Good job with ABCDEF bundle, you provided a good picture of assessment applications to complete the bundle process. **FB**

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	S	S	NA											
a. Critique communication barriers among team members (Preceptorship)	NA	NA	NA	S	NA	NA											
b. Participate in QI, core measures, monitoring standards and documentation.	NA	S	NA	S	S	S											
c. Discuss strategies to achieve fiscal responsibility in clinical practice.	NA	NA	NA	S	S	S											

*End-of- Program Student Learning Outcomes

d. Clarify roles & accountability of team members related to delegation. (Preceptorship)	NA	NA	NA	S	S NA	NA											
e. Determine the priority patient from assigned patient population. (Preceptorship)	NA	NA	NA	NA	NA	NA											
Faculty Initials	AR	AR	AR	FB	BSc	FB											

Comments:

Week 3 (3b)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures clinical experience. Keep up the great work! AR

WEEK 5 While not my patient assisted with combative pt and applied tuff cuffs. Poor communication from pervious floor and not properly medicating pt to address behaviors. Great job stepping in to assist with a patient and staff nurses needs. FB

Week 6-3(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	NA	NA	S	NA	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	NA	NA	S	S	S											
c. Exhibit professional behavior in appearance, responsibility, integrity and respect.	S	NA S	NA	S	S	S											
Faculty Initials	AR	AR	AR	FB	BSc	FB											

Comments:

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	NA	NA	S	S	S											
a. Reflect on your overall performance in the clinical area for the week.	S	NA	NA	S	S	S											
b. Demonstrate initiative in seeking new learning opportunities.	S	NA	NA	S	S	S											
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc.).	S	NA	NA	S	S	S											
d. Perform Standard Precautions.	S	NA	NA	S	S	S											
e. Practice use of standardized EBP tools that support safety and quality.	S	NA	NA	S	S	S											
Faculty Initials	AR	AR	AR	FB	BSc	FB											

Comments:

Week 6-5(b) Great job taking the initiative to attend the Mycamine drug review that was being offered on 4T while on clinical this week. 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	NA	NA	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.	NA	NA	NA	S	S	S											
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes.	S	NA	NA	S	S	S											
d. Deliver effective and concise hand-off reports.	NA	NA	NA	S	S	S											
e. Document interventions and medication administration correctly in the electronic medical record.	NA	NA	NA	S	S	S											
f. Consistently and appropriately posts in clinical discussion groups.	S	S	NA	S	S	S NI											
Faculty Initials	AR	AR	AR	FB	BSc	FB											

Comments:

WEEK 2 CD: Spoke with pt on helpful ways to keep track of medical history when traveling out of state for long periods of time. **Excellent! AR**

Week 2 (6f)- Satisfactory CDG posting related to Cardiac Diagnostics clinical. Keep up the great work! **AR**

Week 3 (6f)- Satisfactory CDG posting related to your Quality Department clinical experience. Keep it up! **AR**

WEEK 5: explained the meds to pt before admin. Explain why we were removing the arterial line and Foley. Also taught pt to splint abd incision while moving. **Those are all great opportunities to provide education, great job! FB**

Week 6-6(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 7 (6b,c)- Great job with discussion of education for patients and families and the collaboration of healthcare team members with patients and families within the ED CDG. (6f)- This competency was changed to a NI because you did not provide an in-text citation in the ED CDG. Please make sure to follow the CDG rubric for all CDG's left throughout the semester. **FB**

*End-of- Program Student Learning Outcomes

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	NA	NA	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	NA	NA	S	S	S											
c. Comply with the FRMCSN "Student Code of Conduct Policy."	S	S	NA	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	NA	S	S	S											
Faculty Initials	AR	AR	AR	FB	BSc	FB											

Comments:

*End-of- Program Student Learning Outcomes

Skills Lab Evaluation Tool
AMSN
2020

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

***Course Objectives**

Comments:

IV Start: 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 Admin/IV Pumps: 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

Prioritization/Delegation: 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 Documentation: 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: 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 Change: Satisfactory central line dressing change using proper technique, as well as line flushing. FB

*End-of- Program Student Learning Outcomes
Blood Draw, Ports: 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

IV Push: Great job with reconstitution of powder with NS, and medication administration. FB

Head to Toe Assessment: Satisfactory completion of Head to Toe Assessment. BS/BSc

<p>Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*</p>	<p>Ineffective breathing pattern R/T Decreased lung expansion</p>
<p>**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating</p>	<p>Total Points Comments</p>
<p>Nursing Diagnosis: (3 points) Problem Statement (1)-1 Etiology (1)-1 Defining Characteristics (1)-0(1) Student Name: Sara Chartrand</p>	<p>Total Points: 2(3) Comments: Great job selecting the priority nursing diagnosis for your patient. Looking at your defining characteristics, these need to be more specific. For example, you stated "Tachypnea" but what was the patient's actual respiratory rate? You would want to state this such as "Tachypnea (RR 26)." "Decreased SPO2 levels below 80%," but is this on RA or on how many liters of oxygen? "Shortness of breath," is this at rest or on exertion, or both? "Diminished bilateral base lung sounds," is this anteriorly, posteriorly, or both? What did you do to find out the patient has diminished lung sounds? Auscultate? Just be sure that you make your defining characteristics as specific as possible.</p> <p>Clinical Date: 7/11-2/12/2020</p> <p>Great job revising your defining characteristics to make them more specific.</p>
<p>Goal and Outcome (6 points total) Goal Statement (1 point)-0(0) Outcome: Specific (1)-1 Measurable (1)-1/2(1) Attainable (1)-1 Realistic (1)-1 Time Frame (1) -1</p>	<p>Total Points: 4.5(5) Comments: Sara, your goal statement should be a positive statement of your nursing diagnosis. For example, "Patient will have an effective breathing pattern." You do not need to add any extra information into this statement. Your outcomes are nicely done. These were much more specific compared to your defining characteristics. For your outcome statement "Lung sounds will be clear in all lung fields," in order for this to be measurable you would need to state "Lung sounds will be clear on auscultation both anteriorly and posteriorly on inspiration and expiration." Additionally, be sure you have an outcome statement for each defining characteristic. You were missing an outcome statement for "Shortness of breath."</p> <p>Unfortunately, your goal statement is still written incorrectly so no additional points can be given here. It should be stated as "Patient will have an effective breathing pattern." You do not need to add any extra information into this statement. Great job revising your outcome statements to ensure they were all SMART.</p>
<p>Nursing Interventions: (8 points total) Prioritized (1)-1 What (1)-1 How Often (1)-1 When (1)-1/2(1) Individualized (1)-1 Realistic (1)-1 *Rationale (1)-1 Student Learning Outcomes All pertinent interventions listed (1)-1</p>	<p>Total Points: 7(8) Comments: Great job with your nursing interventions. Be sure to include an example of a time for every intervention. You omitted a time for "Educate patient on chest tube Daily at minimum." You could also reword this as "Educate patient on chest tube daily and PRN (0800, 1200, and 1600)." Looking at your rationale for "Assess pain level every 2 hrs," the rationale you provided is not accurate for this intervention.</p> <p>Excellent job with your revisions here.</p>
<p>Evaluation: (5 points total)</p>	<p>Total Points: 2.5(4)</p>

Nursing Care Plan Grading Tool
 AMSN
 2020

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

<u>vSim Evaluation</u>	gy)Rachael Heidebrink	acology)Junetta Cooper	acology)Mary Richards	Surgical)Lloyd Bennett	rgical)Kenneth Bronson	macology)Carl Shapiro
Performance Codes: S: Satisfactory U: Unsatisfactory						
Evaluation	S					
Faculty Initials	BSc					
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:

AR 12/20/19