EVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing- 2020
Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: | Malenia Wagner | **Final Grade: Satisfactory/Unsatisfactory**

Semester: Summer Session   **Date of Completion:**

Faculty: Fran Brennan MSN, RN, Monica Dunbar MSN, RN, Lora Malfara MSN, Rn
          Carmen Patterson MSN, RN, Brittany Schuster MSN, RN
Teaching Assistants: Devon Cutnaw BSN, RN   **Faculty eSignature:** | |

DIRECTIONS FOR USE:
Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S), Needs Improvement (NI), Unsatisfactory (U), and Not Available (NA).** The faculty member will initial if in agreement with the student's evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written on the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, or U". If the student does not self-rate, then it is an automatic "U". A student who submits the clinical evaluation tool late will be rated as "U" in the appropriate competency(s) for that clinical week. Whenever a student receives a "U" in a competency, the following week it must be addressed with a comment as to why it is no longer a "U". If the student does not state why the "U" is corrected, then it will be another "U" until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. If the final performance code is unsatisfactory in any one of the competencies, a grade of unsatisfactory is given. If a pattern of unsatisfactory performance occurs after performing the competency satisfactorily, this also constitutes a grade of unsatisfactory. An unsatisfactory as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.

METHODS OF EVALUATION:
Clinical Patient Profile
Documentation
Evaluation of Clinical Performance Tool
Onsite Clinical Debriefing
Online Discussion Rubric
Nursing Process Recording Rubric
Geriatric Assessment Rubric
Participation in adjunctive therapies (N.A./A.A.; Erie County Health Department Detox Unit,
                                        Hospice inpatient/outpatient care)

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	
7/3/2020	2	Missing VSim – Makeup completed 7/5/2020 BS	
7/10/2020	2	Vsim not completed on time – Makeup completed 7/10/2020 BS	

* End-of-Program Student Learning Outcomes

EBP presentations
Hospice Reflection Journal
Virtual Simulation Scenarios

Initials	Faculty Name/Teaching Assistant
FB	Fran Brennan MSN. RN
MD	Monica Dunbar MSN, RN
LM	Lora Malfara MSN, RN
CP	Carmen Patterson MSN, RN
BS	Brittany Schuster MSN, RN
DC	Devon Cutnaw 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.

* End-of-Program Student Learning Outcomes

Objective

	1. Apply the principles of psychiatric theory in the care of adolescent to geriatric patients with a mental illness diagnosis. (1, 2, 3, 5, 6, 7, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8/Make Up	Final
Competencies: a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder.	S	NA	S	NA	S				
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder.	S	NA	S	NA	S				
c. Provide culturally and spiritually competent care within the scope of nursing that meets the needs of assigned patients from diverse cultural, racial and ethnic backgrounds.	S	NA	S	NA	S				
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care	S	NA	S	NA	S				
e. Recognize normal versus non-normal behavior patterns in terms of developmental milestones. (Erickson).	S	NA	S	NA	S				
f. Develop and implement an appropriate nursing therapy group activity.	S	NA	S	NA	~~S~~ NA				
g. Develop a geriatric physical/mental health assessment and education plan. (**Geriatric Assessment**)					~~S~~ NA				
Faculty Initials	MD	CP	DC	BS	BS				
	1S	No Clinical	1S	NO CLINCAL	HOSPICE				

* End-of-Program Student Learning Outcomes

Comments:
Week 1 1A-G-You did very well achieving these competencies during this week of clinical. MD

Week 5-1(a-e) Excellent job assisting your nurse with caring for the patients on the inpatient Stein Hospice unit. You were able to satisfactorily achieve all of these competencies. BS

Objective										
2. Synthesize concepts related to psychopathology, health assessment data, evidenced based practice and the nursing process using clinical judgment skills to plan and care for patients with mental illness. (1, 2, 3, 4, 5, 6, 7, 8)*										

Weeks of Course:	1	2	3	4	5	6	7	8/Make Up	Final
Competencies: a. Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. **(noticing)**	S	NA	S	NA	S				
b. Identify the individual patient's symptoms related to the psychiatric diagnosis. **(interpreting)**	S	NA	S	NA	S				
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. **(noticing, interpreting)**	S	NA	S	NA	S				
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. **(noticing, interpreting, responding, reflecting)**	S	NA	S	NA	~~S~~ NA				
e. Apply the principles of asepsis and standard precautions.	S	NA	S	NA	S				
f. Practice use of standardized EBP tools that support safety and quality. **(noticing, responding)**	S	NA	S	NA	S				
Faculty Initials	MD	CP	DC	BS	BS				

Comments:
Week 1 2A-F- Excellent job with obtaining an in-depth history of your patient, identifying symptoms, and identifying coping/defense mechanisms. MD

Week 3 (2a-f) Good job on obtaining your patient's history and correlating it with their current admission. You successfully discussed appropriate coping skills and identified triggers and defense mechanisms. DC

* End-of-Program Student Learning Outcomes

Objective

	3. Refine basic verbal and nonverbal therapeutic communication skills when interacting with patients, families, and members of the health care team. (1, 2, 3, 5, 7, 8)*

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

Comments:

Week 1 3F-You did not place a reference at the conclusion of your CDG. Please remember this for the upcoming CDGs you will have to write. MD

Week 1 3F - I am going to ensure that this does not happen again during this semester by being more thorough when proofreading and also being more detail oriented.

* End-of-Program Student Learning Outcomes

Week 3 (3 f) CDG is improved this week. It was insightful and thorough. Good job! DC

Week 5-3(a,c,d) Excellent job therapeutically communicating with the patients and their families while in your hospice clinical. BS

Week 5- Malenia, you received an "S" with a total score of 100/100. Great job on your Nursing Process Recording! You provided good insight concerning your interactions with your patient and had appropriate outcomes. You examined you verbal and non-verbal communication and noted when you were not being therapeutic. With that knowledge, you corrected yourself to provide better communication. You completed 10 interchanges with your patient. Great job! DC

Week 5-3(f) Malenia, you did an excellent job with your hospice reflection journal. Thank you so much for sharing your experience and feelings. I am glad that this clinical experience clarified your perspective of hospice, and demonstrated to you that death doesn't have to be a scary and uncomfortable process for patients and their families. Rather, it can be comfortable and peaceful, and patients do not have to be alone. Although this assignment did not require an in-text citation or reference, you provided an in-text citation without the reference listed at the end. If you provide an in-text citation, there must be a reference listed for that citation at the end of the paper. BS

* End-of-Program Student Learning Outcomes

Objective

4. Demonstrate knowledge of frequently prescribed medications utilized in treating mental illness. (1, 4, 5, 6, 7)*

Weeks of Course:	1	2	3	4	5	6	7	8/Make up	Final
a. Discuss the safe administration of medication while observing the six rights of medication administration.	S	NA	S	NA	S NA				
b. Demonstrate ability to discuss the uses and implication of psychotropic medications	S	NA	S	NA	S NA				
c. Identify the major classification of psychotropic medications.	S	NA	S	NA	S NA				
d. Identify common barriers to maintaining medication compliance.	S	NA	S	NA	S NA				
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications.	S	NA	S	NA	S NA				
Faculty Initials	MD	CP	DC	BS	BS				

Comments:
Week 1 4A-E-You did a great job with understanding the medication review we analyzed in clinical this week! MD

Week 5-4(a-e) This week you did not have the opportunity to discuss medications 1:1 with an instructor or within a CDG, therefore, these competencies have been changed to "NA." BS

* End-of-Program Student Learning Outcomes

Objective

5. Develop an awareness of community Mental Health resources and services. (5, 6, 7, 8)*

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

Comments:

Week 1 5A-You will accomplish this competency during your detox rotation. MD

Week 3 (5 a-d) -Malenia had clinical on 1 South this week. DC

* End-of-Program Student Learning Outcomes

Objective

6. Demonstrate satisfactory proficiency when using informatics and techniques in the assessment of patients with a mental illness diagnosis. (1, 2, 3, 4, 6, 8)*

Weeks of Course:	1	2	3	4	5	6	7	8/Make up	Final
Competencies: a. Demonstrate competence in navigating the electronic health record.	S	NA	S	NA	~~S~~ NA				
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record.	S	NA	S	NA	~~S~~ NA				
Faculty Initials	MD	CP	DC	BS	BS				

Comments:

Week 1 6A-B-Great job navigating the EHR and documenting this week! MD

Week 3 (6 a,b) – Malenia successfully documented   for her nursing group. She was able to access her patient's electronic health record to gather information appropriately. DC

Week 5-6(a,b) This week you did not navigate the electronic health record or perform any documentation. BS

* End-of-Program Student Learning Outcomes

Objective										
7. Evaluate self-participation in patient care experiences with the focus on safety, ethical, legal, and professional responsibilities. (7)*										

Weeks of Course:	1	2	3	4	5	6	7	8/Make up	Final
a. Identify your strengths for care delivery of the patient with mental illness **(cite on tool)**	S	NA	S	NA	S				
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care.	S	NA	S	NA	S				
c. Illustrate active engagement in self-reflection and debriefing.	S	NA	S	NA	S				
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE" – attitude, commitment, and enthusiasm during all clinical interactions.	S	NA	S	NA	S				
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect.	S	NA	S	NA	NI				
f. Follow the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care."	S	NA	S	NA	S				
Faculty Initials	MD	CP	DC	BS	BS				

Comments:

7A – WEEK 1: During this clinical I was able to excel due to my ability to talk freely with individuals. I think that my outgoing personality was refreshing to the group and they all were very receptive to the conversation. I really enjoyed my time in the unit. I was able to enhance my communication skills simply by engaging with the patients and seeing how they responded to the conversation. Melenia-You were outstanding on the unit this week! Your vibrant personality really showed and you excelled in this area! Wonderful job! MD

7A – WEEK 3: This week the group was not near as talkative as the first group while I was there. I was able to start the conversation for some of the patient in which they continued to talk and share more with myself but also the group. I felt that this was a strength this week because I was able to bring the group together and they were able to open up a lot more to each other. You did a nice job early in the day to encourage everyone to participate. You interacted well with the patients and were able to make them laugh. Nice job! DC

7A – WEEK 5: THIS WEEK DURING CLINCAL I WAS ON THE HOSPICE FLOOR AND I WAS VERY HAPPY WITH MY OVERALL EXPERIENCE. I WAS ABLE TO GET A LOT OF CLINCAL CARE IN AND WAS ABLE TO USE THE THERAPUETIC COMMUINCATION THAT I WAS TAUGHT TO EDUCATION THE PATIENTS. ONE AREA THAT I EXCELLED IN WAS HELPING FEED A NONVERBAL PATIENT WHO BY THE END OF THE

FEEDING SMILED AT ME. I FELT THAT THIS WAS A WONDERFUL RESPONSE TO MY BODY LANGUAGE AND OVERALL DEMEANOR. **Excellent job! BS**

7E – WEEK 5: I AM NOT SURE WHY I FORGOT TO TURN IN MY TOOL OTHER THAN I WAS PREOCCUPIDED WITH STUDYING FOR THE EXAM. I AM GOING TO ENSURE THAT MY PHONE HAS A REMINDER AND THAT I AM ABLE TO FINISH STRONG THAT LAST 3 WEEKS OF CLASS!

Malenia, thank you for addressing your mistake and providing a plan. It is very important that you are organized and keep yourself on track all throughout nursing school. This prepares you to be the same way when you're out working as an RN. Disorganization does not provide a safe environment for patients. Additionally, please be sure to provide yourself enough time to complete your clinical tool thoroughly and accurately. There were many competencies that you self-rated as "S" for this week, and you didn't even have the opportunity to actually complete them. There are a few more weeks left in the semester, you can do it! I believe in you! BS

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	Disturbed Thought Process Related To Elevated Level of Anxiety	
Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Total Points Comments	

Nursing Diagnosis: (3 points) 3
   Problem Statement (1) 1
   Etiology (1) 1
   Defining Characteristics (1)   1
	Total Points 3
	Comments: Good job. MD
		Nursing Care Plan Grading Tool
		Psychiatric Nursing
		2020

Goal and Outcome (6 points total) 5
Goal Statement (1 point) 0
Outcome:
   Specific (1) 1
   Measurable (1) 1
   Attainable (1) 1
   Realistic (1) 1
   Time Frame (1) 1
	Total Points 5
	Comments: Remember that a goal statement has to be written for all care plans. MD
		Student Name: Clinical Date:

Nursing Interventions: (8 points total) 8
   Prioritized (1) 1
   What (1) 1
   How Often (1) 1
   When (1) 1
   Individualized (1) 1
   Realistic (1) 1
   Rationale (1) 1
   All pertinent interventions listed (1) 1
	Total Points 8
	Comments: Nice job with writing your interventions. MD	

Evaluation: (5 points total) 3
   Date (1) 1
   Goal Met/partially/unmet (1) 0
   Defining characteristics (1) 0
   Plan to continue//modify/terminate (1) 1
   Signature (1) 1
	Total Points 3
	Comments: Remember that you have to write if a goal was met/unmet/partially met and all defining characteristics need to be addressed in all care plans. MD	

Total possible points = 22 18-22 = Satisfactory care plan 17-14 = Needs improvement care plan <13 = Unsatisfactory care plan	Total Points for entire Care plan = 19 Comments: Nice job! MD	

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

vSim Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	vSim					
	(Bipolar Scenario)Sharon Cole	ab/ Acute Detox Andrew Davis enario)	ltural Scenario)Linda Waterfall	e Personality Sandra Littlefield r Scenario)	eimer's Disorder)George Palo	PTSD Scenario)Randy Adams
	Date: 7/3/2020	**Date: 7/10/2020**	**Date: 7/17/2020**	**Date: 7/24/2020**	**Date: 7/31/2020**	**Date: 8/7/2020**
Evaluation	U	U	S	S		
Faculty Initials	DC	DC	BS	BS		
Remediation: Date/Evaluation/Initials	7/5/2020 S BS	7/10/2020 S BS	NA	NA		

* Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing

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: