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

Student: Kim Nunn

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

* 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

* 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.	n/a	S	n/a	s	s				
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder.	n/a	S	n/a	s	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.	n/a	S	n/a	s	s				
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care	n/a	n/a	n/a	s	s				
e. Recognize normal versus non-normal behavior patterns in terms of developmental milestones. (Erickson).	n/a	S	n/a	s	s				
f. Develop and implement an appropriate nursing therapy group activity.	n/a	n/a	n/a	n/a	s				
g. Develop a geriatric physical/mental health assessment and education plan. (**Geriatric Assessment**)					n/a				
Faculty Initials	LM	CP	FB	MD	DC				
Clinical Location	No clinical	Stein Hospice	No clinical	Detox and AA	1south				

Comments:

* End-of-Program Student Learning Outcomes

Week 1 – Kim did not have clinical this week therefore all objectives and competencies are NA. LM
Week 3 no clinical site.

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)**	n/a	S	n/a	s	S				
b. Identify the individual patient's symptoms related to the psychiatric diagnosis. **(interpreting)**	n/a	n/a	n/a	s	S				
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. **(noticing, interpreting)**	n/a	S	n/a	s	S				
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. **(noticing, interpreting, responding, reflecting)**	n/a	S	n/a	S	S				
e. Apply the principles of asepsis and standard precautions.	n/a	S	n/a	s	S				
f. Practice use of standardized EBP tools that support safety and quality. **(noticing, responding)**	n/a	S	n/a	S	S				
Faculty Initials	LM	CP	FB	MD	DC				

Comments: Week 1 no clinical site.
Week 3 no clinical site.

* 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.	n/a	S	n/a	s	S				
b. Demonstrate professional and appropriate communication with the treatment team by using the SBAR format for handoff communication during transition of care.	n/a	S	n/a	s	S				
c. Identify barriers to effective communication. **(noticing, interpreting)**	n/a	S	n/a	s	S				
d. Construct effective therapeutic responses.	n/a	S	n/a	s	S				
e. Construct a satisfactory patient-nurse therapeutic communication. (**Nursing Process Study)**					S				
f. Posts respectfully and appropriately in clinical discussion groups.	n/a	s	n/a	~~S~~ U	~~S~~ U				
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.	n/a	s	n/a	s	S				
h. Teach patient/family based on readiness to learn and patient needs. **(responding, reflecting)**	n/a	S	n/a	S	S				
Faculty Initials	LM	CP	FB	MD	DC				

Comments: Wk 1 no clinical site.

Week 2 Objective 3f: Kim, you did a nice job on your reflection journal! You shared that your experience during the Hospice observation did not change your own beliefs but instead it reinforced your beliefs. I am happy you were able to experience and observe respect and teamwork among the Hospice staff. I am also happy you want to use this experience to improve the environment in your current work setting! I enjoyed reading about your Hospice experience. CP

* End-of-Program Student Learning Outcomes

Week 4 3F-Kim-this week for CDG you did not include an in-text citation in either of your CDG posts and you did not have a reference for one of your CDGs resulting in an unsatisfactory rating in this competency. Both of these are required to receive a satisfactory in this competency. Remember-an in-text citation is the author's last name and the year of the publication. Like this: (Dunbar, 2020). References have to have authors, year of publication, title of article, and where the article was obtained for it to count as a reference. If you are having difficulty please reach out to an instructor for help! **Because you received an unsatisfactory you need to address how you will fix these issues in the future. Please be sure to write on your tool how you will do this.** MD

I will fix this providing the correct form of in cite citations and reference in my CDG's posts going forward. Thank you for the example. KN

Wk 5 (3 F) – Kim – You did not include an in-text citation for your CDG this week. In addition, your references that were listed were not listed per APA format. I HIGHLY suggest that you review Monica's above information as well as seeking out the help of instructors or looking APA resources. You will need to address this for next week. Also – please see the Care Plan rubric/comments below and make corrections. DC

* End-of-Program Student Learning Outcomes

Objective									
4. Demonstrate knowledge of frequently prescribed medications utilized in treating mental illness. (1, 4, 5, 6, 7)* **/a**									
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.	n/a	n/a	n/a	n/a	s				
b. Demonstrate ability to discuss the uses and implication of psychotropic medications	n/a	n/a	~~n/a~~ S	s	s				
c. Identify the major classification of psychotropic medications.	n/a	S	~~n/a~~ S	s	s				
d. Identify common barriers to maintaining medication compliance.	n/a	S	n/a	s	s				
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications.	n/a	n/a	~~n/a~~ S	S	S				
Faculty Initials	LM	CP	FB	MD	DC				

Comments: **Wk 1 no clinical site.**

* 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.	n/a	n/a	n/a	S	n/a				
b. Discuss recommendations for referrals to appropriate community resources and agencies.	n/a	n/a	n/a	S	n/a				
c. Attend Erie County Health Department Detox Unit observing the care of a patient with mental illness-substance abuse. **(Community Agency Observation-Detox Unit)**	n/a	n/a	n/a	S	n/a				
d. Attend Narcotics/ Alcoholics Anonymous meeting. **(Alcoholics/Narcotics Anonymous at the Artisans of Sandusky Observation)**	n/a	n/a	n/a	S	n/a				
Faculty Initials	LM	CP	FB	MD	DC				

Comments:

* 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.	n/a	S	n/a	n/a	S				
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record.	n/a	S	n/a	n/a	S				
Faculty Initials	LM	CP	FB	MD	DC				

Comments:

Wk 5 (6 a,b) – You successfully researched your patient's history utilizing Meditech and documented for your Nursing Therapy Group. DC

* 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)**	n/a	S	n/a	s	~~S~~ U				
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care.	n/a	S	n/a	s	S				
c. Illustrate active engagement in self-reflection and debriefing.	n/a	S	n/a	s	S				
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE" – attitude, commitment, and enthusiasm during all clinical interactions.	n/a	S	n/a	s	S				
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect.	n/a	S	~~n/a~~ U	~~S~~ U	~~S~~ U				
f. Follow the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care."	n/a	S	n/a	s	S				
Faculty Initials	LM	CP	FB	MD	DC				

Comments: Wk 1 no clinical site.

Week 3 (7e)- Kim you are to turn in your clinical evaluation tool on Friday at 0800 if you have no clinical or you have clinical on Tuesday and/or Wednesday. Your submission was at 1653 on July 10th, Friday. Therefore, you have received an unsatisfactory for professional behavior which includes responsibility. You will need to address this "U" as stated in the beginning of this document to receive a "S" (satisfactory) grade next week. FB

I will correct this by turning it on time.

Week 4 (7e)- Kim, you receive a "U" for this competency based off the communication from an offsite facility. Remember that expectations are that you present yourself in a professional manner. Professionalism encompasses the verbal and nonverbal communication that you display. You must also take responsibility for your actions and how you are being perceived by others. Make sure you are cognitive of your tone of voice and the choice of words being used when communicating with other professionals and patients. You must address this "U" rating per the instructions provided at the top of this evaluation tool. "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." FB/MD

I have corrected this by watching my verbal and nonverbal communication skills as we discussed in our meeting . I have conducted myself in professional manner and will continue to do so . Thank you. KN DC

Wk 5 (7 a, e) – You received a "U" in these sections for the following reasons. A: You did not list your strengths for care delivery for this week. E: You did not complete the summary for your EBP article before you presented. I did allow you to send me the completed summary by 7/22/2020 at 1700 however it did not meet the requirements listed. Although you did turn in a completed summary, it was not sent to me via e-mail until 7/23/2020. There was not a proper APA citation and the summary and objective portions were minimal (One sentence for the objective and four for the summary) In addition, when asked why it was not completed you had responded that you did not know about the EBP article requirements. This information was given the first day of class, in the syllabus and in Edvance360 under resources. This relates to the comment from week 4 about taking responsibility for your actions. Please make sure to address these for next week. DC

Nursing Care Plan Grading Tool
Psychiatric Nursing
2020

Student Name: **Clinical Date:**

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	7/21/2020
****Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating**	Total Points 13 Comments
Nursing Diagnosis: (3 points) Problem Statement (1) 1 Etiology (1) 1 Defining Characteristics (1) 0	Total Points 2 Comments: Good problem statement and etiology. Defining characteristics must be more specific and separate. For example what do you mean by 'not effective communication with sister?' DC
Goal and Outcome (6 points total) 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: No goal statement listed. Outcomes listed were appropriate for patient. DC
Nursing Interventions: (8 points total) Prioritized (1) 0 What (1) 1 How Often (1) 0 When (1) 0 Individualized (1)0 Realistic (1) 1 Rationale (1) 0 All pertinent interventions listed (1) 0	Total Points 2 Comments: You are on a good start with the interventions and they are individualized for the patient. Rationales are extremely vague. Please reference your materials in Skyscape for good examples. There are quite a few more interventions that needed to be added for your patient and their nursing diagnosis. Interventions must be personalized to that patient.
Evaluation: (5 points total) Date (1) 1 Goal Met/partially/unmet (1) 1 Defining characteristics (1) 0 Plan to continue//modify/terminate (1) 1 Signature (1) 1	Total Points 4 Comments: Your evaluation must mirror what you wrote in your goals/outcome section. Each goal must be evaluated. You added in orientation status under evaluation which was not listed as an outcome. There were additional outcomes that were not evaluated. DC
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 = 13 Comments: Overall, you had a good start for your patient's care plan. However, you must follow the rubric to ensure that you do not lose points. Utilize SMART as you have done in previous semesters. Remember that for any CDG/ Care plan you must at least double check for spelling and/or grammatical error. You had several of each as well as well as incomplete sentences. Your reference/in-text citation was incorrect. Please make sure to review proper APA references/in-text citations.DC

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

vSim Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**vSim**					
	Sharon Cole (Bipolar Scenario) (*1,2,3,4,5)	Andrew Davis (Alcohol Rehab/ Acute Detox Scenario) (*1,2,3,4,5)	Linda Waterfall (Anxiety/Cultural Scenario) (*1,2,3,4,5)	Sandra Littlefield (Borderline Personality Disorder Scenario) (*1,2,3,4,5)	George Palo (Alzheimer's Disorder) (*1,2,3,4,5)	Randy Adams (PTSD Scenario) (*1,2,3,4,5)
	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	S	U	S	S		
Faculty Initials	FB	FB	MD	DC		
Remediation: Date/Evaluation/Initials		7/13/20/S FB	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: