

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2020

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Hallie Kilbride

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

Faculty: Frances Brennan, MSN, RN; Lora Malfara, MSN, RN; Amy Rockwell, MSN, RN; Brittany Schuster, MSN, RN

Teaching Assistant: Devon Cutnaw, BSN, RN; Nick Simonovich, 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:

Skills Lab Checklists	Faculty Feedback
Care plan Grading Rubric	Documentation
Administration of Medications	
Simulation Scenarios	
Skills Demonstration	
Evaluation of Clinical Performance Tool	
Clinical Discussion Group Grading Rubric	
Lasater Clinical Judgment Rubric	
Skills Lab Competency Tool	

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
Faculty's Name			Initials
Frances Brennan			FB
Devon Cutnaw			DC
Lora Malfara			LM
Brittany Schuster (Lombardi)			BS (BL)
Nicholas Simonovich			NS
Amy Rockwell			AR

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/patients/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.

***Grey shaded boxes do not need a student evaluation rating.**

Objective																			
1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*																			
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Make-Up	Final
Competencies:																			
a. Identify spiritual needs of patient (Noticing).																			
b. Identify cultural factors that influence healthcare (Noticing).																			
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).			NA	NA	S														
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).			NA	NA	S														
Clinical Location: Patient age			DC	NS	BS														
			NA	NA	4N 75														

Comments

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																			
2. Summarize knowledge of anatomy, physiology, chemistry, nutrition, psychosocial and developmental principles in performance of basic physical assessment through use of clinical judgment skills. (3,4, 5)*																			
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Make-Up	Final
Competencies:																			
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).																			
b. Use correct technique for vital sign measurement (Responding).			NA	NA	S														
c. Conduct a fall assessment and institute appropriate precautions (Responding).																			
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).																			
e. Collect the nutritional data of assigned patient (Noticing).																			
f. Demonstrates appropriate insertion, maintenance, and removal of NG tube (Responding).																			
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).																			
			DC	NS	BS														

Comments

Week 5-2(b) Hallie, you did an excellent job with your vital sign measurements this week. You utilized the correct technique for all vital signs, and you were able to obtain accurate measurements. Keep up all your great work! BS

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																			
3. Select communication techniques and appropriate boundaries with patients, families, and health care team members. (1,2,3,4,6,7)*																			
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Make-Up	Final
Competencies:																			
a. Receive report at beginning of shift from assigned nurse (Noticing).																			
b. Hand off (report) pertinent, current information to the next provider of care (Responding).			NA	NA	NA														
c. Use appropriate medical terminology in verbal and written communication (Responding).			NA	NA	S														
d. Report promptly and accurately any change in the status of the patient (Responding).			NA	NA	NA														
e. Communicate effectively with patients and families (Responding).			NA	NA	S														
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).			NA	NA	S														
			DC	NS	BS														

Week 5-3(e) Great job communicating with your patient and letting him know what you were doing even when he was very tired and sleepy. It is always important to let the patient know what is going on even if it appears as if they are not necessarily listening or able to comprehend. BS

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																			
4. Exemplify advanced searches in accessing electronic health care information and documenting patient care. (1,4,8)*																			
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Make-Up	Final
Competencies:			NA	NA	S														
a. Document vital signs and head to toe assessment according to policy (Responding).																			
b. Document the patient response to nursing care provided (Responding).																			
c. Access medical information of assigned patient in Electronic Medical Record (Responding).			NA	NA	NA														
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S	NA	NA	S														
e. Provide basic patient education with accurate electronic documentation (Responding).																			
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).																			
*Week 2 –Meditech Expanse		DC	DC	NS	BS														

Comments

Wk 2 4(d) – You successfully completed Meditech lab this week. DC

Week 5-4(a) Excellent job with your documentation of vital signs this week. Your documentation was completed in a timely manner, accurate, and according to policy. Great job! BS

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																			
5. Exemplify psychomotor skills and nursing care safely using evidence-based practice. (3,4,5,7,8)*																			
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Make-Up	Final
Competencies:			NA	NA	S														
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).																			
b. Apply the principles of asepsis and standard/infection control precautions (Responding).			NA	NA	S														
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).																			
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).			NA	NA	S														
e. Organize time providing patient care efficiently and safely (Responding).			NA	NA	S														
f. Manages hygiene needs of assigned patient (Responding).																			
g. Demonstrate appropriate skill with wound care (Responding).																			
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).																			
			DC	NS	BS														

Comments

****You must document the location of the pull station and extinguisher here for clinical #2 experience.**

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																			
6. Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*																			
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Make-Up	Final
Competencies: a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding). *See rubric at end of tool																			

Comments

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																			
7. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*																			
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Make-Up	Final
Competencies:																			
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).																			
b. Recognize patient drug allergies (Interpreting).																			
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).																			
d. Administer oral, intra-muscular, subcutaneous, and intradermal medications using correct techniques (Responding).																			
e. Review the patient record for time of last dose before giving prn medication (Interpreting).																			
f. Assess the patient response to prn medications (Responding).																			
g. Document medication administration appropriately (Responding).																			
*Week 11: BMV																			

Comments

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																			
8. Exemplify professional conduct through self-reflection, responsibility for learning, and goal setting. (1,5,7)*																			
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Make-Up	Final
Competencies:			NA	NA	S														
a. Reflect on areas of strength** (Reflecting)																			
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)			NA	NA	S NI														
c. Incorporate instructor feedback for improvement and growth (Reflecting).			NA	NA	S														
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).			NA	NA	S														
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).			NA	NA	S														
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).			NA	NA	S														
g. Comply with patient's Bill of Rights (Responding).			NA	NA	S														
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).			NA	NA	S														
i. Actively engage in self-reflection. (Reflecting)			NA	NA	S														
*			DC	NS	BS														

** Must have different written example each week of clinical/lab. You must explain your plan for how you will improve. Example, "I am having a difficult time with obtaining a manual BP. I will get a BP cuff from Amy and practice manual BP's with at least three members of my family this week." Please ensure that you answer this section in-depth with your plan of action. Each week must be different.

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

WEEK 5, 8:A: I feel like I did very well with being prepared with what to do and what to bring to clinical.

8:B: I would like to improve on communicating with the nurses, PCT, and clinical instructors.

Week 5-8(a,b) Hallie, excellent job identifying your strength for clinical this week. In the future, try to be a little more detailed when responding to these two competencies. Unfortunately, I had to change competency 8(b) to an NI because you did not provide a plan for improvement. I think it's great that you would like to improve your communication with the nurses, PCTs, and your clinical instructors. What are you going to do in order to improve? In other words, what is your plan? Overall, you did an excellent job in your first clinical experience this semester! BS

Week 12 or 13:

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	
**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Total Points Comments
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 point) 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 17-13 = Needs improvement care plan <13 = Unsatisfactory care plan	Total Points for entire Care plan = Comments:

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

<u>Simulation Evaluation</u> Performance Codes: S: Satisfactory U: Unsatisfactory	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
	Date:	Date:
Evaluation		
Faculty Initials		
Remediation: Date/Evaluation/Initials		

* Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
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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: _____