EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2020

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Lillian Royster

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
Care plan Grading Rubric
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
Faculty Feedback
Documentation

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).								NA											
b. Identify cultural factors that influence healthcare (Noticing).								NA											
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).			N/A	N/A	S	N/A	S	S											
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).			N/A	N/A	S	N/A	S	S											
			DC	NS	BS	BS	BS	BL											
Clinical Location; Patient age			N/A	N/A	4N 69	N/A	3T 65												

Comments:

Week 7-1(d) Lillian, you did an excellent job this week using Maslow's Hierarchy of needs to determine the care needs of your assigned patient. You prioritized obtaining your vital signs and assessment, then once you were finished you inquired about any other needs the patient may have at that time. Great job! BS

* 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).						N/A	S	S											
b. Use correct technique for vital sign measurement (Responding).			N/A	N/A	S	N/A	S	S											
c. Conduct a fall assessment and institute appropriate precautions (Responding).						N/A	~~S~~ NA	NA											
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).								NA											
e. Collect the nutritional data of assigned patient (Noticing).								NA											
f. Demonstrates appropriate insertion, maintenance, and removal of NG tube (Responding).								NA											
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).								NA											
			DC	NS	BS	BS	BS	BL											

Comments

Week 5-2(b) Lillian, 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

Week 7-2(a,b) You did an excellent job performing your first head to toe assessment on your assigned patient in clinical this week. Your assessment was very thorough and systematic. You also did a very nice job obtaining your patient's vital signs as well, but remember to always take your patient's radial pulse rather than utilizing the vital signs machine. Keep up all your great work! BS

Week 7-2(c) This week you did not conduct a formal fall assessment on your patient or chart in the safety and falls assessment intervention. You will have the opportunity to do this in your next clinical experience. 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).						N/A	S	S											
b. Hand off (report) pertinent, current information to the next provider of care (Responding).			N/A	N/A	N/A	N/A	N/A	NA											
c. Use appropriate medical terminology in verbal and written communication (Responding).			N/A	N/A	S	N/A	S	S											
d. Report promptly and accurately any change in the status of the patient (Responding).			N/A	N/A	N/A	N/A	N/A	NA											
e. Communicate effectively with patients and families (Responding).			N/A	N/A	S	N/A	S	S											
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).			N/A	N/A	N/A	N/A	~~N/A~~ S	S											
			DC	NS	BS	BS	BS	BL											

Comments

Week 5-3(e) Excellent job communicating effectively with your assigned patient in clinical this week. BS

Week 7-3(a,e) Excellent job taking report on your assigned patient for the first time this week in clinical. The more you do this, the more comfortable and familiar you will become with the routine of receiving report and where to put all the information on the report sheet that is discussed. You also did an excellent job communicating with your patient this week as well. 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: a. Document vital signs and head to toe assessment according to policy (Responding).			N/A	N/A	~~N/A~~ S	N/A	S	S											
b. Document the patient response to nursing care provided (Responding).								NA											
c. Access medical information of assigned patient in Electronic Medical Record (Responding).			N/A	N/A	S	N/A	S	S											
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S	N/A	N/A	N/A	N/A	N/A	S											
e. Provide basic patient education with accurate electronic documentation (Responding).								NA											
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).								NA											
*Week 2 –Meditech Expanse		DC	DC	NS	BS	BS	BS	BL											

Comments

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

Week 7-4(a) Overall you did an excellent job with your documentation of your head to toe assessment and vital signs this week. Although we discussed areas for improvement in clinical, remember that if your patient is within the defined parameters for a normal assessment, you can click “Yes” for “Within Defined Parameters,” and you do not need to do any further documentation. Keep up all your hard work! BS

Learned how to navigate Firelands intranet and learned proper documentation for patients.
* 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: a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).			N/A	N/A	S	N/A	S	S											
b. Apply the principles of asepsis and standard/infection control precautions (Responding).			N/A	N/A	S	N/A	S	S											
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).								NA											
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).			N/A	N/A	S	N/A	S	S											
e. Organize time providing patient care efficiently and safely (Responding).			N/A	N/A	S	N/A	S	S											
f. Manages hygiene needs of assigned patient (Responding).								NA											
g. Demonstrate appropriate skill with wound care (Responding).								NA											
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						N/A	S	S											
			DC	**NS**	**BS**	**BS**	**BS**	BL											

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

-2 pull stations that I found were near Beth's office and near room 3010 by stair exit.
-2 extinguishers were located by UC desk and near room 3036. Excellent job! BS

* 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**								NA											
								BL											

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).								NA											
b. Recognize patient drug allergies (Interpreting).								NA											
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).								NA											
d. Administer oral, intra-muscular, subcutaneous, and intradermal medications using correct techniques (Responding).								NA											
e. Review the patient record for time of last dose before giving prn medication (Interpreting).								NA											
f. Assess the patient response to prn medications (Responding).								NA											
g. Document medication administration appropriately (Responding).								NA											
*Week 11: BMV								BL											

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:			N/A	N/A	S	N/A	S	S											
a. Reflect on areas of strength**(Reflecting)			N/A	N/A	~~S~~ NI	N/A	S	S											
b. **Reflect on areas for self-growth with a plan for improvement. ****(Reflecting)			N/A	N/A	S	N/A	S	S											
c. Incorporate instructor feedback for improvement and growth (Reflecting).			N/A	N/A	S	N/A	S	S											
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).			N/A	N/A	S	N/A	S	S											
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).			N/A	N/A	S	N/A	S	S											
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).			N/A	N/A	S	N/A	~~S~~ NI	NI											
g. Comply with patient's Bill of Rights (Responding).			N/A	N/A	S	N/A	S	S											
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).			N/A	N/A	S	N/A	S	S											
i. Actively engage in self-reflection. (Reflecting)			N/A	N/A	S	N/A	S	S											
*			DC	NS	BS	BS	BS	BL											

**** 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.**

WEEK 5 A: Had confident communication skills with pt and family. Obtained confident VS while pt was sitting up. Great job! BS

WEEK 5 B: I would like to chart more quicker. I am going to get more comfortable with all the things to click through when obtaining VS. Lillian, as you get more experience with documentation, you will become quicker navigating everything. I feel as if you did an excellent job for your first clinical experience. You will notice I had to change this competency to an "NI" because you did not include your plan for improvement. How are you going to get more comfortable? You need to have a specific plan in place (see example above). Going forward, please be sure to include your detailed plan for improvement when you identify your area of self-growth. Please let me know if you have any questions. BS

WEEK 7 A: I was confident in performing the head to toe and felt comfortable auscultating lung and heart sounds and being able to identify wheezing and cracking. Awesome! Yes, you did an excellent job performing your first head to toe assessment on an actual patient. BS

WEEK 7 B: I felt nervous getting report from the off going nurse and did not receive the most detailed report making me a little scared to start assessing the patient. In the future I plan on getting more comfortable with communicating to the other nurses and making sure I get clear understanding of any allergies or if they are on telemetry before assessing my patient. I also want to be more familiar with diseases and complications a patient my have like CHF or COPD. I understand that as we progress through this semester these types of things will get more familiar. Lillian, this is a great area to identify for self-growth. You have a great plan in place to assist you with improvement as well. It is always a great idea to take some time to go through the patient's chart to locate any information that you missed in report. Keep up all your great work! BS

Week 7-8(f) Lillian, unfortunately I had to change this competency to an "NI" related to responsibility since your tool was not turned in correctly by the due date and time. In the future, please be sure that you are submitting the clinical tool with the previous instructor's feedback from the week before. If you ever have any questions about this or need assistance, we would be happy to help you. I have no doubt you will be satisfactory in this competency going forward. BS

Week 8-8(f) Lillian, at midterm this competency remains an "NI" simply because you have not had another clinical experience yet to prove that you are satisfactory in this competency. I have no doubt going forward you will indeed be satisfactory. BL

* End-of-Program Student Learning Outcomes

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

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

Simulation Evaluation 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
Nursing Foundations – 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: