

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2020**

**Firelands Regional Medical Center School of Nursing
Sandusky, Ohio**

Student:
Semester:

Final Grade: Satisfactory/Unsatisfactory

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

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:								NA		S	S		N/A	S		N/A			
a. Identify spiritual needs of patient (Noticing).								NA		S	S		N/A	S		N/A			
b. Identify cultural factors that influence healthcare (Noticing).								NA		S	S		N/A	S		N/A			
c. Coordinate care based on respect for patient’s preferences, values, and needs (Responding).			N/A	S	N/A	N/A	U	S		S	S		N/A	S		N/A			
d. Use Maslow’s Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).			N/A	S	N/A	N/A	U	S		S	S		N/A	S		N/A			
			DC	DC	NS	NS	NS	NS		FB	FB	FB	FB	FB					
			N/A	4N 64	N/A	N/A	3T	Midterm		3T, 94	3T 74		N/A	4P 43		N/A			

Clinical Location:
Patient age

Comments

Week 7-1(c,d) Unfortunately, these competencies have been graded as “U” because they were left blank. Remember, if you do not self-rate a competency the competency is automatically 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 will continue to rate the competency

unsatisfactory until it is addressed. Going forward, be sure to double check that you have self-rated all white boxes for each week. Please let me know if you have any questions. BS

Week 8-1(c,d) I am no longer unsatisfactory in these competencies because I remembered to self rate myself, I must have accidentally scrolled past this first section. To improve in the future I will be sure to be more careful and cautious when completing these clinical tools. NS

Week 9 (1c)- Ann, you did a great job identifying the needs of your patient and centered care around the needs of your patient. FB

Week 10 (1c) Great job coordinating the appropriate care based off the patient needs and plan of care that was developed. FB

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

Comments

Week 4 2 (b) – You did a great job getting vital signs on your first patient! DC

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 were also able to identify that your patient had abnormal heart sounds and irregular pulses due to her chronic diagnosis of A-fib. You also did a very nice job obtaining your patient's vital signs as well. Keep up all your great work! BS

Week 9 (2 a,b,c,d)- Good job with assessments performed this week. (2e)-Great job following up with nutritional assessment. FB

Week 10 (2c) Excellent job implementing appropriate fall safety measures. Don't forget to educate patients on the interventions implemented for their safety. Always make sure to leave bed in low position and call paddle in reach. FB

*** 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:						N/A	S	S		S	S		N/A	S		N/A			
a. Receive report at beginning of shift from assigned nurse (Noticing).						N/A	S	S		S	S		N/A	S		N/A			
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		N/A	S		N/A	S		N/A			
c. Use appropriate medical terminology in verbal and written communication (Responding).			N/A	S	N/A	N/A	S	S		S	S		N/A	S		N/A			
d. Report promptly and accurately any change in the status of the patient (Responding).			N/A	N/A	N/A	N/A	S	S		S	S		N/A	S		N/A			
e. Communicate effectively with patients and families (Responding).			N/A	S	N/A	N/A	S	S		S	S		N/A	S		N/A			
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).			N/A	S	N/A	N/A	S	S		S	S		N/A	S		N/A			
			DC	DC	NS	NS	BS	NS		FB	FB	FB	FB	FB					

Comments

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

Week 9 (3a,b)- Ann, do not hesitate to ask questions during shift report. It is your responsibility when taking over care of the patient to know as much as possible. In order to provide the best care what you do not get in report know where to find information in the electronic health record. You should be giving hand off report before you leave the floor remember to include any changes and the care that you provided. (3e)- Great job communicating with your patient, this helps build a trusting relationship which is beneficial in providing thorough and effective patient care. FB

Week 10 (3b)- Ann, you did a great job providing hand off report to staff RN, including all care you provided and updates to patient condition. FB

*** 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:			N/A	N/A	N/A	N/A	S	S		S	S		N/A	S		N/A			
a. Document vital signs and head to toe assessment according to policy (Responding).								S		S	S		N/A	S		N/A			
b. Document the patient response to nursing care provided (Responding).								NA		S	S		N/A	S		N/A			
c. Access medical information of assigned patient in Electronic Medical Record (Responding).			N/A	S	N/A	N/A	S	S		S	S		N/A	S		N/A			
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S	N/A	N/A	N/A	N/A	N/A	S		N/A	N/A		N/A	S		N/A			
e. Provide basic patient education with accurate electronic documentation (Responding).								NA		S NA	S NA		N/A	S		N/A			
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).								NA			S		N/A	S		N/A			
*Week 2 –Meditech Expanse		DC	DC	DC	NS	NS	BS	NS		FB	FB	FB	FB	FB					

Comments

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

Week 9 (4 a,b) Good job with documentation. Remember to be thorough with documentation, if it is not documented it was not done. Take your time and do not rush through your documentation to ensure documentation is accurate. FB

Week 10 (4a)- Make sure to go over all documentation before saving, check for completion, and accuracy. Double check that you are documenting all appropriate interventions and that they are documented in a timely manner. (4f) CDG posts were submitted on time, following netiquette and with at least 250 words. You did reply to one of your peers in a substantive manner. In-text citation and reference were both provided for initial post and peer post. (4e) This competency was changed because you did not provide education and document in Meditech education provided and how you evaluated the education that you would have provided. FB

Week 13 (4f)- Great job with CDG post and responding to a peer in a substantive manner. FB

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

Comments

h. multiple pulls throughout floor, two specific ones are one around the corner of the breezeway by room 3001, and one behind the nurses station/main desk. Two locations of fire extinguishers are one near nurses station/main desk by room 3001, and one across from room 3036. **Great job! BS**

Week 9 (5b) Great job following appropriate infection control procedures. Hygiene care is very important, you did a great job providing care for your patient this week.

Week 10 (5c) Great job using proper technique with managing care of a foley catheter. You emptied foley catheter using aseptic technique with proper protective equipment. (5e) Make sure to address all needs of the patient and use your time wisely. During downtime you can research patient diagnosis, reason for admission and any reports on your patient. This process will assist in understanding the process of different diseases, and diagnostic procedures. (5f) Make sure to encourage hygiene care, sometimes it is all in the approach with the patient. FB

****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								N/A					N/A	S					
								NS		FB	FB	FB	FB	FB					

Comments

Week 13 (6a)- See grading rubric below. FB

* 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:								NA					N/A	S		N/A			
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).								NA					N/A	S		N/A			
b. Recognize patient drug allergies (Interpreting).								NA					N/A	S		N/A			
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).								NA					N/A	S		N/A			
d. Administer oral, intramuscular, subcutaneous, and intradermal medications using correct techniques (Responding).								NA					N/A	S		N/A			
e. Review the patient record for time of last dose before giving prn medication (Interpreting).								NA					N/A	S		N/A			
f. Assess the patient response to prn medications (Responding).								NA					N/A	S		N/A			
g. Document medication administration appropriately (Responding).								NA				S	N/A	S		N/A			
*Week 11: BMV								NS		FB	FB	FB	FB	FB					

Comments

Week 11 7g - You are satisfactory for this competency by attending the BMV clinical orientation, actively listening, observing, and practicing with the use of the BMV scanner to safely administer medications. NS/DC

Week 13- Great job with administration of medications. You followed all rights of medication administration, reviewed allergies, and assessed for pertinent side effects during your administration of PO and sublingual medications. Remember to take time to look at the classifications of medications to make the connection with different medications and similar side effects to look out for. FB

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

*			DC	DC	NS	NS	BS	NS		FB	FB	FB	FB	FB				
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**** 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

Wk 4 A) I could easily talk and communicate with my pt. **You did an excellent job communicating with your patient. You had poise and confidence. Great job! DC**

B) I could improve on being professional and talk with more educational terminology when communicating. **This will improve with more clinical experience and as you gain more nursing knowledge. DC**

Week 6 Objective 8 (f) – This competency was changed to “NI” for a late submission of the clinical performance tool for “responsibility” under this particular competency. Be sure to set a reminder for yourself to prevent late submissions in the future. Each week the clinical tool will be due on Saturday at 2200. I have no doubts you will be satisfactory in the future! NS

Wk. 7 A) One strength I feel I implemented was the confidence I had when talking with the pt. And their family while completing the assessment. **Excellent job! BS**

B) One thing I could use some improvement on is knowing how to operate the side rail so I don't embarrass myself again. **Ann, great job identifying an area for improvement. The more experience you have in the clinical environment, the more comfortable you will become with the equipment. Unfortunately, this competency had to be changed to an “NI” because you did not include a plan for improvement. How are you going to improve with working with the different equipment in the patient's room? A specific plan for improvement should be included each time for this competency as demonstrated in the example above related to manual BPs. If you have any further questions, please do not hesitate to ask. Keep up all your great work! BS**

Midterm Comment – Ann, you have done a great job throughout the first half of the semester during your clinical experiences! It's hard to believe we are 8 weeks in already. You have gained experience in obtaining vital signs, performing a head to toe assessment, communicating with patients, family members, and other members of the health care team, receiving report, managing your time, accessing/documenting in the electronic health record., and much more. You are satisfactory in all relevant competencies except for objective 8 competency b, congratulations. As we enter the second half of the semester and increase the amount of clinical time, you will have the opportunity to build on these skills and enhance your clinical judgement. Keep in mind that your plan for improvement should be specific as we progress throughout the semester. I have no doubts that you will be satisfactory in this competency during your next clinical experience. **Keep up the hard work!! NS**

Wk. 9 A) One strength I think I showed during this weeks clinical was the aspect of connecting with my pt. And truly getting to know them on a more personal level and using it to create personalized care. **Great job you did a build a trusting relationship with your patient through great communication. FB**

B) One place that I think I could use improvement on for my next clinical would be documenting certain things. Obviously it was our first real clinical so all the documenting wasn't going to be perfect but I think that I can improve on this in the future by taking into consideration everything my instructor told me about things that I may have missed or should not have documented that I did this past week, also I will take note of more when we do practice documenting in labs. **Great area of reflection, make sure to slow down, document accurately and thoroughly. FB**

Wk. 10 A) One strength I feel I exemplified this week was consoling my patient in a time of weakness for them. During my physical assessment of my pt. he began to break down all of a sudden and I was taken my surprise and didn't know if I was ready for this side of nursing, but without hesitation I began consoling him asking what was wrong and trying to do everything in my power to make him feel better. After learning of his emotional state due to his current health limitations the rest of the day I tried to be there for him not only as his nurse but someone to talk to and take his mind off of being in the hospital even if it was momentarily. No amount of studying or learning about these situations can teach you how to handle them so I felt I did well handling it and making my patient happy. **Ann, you are so right, sometimes the best care is delivered by just being present and listening. The patient's mental health is very important in the healing process. Depression if only briefly can compromise a patient's wellness journey. To have a new onset illness or injury can definitely cause some depression and doubt that they will be able to return to life as they once knew it. Excellent job providing important care when your patient needed the most. FB**

B) One area I feel I could use improvement on based off of this weeks clinical is my knowledge of measuring intake and output and the conversions and math skills needed to do so. As easy as it is I always get confused, with that being said, in preparation for my next clinical I will study conversions and all the techniques that go into it. **Practice, practice, and practice for dosage calculation. Study your conversions and get familiar they are going to be important for medication administration and strict I&O interventions. FB**

Week 11 (8f)- Ann you submitted your evaluation tool after the deadline of 2200 on Saturday evening. As stated in the beginning of the tool you received a "U" for professional responsibility, and you must address per guidelines. "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." FB

Week 11 (8f) I am no longer unsatisfactory for this competency because I realized I submitted the tool late and have addressed the need for better time management with turning in this tool. I will prevent this from happening in the future by setting a reminder on my phone to do it before the deadline. **Great idea, I changed this competency to a "S" because even though you did not have clinical this week you submitted your evaluation tool on time and addressed the "U" that you received in week 11. FB**

Wk. 13. A) One area I feel I did well in this clinical week was the administering of medications. It was my first-time passing meds and I applied everything I learned about the task and did this crucial part of nursing satisfactorily. **Good job with medication administration this week. FB**

B) One thing I feel I could use improvement on after this week would be to not create preconceived notions toward my patient. This week my patient presented many different sides of them and I wasn't fully convinced they were being honest with me. It is my job to listen to them and help them either way, so in the future I will improve on this by setting my judgement aside and truly believing my patient even when they can only provide subjective claims to me about their status. **It is very easy to pass judgement on individuals, but we must really try to put those judgements to the side and do our best to provide the best care to our patients. FB**

Week 12 or 13:

<p>Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*</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 total) Problem Statement (1) Etiology (1) Defining Characteristics (1)</p>	<p>Total Points 3 Comments Great job with providing appropriate and a priority nursing diagnosis for your patient. All defining characteristics support the nursing diagnosis and are specific to your patient.</p>
<p>Goal and Outcome (6 points total) Goal Statement (1 point) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)</p>	<p>Total Points 6 Comments: Goal statement is a positive generalized statement that directly relates to the nursing diagnosis. Outcomes identified follow the SMART acronym and all defining characteristics were addressed.</p>
<p>Nursing Interventions: (8 points total) Prioritized (1) What (1) How Often (1) When (1) Individualized (1) (0.5) Realistic (1) Rationale (1) (0.5) All pertinent interventions listed (1) (0.5)</p>	<p>Total Points 6.5 Comments: Great job prioritizing interventions. They were realistic for your patient but should be more individualized addressing how you would assist with the defining characteristics listed. Rationales were not provided for each intervention. Do not duplicate interventions such as administer medications as one intervention and also listing each medication separately. Medications should be listed separately only with a rationale for each medication.</p>
<p>Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) (0.5) Plan to continue/terminate (1) Signature (1)</p>	<p>Total Points 4.5 Comments: Make sure in the evaluation of your patient you address all outcomes specifically with proof such as O2 saturations noted on your assigned patient.</p>
<p>Total possible points = 22 18-22 = Satisfactory care plan 17-13 = Needs improvement care plan <13 = Unsatisfactory care plan</p>	<p>Total Points for entire Care plan = 20 Comments: Satisfactory care plan. FB</p>

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

<p><u>Simulation Evaluation</u></p> <p>Performance Codes:</p> <p>S: Satisfactory</p> <p>U: Unsatisfactory</p>	<p>Simulation #1 (2,3,5,8) *</p>	<p>Simulation #2 (2,3,5,7,8) *</p>
	<p>Date: 11/10/2020</p>	<p>Date:</p>
<p>Evaluation</p>	<p>S</p>	
<p>Faculty Initials</p>	<p>FB</p>	
<p>Remediation: Date/Evaluation/Initials</p>		

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: Ann Hufnagle (O)
Kathryn McCoy (A)
Payton Shoer (M)
~~Kendall Troike~~ (Absent)

OBSERVATION DATE/TIME: 11/10/2020
1030-1130

SCENARIO #: NF #1

CLINICAL JUDGMENT						OBSERVATION NOTES
<p>COMPONENTS NOTICING: (2,4,6,7) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p style="color: red;">ID'd selves and roles when entering the room Explained doctors' orders related to medications, assessment and vitals ID'd patient with wristband Asked about food/water consumption prior to taking temperature Noticed harsh cough Noticed nasal cannula off and low Spo2 at 91% Noticed tissues with sputum including color, consistency Noticed crackles upon auscultation Didn't notice reddened heels on assessment Asked how patient normally takes their medication (safety). Asked patient about dosages at home. IDd patient prior to medications. Scanned patient and medications – great job!</p>
<p>INTERPRETING: (2,4,6,7) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p style="color: red;">Prioritized low Spo2 related to lack of oxygen and admitting diagnosis Prioritized cough/sputum assessment by asking about sputum production and usual appearance Interpreted crackles being related to increased fluid in the lungs from admitting diagnosis Didn't prioritize skin protection measures (heels offloaded) Prioritized smoking cessation education related to home O2</p>
<p>RESPONDING: (1,2,3,4,5,6,7,) *</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B 						<p style="color: red;">Good body mechanics for personal safety Placed O2 per nasal cannula at 2L due to low Spo2 Consider raising the head of the bed with low Spo2 Focused assessment on patients cough</p>

<ul style="list-style-type: none"> • Being Skillful: B 	<p>E A D</p> <p>Good thorough head to toe assessment! Remember to check heels and bony prominence for redness/skin breakdown</p> <p>Good job following up with the Spo2 levels after oxygen placement</p> <p>Good communication between team members following the assessment</p> <p>Great job communicating with the assigned RN related to IV medications</p> <p>Medication safety checks performed</p> <p>Educated patient on ordered medications</p> <p>Educated on smoking cessation</p> <p>Used BMV scanner for medication safety</p> <p>Good dosage calculation and education on ½ pill</p> <p>Remember to elevate the head of the bed prior to pill administration</p> <p>Good teamwork to assist the patient sitting up</p> <p>Remember to implement fall precautions for high risk patient.</p>
<p>REFLECTING: (2,3,4,5,6,7,8) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Participated well in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas for improvement and discussed ways to make improvements in the future.</p> <p>Observers provided good insight on safe medication administration and observations made during this skill.</p> <p>Discussed communication between team members and the patient.</p> <p>Identified educational opportunities that were presented in the scenario.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “Beginning” or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p>	<p><i>Lasater Clinical Judgement Rubric: Information provided relates to the Clinical Judgement Rubric based on comments listed above from student performance. Refer to Lasater’s Clinical Judgement Rubric for more detailed information.</i></p> <p>Noticing: Regularly observed and monitored a variety of data including objective and subjective findings; most useful and important information was noticed, some findings were missed; Identified obvious patterns and deviations, missing some important information; used relevant information to continually assess. Actively sought relevant information about the patient situation to support planning interventions; occasionally did not pursue important leads.</p> <p>Interpreting: Generally focused on most important data; sought further relevant information for most pertinent data; didn’t attend to data outside</p>

<p>A = Assessment Nurse M = Medication Nurse O = Observer Role</p>	<p>of the main priority (safety precautions and skin protection). In most situations data patterns were interpreted appropriately and compared to known patterns to develop intervention plans with appropriate rationale. Some data was missed therefore was unable to be interpreted.</p> <p>Responding: Displayed confidence and was able to maintain control and calmness during most situations; communicated well with team members and the patient, explained interventions and rationale to the patient; clear direction given amongst team members, rapport was established. Developed interventions on the basis of most obvious data; monitored progress of the patient based on interventions performed. Generally proficient in basic nursing skills, some aspects missed on foundational level skills.</p> <p>Reflecting: Each member evaluated and analyzed personal clinical performance through participation and the observatory role with minimal prompting; key decision points were identified and alternatives were considered. Each member demonstrated a desire to improve; reflected on experiences; identified strengths and weaknesses.</p>
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Simulation Scenario #1 Objectives

- Demonstrate collaborative communication with patients and healthcare team members (1,3,8) *
- Execute accurate and complete head to toe assessment (1,5,6,8) *
- Select and administer prescribed oral medications following the six rights (1,4,5,7) *
- Identify and provide accurate patient education (1,2,3,4,5,7) *

Skills Lab Competency Evaluation	Lab Skills									
	Week 2 (2,3,5,8)*	Week 3 (2,3,4,5,8)*	Week 4 (2,3,4,5,8)*	Week 5 (2,3,4,5,8)*	Week 6 (1,2,3,4,5,8)*	Week 7 (2,3,4,5,8)*	Week 8 (2,3,4,5,8)*	Week 9 (2,3,4,5,8)*	Week 10 (2,3,4,5,6,8)*	Week 11 (1,2,3,4,5,6,7,8)*
	Date: 8/31/2020	Date: 9/11/2020	Date: 9/14/2020	Date: 9/21/2020	Date: 9/28/2020	Date: 10/5/2020	Date: 10/12/2020	Date: 10/19/2020	Date: 10/26/2020	Date: 11/2& 11/4/2020
Evaluation:	S	S	S	S	S	S	U	S	S	S
Faculty Initials	LM	AR	LM	LM	AR	LM	LM	AR	NS	LM
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	10/12/2020 S/LM	NA	NA	NA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

Firelands Regional
 Medical Center
 School of Nursing
 Nursing Foundations
 2020
 Skills Lab
 Competency Tool
 Student Name:
Ann
Hufnagle

*Course Objectives

Comments:

Week 1 (Technology Lab):

During this lab you were able to satisfactorily navigate:

- Webex virtual format settings.
- Edvance360 Learning Management System Browser lock instructions and sample quiz.
- Skyscape Resource System.
- Assessment Technologies Institute (ATI) / Virtual Simulation (vSim) Systems. LM

Week 2 (Hand Hygiene; Vital Signs; PPE):

During lab this week you were able to satisfactorily demonstrate:

- Appropriate hand hygiene utilizing hand sanitizer and soap/water.
- Accurate verbalization of procedure for donning & doffing PPE.
- Appropriate level of skill during guided practice with measurement of radial and brachial pulses, along with manual and doppler blood pressure. Vital signs skills will be observed 1:1 with faculty during Week 3. Keep up the good work! LM

Week 3 (Vital Signs):

Great job in the lab this week! You satisfactorily completed the vital sign check off during 1:1 observation, including oral temperature, radial pulse, respiratory rate, pulse oximetry, and blood pressure measurement. During the blood pressure measurement you accurately obtained two out of three blood pressure results on the Vital Sim manikin. You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic blood pressure. No prompts were needed, although you did have difficulties with manipulating the bulb syringe for the blood pressure measurements. Please take some time during the Week 4 lab to practice. You did an excellent job with communication and explanations to your “patient”! Your Meditech documentation related to vital signs was accurate however pay close attention to the directions as you did not change the time as stated in the directions. Keep up the great work!! AR

Week 4 (Assessment): Satisfactory with head to toe assessment guided practice, hand-off report activity, and Micromedex/Intranet navigation activity. You will be observed 1:1 for Head to Toe Assessment competency during Week 5. LM

Week 5 (Assessment; Mobility):

Ann, great job in lab this week! You have satisfactorily demonstrated a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall well done. You did require 1 prompt related to remembering to palpate the four quadrants of the abdomen for firmness, tenderness, and distention as part of your assessment. You demonstrated friendly, professional, and informative communication. You were able to correctly identify the lung sounds as normal. Great job! LM

Feedback on documentation this week: With this being the first time that you fully documented these interventions, there are some minor areas for improvement. Overall you did a great job! Please take some time to pull your documentation back up and review the following details for improvement. LM

- Vital Signs- your documentation was accurate and complete.
- Pain- numeric pain rating was omitted and orders received from physician was omitted.
- Safety- your documentation was accurate and complete.
- Assessment- documentation under HEENT for eye position was incorrectly documented. You stated eye position as sunken but this should have been documented as normal. Also, Lt. ear assessment was noted ‘Rt. Hearing aide’.

Mobility- You are satisfactory by actively participating in the mobility lab. LM

Week 6 (Personal Hygiene Skills):

Satisfactory with personal hygiene, making an occupied bed, shaving, oral care, hearing aide care, application of ace wraps, TED Hose, and SCD's, and clinical readiness scenario during guided practice, along with Meditech Expanse Test Hospital documentation. Keep up the good work! AR

Week 7 (NG Skills: Insertion, Irrigation, and Removal): Great job this week in lab demonstrating competence for Nasogastric Tube Insertion, Irrigation, and Removal through guided observation. You were able to verbalize understanding of the difference between irrigation and flushing, aspiration precautions, and familiarized yourself with the wall suction set up. Additionally, you participated in the PO intake station for accurate calculation of carbohydrate intake, accurately measured gastric output through the NG tube, practiced assisting a visually impaired patient with their meal, and completed the assigned documentation in Meditech accurately. Keep up the hard work! LM

Week 8 (Foley Skills: Insertion, Removal; Sterile Gloves; Documentation Lab):

You did a great job overall in the lab this week and you were satisfactory with the following skills: Foley Catheter Insertion (female), Foley Catheter Removal, and Application of sterile gloves. One prompt was needed as you were cleaning the labial fold, you swiped from the anus to the clitoris instead of swiping from clean to dirty (clitoris to anus). I feel this was inadvertently done because you correctly swiped the betadine swab sticks on the labial fold closest to you and down the center of the vagina. You maintained the sterile field throughout the Foley insertion, did not contaminate the catheter or your gloves at any point, had very good communication, and were thorough throughout the observation. Great job! You did originally receive a "U" during the sterile glove application process because you broke sterile technique while applying the sterile glove on your dominant hand. You were touching the sterile glove incorrectly with your bare hand. We discussed this and you remediated correctly maintaining sterile technique throughout the whole sterile glove application process. You correctly verbalized the differences in catheter insertion for a male patient. You independently completed the Oral intake and output station, Output station, and Meditech documentation for Urinary Catheter Management and I & O. Keep up the great work!!! LM

Documentation Lab - You have satisfactorily completed the documentation lab by actively participating in Meditech documentation related to vital signs, physical re-assessment, safety and falls, pain assessment, patient rounds, TED hose/SCD/Ace wrap, feeding method, Intake and Output, urinary catheter management, and writing a nurse note. You utilized your time wisely, asked appropriate questions, and gained experience with each intervention listed. Great job! NS/DC

Week 9 (Dressing Change: Dry Sterile, Sterile Wet to Dry):

You have satisfactorily demonstrated competency in the skill of wound assessment and care (Dry Sterile Dressing & Sterile Wet to Dry Dressing), and completed Meditech documentation related to wound care. Nice job! AR

Week 10 (Safety; Infection Control; Prioritization; Tube Feeding; Weight; Pressure Ulcer Prevention; Soft Restraints; Doppler BP; Care Plan Development):

Satisfactory participation with the following stations: Prioritization, Tube Feeding, Patient Weight, Restraints, Doppler BP, Meditech documentation, and Patient Scenario involving Safety, Infection Control, Pressure ulcer prevention, and Care Plan Development. Keep up the hard work! NS

Week 11 (Case Scenario; Care Plan Development; Medication Lab; Open Lab):

Satisfactory participation in the following: Patient Scenario's involving discharge planning and focused assessment, and Care Plan Development. Keep up the good work! LM

Medication Lab: Satisfactory participation and performance of the following skills in the medication lab: Oral, IM, SQ, and ID medication administration; performance of IM and ID injections on fellow student; performance of SQ injection on practice sponge; use of and drawing medication out of ampule and vial. LM

**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: _____