EVALUATION OF CLINICAL PERFORMANCE TOOL
Psychiatric Nursing- 2021
Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Brittney Lesch

Final Grade: Satisfactory/Unsatisfactory

Semester: Summer Session

Date of Completion:

Faculty: Brian Seitz MSN, RN, Kelly Ammanniti MSN, RN,
Liz Woodyard MSN, RN, Brittany Lombardi MSN, RN
Teaching Assistants: Nick Simonovich BSN, RN, 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:

al Patient Profile
Meditech Documentation
Evaluation of Clinical Performance Tool
Onsite Clinical Debriefing
Clinical Discussion Rubric
Nursing Process Recording Rubric
Geriatric Assessment Rubric Lasater Clinical Judgment Rubric
Virtual Simulation scenarios
ABCDEF Bundle Grading Rubric
Pathophysiology Grading Rubric
Participation in adjunctive therapies (N.A./A.A.; Erie County Health Department Detox Unit, Hospice inpatient/outpatient care
EBP Presentations Rubric
Hospice Reflection Journal
Virtual Simulation Scenarios
Lasater Clinical Judgment Rubric
Observation of Clinical Performance
Clinical Nursing Therapy Group Rubric

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
6/27/21	2	Sandusky Artisans CDG	6/30/21 2H BL

Initials	Faculty Name
BS	Brian Seitz MSN, RN
KA	Kelly Ammanniti MSN, RN
BL	Brittany Lombardi MSN, RN
LW	Liz Woodyard MSN, RN
NS	Nick Simonovich BSN, RN
DC	Devon Cutnaw BSN, RN

* End-of-Program Student Learning Outcomes

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

Satisfactory (S): Safe, accurate each time, efficient, coordinated, confident, focuses on the patient, some expenditure of excess energy, within a reasonable time period, appropriate affective behavior, occasional supporting cues, minimal faculty feedback needed related to written clinical work.

UNSATISFACTORY CLINICAL PERFORMANCE

Needs Improvement (NI): Safe, accurate each time, skillful in parts of behavior, focuses more on the skill and self rather than the patient, inefficient, uncoordinated, anxious, worried, and flustered at times, expends excess energy within a delayed time period, frequent verbal and occasional physical directive cues in addition to supportive cues, faculty feedback required in several areas of clinical written work.

Unsatisfactory (U): Failure to achieve the course competency, safe but needs faculty reminders constantly, not always accurate, unskilled, inefficient, considerable expenditure of excess energy, anxious, disruptive or omitting behaviors, focus on skills and/or self, continuous verbal and frequent physical cues, unsafe, performs at risk to patient/clients/others, unable to function, incomplete, erroneous, faulty, illegible clinical written work, no feedback sought from faculty or response to feedback not evident in submitted written work. If the student does not self-rate a competency the competency is graded "U." A "U" in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the "U," the faculty member (s) will continue to rate the competency unsatisfactory.

OTHER

Not Available (NA): The clinical experience which would meet the competency was not available.

* End-of-Program Student Learning Outcomes

	Objective
	1. Apply the principles of psychiatric theory in the care of diverse populations, 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	9	Make Up	**Final**
Competencies: a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder.		S	NA	NA	NA	S					
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder.		~~NA~~ **S**	NA	NA	NA	S					
c. Provide culturally and spiritually competent care within the scope of nursing that meets the needs of assigned patients from diverse cultural, racial and ethnic backgrounds.		~~NA~~ **S**	NA	S	NA	S					
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care		~~NA~~ **S**	NA	NA	NA	S					
e. Recognize normal versus non-normal behavior patterns in terms of developmental milestones. (Erickson).		NA	NA	NA	NA	S					
f. Develop and implement an appropriate nursing therapy group activity.		NA	NA	NA	NA	S					
g. Develop a geriatric physical/mental health assessment and education plan. (**Geriatric Assessment**)					S						
Faculty Initials		**BL**	BS	KA	BL	BL					
Clinical Location		Detox		Hospice	NA	1S					

* End-of-Program Student Learning Outcomes

Comments:

Week 5-1(g) Excellent job with your Geriatric Assessment. You have been graded as satisfactory for this assignment. Please see the Geriatric Assessment Rubric for detailed feedback. BL

Week 6-1(f) Brittney, you did an excellent job facilitating nursing therapy group for the patients. Your "I can't imagine life without" activity was engaging and a great way for the patients to identify positive things in their lives. BL

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

Comments:

Week 6-2(d) Excellent job formulating a prioritized nursing care plan for your patient utilizing clinical judgment skills. Please see the Care Plan Grading Rubric at the end of this document for my feedback. BL

* End-of-Program Student Learning Outcomes

Week 6-2(f) Great job with discussion of your EBP article titled "Quality of Psychoeducational Apps for Military Members with Mild Traumatic Brain Injury: An Evaluation Utilizing the Mobile Application Rating Scale" during debriefing. BL

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

Comments:

Week 2-3(f) You have received a "U" for this competency this week because you did not provide an in-text citation or reference for your CDG posting. Although your CDG was well written, per the CDG grading rubric students must provide both an in-text citation and reference in order to be graded as satisfactory. Please be sure to address this "U" next week. If you have any questions or need assistance, please do not hesitate to ask. BL

I plan on having my CGD grading rubric out when I'm completing my CGD in the future. I will make sure this is done on any future CDG's. BAL

* End-of-Program Student Learning Outcomes

Week 4 – 3f – I was unable to locate your completed CDG response for your experience with the Sandusky Artisans. Please make sure to complete the questions and post your CDG response to make-up the 2 hours missed clinical. Please also remember to write a goal on how you will prevent receiving a U in this competency in the future. KA I plan to check the "discussion" board after every clinical to make sure I am not missing an assignment. BAL BL

Week 5-3(f) Satisfactory make-up CDG posting for Sandusky Artisans clinical experience. BL

Week 6-3(a, d) Brittney, you did an excellent job therapeutically communicating with all the patients this week. You were genuine, helpful, and respectful to all the patients during your clinical experience. Keep up your excellent work! BL

Week 6-3(f) Excellent job with your CDG posting this week. You also did a great job with your care plan as well. BL

* End-of-Program Student Learning Outcomes

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

Weeks of Course:	1	2	3	4	5	6	7	8	9	Make Up	**Final**
a. Discuss the safe administration of medication while observing the six rights of medication administration.		NA	NA	NA	NA	S					
b. Demonstrate ability to discuss the uses and implication of psychotropic medications		NA	NA	NA	NA	S					
c. Identify the major classification of psychotropic medications.		NA	NA	NA	NA	S					
d. Identify common barriers to maintaining medication compliance.		NA	NA	NA	NA	S					
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications.		NA	NA	NA	NA	S					
Faculty Initials		**BL**	BS	KA	BL	BL					

Comments:

Week 6-4(a-e) Excellent job demonstrating knowledge of frequently prescribed medications utilized in treating mental illness through one-on-one discussion with your instructor during clinical. Keep up the great work! BL

* End-of-Program Student Learning Outcomes

* 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	9	Make Up	**Final**
a. Identify the need for the community resources-detox unit available to patients with a mental illness.		S	NA	NA	NA	~~S~~ NA					
b. Discuss recommendations for referrals to appropriate community resources and agencies.		S	NA	NA	NA	S					
c. Attend Erie County Health Department Detox Unit observing the care of a patient with mental illness-substance abuse. **(Community Agency Observation-Detox Unit)**		S	NA	NA	NA	NA					
d. Attend Narcotics/ Alcoholics Anonymous meeting. **(Alcoholics/Narcotics Anonymous at the Artisans of Sandusky Observation)**		NA	NA	S	NA	NA					
Faculty Initials		**BL**	BS	KA	BL	BL					

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	9	Make Up	**Final**
Competencies: a. Demonstrate competence in navigating the electronic health record.		NA	NA	NA	NA	S					
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record.		NA	NA	NA	NA	S					
Faculty Initials		**BL**	BS	KA	BL	BL					

Comments:

Week 6-6(b) Excellent job documenting on the Nursing Therapy Group this week. BL

* End-of-Program Student Learning Outcomes

* 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	9	Make Up	**Final**
a. Identify your strengths for care delivery of the patient with mental illness		NA	NA	NA	NA	S					
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care.		NA	NA	NA	NA	S					
c. Illustrate active engagement in self-reflection and debriefing.		NA	NA	NA	NA	S					
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE" – attitude, commitment, and enthusiasm during all clinical interactions.		S	NA	S	NA	S					
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect.		~~S~~ NI	U	~~S~~ U	~~NA~~ U	S					
f. Follow the standards outlined in the FRMCSN policy, "Student Conduct While Providing Nursing Care."		S	NA	S	NA	S					
Faculty Initials		**BL**	BS	KA	BL	BL					

Comments:

Week 2-7(e) Unfortunately, your clinical tool was not submitted by the appropriate due date and time, therefore you have been given an "NI" for this competency this week as it relates to responsibility. Going forward, please be sure that your clinical tool is submitted by the appropriate due date and time. If you have any questions, please do not hesitate to ask. BL

Now that I have made this mistake 2x. I will be setting an alarm on my phone to remind myself to turn in my clinical tool ontime. Sounds like a good plan. BS

Week 4 – 7c – Brittany, you did an excellent job reflecting on your Hospice experience. Thank you for sharing your personal experience and how it influenced your perception of Hospice and their care for patients. KA

Week 4 – 7e – Your CDG questions were not completed and posted by the due date and time. Please make sure to write a goal on how you will prevent a U in this competency in the future. KA

Week 5-7(e) Brittney, unfortunately I had to change this competency to a "U" again for this week because you did not address the "U" from last week with a plan as to how you will prevent this from occurring again in the future. Remember, whenever a student receives a "U" in a competency, 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. Please let me know if you have any questions. BL

I plan to TRIPLE check my assignment calendar after every clinical to make sure I am not missing an assignment. BAL BL

Nursing Care Plan Grading Tool
Psychiatric Nursing
2021

Student Name: Brittney Lesch **Clinical Date:** 7/8/2021-7/9/2021

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	Disturbed Sleep Pattern R/T feelings of hopelessness
****Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating**	Total Points Comments
Nursing Diagnosis: (3 points) Problem Statement (1)-1 Etiology (1)-1 Defining Characteristics (1)-1	Total Points: 3 Comments: Excellent job! Nursing diagnosis is appropriate for your patient, and defining characteristics are specific. BL
Goal and Outcome (6 points total) Goal Statement (1 point)-1 Outcome: Specific (1)-0.5 Measurable (1)-0.5 Attainable (1)-0.5 Realistic (1)-0.5 Time Frame (1)-1	Total Points: 4 Comments: You are on the right track with your outcome statements. However, remember that these statements should be a positive form of your defining characteristics. For example, "patient does not awake earlier or later than desired."
Nursing Interventions: (8 points total) Prioritized (1)-1 What (1)-1 How Often (1)-1 When (1)-1 Individualized (1)-1 Realistic (1)-1 Rationale (1)-1 All pertinent interventions listed (1)-1	Total Points: 8 Comments: Excellent job with your nursing interventions. BL
Evaluation: (5 points total) Date (1)-1 Goal Met/partially/unmet (1)-0 Defining characteristics (1)-0.5 Plan to continue//modify/terminate (1)-1 Signature (1)-1	Total Points: 3.5 Comments: Remember to state whether your goal has been met, partially met, or unmet. Also, remember that you are evaluating your defining characteristics as they were stated in the beginning. BL
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 = 18.5/22 Comments: Satisfactory care plan. Great job! BL

Firelands Regional Medical Center School of Nursing
Psychiatric Nursing 2021
Simulation Evaluations

vSim Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	Linda Waterfall (Anxiety/Cultural Scenario) (*1,2,3,4,5)	Sharon Cole (Bipolar Scenario) (*1,2,3,4,5)	Sandra Littlefield (Borderline Personality Disorder Scenario) (*1,2,3,4,5)	Adult Live-Simulation (*1,2,3,4,5,77/)	George Palo (Alzheimer's Disorder) (*1,2,3,4,5)	Randy Adams (PTSD Scenario) (*1,2,3,4,5)
	Date: 6/11/2021	**Date: 6/25/2021**	**Date: 7/2/2021**	**Date: 7/7/2021 7/8/2021**	**Date: 7/9/2021**	**Date: 7/23/2021**
Evaluation	U	S	S	S	S	
Faculty Initials	BL	KA	BL	BL	BL	
Remediation: Date/Evaluation/Initials	6/21/21 S/BS	NA	NA	NA	NA	

* Course Objectives

Linda Waterfall (6/11/21)-Did not register for course on Vsim. BL
I am now registered for the course on Vsim.

Firelands Regional Medical Center School of Nursing
Psychiatric Nursing 2021

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: B. Lesch (Group 5) OBSERVATION DATE/TIME: 7/7/2021 1350-1505 SCENARIO #: 1

CLINICAL JUDGMENT	OBSERVATION NOTES
COMPONENTS NOTICING: • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B	Notices patient's history of alcohol use. Notices patient is feeling anxious. Notices patient's abrasion on left eye. Notices patient is agitated and hallucinating, Notices patient is itchy. Notices patient is restless.
INTERPRETING: • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Prioritizes CIWA scale. Interprets CIWA score as 6. Interprets correct use of medications. Prioritizes CIWA scale. Interprets CIWA score as 17. Interprets patient's signs and symptoms as withdrawal symptoms. Interprets correct use of medications.
RESPONDING: • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B	Introduces self and identifies patient. Obtains vital signs. Assesses patient's left eye abrasion. Asks about patient's support system. Performs and prioritizes CIWA. Educates on purpose of CIWA scale. Attempts to utilize therapeutic communication with patient in

	regards to substance use. Asks about coping mechanisms. Educates about inpatient therapy groups. Sits next to patient and employs therapeutic communication (asks about recent losses, support system, coping mechanisms). Educates patient on medication. Administers 1 mg of lorazepam for CIWA score of 6. Educates patient on breathing exercises. Did not perform Brief Mental Status Evaluation or CAGE questionnaire. Presents reality, informs the patient that there are no spiders present. Prioritizes CIWA scale. Collaborates with medication nurse to determine appropriate lorazepam dose based on CIWA score. Administers 4 mg of lorazepam for CIWA score of 17. Offers to sit and communicate with patient. Performs breathing exercises with patient. Provides education to patient about outpatient services for substance abuse, counseling, AA, Detox center. Provides patient with a schedule of unit activities.
REFLECTING: • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	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 such as performing the brief mental health examination and CAGE questionnaire. Group also discussed areas for improvement with therapeutic communication.
SUMMARY COMMENTS: **Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.** **E= Exemplary** **A= Accomplished**	*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.* **Noticing:** Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Identifies obvious patterns and deviations, missing some important information; unsure how to

D= Developing **B= Beginning**	continue the assessment. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads. **Interpreting:** Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse. **Responding:** Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of the most obvious data; monitors progress but is unable to make adjustments as indicated by the patient's response. Displays proficiency in the use of most nursing skills; could improve speed or accuracy. **Reflecting:** Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives. Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses.

E = exemplary, A = accomplished, D = developing, B = Beginning
Based off of Lasater's Clinical Judgment Rubric

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: