

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

Student: Thirkeshia Jones

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)
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.

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:		N/A	N/A	N/A	S	N/A	N/A				
a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder.		N/A	N/A	N/A	S	N/A	N/A				
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder.		N/A	N/A	N/A	S	N/A	N/A				
c. Provide culturally and spiritually competent care within the scope of nursing that meets the needs of assigned patients from diverse cultural, racial and ethnic backgrounds.		N/A	N/A	S	S	N/A	N/A				
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care		N/A	S	N/A	S	N/A	N/A				
e. Recognize normal versus non-normal behavior patterns in terms of developmental milestones. (Erickson).		N/A	N/A	N/A	S	N/A	N/A				
f. Develop and implement an appropriate nursing therapy group activity.		N/A	N/A	N/A	S	N/A	N/A				
g. Develop a geriatric physical/mental health assessment and education plan. (Geriatric Assessment)					S						
Faculty Initials		BL	BS	KA	EW	DC	BL				
Clinical Location		No Clinicals	Detox Center	Stein Hospice	1S	AA/NA	No Clinicals				

* End-of-Program Student Learning Outcomes

Comments:

WK 1 A-G: Thirkeshia, nice work putting the pieces together for your pt. as well as implementing a nursing therapy group that everyone was able to take part in. You did particularly well in describing normal vs. non-normal behavior for developmental milestones in terms of the pt.s occupational and social status. EW

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:		N/A	N/A	N/A	S	N/A	N/A				
a. Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. (noticing)		N/A	N/A	N/A	S	N/A	N/A				
b. Identify the individual patient's symptoms related to the psychiatric diagnosis. (interpreting)		N/A	N/A	N/A	S	N/A	N/A				
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. (noticing, interpreting)		N/A	N/A	N/A	S	N/A	N/A				
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. (noticing, interpreting, responding, reflecting)		N/A	N/A	N/A	S	N/A	N/A				
e. Apply the principles of asepsis and standard precautions.		N/A	N/A	S	S	N/A	N/A				
f. Practice use of standardized EBP tools that support safety and quality. (noticing, responding)		N/A	N/A	N/A	S	N/A	N/A				
Faculty Initials		BL	BS	KA	EW	DC	BL				

Comments:

WK 5 2A-D: Good job assembling the pt's overall summative history and the symptoms related to the diagnosis. You were able to notice and interpret these behaviors and then respond with therapeutic communication techniques as well as a plan of care to achieve pt. desired outcomes. EW

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

Comments:

Week 3- 3f- Great job discussing the function of the Erie County Health Center's Detox unit, how the unit functions, the services provided, and how referrals are made.

BS

Week 4 – 3f – There was no CDG for Hospice this week only a reflection journal assignment. KA

* End-of-Program Student Learning Outcomes

WK5 3A, C, H: Good job communicating with both patients and staff professionally and teaching and assessing the patient's readiness to learn. EW

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.		N/A	N/A	N/A	N/A	N/A	N/A				
b. Demonstrate ability to discuss the uses and implication of psychotropic medications		N/A	N/A	N/A	S	N/A	N/A				
c. Identify the major classification of psychotropic medications.		N/A	N/A	N/A	S	N/A	N/A				
d. Identify common barriers to maintaining medication compliance.		N/A	N/A	N/A	S	N/A	N/A				
e. Explain the effects, adverse effects, nursing interventions and safety issues, related to the use of psychotropic medications.		N/A	N/A	N/A	S	N/A	N/A				
Faculty Initials		BL	BS	KA	EW	DC	BL				

Comments:

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

Comments:

Week 3- 5 a,b,c- Great job discussing your experience at the Erie County Health Center. You were able to identify barriers to culturally and spiritually competent care at this agency, and identify the roles and responsibilities of the nurse and other healthcare professionals at the agency. Thank you for sharing your feelings, attitudes, and responses to patients that this agency provides mental health services to. Nice work! BS

WK5 5B: Able to identify the patient's need for resources due to relocation. This was especially needed due to medication noncompliance. EW

* 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:		N/A	N/A	N/A	S	N/A	N/A				
a. Demonstrate competence in navigating the electronic health record.		N/A	N/A	N/A	S	N/A	N/A				
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record.		N/A	N/A	N/A	S	N/A	N/A				
Faculty Initials		BL	BS	KA	EW	DC	BL				

Comments:

* 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		N/A	N/A	N/A	S	N/A	N/A				
b. Demonstrates effective use of strategies to reduce risk of harm to self or others. Create a safe environment for patient care.		N/A	N/A	N/A	S	N/A	N/A				
c. Illustrate active engagement in self-reflection and debriefing.		N/A	S	S	S	N/A	N/A				
d. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE” – attitude, commitment, and enthusiasm during all clinical interactions.		N/A	S	S	S	S	N/A				
e. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect.		N/A NI	S	S	S	S	N/A				
f. Follow the standards outlined in the FRMCSN policy, “Student Conduct While Providing Nursing Care.”		N/A	S	S	S	N/A	N/A				
Faculty Initials		BL	BS	KA	EW	DC	BL				

Comments:

Week 2-7(e) Unfortunately, this competency has been changed to an “NI” because your clinical tool was submitted blank on the due date and time. Therefore, you had to resubmit. Going forward, please be sure to double check that your clinical tool is able to be opened and viewed by the instructor on the due date and time. If you have any questions, or need assistance, please do not hesitate to ask. BL

Week 4 – 7c – Kiki, you did a wonderful job reflecting on your Hospice experience. You did a great job reflecting on how your personal experience influenced your expectations of Hospice. I liked how you pointed out Hospice not being a “death sentence” and a place to help those with a terminal condition in a positive way. KA WK5 7C,E: I was very impressed with your thoughtfulness in debriefing when discussing your patient. You are naturally emotionally intelligent and take your time and think before speaking. This is an invaluable leadership trait. You are professional and kind with both patients, staff, and peers. Nice job! EW

Nursing Care Plan Grading Tool
Psychiatric Nursing
2021

Student Name: **Thirkeshia Jones**

Clinical Date: **7/1/21**

<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) Problem Statement (1) Etiology (1) Defining Characteristics (1)</p>	<p>Total Points 3 Comments:</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: Nice job in this area ensuring your outcomes were SMART. Each of these was very patient specific and measurable.</p>
<p>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)</p>	<p>Total Points 8 Comments: Interventions coincided with the plan of care and were sensible.</p>
<p>Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue/modify/terminate (1) Signature (1)</p>	<p>Total Points 5 Comments:</p>
<p>Total possible points = 22 18-22 = Satisfactory care plan 17-14 = Needs improvement care plan <13 = Unsatisfactory care plan</p>	<p>Total Points for entire Care plan = 22 Comments: Very good job!</p>

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

<u>vSim Evaluation</u> 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	S	S	S	S	S	
Faculty Initials	BL	KA	EW	DC	DC	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	

* Course Objectives

Firelands Regional Medical Center School of Nursing
Psychiatric Nursing 2021

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: L. Chesser, V. Glaze, T. Jones, J. Schloemer OBSERVATION DATE/TIME: 7/7/2021 0920-1035 SCENARIO #: 1

CLINICAL JUDGMENT	OBSERVATION NOTES
<p>COMPONENTS NOTICING:</p> <p>8. Focused Observation: E A D B</p> <p>9. Recognizing Deviations from Expected Patterns: E A D B</p> <p>h. Information Seeking: E A D B</p>	<p>Notices abrasion on patient's eye.</p> <p>Notices patient history of alcohol use and recent loss.</p> <p>Notices patient's restlessness.</p> <p>Notices patient's stress with job.</p> <p>Notices patient is feeling anxious.</p> <p>Notices patient is feeling itchy and numb.</p> <p>Notices patient is hallucinating (seeing spiders).</p>
<p>INTERPRETING:</p> <p>10. Prioritizing Data: E A D B</p> <p>i. Making Sense of Data: E A D B</p>	<p>Interprets patient's behavior as restless and anxious.</p> <p>Interprets patient's feelings of loneliness and recent loss as risk factors for depression.</p> <p>Interprets correct use of medications for patient.</p> <p>Interprets CIWA score as 8.</p> <p>Interprets patient's signs and symptoms as alcohol withdrawal symptoms.</p> <p>Interprets CIWA score as 15.</p> <p>Interprets correct use of Lorazepam.</p>
<p>RESPONDING:</p> <p>11. Calm, Confident Manner: E A D B</p> <p>12. Clear Communication: E A D B</p> <p>j. Well-Planned Intervention/Flexibility: E A D B</p>	<p>Introduces self to patient.</p> <p>Remains calm with patient.</p> <p>Medication nurse identifies patient and introduces herself.</p> <p>Obtains vital signs.</p>

* End-of-Program Student Learning Outcomes

<p>k. Being Skillful: E A D B</p>	<p>Performs head to toe assessment.</p> <p>Asks about history of alcohol use and current alcohol use.</p> <p>Attempts to utilize therapeutic communication to assess patient's alcohol use and history.</p> <p>Performs CIWA and educates patient on reasoning for use.</p> <p>Excellent therapeutic communication with patient about recent loss, feelings of unhappiness, and coping mechanisms.</p> <p>Provides education to patient about medication.</p> <p>Administers 2mg of Lorazepam for CIWA score of 8.</p> <p>Performs Brief Mental Status Evaluation. Uses open-ended questions and therapeutic communication to obtain further information.</p> <p>Asks about coping mechanisms.</p> <p>Gives thorough SBAR report.</p> <p>Introduces self to patient.</p> <p>Remains calm with patient.</p> <p>Obtains vital signs.</p> <p>Asks about patient's signs and symptoms of anxiety.</p> <p>Performs CIWA assessment.</p> <p>Medication nurse introduces self and identifies patient.</p> <p>Administers 4 mg Lorazepam for CIWA score 15.</p>
<p>REFLECTING:</p> <p>13. Evaluation/Self-Analysis: E A D B</p> <p>I. Commitment to Improvement: E A D B</p>	<p>Identified strengths and areas of improvement for performance.</p> <p>Reflected on the importance of providing education to the patient about substance abuse and community resources available.</p> <p>Reflected on the importance of providing education when it is appropriate.</p> <p>Reflected on the importance of therapeutic communication.</p> <p>Identified risk factors patient had related to substance abuse.</p>
<p>SUMMARY COMMENTS:</p> <p>Satisfactory completion of the simulation scenario is a</p>	<p><i>Lasater Clinical Judgement Rubric: Information provided relates to the Clinical Judgement Rubric based on comments listed above</i></p>

* End-of-Program Student Learning Outcomes

<p>score of “Developing” 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>from student performance. Refer to Lasater’s Clinical Judgement Rubric for more detailed information.</i></p> <p>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 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.</p> <p>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.</p> <p>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 relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.</p> <p>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.</p>
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E = exemplary, A = accomplished, D = developing, B = Beginning

Based off of Lasater’s Clinical Judgment Rubric

FDC/fb/5/2021 Reviewed

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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: