

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

Student: Brooke LoPresto

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:		NA	S	S	S	S	S				
a. Demonstrate an understanding of the relationship between mental health, physical health, and environment for those patients diagnosed with a mental disorder.		NA	S	S	S	S	S				
b. Correlate prescribed therapies, psychotherapy, and alternative therapies in relation to the patient's mental disorder.		NA	S	S	S	S	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	S	S	NA	S				
d. Identify appropriate methods that will assist the patient to regain independence and achieve self-care		NA	S	S	S	S	S				
e. Recognize normal versus non-normal behavior patterns in terms of developmental milestones. (Erickson).		NA	S	S	S	S	S				
f. Develop and implement an appropriate nursing therapy group activity.		NA	NA	S	NA	NA	NA				
g. Develop a geriatric physical/mental health assessment and education plan. (Geriatric Assessment)					NA						
Faculty Initials		BL	DC	BL	BL	DC	BL				
Clinical Location		No clinicals	1S 54F MDD	1S 50F SI/ MDD	Detox	NA/AA	Hospice				

* End-of-Program Student Learning Outcomes

Comments:

Week 4-1(f) Brooke, you did an excellent job facilitating nursing therapy group for the patients. Your beach ball activity was engaging and a great way for patients to identify positive coping mechanisms, as well as talk about their different feelings and emotions. Your positive thoughts and affirmation handout was very nice as well. 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
a. Competencies: Assemble a health history which includes past and current history of mental and medical health issues and chief reason for hospitalization. (noticing)		NA	S	S	NA	NA	S				
b. Identify the individual patient's symptoms related to the psychiatric diagnosis. (interpreting)		NA	S	S	S	NA	S				
c. Demonstrate ability to identify the patient's use of coping/defense mechanisms. (noticing, interpreting)		NA	S	S	S	NA	S				
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. (noticing, interpreting, responding, reflecting)		NA	S	NA	NA	NA	NA				
e. Apply the principles of asepsis and standard precautions.		NA	S	S	S	NA	S				
f. Practice use of standardized EBP tools that support safety and quality. (noticing, responding)		NA	NA	S	NA	NA	NA				
Faculty Initials		BL	DC	BL	BL	DC	BL				

Comments:

Week 4-2(f) Great job with discussion of your EBP article titled "Adolescents' Experiences during "Boarding" Hospitalization while Awaiting Psychiatric Treatment Following Suicidal Ideation or Suicide Attempt" 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	S	S	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	S	S	NA	NA	NA				
c. Identify barriers to effective communication. (noticing, interpreting)		NA	S	S	S	S	S				
d. Construct effective therapeutic responses.		NA	S	S	S	NA	S				
e. Construct a satisfactory patient-nurse therapeutic communication. (Nursing Process Study)					S						
f. Posts respectfully and appropriately in clinical discussion groups.		NA	S	S	S	S	S				
g. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		NA	S	S	S	S	S				
h. Teach patient/family based on readiness to learn and patient needs. (responding, reflecting)		NA	S	S	NA	NA	S				
Faculty Initials		BL	DC	BL	BL	DC	BL				

Comments:

Week 4-3(a) Brooke, you did an excellent job therapeutically communicating with all the patients this week. Keep up your excellent work! BL

* End-of-Program Student Learning Outcomes

Week 4-3(f) Excellent job with your CDG this week. My only feedback is to be cautious about using abbreviations when you are completing your CDGs. You should be writing out words (ex. Patient) in order to create more fluent and complete sentences. BL

Week 5-3(e) Excellent job with your Nursing Process Study. You have been graded as satisfactory for this assignment. Please see the Nursing Process Study Rubric for detailed feedback. BL

Week 5-3(f) Brooke, you did a great job with your CDG posting for your Detox clinical experience. Your responses were very detailed and reflected much thought. Keep up all the great work. BL

Week 7-3(f) Brooke, you did an excellent job with your Hospice Reflection Journal. I'm glad you learned a lot during this experience and enjoyed your time spent there. Thank you so much for sharing your thoughts and feelings about the experience. BL

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

Comments:

Week 4-4(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. BL

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.		NA	S	NA	S	NA	NA				
b. Discuss recommendations for referrals to appropriate community resources and agencies.		NA	S	NA	S	S	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)		NA	NA	NA	S	NA	NA				
d. Attend Narcotics/Alcoholics Anonymous meeting. (Alcoholics/Narcotics Anonymous at the Artisans of Sandusky Observation)		NA	NA	NA	NA	S	NA				
Faculty Initials		BL	DC	BL	BL	DC	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:		NA	S	S	NA	NA	NA				
a. Demonstrate competence in navigating the electronic health record.		NA	S	S	NA	NA	NA				
b. Demonstrate satisfactory documentation of physical and psychiatric assessments and nursing notes utilizing the electronic health record.		NA	S	S	NA	NA	NA				
Faculty Initials		BL	DC	BL	BL	DC	BL				

Comments:

Week 4-6(b) Excellent job with your documentation for Nursing Therapy Group this week. BL

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

Comments:

Nursing Care Plan Grading Tool
Psychiatric Nursing
2021

Student Name:	Clinical Date:
Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	6/18/2021
**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Total Points 22 Comments
Nursing Diagnosis: (3 points) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points 3 Comments: Appropriate nursing diagnosis and well defined characteristics.DC
Goal and Outcome (6 points total) Goal Statement (1 point) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points 6 Comments: All components met.DC
Nursing Interventions: (8 points total) Prioritized (1) What (1) How Often (1) When (1) Individualized (1) Realistic (1) Rationale (1) All pertinent interventions listed (1)	Total Points 8 Comments: Good job on your interventions. Well thought out and appropriate.DC
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue//modify/terminate (1) Signature (1)	Total Points 5 Comments: All components met. DC
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 = 22 Comments: Great job, Brooke! DC

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	BL	BL	DC	DC	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **Group 6** OBSERVATION DATE/TIME: **7/8/2021** SCENARIO #: **Alcohol Substance Use**

CLINICAL JUDGMENT	OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)* 8. Focused Observation: E A D B 9. Recognizing Deviations from Expected Patterns: E A D B h. Information Seeking: E A D B	Team introduces self, identifies patient, and begins head to toe assessment. Inquires about fall. Begins CIWA assessments related to alcohol/withdrawal. Reviewing chart for available information/resources. Team begins assessment. Patient appears jittery and CO of frustration. Good questions. CIWA assessment performed.
INTERPRETING: (2, 4)* 10. Prioritizing Data: E A D B i. Making Sense of Data: E A D B	CIWA score interpreted to be an 8. BP measured and determined to be elevated from previous measurement. Based off CIWA assessment, score determined to be 34 and requires medication.
RESPONDING: (1, 2, 3, 5)* 11. Calm, Confident Manner: E A D B 12. Clear Communication: E A D B j. Well-Planned Intervention/ Flexibility: E A D B k. Being Skillful: E A D B	Medications being prepared. (Remember to focus on communication with the patient). Inquiring about falls, remember to complete assessments available in the chart (there were several more available). Call to provider to update. Additional assessments located in chart and began. Brief Mental Status Assessment. CIWA score determined to be 34, medicated appropriately. Anxiety reassessed. Call to provider, good SBAR report. Verbalized available community resources related to alcohol use/abuse/addiction.
REFLECTING: (6)* 13. Evaluation/Self-Analysis: E A D B l. Commitment to Improvement: E A D B	Team discussed the scenario. Discussion focused on summarizing the scenario, what aspects of the scenario that went well, and things they might do differently the next time. Also discussed the prevalence of patients in withdrawal or with substance abuse problems. Team members talked about the importance of teamwork and communication, which were identified as team strengths.

* End-of-Program Student Learning Outcomes

SUMMARY COMMENTS: E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric Developing to accomplished is required for satisfactory completion of this simulation.	Good job, you are Satisfactory for this scenario! BS
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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: