

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2021**

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

Student:

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

Faculty: Kelly Ammanniti, MSN, RN; Monica Dunbar MSN, RN; Brian Seitz, MSN, RN
Elizabeth Woodyard, MSN, 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:

- Care Plans
- Patient/Family Education
- Preparedness for Clinical/Clinical Performance
- Online Clinical Discussion Groups
- Administration of Medications
- Nursing Skills Completion of Clinical Performance Tool
- Written Reports of Clinical Experiences
- Documentation
- Conferences with the Faculty
- Lasater Clinical Judgment Rubric
- vSim
- Simulation Scenarios

Absence: (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)

Faculty’s Name	Initials
Kelly Ammanniti	KA
Brian Seitz	BS
Elizabeth Woodyard	EW
Monica Dunbar	MD

5/11/2021 KA

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/clients/others, unable to function, incomplete, erroneous, faulty, illegible clinical written work, no feedback sought from instructor 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. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/27	9/3	9/10	9/17	9/24	10/1	10/8		10/15	10/22	10/29	11/5	11/12	11/19	11/26	12/3		
Competencies:																		
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		N/A	S	N/A	N/A S	N/A	S											
b. Provide care using developmentally-appropriate communication.		N/A	S	N/A	N/A	N/A	S											
c. Use systematic and developmentally appropriate assessment techniques.		N/A	S	N/A	N/A	N/A	S											
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		N/A	S	N/A	N/A	N/A	S											
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		N/A	S	N/A	S	N/A	S											
Clinical Location Age of patient		N/A	Bellevue high schoolers	N/A	infant lactation	Empathy belly	ER, 7											
		KA	KA	KA	KA	KA												

Comments:

At my clinical we did hearing and vision tests on high schoolers. The Erikson's stage of growth and development that they were in is called identity versus role confusion. I picked this because I was testing adolescence and this stage is what all adolescence should be going through. This is the stage when they are examining and redefining self, family, peer group and community while experimenting with different roles. KA

***End-of-Program Student Learning Outcomes**

The infants that I was around are in the Erikson's trust vs mistrust stage. KA

WEEK 7. Since my patient was 7, she is in the school aged category. This means that her Erikson stage is industry vs inferiority. According to Erikson children in this age group need to master industry or achievements and gain confidence. If they fail they fail to navigate through this stage successfully, they may experience a sense of inferiority. I believe the girl was meeting her milestones for this stage because of what she was telling me about school and her being able to do and wanting to do things on her own.

Week 3 – 1e – You were able to correctly identify the Erikson's Stage of development for the high school students we worked with during hearing and vision screening. KA

Week 5 – 1a – You did a great job discussing one of the mom's you worked with while on clinical with the lactation consultant this week. KA

Objective																		
1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/27	9/3	9/10	9/17	9/24	10/1	10/8		10/15	10/22	10/29	11/5	11/12	11/19	11/26	12/3		
Competencies:		N/A	N/A	N/A	S	N/A	N/A											
f. Describe psychological changes in response to the expectant mother's pregnancy. Maternal		N/A	N/A	N/A	S	N/A	N/A											
g. Discuss prenatal influences on the pregnancy. Maternal		N/A	N/A	N/A	S	N/A	N/A											
h. Identify the stage and progression of a woman in labor. Maternal		N/A	N/A	N/A	N/A	N/A	N/A											
i. Discuss family bonding and phases of the puerperium. Maternal		N/A	N/A	N/A	S	N/A	N/A											
j. Identify various resources available for children and the childbearing family.		N/A	N/A	N/A	N/A	N/A	S											
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		N/A	N/A	N/A	S	N/A	S											
l. Respect the centrality of the patient/family as core members of the health team.		N/A	N/A	N/A	S	N/A	S											
		KA	KA	KA	KA	KA												

Comments:

Objective																		
2. Integrate principles of decision-making in utilizing evidenced-based practice in the nursing process in providing care for the childbearing family and children encompassing cultural sensitivity and diversity. (1,2,3,4,5)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/27	9/3	9/10	9/17	9/24	10/1	10/8		10/15	10/22	10/29	11/5	11/12	11/19	11/26	12/3		
a. Engage in discussions of evidenced-based nursing practice.		N/A	N/A	N/A	N/A	N/A	S											
b. Perform nursing measures safely using Standard precautions.		N/A	N/A	N/A	N/A	N/A	S											
c. Perform nursing care in an organized manner recognizing the need for assistance.		N/A	N/A	N/A	S	N/A	S											
d. Practice/observe safe medication administration.		N/A	N/A	N/A	N/A	N/A	S											
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		N/A	N/A	N/A	N/A	N/A	S											
f. Utilize information obtained from patients/families as a basis for decision-making.		N/A	N/A	N/A	N/A	N/A	S											
		KA	KA	KA	KA	KA												

Comments:

Week 5 – 2c – You did a nice job discussing how you were able to see the infant correctly latch onto the breast and swallow during breastfeeding. KA

Objective																		
3. Summarize the legal, moral and ethical issues related to care of children and the child-bearing family. (2,6,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/27	9/3	9/10	9/17	9/24	10/1	10/8		10/15	10/22	10/29	11/5	11/12	11/19	11/26	12/3		
a. Act with integrity, consistency, and respect for differing views.		N/A	S	N/A	S	N/A	S											
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		N/A	S	N/A	S	N/A	S											
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		N/A	S	N/A	S	N/A	S											
d. Critique examples of legal or ethical issues observed in the clinical setting. (List Below)*		N/A	S	N/A	S	N/A	S											
		KA	KA	KA	KA	KA												

Comments:

The biggest issue I saw was kids knowing they have a hearing or vision problem but not having glasses or hearing aids because their families couldn't afford it. This puts the child, school nurse and parents in a tough situation and subjects the parents and child to criticism depending on how the issue is viewed. KA

Week 3 – 3d – You did a great job discussing legal and ethical issues regarding screening in your CDG this week. KA

An ethical issue I heard about is mom wanting to adopt the baby and dad wanting to keep it. I can imagine this would cause a lot of problems for the family and don't think there would be an easy fix unless someone changed their mind on the issue. This is quite an ethical dilemma. There will most likely be concerns with bonding while the parents decide on what to do. KA

Week 6 – 3c – You do not need to evaluate any competencies on your tool the weeks you only have simulation. KA

WEEK 7- An ethical issue I saw could be a pts mom waiting too long to take her to the doctor. She had strep and it would have only gotten worse the longer she waited.

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgement skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/27	9/3	9/10	9/17	9/24	10/1	10/8		10/15	10/22	10/29	11/5	11/12	11/19	11/26	12/3		
a. Develop and implement a priority care plan utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)		N/A	N/A	N/A	N/A	N/A	S											
b. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)		N/A	N/A	N/A	N/A	N/A	N/A											
c. Summarize witnessed examples of patient/family advocacy.		N/A	N/A	N/A	N/A	N/A	N/A											
d. Provide patient centered and developmentally appropriate teaching.		N/A	S	N/A	S	N/A	S											
e. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A	S											
		KA	KA	KA	KA	KA												

Week 3 – 4d – You did a nice job describing the teaching you provided to the students when conducting hearing and vision screening. KA

Week 5 – 4d – You did a nice job describing the education provided to the breastfeeding mother. KA

Objective # 4a: Develop and implement a priority care plan utilizing the nursing process and clinical judgment. (1,2,6)*	Students Name: Date:
**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Nursing Diagnosis:
Nursing Diagnosis: (3 points total) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points Comments:
Goal and Outcome (6 points total) Goal Statement (1) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points Comments:
Nursing Interventions: (8 points total) Prioritized (1) What (1) How Often (1) When (1) Individualized (1) Realistic (1) Rationale (1) All pertinent interventions listed (1)	Total Points Comments:
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue/modify/terminate (1) Signature (1)	Total Points Comments:
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 = Comments:

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgement skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/27	9/3	9/10	9/17	9/24	10/1	10/8		10/15	10/22	10/29	11/5	11/12	11/19	11/26	12/3		
f. Correlate the diagnostic tests with the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A	s											
g. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A	S											
h. Correlate the medical treatment in relation to the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A	S											
i. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	S	N/A	S											
j. Correlate the patient's growth and developmental level in relation to the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	N/A	N/A	S											
		KA	KA	KA	KA	KA												

Comments:

Objective																		
5. Collaborating professionally with members of the health care team, child-bearing and child-rearing families, faculty, and peers through written, verbal and nonverbal methods, and by conferencing, networking, and posting through computer technology. (1,3,5,6,7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/27	9/3	9/10	9/17	9/24	10/1	10/8		10/15	10/22	10/29	11/5	11/12	11/19	11/26	12/3		
a. Demonstrate interest and enthusiasm in clinical activities.		N/A	S	N/A	S	N/A	S											
b. Evaluate own participation in clinical activities.		N/A	S	N/A	S	S NA	S											
c. Present at all clinical sites neatly groomed and with appropriate identification and attire (according to school uniform policy).		N/A	S	N/A	S	N/A	S											
d. Communicate professionally and collaboratively with members of the healthcare team.		N/A	S	N/A	S	N/A	S											
e. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		N/A	N/A	N/A	N/A	N/A	S											
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)		N/A	S	N/A	S	N/A	S											
g. Consistently and appropriately post comments in clinical discussion groups.		N/A	S	N/A	S	S NA	S											
		KA	KA	KA	KA	KA												

Comments:

Week 3 – 5g – You responded to the CDG questions with thorough responses. You utilized in-text citations appropriately. You did a great job sharing your perspective of the experience. Keep up the good work! KA

Week 5 – 5g – Your CDG responses for the lactation consultant were thoughtful and detailed. Keep up the great work! KA

***End-of-Program Student Learning Outcomes**

Week 6 – 5a, b, g – You do not need to evaluate any competencies on your tool the weeks you only have simulation. KA

Objective																		
6. Critique own strengths and areas for improvement modifying behaviors accordingly to achieve personal and professional goals. (7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/27	9/3	9/10	9/17	9/24	10/1	10/8		10/15	10/22	10/29	11/5	11/12	11/19	11/26	12/3		
a. Recognize areas for improvement and goals to meet these needs. (List Below)*		N/A	S	N/A	S	N/A	S											
b. Accept responsibility for decisions and actions.		N/A	S	N/A	S	N/A	S											
c. Demonstrate evidence of growth and self-confidence.		N/A	S	N/A	S	N/A	S											
d. Demonstrate evidence of research in being prepared for clinical.		N/A	S	N/A	S	N/A	S											
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		N/A	S	N/A	S	N/A	S											
f. Describe initiatives in seeking out new learning experiences.		N/A	S	N/A	S	N/A	S											
g. Demonstrate ability to organize time effectively.		N/A	S	N/A	S	N/A	S											
h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.		N/A	S	N/A	S	N/A	S											
i. Demonstrates growth in clinical judgment.		N/A	S	N/A	S	N/A	S											
		KA	KA	KA	KA	KA												

Comments:

I believe my strength was being able to help the kids I was testing feel comfortable. I think I can improve on educating patients in the future. I wasn't sure how to approach it with kids close to my age. Now that I am more comfortable with it, I will be more prepared in the future. **This is great insight. Educating children can be challenging and each age group creates their own challenges. The more you work with children the easier it will be become to educate them and adapt to each of the age groups. Make sure to set a goal on how you will accomplish your goal in the future. KA**

***End-of-Program Student Learning Outcomes**

Week 3 – 6h – You had an ACE attitude and stay over clinical by 15 minutes to assist with documenting the findings from the hearing and vision screenings. You stayed as a group, and no one left until everyone was done. What a wonderful attitude and sense of teamwork! KA

I think something I did well was asking questions to really get to know what a lactation nurse does. Something I need to improve on is communicating better with the patient. There were a lot of people in the room, and I tend to talk quiet. To improve on this, I will make sure to talk louder in the future so all pts can hear me. Great idea for improvement. KA

An area for improvement I think is talking to a pt fam member that is really upset. I had never had a pt that upset before but in the future I will be more comfortable and now how to reassure her.

***End-of-Program Student Learning Outcomes**

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2021
Skills Lab Competency Tool

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills														
	Adult Head to Toe Assessment (*1, 2, 5, 6)	Pain Assessment (*1, 2, 5, 6)	Newborn Assessment (*1, 2, 5, 6)	Postpartum and Newborn DC Ed (*1, 2, 6)	Pregnancy History (*1, 2, 3, 4, 5, 6)	Newborn Thermo. (*1, 2, 3, 4, 5, 6)	EDD (*1, 2, 3, 4, 5, 6)	Breastfeeding and Bottle Feeding (*1, 2, 3, 6)	Breast Assessment (*1, 2, 3, 4, 5, 6)	Circumcision Care (*1, 2, 6)	Broselow Tape (*1, 2, 3, 5)	Leopold's (*1, 2, 3, 5, 6)	APGAR (*2, 3, 4, 5, 6)	Ballard Assessment (*2, 3, 4, 5, 6)	Pediatric Vital Signs (*1, 4, 5)
	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:
Evaluation	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills								
	Pediatric Lab Values (*1, 4, 5)	C-Section Care (*1, 2, 5, 6)	Health Literacy (*2, 5, 6)	Safety (*1, 2, 3, 5, 6)	Postpartum Assessment (*1, 2, 6)	Newborn Bath and Cord Care (*2, 4)	Fundus Assessment (*1, 2, 5, 6)	Lochia Assessment (*1, 2, 4)	Meditech (*1, 2, 3, 5, 6)
	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:
Evaluation	S	S	S	S	S	S	S	S	S
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	KA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

Comments:

Week 1 – You completed the online self-study portion of lab satisfactorily and actively participated in all in person lab components. You were able to demonstrate your knowledge and skills related to the Maternal Child Nursing lab areas covered. Keep up the good work! KA
Head-to-Toe Check-off – You satisfactorily demonstrated a head-to-toe assessment on the manikin without difficulty. KA

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2021
Simulation Evaluations

Simulation Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Simulation												
	EMF Simulation (*1, 2, 3, 5, 6)	Pregnancy and PP Simulation (*1, 2, 3, 5, 6)	vSim Maternity Case 1 (*1, 2, 3, 5, 6)	Shoulder Dystocia and Newborn Care (*1, 2, 3, 5, 6)	Patient Care Safety Escape Room (*1, 2, 3, 5, 6)	vSim Maternity Case 4 (*1, 2, 3, 5, 6)	Empathy Belly Simulation (*1, 2, 3, 5, 6)	Pediatric Respiratory Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 5 (*1, 2, 3, 5, 6)	Pediatric GI Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 4 (*1, 2, 3, 5, 6)	Student Developed Simulation (*1, 2, 3, 5, 6)	Comprehensive Simulation (*1, 2, 3, 5, 6)
	Date: 9/20	Date: 9/16	Date: 9/27	Date: 10/	Date: 10/	Date: 10/11	Date: 9/28	Date: 10/	Date: 11/8	Date: 11/	Date: 11/22	Date: 11/29	Date: 12/1
Evaluation	S	S	S				S						
Faculty Initials	KA	KA	KA				KA						
Remediation: Date/Evaluation/Initials	NA	NA	NA				NA						

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: GROUP 5

OBSERVATION DATE/TIME: 9/16/21

SCENARIO #: PPH

CLINICAL JUDGMENT					OBSERVATION NOTES
COMPONENTS NOTICING:					
• Focused Observation:	E	A	D	B	<p>1st half: information seeking regarding current situation and prenatal care; Recognized s/s of preterm labor and focused observation on how pt. felt</p> <p>2nd half: After receiving report, information seeking regarding vs and when pt. c/o not feeling well, recognized deviation from normal. Observed and noticed pt's fear.</p> <p>After giving meds, sought information from the HCP.</p>
• Recognizing Deviations from Expected Patterns:	E	A	D	B	
• Information Seeking:	E	A	D	B	
INTERPRETING:					<p>1st half: prioritized getting to root cause of preterm labor; interpreted need to not only assess mom but also baby. Interpreted the UA for infection as</p>

<ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>well as THC in urine.</p> <p>2nd half: Interpreted pt. complaint as need to prioritize a fundal assessment. Another set of vital signs was not done. Did not interpret pt. continued c/o dizziness as need to stay with the fundal massage. Interpret need to reassure patient.</p> <p>Interpreted after giving medications the HCP needed to be notified.</p>
<p>RESPONDING:</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 • Being Skillful: E A D B 	<p>1st half: communicated with patient and prepared her for care; responded to pt. complaint with assessment; sent UA down to lab; baby assessment done by utilizing the EFM and asking about fetal heart tones as well as placing the pt. on her left side. Information gathered used to phone HCP. Education provided regarding THC as well as the treatment for the UTI.</p> <p>2nd half: Well-planned intervention in performing a fundal assessment and massage. HCP notified with SBAR with read back done. Fundal massage stopped, nurse stayed in the room and placed O2 on. Encouraged pt. that interventions were being done to stop the bleeding, however, fundal massage was not picked back up. After medication was given b/p was not checked and fundus was not rechecked.</p> <p>Intervened after meds by calling HCP. Incomplete SBAR as information the HCP needed was not done yet such as vital signs and fundal assessment.</p>
<p>REFLECTING:</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Worked together t/o the scenario to ensure medications were correct as well as made suggestions for assessment and patient care.</p>

<p>SUMMARY COMMENTS:</p> <p>All areas must be evaluated as developing or higher to be satisfactory for the simulation.</p>	<p>Overall, very good job in the assessment of each half of the scenario. You were able to clearly identify what the patient needed and sought to intervene to meet outcomes. Recommend continuing fundal massage for a patient experiencing PPH. Correct medication administration and pt. support t/o scenario as well as education. Good job! EW</p>
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E = exemplary, A = accomplished, D = developing, B = Beginning
 Based off of Lasater's Clinical Judgment Rubric

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: OBSERVATION DATE/TIME: 9/20/21 SCENARIO #: **EFM**

CLINICAL JUDGMENT	OBSERVATION NOTES
<p>COMPONENTS NOTICING: (1, 2, 5)*</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>At the end of the simulation you were able to notice various fetal heart rate patterns.</p> <p>You were able to notice fetal heart rate patterns that were deviations that could potentially be harmful to the fetus.</p> <p>You were able to notice reasons for use of internal fetal monitoring, forceps, and vacuum assisted delivery.</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Based on the fetal heart rate patterns you were able to interpret the appropriate treatment measures to correct the deviations.</p> <p>Through class discussion you were able to interpret any additional steps your group may have missed and the appropriate order to</p>

					perform all actions.
RESPONDING: (1, 2, 3, 5)*					<p>Able to prioritize care of patient using information from EFM.</p> <p>Able to identify different categories for heart rate patterns. Identified accelerations, late decelerations, variable decelerations, and early decelerations.</p> <p>Performed vaginal exam using sterile technique.</p> <p>Demonstrated ability to apply internal fetal monitor to fetus.</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 • Being Skillful: E A D B 					
REFLECTING: (6)*					<p>Reflection of the simulation shows retention and identification of materials and areas that need additional practice.</p> <p>Reflected on putting all areas of simulation together through a case study.</p>
<p>SUMMARY COMMENTS:</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Developing or higher is required for satisfactory completion of this simulation.</p>					<p>Comments</p> <p>You are satisfactory for this simulation. KA</p> <p>Great job participating in this multiple staged simulation. Reading, identifying, and applying the correct techniques in fetal heart rate patterns is a skill that can take time to develop. You are well on your way.</p>

Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO: Empathy Belly

STUDENT NAME:

OBSERVATION DATE/TIME:

<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>You reflected on many aspects of your time wearing the empathy belly. Your responses were thoughtful and reflective on how you felt and you compared your experience to a real pregnancy.</p> <p>Great job.</p> <p>I enjoyed seeing your pregnancy photo!</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p>	<p>Comments</p> <p>You are satisfactory for this simulation.</p>

*Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2021
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: _____