EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2021

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: John Z. Zura

Semester: Fall

Final Grade: Satisfactory/Unsatisfactory

Date of Completion:

Faculty: Frances Brennan, MSN, RN; **Lora Malfara,** MSN, RN; **Amy Rockwell**, MSN, RN
Teaching Assistant: Chandra Barnes, BSN, RN; **Devon Cutnaw,** BSN, RN; **Nick Simonovich,** 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 in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, U, or NA". 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, it must be addressed with a comment as to why it is no longer a "U" the following week. If the student does not state why the "U" is corrected, 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 or needs improvement 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 or needs improvement as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.

METHODS OF EVALUATION:

Skills Lab Checklists
Care Map Grading Rubric
Administration of Medications
Simulation Scenarios
Skills Demonstration
Evaluation of Clinical Performance Tool
Clinical Discussion Group Grading Rubric
Lasater Clinical Judgment Rubric
Skills Lab Competency Tool
Faculty Feedback
Documentation
Clinical Reflection

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)

Faculty's Name	Initials
Chandra Barnes	CB
Frances Brennan	FB
Devon Cutnaw	DC
Lora Malfara	LM
Nicholas Simonovich	NS
Amy Rockwell	AR

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

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

***Grey shaded weekly competency boxes do not need a student evaluation rating or faculty/teaching assistant initials.**

Objective

1. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: a. Identify spiritual needs of patient (Noticing).								NA		S	S							
b. Identify cultural factors that influence healthcare (Noticing).								NA		S	S							
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).			NA	NA	S	NA	S	S		S	S							
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).			NA	NA	S	NA	S	S		S	S							
	DC	NS	NS	NS	NS	NS	NS	NS	NS	DC	DC	DC						
Clinical Location; Patient age		Meditech Orientation	No Clinical	No Clinical	4N 58	**No Clinical**	3T 70	**Midterm**	**NA**	4N 20	4N 07							

Comments

Week 5 1(c,d) – Nice job this week respecting your patient's preferences and needs when obtaining vital signs. You were able to use Maslow's Hierarchy of Needs to ensure the priority intervention focused on vital sign measurement. NS

Week 7 1(c) – You did a great job with patient care this week. You addressed many of your patients' needs and coordinated your care appropriately based on his wishes. You communicated well with the patient and his family member at the bedside. You cared for your patient during a busy time of the day and found yourself interrupted

frequently, which can be challenging. You were still able to gather important assessment data despite the interruptions. Keep in mind this experience when considering the importance of prioritization and time management to ensure important interventions are performed in a timely manner. Great job! NS

Week 11 (a-d) You did a very good job communicating with your patient to better understand their history and background. Good job! DC

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

2. Summarize knowledge of anatomy, physiology, chemistry, nutrition, psychosocial and developmental principles in performance of basic physical assessment through use of clinical judgment skills. (3,4, 5)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						NA	S	**S**		S	S							
b. Use correct technique for vital sign measurement (Responding).			NA	NA	S	NA	S	**S**		S	S							
c. Conduct a fall assessment and institute appropriate precautions (Responding).						NA	S	**S**		S	S							
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).								**NA**		S	S							
e. Collect the nutritional data of assigned patient (Noticing).								**NA**		S	S							
f. Demonstrates appropriate insertion, maintenance, and removal of NG tube (Responding).								**NA**		NA	NA							
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).								**NA**		S	S							
	DC	NS	NS	NS	NS	NS	NS	**NS**	NS	DC	DC	DC						

Comments

Week 5 2(b) – Nice job this week utilizing the correct technique learned in the classroom and demonstrated in lab when obtaining vital signs on your first patient. You were able to notice a low pulse oximetry reading of 91% and hypertension when obtaining vitals. You were able to use clinical judgement to further assess your patient based on these results. Great job! NS

Week 7 3(a) – You were presented with a challenging patient this week that required a lot of care and careful assessment. Good work this week performing your first full head to toe assessment on a live patient and piecing together important data despite your limitation in time. You were able to notice numerous deviations from normal in the HEENT and psychosocial systems. You performed a focused respiratory assessment noting course lung sounds with wheezes and rhonchi, nice work! You noted his difficulty clearing secretions and interpreted these findings as being related to pneumonia from non-compliance with modified diets. You also were observant of numerous skin abnormalities. You discussed your priority assessment data and communicated for findings accurately. Nice job! NS
Week 11 2(f) – John – You exemplary in your care for your patient with the NG as well as teaching your peers. Great job and thank you for taking that initiative! DC

* End-of-Program Student Learning Outcomes
Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

3. Select communication techniques and appropriate boundaries with patients, families, and health care team members. (1,2,3,4,6,7)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: **a.** Receive report at beginning of shift from assigned nurse (Noticing).						NA	S	**S**		S	S							
b. Hand off (report) pertinent, current information to the next provider of care (Responding).			NA	NA	NA	NA	NA	**NA**		NA	S							
c. Use appropriate medical terminology in verbal and written communication (Responding).			NA	NA	S	NA	NA	**S**		S	S							
d. Report promptly and accurately any change in the status of the patient (Responding).			NA	NA	S	NA	NA	**S**		S	S							
e. Communicate effectively with patients and families (Responding).			NA	NA	S	NA	S	**S**		S	S							
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).			NA	NA	S	NA	S	**S**		S	S							
	DC	NS	NS	NS	NS	NS	NS	**NS**	NS	DC	DC	DC						

Comments

Week 5 3(e) – Awesome job communicating with a live patient for the first time as a student nurse. You were able to communicate effectively regarding the interventions that you performed. Additionally, you were able to learn more about your patient as a person during your encounter. You took the time to sit with your patient at eye level and demonstrated great care and compassion. Job well done! NS

Week 11 3 (a-f) – You communicated effectively with patients, staff and patients and actively took to answering call lights. Great job! DC

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

4. Exemplify advanced searches in accessing electronic health care information and documenting patient care. (1,4,8)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: **a.** Document vital signs and head to toe assessment according to policy (Responding).			NA	NA	S	NA	S	**S**		S	S							
b. Document the patient response to nursing care provided (Responding).								**NA**		S	S							
c. Access medical information of assigned patient in Electronic Medical Record (Responding).			NA	NA	S	NA	S	**S**		S	S							
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S	NA	NA	NA	NA	NA	**S**		S	S							
e. Provide basic patient education with accurate electronic documentation (Responding).								**NA**		NA	NA							
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).							**S**	**S**		**S**	S							
*Week 2 –Meditech Expanse	DC	NS	NS	NS	NS	NS	NS	**NS**	NS	DC	DC	DC						

Comments

Week 2 4(d) – Satisfactory for listening attentively and actively participating in the Meditech orientation clinical. NS

Week 5 4(a,d) – Your documentation was factual and accurate related to your vital sign measurements. Nice job getting into the EHR and communicating your findings appropriately. NS

Week 7 4(a,f) – Overall nice work with your documentation related to your head to toe assessment. Many aspects of your charting were very detailed, awesome job. As we discussed, there are some areas for improvement that will come with more experience. Continue to pay close attention to detail and practice in the skills lab to gain more confidence in the charting system. (f) – Nice job with your clinical discussion assignment. All requirements were met for a satisfactory evaluation. NS

Week 11 4 (a-f) Your documentation has greatly improved and has not gone unnoticed. Good job! DC

* End-of-Program Student Learning Outcomes
Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

5. Exemplify psychomotor skills and nursing care safely using evidence-based practice. (3,4,5,7,8)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).			NA	NA	S	NA	S	**S**		S	S							
b. Apply the principles of asepsis and standard/infection control precautions (Responding).			NA	NA	S	NA	S	**S**		S	S							
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).								**NA**		NA	S							
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).			NA	NA	S	NA	S	**S**		S	S							
e. Organize time providing patient care efficiently and safely (Responding).			NA	NA	S	NA	S	**S**		S	S							
f. Manages hygiene needs of assigned patient (Responding).								**NA**		S	S							
g. Demonstrate appropriate skill with wound care (Responding).								**NA**			S							
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						NA	S	**S**										
	DC	**NS**	**NS**	NS	NS	NS	**NS**	**NS**	**NS**	**DC**	**DC**	**DC**						

Comments

****You must document the location of the pull station and extinguisher here for clinical #2 experience.**

Week 5 5(d,e) – You were able to organize your time effectively by entering the room and performing priority interventions in a timely manner. Nice job managing care with beginning dexterity in your first patient encounter as a student nurse. NS

The fire alarm pull stations can be found at the end of the hallways and to the right of the unit coordinator's desk facing it from the elevators.

The fire extinguishers can be found by each exit stairwell, in front of the unit coordinator's desk, and next to room's 3018 and 3019.Thank you for locating and documenting these locations! NS

Week 11 5 (c) - Good preparation for the removal of a foley catheter. Your patient appreciate your education and guidance. DC

* End-of-Program Student Learning Outcomes
Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																		
6. Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*																		
Clinical Experience	**Week 1**	**Week 2**	**Week 3**	**Week 4**	**Week 5**	**Week 6**	**Week 7**	**Mid-Term**	**Week 8**	**Week 9**	**Week 10**	**Week 11**	**Week 12**	**Week 13**	**Week 14**	**Week 15**	**Make-Up**	**Final**
Competencies: **a.** Utilize clinical judgment skills to develop a patient-centered plan of care (Responding). ***See Care Map Rubric at end of tool**								**NA**			**S**							
	DC	NS	NS	NS	NS	NS	**NS**	**NS**	**NS**	**DC**	**DC**	DC						

Comments

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

7. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: **a.** Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).								NA										
b. Recognize patient drug allergies (Interpreting).								NA										
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).								NA										
d. Administer oral, intra-muscular, subcutaneous, and intradermal medications using correct techniques (Responding).								NA										
e. Review the patient record for time of last dose before giving prn medication (Interpreting).								NA										
f. Assess the patient response to prn medications (Responding).								NA										
g. Document medication administration appropriately (Responding).								NA				S						
*Week 11: BMV	DC	NS	NS	NS	NS	NS	NS	NS	NS	DC	DC	DC						

Comments

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

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective

8. Exemplify professional conduct through self-reflection, responsibility for learning, and goal setting. (1,5,7)*

Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Mid-Term	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Make-Up	Final
Competencies: **a. Reflect on areas of strength****(Reflecting)			NA	NA	S	NA	S	S		S	S							
b. **Reflect on areas for self-growth with a plan for improvement. ****(Reflecting)			NA	NA	S	NA	S	S		S	S							
c. Incorporate instructor feedback for improvement and growth (Reflecting).			NA	NA	S	NA	S	S		S	S							
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).			NA	NA	S	NA	S	S		S	S							
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).			NA	NA	S	NA	S	S		S	S							
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).			NA	NA	S	NA	S	S		S	S							
g. Comply with patient's Bill of Rights (Responding).			NA	NA	S	NA	S	S		S	S							
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).			NA	NA	S	NA	S	S		S	S							
i. Actively engage in self-reflection. (Reflecting)			NA	NA	S	NA	S	S		S	S							
*	DC	NS	NS	NS	NS	NS	NS	**NS**	NS	DC	DC	DC						

**** Must have different written example each week of clinical/lab. You must explain your plan for how you will improve. Example, "I am having a difficult time with obtaining a manual BP. I will get a BP cuff from Amy and practice manual BP's with at least three members of my family this week." Please ensure that you answer this section in-depth with your plan of action. Each week must be different.**

*Week 5
a.) My primary strength after today's clinical session was my interaction with the patient and getting to know their wants and needs. I learned that he was due for inhaler treatment and BP medications while conducting my vital assessment, and thereby I alerted the charge nurse to make sure the staff were on track to administer his medications at the correct times. Awesome strengths to note! With this being your first patient encounter, you showed no hesitation entering the room and making a connection. You seemed very comfortable in your role and are certainly off to a great start in the clinical setting! NS

b.) My primary weakness after today's clinical session would be that of not being able to figure out how to successfully add a note to my vital sign assessment on meditech. Another weakness I would note is needing to further become acquainted with the equipment utilized in the hospital setting (bed controls, vital sign machine, and room management). In order to improve this weakness I will further practice with using medical equipment in the school of nursing's lab and go over adding a note to my vital sign assessment on meditech with Nick. Great job reflecting on your experience and identifying an area you would like to grow and improve in. While these are noted areas that you were personally like to improve in, keep in mind the level of comfort will come with more experience. However, I think you have a great plan in place to help you feel more comfortable moving forward. Keep up the hard work! NS

Week 5 8(i) – John, I appreciate the time you took to provide open and honest responses to the reflection assignment following your first clinical. You articulated your responses very well and I can tell that you took the assignment seriously. I love the fact that you included your own personal experiences with nurses from a patient perspective and how that is guiding your mindset while caring for others. Its sad to hear that some nurses simply go through the motions in their encounters with patients. This, unfortunately, tends to be a personality trait rather than something learned in training. However, I think you hit the nail on the head when you mentioned that it should be common sense that patients want to be treated as human being and want to be included in their care. You have a unique ability to generate conversations with anybody and this will go a long way in making your patients feel safe and comfortable in your care. The fears that you discussed are natural in the role you are entering. With each experience you will gain more confidence in yourself, your knowledge, and your abilities. I love your confidence moving forward and cant wait to see what you accomplish throughout the semester and the program. NS

*Week 6
a.) I feel as though my primary strength coming out of today's clinical session was my ability to provide my patient and spouse comfort during my time of care with them. I was able to accomplish this by informing them of the patient's diagnosis (pneumonia) and ways to help treat it. I was also able to assist the patient in using calming techniques to soothe their concerns with their diagnosis. As well as helped them with lowering their anxiety levels with the constant flow of medical staff that was coming in and out of the room during the time we were together. Your communication this week was excellent. During a very busy time of the day you were able to be a comfort to both the patient and his wife, which is what nursing is all about. Providing care and comfort during difficult times in peoples lives. Awesome strength to note! NS

b.) I feel as though my primary weakness coming out of today's clinical session was time management. I was able to conduct a vital sign assessment and a focused assessment, however I was unable to conduct a full head-to-toe assessment or assist with any call lights. To improve upon myself in these areas I will keep better track of time and utilize Meditech when I am unable to get hands on with my patient. I will chart any observational information while my patient is being assessed by another medical professional or is busy with another task. I will also make better use of my time by ensuring everything that is needed for my assessments will be already acquired prior to conducting the assessment. Keep in mind the timing of the day that you cared for your patient presents numerous time management challenges. We discussed the importance of time management and prioritization during clinical. I think you will find a good balance as we get into longer clinical days. Great use of reflection and plan for improvement! NS

Midterm comment – You have successfully made it to the half-way point of the semester, congratulations! Although we have only had two clinical experiences up to this point, you have shown tremendous growth throughout the first half of the semester. Watching you and your confidence grow from clinical #1 to clinical #2 was awesome to

see. We look forward to working alongside of you as the semester progresses with more clinical days. Review the comments provided throughout your tool, note your strengths, work on your areas of improvement, and continue to work hard to achieve your goals! NS

*Week 9

a.) In reflecting upon my week 9 clinical experience I would say my primary strength would be that of providing comfort to multiple patients and being able to respond to multiple call lights. During my four-hour clinical session, I was able to attend to at least 3 other patients besides the patient I was initially assigned to. Though most of my involvement with these other patients was doing little tasks it was nice to be able to assist them with their challenges. For example, I had one patient who pulled on his catheter tube and had accidentally got tangled up in it when moving from the chair to the bed. He was in a lot of pain and distress, and I was able to calm the situation by fixing the catheter placement. I did so by having him raise his legs up slightly so I could untangle the line and run it over his outer leg so it would not get tangled up on him again. He thanked me for assisting him and said that it felt a lot better after I was able to correct the situation. You exemplified teamwork by helping your peers and answering call lights. Good job noticing when the patient was experiencing pain and for assisting him. DC

b.) In reflecting on my week 9 clinical experience I would say my primary weakness was not documenting in Meditech fast enough and not properly utilizing the comment section when detailing my patient's information. I believe this is my primary weakness because it slowed me down with providing my assigned patient and other patients care and assistance. That and I also had to go in an edit some of the comments I made on the patient's documents because they did not need to be stated. An example of this was when I documented in the patient's intake comment section I said, "Pt. prefers vanilla flavored foods". After instruction from RN Devon, I learned that it was not needed to include the information in that section and to instead notify the meal plan providers or dietician about the patient's food preference. Fortunately, I was able to do exactly what RN Devon suggested when the patient's dietician entered the room shortly before I was finished for the day. At that time, I told her what the patient had told me about his food preferences and his food dislikes, which would assist in establishing a meal plan that met his preferences and would provide the proper amount of nutrition he needed. In order to improve in these areas, I will formulate a planned schedule of how I am going to conduct my morning routine with the patient. This schedule may change a couple of times to see what order of assessments would be best to follow to be able to assess my patient's situation quickly and accurately. That and to provide other health care members vital information in a timely manner to keep them updated on the patient's status. I am also going to open up Meditech prior to my next clinical and take time in exploring it's features and become more familiarized with where I can find information in different areas. You were still very detailed in your documentation. Improvement will come with continued practice and guidance from instructors. Keep up the good work, John! DC

*Week 10

a.) During my week 10 clinical experience, I felt as though my ability to communicate with other care providers and to address my patients' needs in a timely manner were my primary strengths. I was able to update the registered nurses who were in charge of my patients multiple times to coordinate care for them, and to administer pain meds when appropriate. I was also able to effectively communicate with the registered nurses and update them about specific developments with each of my patients. For example, I was able to update RN Justin with our patient's skin integrity, and to let him know the measures I took to prevent further breakdown from the surrounding area (Applying Pinkxav cream to the surrounding area and Vashe antiseptic solution on the area of exposed skin). With both of my patients I met their needs in a timely manner by using my own clinical judgement to assist them with their wants and needs. For example, my patient was complaining of a headache which led me to making the decision to go and retrieve her a washcloth and wet it with some cold water to apply to her head. While I was retrieving the washcloth, I notified RN Jessica to see when the patient was due for her next dose of meds and to let her know that the patient was complaining of a headache. This allowed me to provide my patient with the information of when she was going to get her next dose of meds and how much longer before she could get something for her headache.I couldn't be more proud to see the attention and dedication that you gave to your patients this week. The nurses noticed how interested you are in everything associated with nursing. Keep up the great work, John! DC

b.) During my week 10 clinical experience I felt as though my primary weakness would be the fact of being hesitant at first to seek help with conducting a diaper and pad change for my patient. At first, I felt as though I would be able to move my patient and effectively conduct the proper hygiene measures for my patient on my own. However, after failing to properly move my patient to one side of the bed and be able to remove the soiled pad from underneath her, I realized that I would be unable to complete the task on my own and required assistance. From that moment I did excuse myself from my patient and seek helped from one of the PCTs; which I was fortunate to quickly find and assisted me with the rest of the patient's hygiene care. I feel as though this was my primary weakness because I could have provided the patient with

faster and more effective care if I had retrieved assistance in the first place rather than try to do it on my own. In order to improve in this area, I will simply see if I am able to effectively move a patient on my own prior to providing them with hygiene care. If I am unable to move them on my own, I will excuse myself and seek help from another health care member to provide the most effective care for the patient. I will also look at more methods of how to ambulate a patient while providing bed care in our *Essentials for Nursing Practice* book and from other credible publications.This can be difficult, especially when we are very used to accomplishing tasks on our own. Never feel that you cannot ask for help! We can only provide best patient outcomes as a team! DC

End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

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

Student Name: John Zura

Skills Lab Competency Evaluation Performance Codes: **S**: Satisfactory **U**:Unsatisfactory		**Lab Skills**									
	Week 1 (4)*	**Week 2 (2,3,5,8)***	**Week 3 (2,3,4,5,8)***	**Week 4 (2,3,4,5,8)***	**Week 5 (2,3,4,5,8)***	**Week 6 (1,2,3,4,5,8)***	**Week 7 (2,3,4,5,8)***	**Week 8 (2,3,4,5,8)***	**Week 9 (2,3,4,5,8)***	**Week 10 (2,3,4,5,6,8)***	**Week 11 (1,2,3,4,5,6,7,8)***
	Date: 8/23/2021	**Date:** 8/30/2021	**Date:** 9/10/2021	**Date:** 9/13/2021	**Date:** 9/20/2021	**Date:** 9/27/2021	**Date:** 10/4/2021	**Date:** 10/11/21	**Date:** 10/18/2021	**Date:** 10/25/2021	**Date:** 11/1/2021
Evaluation:	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	LM	LM	FB	LM	LM	AR	LM	FB	NS	LM	LM
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

***Course Objectives**

Comments:

Week 1 (Technology Lab):

During this lab you were able to satisfactorily navigate:

- Edvance360 Learning Management System and sample quiz.
- Skyscape Resource System.
- Assessment Technologies Institute (ATI) / Virtual Simulation (vSim) Systems.
- Guided tour of library and computer lab. LM

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

During lab this week you were able to satisfactorily demonstrate:

- Appropriate hand hygiene utilizing hand sanitizer and soap/water.
- Accurate verbalization of procedure for donning & doffing PPE.

- Appropriate level of skill during guided practice with measurement of radial and brachial pulses, along with manual blood pressure. Vital signs skills will be observed 1:1 with faculty during Week 3. Keep up the good work! LM

Week 3 (Vital Signs): Great job in the lab this week! You satisfactorily completed the vital sign check off during 1:1 observation, including oral temperature, radial pulse, respiratory rate, pulse oximetry, and blood pressure measurement. During the blood pressure measurement, you accurately obtained two out of two blood pressure results on the Vital Sim manikin. You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic blood pressure. One prompt was needed to perform pulse oximetry on the patient as part of the vital sign assessment. Your Meditech documentation related to vital signs was accurate. Keep up the great work!! FB

Week 4 (Assessment):

John, you are satisfactory with the head to toe assessment guided practice, hand-off report activity, Micromedex/Intranet navigation activity, and vital sign measurement. You will be observed 1:1 for Head to Toe Assessment competency during Week 5. Keep up the great work! LM

Week 5 (Assessment; Mobility):

John, great job in lab this week! You have satisfactorily demonstrated a basic head to toe assessment in the skills lab. Your approach was systematic, thorough, and overall well done. You did require 1 prompt related to observing the sclera and conjunctiva of the eyes, noting the color. You demonstrated friendly, professional, and informative communication. You were able to correctly identify the lung sounds as crackles. Great job! LM

Feedback on documentation this week: You did an excellent job with your Meditech documentation this week! You fully documented on the interventions listed below. Great job!

- Vital Signs- your documentation was accurate and complete.
- Safety- your documentation was accurate and complete.
- Pain- your documentation was accurate and complete.
- Physical re- assessment- your documentation was accurate and complete.

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

Week 6 (Personal Hygiene Skills):

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

Week 7 (NG Skills: Insertion, Irrigation, and Removal; Feeding):

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

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

You did a great job in the lab this week and were satisfactory with the following skills: Sterile Glove Application, Foley Catheter Insertion (female), and Foley Catheter Removal. One prompt was needed for proper labeling of urine specimen after collection from drainage bag. One prompt was provided for holding onto catheter at the labia/meatus until catheter is removed and asking the patient to take slow deep breaths during removal of catheter. Excellent job! One prompt was provided for correct placement of four fingers underneath the second glove cuff to prevent break in sterility of gloves. You maintained the sterile field throughout the Foley insertion, did not contaminate the catheter or your gloves at any point, and had very good communication with your "patient". Great job! You correctly verbalized the differences in catheter insertion for a male patient. You independently completed the Meditech documentation for Urinary Catheter Management. Keep up the great work!!! FB

Documentation Lab – You have satisfactorily completed the documentation lab by actively participating in Meditech documentation related to vital signs, physical re-assessment, safety and falls, pain assessment, patient rounds, TED hose/SCD/Ace wrap, feeding method, Intake and Output, urinary catheter

management, and writing a nurse note. You utilized your time wisely, asked appropriate questions, and gained experience with each intervention listed. Great job! NS/DC

Week 9 (Dressing Change: Dry Sterile, Sterile Wet to Dry, I&O Station): John, you have demonstrated competence in the skill of wound assessment and wound care through guided observation. You accurately demonstrated a Dry Sterile Dressing and a Sterile Wet to Dry Dressing using appropriate technique. Documentation was completed related to wound care in the Meditech system. Additionally, you gained experience in measuring accurate urine output and demonstrated competence in collecting a urine specimen from a foley catheter bag using aseptic technique. Clinical scenario questions were presented to the group with active participation from all students. Great job this week! LM/NS

Week 10 (Safety; Infection Control; Prioritization; Tube Feeding; Weight; Pressure Ulcer Prevention; Soft Restraints; Doppler BP; Care Map Development):
Satisfactory participation with the following stations: Prioritization, Tube Feeding, Patient Weight, Restraints, Doppler BP, Meditech documentation, and Patient Scenario involving Safety, Infection Control, Pressure Ulcer Prevention, and Care Map Development. Keep up the hard work! LM
Week 11 (Case Scenario; Care Map Development; Medication Lab; Open Lab):
Satisfactory participation in the following: Patient Scenario involving discharge planning and focused assessment, and Care Map Development. Keep up the good work! LM
Medication Lab:
Satisfactory participation and performance of the following skills in the medication lab: Oral, IM, SQ, and ID medication administration; performance of IM and ID injections on fellow student; performance of SQ injection on practice sponge; use of and drawing medication out of ampule and vial. LM

8/10/2021 NS

Week 10 or 12:

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Course Objective:					**Student Name:** John Z. Zura **Date:10/29/2021**
Top Nursing Priority:Self Care Deficit					
		3 Points >75% Complete	2 Points 50-75% Complete	1 Point <50% Complete	Comments
Noticing	Identify all abnormal assessment findings	3			
	Identify all abnormal lab finds/diagnostic tests		2		The only diagnostics listed were laboratory results. What about CTs/radiology, etc?
	Identify all risk factors		2		Patient's history indicated more risk factors in their PMH (past medical history)
	Highlight all related/relevant data in the noticing boxes	3			
Interpreting	List all nursing priorities	3			
	Highlight the top nursing priority	3			
	Identify all potential complications		2		More higher risk complications need to be listed? What could potentially occur/
	Highlight potential complications relevant to top nursing priority		2		Same as above.
	Identify signs and symptoms to monitor for each complication			1	No s/sx included.
Responding	List all nursing interventions relevant to top nursing priority		2		There are additional interventions needed for the patient's listed main priority diagnosis.
	Interventions are prioritized	3			
	All interventions include a frequency			1	No frequencies listed.
	All interventions are individualized and realistic	3			
	An appropriate rationale is included for each intervention	3			
Reflecting	List the reassessment findings for the top nursing priority	3			
	Reflection includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	3			

48-33 points = Satisfactory 32-17 points = Needs Improvement ≤ 16 points = Unsatisfactory	Total Points Earned: 39 Comments:Great job, John! I would recommend to look over my notes and see how you can revise this for next semester. You are on the right track. Faculty Initials:DC

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

Simulation Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
	Date:	**Date:**
Evaluation (See Simulation Rubric)		
Faculty Initials		
Remediation: Date/Evaluation/Initials		

* Course Objectives

A. Reflect on an area of strength after observing/participating in each simulation scenario.
B. Recognize one area for improvement and set a goal to meet this need.

The goal must include what you will do to improve, how often you will do this, and when you will complete the goal (example- "I forgot to raise the head of the bed when the patient began having trouble breathing. I will review the proper nursing interventions for dyspnea in the textbook and on skyscape twice before the next simulation scenario").

Simulation #1:
A.

B.

Faculty/TA comments:

Simulation #2:
A.

B.

Faculty/TA comments:

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 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: _____