EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2021

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Victoria Glaze

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)
10/29/21	1	Respiratory Simulation Survey	
10/29/21	1	Boys and Girls Club Survey	

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	S	S	S	N/A	N/A	N/A	N/A				
b. Provide care using developmentally-appropriate communication.		N/A	S	N/A	N/A	N/A	S	S	S	S	N/A	N/A	N/A	N/A				
c. Use systematic and developmentally appropriate assessment techniques.		N/A	S	N/A	N/A	N/A	**S**	**S**	**S**	S	N/A	N/A	N/A	N/A				
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	S	S	S	N/A	N/A	N/A	N/A				
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	S	S	S	S	N/A	N/A	N/A				
Clinical Location Age of patient		N A	Bellevue high schoolers	N/A	infant lactation	Empathy belly	ER, 7	NA	FT, 0	FR MC, 19	Boys and girls club 6-12	N/A	N/A	N/A				
		KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	EW	EW					

Comments:

At my clinical we did hearing and vison 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 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

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. KA

WEEK 9: The 19 year old mom that I took care of is in the intimacy versus isolation stage.KA
Week 10: the school age kids I was with were in the industry vs inferiority KA

Week 7 - 1a - You did a wonderful job describing a patient you had the opportunity to work with this week. You highlighted the care provided to her throughout her ER stay. KA
Week 7 - 1e - You were able to appropriately identify the Erikson's Stage for the patient you worked with in the ER. KA

Week 9 – 1a – You did a wonderful job providing holistic care to the mom and baby you were assigned to this week. You did a great job describing an OB patient you worked with this week on clinical. KA
Week 9 – 1d – You were able to describe safety concerns for the OB patient in your CDG. KA

Week 10 – 1b,e- Nice job recognizing the need to adapt your communication strategy when interacting with children of different ages. Each group comes with unique challenges that must be taken onto account. You recognized that the younger children were eager to make you happy and the older children were more concerned with how their peers reacted to their behavior. BS
Week 10 -1b – You did a nice job discussing how you adapted your communication to the different age groups you worked with at the Boys and Girls club in your CDG. KA
Week 10 – 1e – You did a nice job describing the different school-age children you worked with this week at the Boys and Girls Club. KA

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

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: f. Describe psychological changes in response to the expectant mother's pregnancy. **Maternal**		N/A	N/A	N/A	S	N/A	N/A	S	S	S	N/A	N/A	N/A	N/A				
g. Discuss prenatal influences on the pregnancy. **Maternal**		N/A	N/A	N/A	S	N/A	N/A	S	S	S	N/A	N/A	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	NA	S	S	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	S	S	S	N/A	N/A	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	NA	S	S	~~N/A~~ S	N/A	N/A	N/A				
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		N/A	N/A	N/A	S	N/A	S	S	S	S	N/A	N/A	N/A	N/A				
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	S	S	S	N/A	N/A	N/A	N/A				
		KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	EW	EW					

Comments:

Midterm – 1 h, J– These competencies should be able to be completed when you have your OB rotation. If this does not occur please seek out opportunities to complete these competencies. KA

Week 9 – 1i – You did a nice job describing ways you witnessed family bonding in the OB setting with your patient. KA

Week 10 – 1j- Thank you for sharing your thoughts on the services provided by the Boys and Girls Club. BS
You did a nice job expressing your opinion about the benefit of the Boys and Girls Club with your classmates in your CDG. KA

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

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	S	S	S	N/A	N/A	N/A	N/A				
b. Perform nursing measures safely using Standard precautions.		N/A	N/A	N/A	N/A	N/A	S	S	S	S	N/A	N/A	N/A	N/A				
c. Perform nursing care in an organized manner recognizing the need for assistance.		N/A	N/A	N/A	S	N/A	S	S	S	S	N/A	N/A	N/A	N/A				
d. Practice/observe safe medication administration.		N/A	N/A	N/A	N/A	N/A	S	S	S	S	N/A	N/A	N/A	N/A				
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	S	N/A	S	N/A	N/A	N/A	N/A				
f. Utilize information obtained from patients/families as a basis for decision-making.		N/A	N/A	N/A	N/A	N/A	S	S	S	S	N/A	N/A	N/A	N/A				
		KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	EW	EW					

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

Week 9 – 2d – You did a nice job following the rights of medication administration and appropriately documenting the medication administration in the MAR this week on clinical. KA

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

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	S	S	S	S	N/A	N/A	N/A				
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	S	S	S	N/A	N/A	N/A	N/A				
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		N/A	S	N/A	S	N/A	S	S	S	S	S	N/A	N/A	N/A				
d. Critique examples of legal or ethical issues observed in the clinical setting. **(List Below)***		N/A	S	N/A	S	N/A	S	S	S	S	S	N/A	N/A	N/A				
		KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	EW	EW					

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 boding 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. I agree this can be concern and depending on the length of time and extent of lack of care could be considered medical neglect. KA

WEEK 8- An issue I saw in the hospital was the mother that had a husband but also had a boyfriend and them deciding whose name should be on the birth certificate. By the time I left they still hadn't gotten it figured out. This is definitely a legal concern that can be seen often in the OB department. KA

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

Week 9: A legal issue I saw had to deal with a surrogacy case. The nurses were having a lot of trouble trying to figure out if the moms name should be on some papers or if it should be the newborns parents. I agree this was an interesting legal issue to witness. It could also fall under an ethical dilemma if the surrogate changed her mind and wanted to keep the baby instead of giving it to the parents. KA

Week 10: A legal issue I saw was a little kid that told her teacher that her mom leaves her home alone. This would raise an issue for the teacher and how to handle the situation. KA

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

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	S	S	S	N/A	N/A	N/A	N/A				
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	NA	S	S	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	NA	S	S	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	S	S	S	~~N/A~~ S	N/A	N/A	N/A				
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	S	S	S	N/A	N/A	N/A	N/A				
		KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	EW	EW					

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

Week 7 - 4a - You chose an appropriate nursing diagnosis for your patient and supported it with defining characteristics. You could have included the appearance of her throat as a defining characteristic since her inflamed throat was your related to. You also were able to list the top 5 nursing interventions for her diagnosis. KA

Midterm – 4 b, c – These competencies should be able to be completed when you have your OB rotation. If this does not occur please seek out opportunities to complete these competencies. KA

Week 8 – 4a – You satisfactorily completed your care plan. Please see comments on rubric for further details. KA

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

Week 9 – 4b – You did a nice job assessing the patient's surgical incision and documenting it in the EMR. KA
Week 9 – 4d – You did a nice job describing important teaching points for the patient and how you provided the education. KA

Week 10 – 4d- As you noticed at the Boys and Girls Club, children of different ages are motivated by different things, so it is important to provide teaching that is developmentally appropriate. BS
Thank you for describing the great activity you did with the students at the Boys and Girls Club in your CDG. It sounded very educational and appropriate for the different age groups. KA

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

Objective # 4a: Develop and implement a priority care plan utilizing the nursing process and clinical judgment. (1,2,6)*	**Students Name:** Tori Glaze **Date:** 10/13/21
****Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating**	**Nursing Diagnosis:** **Acute pain**
Nursing Diagnosis: (3 points total) Problem Statement (1) 1 Etiology (1) 1 Defining Characteristics (1) 1	Total Points 3 Comments: You did a great job choosing an appropriate nursing diagnosis and supporting it with accurate defining characteristics. KA
Goal and Outcome (6 points total) Goal Statement (1) 1 Outcome: Specific (1) 1 Measurable (1) 1 Attainable (1) 1 Realistic (1) 1 Time Frame (1) 1	Total Points 6 Comments: You did a great job writing a goal that supports your nursing diagnosis and SMART obj3ectives based on your defining characteristics. KA
Nursing Interventions: (8 points total) Prioritized (1) 1 What (1) 1 How Often (1) 1 When (1) 1 Individualized (1) 1 Realistic (1) 1 Rationale (1) 1 All pertinent interventions listed (1) 0	Total Points 7 Comments: You did a great job writing your nursing interventions and making them patient specific. Make sure all defining characteristics haver an assessment intervention that allows you to gather information for your evaluation. You have no assessment intervention for your facial grimacing. You could write your pain level intervention as a complete pain assessment to assess for facial grimacing or write a separate intervention. Just depends on your preference. KA
Evaluation: (5 points total) Date (1) 1 Goal Met/partially/unmet (1) 1 Defining characteristics (1) 1 Plan to continue/modify/terminate (1) 1 Signature (1) 1	Total Points 5 Comments: You did a nice job thoroughly evaluating your nursing care plan. KA
Total possible points = 22 18-22 = Satisfactory care plan 17-14 = Needs improvement care plan $\leq$ 13 = Unsatisfactory care plan	Total Points for entire care plan = 21/22 Comments: You satisfactorily completed your care plan. See comments above for areas for improvement. KA

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

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	S	S	S	N/A	N/A	N/A	N/A				
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	S	S	S	N/A	N/A	N/A	N/A				
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	S	S	S	N/A	N/A	N/A	N/A				
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	S	S	S	N/A	N/A	N/A	N/A				
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	S	S	S	N/A	N/A	N/A	N/A				
		KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	EW						

Comments:

Week 7 - 4g - You were able to discuss the medications provided to your patient and how they related to your patient's medical diagnosis. KA

Week 7 - 4h - You were able to discuss the appropriate interventions for your patient related to her diagnosis. KA

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

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	S	S	S	S	N/A	N/A	N/A				
b. Evaluate own participation in clinical activities.		N/A	S	N/A	S	~~S~~ NA	S	S	S	S	S	N/A	N/A	N/A				
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	S	S	S	S	N/A	N/A	N/A				
d. Communicate professionally and collaboratively with members of the healthcare team.		N/A	S	N/A	S	N/A	S	S	S	S	S	N/A	N/A	N/A				
e. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		N/A	N/A	N/A	N/A	N/A	S	S	S	S	N/A	N/A	N/A	N/A				
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	S	S	S	N/A	N/A	N/A	N/A				
g. Consistently and appropriately post comments in clinical discussion groups.		N/A	S	N/A	S	~~S~~ NA	S	S	N/A	~~N/A~~ S	S	N/A	N/A	N/A				
		KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	EW	EW					

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

Week 7 – 5a – You had multiple opportunities on your ER clinical. The nurse reported you showed interest and did a nice job utilizing your nursing skills. KA
Week 7 – 5g - You did a nice job responding to the CDG questions with thorough and thoughtful responses. You shared your unique clinical experience with your classmates. KA

Week 6 5A-You showed great enthusiasm on the OB unit at Fisher Titus! You participated in educational activities and were awesome with your patient! MD
Week 8 – 5g – You chose to complete your care plan this week versus your OB CDG questions. KA

Week 9 – 5a – You did a great job showing interest and enthusiasm while in OB. You sought out new learning experiences while on clinical. KA
9-23-21 – No ratings supplied. "Interesting day we had!" Jackie Lerch RN
Week 9 – 5e – You did a great job documenting both your mother's assessment in the EMR this week with minimal guidance. KA
Week 9 – 5g – Tori, you did a great job responding to the CDG questions this week. You were thorough and thoughtful with your responses. Please remember to include a page number in your in-text citation when using a direct quote. KA

Week 10 – 5a- You were engaged and actively participated in your team's activity at the Boys and Girls Club. BS
Week 10 – 5g – Tori, you did a nice job completing your CDG question on your Boys and Girls experience. You did a good job describing your activity and interaction with the children. Great job! KA

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

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	S	S	S	S	N/A	N/A	N/A				
b. Accept responsibility for decisions and actions.		N/A	S	N/A	S	N/A	S	S	S	S	S	N/A	N/A	N/A				
c. Demonstrate evidence of growth and self-confidence.		N/A	S	N/A	S	N/A	S	S	S	S	S	N/A	N/A	N/A				
d. Demonstrate evidence of research in being prepared for clinical.		N/A	S	N/A	S	N/A	S	S	S	S	S	N/A	N/A	N/A				
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		N/A	S	N/A	S	N/A	S	S	S	S	~~S~~ ~~U~~	S	N/A	N/A				
f. Describe initiatives in seeking out new learning experiences.		N/A	S	N/A	S	N/A	S	S	S	S	S	N/A	N/A	N/A				
g. Demonstrate ability to organize time effectively.		N/A	S	N/A	S	N/A	S	S	S	S	S	N/A	N/A	N/A				
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	S	S	S	S	N/A	N/A	N/A				
i. Demonstrates growth in clinical judgment.		N/A	S	N/A	S	N/A	S	S	S	S	S	N/A	N/A	N/A				
		KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	EW	EW					

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 confortable and now how to reassure her. Being reassuring in stressful situations take practice, but I know you will be good at it with practice. KA

Midterm – Tori, you are doing great this semester in clinical. Please seek out opportunities to meet any competencies that are rated NA at midterm. Keep up the hard work going into the second half of the semester. You are going to be a great nurse. KA

Something I think I can improve on is hearing the baby's heartbeat. It was very hard to hear with the baby crying. To improve on this for next clinical I will make sure to practice this more. Wonderful! We will find a newborn for you to count their heart on and document it. KA

Week 6 6E-You brought all of the required equipment with you and were very professional during this clinical. Keep up the good work! MD

WEEK 9: Something I could improve on is educating the moms. I think I did an okay job but it was my first time educating the patient and I think I could have went more in depth with her so she would have a better understanding. To improve on this I will write my major points down and rehearse what I want to stay before I go in. Having a little script of teaching points, you can go through with all moms such as reinforcing peri care or breast care would be an excellent idea. I have standard teaching points I focus on when I am OB that helps remind me to teach all mothers certain information. Nice job! KA

WEEK 10: Something I could improve on is learning how to control the little kids more. I found it was difficult to get and keep there attention. To improve on this I talked to one of the teachers and she gave me tips that work for her. What a great way to set a goal and achieve on the same day. KA

Week 10 – 6e – Your Simulation and Boys and Girls Surveys were not completed by Friday at 0800. Please make sure to write how you will prevent a U in the competency in the future. KA

WEEK 10: My simulation surveys are now complete. In the future to prevent this from happening again I will make sure that I have good wifi and that they are submitted like I had thought they were. I will make sure to add small things like this to my to do list to prevent forgetting things in the future.

***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,	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: 8/24	**Date: 8/25**	**Date: 8/25**	**Date: 8/ 25**	**Date: 8/25**	**Date: 8/25**	**Date: 8/25**	**Date: 8/26**	**Date: 8/26**	**Date: 8/26**	**Date: 8/ 26**	**Date: 8/26**	**Date: 8/26**	**Date: 8/26**	**Date: 8/26**
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: 8/26	**Date: 8/26**	**Date: 8/26**	**Date: 8/26**	**Date: 8/26**	**Date: 8/26**	**Date: 8/26**	**Date: 8/26**	**Date: 8/ 27**
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: 10/7**	**Date: 10/18**	**Date: 10/11**	**Date: 9/28**	**Date: 10/28**	**Date: 11/8**	**Date: 11/**	**Date: 11/22**	**Date: 11/29**	**Date: 12/1**
Evaluation	S	S	S	S	S	S	S	S	S				
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	EW				
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	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 COMPONENTS NOTICING:	OBSERVATION NOTES
• Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B	1st half: information seeking regarding current situation and prenatal care; Recognized s/s of preterm labor and focused observation on how pt. felt 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. After giving meds, sought information from the HCP.
INTERPRETING:	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

• Prioritizing Data: • Making Sense of Data:	E E	A A	D D	B B	well as THC in urine. 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. Interpreted after giving medications the HCP needed to be notified.
RESPONDING: • Calm, Confident Manner: • Clear Communication: • Well-Planned Intervention/ Flexibility: • Being Skillful:	 E E E E	 A A A A	 D D D D	 B B B B	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. 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. Intervened after meds by calling HCP. Incomplete SBAR as information the HCP needed was not done yet such as vital signs and fundal assessment.
REFLECTING: • Evaluation/Self-Analysis: • Commitment to Improvement:	 E E	 A A	 D D	 B B	Worked together t/o the scenario to ensure medications were correct as well as made suggestions for assessment and patient care.

SUMMARY COMMENTS:	
All areas must be evaluated as developing or higher to be satisfactory for the simulation.	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

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
COMPONENTS NOTICING: (1, 2, 5)*					At the end of the simulation you were able to notice various fetal heart rate patterns.
• Focused Observation:	E	A	D	B	
• Recognizing Deviations from Expected Patterns:	E	A	D	B	You were able to notice fetal heart rate patterns that were deviations that could potentially be harmful to the fetus.
• Information Seeking:	E	A	D	B	You were able to notice reasons for use of internal fetal monitoring, forceps, and vacuum assisted delivery.
INTERPRETING: (2, 4)*					Based on the fetal heart rate patterns you were able to interpret the appropriate treatment measures to correct the deviations.
• Prioritizing Data:	E	A	D	B	
• Making Sense of Data:	E	A	D	B	Through class discussion you were able to interpret any additional steps your group may have missed and the appropriate order to

	perform all actions.
RESPONDING: (1, 2, 3, 5)* • 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	Able to prioritize care of patient using information from EFM. Able to identify different categories for heart rate patterns. Identified accelerations, late decelerations, variable decelerations, and early decelerations. Performed vaginal exam using sterile technique. Demonstrated ability to apply internal fetal monitor to fetus.
REFLECTING: (6)* • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Reflection of the simulation shows retention and identification of materials and areas that need additional practice. Reflected on putting all areas of simulation together through a case study.
SUMMARY COMMENTS: **E= Exemplary** **A= Accomplished** **D= Developing** **B= Beginning** **Developing or higher is required for satisfactory completion of this simulation.**	**Comments** **You are satisfactory for this simulation. KA** 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.

Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO: Empathy Belly

STUDENT NAME: OBSERVATION DATE/TIME:

REFLECTING: (6)* • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	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. Great job. I enjoyed seeing your pregnancy photo!
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.**	**Comments** **You are satisfactory for this simulation.**

*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: Group 5 OBSERVATION DATE/TIME: 10/7/2021 SCENARIO #: Shoulder Dystocia

CLINICAL JUDGMENT	**OBSERVATION NOTES**
COMPONENTS NOTICING: (1, 2, 5)* • Focused Observation: E **A** D B • Recognizing Deviations from Expected Patterns: E **A** D B • Information Seeking: **E** A D B	Team introduce members to patient. Asks about pain and if patient requests medication. VS obtained. Pain rated 8/10. Mona begins to complain of pain and pressure. Continues to assess mom post-delivery. 5-minute APGAR performed.

INTERPRETING: (2, 4)* • Prioritizing Data: E **A** D B • Making Sense of Data: E **A** D B	Cervix interpreted to be 5 cm dilated and 90% effaced. Baby begins to crown and stops- recognized as shoulder dystocia. Recognizes the need to maintain heat. 1 minute APGAR interpreted as 9.
RESPONDING: (1, 2, 3, 5)* • 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	Nubain prepared, patient identified, medication administered. (Make sure to use z-track method and to aspirate.) Cervix assessed 5cm/90%. Call to provider (good SBAR but why are you calling?) Call to provider to report crowning. Call for help, McRoberts, suprapubic pressure, turns to hands and needs, assess for episiotomy, rotational maneuvers, posterior arm. Baby is delivered, immediately begins drying, cord clamped, and baby moved to warmer. Suctioning, APGAR. Baby swaddled and returned to mom. Breastfeeding initiated. Placenta delivered. Continues to monitor lochia. Good education provided to mom. Med nurse explains purpose of erythromycin and vitamin K. Medications prepared and administered. Call to provider with report of birth. 5-minute APGAR score obtained.
REFLECTING: (6)* • Evaluation/Self-Analysis: E **A** D B • Commitment to Improvement: **E** A D B	Team discussion about the scenario. Review of the risk factors for shoulder dystocia and the associated interventions for if it occurs. Discussed aspects of the case that went well, and what members felt they would do differently in the future. The team also discussed ways in which newborns lose heat and interventions to take to maintain thermoregulation.
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.**	**You are satisfactory for this scenario. Nice job! BS**

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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: MCN OBSERVATION DATE/TIME: 10/11/2021 SCENARIO: Escape Room

CLINICAL JUDGMENT					OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)*					Noticed patient safety issues throughout the room. These included sharps container on bed, patient hanging off the bed, bed not locked, armband not on patient, urine specimen left and not labeled, syringe, battery in the patient's mouth, and side rails not up. Noticed the assessment findings in the patient assessment supporting the need for a breathing treatment. Noticed math problems in the box and recognized the need to solve. Noticed some boxes needed a code and one needed a key.
• Focused Observation:	E	A	D	B	
• Recognizing Deviations from Expected Patterns:	E	A	D	B	
• Information Seeking:	E	A	D	B	
INTERPRETING: (2, 4)*					Interpreted the risk in the safety issues for the patient and recognized the need to be fixed. Interpreted the need to work as a group to solve problems and find clues. Interpreted the need to complete the dosage calculation to administer the correct amount of IV fluids. Interpreted the need to administer meds and the need to call HCP to administer the correct doses.
• Prioritizing Data:	E	A	D	B	
• Making Sense of Data:	E	A	D	B	
RESPONDING: (1, 2, 3, 5)*					Responded to safety issues by correcting each of them to provide a safe environment for the patient's care. Responded to instructor cues regarding environment and problem solving. Responded to HCP orders and picked the correct dosage of medication for the patient. Flexible with plan of care and looking for clues as well as communicating with one another effectively. Responded to the patient's respiratory distress by providing the patient with the ordered breathing treatment. Responded to the healthcare providers order and programed the IV to the correct rate and administered the prescribed IV fluids.
• 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)*					Worked together with communication and idea sharing. Collaborated and provided suggestions to one another to make sense of riddles, math formulas, medications, and treatments.
• Evaluation/Self-Analysis:	E	A	D	B	
• Commitment to Improvement:	E	A	D	B	

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.**	You are successful in this simulation as you were able to provide a safe environment for the patient. You were also able to work together as a team to solve the math formulas and give appropriate dosages of medications. Good job! EW

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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: Group 5 OBSERVATION DATE/TIME: 10/28/2021 SCENARIO #: Pediatric Respiratory

CLINICAL JUDGMENT	OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)* • Focused Observation: E **A** D B • Recognizing Deviations from Expected Patterns: E **A** D B • Information Seeking: E **A** D B	Team introduces self and identifies items in bed. Assessment, VS, temp. 101.5. Lung sounds. Team enters and begins assessment. Patient coughing, CO not feeling well. VS. Patient reassessed following breathing treatment.
INTERPRETING: (2, 4)* • Prioritizing Data: E **A** D B • Making Sense of Data: E **A** D B	Items in bed interpreted to be safety hazards. Temp. 101.5 interpreted to be in need of medication. LS determined to be stridor. Substernal retractions noted.
RESPONDING: (1, 2, 3, 5)* • 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	Medication nurse enters. Identifies herself, checks allergies. Amoxicillin 250 mg, cetirizine, 1 ml, ibuprofen 5.3 ml (remember to check recommended doses) prepared and administered. Patient propped on pillows after CO being short of breath. O2 applied via cannula, 2L. Call to provider to give update, requests breathing treatment. Dexamethasone ordered, read back. Call to RT for breathing treatment. ! nurse staying with the patient- good idea.

	Medications prepared, acetaminophen 3.8 ml, dexamethasone prepared and administered.
REFLECTING: (6)* • Evaluation/Self-Analysis: **E** A D B • Commitment to Improvement: **E** A D B	Team discussion about checking ordered dosages against recommended dosages, and that it is ok to question an order that you feel may ne incorrect. Team discussed the objectives of the scenario; basing assessment practices based on individual needs, the importance of administering medications while observing the rights of medication administration, implementing interventions based on assessment findings, and utilizing the concepts of growth and development to provide therapeutic communication with toddlers and family members.
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.**	**You are satisfactory for this scenario. Good job! BS**

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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: _____