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**EVALUATION OF CLINICAL PERFORMANCE TOOL  
Nursing Foundations – 2021**

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

**Student:**

**Final Grade: Satisfactory/Unsatisfactory**

**Semester: Fall**

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

**ABSENCE (Refer to Attendance Policy)**

Date	Number of Hours	Comments	Make Up (Date/Time)
11/9/2021	1H	Had to reschedule Sim #1	11/9/2021 (0915-1015) 1H
<b>Faculty's Name</b>			<b>Initials</b>
Chandra Barnes			CB
Frances Brennan			FB
Devon Cutnaw			DC
Lora Malfara			LM
Nicholas Simonovich			NS
Amy Rockwell			AR

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## **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.**

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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
<b>Competencies:</b>										S	NA		S	NA				
a. Identify spiritual needs of patient (Noticing).										S	NA		S	NA				
b. Identify cultural factors that influence healthcare (Noticing).										S	NA		S	NA				
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).			NA	NA	s	NA	S	S		S	NA		S	NA				
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).			NA	NA	s	NA	S	S		S	NA		S	NA				
	DC	NS	NS	NS	DC	NS	DC	DC		CB	AR		AR					
		Meditech Orientation	No Clinical	No Clinical	4N 73	No Clinical	3T 68			3T 93	NA		3T 68	NA				

Clinical Location:  
Patient age

**Comments**

**Week 5 1(c,d): You properly utilized Maslow to determine the needs of the patient for this specific clinical. DC**

**Week 9 1(c,d): You appropriately coordinated care depending on your patient's needs and Maslow's. CB**

**Week 12- You provided excellent care to both your patients this week, including "spreading things out" for your patient on day one due to his irritability. Great job! AR**

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\* End-of-Program Student Learning Outcomes

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

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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
<b>Competencies:</b>						NA	S	S		S	NA		S	NA				
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						NA	S	S		S	NA		S	NA				
b. Use correct technique for vital sign measurement (Responding).			NA	NA	s	NA	S	S		S	NA		S	NA				
c. Conduct a fall assessment and institute appropriate precautions (Responding).						NA	S	S		S	NA		S	NA				
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).										S	NA		S	NA				
e. Collect the nutritional data of assigned patient (Noticing).										S	NA		S	NA				
f. Demonstrates appropriate insertion, maintenance, and removal of NG tube (Responding).										NA	NA		NA	NA				
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).										S	NA		S	NA				
	DC	NS	NS	NS	DC	NS	DC	DC		CB	AR		AR					

**Comments**

**Week 9 2(c): You completed a fall assessment and ensured the appropriate precautions were in place for your patient. CB**

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Week 12 (2a,b,c,d)- You did a great job with all aspects of assessment on both your patients this week. The patient you had on day one was irritable and wanted to be left alone, therefore you "spread" the assessment and care out so you only did a small amount at a time. This ended up taking you longer than anticipated to complete however it was the best thing you could do with that patient at that time. You noticed that the BP cuff would not reach the patient while sitting in the chair and responded by obtaining a manual cuff so as not to delay getting a BP on the patient. Great job! (2g)- Satisfactory discussion related to diagnostic findings while on clinical and through your CDG posting. You will become more comfortable with this as you progress through the program. AR

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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
<b>Competencies:</b>						NA	S	S		S	NA		S	NA				
a. Receive report at beginning of shift from assigned nurse (Noticing).						NA	S	S		S	NA		S	NA				
b. Hand off (report) pertinent, current information to the next provider of care (Responding).			NA	NA	NA	NA	S	S		S	NA		S	NA				
c. Use appropriate medical terminology in verbal and written communication (Responding).			NA	NA	s	NA	S	S		S	NA		S	NA				
d. Report promptly and accurately any change in the status of the patient (Responding).			NA	NA	s	NA	S	S		S	NA		S	NA				
e. Communicate effectively with patients and families (Responding).			NA	NA	s	NA	S	S		S	NA		S	NA				
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).			NA	NA	s	NA	S	S		S	NA		S	NA				
	DC	NS	NS	NS	DC	NS	DC	DC		CB	AR		AR					

**Comments**

Week 5 3 (c,e,f) – You communicated well with your patient and discussed your vital signs appropriately with your clinical instructor. DC

Week 9 3 (d,e): You reported accurate and appropriate information to the nurse, and also communicated with other disciplinary teams on your patient's NPO status. CB

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Week 12 (3e)- Although your patient on day one was irritable and didn't want all care to be done you did a great job communicating with him. (3f)- You readily assist others with patient care and answering call lights. Keep up the great work! AR

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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
<b>Competencies:</b>			NA	NA	S	NA	S	S		S	NA		S	NA				
a. Document vital signs and head to toe assessment according to policy (Responding).										S	NA		S	NA				
b. Document the patient response to nursing care provided (Responding).										S	NA		S	NA				
c. Access medical information of assigned patient in Electronic Medical Record (Responding).			NA	NA	S	NA	S	S		S	NA		S	NA				
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S	NA	NA	NA	NA	NA	S		S	NA		S	NA				
e. Provide basic patient education with accurate electronic documentation (Responding).										S	NA		S	NA				
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).					S		S	S		U	U	U	S U	NA				
*Week 2 – Meditech Expense	DC	NS	NS	NS	DC	NS	DC	DC		CB	AR	AR	AR					

**Comments**

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

Week 5 4(a,c,d) – Great job documenting vital signs for the first time as a nursing student in Meditech! Your documentation was accurate and portrayed the correct time. DC

4f I will ensure that I will follow the guidelines for posting comments on the discussion group. I will ensure I have the correct word count and use apa reference in my comments. I will have my rubric with me when posting to make sure I am clear of the posting guidelines.

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**Week 9 4(f): You received an U for your clinical discussion group because you did not have an in-text citation and reference for your peer response, and you did not meet the minimum work count of 100 words. Please have a copy of the clinical discussion grade rubric with you while completing your CDG and peer responses. CB**

Week 10 (4f)- Please refer to page 2 of this tool for instructions on how to address your unsatisfactory evaluation and do so for Week 11. Failure to correctly address the unsatisfactory will result in continued "U" evaluations. Please reach out to me for assistance if needed. AR

Week 11 (4f)- You have received another unsatisfactory for this competency due not addressing the previous "U" evaluations. Refer to page 2 of this tool for instructions on how to address your unsatisfactory evaluation and do so for Week 12. Failure to correctly address the unsatisfactory will result in continued "U" evaluations and being assigned to write a 5-page paper. Please reach out to me for assistance if needed. AR

Week 12 (4f)- While your CDG posting and Care Map were satisfactory this week you did not address the "U" evaluation you have received for the last several weeks. Refer to page 2 of this tool for instructions on how to address your unsatisfactory evaluation and do so for Week 13. This must be done on this page of the tool as it relates to (4f). Due to repeated unsatisfactory evaluations you will have to write a paper as outlined in the course syllabus. See Edvance email for details. AR

4f.. week 9 U..... I will ensure that I have my discussion guidelines next to me to respond to peer responses. I will double check I have the correct word count and in-text references with my responses. I will recheck my work before posting my reply to peers.

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<b>Objective</b>																		
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
<b>Competencies:</b>			NA	NA	S	NA	S	S		S	NA		S	NA				
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).			NA	NA	S	NA	S	S		S	NA		S	NA				
b. Apply the principles of asepsis and standard/infection control precautions (Responding).			NA	NA	S	NA	S	S		S	NA		S	NA				
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).										NA	NA		NA	NA				
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).			NA	NA	S	NA	S	S		S	NA		S	NA				
e. Organize time providing patient care efficiently and safely (Responding).			NA	NA	S	NA	S	S		S	NA		S	NA				
f. Manages hygiene needs of assigned patient (Responding).										S	NA		S	NA				
g. Demonstrate appropriate skill with wound care (Responding).											NA		NA	NA				
<b>h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).</b>						NA	S	S										
	DC	NS	NS	NS	DC	NS	DC	DC		CB	AR		AR					

Fire extinguisher found by stairwell exit 1 near room 3027

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#### Comments

Week 5 5(a,b,d,e) - You correctly obtained the patient's vital signs utilizing proper safety practices as outlined in class and in lab. You were efficient with obtaining VS and communicating with the patient. DC

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

Week 9 5(e,f): You had great time management, and also ensured that your patient's hygiene needs were met (bathing, denture care, etc). CB

Week 12 (5d,e)- Due to the irritable patient you had on day one this week you had difficulties with time management and organization. You discussed this with faculty and planned for improvement which you did demonstrate with your patient on day two. These skills will become easier as you progress through the program. Keep up the great work! AR

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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
<b>Competencies:</b> a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding). <b>*See Care Map Rubric at end of tool</b>													S					
	DC	NS	NS	NS	DC	NS	DC	DC					AR					

**Comments**

Week 12 (6a)- Satisfactory Care Map. See Care Map rubric at the end of this tool. Great job! AR

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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
<b>Competencies:</b>													S	NA				
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).													S	NA				
b. Recognize patient drug allergies (Interpreting).													S	NA				
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).													NA	NA				
d. Administer oral, intramuscular, subcutaneous, and intradermal medications using correct techniques (Responding).													NA	NA				
e. Review the patient record for time of last dose before giving prn medication (Interpreting).													NA	NA				
f. Assess the patient response to prn medications (Responding).													NA	NA				
g. Document medication administration appropriately (Responding).												S	NA	NA				
*Week 11: BMV	DC	NS	NS	NS	DC	NS	DC	DC				AR	AR					

**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

Week 12 (7a,b)- Satisfactory with reviewing and researching your patients' medications and discussing with faculty while on clinical and via CDG posting. Great job! AR

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## Objective

1. 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
<b>Competencies:</b>			NA	NA	s	NA	S	S		S	NA		S	NA				
a. Reflect on areas of strength** (Reflecting)								S		S	NA		S	NA				
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)			NA	NA	s	NA	S	S		S	NA		S	NA				
c. Incorporate instructor feedback for improvement and growth (Reflecting).			NA	NA	s	NA	S	S		S	NA		S	NA				
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).			NA	NA	s	NA	S	S		S	NA		S	NA				
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	NA		S	NA				
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).			NA	NA	s	NA	S	S		S	NA U	U	S U	NA				
g. Comply with patient's Bill of Rights (Responding).			NA	NA	s	NA	S	S		S	NA		S	NA				
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).			NA	NA	s	NA	S	S		S	NA		S	NA				
i. Actively engage in self-reflection. (Reflecting)			NA	NA	s	NA	S	S		S	NA		S	NA				
*	DC	NS	NS	NS	DC	NS	DC	DC	DC	CB	AR	AR	AR					

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

\*\* 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.

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Week 7 Strength- I was able to communicate with the patient well. I obtained all the vitals and he seemed comfortable sharing information with me. I performed a focused assessment on his abdomen and observed hyperactive bowel sounds. I still feel uncomfortable working in a hospital setting. I recognize that I did a focused assessment but realize I did skip other aspects of a head to toe assessment. To improve on this I will practice the routine of head to toes on my family to get more comfortable.

Week 5 Strength- I was comfortable talking to the patient and discovered she had a difficult time sleeping due to being cold. I was able to meet her needs and get her a warm blanket. I forgot to get the manual pulse rate. To improve on this I will make myself cheat sheets to keep with me. **You did very well helping to assist with the patient's needs. Good plan (cheat sheets always helped me until I could increase my memory). DC**

**Week 9- You did a great job on your head to toe assessment and realizing that your patient was prone to pressure injuries. Great plan to practice listening to heart sounds on individuals that may have an issue with their breathing. CB**

Week 10 (8f)- You have received a "U" due to submitting the incorrect version of the tool for Week 10. Refer to page 2 of this tool for how to properly address a "U"; failure to do so will result in continued unsatisfactory evaluations. Please reach out to me for assistance if needed. AR

Week 10 I will ensure that I see the previous weeks instructors initials and double check that I have the correct tool for that week. Before submitting my tool for the week, I will recheck that I have the proper tool. **For your Week 12 tool you added this statement which would address the U from Week 10. AR**

Week 11 (8f)- You have received another "U" due to not addressing the previous "U" as outlined in Week 10 comments above. You will need to address the "U" evaluations in your Week 12 tool or you will continue to receive them and be assigned to write a 5-page paper. AR

Week 12 I was able to identify medical hx diagnosis and relate them to current visit treatment such as pneumonia and Gaseous Intestinal distention. My assessment proved challenging since pt was agitated with the task that I had to perform. Instead of completing an assessment all at once I had to give breaks and felt very scattered with my care. I recognize that I need to try to be more assertive and educated the patient on why I need to perform certain task and why they need to be done in a timely manner.

**What is your plan to improve your assertiveness? AR** To improve my assertiveness I will explain to the patient at the beginning of my assessment what needs to be done and why. I could explain to the patient that first I need to do vitals, then I will chart to give him a break and then skin assessment. I will be firm while allowing patients right.

Week 12 (8f)- While you addressed the U you received for Week 10 you didn't address the U from Week 11 (you received this due to not addressing the previous U). Due to this and the fact that your tool was submitted past the due date and time you are receiving another unsatisfactory evaluation. **You will need to address this unsatisfactory evaluation for your Week 13 tool and it must be done on this page. Due to repeated unsatisfactory evaluations you will have to write a paper as outlined in the course syllabus. See Edvance email for details. AR**

\*8fWeek 11 U I did not address my previous weeks unsatisfactory. To ensure that I don't repeat this pattern I will set an alarm to make sure I am completing my clinical tool on a timely manner. I will allow time devoted at home that I am completing my assignments on time.

Week 12 I will get a dry erase board at home that I can create a checklist of homework and check off what I have completed.

End-of-Program Student Learning Outcomes

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

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

Student Name: Mignon Koth

<b>Skills Lab Competency Evaluation</b>	<b>Lab Skills</b>										
	<b>Week 1 (4)*</b>	<b>Week 2 (2,3,5,8)*</b>	<b>Week 3 (2,3,4,5,8)*</b>	<b>Week 4 (2,3,4,5,8)*</b>	<b>Week 5 (2,3,4,5,8)*</b>	<b>Week 6 (1,2,3,4,5,8)*</b>	<b>Week 7 (2,3,4,5,8)*</b>	<b>Week 8 (2,3,4,5,8)*</b>	<b>Week 9 (2,3,4,5,8)*</b>	<b>Week 10 (2,3,4,5,6,8)*</b>	<b>Week 11 (1,2,3,4,5,6,7,8)*</b>
	<b>Date: 8/23/2021</b>	<b>Date: 9/2/2021</b>	<b>Date: 9/9/2021</b>	<b>Date: 9/16/2021</b>	<b>Date: 9/23/2021</b>	<b>Date: 9/29/21</b>	<b>Date: 10/7/2021</b>	<b>Date: 10/14/2021</b>	<b>Date: 10/21/2021</b>	<b>Date: 10/28/2021</b>	<b>Date: 11/4/2021</b>
Performance Codes: S: Satisfactory U:Unsatisfactory											
Evaluation:	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>
Faculty Initials	LM	LM	LM	AR	LM	NS	AR	NS	NS	AR	LM
<b>Remediation: Date/Evaluation/Initials</b>	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
<b>Remediation: Date/Evaluation/Initials</b>	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.

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- 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):**

Mignon, 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 three out of three blood pressure results on the Vital Sim manikin. Three measurements were obtained because you were not feeling confident with your responses but all were accurately identified. You were able to verbally discuss the following measurements: axillary and rectal temperature along with orthostatic blood pressure. One prompt was needed to provide privacy for the patient by closing the curtain. Your Meditech documentation related to vital signs was accurate. Keep up the great work!! LM

### **Week 4 (Assessment):**

Satisfactory with head-to-toe assessment guided practice, hand-off report activity, vital sign measurement, and Micromedex/Intranet navigation activity. You will be observed 1:1 for Head-to-Toe Assessment competency during Week 5. AR

### **Week 5 (Assessment; Mobility):**

Mignon, 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 2 prompts related to inspecting facial symmetry- smile and eye brow lift and assessing capillary refill on lower extremities. 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: With this being the first time that you fully documented these interventions, there are some minor areas for improvement. Overall you did a great job! Please take some time to pull your documentation back up and review the following details for improvement.

- 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- HEENT- should have documented "no" for artificial eyes rather than "yes"; Cardiovascular- at this point in the curriculum you cannot document if patient is monitored or the EKG method/heart rhythm.

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! NS

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

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! AR

**Week 8 (Foley Skills: Insertion, Removal; Sterile Gloves; Documentation Lab):** Mignon, you did a great job in the lab this week and were satisfactory with the following skills: Application of Sterile Gloves, Foley Catheter Insertion (female), and Foley Catheter Removal. Only one prompt was needed as a reminder to label the drainage bag with the orange sticker! You maintained the sterile field throughout the Foley insertion, did not contaminate the catheter or your gloves at any point, had very good communication, and were thorough throughout the observation. Great job! You correctly verbalized the differences in catheter insertion for a male patient. You independently completed Meditech documentation for Urinary Catheter Management and I & O. Keep up the great work!!! NS

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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):** 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 using aseptic technique. Clinical scenario questions were presented to the group with active participation from all students. Great job this week! NS/LM

**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! AR

**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

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**Week 10 or 12:**

Firelands Regional Medical Center School of Nursing  
Care Map Grading Rubric

Course Objective: 6a		Student Name: Mignon Koth			
		Date: 11/11/2021			
Top Nursing Priority: Impaired Gas Exchange					
		3 Points >75% Complete	2 Points 50-75% Complete	1 Point <50% Complete	Comments
Noticing	Identify all abnormal assessment findings	3			Great job with this entire section
	Identify all abnormal lab finds/diagnostic tests	3			
	Identify all risk factors	3			
	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	3			
	Highlight potential complications relevant to top nursing priority	3			Combined this area with the signs/symptoms below. You will become more comfortable with these next semester.
	Identify signs and symptoms to monitor for each complication	3			See box above.
Responding	List all nursing interventions relevant to top nursing priority	3			
	Interventions are prioritized	3			
	All interventions include a frequency	3			All but one intervention included a frequency. Great job.
	All interventions are individualized and realistic	3			
	An appropriate rationale is included for each intervention	3			
Refle	List the reassessment findings for the top nursing priority		2		Other relevant reassessment findings would be: status of dyspnea, respiratory rate, status of cough.

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cting	Reflection includes one of the following statements: <ul style="list-style-type: none"> <li>• Continue plan of care</li> <li>• Modify plan of care</li> <li>• Terminate plan of care</li> </ul>			0	This was not indicated on the care map.
48-33 points = Satisfactory 32-17 points = Needs Improvement ≤ 16 points = Unsatisfactory		Total Points Earned: 44 Comments: Satisfactory. Great job!! Faculty Initials: AR			

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

<u>Simulation Evaluation</u>	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
Performance Codes:  <b>S:</b> Satisfactory  <b>U:</b> Unsatisfactory		
	<b>Date:</b> <b>11/9/2021</b>	<b>Date:</b>
Evaluation (See Simulation Rubric)	<b>S</b>	
Faculty Initials	<b>AR</b>	
<b>Remediation:</b> <b>Date/Evaluation/Initials</b>	<b>NA</b>	

\* 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. I was able to observe right away that the oxygen needed to be placed on pt. and possible skin integrity issues. Great job! AR**
- B. While only observing, I didn't think about coughing exercises to help improve pt breathing. I will review deep coughing needs and therapy in skyscape before the next simulation. This is a good plan for improvement and preparation for Simulation #2. AR**

Faculty/TA comments: See simulation rubric at the end of this tool. AR

Simulation #2:

I felt more comfortable this clinical than previous. My patient's age is one that I am more used to. I remembered all of my head to toe steps and identified potential pressure sore areas on my patient. I had difficulty hearing any heart sounds on my patient and got my instructor to help identify ( she said they were very muffled). I recognize I need practice understanding how to hear heart sounds over heavy lung sounds. I will research on my own time and practice doing this on others.

A.

B.

Faculty/TA comments:

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## Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **Mignon Koth** (O)  
**Dorresha Green** (A)  
**Jill Guseman** (O)  
**Natalie Comer** (M)

OBSERVATION DATE/TIME: **11/9/2021**  
**0915-1015**

SCENARIO #: **NF #1**

CLINICAL JUDGMENT					OBSERVATION NOTES
<p><b>COMPONENTS NOTICING: (2,4,6,7)*</b></p> <ul style="list-style-type: none"> <li>• Focused Observation:           E       A       <b>D</b>       B</li> <li>• Recognizing Deviations from   Expected Patterns:           E       <b>A</b>       D       B</li> <li>• Information Seeking:       E       A       <b>D</b>       B</li> </ul>					<p>Identified self and role. Focused observation on patient safety by identifying patient name and date of birth. Noticed patient high fall risk. Noticed Spo2 at 92% on initial assessment.</p> <p>Noticed patient cough and shortness of breath. Focused observation on mucous found with tissue. Noticed crackles upon auscultation.</p> <p>Didn't notice Spo2 decrease to 90% initially. Returned to the monitor to notice decreased Spo2.</p> <p>Noticed redness to heels.</p> <p>Med nurse ID'd self and role as student nurse to administer meds. Remember to seek information related to medication administration.</p> <p>Good job asking how patient takes meds for safety. Remember to assess for allergies.</p> <p>Observers: Excellent attention to detail. Great points discussed in debriefing. Noted areas of strength and areas for improvement. Focused on priority care and decision making. Constructive feedback provided.</p> <p>Great collaboration from all involved.</p>
<p><b>INTERPRETING: (2,4,6,7)*</b></p> <ul style="list-style-type: none"> <li>• Prioritizing Data:           E       A       <b>D</b>       B</li> <li>• Making Sense of Data:       E       A       <b>D</b>       B</li> </ul>					<p>Prioritized vital sign assessment first. Prioritized safety by implementing fall precautions.</p> <p>Interpreted cough/SOB appropriately.</p> <p>Didn't interpret need for O2 with Spo2 at 92% (Dr. orders to keep above 93%) initially. Made sense of crackles on auscultation related to pneumonia.</p> <p>Didn't prioritize supplemental O2 for decreased Spo2. Returned to place O2 at 2L.</p> <p>Prioritized skin care for red heels.</p> <p>Did not make sense of rationale behind medications initially. Utilized resources to further research.</p>

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<p><b>RESPONDING: (1,2,3,4,5,6,7)*</b></p> <ul style="list-style-type: none"> <li>• Calm, Confident Manner:     E     A     D     B</li> <li>• Clear Communication:        E     A     D     B</li> <li>• Well-Planned Intervention/ Flexibility:                    E     A     D     B</li> <li>• Being Skillful:                E     A     D</li> <li style="padding-left: 20px;">B</li> </ul>	<p>Communicated care well with patient to keep her informed. Communicated vital sign findings.</p> <p>Good body mechanics by raising the bed.</p> <p>Communicated vital signs with the medication nurse.</p> <p>Elevated the head of the bed in response to cough/SOB. Asked patient about production of sputum and cough characteristics.</p> <p>Good use of hand hygiene when appropriate.</p> <p>Educated patient on risk for skin breakdown related to immobility.</p> <p>Elevated heels with pillows due to skin breakdown.</p> <p>Very calm, confident approach with the patient during assessment.</p> <p>Med nurse needs to be more confident. Be prepared with medication education prior to entering the room. Educated patient on medications after research, good communication. Good medication safety. Six rights and three checks performed.</p> <p>Implemented fall precautions to promote safety. Educated patient on precautions.</p> <p>Good teamwork and collaboration when unsure with medications.</p> <p>What other education would you have provided? Discussed in debriefing.</p>
<p><b>REFLECTING: (2,3,4,5,6,7,8)*</b></p> <ul style="list-style-type: none"> <li>• Evaluation/Self-Analysis:    E     A     D     B</li> <li>• Commitment to Improvement: E     A     D     B</li> </ul>	<p>Participated well in debriefing. Each member of the team reflected on the experience and asked appropriate questions. Members of the team noticed areas for improvement and discussed ways to make improvements in the future. Observers provided good insight on safe medication administration and observations made during this skill. Discussed communication between team members and the patient. Identified educational opportunities that were presented in the scenario.</p>

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<p><b>SUMMARY COMMENTS: * = Course Objectives</b></p> <p><b>Satisfactory completion of the simulation scenario is a score of “Beginning” or higher in all areas of the rubric.</b></p> <p><b>E= Exemplary</b></p> <p><b>A= Accomplished</b></p> <p><b>D= Developing</b></p> <p><b>B= Beginning</b></p> <p><b>A = Assessment Nurse</b></p> <p><b>M = Medication Nurse</b></p> <p><b>O = Observer Role</b></p> <p><b>Satisfactory evaluation for the group related to simulation scenario #1. Objectives were met. Participation was excellent from all group members.</b></p>	<p><i>Lasater Clinical Judgement Rubric: Information provided relates to the Clinical Judgement Rubric based on comments listed above from student performance. Refer to Lasater’s Clinical Judgement Rubric for more detailed information.</i></p> <p><i>Noticing: Attempted to monitor a variety of subjective and objective data, at times somewhat overwhelmed by the array of data; focused on most important and obvious data, missed some relevant information. Recognized most notable patterns and deviations in data which was used to continually assess. Made some effort to seek additional information from patient, at time unsure of what data to pursue, overall prioritized well.</i></p> <p><i>Interpreting: Made concerted efforts to prioritize data and focus on the most important, at times tended to less relevant data. In familiar situations was able to compare patient data in order to develop intervention plans; had some difficulty with unfamiliar situations.</i></p> <p><i>Responding: Tentative at times; great communication and reassurance of the patient; became stressed at times. Communicated with patient and team members well; explained things carefully to the patient, clear direction given to team members. Interventions were developed on obvious patient data, monitored progress; hesitant in some nursing skills, strong in others.</i></p> <p><i>Reflecting: Evaluated and analyzed personal and group clinical performance with minimal prompting; key decision points were identified, alternatives were considered and discussed. Group demonstrated a desire to improve performance; reflected on the experience, identified strengths and weaknesses. Great job!</i></p>
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Simulation Scenario #1 Objectives

- Demonstrate collaborative communication with patients and healthcare team members (1,3,8) \*
- Execute accurate and complete head to toe assessment (1,5,6,8) \*
- Select and administer prescribed oral medications following the six rights (1,4,5,7) \*
- Identify and provide accurate patient education (1,2,3,4,5,7) \*

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**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: \_\_\_\_\_