

# Dallas Nursing Institute

## Clinical Performance Evaluation: OB

Student Name: \_\_\_\_\_ Program Group: \_\_\_\_\_ Date: \_\_\_\_\_  
(PLEASE PRINT)

Instructor: \_\_\_\_\_ Clinical Site: \_\_\_\_\_ Facility Orientation  Yes  No

**Scoring Guidelines: Each skill is graded based on direction from skills textbook.**

- 5 = Completed component without instructor assistance or direction with a maximum of three (3) patients
- 3 = Required assistance to safely and accurately provide total care for 2 – 3 patients
- 1 = Required assistance to ensure safe practice. Unable to safely and accurately provide total care for 2 – 3 patients
- 0 = Unable to demonstrate/verbalize knowledge or understanding of component

**Goal: total of 85 – 100 = practicing at novice nurse level      Score less than 75 = success plan**

Competency Category	Key	Observations	Grading Scale						
			5	4	3	2	1	0	
<b>I. Member of a Profession</b>	A-D	<b>Translates behaviors, code of ethics, skills, scope of practice, rationales, and knowledge learned during A &amp; P, Fundamentals of Nursing through Med/Surg I to Med/Surg II clinical practice</b>	5	4	3	2	1	0	
	A2(CJ)	Assist in determination of predictable healthcare needs and provide individualized, goal-directed nursing care to two (2) to three (3) patients and family members during one clinical day	5	4	3	2	1	0	
	B3	Recognize need for and deliver culturally-sensitive care across the life-span to two (2) to three (3) patients and family members during one clinical day	5	4	3	2	1	0	
	D3-4 (CJ)	Demonstrates accountability to reassess and establish new competency when faced with new experiences and skills	5	4	3	2	1	0	
<b>II. Provider of Patient-Centered Care</b>	A-H	<b>Translates behaviors, code of ethics, skills, scope of practice, rationales, and knowledge learned during A &amp; P, Fundamentals of Nursing through Med/Surg I to Med/Surg II clinical practice</b>	5	4	3	2	1	0	
	A2b, A1-2(CJ), D3, D3a(CJ)	Implement plan of care for multiple patients. Demonstrates use of clinical reasoning to accurately prioritize and provide culturally appropriate patient care for two (2) to three (3) patients and family members during one clinical day	5	4	3	2	1	0	
	B1-2, B1 (CJ), E4 (CJ), E12, F1(CJ)	Safely and effectively complete and document focused assessment on all patients with whom care is provided during this clinical day. Identify predictable and multiple healthcare needs. Recognize signs/symptoms of decompensation. Report changes in assessment data to instructor and facility nurse.	5	4	3	2	1	0	NA
	B3, B1 (CJ)	Safely and effectively conduct and document structured patient history on all patients with whom care was provided during this clinical day	5	4	3	2	1	0	NA
	B7 (CJ), F2-6(CJ)	Recognize and accurately interpret abnormal vs. normal findings during focused assessment on each patient. Reports abnormal findings, signs/symptoms of decompensation, as well as reasons for changes to instructor and facility representative.	5	4	3	2	1	0	
	B7, C5, E4 (CJ), E6	Medication administered as ordered while adhering to 10 rights of medication administration and following guidelines from BON Standards of Practice	5	4	3	2	1	0	NA
	F3(CJ)	Recognize deviations from plan of care and communicate with instructor and facility nurse as directed. Explain reasons for deviations. Document.	5	4	3	2	1	0	NA
	F5(CJ)	Report to facility nurse and instructor and document (for instructor)patient's response to nursing interventions	5	4	3	2	1	0	
<b>III. Patient Safety Advocate</b>	A-F	<b>Translates behaviors, code of ethics, skills, scope of practice, rationales, and knowledge learned during A &amp; P, Fundamentals of Nursing through Med/Surg I to Med/Surg II clinical practice</b>	5	4	3	2	1	0	
	A5 (CJ)	Recognize and report unsafe practices to instructor. Discuss with instructor ideas to improve practice.	5	4	3	2	1	0	NA
	B2-5, D6b (CJ)	Consistently monitor for physicians' orders that require clarification; any non-efficacious treatment; patients for reactions or untoward effects of medication; documents and accurately communicates same information to instructor and facility representative. Based on current clinical situation question orders, policies, and procedures that may not be in patient's best interest – discuss with instructor.	5	4	3	2	1	0	
	B3b-5(CJ)	Medication administered as ordered while adhering to 10 rights of medication administration and following guidelines from BON Standards of Practice	5	4	3	2	1	0	NA
<b>IV. Member of Health Care Team</b>	A-E	<b>Translates behaviors, code of ethics, skills, scope of practice, rationales, and knowledge learned during A &amp; P, Fundamentals of Nursing through Med/Surg I to Med/Surg II clinical practice</b>	5	4	3	2	1	0	NA
	B2-3(CJ)	Identify and report patient(s) unmet health needs. (Consider Maslow) Discuss with instructor.	5	4	3	2	1	0	
	B5(CJ)	Recognize need for and refer patient/family to community resource as appropriate	5	4	3	2	1	0	
	D2	Utilize basic time management skills to safely and appropriately provide total patient care to 2-3 patients	5	4	3	2	1	0	

**Grades for day:**                      **Clinical:** \_\_\_\_\_      **Care Plan:** \_\_\_\_\_      **Post Conference:** \_\_\_\_\_

Comments:

Faculty Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_

## VOCATIONAL ESSENTIAL COMPETENCIES

(PER BOARD OF NURSING MARCH 2011)

### Obstetrical Nursing

**Scoring guidelines:** your grade is an accumulation of points from each designated line on the evaluation tool. The points allowed for the line are based on what the student is expected to know coming in to the clinical. The lines with a range of numbers from 0 to 5 indicate skills, tasks, knowledge, etc. that the student is learning and is not expected to be perfect. The score for each line is determined by how much assistance the instructor needs to provide the student regarding the task and safe practice. The expectation is the student will improve with each clinical and this will be reflected by the grade.

The Student Vocational Nurse (SVN) will note there is an expectation for the student to use knowledge, skills, and experiences learned from the previous terms and classes. As the patients and clinical opportunities become more challenging it is expected that the SVN will transfer material already learned to these clinical experiences. The information and behaviors you learn build on each other; you will be expected to remember and use what you have learned. Use of this information or inability to transfer this information will be reflected in your grades.

#### Complete Explanation for Identified Competency

*The Third term Student Vocational Nurse (SVN) as:*

#### I. Member of a Profession

A1-D4(CJ) The SVN will transfer/translate (demonstrate understanding) behaviors, skills, scope of practice, rationales, and knowledge learned during A & P, Fundamentals of Nursing and Med/Surg I to Med/Surg II clinical. This includes all of the requirements from Fundamentals of Nursing Clinical Performance Evaluation and Med/Surg I Clinical Performance Evaluation, i.e.:

A1-D4 (CJ)	Transfers behaviors, skills, scope of practice, rationales, and knowledge learned during A & P and Fundamentals of Nursing to Med/Surg I.
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SEE CLINICAL EVALUATION FORM FROM FUNDAMENTALS OF NURSING AND MED/SURG I FOR SPECIFIC DETAILS

A2(CJ) While caring for patients with predictable health care needs, identify the patient's needs. Following the physician's orders and the nursing plan of care, the SVN will provide total patient care for 2 – 3 patients while interacting with their family as indicated.

B3 The SVN will consistently recognize the need for and provide culturally-sensitive care for 2 – 3 patients and their families

D3-4(CJ) The SVN uses self-evaluation, reflection, peer evaluation, and feedback to modify and improve practice. The SVN demonstrates accountability to reassess and establish new competency when changing practice areas or faced with unfamiliar responsibilities.

#### II. Provider of Patient-Centered Care

A1-H6(CJ) The SVN will transfer/translate (demonstrate understanding) behaviors, skills, scope of practice, rationales, and knowledge learned during A & P, Fundamentals of Nursing and Med/Surg I to Med/Surg II clinical. This includes all of the requirements from Fundamentals of Nursing Clinical Performance Evaluation and Med/Surg I Clinical Performance Evaluation, i.e.:

<b>A1-H6(CJ)</b>	<b>Transfers behaviors, skills, scope of practice, rationales, and knowledge learned during A &amp; P and Fundamentals of Nursing to Med/Surg I.</b>
A1, B3,5, B7(CJ)	Using a systematic approach the SVN <b>compares</b> current patient situation to what is considered to be normal to provide individualized, goal-directed, culturally-sensitive, care across the life-span of the patient. Assists to determine predictable health care needs of patient
A2	Sets and meets appropriate priorities in care of patient
B2	Appropriately and accurately performs a focused assessment on patient based on medical diagnosis. Perfect the skill of focused physical assessment
B7, 10, B2-3(CJ)	Assesses and <b>interprets</b> data to identify changes in health care status. Recognizes and reports identified changes in patient condition to instructor and appropriate health team member
B6, B6(CJ)	Participates in facility health screening process as appropriate
C2	Using appropriate format, nursing documentation clearly <b>outlines</b> care provided to patient
C3-5	<b>Verbalizes</b> understanding of the relationship between the nursing care plan and care provided by other members of the health care team
D1-3	<b>Utilizing</b> principles of decision-making, the SVN demonstrates safe, compassionate, patient-centered care while displaying professional characteristics and professional ethics
D1(CJ), E4	SVN verbalizes understanding of the basic physiological aspects of nursing interventions. Accurately <b>explains</b> the purpose of the nursing care provided to the patient to instructor and patient with regards to care provided to patient, prevention of complications, and health promotion
E5	<b>Identify</b> principles and factors that contribute to the maintenance of restoration of health
F1	<b>Evaluate</b> effectiveness of specific nursing interventions
F2	Verbalize potential life-threatening situations that can be predicted based on your patient's condition

SEE CLINICAL EVALUATION FORM FROM FUNDAMENTALS OF NURSING AND MED/SURG I FOR SPECIFIC DETAILS

A2b, A1-2(CJ), D3, D3a(CJ) Clinical reasoning is defined as “a process whereby knowledge and experience are applied in considering multiple possibilities to achieve the desired goals while considering the patient’s situation” (P. Benner, R. Hughes, M. Sutphen [http://www.ahrg.gov/qual/nursesfdbk/docs/BennerP\\_CRDA.pdf](http://www.ahrg.gov/qual/nursesfdbk/docs/BennerP_CRDA.pdf)). This includes knowledge you have learned in all of your classes to this point. The expectation is that the SVN will be using clinical reasoning to appropriately prioritize needs for a max of 3 patients during your clinical day.

B1-2, B1(CJ), E4(CJ), E12, F1(CJ) Using a systematic process and providing care based on SVN scope of practice, the SVN will safely, effectively, and accurately complete a focused assessment on each patient. Identify predictable and multiple healthcare needs as well as changes in assessment. Report needs and changes to instructor. Communicate and document nursing interventions, procedures, and evaluation of effectiveness of procedures. Communicate with instructor.

B3, B1(CJ) Using a structured assessment tool, safely and effectively conduct and document structured patient history on all patients with whom care was provided during this clinical day.

B7(CJ), F2-6(CJ) Based on knowledge of A & P and med/surg courses, recognize and accurately interpret abnormal vs. normal findings during focused assessment on each patient. Report abnormal findings, signs/symptoms of decompensation, as well as reasons for changes to instructor and facility representative.

B7, C5, E4(CJ), E6 The SVN demonstrates medication administered as ordered while adhering to 10 rights of medication administration and following guidelines from BON Standards of Practice. Medications to be given in presence of instructor unless otherwise directed.

FF3(CJ) Recognize deviations from plan of care and communicate with instructor and facility nurse as directed. Explain reasons for deviations. Document the deviations from plan of care and reasons for deviation.

F5(CJ) Report and document patient’s response to nursing interventions to instructor and facility nurse. Document (for instructor) patient’s response to nursing interventions.

B6, B6(CJ), C3 The SVN follows fundamental principles of disease prevention and health promotion/restoration for patients while safely and appropriately performing ADLs. SVN participates in health screening as indicated.

**III. Patient Safety Advocate**

A1-F3(CJ) The SVN will transfer/translate (demonstrate understanding) behaviors, skills, scope of practice, rationales, and knowledge learned during A & P, Fundamentals of Nursing to Med/Surg I to Med/Surg II clinical. This includes all of the requirements from Fundamentals of Nursing Clinical Performance Evaluation and Med/Surg I Clinical Performance Evaluation, i.e.:

A2-4(CJ) B1-3, D1-4(CJ)	Recognizes need for and seeks assistance if practice requires behaviors or judgments outside of individual knowledge and expertise. Recognizes need for and seeks training/orientation for unfamiliar patient care situations
B1	Demonstrates consistent ability to complete steps A-E and X-Z.
C1-3	Maintains environmental safety. Prepares and uses correct equipment for intended purpose
C1-3, B1(CJ)	Consistently follows standard precautions. Maintains physiological safety.
B5,8 (CJ)	Identifies and reports incidents/accidents/observations of safety concerns and /or abnormal findings to instructor and nurse
B 5,8	Directly reports off to staff nurse and instructor before leaving unit for any reason
B1(CJ)	Implements and respects Patient's Bill of Rights

SEE CLINICAL EVALUATION FORM FROM FUNDAMENTALS OF NURSING AND MED/SURG I FOR SPECIFIC DETAILS

D6b(CJ) Based on current clinical situation, question orders, policies, and procedures that may not be in patient's best interest – discuss with instructor. While following the physician's orders, nursing care plan, as well as facility's policies and procedures, be cognizant if physician's orders, nursing care plan, and policies/procedures are in the best interest of the patient.

A6 Identifies principles of quality improvement and aspects of quality improvement plan specific to facility.

A5 (CJ) SVN will recognize and report unsafe practices to instructor. Identify how to improve practices to insure safety.

**IV. Member of Health Care Team**

A1 – G4(CJ) The SVN will transfer/translate (demonstrate understanding) behaviors, skills, scope of practice, rationales, and knowledge learned during A & P, Fundamentals of Nursing and Med/Surg I to Med/Surg II clinical. This includes all of the requirements from Fundamentals of Nursing Clinical Performance Evaluation and Med/Surg I Clinical Performance Evaluation, i.e.:

B2 – 3(CJ)	<b>Propose</b> a list of patient's unmet needs. Report to nursing instructor.
D3(CJ)	Contribute to positive professional working relationships

SEE CLINICAL EVALUATION FORM FROM FUNDAMENTALS OF NURSING AND MED/SURG I FOR SPECIFIC DETAILS

A1-2 SVN demonstrates coordination and communication with health care team

B2-3(CJ) SVN identifies and proposes a list of patient's unmet needs to nursing instructor and follows chain of command as identified by instructor.

D2 Utilize basic time management skills to safely and appropriately provide total patient care to 2-3 patients.