

QUINSIGAMOND COMMUNITY COLLEGE
NURSE EDUCATION PROGRAM
Nursing IV – Nur 212

CLINICAL PERFORMANCE EVALUATION GUIDE
GERIATRIC CARE

CURRICULUM THREAD/PROFESSIONAL BEHAVIOR	SATISFACTORY PERFORMANCE	UNSATISFACTORY PERFORMANCE
1. *Takes responsibility for own actions and is self-directed.	Takes responsibility for assignments related to client care; initiates action with increasing independence and judgment; questions aspects of client care and makes appropriate adjustments in care to meet client needs. Appropriately advocates for client.	Does not take responsibility for assignments related to client care; does not initiate action with increasing independence and judgment; does not question aspects of client care and makes appropriate adjustments in care to meet client needs. Does not appropriately advocate for client.
2. *Follows program policies with regard to uniform, attendance, and written assignment.	Adheres to all program policies in nursing student handbook. Adheres to time guidelines for written assignments	Does not adhere to program policies in nursing student handbook. Does not adhere to time guidelines for written assignments
3. Negotiates planned experience with nursing home staff	Develops individual objectives as identified in nursing home guideline summary and plans with clinical instructor and clinical site staff, ways to meet identified objectives.	Does not develop individual objectives as identified in nursing home guideline summary and does not plan with clinical instructor and clinical site staff ways to address identified clinical objectives
4. *Maintains confidentiality of clients and of clinical situations	Maintains confidentiality of clients health status and of clinical situations	Does not maintain confidentiality of clients health status and of clinical situations
5. Applies knowledge of ethical-legal standards of practice.	Adheres to accepted standards of practice when providing care to clients. Care provided is non-judgmental.	Unable to adhere to accepted standards of practice when providing care to clients. Care provided is judgmental.
6. *Takes responsibility for own actions or non-actions.	Takes ownership of actions related to commission and omission; initiates action with increasing judgment and independence; questions aspects of client care acting as advocate. Works collaboratively with colleagues.	Does not takes ownership of actions related to commission and omission; does not initiate action with increasing judgment and independence; questions aspects of client care acting as advocate. Does not work collaboratively with colleagues.

CURRICULUM THREAD/ COMMUNICATION	SATISFACTORY PERFORMANCE	UNSATISFACTORY PERFORMANCE
7. *Responds to clients using therapeutic communication techniques and is nonjudgmental.	Is professional and therapeutic with families, clients and health care professionals in the long term care setting. Considers client needs as priority	Is not professional and therapeutic with families, clients and health care professionals in the long term care setting. Does not consider client needs as priority
8. Collects functional, cognitive, psychosocial, cultural and spiritual data	Data collection is complete and is able to compile data using a variety of resources in long term care setting. (client, family, chart, health care providers, member of the multidisciplinary team)	Data collection is incomplete and is unable to compile data using a variety of resources in long term care setting. (client, family, chart, health care providers, member of the multidisciplinary team)
CURRICULUM THREAD/ ASSESSMENT	SATISFACTORY PERFORMANCE	UNSATISFACTORY PERFORMANCE
9. Identifies universal requisites or client need areas	Clearly identifies encompassing universal requisites of client followed in the long term care setting as evidenced written care plan.	Does not clearly identify encompassing universal requisites of client followed in the long term care setting as evidenced written care plan.
10. Identifies negative and positive coping styles of clients that enable them to adapt to environment.	Analyzes environment and discusses impact of possible long-term care placement on client's life; ie. independence, privacy, etc. Looks at coping mechanisms as means to deal with environment and health status	Does not analyze environment and does not discuss impact of possible long-term care placement on client's life; ie. independence, privacy, etc. Does not identify coping mechanisms as means to deal with environment and health status
11. Develops physical assessment skills with the elderly	Performs physical assessment on the long term care client; States relationship between findings and the expected physiologic changes associated with aging.	Does not perform physical assessment on the long term care client; Does not state relationship between findings and the expected physiologic changes associated with aging.

CURRICULUM THREAD/ CLINICAL DECISION- MAKING	SATISFACTORY PERFORMANCE	UNSATISFACTORY PERFORMANCE
12. Analyzes all data to assess capacity to engage in self-care	Uses critical thinking skills to analyze complete data collection from variety of resources to determine individualized care plans. Discards irrelevant data and validates existing data. Data support the nursing diagnoses	Does not use critical thinking skills to analyze complete data collection from variety of resources to determine individualized care plans. Does not discard irrelevant data and validates existing data. Data does not support the nursing diagnoses
13. Evaluates effects of nursing interventions and alters plan of care when necessary	Written care plans or verbalized applications of the nursing process indicate an ability to evaluate effectiveness of interventions. Is able to adjust plan of care or nursing activity as need arises.	Written care plans or verbalized applications of the nursing process do not indicate an ability to evaluate effectiveness of interventions. Is unable to adjust plan of care or nursing activity as need arises.
14. *States pharmacological implications for selected medications/polypharmacy	States action, side effects, usual dosage, route of administration and nursing implications of drugs taken by clients; incorporates medications into plan of care; relates medication dosage and administration to physical changes in aging and analyzes possible interactions and principles of polypharmacy	Does not state action, side effects, usual dosage, route of administration and nursing implications of drugs taken by clients; does not incorporate medications into plan of care; does not relate medication dosage and administration to physical changes in aging and analyzes possible interactions and principles of polypharmacy
15. Describes the effects of polypharmacy on elder's functional and cognitive abilities	Identifies medication usage by client or elder in the community. Analyzes interactions, and relates to physiological changes of aging, and determines if functional and/or cognitive abilities have been impacted.	Does not identify medication usage by client or elder in the community. Does not analyze interactions, and relates to physiological changes of aging, and does not determine if functional and/or cognitive abilities have been impacted.

CURRICULUM THREAD/ CARING INTERVENTION	SATISFACTORY PERFORMANCE	UNSATISFACTORY PERFORMANCE
16. Implements nursing activities using principles or organization	Once data collection has been completed, is able to implement an organized plan of action. Is able to prioritize nursing actions and is able to adapt to changes in client status and in environment	Once data collection has been completed, is unable to implement an organized plan of action. Is unable to prioritize nursing actions and is unable to adapt to changes in client status and in environment
17. *Applies scientific principles related to client safety	Consistently demonstrates ability to state scientific principles underlying nursing actions. In individual and group conference is able to spontaneously verbalize rationales.	Does not consistently demonstrate ability to state scientific principles underlying nursing actions. In individual and group conference is unable to spontaneously verbalize rationales.
CURRICULUM THREAD/ TEACHING AND LEARNING	SATISFACTORY PERFORMANCE	UNSATISFACTORY PERFORMANCE
18. Integrates principles of teaching with client and staff when appropriate	Identifies one area where teaching is needed either in client care (ie. nutrition, medication, rest) or learning needs of staff. Develops and implements a plan to resolve the knowledge deficit.	Does not identify one area where teaching is needed either in client care (ie. nutrition, medication, rest) or learning needs of staff. Does not develop and implement a plan to resolve the knowledge deficit.
CURRICULUM THREAD/ COLLABORATION	SATISFACTORY PERFORMANCE	UNSATISFACTORY PERFORMANCE
19. Acts as a elder client advocate	Applies concept of advocacy readily in the long term care/acute care environment. Advocates clearly for the elder client regarding physical, social, psychological and spiritual well-being	Does not apply concept of advocacy readily in the long term care/acute care environment. Does not advocate clearly for the elder client regarding physical, social, psychological and spiritual well-being
20. Participates and/or formulates one group learning activity.	Is able to use the nursing process to formulate group learning activity.	Is unable to use the nursing process to formulate group learning activity.
21. *Actively participates in student clinical group and the learning process.	Interacts in a helpful positive manner within the clinical learning environment, supporting other students when possible. Participates in client focused discussion during post-conference.	Does not interact with others during clinical experience. Does not participate in client focused discussions during post-conference.

CURRICULUM THREAD/ MANAGING CARE	SATISFACTORY PERFORMANCE	UNSATISFACTORY PERFORMANCE
22. Negotiates planned experience with staff in clinical setting	Develops individual objectives as identifies in nursing home guideline summary and plans with clinical instructor and clinical staff	Does not develop individual objectives as identifies in nursing home guideline summary and does not plan with clinical instructor and clinical staff
23. Adopts a leadership style appropriate to the situation	Identifies situation in which leadership behavior has been observed or implemented in clinical setting	Does not identify situation in which leadership behavior has been observed or implemented in clinical setting
24. Delegates appropriately	Analyzes tasks that may be delegated in the clinical setting. States in post conference and/or seminar setting.	Does not analyze tasks that may be delegated in the clinical setting. Does not state in post conference and/or seminar setting.

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