**NURS 2021H Clinical Course Evaluation**

 **Final Evaluation**

**Student: \_\_\_\_\_\_\_\_\_\_\_Sarah Ross\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Clinical Instructor: \_\_\_\_\_Amy Miedema\_\_\_\_\_\_\_\_\_\_**

**Placement: \_\_\_\_\_\_\_\_\_\_\_\_PRHC-A6\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Satisfactory Unsatisfactory**

*Please circle the appropriate outcome*

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|  |  |
| --- | --- |
|  | **Progress** |
| **Course Objective** | **Evidence/Indicators** | **Satisfactory** | **Unsatisfactory** |
| Recognize and begin to navigate the complexities of family nursing.   | * I have incorporated family into all teaching processes, as there are many people involved in caring for a newborn
* I have supported new parents through the transition into parenthood by offering knowledge and support and providing them with what they need to be comfortable during their stay
* I am able to look at the bigger picture of what the patient’s life has been like to lead them to here, instead of assuming or using my own personal biases
* I am also able to understand the differences in types of pregnancies in how the needs of a patient differ from a first time mom to a third or fourth time mom.

Good examples; your evidence could have been strengthened by providing specific case examples from your clinical shifts | YES |  |
| Integrate knowledge from previous courses to support diverse populations.  | * I have been able to integrate information from labs such as knowledge on IV care and catheter insertion & exertion and implementing them into my care in clinical
* I have also been able to increase my competency in vital signs from my knowledge from last years courses as I continue to practice them in this clinical setting on different age groups than last year
* I have been able to incorporate knowledge from previous courses about therapeutic relationships and the skills needed, such as trust, rapport and honesty when making a relationship with my patient good examples
* The clinical orientation day with the slide show from our clinical instructor also prepared me for the uniqueness of the patient population that I would be working with during this placement How so?
 | YES |  |
| Critically appraise relational inquiry processes and begin to develop meaningful  relationships with health care providers and family members.    | * Engaging in conversations with family members to understand their perspectives and their needs of the situation
* I have established trustful and respectful relationships with my peers and also use each other for help when needed you have demonstrated leadership through mentoring your peers on 6A
* I have established therapeutic relationships with my patients through treating them equally and not judging them based on their history
* For Example: I had a patient who was a young new mom and was feeling very overwhelmed with becoming a new parent and began to get very emotional and I was able to talk with my patient and her family members to formulate a plan that they would go for a walk to get out of the room while I brought the newborn to the nurses desk to watch while they did this. This allowed me to be able to develop a meaningful relationship with my patient and also her family.
 | YES |  |
| Collaboratively formulate a plan of care based on knowledge of family nursing, related theories and scholarly literature.  | * I have been able to formulate an assessment sheet according to PRHC policies and regulations to ensure comprehensive assessments for my patients
* For example: following proper protocols in place at PRHC for patients with conditions such as PROM or GBS after birth
* I am able to inform my patients on what their plan of care is and what I will be doing, introduce myself and establish therapeutic relationships through engaging in conversations with my patient and their family members
* I have the competency to review my patient’s charts to gain information about the protocols I need to follow to provide the appropriate care

You could have incorporated several other examples from your practice here- you are not giving yourself full credit for all that you have accomplished. | YES |  |
| Develop, implement and evaluate the effectiveness of health-promoting, evidence-based practice, reflecting principles of family nursing as relational  practice.   | * I encourage my patients to participate in skin-to-skin contact with their newborn and am competent in explaining the advantages to this technique such as infant bonding and temperature regulation
* I am competent in teaching and providing necessary peri-care treatment to new moms and explaining how to continue to do so after leaving the hospital with their peri-care kit
* I am able to effectively teach about health-promotions such as back to sleep to prevent SIDS, explaining breastfeeding consultants and services available and baby baths

Good examples | YES |  |
| Demonstrate increasing competence and confidence in the application of psychomotor skills in practice settings.  | * Throughout this placement I have shown increasing competence and confidence in bed making, taking vital signs, catheter removal, baby bath~~e~~s, dressing changes, IV care and peri-care.
* I also feel competent in helping my peers with their charting and baby baths, as I feel comfortable in doing those things alone.
* I have also demonstrated increasing competence in PPE equipment and procedures through following protocols within the floor for patients under precaution
 | YES |  |
| Demonstrate accountability and professionalism that is consistent with a nurse entering a self-regulating profession.  | * I consistently show up on time, prepared, in dress code and organized and also report promptly to my instructor and to other nurses who I am reporting to as well
* I show consistency and accountability as I am responsible for getting my peers to clinical each week on time through carpool
* I show accountability by following through with my required tasks when delivering my care, using proper documentation and following proper patient confidentiality protocols from PRHC and Trent University.

Confidentiality | YES |  |
| Select appropriate community support services for families needing referral to enhance coping with diverse transitional experiences.  | * I am able to competently recognize families in need of social supports for their transition into parenthood such as the Peterborough Health Clinics, Healthy Babies, Healthy Children program which assists new parents transition into parenthood through support and home visits and helps to answer any questions they may have
* I also am able to refer patients who need it to the breastfeeding consultants, POP Clinic and other services available through PRHC for parents who need them
 | YES |  |

*To be completed by student:*

**Student Areas of Strength**

1. Baby Baths

2. Chart Review

3. Vital Signs

**Student Areas for Future Development**

1. Injections

2. Documentation

3. Medication Calculations

**Clinical Instructor Comments (All areas marked as unsatisfactory must have a comment)**

Sarah- you have been a pleasure to have in the clinical setting. You are keen to learn and take on new tasks and you assist your peers in achieving their learning goals on the floor. Continue to utilize these leadership skills. I feel you have effectively grasped the skills required to work with the Maternal-Child population as identified by organized, accurate and efficient assessments. Good luck as you advance through your next clinical placements!

**Attendance**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Hrs.** |  | **Hrs.** |
| **Week 1** | 12 | **Week 5** | 12 |
| **Week 2** | 12 | **Week 6** | 12 |
| **Week 3** | 12 | **Week 7** | 12 |
| **Week 4** | 12 | **Week 8** | 12 |

**Total number of clinical hours completed\_\_96\_\_\_\_\_\_\_\_\_\_\_**

**Clinical Component**

Satisfactory

Clinical Learning Center Completed \_\_\_\_\_\_\_\_\_\_\_\_\_

Enhanced Learning Days Completed \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Instructor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_