

Appendix 1: STENBERG COLLEGE

REGIONAL DIPLOMA IN PSYCHIATRIC NURSING

Course Code & Name: PSYN 122-6 – Psychiatric Nursing Care of the Older Adult (Clinical)

Student Clinical Evaluation Form

Student Kristine Day Preceptor Shannon Day
Clinical Area Geriatrics Hospital Spring Valley
Cohort Okarogan Evaluation: [] Mid-term [] Final

Circle one: RDPN or RDPNA

Please evaluate the student's performance of each clinical competency.
Where it was not possible for the student to be exposed to the specific learning situation(s) where the competency might be learned, please record as not available.

1st Year: Clinical placement 1.

Pass

Makes decisions and initiate actions with appropriate level of support and direction. Provides safe care. Displays appropriate level of confidence (or higher).

Fail

Is unable to make any decisions or initiate actions, even with appropriate level of support. And/or requires continuous verbal and frequent physical directives. And/or does not practice in a safe or accurate manner. Coordination and efficiency.

Please use the space on the last page for additional comments.

Clinical Competency

Level of Performance

Mid Point Int.

Final Int.

	Std.	Inst.	Std.	Inst.
Utilizes the Nursing Process				
1.01 Takes a Nursing History	WIP	SD	WIP	SD
1.02 Uses resource information appropriately	KD	SD	KD	SD
1.03 Makes pertinent observations	KD	SD	KD	SD
1.04 Assesses mental and physical status	WIP	SD	WIP	SD
1.05 identifies and prioritizes individual client needs	WIP	SD	KD	SD
1.06 Prepares a nursing care plan with measurable, realistic behavioural goals based on Identified actual and potential client problems	WIP	SD	WIP	SD
1.07 Involves the client/family whenever feasible in planning nursing care	WIP	SD	WIP	SD
1.08 Implements nursing care actions to promote goal attainment	WIP	SD	WIP	SD
1.09 Evaluates effectiveness of nursing actions against stated goals and problems	WIP	SD	WIP	SD
1.10 Revises nursing care plans	WIP	SD	WIP	SD
2. Functions as a Member of the Health Team				
2.01 Understands the roles and functions of other members of the health team	WIP	SD	WIP	SD
2.02 Communicates the role of the psychiatric nurse to the other members of the health team	WIP	SD	WIP	SD
2.03 Participates in planning, implementing and evaluating the program	WIP	SD	WIP	SD
2.04 Participates in care conferences	KD	SD	KD	SD
2.05 Participates in care conferences with the client included	KD	SD	KD	SD
2.06 Collaborates with other members of the health team	KD	SD	KD	SD
2.07 Participates in the development and implementation of the philosophy and objectives of the unit	WIP	SD	WIP	SD
2.08 Participates in planning the resolution of ethical dilemmas	WIP	SD	WIP	SD
3. Performs Basic Nursing Procedures				
3.01 Provides a safe environment	KD	SD	KD	SD
3.02 Measures vital signs including neuron-vitals	KD	SD	KD	SD
3.03 implements seizure precautions	NA	SD	NA	SD
3.04 inserts oral airway	NA	SD	NA	SD

3.05 Performs suctioning technique	NA	SD	NA	SD
3.06 Carries out Cardio-pulmonary resuscitation	NA	SD	NA	SD
3.07 Administers oxygen therapy	NA	SD	NA	SD
3.08 Assists client with coughing and deep breathing exercises	NA	SD	NA	SD
3.09 Maintains established intravenous lines	NA	SD	NA	SD
3.10 Inserts nasal-gastric tubes	NA	SD	NA	SD
3.11 Administers gastric feedings	NA	SD	NA	SD
3.12 Feeds clients when necessary	KD	SD	KD	SD
3.13 Assists clients to maintain hygiene	KD	SD	KD	SD
3.14 Assists client to maintain 'normal' body functions	KD	SD	KD	SD
3.15 Cares for client with drainage e.g. urinary	KD	SD	KD	SD
3.16 Performs urinary catheterization	KD	SD	KD	SD
3.17 Administers enemas and suppositories	KD	SD	KD	SD
3.18 Provides ostomy care	NA	SD	NA	SD
3.19 Performs bladder irrigations	NA	SD	NA	SD
3.20 Transfers and turns clients	KD	SD	KD	SD
3.21 Safely operates mechanical lifts	KD	SD	KD	SD
3.22 Maintains traction	NA	SD	NA	SD
3.23 Ambulates client	KD	SD	KD	SD
3.24 Assists client in use of walking equipment	KD	SD	KD	SD
3.25 Assists client with active and passive exercises	WIP	SD	WIP	SD
3.26 Demonstrates proper use of body mechanics	KD	SD	KD	SD
3.27 Position client in optimal body alignment	KD	SD	KD	SD
3.28 Follows procedures to minimize risk of decubitus ulcers	KD	SD	KD	SD
3.29 Carries out isolation techniques	NA	SD	NA	SD
3.30 Performs sterile dressing techniques	WIP	SD	WIP	SD
3.31 Applies dressings wet and dry	WIP	SD	WIP	SD
3.32 Applies hot and cold compresses	WIP	SD	WIP	SD
3.33 Provides cast care	NA	SD	NA	SD
3.34 Obtains specimens (except venous and arterial blood, and vaginal specimens)	NA	SD	NA	SD
3.35 Tests urine specimens and capillary blood glucose level	WIP	SD	WIP	SD
3.36 Follows policy on admission, transfer and discharge procedure	NA	SD	NA	SD
3.37 Prepares client for diagnostic procedures	NA	SD	NA	SD
3.38 Prepares client for and assists in ECT	NA	SD	NA	SD
3.39 Cares for client recovering from anesthetic	NA	SD	NA	SD
3.40 Assists doctors with procedures, e.g. lumbar puncture, IV cut down, gastric gaves etc.	NA	SD	NA	SD
3.41 Cares for the body after death	NA	SD	NA	SD
3.42 Administers oral, rectal, vaginal, topical, intramuscular, intravenous, and subcutaneous medications	WIP	SD	WIP	SD

3.43 Instills eye and ear medications	KD	SD	KD	SD
3.44 Performs procedures related to specific drugs	WIP	SD	WIP	SD
3.45 Follows 'control' drug regulations	WIP	SD	WIP	SD
3.46 Calculates fractional dosages	KD	SD	KD	SD
3.47 Assesses need for PRN medication	WIP	SD	WIP	SD
3.48 Assesses and recognizes the effects and side effects of drugs	WIP	SD	WIP	SD
3.49 Follows established procedures for safe medication administration	KD	SD	KD	SD
3.50 Uses equipment and materials to provide support and protection, e.g. restraints	KD	SD	KD	SD
3.51 Operates humidifier	NA	SD	NA	SD
3.52 Operates wheelchairs and stretchers	KD	SD	KD	SD
3.53 Operates an alternating mattress	NA	SD	NA	SD
3.54 Prepares equipment for examination of client	NA	SD	NA	SD
3.55 Ensures safe equipment is available for the client	WIP	SD	KD	SD
3.56 Adheres to universal precautions	WIP	SD	KD	SD
4. Participates in Health Teaching in collaboration with client and family				
4.01 identifies need for health instruction	WIP	SD	WIP	SD
4.02 Prepares, implements and evaluates teaching plan	WIP	SD	WIP	SD
4.03 instructs client and family about health problem and health practices	WIP	SD	WIP	SD
4.04 Utilizes appropriate resources/references for teaching	WIP	SD	WIP	SD
4.05 Revises teaching and learning care plan based on results of specified evaluative criteria	WIP	SD	WIP	SD
5. Demonstrates Professional Behaviour				
5.01 Evaluates own nursing performance	KD	SD	KD	SD
5.02 Gives evidence of accountability for own nursing performance	KD	SD	KD	SD
5.03 Seeks help and guidance promptly when unable to perform competently	WIP	SD	KD	SD
5.04 Identifies own learning needs in relation to client care	KD	SD	KD	SD
5.05 Supports professional goals and standards	WIP	SD	WIP	SD
5.06 Maintains confidentiality	KD	SD	KD	SD
5.07 Contributes to the improvement of nursing practice	WIP	SD	WIP	SD
5.08 Functions within the policies and practices of the employing agency	KD	SD	KD	SD

5.09 Recognizes legal implications of actions of self and others	WIP	SD	WIP	SD
5.10 Assumes responsibility and demonstrates leadership potential, e.g. ability to assign tasks, establish priorities and organize personal work load	KD	SD	KD	SD
5.11 Assumes responsibility for own professional development and updates skills and knowledge base according to emerging trends and needs of the consumer population	WIP	SD	WIP	SD
5.12 Functions as an advocate in supporting client's rights within the health care system	WIP	SD	WIP	SD
5.13 Identifies social and ethical issues relating to psychiatric nursing practice	WIP	SD	WIP	SD
6. Demonstrates Therapeutic Use of Self				
6.01 Recognizes the effect of one's behaviour on others e.g. client/family, staff	KD KD	SD	KD KD	SD
6.02 Understands the dynamics of human behaviour	WIP	SD	WIP	SD
6.03 Recognizes and identifies own feelings	KD	SD	KD	SD
6.04 Recognizes and identifies feelings of others	KD	SD	KD	SD
6.05 Interprets behaviour of self and others	KD	SD	KD	SD
6.06 Takes appropriate action in nursing situations	WIP	SD	WIP	SD
6.07 During goal-oriented Interactions demonstrates empathy, warmth and respect	KD KD	SD SD	KD KD	SD SD
6.08 Demonstrates a non-judgmental attitude	KD	SD	KD	SD
6.09 Utilizes, as appropriate, problem-solving techniques during interactions	WIP	SD	WIP	SD
6.10 identifies individuals' communication limitations and utilizes alternative forms of communication as appropriate	WIP	SD	WIP	SD
7. Communicates Effectively				
7.01 Engages In goal-oriented communication (verbal and/or nonverbal)	KD	SD	KD	SD
7.02 incorporates feedback from client/family and colleagues	WIP	SD	KD	SD
7.03 Gives factual information to client/family	WIP	SD	KD	SD
7.04 Verbalizes observations to appropriate persons	KD	SD	KD	SD
7.05 Perceives and interprets verbal and non-verbal communication	WIP	SD	KD	SD
7.06 Validates communications with client/family and colleagues	WIP	SD	KD	SD
7.07 Uses appropriate communication channels within the agency	WIP	SD	WIP	SD
7.08 Documents observations and psychiatric	WIP	SD	WIP	SD

nursing actions on appropriate records	WIP	SD	WIP	SD
8. Recognizes Behaviour Patterns in Illness and Health				
8.01 Demonstrates knowledge of developmental psychology	NA	SD	NA	SD
8.02 Demonstrates knowledge of atypical mental or emotional development	NA	SD	NA	SD
8.03 Demonstrates recognition of socially acceptable behaviour patterns	NA	SD	NA	SD
8.04 Demonstrates recognition of socially unacceptable behaviour patterns	NA	SD	NA	SD
8.05 Keeps current with the classification system of psychopathology contained within the Diagnostic and Statistical Manual (DSM IV, 1994)	NA	SD	NA	SD
8.06 Recognizes the behaviour patterns of consumer population in relation to multi-culturalism	NA	SD	NA	SD
8.07 Employs objective observation and recording techniques	NA	SD	NA	SD
8.08 interprets results of observation	NA	SD	NA	SD
8.09 Recognizes and Interprets the manifestations of emotional and physical states	NA	SD	NA	SD
9. Applies Appropriate Psychiatric Nursing Interventions				SD
9.01 Bases nursing interventions upon scientific concepts and principles	NA	SD	NA	SD
9.02 Promotes a therapeutic milieu	NA	SD	NA	SD
9.03 Assists client to utilize resources in the environment to meet identified goals	NA	SD	NA	SD
9.04 Structures environment to promote appropriate sensory stimulation	NA	SD	NA	SD
9.05 Selects and implements psychiatric nursing interventions calculated to be most effective in the management of dysfunctional behaviour patterns, e.g. hostile, acting-out, elopement, suicidal, depressed, psychotic, addictions, suspicious, confused, elated, ritualistic, and anxious	NA	SD	NA	SD
9.06 Uses crisis intervention techniques	NA	SD	NA	SD
9.07 Facilitates the grieving process for client/family	NA	SD	NA	SD
9.08 Uses the techniques of social learning, reality therapy, supportive therapy, behaviour modification, cognitive-behaviourism, and psychotherapy among others to help client deal with his/her health problems	NA	SD	NA	SD
9.09 Facilitates the client to utilize his/her capabilities to his/her maximum potential	NA	SD	NA	SD
9.10 Demonstrates knowledge of basic dynamics of group interaction	NA	SD	NA	SD

9.11 Facilitates in a variety of goal-oriented group settings such as: psychotherapy, re-motivation, social skills, activity, recreational, role-playing and relaxation	NA	SD	NA	SD
9.12 Participates in client/family counseling and therapy	NA	SD	NA	SD
9.12 Provides opportunities for clients to practice new behaviour	NA	SD	NA	SD
			NA	SD
10. Uses Community Resources			NA	SD
10.01 Seeks Information from other resources for incorporation in assessment and treatment plan	NA	SD	NA	SD
10.02 Demonstrates awareness of the community resources available	NA	SD	NA	SD
10.03 Identifies client's need for assistance from community resources	NA	SD	NA	SD
10.04 Provides client and family with relevant information about community resources	NA	SD	NA	SD
10.05 Initiates referrals to community resources	NA	SD	NA	SD
10.06 Participates with community resources to ensure continuity of services for client	NA	SD	NA	SD
10.07 Assists client to plan treatment program involving community resources where appropriate	NA	SD	NA	SD