**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktapur**

**Behavior Science and Mental Health Nursing (Clinical)**

**Evaluation Scheme**

**Subject**: Behavior Science and Mental Health Nursing**Full Mark**: 25

Pass Marks: 12.5

**Location of Practice**: Mental Hospital/Psychiatric Ward

**During 2 weeks placement in Mental Hospital, students should submit following assignments.**

|  |  |  |  |
| --- | --- | --- | --- |
| **SN** | **Activities** | **Marks** | **No. of Assignments** |
| 1. | Clinical Performance | 5 |  |
| 2. | Family Health Teaching | 2.5 | 1 |
| 3. | Case study presentation | 5 | 1 |
| 4. | Mental Status Examination | 5 | 1 |
| 5. | Drug Book | 2.5 | 1 (at least five drugs) |
| 6. | Nursing Care Plan | 5 |  |
| **Total** | | **25** |  |

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktapur**

**Course**: PCL Nursing **Student** **Name**:

**Year**: Second **Full** **Mark**: 5

**Subject**: Mental Health **Pass** **Mark**: 2.5

**Area** **of** **practice**: Mental Hospital **Obtained** **Mark**:

1. **Clinical Performance**

**Direction:**  This evaluation form will be use to evaluate student’s day to day performance in Mental Health practicum. Student’s performance will be evaluated by following criteria.

**Key for Marking:**

**Satisfactory Good Excellent**

1 1.5 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SN** | **Criteria** | **1** | **1.5** | **2** |
| 1 | Demonstrates sensitivity to the needs and problems of patients and families |  |  |  |
| 2 | Identifies verbal and non verbal response while communicating to patients and families |  |  |  |
| 3 | Collects complete and relevant psychiatric history |  |  |  |
| 4 | Performs Mental Status Examination |  |  |  |
| 5 | Uses participatory approach to identify needs and planning for care |  |  |  |
| 6 | Provides holistic care using traditional belief and practice |  |  |  |
| 7 | Implement care plan in logical sequence according to priority need of patients |  |  |  |
| 8 | Considers safety and comfort needs |  |  |  |
| 9 | Maintains therapeutic relation to patients and families |  |  |  |
| 10 | Involves patients in diversion therapy |  |  |  |
| 11 | Provides counseling and psychological therapy to the patients and family members |  |  |  |
| 12 | Interacts with health team members, patient, patient’ family and colleagues |  |  |  |
| 13 | Records all the pertinent information of patient’s problems, his response to illness and care given clearly |  |  |  |
| 14 | Demonstrates knowledge of various referral agencies for the rehabilitation of patient and family |  |  |  |
| 15 | Provides health education to the patient and visitors during hospitalization and at the time of discharge |  |  |  |
| 16 | Demonstrates accountability and responsibility for the outcome of all her nursing action |  |  |  |
| 17 | Utilizes available resources and involve patients and family |  |  |  |
| 18 | Punctuality |  |  |  |
| 19 | Regularity |  |  |  |
| 20 | Submits report in time |  |  |  |
| **Total** | |  |  |  |

**(Total marks is divided by 8)**

**Strengths:**

**Areas to be improved:**

**…………………………. …………………**

**Signature of Supervisor Date**

**Council for Technical Educational & Vocational Training**

**Sanothimi, Bhaktapur**

**Course**: PCL Nursing **Student** Name:

**Year**: Second **Full** **Mark**: 2.5

**Subject**: Mental Health **Pass** **Mark**: 1.25

**Area** **of** **practice**: Mental Hospital **Obtained** **Mark**:

**2. Health Teaching**

**Direction:** Each student has to provide a health teaching to client and family in the respective clinical area.

**Key for Marking:**

**Satisfactory Good Excellent**

1 1.5 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SN** | **Criteria** | **1** | **1.5** | **2** |
| 1 | Identifies need of the client and select the topic. |  |  |  |
| 2 | Assesses clients’ level of knowledge in the topic |  |  |  |
| 3 | Organizes appropriate time and place for the teaching to the client/family. |  |  |  |
| 4 | Prepares lesson plan with objectives, content and teaching activities. |  |  |  |
| 5 | Uses appropriate audio-visual aids using available local resources and appropriate methods. |  |  |  |
| 6 | Uses appropriate language according to level of understanding of clients and family. |  |  |  |
| 7 | Encourages active group participation |  |  |  |
| 8 | Summarizes teaching by going over main points. |  |  |  |
| 9 | Evaluates the presentation by self and accept the feedback. |  |  |  |
| 10 | Maintains discipline, attitude and dress appropriately in the clinical field areas. |  |  |  |
| **Total** | |  |  |  |

(**Total marks is divided by 8)**

**Strengths:**

**Areas to be improved:**

**…………………………. …………………**

**Signature of Supervisor Date**

**Council for Technical Educational & Vocational Training**

**Sanothimi, Bhaktapur**

**Course:** PCL Nursing  **Student Name:**

**Year:** Second  **Full Mark:** 5

**Subject:** MentalHealth **Pass Mark:** 2.5

**Area of practice:** Mental Hospital **Obtained Mark:**

**3. Case Study Presentation**

**Direction:** During clinical practicum, each student will present one case study in clinical setting under supervision. The presentation will be evaluated according to the following criteria.

**Key for Marking:**

**Satisfactory Good Excellent**

1 1.5 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SN** | **Expected Criteria** | **1** | **1.5** | **2** |
| 1 | Plans, selects and informs the team for case presentation. |  |  |  |
| 2 | Arranges an appropriate place and logistics. |  |  |  |
| 3 | Organizes the presentation according to the given format. |  |  |  |
| 4 | Communicates an overview of presentation to the audience. |  |  |  |
| 5 | Presents in-depth information about case. |  |  |  |
| 6 | Uses adequate related visual aids. |  |  |  |
| 7 | Demonstrates in-depth knowledge and confidence about presentation. |  |  |  |
| 8 | Interacts with audience and respond their queries. |  |  |  |
| 9 | Summarizes the presentation within the time frame. |  |  |  |
| 10 | Evaluates the presentation by self and accept the feed back. |  |  |  |
| **Total** | |  |  |  |

(**Total marks is divided by 4)**

**Strengths:**

**Areas to be improved:**

**……………………… ……………**

**Signature of Supervisor Date**

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktapur**

**Course:** PCL Nursing **Student Name:**

**Year:** Second  **Full Mark:** 5

**Subject:** Mental Health **Pass Mark:** 2.5

**Area of Practice:** Mental Hospital **Obtained Mark:**

**4. Format for Mental Status Examination**

**Identification Data of patient:**

Name: Age/Sex:

Marital Status: Education:

Occupation: Religion:

Residence:

- Present address:

- Permanent address:

**Source of referral:**

**Informant:**

- relation to patient:

- duration of stay with patient:

**Inpatient Record:**

Ward: Diagnosis:

Bed no: Attending Doctor:

Date of admission: Number of ECT:

Type of psychotherapy: I.P. number:

1. **GENERAL APPEARANCE AND BEHAVIOR**

* Body build and physical appearance(Approximate height, weight and appearance)
* Looks: comfortable/uncomfortable
* Grooming, Hygiene, self care
* Dressing(adequate/appropriate)
* Eye contact: Yes/no
* Attitude towards the examiner
* Cooperation
* Hostility
* Attentiveness
* show interest
* appears disinterested
* Gait /posture (Normal/abnormal way of sitting, standing, walking, lying)
* Motor activity
* Increase/decreased
* Excitement/stupor
* Abnormal voluntary movements
* Restlessness/akathisia
* Catatonic signs(mannerism, waxy flexibility, negativism)
* Rapport (Spontaneous difficult, not established)
* Hallucinatory Behavior (Smiling and talking to self)

**2. Speech**

* Volume and tone of speech: increased/decreased
* Reaction time: Normal, delayed,
* Rate: Normal, slow or rapid
* Tone: Normal, variation, spontaneous
* Relevance: Fully relevant, sometime off target, irrelevancy
* Coherence: Fully coherent, loosening of association, flight of ideas

**3. Mood**

* Subjective mood (patient is asked about present mood: How do you feel?)
* Objective mood (observed emotional change in the patient: happy, sad, anxious, worried)

**4. Thought**

* Stream and Form of thought
* Any loosening of association
* Flight of ideas
* Tangentiality
* Circumstantiality
* Illogical thinking
* Perseveration
* Verbigeration

ii. Content of thought (any preoccupation)

* Obsession
* Content of phobia
* Delusion
* Hopeless
* Helpless
* Worthless
* Suicidal ideation
* Thought insertion
* Thought broadcast

**5. Perception**

* Hallucination (auditory, visual, olfactory, gustatory, tactile)
* Illusion
* Depersonalization/derealization

**6. Cognitive function**

i. **Consciousness:** conscious, cloudy, comatose

ii**. Orientation**

* Time: time, day, date, month, year
* Place: Kind of place, area, city
* Person: Self, close associate, hospital staff

iii. **Attention** (normally aroused/ aroused with difficulty)

* Digit forward/backward

iv. **Concentration** (normally sustained/sustained with difficulty/distractible)

* 100-7, 40-3 ,20-1, name of month/week(backward)

v. **Memory**

* Immediate memory : Memory within 5-10 minutes, use digit span to assess the immediate memory
* Recent memory (memory within 24-72 hours): Ask what you ate for the dinner at night
* Remote memory (Memory of significant happening of life) : Ask for date and place of birth

vi. **Intelligence**

Ask for general information, keeping in minds the general education and social background, experience and interest e.g. Current Prime Minister Name, arithmetic ability

vii**. Abstract thinking**

* Interpretation of proverb
* Similarities/Dissimilarities between paired objects

**7. Insight (present/absent)**

Insight is the degree of awareness and understanding that the patient has regarding the illness

**8. Judgment** **(good/intact, poor/impaired)**

* Social judgment: Observe during hospital stay and during interview session
* Test judgment: Can be assessed in certain situation like by asking the patient what would you do in certain situation e.g. a house on fire
* Personal judgment:

**Summary of the finding:**

**Strengths:**

**Areas to be improved:**

**……………………… ……………**

**Signature of Supervisor Date**

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktapur**

**Course**: PCL Nursing **Student** **Name**:

**Year**: Second **Full** **Mark**: 2.5

**Subject**: Mental Health **Pass** **Mars**: 1.25

**Area** **of** **Practice**: Mental Hospital **Obtained** **Mark**:

**5. Drug Book**

**Direction:**  Each student should prepare drug book using following criteria and should include

at least five drugs.

**Key for Marking:**

**Satisfactory Good Excellent**

1 1.5 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SN** | **Criteria** | **1** | **1.5** | **2** |
| 1 | States generic name and trade name |  |  |  |
| 2 | Mentions indication and usage |  |  |  |
| 3 | Mentions dose and route of administration |  |  |  |
| 4 | States drug interaction |  |  |  |
| 5 | Analyzes adverse reaction to the patient |  |  |  |
| 6 | States contraindications |  |  |  |
| 7 | States warnings sign |  |  |  |
| 8 | Explains nursing management |  |  |  |
| 9 | Prepares complete clear and in-depth drug book |  |  |  |
| 10 | Submits report on time |  |  |  |
| **Total** | |  |  |  |

**(Total marks is divided by 8)**

**Strengths:**

**Areas to be improved:**

**…………………………. …………………**

**Signature of Supervisor Date**

**Council for Technical Educational & Vocational Training**

**Sanothimi, Bhaktapur**

**Course**: PCL Nursing **Student Name**:

**Year**: Second **Full Mark**: 5

**Subject**: Mental Health **Pass Mark**: 2.5

**Area of Practice**: Mental Hospital **Obtained Mark**:

**6. Nursing Care Plan**

**Direction:** Each student has to submit five nursing care plan of patient according to given guidelines.

**Key for Marking:**

**Satisfactory Good Excellent**

1 1.5 2

| **SN** | **Criteria** | **1** | **1.5** | **2** |
| --- | --- | --- | --- | --- |
| 1 | Identifies the patient’s present and potential problem appropriately |  |  |  |
| 2 | Prioritizes problem as its severity and identify the significant cause |  |  |  |
| 3 | Formulates the nursing diagnosis |  |  |  |
| 4 | Plans the nursing action accordingly |  |  |  |
| 5 | Gives rational for each nursing action in relation to the problem |  |  |  |
| 6 | Provides the care according to the plan using available resources |  |  |  |
| 7 | Involves the patient and the family in the care process accordingly |  |  |  |
| 8 | Evaluates the progress of patient’s condition after giving care |  |  |  |
| 9 | Revises the care plan after assessing the process and implementation of care |  |  |  |
| 10 | Records and reports completely on time. |  |  |  |
|  | **Total** |  |  |  |

(**Total marks is divided by 4)**

**Strengths**

**Areas to be improved:**

**…………………………. …………………**

**Signature of Supervisor Date**

**Appendix**

Council for Technical Education & Vocational Training

Sanothimi, Bhaktapur

|  |
| --- |
| **Nursing Care Plan Format** |

Name of the Patient: Date of Admission:

Age/Sex: Diagnosis:

I.P. No.: Bed No:

Ward: Date:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **S.N.** | **Problem Assessment** | **Nursing Diagnosis** | **Expected Outcome(Goal)** | **Plan of Nursing Action** | **Implementation of Action** | **Scientific**  **Principle/**  **Rational** | **Evaluation** |
|  | Subjective data:  Objective data: |  |  |  |  |  |  |

**………………………… ……………………**

**Signature of Supervisor Signature of student**

**Date : Date :**