GROSSMONT COLLEGE

Department of Nursing

PRECEPTED PATIENT CARE MANAGEMENT

CLINICAL EVALUATION FORM

FINAL EVALUATION BY FACULTY ADVISOR

Student:

Preceptor:

Faculty Advisor: Hospital: Unit:

**Directions**: Please circle the number that best describes the student’s performance level in each clinical category. Students should be able to achieve a minimum of a 3.0 rating in every section by the end of their preceptorship. Comments are strongly encouraged and very helpful in the evaluation process. ***Final Evaluation must be completed by faculty advisor*.**

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| POINTS |  | COMMENTS |
|  | THE NURSING PROCESS |  |
| 5 | Gathers assessment data from multiple sources, often beyond the basic data base. Consistently utilizes the nursing process in formulating a holistic, comprehensive plan of care for patients. |  |
| 4 | Gathers assessment data relevant to the patient’s problems. Usually utilizes the nursing process appropriately to formulate a holistic, comprehensive plan of care for patients. May miss some detail relevant to application of nursing diagnoses. |  |
| 3 | Reasonably complete assessments, missing some basic information, leading to misapplication of the nursing process though not likely to lead to a missed nursing diagnosis or intervention(s). |  |
| 2 | Misses some basic assessment findings, which could lead to an incomplete or incorrect application of nursing process and inappropriate conclusions. |  |
| 1 | Misses critical assessment findings, incorrect application of the nursing process which leads to incomplete or incorrect identification of patient problems with inappropriate nursing interventions. |  |
|  | **PROFESSIONAL NURSING ROLE** |  |
| 5 | Consistently executes nursing skills with excellent technique. Manages time effectively, prioritizing consistently in an appropriate manner. Delegates when applicable. |  |
| 4 | Executes nursing with good technique. Manages time effectively, generally prioritizes appropriately. Delegates appropriately, when applicable, but is not always consistent. |  |
| 3 | Executes nursing with fair technique. Needs some prompting. Manages time effectively most of the time with some reliance on the preceptor. Prioritizes at time effectively but is not always consistent. Has difficulty delegating. |  |
| 2 | Executes nursing skills while consistently needing prompting on how to perform the skill. Manages time effectively at times but relies heavily on the preceptor to attain patient care goals. Has consistent difficulty prioritizing. Has not been able to delegate appropriately on a consistent basis. |  |
| 1 | Executes nursing skills with poor technique and/or with errors. Consistent difficulty or inability to calculate basic medications/infusions. Has not been able to manage the daily assignment. Unable to prioritize effectively or delegate as needed to accomplish time management objectives. |  |
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| POINTS |  | COMMENTS |
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|  | CRITICAL THINKING AND CULTURAL DIVERSITY |  |
| 5 | Consistently thinks critically at the bedside and applies knowledge readily to a variety of patients with cultural sensitivity. |  |
| 4 | Consistently thinks critically but is not always consistent in applying knowledge to a variety of patients with cultural differences. |  |
| 3 | Thinks critically at times but not consistently without prompting from the preceptor. Sometimes does not modify nursing to accommodate cultural differences. |  |
| 2  1 | Not able to think critically at the bedside and inconsistently applies nursing theory to a variety of patients. Rarely modifies nursing to accommodate cultural differences.  Does not think critically and preceptor needs to obtain information from the student with significant prompting. Exhibits cultural insensitivity. |  |

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| 5  4  3  2  1 | **EVIDENCE-BASED PRACTICE**  Is regularly able to cite evidence-based rationales for nursing interventions. Initiates change based on scientific rationales.  Is usually able to cite evidence-based rationales for nursing interventions. Seeks scientific evidence to support suggested changes.  Employs appropriate nursing interventions but sometimes unable to express correct rationales.  Sometimes employs inappropriate nursing interventions and unclear on rationales.  Regularly employs inappropriate nursing interventions and unable to explain applicable rationales. |  |
| 5  4  3  2  1 | **COMMUNICATION AND INFORMATICS**  Clear, complete, and logically organized documentation addressing all pertinent problems. Utilizes Electronic Medical Record when applicable. Communicates clearly and accurately with patients and families throughout the encounter. Excellent communication with the preceptor and all other health care disciplines. Consistently provides a thorough end-of-shift report.  Clear, complete, and logically organized documentation addressing nearly all pertinent problems. Utilizes Electronic Medical Record when applicable. Communicates clearly and accurately. Reasonably comfortable with patients, families, and members of the health care team. Usually provides a thorough end-of-shift report.  Mainly complete needing some guidance for clarity, completeness, and organization. Needs help to utilize Electronic Medical Record. Generally clear and accurate communication. Reasonably comfortable with patients, families, and members of the health care team. Usually communicates openly and constructively with the preceptor. Provides an incomplete, poorly organized end-of-shift report.  Some important information missing which could compromise accuracy and thoroughness of documentation. Utilizes Electronic Medical Record only when prompted and with a lot of guidance. Frequently awkward communication. Appears ill at ease. Poor use of communication techniques. Does not recognize patient’s emotional cues. Guarded or incomplete communication with the preceptor. Often provides a disorganized end-of-shift report.  Much important information missing, very hard to follow and illegible. Does not know how to utilize Electronic Medical Record. Inappropriate communication. Lacks sensitivity to patient’s position. Unable to acknowledge own feelings or problems with preceptor. Consistently provides an incomplete, poorly organized end-of-shift report. |  |

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| POINTS |  | COMMENTS |
|  | STANDARDS OF PRACTICE |  |
| 5  4  3  2  1 | Regularly acts as patient advocate and acts in accordance with the California Nurse Practice Act. Consistently demonstrates effective patient teaching. Adheres to legal, ethical, and professional practice standards.  Often acts as patient advocate. Acts in accordance with the California Nurse Practice Act. Usually demonstrates effective patient teaching. Usually adheres to legal, ethical, and professional practice standards.  Sometimes acts as patient advocate. Aware of responsibility and accountability of a nurse. Sometimes demonstrates ineffective patient teaching. Sometimes fails to adhere to legal, ethical, and professional practice standards.  Rarely acts as patient advocate. Has little awareness of nursing responsibilities and accountability. Rarely demonstrates effective patient teaching. Little awareness of legal, ethical, and professional practice standards.  Does not act as patient advocate. Demonstrates lack of awareness of nursing responsibilities and accountability. Fails to demonstrate effective patient teaching. Unaware of legal, ethical and professional practice standards. |  |
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|  | **LIFE-LONG LEARNING** |  |
| 5  4  3  2  1 | Demonstrates insight into own strengths and weaknesses as a nurse and committed to self-improvement. Consistently utilizes appropriate and reliable resources.  Self-reflective. Requests input into strengths and weaknesses and solicits suggestions for improvement. Usually utilizes appropriate and reliable resources.  Responsive to suggestions of ways student can improve but does not initiate quality improvement. Occasionally utilizes inappropriate or unreliable resources.  Sometimes resists suggestions for improvement. Often utilizes inappropriate or unreliable resources.  Does not accept responsibility for self-improvement. Not responsive to suggestions. Consistently utilizes inappropriate or unreliable resources. |  |
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ADDITIONAL COMMENTS:

Signatures:

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| Student | Date |
| Faculty Advisor | Date |