# BEREA COLLEGE BSN NURSING PROGRAM

SPRING 2021

PRECEPTOR ORIENTATION HANDBOOK

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# NOTE: NUR 450 syllabus attached sepereately.

#### **GUIDELINES FOR PRECEPTORS**

#### **Legal Requirement for Practicum**

#### 201 KAR 20:320. Standards for curriculum of prelicensure nursing programs.

RELATES TO: KRS 314.011(5), 314.021, 314.041(1)(a), 314.111(1), 314.131(1), (2)

STATUTORY AUTHORITY: KRS 314.041(1)(a), 314.051(1)(a), 314.111(1), 314.131(1), (2) NECESSITY, FUNCTION, AND CONFORMITY: KRS 314.041(1)(a) and 314.051(1)(a) require that an applicant for licensure as a registered or licensed practical nurse complete the basic nursing curriculum in an approved school of nursing. KRS 314.111(1) requires that schools of nursing regardless of delivery models shall meet minimum standards and be approved by the Board of Nursing. KRS 314.131(1) and (2) authorizes the board to promulgate administrative regulations necessary to approve programs of nursing. This administrative regulation establishes the curriculum requirements for prelicensure registered nurse and practical nursing programs.

Section 2 of 201 KAR 20:320 states the following:

(9) Integrated practicum.

(a) The curriculum shall include an integrated practicum. The integrated practicum shall consist of a minimum of 120 clock hours of concentrated clinical experience of direct patient care in a health care facility or health care organization.

(b) The integrated practicum shall be completed within a period not to exceed seven (7) consecutive weeks while the governing institution is in session during the last semester or quarter of a nursing program.

Note: During the time of the Governor declared COVID-19 Emergency hospitals have additional requirements and restrictions for students that are expected to be followed. Students are disallowed from caring for COVID-19 positive or symptomatic COVID-19 patients awaiting test results.

#### **Philosophy**

The Berea College BSN Nursing faculty believe that the use of other nursing and health care providers to assist students with clinical practice experiences constitutes a pedagogically sound teaching methodology when accountability for appropriate management is exercised by nursing program faculty. This management consists of appropriate control, direction, delegation, supervision, and evaluation. The use of preceptors enhances the clinical component of the nursing curriculum by providing a blend of role modeling and mentoring with practicing nurses who have a current clinical perspective. The precepted experience also affords the student with the opportunity to learn autonomous and accountable nursing behavior.

#### Management

A collaborative effort between the faculty, preceptor, and student exists; however, the ultimate responsibility and accountability for nursing education rests with the faculty. The faculty member is responsible for the application, integration, and enhancement of the theoretical constructs of the curriculum as related to student clinical experience. The preceptor is responsible for acquainting the student with the clinical setting and helps provide and supervise appropriate learning experiences consistent with the student's learning outcomes. The preceptor role encompasses the combination of the roles of mentor, supervisor, and evaluator. In addition to the concept of being a teacher, the preceptor should have: the skills of the mentor in guiding, assisting, and facilitating the student; the skills of the supervisor to ensure that relevant experience is provided to enable learning outcomes to be achieved and to facilitate the students competence in the practice of nursing; and the skills of evaluator who can assess the student's level of attainment in relation to the stated learning outcomes. The student is responsible for identifying and achieving the learning outcomes and for facilitating communication between themselves, the preceptor, and the faculty member. Precepted experiences must meet all the following requirements regarding preceptors, faculty, Berea College's BSN Nursing Program, and students:

#### **Preceptor Requirements**

- 1. Must have a current unrestricted nursing license as a registered nurse in the Commonwealth of Kentucky.
- 2. Will fill out a preceptor verification form (attached) to provide information for the nursing program.
- 3. Shall be knowledgeable and experienced in the nursing practice in which he/she is precepting.
- 4. Shall be approved jointly by the faculty of the BSN Nursing Program and the nursing administration/education department of the clinical agency.
- 5. Shall be assigned to precept students from not more than one nursing program at a time during the days of the experience.
- 6. Shall agree to serve in the preceptor role and will receive orientation materials at the beginning of the clinical experiences.
- 7. Shall be physically present in the unit/agency and available at all times for the student when performing in a nursing capacity with clients.
- 8. Shall participate in the evaluation of the clinical experience (A copy of the midterm and final evaluation forms are attached.)

#### **BSN Nursing Program Requirements**

- 1. Shall have established written signed contracts with the clinical agencies utilized.
- 2. Shall provide liability insurance for the students.
- 3. Compile annually the evaluations of the precepted clinical experiences in conjunction with the clinical agency and maintain a written record of the findings.

#### Nursing Faculty Requirements

- 1. Shall facilitate orientation for preceptors regarding their preceptor role and responsibilities within the planned clinical experiences. The faculty member responsible for the course will ensure that all preceptors are provided a copy of these orientation materials.
- 2. Shall be responsible for no more than 10 students for any one clinical rotation.
- 3. Shall remain ultimately responsible for the precepted experience.
- 4. Shall be available by telephone or appoint a designee to respond to needs or concerns of students and the agency in a timely manner.
- 5. Shall communicate on a regular basis with students and agency preceptors regarding student progress and needs.
- 6. Shall assume ultimate responsibility for the student's grade.
- 7. Shall secure agreement from all involved parties acknowledging roles and responsibilities.
- 8. Shall continuously facilitate learning in the clinical environment and assess for suitability of the site.
- 9. Shall facilitate midterm and final clinical evaluations of the precepted experiences.

## **Student Requirements**

- 1. Shall perform a self-assessment to identify individual learning needs and shall develop a written list of expected learning outcomes to be approved by the faculty and provided to the preceptor to guide learning experiences.
- 2. Shall provide the faculty member supervising the experiences a copy of the schedule of clinical experiences as arranged between the student and the preceptor.
- 3. Shall submit required documentation to demonstrate successful completion of the clinical outcomes.
- 4. Shall work collaboratively and cooperatively with faculty member, preceptor, and clients in initiating and implementing nursing care.
- 5. Shall participate in regular conferences with faculty, although the frequency may vary per the needs of the student and the judgment of the faculty advisor in collaboration and with input from the preceptor.
- 6. Shall participate in evaluation of the clinical experience (a copy of the form is attached).

#### PRECEPTOR VERIFICATION FORM

Student Name:		

Term: \_\_\_\_\_

We are required by the Kentucky Board of Nursing (KBN) to have information about the preceptors who help educate new nursing students. We are also required as an educational institution educating new nurses to do license verification for all preceptors.

Please complete the information below and return this form (hardcopy, scan and email, or photo and text) to the faculty member coordinating the student synthesis placements:

#### Dr. Lisa Turner: E-mail: TurnerLi@berea.edu Cell phone: 859.489-5592 Office phone: 859.985-3625

Thank you for taking the time to help us with our compliance with the KBN.

Preceptor Full Name:
Preferred Contact Telephone #:
Facility and Unit:
KBN License #:
Have you had the opportunity to precept students in the past yes no
What is your main area of practice?
Do you hold any professional certifications in your area? yes no
If yes, please list:
How long have you worked in this area?
What is the highest level of nursing education completed?
Diploma ADN BSN MSN other (specify)
Signature:
Date:

## **CLINICAL PERFORMANCE GUIDELINES**

Clinical Performance is graded as Pass/Fail.

Note: During the time of the Governor declared COVID-19 Emergency hospitals have additional requirements and restrictions for students that are expected to be followed. Students are disallowed from caring for COVID-19 positive or symptomatic COVID-19 patients awaiting test results.

It is understood that the successful student in this course:

- Is self-directed and highly motivated
- Takes an active role in the learning process
- Displays attitudes which reflect a spirit of cooperation, flexibility and respect for all persons
- Demonstrates responsibility and accountability in all professional encounters
- Maintains a professional attitude with all persons always

All 1:1 clinical experiences for this course are preceptor supervised. The Faculty will be available by cell or land phone and will make at least weekly planned observations during the semester.

A total of **210 hours** of clinical experience is required for this course through direct patient care with a preceptor, on-campus activities and virtual clinical experiences. Beginning in Session B, students are expected to complete 2-3 twelve-hour shifts per week for a total of 192 hours of direct patient care with a preceptor. It is acceptable to work any of the preceptor's work schedule (i.e., evenings, nights, and weekends). All clinical hours must be completed on or prior to the last day of scheduled classes. See Appendix A for the Log to track clinical hours.

The faculty will work directly with the clinical agencies to set up the preceptor assignments. Students will be notified of their clinical site, preceptor's name, and contact information will be provided. Faculty will orient preceptor to the course syllabi, preceptor handbook and evaluation tools. Students are disallowed from contacting the hospitals or the nurse managers to obtain their preceptor.

Once faculty have assigned the student a preceptor; the student is expected to set up an initial meeting with his/her preceptor. This meeting can be made prior to their first clinical day or achieved at the beginning of the first clinical day. This initial meeting may also include scheduling clinical days and orientation to the unit. The student is disallowed from asking preceptors for non-illness related schedule requests for personal reasons.

The faculty will complete evaluation conferences with both the student and the preceptor at midterm and during the last scheduled week of the student's clinical experience. To pass this course, students must receive a satisfactory clinical performance evaluation, as documented on the course clinical evaluation tool (See Appendix B).

Students are expected to complete and submit to the faculty the Clinical Agency/Preceptor Evaluation Form by the last day of the semester (See **Appendix C**).

Throughout this course students are required to submit on Moodle five (5) Clinical Paperwork assignments related to care of a selected patient using the guidelines and template in Appendix D.

Students are expected to follow the clinical safety policy articulated in the Nursing Student Handbook as well as agency policies at their assigned clinical site. The preceptor has the right and responsibility to interrupt student practice that is deemed unsafe and may remove the student from the setting if necessary.

The Nursing Department is participating in the National Council of State Boards of Nursing (NCSBN) Safe Student Reporting study to reduce errors in clinical settings including skills laboratory and simulation areas. The Safe Student Reporting (SSR) tool is an anonymous online platform that collects data on the nature and frequency of student errors and near misses. Should a student encounter a near miss/error in the clinical setting, he/she must report it to their preceptor and course faculty for such reporting purposes (**Nursing Student Handbook 20-21**, p. 13-14).

In the event of clinical errors or near misses, the student will assess the patient, document in the medical records appropriately and complete all the required agency forms. In precepted experiences, the student has the responsibility of notifying the faculty **immediately**. It is the student's responsibility to schedule an appointment with the faculty and program chair as soon as possible following the clinical experience in which the error occurred. If the student does not notify the faculty of the error, this will be considered an effort to conceal the error. **Any efforts to conceal a clinical error will be grounds for immediate failure of the course.** 

Students are expected to be on time for precepted experiences. Reports of being tardy from your preceptor will result in a clinical unsatisfactory for that day. Students are not only representing themselves as potential employees, but as representing this college and the nursing program. The course faculty will take the preceptor's word that the student was late, so it is in the student's best interest to **assess the preceptor's expectations and then exceed them**. For instance, if the preceptor normally arrives 15 minutes early to prepare for his or her shift, the student will also want to be 15 minutes early. **Being a "No call/no show" will result in immediate course failure.** 

Each student must email Ms. Lori McKeel (Administrative Assistant) to arrange transportation. The email should include specific dates, pick up and return times and location. Each student will input his/her schedule established with the preceptor into Box course calendar so that faculty know when each student is in clinical and plan site visits. Realizing that schedules are subject to change, students are expected to submit any updates to their work schedule as they arise and notify Ms. Lori McKeel of any transportation changes. Students are expected to carpool when possible up to two individuals per van.

Students are responsible for notifying by phone their faculty and preceptor and notify via email Ms. Lori McKeel if they are unable to attend a scheduled clinical day (e.g., significant illness, inclement weather, Motor Pool closing). Any charges incurred for failure to follow these mechanisms to release the vehicle will be the responsibility of the student.

#### STUDENT ASSIGNMENTS R/T WITH CLINICAL

### Medication Calculation Clinical Competency Pass/Fail)

Medication calculation exams are administered during NUR 226, NUR 350, NUR 355, NUR 400, NUR 448 and NUR 450. Students are required to pass a 10-20 question medical math test with 90% proficiency. Students, who do not pass the medical math test on their first attempt, will be required to a new version of the exam. Students may not pass medications in the clinical setting until they have successfully achieved the 90% proficiency standard. The student has up to one week to complete required remediation and retest. Students who do not achieve 90% after three attempts, will receive clinical failure, which results in course failure. (Fac. Org 8/26/19; revised 7/27/20) Nursing Student Handbook 20-21, p. 13).

#### **Clinical Skills Competency (Pass/Fail)**

Clinical skills competency evaluations occur at the beginning of NUR 450. Students are required to pass a randomly selected nursing skill with 100% proficiency. Students who do not pass the skill competency check off on their first attempt, will be required to remediate and reattempt the skill. Students may not begin their clinical rotation until they have successfully passed the competency evaluation with the 100% proficiency standard. The student has up to one week to complete required remediation and demonstrate proficiency in the skill. Students who do not achieve 100% after **three attempts**, will receive clinical failure, which results in course failure.

### **Clinical Hours Log**

Students are expected to track their completed clinical shift on the Clinical Hours Log. Nurse preceptor are asked to sign the log to verify each shift worked with the students. See Appendix A for Clinical Hours Log.

#### Midterm & Final Clinical Evaluation

The Berea College Faculty member will consult with the nurse preceptor when completing the midterm and final clinical evaluation of the student. Preceptors are encouraged to add written evaluation in on the allocated space of the form. Preceptors are encouraged to notify the Berea College Faculty Member as soon as possible of any concerns about the student's clinical performance throughout the semester. Students are encouraged to add a written self-evaluation in the allocated space on the form as well. **See Appendix B for Clinical Evaluation Tool.** 

#### **Clinical Agency/Preceptor Evaluation Form**

Students are asked to complete the clinical agency/preceptor evaluation form at the end of the term to give the Berea College Nursing program feedback on their clinical experience. As requested, students and/or faculty will complete evaluation forms for the clinical agency as well. **See Appendix C for Clinical Evaluation Tool.** 

#### **Clinical Paperwork Assignments**

Students will complete five (5) clinical paperwork assignments related to care of a selected patient using the guidelines and template in **Appendix D**. Each assignment is worth 2% of the course grade. See Appendix D for Clinical Paperwork assignment details.

#### **Evidence Based Practice Recommendations for Care of Complex Patient**

This assignment is designed to assist the student in further developing critical thinking and clinical reasoning as well as oral presentation skills. Each student will present evidenced based practice recommendations for care of a complex patient encountered during the rotation. Student will develop the case, discuss all aspects of the case including, but not limited, to: medical diagnoses, abnormal labs, pathophysiology, medications and treatments, any ethical issues, psychological issues, familial issues, patient and family teaching issues, etc.

Students must develop a presentation draft proposal which includes a detailed description of the presentation topic and three (3) student learning objectives. This draft proposal is to be developed in consultation with a member of the faculty once the student identifies the case he/she wants to present. Prior to the presentations, students must submit electronic copies of the presentation, reference list and links or electronic copies of the articles in the reference list. Students will be allowed 15 -20 minutes to present followed by a 5 minute Q&A period.

The presentation must discuss and evaluate the evidence-based practice recommendations that are relevant to the care of this patient. In the presentation students must include at least 4 nursing research and at least 4 interdisciplinary research or non-research articles published within the past five years. Students are expected to conduct a literature review using CINAHL and other health databases containing peer-reviewed articles. The presentation will incorporate a minimum of five (5) related NCLEX-style questions. The student is expected to present a synthesis of the body of evidence, not a summary of individual studies, for evidence-based nursing care. Professional dress attire is expected when presenting.

# The Evidence Based Nursing Practice Recommendations for Care of Complex Patient Grading Rubric is attached as Appendix E.

Appendix A
NUR 450 Clinical Hours* Log Spring 2021

	Date, Time	Hours	Hours Needed	Activity	Signature
			210		
oital es	Varies	1	209	Med Math Competency & Skills Check-off	
Non-Hospital Activities		1	208	Orientation to Hospital/Unit	
NO		16	192	Swift River Assignments	
	1.				
	2.				
	3.				
	4.				
	5.				
	6.				
ts y 21	7.				
Clinical Shifts Mar. 31 – May 21	8.				
linica r. 31 ·	9.				
Za C	10.				
	11.				
	12.				
	13.				
	14.				
	15.				
	16.				

\*May not count travel time to/from clinical site as clinical hours.

\*Students should complete sixteen (16) 12-hour shift to get remaining 192 clinical hours.

#### Appendix B NUR 450 Clinical Evaluation Tool

Name of Student	Student ID #	Semester/Year <u>Spring 2021</u>
Agencies and Sites:	Abser	nces

<u>Guidelines for Clinical Grading</u>: All clinical performance criteria must be satisfactorily met to receive a satisfactory grade at mid-term and at the end of the clinical experience.

Satisfactory (S) - Demonstrates all of the following behaviors:

Competent in performance at the level of a senior nursing student. Shows appropriate level of independence while providing client care. Demonstrates satisfactory progress in meeting Clinical Performance Criteria as evidenced by performance and written work. By the end of the course satisfactorily meets all Clinical Performance Criteria and Student Learning Outcomes. Is prepared for clinical experiences, follows instructions, and performs safely at all times.

<u>Unsatisfactory</u> (U) - Demonstrates one or more of the following behaviors:

Unable to show competence at the level of a senior nursing student. Fails to demonstrate satisfactory performance meeting one or more Clinical Performance Criteria as evidenced by performance and/or written work. Lacks appropriate level of independence while providing client care. Is ill-prepared, fails to follow instructions and/or perform safely.

Note: Endangering client safety (physical or psychological) by not performing at the level of a reasonably prudent student may constitute grounds for dismissal from the Nursing Program at any point in the semester.

By the end of the course students must satisfactorily meet all of the following Student Learning Outcomes.

1. Appraise critical thinking when providing nursing care that incorporates ethnic and cultural considerations derived from a liberal arts education.

	Mid-Term Date																																										l Date
S	U	S	U																																								
S	U	S	U																																								
S	U	S	U																																								
_	D S S	Date S U S U	DateSUSUSU																																								

**Comments:** 

ERFORMANCE CRITERIA: The student will:		Mid-Term Date		l Date
1. Demonstrate comprehensive understanding of the assessment and management of pain and suffering.	S	U	S	U
2. Provide comprehensive patient-centered care for an individual or group of individuals, including end-of- life care.	S	U	S	U
3. Organize workload to manage time effectively (NCLEX Blueprint: Management of care)	S	U	S	U
4. Implement effective and timely interventions in response to a patient's changing status.	S	U	S	U
5. Evaluate plan of care and makes changes based on outcomes.	S	U	S	U
6. Develop discharge plans based on evaluation of patient needs.	S	U	S	U

3. Embody professional accountability for one's self and nursing practice including civility, continuous professional engagement and lifelong learning as well as adherence to the ANA Code of Ethics and ANA Scope and Standards for Practice.

PERFORMANCE CRITERIA The student will:	Mid-Term Date		Fina	l Date
1. Function competently within legal scope of practice.	S	U	S	U
2. Demonstrate professionalism, including attention to appearance, demeanor, respect for self and others, and attention to professional boundaries with patients, families, and caregivers.	S	U	S	U
3. Practice in a manner consistent with a code of ethics for registered nurses. (NCLEX Blueprint: Management of care)	S	U	S	U
4. Maintain client confidentiality and privacy. (NCLEX Blueprint: Management of care)	S	U	S	U
5. Submit complete clinical assignments on time.	S	U	S	U
6. Shows up prepared and on time for clinical; provides appropriate notification for late arrival or absence.	S	U	S	U
Comments:	•		•	

#### 4. Practice effectively as a baccalaureate graduate within an ever-changing complex healthcare system.

PERFORMANCE CRITERIA The student will:		Mid-Term Date				Final Date	
1. Apply leadership concepts, skills, and decision making in the provision of high quality nursing care, healthcare team coordination, and the oversight and accountability for care delivery. (AACN Baccalaureate Essentials, 2008, Essential II)	S	U	S	U			
2. Demonstrate leadership and communication skills to effectively implement patient safety and quality improvement initiatives within the context of the interprofessional team. (AACN Baccalaureate Essentials, 2008, Essential II)	S	U	S	U			
3. Demonstrate a basic understanding of clinical site's organizational structure, mission, vision, philosophy, and values. (AACN Baccalaureate Essentials, 2008, Essential II)	S	U	S	U			

# 5. Develop competence in using electronic resources and healthcare technology to communicate, mitigate error, and support clinical decision making.

PERFORMANCE CRITERIA The student will:	Mid-Term Date								Final	Date
1. Demonstrate effective use of technology and standardized practices that support patient safety.	S	U	S	U						
2. Respond appropriately to clinical decision-making supports and alerts.	S	U	S	U						
3. Document and plan patient care in an electronic health record.	S	U	S	U						
4. Uphold ethical standards related to data security, regulatory requirements, confidentiality, and patient's right to privacy.	S	U	S	U						

**Comments:** 

# 6. Function effectively as an interprofessional team member fostering open communication, mutual respect, and shared decision making.

PERFORMANCE CRITERIA The student will:	Mid-Term Date			nal ate
1. Follow communication practices that minimize risks associated with handoffs among providers and across transitions in care.	S	U	S	U
2. Participate in building consensus, resolving conflict, and maintaining civility in health care workplaces.	S	U	S	U
3. Adjust role as a team leader or member based on the situation.	S	U	S	U
4. Describe scopes of practice and roles of health care team members.	S	U	S	U

PERFORMANCE CRITERIA: The student will:	Te	id- rm ate		nal ate
1. Demonstrate effective use of strategies to reduce risk of harm to self or others. (QSEN: Safety)	S	U	S	U
2. Identify factors within a patient care setting and healthcare organization that create a culture of safety (such as, open communication strategies and organizational error reporting systems) (QSEN: Safety)	S	U	S	U
3. Appropriately communicate observations or concerns related to hazards and errors. (QSEN: Safety)	S	U	S	U
4. Use national patient safety resources for professional development and attention to safety in care settings. (QSEN: Safety)	S	U	S	U

#### **Comments:**

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# 8. Discuss the graduate nurse's role in basic quality and safety investigations within an ever-changing complex healthcare system.

<b>PERFORMANCE CRITERIA:</b> The student will:	Te	id- erm ate	Final Date
1. Use tools (such as flow charts, cause-effect diagrams) to make processes of care explicit.	S	U	S U
2. Seek information about quality improvement projects in the care setting.	S	U	S U

#### 9. Evaluate the use of evidence based practice in planning, implementing and evaluating nursing care.

PERFORMANCE CRITERIA The student will:	Te	id- rm ate	Final Date
1. Implement evidence based nursing interventions for managing the acute and chronic patient care and promoting health.	S	U	S U
2. Use evidence based practices to guide health teaching, health counseling, screening, referral and follow-up.	S	U	S U
3. Participate in the process of retrieval, appraisal, and synthesis of evidence in collaboration with other members of the health care team to improve patient outcomes.	S	U	S U

**Comments:** 

#### 10. Design comprehensive health promotion and disease prevention education for clients.

PERFORMANCE CRITERIA The student will:	M Te Da			nal ate
1. Implement appropriate patient teaching that reflects developmental stage, age, culture, spirituality, patient preferences, and health literacy to foster patient engagement in their care.	S	U	S	U
2. Incorporate comprehensive teaching to improve health outcomes related to health promotion and disease prevention.	S	U	S	U
3. Collaborate with others to develop an intervention plan that considers determinants of health, available resources, and the range of activities that contribute to health and the prevention of illness, injury, disability, and premature death.	S	U	S	U

## **MID-TERM CLINICAL GRADE/EVALUATION**:

clinical performance criteria and progress, specify the student lear	l course objectives. If the student is not making satisfactor ning outcome and criteria not being met. See attached	
Preceptor comments:		
SUMMARY/COMMENTS:  The student has/has not made satisfactory progress in meeting clinical performance criteria and course objectives. If the student is not making satisfactory progress, specify the student learning outcome and criteria not being met. See attached Unsatisfactory Clinical Evaluation Form (if applicable)    Preceptor comments:		
Preceptor Signature	Date	
Student's comments:		
Student Signature	Date	
Faculty comments:		
Faculty Signature	Date	

# FINAL CLINICAL GRADE/EVALUATION (after 210 clinical hours)

## **SUMMARY/COMMENTS:**

See attached Unsatisfactory Clinical Evaluation Form (if applicable)

## **Preceptor comments:**

Preceptor Signature	Date	
Student's comments:		
Student Signature	Data	
	Date	
Faculty comments:		
Faculty comments.		
Faculty Signature	Date	

#### Appendix C Clinical Agency/Preceptor Evaluation Form (Completed by the student)

Name of Clinical Agency/Unit		
Name of Preceptor		
Rotation Dates: From	То	

#### **Circle the Appropriate Rating:**

-

Strongly Agree = 5	<u>Agree</u> = $\underline{4}$	<u>Undecided</u> = $\underline{3}$	$\underline{\text{Disagree}} = \underline{2}$	Strongly Disagree = 1
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1.	Teamwork was demonstrated by the staff with clients and co-workers.	5	4	3	2	1
2.	Learning opportunities were available to help me meet clinical expected outcomes.	5	4	3	2	1
3.	Census was adequate to meet clinical expected outcomes.	5	4	3	2	1
4.	Variety of clients to meet clinical expected outcomes.	5	4	3	2	1
5.	Resources (print and/or electronic) were readily available to assist me with my learning needs.	5	4	3	2	1
6.	Staff displayed professional and caring behaviors.	5	4	3	2	1
7.	Opportunities were available to collaborate with different types of health care providers.	5	4	3	2	1
8.	Staff members were open to questions and assisted me with client problems as needed.	5	4	3	2	1
9.	I had the necessary supplies to provide optimal client care.	5	4	3	2	1
10.	Equipment was in good working order. No safety concerns were identified.	5	4	3	2	1
11.	I was allowed to work with patient care technologies and now have a greater understanding of informatics.	5	4	3	2	1
12.	I would recommend this clinical agency & unit for future clinical rotations	5	4	3	2	1
13.	I would recommend utilizing this preceptor for future clinical experiences.	5	4	3	2	1

\_\_\_\_\_

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14. List those things that were impressive about the care clients received on the assigned unit.

15. List those things that were concerning (if any) about the care clients received on the assigned unit.

16. List measures that could improve the quality of the clinical rotation.

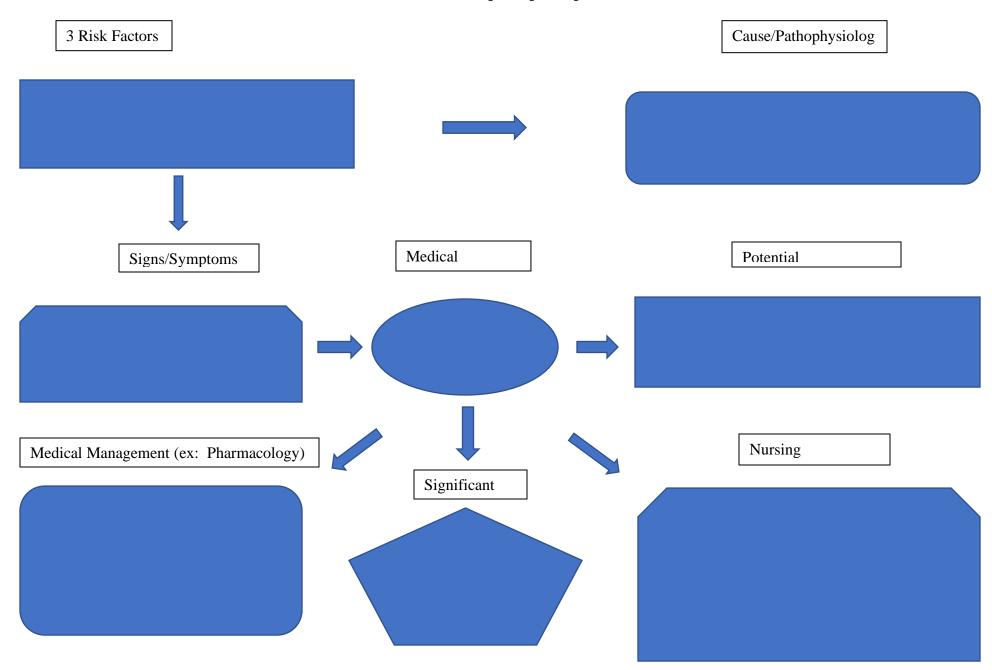
\*Please return to your Faculty Instructor when completed.

#### Appendix D Clinical Paperwork

Over the course of the semester, you will submit five (5) clinical assignment that each consist of self-reflection of own practice and a concept map of an assigned patient. **See course Moodle page for due dates**. About once each week, you need to take some time to reflect upon this learning experience in a thoughtful way. Reflect on the questions below and write a summary of your reflection. Then complete a concept map for one patient you cared for in clinical this week.

- 1. Date of clinical
- 2. What went well this week? What lessons did you learn? What are you proud of?
- 3. What were your experiences giving shift report? What were you thinking and feeling during report? What went well and what would you like to improve?
- 4. What internal or exterior barriers (if any) impeded your learning this week? How might you overcome these barriers in the future?
- 5. As a result of this week's clinical, what topic do you want to learn more about the evidence of? Explain why.
- 6. What are your learning goals for next week's clinical? How do you plan to achieve them?
- 7. For the patient selected for your concept map, provide brief history and rationale on why you selected this patient.

**Patient Concept Map Template** 



Criterion	Criterion Weight	Exceptional (92-100)	Acceptable (83-91)	Marginal (77-82)	Unacceptable (Less than 77)				
Completeness	40%	Response addressed all elements of the assignment prompt.	Response addresses most of the elements of the assignment prompt.	Response addresses some elements of the assignment prompt.	Response does not address important elements of the assignment prompt.				
Quality of Response	40%	Response demonstrates an excellent understanding of the topic(s) through well- reasoned and thoughtful reflections, it is factually correct and substantive.	Response demonstrates a good understanding of the topic(s) through well- reasoned and thoughtful reflections. It is factually correct but lacks full development.	Response demonstrates a limited understanding of the assignment topic. It includes basic examples but lacks substantive information.	Response demonstrates an elementary understanding of the assignment prompt. It is incomplete, off- topic, incorrect, or irrelevant to the journal prompt.				
Organization	10%	Assignment submission is logical and effective.	Assignment submission is generally logical and effective with a few minor problems.	Assignment submission is somewhat illogical and confusing in places.	Assignment submission lacks logical order and organization.				
Mechanics	10%	Response is grammatically correct, uses correct APA format when appropriate, and proper sentence structure is used.	Few or no spelling errors; some minor punctuation mistakes. When APA is used, has some slight errors.	Several spelling and punctuation errors. When APA is used, major errors.	Many instances of incorrect spelling and punctuation. No use of APA although clearly APA was needed.				
Submitted on time		Clinical paperwork is due every 2-3 shifts of the student's schedule. Paperwork that is submitted later than that will be deducted 5 points for each day it overdue.							

**Clinical Paperwork Assignment Grading Rubric** 

#### Appendix E Evidence Based Practice Recommendations for Complex Patient Grading Rubric

Name:			Topic:	То	tal Score:	_/80
		A (9-10)	B(7-8)	C (5-6)	D(0-4	Score
Presentation Proposal	Proposal 10 points	Detailed description of complex patient, identify related EBP topic; 3 measureable learning outcomes; & submit by deadline on Moodle	Description of complex patient or EBP topic lacks clarity or detail; < 3 and/or not measureable learning outcomes; &/or submit 1 day late on Moodle	Description of topic present but minimally described, 2-3 learning outcomes identified but not student learner focused, submitted late	Did not submit proposal prior to presentation	
Content- Based Categories	Content 15 points	Material clearly relates ideas: uses a variety of source materials; Utilizes data from their evidence to support patient scenario	Sufficient material: many good points, but not entirely balanced/little variation; Data does not consistently support patient scenario	The beginning of some ideas; not clearly explored or supported or connected: Little data presented that supports patient scenario	Ideas aren't clear; does not provide support; No data presented that supports patient scenario	
Presentation	Evidence-sed practice research -15 points	$\geq$ 4 nursing research & $\geq$ 4 interdisciplinary research or non- research articles published within the past 5 years	Incorporates two relevant, EBP nursing research articles into presentation but fails to connect it to EBP.	Incorporates two relevant EBP nursing research articles into presentation but not recent within five years	Does not incorporate two EBP nursing research articles into presentation	
Categories	Coherence and Organization - 10 points	Ideas are clearly developed; uses specific appropriate examples; skillful transitions; wellorganized	Most information relates to ideas; is presented a logical sequence; some examples and some transitions	Ideas are loosely connected by examples; organization and flow are choppy	Ideas dijointed: development of idea is vague: no order to presentation	
	Creativity 10 points	Original presentation, engaging and informative; Presents data in engaging and clear visuals/graphics	Original presentation, interesting; Has a few visual graphics but mostly bullet points	Little original content; Primarily bullet points and/or sentences; no visual graphics,	No real original idea; No bullet points nor visual graphic, All sentences	
	Presentation Length - 10 points	Presentation includes 15-25 slides (excluding title, purpose/objective, and reference slides)	Presentation content is 10 -14 slides or 26 – 30 slides (excluding title, purpose/objective, and reference slides).	Presentation content 5-9 slides or 31-35 slides (excluding title, purpose/objective, and reference slides)	Presentation content less than 5 slides or exceeds 36 slides (excluding title, purpose/objective, and reference slides)	
	Slide Notes - 10 points	Clear, concise, and accurate notes on each slide, Notes are informative and reinforce and/or explain the slides	Mostly clear, concise, and accurate notes on each slide, Notes are informative and reinforce and/or explain the slide	Minimal or excessively lengthy notes on each slide, Notes may conflict or fail to explain the slide	Notes absent or insufficient on most slides. Difficult to follow presentation.	

Adapted from: Liz Gravelle, College of Saint Rose: Information Technology Evaluation Services. NC Department of Public Instruction Last updated January 2011.