

Robeson Community College

Preceptorship Manual

Department of Nursing



Ensuring Excellence in Nursing Education
~ Over 30 Years ~

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(For Front and Back Copies)

ROBESON COMMUNITY COLLEGE

DEPARTMENT OF NURSING

PRECEPTORSHIP MANUAL



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Purpose

This manual is designed to provide preceptors affiliated with and nursing students in the Department of Nursing at Robeson Community College with information concerning the policies and procedures specific to the Nursing Preceptorship Program. Robeson Community College Nursing Department reserves the right to change, amend or delete any of the contents of this manual with the notification of students and preceptor. This manual is designed as a supplement to the **Robeson Community College General College Catalog and Nursing Handbook**.

ROBESON COMMUNITY COLLEGE

Nursing Preceptorship Manual

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Dear Nursing Preceptor,

On behalf of the nursing faculty, staff and students, we would like to **THANK YOU** for serving as a preceptor for Robeson Community College (RCC).

According to the NC Board of Nursing, the Preceptorship Experience is designed to provide students with the opportunity to apply and synthesize knowledge (www.ncbon.com). Therefore, preceptorship experiences are invaluable, in that they provide student nurses with clinical opportunities that ease their transition from student to practice.

We believe the unique knowledge, skills, and resources you have as a practicing nurse will facilitate the student's learning. So, during the experience, the role of the faculty member shifts to one of facilitator and evaluator. However, "the nurse faculty maintains the ultimate responsibility and accountability for the student's" achievement of student learning outcomes and clinical competence. (www.ncbon.com).

Again we would like to express our sincere appreciation for your participation in the Preceptorship experience.



Sincerely,

Eva M. Meekins

Eva Meekins, RN, BSN, MN, MHA
Department of Nursing, Director

Mission

The Nursing program supports the mission of the North Carolina Community College System and the mission of Robeson Community College (RCC). The faculty is committed to providing accessible high quality nursing education to meet the diverse and changing health-care needs of the service area and to promoting the development of qualified students prepared for the professional role of registered nurse at the entry level. Graduates of this program meet the education requirements to take the National Council Licensure Examination (NCLEX). The philosophy of the Department of Nursing is derived from statements about the health, quality of life, achievement of potential, the individual, environment, health, nursing, the practice, and education of the Nurse. Within this mission, the goal of nursing faculty is to promote the highest quality of nursing care to the individual, families and significant persons, and the community. The aim is to facilitate optimum health, quality of life and achievement of potential for the individual.

Associate Degree Nursing Education

Associate degree nursing has been a vital part of the nursing landscape for the last 50 years. Equally, the program is a viable choice for students entering the profession. Over the years, ADN education has had a substantial influence on the delivery of quality care in the United States (Mahaffey, 2002). According to the NCBON Administrative Code and General Statutes (2012):

“Associate Degree in Nursing (ADN)/Diploma in Registered Nursing - Curriculum components for the ADN/Diploma in Registered Nursing provides for the attainment of knowledge and skill sets in the current practice in nursing, community concepts, health care delivery, communications, therapeutic interventions and current trends in health care. For this program type, client is the individual, group of individuals, and family.” (NCBON Administrative Codes, 2012, p.6).

Practical Nursing Education

Practical Nursing education has an equally rich history in this nation that dates back the early 1900's. After licensing, practical nurses have made a significant contribution to past and now the current health care delivery system. (Hill & Howlett, 2005). According to the NCBON, the practical nurse's diploma affords individuals to experience a nursing curriculum that prepares:

“Graduates [to function] in a dependent role in providing direct nursing care under the direction of a registered nurse or other health care provider as defined by the Nursing Practice Act. Curriculum components provide for the attainment of knowledge and skill sets in the current practice of practical nursing, communications, therapeutic interventions, including pharmacology, growth and development and current trends in health care. For this program type client is the individual, or group of individuals.” (NCBON Administrative Codes, 2012, p.6).

Nursing Education

Nursing education in the North Carolina Community College System, is a process that facilitates changes in behavior, the acquisition of knowledge, skills, and attitudes necessary to function in the role of the entry-level nurse. The curriculum is conceptually based and founded on principles of adult and collaborative learning. Basic assumptions include self-direction, utilizing adult experience, problem- and activity-centered teaching (Rachel, 2002).

It incorporates evidence-based nursing theory and practice, general education, and the sciences in an environment conducive to learning. The conceptual design defines the essential elements as the environment, quality of life, achievement of potential, and health. The organizing framework contains content related to the individual, the health care system and nursing.

The NURSING program at Robeson Community College provides an education that is flexible, progressive, and sensitive to the changing needs of the individual, significant support person(s), and community. Through these educational experiences, students will have the opportunity to develop critical thinking and problem solving skills.

The Nursing Curriculum is based on learning theory rooted in neurobiology. Neuroscientists discovered that the brain develops circuitry and grows as a result of experience and learning. Learning is about making connections. Neurologists and cognitive scientists agree that humans build their minds by “constructing” mental structures and “hands-on” concrete application that connects and organizes information Barkley, Cross & Major (2005).

Learning is a continuous process that results in a change of behavior and occurs when the individual is challenged and motivated to enhance personal knowledge. Teaching and learning is an interactive process between teacher and learner. The responsibility of the faculty in the RCC Department of Nursing is to facilitate the student’s understanding and ability to meet the competencies for nursing practice through the design and evaluation of learning experiences. The nursing student is responsible for actively participating in learning experiences and develops the knowledge, skills, and attitudes necessary to provide quality individual centered nursing care.

Conceptual Framework

The conceptual model provides a mental framework that prepares learners for new instruction and motivates the learner by making a meaningful connection to instructional content. The learner must attain mastery of each part of the framework (the individual, the healthcare system and nursing) in order to understand the complete curriculum (Knowles, 2005). The domains of the individual, the healthcare system, and nursing provide the conceptual framework guiding the NURSING curriculum. Concepts are organized within each these domains and learning occurs from simple to complex.

DEFINITIONS

Individual: The RCC nursing faculty believe that each individual is a complex, multidimensional, unique, and significant being, possessing inherent value and worth, and a member of a family, community, and culturally diverse society. All individuals have dynamic bio-physical, psychological, socio-cultural, spiritual, and developmental needs that contribute to health, quality of life, and achievement of potential. Adaptation to the environment requires the individual to change throughout the lifespan. Each individual has a right to healthcare and to information that will assist him or her to participate actively in his or her health care in order to achieve the highest level of wellness possible. All individuals should be cared for, respected, nurtured, understood, and assisted. In order to provide and manage care, nurses must view the individual at the center of any nursing activity.

Healthcare System: According to von Bertalanffy (1968) a system consists of the coming together of parts, the power comes from the energy of the interconnection and the way the parts come together. The community healthcare system is a macro-system and consists of a variety of parts or microsystems. Clinics, hospitals, pharmacies, laboratories, long term care and Internet sites are microsystems that are connected by patients and information to improve health. (IOM, 2001)

Nursing: Nursing is a science and the art of integrating and assimilating knowledge and skills derived from biological, sociological, and behavioral sciences and information technology to deliver

client-centered, culturally competent, holistic care. Through caring, empathy, ethics, and the development of a therapeutic relationship with the individual and significant support person(s), the nurse integrates the art of nursing with the scientific foundation for nursing practice that utilizes the nursing process. Incorporating documented best practice, the nurse functions autonomously and collaboratively with the interdisciplinary team to assist individuals to reach their maximum health potential through assurance of quality client outcomes, promotion of wellness, prevention of illness, and restoration of health or assistance in achieving a dignified death.

Environment: The individual is in constant interaction with a changing environment that consists of both internal and external forces that varies throughout the lifespan and has the potential to cause stress in the individual. The nurse can assist the individual to alter aspects of the environment and to utilize his/her innate and learned coping mechanisms to adapt to these stressors.

Health: Health is a dynamic, ever-changing state of mental, physical, and spiritual well-being, which exists on a continuum from optimal wellness to illness and ending in death. The individual's needs for healthcare are determined by his/her position on the continuum. Each individual's health is based on his/her cultural perceptions and beliefs of health and illness and the ability to adapt to internal and external environmental forces. The individual is responsible for and capable of identifying, learning, and practicing health behaviors that can promote wellness, prevent illness, restore or maintain wellness, or achieve a dignified death.

Quality of Life: Quality of life involves five domains including physical, functional, psychological, social, and spiritual well-being. The individual's perception of and satisfaction with activities of daily living contributes to their worth, meaning, or satisfaction. This empowers the individual to cope successfully with the full range of challenges encountered in the real world (Ignatavicius: *Medical-Surgical Nursing 5th Ed p.5*).

Achievement of Potential: Achievement of potential is the individual's growth toward attaining one's utmost ability and quality of life. It is based on the individual's choices, perceptions, personal goals, life experiences, and holistic health.

NLNAC Core Competencies: The eight core competencies outlined by the NLN are; professional behaviors, communication, assessment, clinical decision making, caring interventions, teaching and learning, collaboration, and managing care (NLN, 2000).

Institute of Medicine Competencies: The five core competencies identified by the IOM for healthcare providers are; patient centered care, interdisciplinary teams, evidence-based practice, quality improvement, and informatics. (IOM, 2005)

References

- Berman, A. Snyder, S., Kozier, H., Erb, G.. (2008). Kozier & Erb's Fundamentals of Nursing: Concepts, Process and Practices (8th ed.) Upper Saddle Creek, NJ: Prentice Hall,
- Ignatavicius, D., Workman, M.L., (2006). *Medical-Surgical Nursing: Critical Thinking For Collaborative Care* (5th ed.). Philadelphia: Saunders.
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- North Carolina Board of Nursing (NCBON, 2002). Educational Rules 21 NCAC 36 .0321 CURRICULUM. <http://www.ncbon.com>

*Original Philosophy and Archived 2009
CIP Philosophy Developed 2007
Adopted by RCC Nursing Faculty 2009*

ASSOCIATE DEGREE NURSING PROGRAM AND STUDENT LEARNING OUTCOMES

Program Outcome <i>(adopted from NURSING CIP)</i>	Student Learning Outcome
1. Practice professional nursing behaviors incorporating personal responsibility and accountability for continued competence.	<ul style="list-style-type: none"> a) Demonstrate mastery of cognitive and psychomotor learning of nursing concepts. b) Demonstrate professional accountability for competence in the care of individuals and while working as a members of the health team.
2. Communicate professionally and effectively with individuals, significant support person(s), and members of the interdisciplinary healthcare team.	<ul style="list-style-type: none"> a) Professionally communicate accurate health care information to individuals, support persons and members of the health team. b) Effectively report information and articulate relationships, similarities, and differences among ideas when communicating with members of the health team.
3. Integrate knowledge of the holistic needs of the individual to provide an individual centered assessment.	<ul style="list-style-type: none"> a) Demonstrate mastery of cognitive, affective and psychomotor concepts/skills in the completion of the individual centered assessment in the practice area. b) Remain cognizant of holistic care needs when conducting an individual centered assessment and providing comprehensive care in the clinical practice area.
4. Incorporate informatics to formulate evidence-based clinical judgments and management decisions.	<ul style="list-style-type: none"> a) Demonstrate competence in computer applications and operations in the formulation of clinical judgments and care methods. b) Use computer applications responsibly and effectively as tools for creatively researching best practice concepts, organizing electronic patient information, analyzing clinical problems, and/or predicting client outcomes. c) Apply evidence to clinical management decisions when deciding between care options, generating possibilities, analyzing ideas and arguments and predicting consequences.
5. Implement caring interventions incorporating documented best practices for individuals in diverse settings.	<ul style="list-style-type: none"> a) Assign, delegate, or supervise other personnel in implementing treatment options for individuals in diverse settings. b) Utilize evidence based and/or best practices guidelines to complete and/or supervise care, and teach and evaluate the effectiveness of caring interventions with diverse groups.
6. Develop a teaching plan for individuals, and/or the nursing team, incorporating teaching and learning principles.	<ul style="list-style-type: none"> a) Demonstrate effective use of the written and spoken language in creating and articulating a teaching plan for individuals. b) Consider and apply evidence based teaching-learning principles in the design and execution of a teaching plan for the nursing team.
7. Collaborate with the interdisciplinary healthcare team to advocate for positive individual and organizational outcomes.	<ul style="list-style-type: none"> a) Demonstrate cognitive knowledge of interdisciplinary health team concepts in relation to organizational outcomes. b) Demonstrate collaboration with the interdisciplinary team to plan and/or advocate for positive care outcomes for individuals. c) Identify and/or secure health care and/or community resources that promote positive individual and organizational outcomes.
8. Manage health care for the individual using cost effective nursing strategies, quality improvement processes, and current technologies.	<ul style="list-style-type: none"> a) Utilize the nursing process to cost effectively manage health care for individuals. b) Employ quality improvement process, current technology and cost effective strategies to provide safe and effective nursing care to individuals.

PRACTICAL NURSING PROGRAM AND STUDENT LEARNING OUTCOMES

PN Program Outcome	Student Learning Outcome
1. Practice professional nursing behaviors incorporating personal responsibility and accountability for continued competence upon successfully completing the National Council Licensure Practical Nursing Examination (NCLEX-PN)	<ul style="list-style-type: none"> a) Demonstrate professional accountability for continued competence in the care of individuals while working as a member of the healthcare team and under the supervision of the registered nurse. b) Participate in assessing, planning, implementing, and evaluating nursing care for children and adults under the supervision of the registered nurse. c) Demonstrate nursing behaviors specific to the role of nurse’s caregiver with an emphasis on cost effectiveness, quality improvement processes, delegation, legal/ethical/professional issues, wellness/illness patterns, and basic nursing competencies.
2. Apply nursing knowledge and skills to provide nursing care specifically to children and adults under the supervision of the registered nurse.	<ul style="list-style-type: none"> a) Demonstrate beginning understanding of nursing process to promote/maintain/restore optimum health for diverse clients throughout the life span with a specific focus on children and adults. b) Demonstrate mastery of cognitive and psychomotor competencies that promote/maintain/restore optimum health for diverse clients throughout the life span.
3. Communicate professionally and effectively with clients, significant support person(s) and members of the healthcare team.	<ul style="list-style-type: none"> a) Professionally communicate accurate health care information to the registered nurse, clients, support persons and members of the healthcare team. b) Effectively report information and articulate relationships when communicating with the registered nurse and other members of the health care team.
4. Incorporate informatics to meet client needs.	<ul style="list-style-type: none"> a) Demonstrate competence in computer applications and operations in the formulation of health care needs. b) Use computer applications responsibly and effectively as tools for organizing electronic patient information and promoting positive patient outcomes.
5. Implement caring interventions incorporating documented best practices for individuals in diverse settings under the supervision of the registered nurse.	<ul style="list-style-type: none"> a) Assign, delegate or supervise unlicensed personnel in implementing treatment options for individuals across the life span in diverse settings. b) Utilize best practices guidelines to provide care and reinforce teaching of caring interventions. c) Demonstrate collaboration with the registered nurse and other members of the interdisciplinary team to advocate for positive client- care outcomes. <p style="text-align: right;"><i>RCC Nursing Student Handbook</i></p>

Preceptorship Clinical Experience

Policies and Guidelines



ROBESON COMMUNITY COLLEGE

Preceptorship Policies and Guidelines

PURPOSE: The 120-hour Associate Degree Nursing and 90-hour Practical Nursing Preceptorship experience is designed in accordance with the NC Board of Nursing (NCBON) General Statute Rule **21 NCAC 36 .0321** to provide nursing students in their final year of a program of study with an opportunity to experience realistic professional nursing practice. The student's acquired knowledge and skills are coupled with those of the qualified nursing preceptor's professional clinical expertise in the practice setting.

GOAL: The Preceptorship experience will enhance the second year student's learning experience by supporting and guiding the student to apply and synthesize their acquired nursing knowledge and skills a focused client care experience.

COURSE OBJECTIVES

NUR 213 Complex Health Concepts (ADN Only)

Objective I: Upon completion of the course, the learner will be able to assimilate all concepts within the domain of the individual related to complex alterations in health

Learning Outcomes:

1. Correlate the inter-relationships of complex pathophysiology, and the clinical course of individuals
2. Incorporate knowledge of the concepts of the holistic individual and the inter-play of these concepts in the promotion of health, wellness, and illness
3. Distinguish internal and external environmental factors that impact the health and well-being of individuals.

Objective II: Upon completion of the course, the learner will be able to provide safe, culturally competent, therapeutic nursing care to individuals with complex alterations in health.

Learning Outcomes:

1. Practice professional nursing behaviors incorporating personal responsibility and accountability for continued competence
2. Assimilate all concepts with the domain of nursing to provide safe, therapeutic nursing care to individuals.
3. Manage healthcare for individuals using cost effective nursing strategies, quality improvement processes, and current technologies.
4. Communicate professionally and effectively with the interdisciplinary healthcare team while advocating for the therapeutic care of all individuals.
5. Develop a teaching plan for individuals, and/or the nursing team, incorporating teaching and learning principles.

Objective III: Upon completion of the course, the learner will be able to safely and ethically execute the management of therapeutic nursing care within the healthcare system for individuals with complex alterations in health.

Learning Outcomes:

1. Practice safely and ethically within the healthcare system according to the nursing practice act, healthcare policy, and National Patient Safety Goals.
2. Apply principles of emergency preparedness to safely navigate the care of individuals in the healthcare system.
3. Incorporate informatics to formulate evidence-based clinical judgments and management decisions.
4. Employ mechanisms of quality improvement, cost effective nursing strategies, and current technologies within the healthcare system.

5. Collaborate with the interdisciplinary healthcare team, to advocate for positive individual and organizational outcomes.

NUR 103 Practical Nursing (PN Only)

Objective I: Upon completion of the course, the learner will further develop knowledge of concepts within the domain of the individual.

Student Learning Outcomes:

1. Examine the pathophysiology, prevalence and clinical course of individuals with specific alterations in health.
2. Differentiate between the healthy individual and those individuals experiencing alterations in health.
3. Detect changes within the internal and external environment of the individual with these alterations.
4. Correlate diagnostic tests and procedures with the identified alterations.

Objective II: Upon completion of the course, the learner will be able to provide safe, culturally competent, therapeutic nursing care to individuals.

Student Learning Outcomes:

1. Respond to situations with an awareness of the values, attitudes, behaviors, and beliefs important to professional nursing.
2. Incorporate all concepts within the domain of nursing to safely provide therapeutic care to individuals with alterations in health.
3. Communicate professionally and effectively while safely providing therapeutic care to individuals with alterations.
4. Effectively collaborate with the individual/individuals and members of the interdisciplinary healthcare team to provide therapeutic care.
5. Develop a teaching plan for individuals incorporating teaching and learning principles.
6. Collaboratively manage care of the individual with alterations in health.

Objective III: Upon completion of the course, the learner will be able to safely and ethically execute the management of therapeutic nursing care within the healthcare system for individuals.

Student Learning Outcomes:

1. Practice safely and ethically within the healthcare system according to the Nursing Practice Act, healthcare policy, and National Patient Safety Goals.
2. Employ information technology to support clinical decision-making.
3. Utilize principles of evidence-based practice while safely providing therapeutic nursing care to individuals in the healthcare system.
4. Advocate, protect, and support the individual's rights and interests
5. Accept accountability for behavior, actions, and judgments.

DEFINITIONS:

The Robeson Community College Faculty has adopted the following definitions from the North Carolina Board of Nursing (See www.ncbon.com Rule 21 NCAC 36 .0120 Definitions):

Associate Degree in Nursing (Registered Nursing) – means a course of study that prepares an individual to function as an entry-level practitioner of nursing. Curriculum components for the NURSING/Diploma in Registered Nursing provides for the attainment of knowledge and skill sets in the current practice in nursing, community concepts, health care delivery, communications, therapeutic interventions and current trends in health care. For this program type, client is the individual, group of individuals, and family.

Department of Nursing faculty: “means individuals employed full or part time by academic institution responsible for developing, implementing, evaluation and updating nursing curricula.

Faculty directed clinical practice: “means the responsibility of Department of Nursing faculty in overseeing student clinical learning including the utilization of preceptors.)

Focused client care experience: “means a clinical experience that simulates an entry-level work experience. The intent is to assist the student to transition to an entry-level practice. There is no specific setting requirement. Supervision may be by a faculty/preceptor dyad or direct faculty supervision

Nursing Student - An individual who is enrolled in an approved nursing curriculum. The student, during a portion of a nursing course, may be assigned to a preceptor for the purpose of meeting specific objectives by synthesizing previously obtained knowledge and skills. The student is self-directed, supervised by the preceptor, and responsible to the preceptor and nurse faculty for the achievement of the objectives. The definition of “Nursing Student” is consistent with the *Suggestions for utilization of preceptors in approved nursing education programs*, envisioned by the Board of Nursing (Retrieved from www.ncbon.com 2010).

Practical Nurse Diploma: a course of study that prepares an individual to function in a dependent role in providing direct patient care under the direction of a registered nurse or other health care provider as defined by the Nursing Practice Act[. Curriculum components for the Practical Nurse Diploma provides for the attainment of knowledge and skill sets in the current practice in nursing, community concepts, health care delivery, communications, therapeutic interventions, including pharmacology, growth and development and current trends in health care. For this program type client is the individual, or group of individuals, and family.

Preceptor: “means a registered nurse at or above the level of licensure that an assigned student is seeking, who may serve as a teacher, mentor, role model and supervising faculty for a faculty directed clinical experience.”

Supervision: “means the provision of guidance or direction, evaluation and follow-up by the licensed nurse for accomplishment of an assigned or delegated nursing activity or set of activities.”

* * * * *

These policies and guidelines are developed based on criteria from the North Carolina Board of Nursing Suggestions for utilization of preceptors in approved nursing education programs, envisioned by the Board of Nursing (Retrieved from www.ncbon.com 2010). Additional policies that govern the preceptor experience will be met according to the contractual agreement/educational affiliation agreement between the Nursing Department and the Health Care Facility.

I. Preceptor Selection

- Selected by agency clinical supervising faculty and Department of Nursing faculty
- Qualifications:
 1. Licensed RN with qualifications, BS degree minimum (suggested), and experience commensurate with role functions
 2. Demonstrated clinical competence commensurate with objectives
 3. Participated in professional learning activities commensurate with clinical expertise
 4. Interested in assuming the preceptor role
 5. Knowledgeable regarding the teaching-learning process

II. Preceptor Orientation

- Overview of the preceptor relationship including each role and responsibility of preceptor, faculty, and student(s)
- Specific preceptor responsibilities
- Methods of clinical evaluation of student by preceptor and faculty
- Goals and objectives for the clinical experience

III. Implementation of the Preceptor Relationship

- Assessment of learner(s) needs by faculty, student, and preceptor
- Determination of goals and objectives for learning by faculty, student, and preceptor
- Gradual assumption of activities by student as specified by objectives
- Resolution of any problem by preceptor and student with input from faculty and clinical supervising faculty when indicated
- Periodic meetings with student, preceptor, faculty and clinical supervising faculty to discuss the student's progress and to plan for future experiences. (Student encouraged verbalizing learning needs, strengths, and areas of improvement.)
- Availability of faculty for consultation and/or collaboration as well as the performance of periodic observations to determine progress and effectiveness of the relationship
- Retention by faculty of the ultimate responsibility for evaluating clinical learning experiences

IV. Evaluation Tools Elicit:

- Advantages and disadvantages of the experience
- Impact on student(s) knowledge, skills, and abilities
- Suggestions for future preceptor relationships
- Faculty, student, preceptor, and clinical supervising faculty input regarding progress toward accomplishment of objectives

V. Other

- Department of Nursing maintains a vita for each preceptor. Letters from preceptor and his/her supervising faculty should also be on file that acknowledge acceptance of relationship.
<http://www.ncbon.com/content.aspx?id=420>
- Additionally, in order to serve as a preceptor for Robeson Community College, the registered should:
 - Be an employee of an agency with a clinical agreement with the Department of Nursing at Robeson Community College.
 - Not be the employment supervising faculty of the nursing student
 - Hold a NURSING or higher for at least two years (BS degree minimum suggested).
 - Demonstrate experience and competency with role functions as documented by the employing clinical agency.
 - Express a willingness to serve in the role of preceptor and as a role model for professional nursing practice.

* * * * *

NCBON Clarification:

Does a nursing student 'work under the faculty or preceptor's license?

A nursing student who is in a clinical area as part of an approved nursing education program is working as an “unlicensed provider”. The authority to practice or “student status” is granted in The Nursing Practice Act Article 90-171.43 License required (2).

Note: A student is held to the same standard of care as any licensed nurse.

Only the person named on the nursing license has the authority to practice nursing.

The faculty member and/or preceptor are responsible for “appropriate supervision and delegation.” The law allows a licensed nurse to delegate certain nursing responsibilities to individuals who are competent to perform the assignment. Persons caring for the patient are responsible for knowing the boundaries of their job and for knowing if they have the knowledge/skills/abilities to provide for the clients’ needs. It is up to each nurse to decide what activities can safely be assigned to another individual based upon the agency policies/procedures the education/training of the individual, and the validated competency of the individual. When the nurse has delegated appropriately he/she is not accountable for the actions/errors of the individual assigned the task.

http://www.ncbon.com/content.aspx?id=1210#School_Nursing_License

ROBESON COMMUNITY COLLEGE
Department of Nursing
Preceptor Vitae (Resume')

NAME _____ Date of Appointment _____

NC RN License # _____ Permanent License _____ or Temporary License _____

Compact License # _____ State(s) Licensed (if not NC) _____

Date of Nursing License Expiration: _____

Primary State Licensed _____ Residency changing to NC? ____ Yes ____ No

I. EDUCATIONAL BACKGROUND

_____ADN _____BSN _____MSN _____Other (List) _____

Schools attended: _____

Certifications: _____

Professional Membership(s): _____

II. WORK EXPERIENCE

Employed: Full Time _____ Part-time _____ No. of Years Employed _____

Current Employer: _____

Work Address: _____

E-mail Address: _____

Work Telephone: _____

Alternate Contact Number: _____

A. Current Title: _____

Dates Employed: From: _____ To: _____

Specialty Area: _____

B. Previous/Employer Title: _____

Dates Employed: From: _____ To: _____

Specialty Area: _____

C. Previous/Employer Title: _____

Dates Employed: From: _____ To: _____

Specialty Area: _____

III. PRECEPTING EXPERIENCE

A. Have you had previous experience precepting nursing students? Yes _____ No _____

Program (List): _____

Type of Students: _____ADN _____BSN _____MSN _____Other (List) _____

Comments about previous experience: _____

B. How can the Department of Nursing at Robeson Community College better prepare the Preceptor to assume this responsibility of Preceptorship for nursing students? _____

Comments: _____

Preceptor Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

ROLES AND RESPONSIBILITIES

PRECEPTOR

STUDENT

CLINICAL SUPERVISING FACULTY

NURSING FACULTY



ROLES AND RESPONSIBILITIES

PRECEPTOR:

A. Prior to Experience

1. Attends/participates in preceptor orientation.
2. With faculty reviews:
 - (a) Responsibilities of faculty member, preceptor, and student
 - (b) Clinical objectives
 - (c) Student performance expectations
 - (d) Skills checklist
 - (e) Clinical evaluation tool
3. Assists the faculty and student in setting goals and objectives for experience. These goals and Objectives should be based on identified learning needs.

B. During the Experience

4. Familiarizes student with staff, policies and organization of the unit.
5. Plans appropriate learning activities.
6. Acts as a role model and clinical resource for student (s).
7. Identifies problems related to the preceptor role and/or student and refers these to the clinical supervising faculty and/or nursing faculty.
8. Meets **weekly with student, faculty, and clinical supervising faculty** to determine student progress.
9. Orients student to the unit and role and scope of practice of the RN.
10. Supervises and assist the student in performance in typical RN client-centered care role.
11. Encourages student to progressively accept more responsibility for client-centered care with Preceptor providing collaborative support.
12. Serves as the resource and support for the student who assumes increased responsibility for Client-centered care.
13. Incorporates appropriate learning activities to enhance student's abilities.
14. Remains well-informed of student's completion of the procedural skills checklist.
15. Contacts the faculty with concerns or questions regarding the clinical experience.
16. Provides feedback and evaluation regarding the Student/Preceptor experience.
17. Supervises the clinical experience for 1-2 students.
18. Provides input and feedback to the faculty regarding the student's clinical performance.
19. Remains knowledgeable of responsibilities of faculty member, preceptor and student
20. Understands and is able to communicate methods to meet the clinical objectives
21. Remains aware of expectations of student's performance.
22. Assists the faculty and student in continuously assessing the learning needs for the student.
23. Ascertains that the student remains familiar with the staff, policies and organization of the unit

C. Scheduling

24. **Notifies the student if there is change in pre-arranged clinical schedule.**

25. Advises student not to work if preceptor is absent and notifies the clinical supervising faculty of schedule changes.

NOTE: Students must remain with their preceptor for the entire assigned shift. **Students cannot switch preceptors.** Switching preceptors can only be approved by the clinical supervising/ nursing faculty and in collaboration with the clinical facility.

D. Evaluation/ Completion of the Experience.

26. Provides the student with timely and ongoing daily feedback and opportunities for improvement.

27. Assists with completing the evaluation tools to include providing a **formative and summative** assessment of students performance on student's clinical evaluation at the following timeframes: **30 hours, 60 hours, 90 hours, 120 hours and more as needed.**

28. Evaluates student and the experience in collaboration with the clinical supervising/nursing faculty.

NURSING STUDENT:

A. Prior to Experience

1. With faculty and preceptor, sets goals consistent with objectives for the clinical experiences, based upon identified learning needs.
2. At initial meeting with preceptor, discusses his/her clinical experience and expectations in preparation for the preceptor experience.
3. Utilizes resources to increase knowledge, skills, and abilities prior to experience.
4. Collaborates with preceptor in planning the student learning activities.

B. During the Experience

1. Assumes responsibility for patient care, within limitations of knowledge and skills, with guidance of the preceptor.
2. Supplies the faculty and preceptor with **objectives** for the learning experience based on identified learning goals and needs.
3. Reports to preceptor at the beginning of clinical shift.
4. Identifies problems related to the preceptor role and/or student and refers these to the clinical supervising faculty and faculty.
5. **Meets weekly with preceptor, faculty and clinical supervising faculty to determine progress.**
6. Reviews and comply with student roles, responsibilities, and expectations as outlined by the Preceptor and Nursing program.
7. Under the supervision of the preceptor, assumes responsibility for patient care within the limitations of knowledge and skills.
8. Maintains open communication with the preceptor and agency to ensure continuity of care
9. Identifies problems related to the student and or preceptor role and refer these to the clinical Supervising faculty and faculty.
10. **Meets weekly with the preceptor, faculty, and clinical supervising faculty to determine student progress.**
11. Seeks supervision and feedback from the preceptor on an ongoing basis.
12. Maintains a **daily log** regarding aspects of the preceptor experience to be turned in at the end of the clinical experience.
13. Maintains confidentiality of all information regarding clients and agency.
14. Continuously, evaluates the learning experiences and the preceptor relationship.
15. Continuously adheres to the clinical agency policies, procedures and/or guidelines.
16. Collaborates and reports to the preceptor during the shift as indicated.
17. Gives end of shift report prior to leaving each clinical experience.

18. Maintains professional dress and behavior at all times. Unprofessional behavior will be evaluated in accordance with guidelines listed in the Nursing Student Handbook.

C. Scheduling

19. Keeps instructor, preceptor, and agency informed of inability to meet commitments.
20. Works schedule up to a 12-hour shift days, nights or weekends unless otherwise approved in collaboration with the preceptor and faculty. (Minimum of 120 hours required, but the student who fails to meet established goals/objectives will be required to complete additional hours).
21. Works clinical hours in accordance with the schedule of the preceptor unless amended by the preceptor in agreement with the faculty.
22. Reports in advance to the preceptor and faculty if an unavoidable circumstance prevents the student from reporting to work as assigned.
23. Students must work with the same shift hours as the preceptor.
24. Student is not to work if preceptor is absent and must notify faculty of schedule change.
NOTE: Students must remain with their preceptor for the entire assigned shift. **Students cannot switch preceptors.** Switching preceptors can only be approved by the faculty in collaboration with the clinical supervising faculty and the education department.

D. Evaluation/ Completion of the Experience.

25. Performs a self-evaluation using the clinical performance evaluation tools at the following timeframes: 30 hours, 60 hours, 90 hours, 120 hours and as needed.
26. Completes a **daily**, summative self-reflective log of experience with documented evidence of meeting student learning outcomes.
27. Submits a final self-evaluation to the nursing faculty at the end of experience.
NOTE: Failure to submit the Preceptorship experience packet/ evaluation timely **will result in an incomplete grade for the experience and failure to progress** in the course.

* * * * *

CLINICAL SUPERVISING FACULTY:

1. With the Department of Nursing Faculty, selects preceptor for nursing student.
2. Approves scheduling of time and assignments to ensure that the preceptor is available for the Student at all times.
3. Supports preceptor/ student by assisting in the identification of problems or failure to develop expected skill set.
4. Evaluates the Preceptorship learning experiences and the student-preceptor relationship.
5. Collaborates with preceptor in planning the student learning activities.
6. Makes self available for consultation and/or collaboration. Faculty member will be available at all times that any student is in the clinical setting
7. Makes periodic observations to determine progress and effectiveness of the relationship.
8. Meets weekly with preceptor, student, and faculty to determine student progress.
9. Evaluates student and preceptor's performance, the learning experience, and the student-Preceptor relationship.

* * * * *

NURSING FACULTY:

A. Prior to Experience

1. Collaborates with clinical agency ongoing to determine preceptors and clinical opportunities
2. Provides documentation of the student's professional liability insurance, CPR, certification.
3. Conducts the preceptor orientation session.
4. Assists the clinical supervising faculty in the selection of preceptors for student
5. Assists clinical supervising faculty and preceptor in understanding student performance

- expectations.
6. Collaborates with clinical supervising faculty, preceptor in planning the student learning activities.
 7. With clinical supervising faculty, selects preceptor for nursing student, reviews:
 - (a) Clinical objectives
 - (b) Student(s) performance expectations.
 - (c) Skills checklist
 - (d) Clinical evaluation tool
 8. Assists clinical supervising faculty, student and preceptor in setting goals/objectives based upon identified learning needs.
 9. Schedules the nursing student clinical experience and designate the preceptor.
 10. Providing the preceptor, student, and agency with objectives and information regarding the Preceptor experience.
 11. Provides to the preceptor the procedural checklist completed by each student. (This will allow the preceptor to be knowledgeable of student's acquired skill level).

B. During the Experience

12. Assists preceptor/student in identifying problems and provides instruction when indicated.
13. Makes periodic observations to determine progress and effectiveness of the relationship.
14. Makes self available for consultation and/or collaboration as indicated.
15. Evaluates student performance and makes recommendations regarding student's goal attainment and achievement of objectives.
16. Maintaining ultimate responsibility for the student's learning.
17. **Meets with preceptor, student and clinical supervising faculty as indicated to determine student progress.**
18. Make recommendations regarding student's achievement of goals and objectives.

C. Scheduling

19. Reviews student-preceptor schedule with supervising clinical faculty to ensure availability at all times.
20. Reviews supervising clinical faculty schedule/ log to ensure weekly visits and the availability during the Preceptorship experience.

D. Evaluation/ Completion of the Experience.

21. Evaluates student clinical performance and determines if the student met individual goals/objectives in addition to program student learning outcomes and objectives for the course.
 22. Evaluates the learning experiences and the preceptor relationship.
 23. Completes the evaluation tool for the student's clinical performance
 24. Provides an evaluation tool for the nursing student to evaluate the preceptor experience
- **The nurse faculty maintains the ultimate responsibility and accountability for the student's achievement of the course goals and evaluation of the student.****(www.ncbon.com).
- NOTE: The final grading for the overall preceptorship experience and achievement of student learning outcomes/course objectives will be determined by the supervising nursing faculty's assessment and evaluation.*

Other Roles and Responsibilities

Uniform Policy:

The student will wear the Robeson Community College approved uniform and student ID badge at all times unless otherwise designated by the specific unit.

Mandatory Class and Preparation

1. Hospital specific medication/pharmacology test if required (Must pass with a score of 84%)
2. Other classes as scheduled (TBA)
3. Hospital orientation, mandatory education, and computer training if required per facility*
4. Classes on campus as scheduled

Student Parking:

Students will park in the appropriate designated area for each participating facility.

Chain of Command:

The faculty has the responsibility for the development, implementation and evaluation of the experience. Therefore, the student must follow the correct chain of command while involved with the actual Preceptorship experience. Skipping the chain of command will result in an **Overall Unsatisfactory** clinical grade.

1. Nursing Faculty
2. Clinical Supervising faculty
3. Preceptor

*Students will comply with additional facility requirements related to the experience.

Contact:

For concerns and questions related to the Preceptorship experience, contact the assigned clinical faculty.

* * * * *

I, the undersigned denote with my signature that I have attended orientation, received and reviewed a copy of the Preceptorship manual and agree to be a preceptor for Robeson Community College Department of Nursing.

Preceptor's Signature

Date

Student's Signature

Date

Clinical Supervising Faculty Signature

Date

Nursing Faculty Signature

Date

ROBESON COMMUNITY COLLEGE

Preceptorship Time Schedule

Course _____ Semester _____

Student _____ RCC Student ID# _____

Preceptor _____ Agency _____

Date	Time In	Total Time*	Student Initials	Preceptor Initials	Comments <i>(As indicated)</i>

Date	Time In	Total Time*	Student Initials	Preceptor Initials	Comments (As indicated)

**NOTE: Minimum of 120 hours required, but the student who fails to meet established goals/objectives will be required to complete additional hours.*

Student’s Signature

Date

Preceptor’s Signature

Date

The Final Signature of the Clinical Supervising indicates the review and attainment of the clinical hour for the Preceptorship experience and that the student only worked a schedule of no more than 12-hour in one shift (days, evenings, nights or weekends) unless otherwise approved in collaboration with the preceptor and faculty

Clinical Supervising Faculty Signature

Date

Robeson Community College – Department of Nursing

Preceptorship Log

	Student Information		Preceptor Information		Faculty Information	
Name:						
Agency:						
E-mail:						
Phone:						
Cell phone:						
Student- Faculty- Preceptor Conference:	Date: (30 Hrs)	Date: (60 Hrs)	Date: (90 Hrs)	Date: (120 Hrs)	Date: (Final = _____ Hrs)	

Preceptorship Goals and Objectives

1. With faculty and preceptor, sets goals consistent with objectives for the clinical experiences, based upon identified learning needs.
2. At initial meeting with preceptor, discusses his/her clinical experience and expectations in preparation for the preceptor experience.
3. Utilizes resources to increase knowledge, skills, and abilities prior to experience.
4. Collaborates with preceptor in planning the student learning activities.

<i>Student Learning Goal/Objective</i>	Related to Course Objective #:	Related to QSEN	Student Self- Evaluation	Verify That Goals Were Met	
				Preceptor	Faculty
Target Date/ Week #___:				Date:	Date:
Preceptorship Goal #1					

Target Date/ Week #___:				Date:	Date:
Preceptorship Goal #2					
Target Date/ Week #___:				Date:	Date:
Preceptorship Goal #3					
Target Date/ Week #___:				Date:	Date:
Preceptorship Goal #4					
Target Date/ Week #___:				Date:	Date:

Preceptorship Goal #5					
Target Date/ Week #____:				Date:	Date:
Preceptorship Goal #6					

***NOTE: Add extra rows as needed. Update after each experience and submit final/complete log at the end of the experience.**

Conference Dates - Signature					
	(30 Hrs)	(60 Hrs)	(90 Hrs)	(120 Hrs)	(Final = _____ Hrs)
<i>Student</i>					
<i>Preceptor</i>					
<i>Faculty</i>					

**Student should use this document as a sample/template in conjunction w/ the Preceptor Manual to guide the clinical experience – Draft 2015*

Performance Evaluations





Department of Nursing

Clinical Performance Evaluation

This cover sheet should be used to ensure the student's privacy and compliance with the grading policies.

Student Name: _____ **Datatel #:** _____

Course: _____ **Semester:** _____

ROBESON COMMUNITY COLLEGE

Associate Degree Nursing Program

NUR 213: Complex Health Issues

Clinical Performance Evaluation (CPE) and Grading Rubric

Student Name: _____ **Datatel #:** _____
Preceptor Name: _____ **Instructor Name:** _____
Precepting Experience/ Site: _____

Key: S= Satisfactory U=Unsatisfactory

Evaluation Process:

The student is expected to complete the CPE after each clinical experience and the nursing faculty will complete the grading rubric. The student should record a grade of:

S = Satisfactory, if the student can provide evidence on the formative summary of:

- **Satisfactorily Meeting** course objective and student learning outcomes (SLOs)
- *Demonstrating mastery and/or consistently demonstrating, critical thinking, nursing judgment and clinical decision-making with minimal and/or faculty/staff/preceptor assistance, prompting, and/or reminders.*

U=Unsatisfactory, if evidence on the formative summary indicates that the student:

- **Did not satisfactorily** meet course objectives and/or SLOs
- *Demonstrated minimal competence, inconsistently demonstrated competence and/or failed to demonstrate competence, which required maximum or total faculty/staff/preceptor assistance, prompting and reminders to critically think, formulate nursing judgment and/or make clinical decisions.*

The student's completion of the CPE will be reviewed by the nursing faculty/preceptor. If evidence exists to support updating a grade of "U" to and "S" or vice versa in any section, the preceptor may make the suggested change and the faculty will make the necessary change on the CPE in conference with the student.

NOTE: *It is the responsibility of the nursing faculty to assign the final overall/clinical grade using evaluative tools, which includes the Formative/Summative **Grading Rubric**.*

INDIVIDUAL DOMAIN												
Safe and Effective Care Environment												
<p>Management of Care – Provides and directs nursing care that enhances the care delivery setting to protect the client and health care personnel (NCLEX-RN, 2010). *Failure to comply with <u>safe and effective care competencies</u> will result in an overall unsatisfactory grade and may result in a program review for unsafe practice.</p>												
<p>LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or update I-Plan to include remediation. (See Level I CPE)</p>												
Daily Grade												
DATE												
LEVEL II Competencies:												
1. Initiates, evaluate, and update plan of care, concept map etc. used to guide and evaluate client care												
2. Incorporates evidence-based practice/research when providing care												
3. Collaborates with interdisciplinary health team members when providing client-centered care												
4. Prioritizes the order of care delivered												
5. Practices in a manner consistent with Nursing Code of Ethics												
6. Uses information technology to enhance the care provided to clients												

7. Recognizes limitations of self/others, seek assistance and/or initiative corrective measures																				
8. Provides care within a defined scope as directed by the clinical faculty, based on education, preparation and competency level.																				
Daily Grade																				
LEVEL II: Team Nursing Specific Competencies (NOTE: all other competencies apply as listed)																				
1. Coordinates and oversees the management of care with the nursing faculty, nursing staff, team member(s), med nurse, etc. in the role of <u>team leader</u> during the team nursing experience																				
2. Receives and/or transcribes health care provider orders in role of <u>team leader</u> ; ensures orders are carried out/addressed																				
1. Supervises care provided by others in role of <u>team leader</u> during the team nursing experience																				
2. Collaborates and coordinates care with the team leader, team member and nursing faculty in the role of <u>med nurse</u> during the team nursing experience																				
3. Functions as an effective and contributing <u>team member</u> during the team nursing experience																				
Daily Grade																				
<u>Safety and Infection Control</u> – The nurse protects clients and health care personnel from health and environmental hazards. (NCLEX-RN, 2010). *Failure to comply with <u>safety and infection control competencies</u> will result in an overall unsatisfactory grade and may result in a program review for unsafe practice.																				
LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or <u>update I-Plan</u> to include remediation. (See Level I CPE)																				
Daily Grade																				
DATE																				
LEVEL II Competencies:																				
Verifies appropriateness and/or accuracy of a treatment orders																				
Demonstrates appropriate and safe use of equipment (i.e. IV or feeding pump, SCDs etc.)																				
Educates client regarding safety issues as indicated																				
Demonstrates the use of clinical decision-making/critical thinking during an emergency response (Rapid Response, CPR etc.) and function within scope and /or per agency policy if indicated.																				
Daily Grade																				
Health Promotion and Maintenance																				
<u>Health Promotion and Maintenance</u> – The nurse provides and directs nursing care of the client that incorporates knowledge of expected growth and development principles; prevention and/or early detection of health problems; and strategies to achieve optimal health (NCLEX-RN, 2010)																				
LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or <u>update I-Plan</u> to include remediation. (See Level I CPE)																				
Daily Grade																				
DATE																				
LEVEL II Competencies:																				
Performs, analyzes and documents comprehensive health assessment findings timely; Formulates and/or revised plan of care in response to assessment findings																				
Assesses and teach client about health risks (i.e. smoking, alcohol use) based on identified evidence based practice guidelines																				
Assess client understanding of and ability to manage self-care (i.e. use of community resources)																				

Provide information about health behaviors, maintenance, recommendations (i.e. physician visits, immunization schedule etc.) and prevention of high risk behaviors (i.e. smoking cessation, safe sexual practices, drug education etc.)																				
Daily Grade																				
Psychosocial Integrity																				
<i>Psychosocial Integrity</i> – The nurse provides and directs nursing care that promotes and supports the emotional, mental and social well-being of the client experiencing stressful events, as well as clients with acute or chronic mental illness (NCLEX-RN, 2010).																				
LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or update I-Plan to include remediation. (See Level I CPE)																				
Daily Grade																				
Date																				
LEVEL II Competencies:																				
Assesses family dynamics in order to determine plan of care (i.e. communication, boundaries, coping mechanisms)																				
Assesses client for potential or actual abuse/neglect and describe plan to intervene within scope and if indicated																				
Assesses client for drug/alcohol related dependencies, withdrawal, or toxicities and intervene when appropriate																				
Provides care and education for acute and chronic behavioral health issues (i.e. anxiety, depression, dementia, etc.)																				
Addresses client needs based on visual, auditory, or cognitive distortions (e.g., hallucinations) and identify non-verbal cues to physical and/or psychological stressors																				
Analyzes the psychosocial impact of illness, disease, end of life process on individual and family																				
Provides end of life care and support to clients and families if indicated																				
Daily Grade																				
Physiological Integrity																				
<i>Basic Care and Comfort</i> – The nurse provides comfort and assistance in the performance of activities of daily living (NCLEX-RN, 2010).																				
LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or update I-Plan to include remediation. (See Level I CPE)																				
Daily Grade																				
DATE																				
LEVEL II Competencies:																				
Analyzes client’s nutritional status and manages the client with an alteration in nutritional intake (i.e. analyze diet, monitor height and weight, BMI, laboratory findings, delivery/method etc.)																				
Provides supplemental nutrition through continuous or intermittent tube feedings etc.																				
Analyzes client fluid balance, intake/ output (i.e. urine, stool, emesis, NG, and plans interventions as indicated																				
Daily Grade																				
Pharmacological and Parenteral Therapies																				
<i>Pharmacological and Parenteral Therapies</i> – The nurse provides care related to the administration of medications and parenteral therapies (NCLEX-RN, 2010). *Failure to comply with <u>pharmacological and parenteral therapy competencies and safe medication administration principles</u> will result in an overall unsatisfactory grade and may result in a program review for unsafe practice.																				

LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or update I-Plan to include remediation. (See Level I CPE)

Daily Grade														
DATE														
LEVEL II Competencies:														
Verifies the following medications with the faculty and/or preceptor before administering: Insulin, Heparin, <u>All</u> Intravenous Medications (IVs), <u>All</u> injections (i.e. subcutaneous, intramuscular etc.), and <u>All</u> High Risk Medications														
Assesses for client drug allergies/sensitivities, food and drug interactions, or interactions with home remedies														
Assists with the management of client experiencing side effects, adverse reactions or sensitivities if indicated														
Assists with the administration of blood products and evaluate client response as instructed.														
Analyzes the onset, peak and duration of medications administered based on assessment findings and ordered parameters (i.e. insulin administered according to blood glucose levels)														
Evaluates appropriateness/accuracy of medication order for client per institution policy including reconciling med process/orders														
Evaluates implications and therapeutic effect of medications														
Inserts, maintains, and removes a peripheral intravenous line														
Evaluates indication and implications of intravenous infusion via venous, central, PICC, access etc.														
Demonstrates an understanding of accessing and/or maintaining a venous access devices, including tunneled, implanted and central lines (AVOID Accessing Dialysis or Vas Caths) as instructed.														
Administers parenteral nutrition (TPN, PPN etc.) and evaluates client response.														
Daily Grade														

Reduction of Risk Potential

Reduction of Risk Potential – The nurse reduces the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures (NCLEX-RN, 2010).
*Failure to comply with reduction of risk competencies will result in an overall unsatisfactory grade and may result in a program review for unsafe practice.

LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or update I-Plan to include remediation. (See Level I CPE)

Daily Grade														
DATE														
LEVEL II Competencies:														
Analyzes the pre and/or postoperative education process;														
Assists in the provision of pre, intra, and post- operative care according to evidence based guidelines.														
Recognizes trends and changes in client condition related to the diagnosis/ procedure and design plan to intervene as indicated.														
Inserts, maintains, and removes nasogastric tubes and/or urethral catheters														
Evaluates the management of care during and following procedures with sedation														
Daily Grade														

Physiological Adaptation

Physiological Adaptations – The nurse manages and provides care for clients with acute, chronic or life threatening physical health conditions. (NCLEX-RN, 2010)

LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or update I-Plan to include remediation. (See Level I CPE)

Daily Grade																				
Date																				
LEVEL II Competencies:																				
Analyzes pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)																				

Assists with manage the care of a client with impaired ventilation/oxygenation; Assist with monitoring and caring for clients on a ventilator																				
Assists with monitoring and maintaining devices and equipment used for drainage (i.e. surgical wound drains, chest tube suction, negative pressure wound therapy)																				
Assists with providing ostomy (e.g. tracheal, enteral) care																				
Performs suctioning (e.g. oral, nasopharyngeal, endotracheal, tracheal) as instructed																				
Manages the care of a client on telemetry as instructed																				
Evaluates the care of a client with alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)																				
Evaluates the effectiveness of the treatment regimen for a client with an acute or chronic diagnosis																				
Daily Grade																				

NURSING DOMAIN

Provide Client Centered Care

Provide Client Centered Care: Recognize the client as the source of control and as a full partner in the provision of compassionate and coordinated care; while respecting the client’s preferences, values, and needs (IOM, Core Competency)

LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or update I-Plan to include remediation. (See Level I CPE)

Daily Grade																				
DATE																				
LEVEL II Competencies:																				
Resolves most problems effectively, demonstrates resourcefulness and makes appropriate nursing judgment after analysis of available data																				
Follows up on unresolved issues regarding client care (abnormal labs, unclear medication orders)																				
Seeks new client centered care experiences and other procedures as they become available in the clinical setting																				
Willingly provides assistance to others																				
Initiates independence to learn from other client care experiences (under supervision of faculty)																				
Daily Grade																				

Professional Nursing Practice

Professional Nursing Practice:

Adhere to the professional standards and behaviors inherent to nursing practice and as outlined by the ANA Standards of Care and Professional Performance, Code of Ethics for Nurses with Interpretive Statements and Codes of Conduct outlined.

*Failure to comply with professional nursing practice competencies will result in an overall unsatisfactory grade and may result in a program review for unsafe practice.

LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or **update I-Plan** to include remediation. (See Level I CPE)

Daily Grade															
DATE															
LEVEL II Competency															
Demonstrates respect for client dignity and client rights.															
Adheres to the professional standards and behaviors inherent to nursing practice as outlined.															
Demonstrates accountability, personal responsibility, integrity and honesty.															
Abstains from behaviors inconsistent with professional practice.															
Adheres to the Codes of Conduct outlined by the facility and the Nursing Student Handbook, including but not limited, to professional standards and behaviors, code of ethics and dress code policies.															
Avoids sharing private/ confidential patient information and/or access codes (including abstaining from social networking or media post/ discussions, etc.)															
Adheres to and complies with the ANA Standards of Care and Professional Performance as outlined.															
Adheres to and complies with the Code of Ethics for Nurses with Interpretive Statements as outlined.															
Adheres to and complies with NLNAC and IOM Competencies.															
Daily Grade															

HEALTHCARE DOMAIN

Work in Interdisciplinary Teams

Work in interdisciplinary teams: Function as an effective member of the interdisciplinary team by fostering open communication, mutual respect, and shared decision making to achieve quality patient care (IOM, Core Competency)

LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or **update I-Plan** to include remediation. (See Level I CPE)

Daily Grade															
DATE															
LEVEL II Competencies:															
I. Pre-Clinical/ Clinical Requirements:															
*Failure to comply with clinical preparation requirements will result in an overall unsatisfactory grade.															
Collects and assimilates required data prior to clinical															
Demonstrates overall preparedness for clinical															
Collects subjective data including chief complaint, past medical history, review of systems etc. relevant to care needs.															
Collects objective data consistent with current complaint, reason for visit etc. relevant to care needs.															
Attends clinical with required paperwork for example: concept map, pre-clinical assessment, etc.															
Reports to clinical on-time and in proper attire (See Nursing Student Handbook - Attendance and Dress Code policies)															
Demonstrates the ability to provide client centered care for the level of progression or education															
Implements interventions per order and as listed on the nursing plan of care/ concept map as instructed															
Exhibits professional standards, behaviors and codes of conduct															
Daily Grade															
LEVEL II Competencies:															
II. Supportive Interpersonal Relations															

Establishes cooperative and respectful relationships with faculty, preceptor, other students, and clinical site personnel														
Communicates with clients, family, visitors and staff in a professional and caring manner														
Accepts and applies constructive criticism in a positive and professional manner to improve future performance														
Collaborates/consults appropriately and in a timely manner with staff, other health care providers, and other resources on behalf of the client to achieve health goals														
Daily Grade														
LEVEL II Competencies:														
III. Identification of Self-Improvement Needs														
Displays confidence after appropriate instruction, and seeks help without prompting when needed														
Recognizes limitations and makes faculty/preceptor aware														
Daily Grade														
LEVEL II Competencies:														
IV. Organizational Skills														
Completes assignments in an appropriate amount of time														
Organizes workflow in an efficient manner														
Organizes for priority, recognizing the importance of timed nursing activities/interventions														
Leaves equipment and work area clean, replenishes supplies, etc. as needed														
Documents clients care according to facility policy														
Daily Grade														
Evidence-Based Practice:														
<i>Evidence-based practice- Integrate</i> current evidence and best practice guidelines into clinical practice while considering client values of optimal care (IOM, Core Competency).														
LEVEL I Competencies: The Level II student is expected to perform Level I Competencies with 100% and/or <u>update I-Plan</u> to include remediation. (See Level I CPE)														
Daily Grade														
Date														
LEVEL II Competencies:														
Completes and submits clinical paperwork and written assignments as indicated in the course syllabus.														
Utilizes evidence based practice research, standards and pertinent reference material to provide care and aid in completion of required clinical materials/paperwork.														
Includes references appropriately on required clinical paperwork														
Concise and correctly records the appropriate client information on the correct medical record														
Reports information appropriately and accurately														
Daily Grade														

*If evidence exists to support updating a grade of "U" to and "S" or vice versa in any section, the preceptor may make the suggested change and the faculty will make the necessary change on the CPE in conference with the student. NOTE: It is the responsibility of the nursing faculty to assign the final overall/clinical grade using evaluative tools, which includes the Formative/Summative **Grading Rubric**.*

The Student and Faculty Signatures indicate review of the above student daily/experience grades which does not represent the Overall/ Final Clinical Grade.

Student Signature: _____ / **Date:** _____

Instructor Signature: _____ / **Date:** _____

Instructor Signature: _____ / **Date:** _____

Instructor Signature: _____ / **Date:** _____

**NUR 103: Practical Nursing III
 Clinical Performance Evaluation (CPE) and Grading Rubric**

Student Name: _____

Datatel #: _____

Evaluation Process:

The student is expected to complete the CPE after each clinical experience and the nursing faculty will complete the grading rubric. The student should record a grade of:

S = Satisfactory, if the student can provide evidence on the formative summary of:

- Satisfactorily Meeting course objective and student learning outcomes (SLOs)
- Demonstrating mastery and/or consistently demonstrating, critical thinking, nursing judgment and clinical decision-making with minimal and/or faculty/staff/preceptor assistance, prompting, and/or reminders.

U=Unsatisfactory, if evidence on the formative summary indicates that the student:

- Did not satisfactorily meet course objectives and/or SLOs
- Demonstrated minimal competence, inconsistently demonstrated competence and/or failed to demonstrate competence, which required maximum or total faculty/staff/preceptor assistance, prompting and reminders to critically think, formulate nursing judgment and/or make clinical decisions.

The student's completion of the CPE will be reviewed by the nursing faculty/preceptor. If evidence exists to support updating a grade of "U" to and "S" or vice versa in any section, the preceptor may make the suggested change and the faculty will make the necessary change on the CPE in conference with the student.

NOTE: It is the responsibility of the nursing faculty to assign the final overall/clinical grade using evaluative tools, which includes the Formative/Summative **Grading Rubric**.

INDIVIDUAL DOMAIN											
Coordinated Care – Provides nursing care that contributes to the enhancement of the health care delivery setting and protects clients and health care personnel (NCLEX-PN, 2011). Failure to comply with <u>safe and effective care competencies</u> will result in an overall unsatisfactory grade and may result in a program review for unsafe practice.											
DATE											
Clinical Experience/ Site											
Complies with all institutional safety policies											
Recognizes and reports all unsafe situations											
Protects client from injury											
Ensures safe use of equipment											
Evaluates client care for safety hazards											
Identifies and reports abnormal vital signs, breathing patterns and other signs/symptoms											
Prioritizes workload and order of care to manage time effectively											
Applies knowledge of pathophysiology when establishing priorities for interventions for assigned client(s)											
Incorporates evidence-based practice when providing care											
Collaborates with interdisciplinary health team members when providing client-centered care											
Practices in a manner consistent with Nursing Code of Ethics											
Uses information technology to enhance the care provided to clients											

Recognizes limitations of self/others, seek assistance and/or initiative corrective measures																				
Provides care within a defined scope as directed by the clinical faculty, based on education, preparation and competency level.																				
Student/Daily Experience Grade																				
Safety and Infection Control – The nurse contributes to the protection of clients and health care personnel from health and environmental hazards (NCLEX-PN, 2011). Failure to comply with <u>safety and infection control competencies</u> will result in an overall unsatisfactory grade and may result in a program review for unsafe practice.																				
DATE																				
Clinical Experience/ Site																				
Ensures identification of client using identifiers when providing any and all care (i.e. during med admin, procedures, meal tray delivery etc.)																				
Protects client from injury (e.g., falls, entrapment, hazards etc.)																				
Uses ergonomic principles when providing care; Complies “Lift Free” Policy to safely transfer mobile and immobile clients (bed, wheelchair, stretcher, mechanical lift etc.)																				
Follows procedures for handling biohazard materials																				
Identify client allergies/sensitivities and intervene as needed (e.g., medication, food, latex, environmental allergies)																				
Applies principles of infection control (i.e. hand hygiene, room assignment, isolation, aseptic/sterile technique, universal/standard precautions etc.)																				
Identifies, reports and/or takes appropriate action to manage abnormal findings																				
Acknowledges and documents practice error (e.g. incident report for medication error)																				
Verifies appropriateness and/or accuracy of a treatment orders																				
Demonstrates appropriate and safe use of equipment (i.e. IV or feeding pump, SCDs etc.)																				
Demonstrates the use of clinical decision-making/critical thinking during an emergency response (Rapid Response, CPR etc.) and function within scope and /or per agency policy if indicated																				
Student/Daily Experience Grade																				
Health Promotion and Maintenance – The nurse provides and directs nursing care of the client that incorporates knowledge of expected growth and development principles; prevention and/or early detection of health problems; and strategies to achieve optimal health (NCLEX-PN, 2011)																				
DATE																				
Clinical Experience/ Site																				
Performs, analyzes and documents comprehensive health assessment findings timely; Formulates and/or revised plan of care in response to assessment findings																				
Assesses and reinforce teaching client about health risks (i.e. smoking, alcohol use) based on identified evidence based practice guidelines																				
Assess client understanding of and ability to manage self-care (i.e. use of community resources)																				
Provide information about health behaviors, maintenance, recommendations (i.e. physician																				

visits, immunization schedule etc.) and prevention of high risk behaviors (i.e. smoking cessation, safe sexual practices, drug education etc.)																			
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Psychosocial Integrity – The nurse provides care that assists with promotion and support of the emotional, mental and social well-being of clients (NCLEX-PN,2011).

DATE																			
Clinical Experience/ Site																			
Collect data regarding psychosocial, spiritual, and occupational factors affecting care and assist with interventions as appropriate																			
Assist client in coping with life changes (e.g., loss, new diagnosis, role change, stress)																			
Incorporates client cultural practice and beliefs when providing care																			
Uses therapeutic communication techniques to establish and maintain a therapeutic relationship/ environment for clients with emotional/behavioral issues.																			
Communicates client changes to the multi-disciplinary team using the SBAR technique																			
Communicates with clients, families and visitors using "AIDET"																			
Assesses family dynamics in order to determine plan of care (i.e. communication, boundaries, coping mechanisms)																			
Assesses client for potential or actual abuse/neglect and describe plan to intervene within scope and if indicated																			
Assesses client for drug/alcohol related dependencies, withdrawal, or toxicities and intervene when appropriate																			
Provides care and education for acute and chronic behavioral health issues (i.e. anxiety, depression, dementia, etc)																			
Addresses client needs based on visual, auditory, or cognitive distortions (e.g., hallucinations) and identify non-verbal cues to physical and/or psychological stressors																			
Analyzes the psychosocial impact of illness, disease, end of life process on individual and family																			
Provides end of life care and support to clients and families if indicated																			
Student/Daily Experience Grade																			

Physiological Integrity (Basic Care and Comfort) – The nurse assists in the promotion of physical health and well-being by providing care and comfort, reducing risk potential for clients and assisting them with the management of health alterations (NCLEX-PN, 2011).

DATE																			
Clinical Experience/ Site																			
Identify client need for pain management and intervene as needed using pharmacological and/or comfort measures																			
Able to describe Patient Controlled Analgesics (PCA) Pump																			
Uses measures to maintain or improve skin integrity and prevent skin breakdown (e.g., turning, repositioning, pressure-relieving support surfaces)																			

Identify client at risk for impaired elimination (bowel and bladder)														
Performs, records and reports abnormal vital signs including apical pulse, blood pressure, respirations, pulse oximetry.														
Applies and maintains devices/techniques used to promote venous return (i.e. leg exercise, walking as indicated, anti-embolic stockings, sequential compression devices-SCDs)														
Supports the ambulatory client and/or Promotes circulation (i.e. active or passive range of motion, positioning and mobilization)														
Provides therapies for comfort and treatment of inflammation, swelling (i.e. elevate limb, apply heat and cold treatments, etc.)														
Assists client or completes ADLs (activities of daily living) timely with minimal client energy expenditure if indicated														
Calculates and documents client intake and output; intervenes with regards to abnormal findings as indicated														
Analyzes client's nutritional status and manages the client with an alteration in nutritional intake (i.e. analyze diet, monitor height and weight, BMI, laboratory findings, delivery/method etc.)														
Provides supplemental nutrition through continuous or intermittent tube feedings etc.														
Analyzes client fluid balance, intake/ output (i.e. urine, stool, emesis, NG, and plans interventions as indicated														
Student/Daily Experience Grade														

Pharmacological and Parenteral Therapies – The nurse provides care related to the administration of medications and monitors clients who are receiving parenteral therapies (NCLEX-PN, 2011). Failure to comply with pharmacological and parenteral therapy competencies and safe medication administration principles will result in an overall unsatisfactory grade and may result in a program review for unsafe practice.

DATE														
Clinical Experience/ Site														
Verifies all medications timely with nursing faculty before administering														
Identify client need for pain medication and administer medication timely in accordance with the facility policies														
Identify drug allergies/sensitivities prior to administering medications														
Performs calculations needed for safe medication administration														
Reviews/Reports pertinent data prior to medication administration (i.e. vital signs, lab results, allergies, potential interactions)														
Inform client(s) about medications														
Complies with requirements governing controlled substances.														
Prepares and administers medications, using rights and principles of safe medication administration														
Administers medication timely based on assessment findings and ordered parameters (i.e. scale insulin r/t blood glucose levels)														

Provides pulmonary hygiene (e.g., chest physiotherapy, incentive spirometry, suctioning or repositioning) as instructed																				
Analyzes pathophysiology related to an acute or chronic condition (e.g., signs and symptoms)																				
Assists with providing ostomy (e.g. tracheal, enteral) care and/or a dressing change																				
Manages the care of a client on telemetry as instructed																				
Student/Daily Experience Grade																				

NURSING DOMAIN

Provide Client Centered Care:

Provide Client Centered Care: Recognize the client as the source of control and as a full partner in the provision of compassionate and coordinated care; while respecting the client's preferences, values, and needs (IOM, Core Competency)

DATE																				
Clinical Experience/ Site																				
Resolves most problems effectively, demonstrates resourcefulness and makes appropriate nursing judgment after analysis of available data																				
Follows up on unresolved issues regarding client care (abnormal labs, unclear medication orders)																				
Seeks new client centered care experiences and other procedures as they become available in the clinical setting																				
Willingly provides assistance to others																				
Initiates independence to learn from other client care experiences (under supervision of instructor)																				
Student/Daily Experience Grade																				

Professional Nursing Practice:

Professional Nursing Practice: Adhere to the professional standards and behaviors inherent to nursing practice and as outlined by the ANA Standards of Care and Professional Performance, Code of Ethics for Nurses with Interpretive Statements and Codes of Conduct outlined. Failure to comply with professional nursing practice competencies will result in an overall unsatisfactory grade and may result in a program review for unsafe practice.

DATE																				
Clinical Experience/ Site																				
Demonstrates respect for client dignity and client rights.																				
Adheres to the professional standards and behaviors inherent to nursing practice as outlined.																				
Demonstrates accountability, personal responsibility, integrity and honesty.																				
Abstains from behaviors inconsistent with professional practice.																				
Adheres to the Codes of Conduct outlined by the facility and the Nursing Student Handbook, including but not limited, to professional standards and behaviors, code of ethics and dress code policies.																				
Avoids sharing private/ confidential patient information and/or access codes (including abstaining from social networking or media post/ discussions, etc.)																				
Adheres to and complies with the ANA Standards of Care and Professional Performance as outlined																				

Adheres to and complies with the Code of Ethics for Nurses with Interpretive Statements as outlined.																				
Adheres to and complies with NLNAC and IOM Competencies																				
Student/Daily Experience Grade																				
HEALTHCARE DOMAIN																				
Work in Interdisciplinary Teams																				
<i>Work in interdisciplinary teams: Function as an effective member of the interdisciplinary team by fostering open communication, mutual respect, and shared decision making to achieve quality patient care (IOM, Core Competency)</i>																				
I. Clinical Requirements: <i>Failure to comply with <u>clinical preparation requirements</u> will result in an overall unsatisfactory grade.</i>																				
	DATE																			
	Clinical Experience/ Site																			
Collects/assimilates required data prior to clinical																				
Demonstrates overall preparedness for clinical																				
Collects subjective data including chief complaint, past medical history, review of systems etc. relevant to care needs.																				
Collects objective data consistent with current complaint, reason for visit etc. relevant to care needs.																				
Attends clinical with required paperwork for example: concept map, pre-clinical assessment, etc.																				
Reports to clinical on-time and in proper attire <i>(See Nursing Student Handbook - Attendance and Dress Code policies)</i>																				
Demonstrates the ability to provide client centered care for the level of progression or education																				
Implements interventions per order and as listed on the nursing plan of care/ concept map as instructed																				
Exhibits professional standards, behaviors and codes of conduct																				
Student/Daily Experience Grade																				
II. Supportive Interpersonal Relations																				
Establishes cooperative and respectful relationships with instructors, other students, and clinical site personnel																				
Communicates with clients, family, visitors and staff in a professional and caring manner																				
Accepts and applies constructive criticism in a positive and professional manner to improve future performance																				
Collaborates/consults appropriately and in a timely manner with staff, other health care providers, and other resources on behalf of the client to achieve health goals																				
Student/Daily Experience Grade																				
III. Identification of Self-Improvement Needs																				
	DATE																			
	Clinical Experience/ Site																			
Displays confidence after appropriate instruction, and seeks help without prompting when needed																				
Recognizes limitations and makes instructor/preceptor aware																				

Student/Daily Experience Grade													
IV. Organizational Skills													
Completes assignments in an appropriate amount of time													
Organizes workflow in an efficient manner													
Organizes for priority, recognizing the importance of timed nursing activities/interventions													
Leaves equipment and work area clean, replenishes supplies, etc. as needed													
Documents clients care according facility policy													
Student/Daily Experience Grade													

Evidence-based practice: Integrate current evidence and best practice guidelines into clinical practice while considering client values of optimal care (IOM, Core Competency).

Completes and submits clinical paperwork and written assignments as indicated in the course syllabus.													
Utilizes evidence based practice research, standards and pertinent reference material to provide care and aid in completion of required clinical materials/paperwork.													
Includes references appropriately on required clinical paperwork													
Concisely and correctly records the appropriate client information on the correct medical record													
Reports information appropriately and accurately													
Student/Daily Experience Grade													

*If evidence exists to support updating a grade of "U" to and "S" or vice versa in any section, the preceptor may make the suggested change and the faculty will make the necessary change on the CPE in conference with the student. NOTE: It is the responsibility of the nursing faculty to assign the final overall/clinical grade using evaluative tools, which includes the Formative/Summative **Grading Rubric**.*

The Student and Faculty Signatures indicate review of the above student daily/experience grades which does not represent the Overall/ Final Clinical Grade.

Student Signature: _____ / **Date:** _____

Instructor Signature: _____ / **Date:** _____

Instructor Signature: _____ / **Date:** _____

Instructor Signature: _____ / **Date:** _____

Clinical Formative/ Summative Evaluation

Student Name: _____ SID _____ Instructor Name(s): _____

Directions/ Process - The student is required to:

1. Write formative evaluation comments and then summarize each clinical experience by using the “PMI” methodology.
2. List the course and student learning outcome met or not met and then provide descriptive evidence to support their formative self-reflection/assessment.
3. Submit their CPE and Formative/ Summative Evaluation to the nursing faculty **no later than 0900 on next class day.** **(Failure to complete and submit the formative evaluation after each experience will constitute an Unsatisfactory Grade for the Experience).**

Date	Course Obj. #	SLO #	Met or Not Met	Student Formative/Summative Evaluation <i>(Include specific description and evidence to support self-assessment and CPE Grade)</i>	Faculty/ Preceptor Formative/Summative Evaluation <i>(Indicated if Course Obj/ SLO Met or Not Met)</i>	Student Initials	Faculty Initials
	Summative Evaluation Comments (Using the “PMI” Methodology)						
	Summative Evaluation Comments (Using the “PMI” Methodology)						
	Summative Evaluation Comments (Using the “PMI” Methodology)						

	Summative Evaluation Comments (Using the “PMI” Methodology)						
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	Summative Evaluation Comments (Using the “PMI” Methodology)						
	Summative Evaluation Comments (Using the “PMI” Methodology)						
	Summative Evaluation Comments (Using the “PMI” Methodology)						

Summative Evaluation Comments (Using the "PMI" Methodology)				
<p><i>A student's signature indicates review of the above comments, the CPE grade, and/or completion of required remediation.</i></p> <p>Student Signature: _____ / Date: _____</p> <p>Instructor Signature: _____ / Date: _____</p> <p>Instructor Signature: _____ / Date: _____</p>				

Clinical Grading Rubric

Student : _____ Datatel #: _____ Course: _____

NOTE: It is the responsibility of the **faculty to assign the final overall/clinical grade** using expert clinical judgment, evaluative mechanisms, feedback, Formative/Summative Evaluations and the **Grading Rubric**. The preceptor may make the suggestions that the nursing faculty may or may not use to finalize the CPE and/or Clinical Grading Rubric.

Daily Final Grading Rubric (Faculty/Preceptor to Complete)												
Date												
Clinical Experience/ Site												
<p align="center">5</p> <p>Demonstrated mastery, critical thinking, nursing judgment and clinical decision- making with minimal or no faculty/ staff/ preceptor assistance, prompting and/or reminders:</p> <ul style="list-style-type: none"> - Met a satisfactory percentage of the course objectives and SLOs - Independently/ Interdependently applied course concepts - Independently/ interdependently performed new and expected competencies. - Independently/ Interdependently integrated competencies previously learned 												
<p align="center">4</p> <p>Consistently demonstrated a degree of competence, critical thinking, nursing judgment and clinical decision- making with minimal faculty/staff/preceptor assistance, prompting and/or reminders:</p> <ul style="list-style-type: none"> - Met a satisfactory percentage of the course objectives and SLOs - Independently/ Interdependently applied course concepts - Independently/ interdependently and/or less expected competencies. - Independently/ Interdependently integrated competencies previously learned 												
<p align="center">3</p> <p>Demonstrated elements of competence, BUT required a moderate degree of faculty/ staff/preceptor assistance, prompting and/or reminders to critically think, formulate nursing judgment and/or make clinical decisions:</p> <ul style="list-style-type: none"> - Met a satisfactory percentage of the course objectives and SLOs - Interdependently and/or more dependently applied course concepts - Interdependently and/or more dependently performed new and expected competencies. - Interdependently and/or more dependently integrated competencies previously learned 												
<p align="center">2</p> <p>Inconsistently demonstrated competence; Required maximum faculty/staff/preceptor assistance, prompting/ reminders to critically think, formulate nursing judgment and make clinical decisions:</p> <ul style="list-style-type: none"> - Did not satisfactorily meet course objectives and/or SLOs - Relied on others to apply course concepts - Relied on others to perform new and expected competencies. 												

- Relied on others to integrate competencies previously learned														
1 Did not demonstrate competence and required maximum faculty/staff/preceptor assistance, prompting and reminders to critically think, formulate nursing judgment and/or make clinical decisions: - Did not satisfactorily meet course objectives and/or SLOs - Dependently relied on others to apply course concepts - Dependently relied on others to perform new and expected competencies. - Dependently relied on others to integrate competencies previously learned														
0 Failed to demonstrate competence and required maximum or total faculty/staff/preceptor assistance, prompting and reminders to critically think, formulate nursing judgment and/or make clinical decisions: - Did not satisfactorily meet course objectives and SLOs - Dependently relied on others and/or did not apply course concepts - Dependently relied on others and/or did not apply perform new and expected competencies. - Dependently relied on others and/or did not apply integrate competencies previously learned														
Overall Experience/ Student Grade <i>(Record Overall Grade of "S" or "U" based on Rubric)</i>														
Student Initials														
Instructor Initials														

*Adopted August 2010; Revised June 2012; **May 2013***
Adapted from: National Council of State Boards of Nursing NCLEX-PN Blueprint 2010

1st Unsatisfactory Incident (Date) _____
Remediation required: YES NO **Remediation Plan:** See Clinical Incident Report

2nd Unsatisfactory Incident (Date) _____
Remediation required: YES NO **Remediation Plan:** See Clinical Incident Report

3rd and Final Unsatisfactory Incident (Date) _____
Recommended Action: _____

FINAL CLINICAL GRADE: Satisfactory Unsatisfactory

A student's signature indicates review of the above comments, the CPE grade, and/or completion of required remediation.

Student Signature: _____ / **Date:** _____

Instructor Signature: _____ / **Date:** _____

Instructor Signature: _____ / **Date:** _____

Instructor Signature: _____ / **Date:** _____



Department of Nursing

Clinical Occurrence/ Incident Report

This cover sheet should be used to ensure the student's privacy and compliance with the grading policies.

Student Name: _____ **Datatel #:** _____

Course: _____ **Semester:** _____

Robeson Community College | Department of Nursing
Occurrence/ Incident Report
Summary

Student's Name _____ Datatel #: _____

Date of the Incident _____ Date of Conference _____

1) OCCURRENCE/ INCIDENT: _____	Grade Resulting: Warning _____	Overall Unsatisfactory _____
<i>Previous Incident? Yes _____ No _____ Date: _____</i>		

2) OCCURRENCE/ INCIDENT: _____	Grade Resulting: Warning _____	Overall Unsatisfactory _____
<i>Previous Incident? Yes _____ No _____ Date: _____</i>		

3) OCCURRENCE/ INCIDENT: _____	Grade Resulting: Warning _____	Overall Unsatisfactory _____
<i>Previous Incident? Yes _____ No _____ Date: _____</i>		

NOTE: Three (3) Overall Unsatisfactory Grades will result in a failing grade (F) for the clinical component of the course... (See *Nursing Student Handbook- Academic Progression Policy*)

Process- *The student is expected to:*

1. *Email the nursing faculty within 24 hrs. to request a student-faculty conference appointment (The conference should occur within three (3) days of the occurrence unless otherwise indicated).*
2. *Initiate/complete the form and submit to the nursing faculty via email **within 24 hrs. of the occurrence.***

Note: *Occurrence/ Incident form is subject to change after the student-faculty conference.*

Occurrence/ Incident Report

Student's Name _____ Datatel #: _____

Date of the Incident _____ Date of Conference _____

Student to describe incident/behaviors that resulting in an Unsatisfactory grade:

Student to identify/ list course objective or student learning outcomes violated (See Syllabus) :
1. _____
2. _____
3. _____

Student to Submit Remediation Plan (Submit to Nursing Faculty via email):
<p><i>Remediation Objective(s): The student will successfully complete the identified <u>competency with 100% accuracy</u>.</i></p> <p>1. _____</p> <p>2. _____</p>

<p><u>Remediation Planned Activities:</u></p> 	<p><u>Remediation Schedule:</u></p>
--	--

<p>Competency Reevaluation Plan: _____ / Date: _____</p> <p>_____</p>

I, _____ have been informed that any future violation or failure to provide competent care will result in a "clinical incident" review and counseling. I have also reviewed and have had all my questions answered regarding the Performance Evaluation process, Unsatisfactory Grading policy and the Unsafe Practice Policy.

**Signature indicates student has been informed of the "Unsatisfactory" performance.*

*Student Signature: _____ / Date: _____

Faculty Signature: _____ / Date: _____

Re-Evaluation# 1

Student's Name _____ Datatel #: _____

Re-evaluation Date: _____ Evaluation Outcomes: _____ Satisfactory: _____ Unsatisfactory: _____

Student Formative/Summative Evaluation <i>(Include specific description and evidence to support self-assessment; Summarize the re-evaluation using the PMI Methodology.)</i>
Faculty Summative Evaluation <i>(Indicated if Course Obj/ SLO Met or Not Met)</i>

Student Signature

Date

Instructor Signature

Date

Instructor Signature

Date

Re-Evaluation# 2

Re-evaluation Date: _____ Evaluation Outcomes: _____ Satisfactory: _____ Unsatisfactory: _____

Student Formative/Summative Evaluation <i>(Include specific description and evidence to support self-assessment; Summarize the re-evaluation using the PMI Methodology.)</i>
Faculty Summative Evaluation <i>(Indicated if Course Obj/ SLO Met or Not Met)</i>

Student Signature

Date

Instructor Signature

Date

Instructor Signature

Date

Mitigating Factors	Aggravating Factors	
Communication breakdown (multiple handoffs, change of shift, language barriers)		
Unavailable resources (inadequate supplies/equipment)	Especially heinous, cruel, and/or violent act	
Interruptions/Chaotic environment/emergencies - (frequent interruptions/distractions)	Knowingly created risk for more than one client	
Inadequate supervision by faculty or preceptor	Threatening/bullying behaviors	
Inappropriate assignment by faculty or preceptor	Prior formal student disciplinary record for practice issue(s)	
Policies/procedures unclear		
Client factors (combative/agitated, cognitively impaired, threatening)	Other (identify)	
Non-supportive environment - interdepartmental/staff/student conflicts		
Lack of response by other departments/providers	Total # aggravating factors identified:	
Other (identify)		
Total # mitigating factors identified:		

Criteria Score (from front page)		Human Error	At-Risk Behavior	Reckless Behavior
Mitigating factors (subtract 1 point for 1-3 factors; 2 points for 4-6 factors; and 3 points for 7 or more factors)		# criteria in green= ____ IF 3 or more criteria in green OR total score <8 - Address event by consoling student and/or developing remedial improvement plan with student	# criteria in yellow= ____ IF 3 or more criteria in yellow OR total score 8-19 - Address event by coaching student, possibly counseling, and/or developing remedial improvement plan with student	# criteria in red = ____ IF 3 or more criteria in red OR total score 20 or greater - Consider disciplinary action and/or remedial action in addressing event with student
Aggravating factors (add 1 point for each identified factor)				
Total Overall Score				

Evaluator:

School Name:

Date of Event:

NCBON Education Consultant:

Action Taken:

NOTE: This SPEET is NOT used if event involves misconduct such as: academic cheating, confidentiality, fraud, theft, drug abuse, diversion, boundary issues, sexual misconduct, mental/physical impairment. Instead, these are managed through established mechanisms outside of this clinical framework.

Human Error = Inadvertently doing other than what should have been done; a slip, lapse, mistake.

At-Risk Behavior = Behavioral choice that increases risk where risk is not recognized or is mistakenly believed to be justified.

Reckless Behavior = Behavioral choice to consciously disregard a substantial and unjustifiable risk.

Consoling = Comforting; calming; supporting student while examining event.

Coaching = Supportive discussion with the student on the need to engage in safe behavioral choices.

Remedial Action = Actions taken to aid student including education, training, assignment to program level-appropriate tasks.

Counseling = A first step disciplinary action; putting the student on notice that performance is unacceptable.

Disciplinary Action = Punitive deterrent to cause student to refrain from undesired behavioral choices.

Student's Evaluation of Overall Preceptorship Experience

Student Name					
Student ID#		Semester			
Preceptor/ Unit		Agency			
		Yes	No	N/A	Comments
1	Was the orientation to the preceptorship experience effective to provide overall insight into the experience?				
2	Did clinical unit provide adequate learning opportunities throughout the experience?				
3	Did the preceptor, staff, faculty and clinical facilitate mechanism for communication?				
4	Did the preceptor serve as a positive role model?				
5	Did the preceptor provide support in helping meet student's goals and objectives?				
6	As a student were you able to access agency support services? (library, pharmacy, secretaries, etc.)				
7	Did the physical facilities and equipment assist in the achievement of student learning outcomes/objectives?				
8	Did the clinical experience help you meet the course objectives and student learning outcomes?				
9	Would you recommend a similar experience for future students? If 'no' give reason.				
10	Do you feel better prepared to enter your nursing career as a result of this preceptor experience?				

<i>Suggestions for improvement or additional comments:</i>

ROBESON COMMUNITY COLLEGE

Preceptor's Evaluation of Overall Preceptorship Clinical Experience

Student name		Agency			
Preceptor/Unit		Semester			
		Yes	No	NA	Comments
1	Did the Faculty coordinator provided orientation to the preceptorship experience.				
2	Did the student demonstrate adequate orientation to the expectations of the unit staff?				
3	The faculty coordinator was available for communication to assist with the facilitation of the student experience throughout the clinical rotation.				
4	The student was receptive and interested in meeting goals and objectives of the experience.				
5	The student was prepared to perform clinically.				
6	The student was receptive and displayed appreciation for the clinical experience.				
7	The student sought out resources in situations in which he/she lacked knowledge.				
8	The faculty coordinator, staff, and student frequently discussed the progress of the student regarding the clinical experience.				
9	The faculty coordinator and student were responsive to reasonable staff requests and needs.				
10	Do you feel that the student and faculty member acted in a professional manner while working on this particular unit or agency?				

<i>Suggestions for improvement or additional comments:</i>

Preceptor Signature

Date

ROBESON COMMUNITY COLLEGE

Student's Evaluation of Preceptor

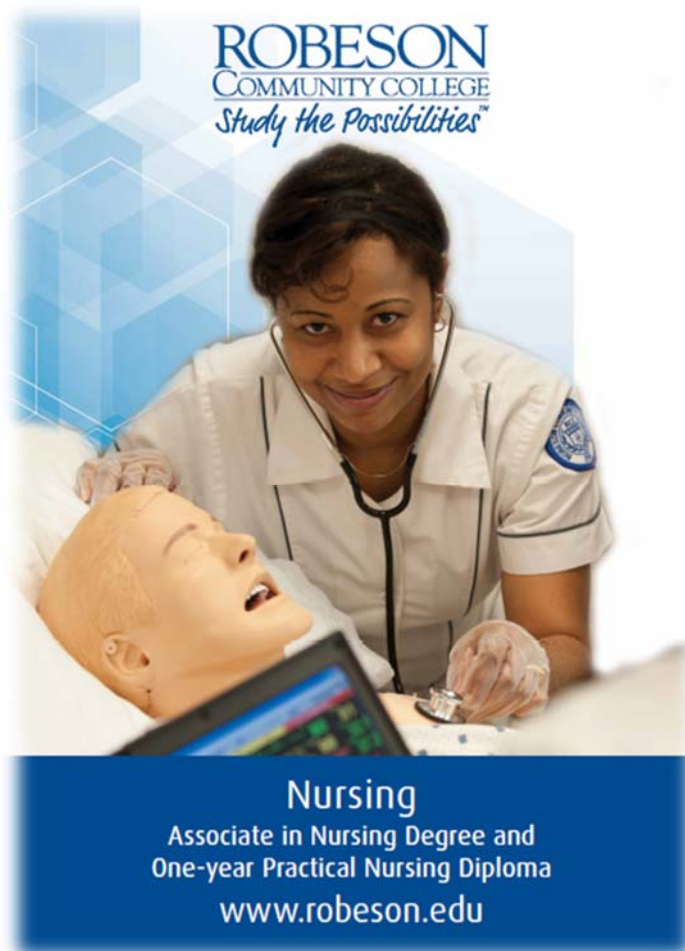
Student Name					
Student ID#		Semester			
Preceptor/ Unit		Agency			
		Yes	No	N/A	Comments
1	Did the preceptor adequately orient you to their unit and expectations?				
2	Did the preceptor adhere to the preceptor-student contractual agreement?				
3	Did the preceptor encourage open communication between preceptor, student, agency, staff and faculty?				
4	Was preceptor a positive role model?				
5	Was the preceptor supportive in helping meet student's goals and objectives?				

Suggestions for improvement or additional comments:

Student's Signature (SID#)

Date

*Robeson Community College
Department of Nursing*



*Thank you for
Participating in the Preceptorship Experience*