# CALIFORNIA STATE UNIVERSITY, BAKERSFIELD **DEPARTMENT OF NURSING**

## **BSN PRECEPTOR HANDBOOK**

2016-2018



## Dear CSUB Department of Nursing Preceptor:

Thank you for your support in helping our nursing students apply nursing practice concepts in your clinical area. Your willingness to be a preceptor is greatly appreciated by the students and faculty of California State University, Bakersfield (CSUB).

This Preceptor Handbook is designed to provide both the preceptor and the student with an understanding of the roles and responsibilities in this collaborative effort. It includes: information about the CSUB Nursing Program, The Preceptor Program expectations, and tips for you as a preceptor.

Undergraduate students in our program have performed basic nursing skills and some complex care nursing skills in the clinical area; however, many are not at an independent level yet. The undergraduate student will provide you with his/her learning contract, maintain a skill/performance checklist, and request your input to ensure that clinical experiences are planned which will allow for a positive and productive learning experience in managing care for a group of patients. Your guidance will be of benefit as students build upon their previous learning.

The clinical rotation covers one academic semester. Your support and guidance can prove beneficial for both the student and the hospital, and contributes to the next generation of professional nurses. The Nursing faculty is readily available to students and their preceptors for consultation and assistance.

At the end of this rotation please complete and return the enclosed forms as indicated. Your evaluation feedback is greatly appreciated, because it will aid us in our program's performance improvement efforts. Again, thank you for your participation in the CSUB Nursing Department Preceptor Program.

Respectfully,

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Myllis Heinz

Chair, Department of Nursing

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### MISSION AND VISION STATEMENTS

## Department of Nursing Mission, Vision, and Values

## Mission

The Department of Nursing provides nursing education to undergraduate and graduate students seeking entry into professional nursing or advanced nursing education. The faculty provides a collaborative, inclusive, and interactive learning environment committed to excellence in teaching, scholarship, service, and practice. The Department of Nursing accomplishes the mission through collaboration with the communities of interest.

The Department of Nursing fosters an environment that encourages lifelong learning and advancement within the profession. Graduates will have the acquired knowledge, skills, attitudes, and values essential to the practice of advanced professional nursing. As professional nurses, our graduates will engage in evidence-based practice in an inter-professional healthcare environment. In recognition of the health needs of a multicultural society, advanced professional nurses who are graduates of CSUB will address healthcare issues and needs of their community.

### Vision

The CSUB Department of Nursing pursues innovative ways to advance nursing practice and address the growing complexities associated with creating a healthier population in California's Central Valley.

### **Values**

The Department's values align with those of the university, including academic excellence, freedom of inquiry and statement, global awareness and cultural sensitivity, diversity, honesty and fairness, democratic governance, community engagement, and personal responsibility. The DON embraces professionalism and a respect for the inherent ethical values of altruism, autonomy, human dignity, integrity, and social justice as fundamental to the discipline of nursing.

Revised March 1, 2012; January 9, 2014; December 8, 2015; May 12, 2016

By the Undergraduate Program Committee

### PRECEPTOR PROGRAM

Preceptor Policies and Procedures (based on California BRN Regulations for Preceptorships)

- 1) Definition: The Preceptor Program at California State University, Bakersfield (CSUB) is a component of the Nursing Program that includes a teaching strategy designed to provide students with learning experiences that guided by an experienced registered nurse who may also be an expert in his or her area of specialty.
- 2) Preceptor shall be licensed as a Registered Nurse (RN) in the state of California and be employed by a CSUB affiliated health care facility for at least one year.
  - a. The preceptor shall be a RN with a Bachelor of Science in Nursing and/or who is highly experienced in the assigned clinical unit with demonstrated competence in customer relations/communication and clinical nursing skills. The preceptor is selected by the nurse manager and is willing and able to teach and serve as a role model for nursing students. S/he oversees the student's clinical practice in the facility. Along with the nursing student, the Preceptor is responsible for the patients for whom the student and the preceptor give care.
  - b. A relief preceptor, who meets the qualifications specified by CSUB Nursing Department, shall be available on the designated preceptor's days off to:
    - i. Ensure continuity of the student's precepted learning experience.
    - ii. Ensure that a preceptor is present and available on the patient care unit at all times while the student is providing care/nursing services.
  - c. Preceptors who have not completed a preceptor course through their facility must complete the CSUB Nursing Preceptor Orientation prior to serving as a preceptor (The Preceptor Orientation consists of completion of an online or in-class course as specified by the CSUB Nursing Department available at:
    - http://www.csub.edu/nursing/Resources/Preceptor/index.html.)
- 3) Students shall be enrolled in the designated CSUB course in which he/she is assigned to a preceptor and will not be compensated by the clinical facility where the clinical rotation occurs.
- 4) The Preceptor Program files shall be kept in the CSUB Nursing Department office and includes the following information for the designated semester/year assigned:
  - a. Dates of preceptorship
  - b. Preceptor names
  - c. Preceptor's licensure as RN in California
  - d. Preceptor responsibilities (as designated by the assigned course)
- 5) Preceptorship
  - a. The Preceptor Handbook serves as the written guidelines regarding the role and responsibilities of Nursing Faculty (Course Team Leader, Clinical Instructor), Preceptor, and Students and the various forms.
  - b. The Preceptor Handbook and syllabi are on file for N4901, N4121, and N4221.
  - c. Selection of Preceptors
    - i. A preceptor is an experienced registered nurse, employed by a clinical facility affiliated with CSUB, assigned to assist and supervise CSUB nursing students during educational experiences that are designed and directed by a CSUB faculty member. At a minimum, the preceptor must meet the requirements for a clinical teaching assistant as described in CA BRN regulations Section 1425(e).

- ii. As part of the affiliated agreement to assist with student learning experiences, each CSUB affiliated clinical facility identifies preceptors based on CA BRN regulation Section 1425.
- iii. The Course Team leader facilitates and assigns preceptors for students.
- d. Faculty/Student ratio shall not exceed 1:15.
- e. Orientation Plan-The Preceptor Orientation consists of completion of an online or in-class course as specified by the CSUB Nursing Department available at: <a href="http://www.csub.edu/nursing/Resources/Preceptor/index.html">http://www.csub.edu/nursing/Resources/Preceptor/index.html</a>. The Preceptor Orientation includes:
  - i. Overview of the CSUB Nursing Program
  - ii. Purpose of Preceptor Program
  - iii. Responsibilities of Nursing faculty (Team Leader, Clinical Instructor), Preceptor, Student
  - iv. Frequency and method of faculty/preceptor/student contact during preceptorship
    - 1. Phone/Email contact with Clinical Instructor ongoing and as needed
    - 2. Scheduling of face-to-face student/preceptor/faculty conferences.
      - a. Beginning of the semester
      - b. Midterm
      - c. End of semester
  - v. Faculty availability during preceptor learning activities-faculty shall be readily available to the preceptor and student during the entire semester that the student is assigned to a preceptor for clinical learning experiences.
    - 1. Clinical Instructor
      - a. Clinical Instructor shall be available by phone as well as make rounds at each facility.
    - 2. Team Leader
      - a. Available to be contacted by phone or email as needed.
  - vi. Communication Plan during preceptorship
    - 1. The Clinical Instructor shall periodically meet with the Preceptor and student to monitor progress of student's learning experiences.
    - 2. The Clinical Instructor meets with the Team Leader and other members of the course teaching team at least three times each semester to communicate progress of the learning experience and preceptor input/feedback.
  - vii. Student Evaluation:
    - 1. The syllabus and clinical evaluation forms serve as resources for conveying student performance requirements and course evaluation criteria.
    - 2. The preceptor provides input into evaluation of the Nursing student's performance to aid in determining if the student's abilities meet or fail to meet the course evaluation criteria.
    - 3. The Clinical Instructor, with input from the preceptor for supportive evidence of ratings, shall be responsible for the final evaluation of the student.
- 6) Ongoing evaluation of Preceptor Program
  - a. Preceptor evaluations of course: Courses are evaluated by the assigned preceptors.
  - b. Student evaluation of preceptor: Nursing students evaluate their assigned preceptors, as an ongoing evaluation of the preceptor.
  - c. Clinical Instructor's will regularly review preceptor performance via evaluation input from students and faculty, as an ongoing evaluation of the preceptor.
- d. Clinical Instructor's will review Preceptor evaluations of the course.

### NURSING PROGRAM OVERVIEW

## **Department Regulations**

- 1. Students must attain a grade of 'C' or better in all courses required for the major in order to progress in the program. Nursing courses in which students earn less than a 'C' may be repeated for credit only once, and this repetition requires departmental consent.
- 2. Nursing students must carry malpractice insurance in the amount of not less than \$1,000,000 per occurrence and \$3,000,000 per year to be admitted to clinical courses. The malpractice insurance must be purchased from CSUB.
- 3. Students are required to obtain a Health Clearance form from the Student Health Center at the beginning of the school year. This clearance includes tuberculosis skin testing, physical assessment, immunizations, and drug testing.
- 4. Students are required to have a background check.
- 5. Students must have access to transportation for their clinical experience.
- 6. Students must adhere to the dress code of both the CSUB Department of Nursing and the clinical facility, including a CSUB identification badge.

## **BSN Courses**

Courses are provided that include theory and clinical experiences in caring for clients across the life span who are from diverse backgrounds. A wide range of health care agencies are used for clinical experiences. The intent of the program is to graduate generalists in nursing who are concerned with promoting optimum health in a variety of settings.

Prerequisite Courses	Traditional Nursing Courses	RN-BSN Nursing Courses
Biol2210: Human Anatomy with Lab	N2110: Health Assessment and Physical Examination (Theory)	N3210: RN-BSN Transitions
(B2,B3)	N2111: Health Assessment and Physical Examination (Clinical)	N3250: Foundations of Nursing
Biol2220: Human Physiology with Lab (B2,	N2120: Fundamentals of Nursing Practice (Theory)	Research
B3)	N2121: Fundamentals of Nursing Practice (Clinical)	N3220: Professional Nursing:
Biol2230: Microbiology with Lab	N2140 Pharmacology I	Influence, Policy & Issues
Chem1000: Foundations of Chemistry (B1)		
Math1209 or Psych200: Elementary	N2130: Medical/Surgical Nursing (Theory)	N4220: Community & Public
Statistics or Intro. to Statistical Methods (A4)	N2131: Medical/Surgical Nursing (Clinical)	Health Nursing (Theory)
Comm1008: Public Speaking (A1)	N2150: Pharmacology II	N4221: Community & Public
Eng1109: Writing and Research (A2)		Health Nursing (Clinical)
Phil1019 or Soc1018: Critical Thinking	N3140: Gerontological Nursing Perspectives (Theory)	Nursing 4230: Pathophysiologic
(CSU Area A3)	N3141: Gerontological Nursing Clinical Aspects (Clinical)	Basis of Illness & Disease
	N3120: Nursing Care of Children and Adolescents (Theory)	
Cognate Courses	N3121: Nursing Care of Children and Adolescents (Clinical)	Nursing 4210: Healthcare Ethics
Biol2240: Nutrition	N3150: Nursing Research	Nursing 4240: Professional Nursing
Biol3220: Pathophysiology	N3160: Pharmacology III	Career Development
Psych1018: Explorations in Psychology		
N2190: Lifespan Development	N3110: Health Care of Women and the Childbearing Family	Nursing 4250: Special Leadership
Soc1008 or Anth1318: Intro to Sociology or	(Theory)	Project
Cultural Anthropology	N3111: Health Care of Women and the Childbearing Family (Clinical)	Nursing 4918: Leadership in
	N3130: Psychiatric and Community Mental Health Nursing (Theory)	Nursing (Capstone)
GE Courses	N3131: Psychiatric and Community Mental Health Nursing	
CSUB 1009: First Year Seminar I	(Clinical)	
CSUB1019: First Year Seminar II	N3170: Pharmacology IV	
Area C (C1 and C2)		
American Institution (Poli Sci & US History)	N4110: Critical Care Nursing (Theory)	
GWAR (or Upper Division Writing Course)	N4111: Critical Care Nursing (Clinical)	
Upper Division C	N4120: Community and Public Health Nursing (Theory)	
	N4121: Community and Public Health Nursing (Clinical)	
	N4180: Pharmacology V	
	N4900: Leadership in Nursing (Capstone)	
	N4901: Professional Nursing Practicum	
	N4140: Becoming a Nursing: NCLEX Preparation	

### TIPS FOR THE PRECEPTOR

As the preceptor, you are the main source of experienced information for the student. It is not uncommon for you to want to explain everything there is to know about the patients, procedures, medications, patient care systems, etc. In addition to role modeling nursing practice for the student, the following tips may help you to maximize the learning experience.

- 1) Be patient, patient. What seems like logical sense for the experienced nurse can be quite a challenge for students.
- 2) Keep your hands behind your back and lips sealed. Allow the student to make the decisions as you watch, unless he/she is proceeding in an unsafe manner. If you need to stop them, try and have them identify what they needed to correct before you assist them.
- 3) Use guided questioning with the student, allowing the student to give the rationale for an action. Talk the student through decisions and procedures, but ask them, "what do you think you should do?" After they answer, ask them for their rationale. This helps them with their critical thinking ability. Even though it puts them on the spot, in the long run they will benefit.
- 4) Make the students use their critical thinking skills. Do not be too quick to give them the answers (Unless it is a life-threatening situation). Ask them "what else could they do?". Would something else be better practice? If so why? Why not?
- 5) Seek clinical skills they can perform based on their skills checklist. Not all students have had the opportunity to perform every nursing procedure.
- 6) Encourage the student to communicate patient status and needs with the physician and other health care professionals. Have them ask questions if appropriate for time and place and situation.
- 7) Have the student give the verbal report to the next nurse.
- 8) Provide plenty of verbal feedback, both positive and negative. Most students want to be told if they have done it wrong. It helps for them to also evaluate why it was wrong.
- 9) Complete the student evaluation; the evaluation is a written report of student performance. It will be used in conjunction with the Clinical Instructor's evaluation and other assignments to determine the student's final grade (see forms).
- 10) Have fun and relax, you have a senior Nursing student who is eager to help you during this semester! And thanks, heaps and heaps.

### ROLES AND RESPONSIBILITIES

## **Nursing Student**

- 1) Identifies their own learning style and learning needs to ensure a successful and positive learning experience for meeting the course objectives. Develops a written Learning Contract based on self-evaluation (review of clinical course skills checklists and may use the hospital's/facility's RN orientation check list).
  - a. Conveys the learning style to the Preceptor and Clinical Instructor in terms of how the student learns best-visual, auditory, or tactile/kinesthetic; as well as how the student approaches a task (one specific way or through a combination of ways for data input) and the amount of input needed from others.
  - b. Conveys to the Preceptor, the teaching technique(s) that best fits his/her learning style: role model, gatekeeper, advisor, coach/teacher, protector, prescriber, or motivator.
  - c. Actively pursues opportunities to practice nursing skills/procedures and leadership skills to meet individualized goals/objectives and nursing course objectives.
- 2) Collaborates with the Clinical Instructor and Preceptor regarding progress during the learning experience to communicate the effectiveness of the experience.
- 3) Provides safe, ethical, and legal nursing care.
- 4) Solicits assistance from the preceptor (or other staff member, if appropriate) when needed.
- 5) Communicates as required with the preceptor and instructor, using contact information and directions provided.
- 6) Conducts ongoing and final self-evaluation of performance to determine if his/her abilities include meeting the course objectives.

## **Clinical Instructor**

- 1) Collaborates with the clinical facility to verify the availability of preceptors. The Team Leader identifies the number of preceptors needed based on course enrollment.
- 2) Collaborates with the Nursing Student, Preceptor to ensure adequate identification of performance expectations and goals/objectives for the student's learning experience. This includes assisting with the assessment, planning, implementation, and evaluation of the student's individualized learning experience.
- 3) Provides guidance and learning materials or tools to assist in identifying and meeting the student's learning needs.
  - a. Serves as a resource to the Nursing Student and to the Preceptor; assisting as needed with the implementation of an action plan to address areas for improvement of student performance.
- 4) Provides reliable contact information to preceptors and students. Maintains availability by phone with prompt message return during each shift that a student is engaging in patient care. Can respond in person, as needed, for emergencies or serious concerns expressed by the preceptor or student. Identifies a qualified substitute in advance if unavailable, notifies all students and provides contact information for the substitute.
- 5) Makes announced and unannounced visits to the clinical site during the semester to meet with the preceptor and the student, evaluate the student's progress, and address any questions or concerns.
- 6) Provides feedback and assigns grades for all required written assignments and on-campus conference participation/performance.

7) Completes student's evaluation and determines midterm and final grade, with input from the Preceptor and the nursing student.

### **Preceptor**

- 1) Assists the student by arranging opportunities and resources to obtain learning experiences appropriate to the course and individual learning objectives.
- 2) Signs the student's individual learning objectives following negotiation for appropriate learning experiences.
- 3) Assists the student in his/her orientation to the agency. This includes philosophy, policies, and procedures of the agency and expectations of the student. Examples include dress code, special equipment, emergency situations (fire, disaster, and codes), documentation, charting, medication administration, access to computer system for nursing documentation and retrieval of information, telephone and facsimile use.
- 4) Maintains sufficient availability during the same schedule as the student. The student will need to match the preceptor schedule rather than the preceptor accommodating the student's schedule. In rare situations, the preceptor may designate another agency member to assist the student.

  Designee must be an RN with sufficient experience to assist the student.
- 5) Signs the clinical timesheet verifying student attendance. Provide ongoing and culminating evaluation of the student's performance to the student and the assigned Clinical Instructor (see forms: Preceptor Evaluation of Student Performance; Clinical Performance Evaluation Tool).
- 6) Meets with the student during or at the end of each shift to discuss and document student achievement or lack of achievement of clinical objectives and individual student learning objectives. This is documented on the Individual Student Objectives and Learning Contract.
- 7) Notifies the student and Clinical Instructor at any time during the course that clinical or individual learning is not being met or when a student is not making sufficient progress toward achieving the course and individual objectives.
- 8) Evaluates the student's learning, in conjunction with the Clinical Instructor, based on the course and individual learning objectives. Completes a "Preceptor Evaluation of Student Performance" Form at the end of each clinical shift completed.
- 9) Evaluates the preceptor experience for the course.
- 10) Submits a completed evaluation of the course (Preceptor Evaluation of Clinical Preceptor Experience) to be filed in the CSUB Department of Nursing as required by the Board of Registered Nursing.
- 11) Submits a completed Preceptor Profile Form which includes information on his/her education, qualifications and work experience and Confirmation of Agreement To Precept to be filed in the CSUB Department of Nursing as required by the Board of Registered Nursing (see forms).

## Functions the students WILL NOT be able to perform, but are not limited to:

Administer conscious sedation

Administer IV chemotherapeutic agents

Defibrillate (exemption: auto defibrillator used in BLS)

Pass instruments on sterile field in operating room

Draw ABGs (exemption: if arterial line present)

Remove arterial lines or venous sheaths following invasive diagnostic studies

Receive telephone orders from a physician, taking or noting physicians' orders

Administer emergency drugs during a code

Start IV on pediatric patients less than 5 years of age

Vaginal exams

\*In addition, CSUB students cannot be counted as a "licensed personnel" when checking insulin, heparin, blood products or any medications requiring 2 licensed personnel.

### **DRESS CODE POLICY**

CSUB nursing students must follow CSUB and agency policy regarding uniform dress and professional behavior.

### Dress

CSUB nursing students represent the University and the Department of Nursing when interacting with patients, their families, staff, and others in the health care environment. The way students dress demonstrates respect for the University they represent and for the patients and families they serve. Students purchase and wear the uniform of the Department throughout their clinical experience, unless the clinical instructor advises otherwise. While wearing the CSUB uniform, students are clearly recognized at the University and by the clinical agencies accommodating the student experience. Professional attitudes and clothing reflect the same respectful behavior and professional attitudes even when the CSUB uniform is not required in the clinical area. Information regarding uniform purchase is provided during orientation. Uniform purchase, including the polo shirt worn during community health experiences, is mandatory. Students who fail to purchase their uniform in a timely fashion will be dropped from clinical courses.

The uniform top is light blue and includes the monogrammed CSUB Department of Nursing (DON) logo (with optional first name). The community uniform tip is a darker blue polo shirt, with the monogrammed CSUB DON logo.

The uniform's pants are a regulation type of opaque white or light blue (the same color and fabric as the traditional top and lab jacket) with straight leg pants (men or women), or knee to mid-calf length skirts or culottes (women only). The community uniform pants are a khaki colored pant (men or women) or knee to mid-calf length skirt or culottes. If culottes are warn, pantyhose must be warn underneath. Community students may also wear the CSUB scrub uniform. RN to BSN students are not required to purchase CSUB uniforms. For their community clinical rotation, the RN to BSN student is expected to follow the clinical facility's dress code; if healthcare scrubs are allowed by the facility, scrubs must be clean and in good condition. Women students must wear pantyhose with skirts. Only a regulation blue CSUB lab coat with the CSUB monogrammed Department of Nursing logo with optional student first name may be worn over the uniform. Appropriate undergarments must be worn and must be covered by the uniform. Students may opt to wear a white T-shirt under the uniform if desired.

Casual attire, such as shorts, jeans, thongs, or short midriff tops is not permissible in the clinical setting at any time. Faculty may have additional requirements for specific clinical areas. Please clear any exceptions to these items with your Clinical Instructor.

### Identification Badge

The CSUB Identification badge includes: student picture, student name and title "Nursing Student" in a minimum of 18-point font. This complies with a Board of Registered Nursing requirement. The identification badge <u>must</u> be worn above the waist. The identification badge must be worn at all times during clinical hours at agencies, and in the CSUB Nursing Skills/SIM Lab(s) and Computer Lab(s).

#### Footwear

Wear clean white, navy blue, black or dark brown shoes with closed toe and heel, with nonskid soles of nonporous material. Be sure shoe laces are white and clean. Women wear white or beige hose or solid white socks.

### Hair

Hair is neatly maintained, clean and kept off the collar. Hair is pulled back to prevent it from falling forward over the face while performing routine nursing duties. Any extreme look or color is not permitted. Plain barrettes or combs are allowed. Men may choose a neatly trimmed mustache or beard. Facial hair is maintained in short style to insure adequate seal for respiratory isolation masks/particulate respirators. No handle bar style mustaches or long beards are acceptable.

### Makeup

Makeup is fresh and natural. Extremes in color, glitter, or amount are not acceptable.

### Nails

No acrylic nails, extenders, polish or long nails are permitted. Hands and nails are clean and free of any stains.

### Perfume

Close contact with patients and staff requires students to not wear fragrance/perfume or after shave.

## Sunglasses

Sunglasses may be perceived as blocking interpersonal communication. Do not wear them indoors; however, polarized glasses that tint light gray in bright light are acceptable.

## Jewelry

The following jewelry is allowed: a) One small post earring (with no dangles) in each ear; b) One small ring; c) Small necklaces and neck chains inside the uniform; d) ankle chains that are not visible or audible; and e) small wrist watches with second hands. No other jewelry and/or visible body piercing is allowed in the clinical area. (Please do not assume because the pierced ornament is in your tongue that it is invisible. It is not acceptable professional dress).

#### **Tattoos**

No visible tattoos are permitted. Cover any tattoos that may be visible.

### Hygiene

Personal hygiene must be of high standards. Absence of body, mouth and clothes odor is necessary. Do not chew gum or smokeless tobacco while in clinical areas. Students may smoke only in the designated areas during assigned meal or break time.

### Exceptions

Requests for exceptions must be submitted to the Clinical Instructor and/or agency in writing a minimum of five working days prior to the day of the clinical experience.

The guidelines, established by CSUB students and nursing faculty, will be enforced for all students in the Nursing program. Any student failing to comply will be asked to leave the clinical area and may not return until modifications are made. This action will result in an unexcused absence for the day. Any desired deviation from this code must be presented to the Clinical Instructor for their consideration. Students should be aware that additional dress restrictions and infection control policies might be required in specific departments of agencies or hospitals.

## **FORMS**

## **CLINICAL FACILITY ORIENTATION**

This form is completed for each clinical course.

Course:	Instructor:	
Facility:	Unit:	
For each nursing clinical course, the instructo	r/preceptor is responsible for: <u>Date Complet</u>	hod
☐ Introduction of Nursing Personnel	Date Complete	<u>.cu</u>
☐ Tour of clinical agency		
☐ Instruction on charting procedures and forms		_
☐ Demonstration of use and care of commonly		
☐ Introduction of student safety and clinical car		
,		_
Students are responsible for knowing and/or l	ocating in the work area the following	:
☐ Policy & Procedures Manuals &/or Compute	r Database	_
☐ MSDS Manual		
☐ Fire Safety Policy & Fire Extinguisher Locat	ion	
☐ Evacuation Route		
☐ Occurrence Reporting Policy		
☐ Emergency Preparedness Policy		
☐ Infection Control Policy		
☐ Universal Precautions Policy		
□ HIPAA		_
☐ Hospital Emergency Codes	-	_
Print Student Name	Date	
Student Signature	Date	

Return form to your designated nursing faculty when all areas are completed.

○ N4901:	<b>Professional Nursing Practicum</b> or
<b>N4121:</b>	<b>Community/Public Health Nursing Practicum</b> or
<b>N4221:</b>	<b>Community &amp; Public Health Nursing Practicum</b>

## PRECEPTOR PROFILE FORM

	Under	graduate Prec	eptor Professional	Information & Resume	
Section 1: Name:				Date:	
RN License #:				Date of Expiration:	
Employer:				# of years:	
Title/Position:				Assigned Unit:	
Supervisor:				Phone:	
Work Phone:				Work Fax:	
Email Address	·				
Section 2: Nursing Educ Name of	ation: List your l College Location		lucation/advanced e ee Earned Dates o	ducation in nursing or other fields of Attendance	
Nursing Certi Name of Certifica	fications: List ar ation Organiz			Dates of Certification	
Clinical Exper	rience: List your EmployerJob		nical experience oth /Responsibilities	er than your present employment Dates of Employment	
				honors/awards you have received (e.g., Sign cholarships; publications; recognition)	na Theta
Preceptor Exporganizations Name of	oerience: List pri	or preceptor ex	perience with CSUI	3, other colleges, hospitals, & health care  Dates/Length of Preceptorship	

N4901:	<b>Professional Nursing Practicum</b> or
N4121:	<b>Community/Public Health Nursing Practicum</b> or
N4221:	Community & Public Health Nursing Practicum
]	N4121:

<u>**RELIEF**</u> **PRECEPTOR PROFILE FORM** Undergraduate Preceptor Professional Information

Name:	Date:
RN License #:	Date of Expiration:
Assigned Unit:	# of years at this unit:
Title/Position:	
Have you ever been a preceptor O Yes O No	
Nursing Education: List your highest nursing education	
Name of College:	
Location:	
Degree Earned:	Dates of Attendance:

(Have the relief preceptor complete this form and communicate with Clinical Faculty prior to start of shift)

000

CONFIRMATION of	CONFIRMATION of AGREEMENT TO PRECEPT							
Ι,	(Printed name of Preceptor) agree to act							
	(Printed name of Student)							
as part of his/her enrollment in the CSUB Nu	arsing Program clinical course.							
I am aware that I will need to confer with the to provide any information I believe is neces	eation and/or hospital-specific preceptor program.  Clinical Instructor during and at the end of the semester sary regarding the student's progress in the clinical nt, on the provided form should be submitted at the end							
I can be reached at: Phone:	Fax:							
Email:								
	Unit:							
Student's objectives:								
2.								
3.								
Agreement to Learning Cont	ract: to be signed during <u>first</u> clinical shift.							
Student's Signature	Date							
Preceptor's Signature	Date							

	11011 01	F STUDENT PERFOR	MANCE	2
Student:		Preceptor Name:		
Clinical Area:		Preceptor Signature:		
Clinical Instructor:	<del></del>	Date(s) of Care:		
Please evaluate the student's performance usin (5=Independent; 4=Supervised; 3=Assisted; 2=P	rovisional		1	
tudent Behaviors	Day 1 score	<b>Preceptor Comments</b>	Day 2 score	<b>Preceptor Comment</b>
rofessionalism:				
-Arrives on schedule, on time, in appropriate attire, &				
ppropriately groomed				
-Interacts in a professional manner with patients,				
amilies and hospital staff				
-Wears CSUB ID badge				
- No Electronic Devices per Hospital Policy				
reparedness:				
-Arrives to clinical site with appropriate reference				
ooks and equipment				
-Is prepared to meet assigned objectives				
Communication Skills:				
-Effective with patients/families				
-Effective with Preceptors/Physicians/Staff/Faculty				
afety:				
-Follows agency policies regarding nursing procedures				
-Seeks clarification when unsure of how to perform a				
rocedure				
<b>Iotivation:</b>				
-Actively seeks out learning opportunities				
-Is attentive to preceptor				
-Seems enthusiastic about assignment				
Clinical Skills:				
Able to competently perform basic medical surgical				
ursing care.				
Asks appropriate questions for clinical level  Clinical Hours of attendance				

\*Please contact the faculty if any questions or concerns. \*\*Please see next page for explanation of evaluation criteria.

### \*\*Grading Criteria for Weekly Performance Evaluations:

- **5.** Independent performance: Performance safely and accurately each time without supportive cues from preceptor or instructor. Demonstrates dexterity and spends minimal time on task. Focuses on client. Applies theoretical knowledge each time.
- **4.** Supervised performance: Performs safely and accurately each time, requires supportive cues occasionally during performance of tasks. Demonstrates coordination, spends reasonable time on task. Focuses on client with some focus on task. Applies theoretical knowledge with occasional cues.
- **3.** Assisted performance: Performs safely and accurately each time, requires frequent supportive and occasional directive cues. Demonstrates partial lack of dexterity. Focuses primarily on task or own behavior, not on client. Can identify principles but needs direction to coordinate with application.
- 2. Provisional performance: Performs safely under close supervision. Not always accurate, requires continuous supportive and directive cues. Demonstrates lack of skill and/or performs tasks with considerable delay with omissions and delays. Focuses entirely on task or own behavior. Applies principles inappropriately or adequately.
- 1. Dependent performance: Performs in an unsafe manner, requires continuous supportive directions and cues. Performs in an unskilled manner. Attempts activity or behavior yet is unable to complete. Focuses entirely on task or own behavior. Unable to identify principles or apply them.
- **0.** Negative Pattern: Demonstrates a pattern of unacceptable performances
- ❖ This criterion is to be used to evaluate the student's performance during each shift completed. Each performance evaluation should be thorough, honest, and fair. The total for each evaluation is scored out of 30 points possible. Each performance evaluation will be totaled and apply toward the student's final clinical performance grade for the course.

Rev 12/13 SP/KG

PRECEPTOR EVALUA	TION OF CLINICAL PRECEPT	OR E	XP	ERI	EN	CE		
Agency/Unit:	Course:		_Se	m/	Yr:			
<b>Instructions:</b> Rate each item below on area provided. Place your completed Ev delivery to the CSUB Department of Nu	valuation Form in the envelope provid							
Rate the usefulness and effectiveness of $(1=not \ very \ useful \ or \ effective, \ 3=neuther)$	-	ling th	е ар	pro	pria	ite n	umb	er
Part 1: Course Materials and Perform	mance Expectations: RA	<u>TING</u>						
1. The Preceptor Handbook helped n and ensure the student received a me	ne understand the preceptor program, aningful and beneficial experience.	1	2	3	4	5		
2. The student learning objectives we and my level of practice.	ere relevant for use in my designated	1	2	3	4	5		
	ctor on the student's learning objective expectations for student's performance		2	3	4	5		
4. The course objectives and student clinical experiences to better assist the	's learning objectives helped me idente students' learning needs.	tify 1	. 2	3	4	5		
5. The course expectations seemed a to function in a beginning nursing ro				1	2	3	4	5
6. I had the resources I needed from my role as a preceptor.	CSUB nursing faculty to fulfill	1	2	3	4	5		
Part 2: Clinical Experiences/Activitie	s:			<u>R</u>	ATI	NG		
7. Overall, I rate the effectiveness of	the clinical experience as:	1	2	3	4	5		
8. Overall, I rate my ability to perfor	rm the preceptor role as:	1	2	3	4	5		
9. In order to improve the effectivene	ess of the clinical experience, I sugge	st the f	ollo	win	g:			

## CALIFORNIA STATE UNIVERSITY, BAKERSFIELD

## **Department of Nursing**

<b>N4901:</b>	<b>Professional Nursing Practicum</b> or
O N4121:	<b>Community/Public Health Nursing Practicum</b> or
<b>N4221:</b>	<b>Community &amp; Public Health Nursing Practicum</b>

	STUDENT EVALUATION OF PRECEPTOR PERF	ORN	<b>1A</b> ]	VCI	E		
Pre	eceptor: Semester/Yea	Semester/Year:					
Stu	ndent: Facility/Unit	:					
is b in r obs	is form is to be used for performance evaluation of the preceptor as he/she works whose done Benner's Novice to Expert Scale with an expectation that the preceptor is funds areas. Rating of expertise can be based on the student's evaluation, the preceptor servation in the clinical setting of the preceptor's performance using the following structured Beginner/Sometimes, 3 = Competent/Regularly, 4 = Proficient/Most of the	unctio tor's s cale:	ning elf-e 1 = 1	g at a evalu	a pro uatio ice/r	officient level (4) on, and direct arely, 2 =	
Pro	eceptor Actions:	Le	evel	of l	Exp	ertise:	
1.	Taught from a foundation of clinical expertise.	1	2	3	4	5	
2.	Demonstrated professionalism and peer respect.	1	2	3	4	5	
3.	Discussed department expectations related to student's role.	1	2	3	4	5	
4.	Introduced student to social/work culture of the unit.	1	2	3	4	5	
5.	Evaluated student's clinical performance.	1	2	3	4	5	
6.	Planned experiences to address student's learning needs.	1	2	3	4	5	
7.	Collaborated to develop a learning plan based on student's individual learning needs.	1	2	3	4	5	
8.	Provided scheduled learning opportunities.	1	2	3	4	5	
9.	Met regularly to evaluate/discuss learning plan goal and outcomes.	1	2	3	4	5	
10.	Encouraged development of critical thinking skills in the student through discussion of alternative actions/priorities.	1	2	3	4	5	
11.	Applied effective teaching skills/techniques.	1	2	3	4	5	
12.	Provided an environment conducive for learning.	1	2	3	4	5	
13.	Provided resources and assistance appropriately.	1	2	3	4	5	
14.	Provided timely, sensitive, respectful feedback; in a quiet, private place.	1	2	3	4	5	
15.	Encouraged, coached, and motivated the student.	1	2	3	4	5	
16.	Was consistently available to provide support and assistance.  Additional Comments:	1	2			5	

### **EVALUATION OF CLINICAL AGENCY**

**PURPOSE**: To evaluate appropriateness and effectiveness of the clinical agency for student learning. **<u>DIRECTIONS</u>**: Check appropriate column and provide comments and/or examples. AGENCY NAME: \_\_\_\_ UNIT/SPECIFIC LOCATION: \_\_\_\_\_ <u>Always</u> <u>Usually Seldom Never</u> 1. Nursing staff were open and helpful. 2. Paraprofessional staff was open and helpful. The environment of clinical setting was conducive to learning. 3. The clinical setting provides for application of theory, 4. knowledge, and skills to meet course and individual objectives. 5. The agency practices the principles of safe patient care. Current nursing practices are reflected in agency policies and 6. procedures. 7. Nursing staff welcomed the opportunity to work with students. Other comments and/or examples: Suggestions to Improve Agency Experience: Semester/Year: \_\_\_\_\_ Course Number: Name (Print): Date:

Position: Student

Faculty

Name (Signature):

### COURSE SPECIFIC DOCUMENTS

## Overview of Leadership Theory and Clinical Courses (N4908 and N4901)

The nursing leadership courses for pre-licensure students include theory units and clinical units. These culminating courses of the BSN program require students to synthesize all previous learning and implement concepts in the clinical settings. Clinical assignments are based on the student's academic progress in the nursing program; the student's reported area(s) of interest, and availability at the clinical sites.

The nursing leadership courses cover the leadership theories and principles related to the management of nursing care for groups of clients through other nursing personnel. Specific content areas include but are not limited to, leadership theories and roles, problem solving and decision making, prioritization and time management, patient classification, staffing and scheduling, delegation, communication and collaboration, conflict resolution, quality improvement and risk management, budgeting and resource allocation, legal and ethical issues related to the leadership role, staff development, employee performance and managing personnel problems, and information systems.

<u>Clinical Hours</u>: To meet the requirements of the course, each student must complete 75 hours of patient care under the direct supervision of a RN Preceptor, clinical conference, on-line or face to face with the Clinical Instructor, and various written assignments that are outlined in the Course Syllabus.

## N4901 Professional Nursing Practicum Learning Objectives:

- i. Perform patient-centered care and the nursing roles (clinician, educator, researcher, and leader) at a beginning level of independent professional nursing practice while utilizing the CSUB Department of Nursing Conceptual Model.
- ii. Incorporate legal and ethical responsibilities into each of the nursing roles (clinician, educator, researcher, and leader).
- iii. Collaborate with other members of the interdisciplinary team to promote client (individual, family, group, aggregate, or community) system stability.
- iv. Synthesize nursing research in the professional nursing practice setting incorporating Evidence Based Practice.
- v. Apply critical thinking and evaluation skills of a beginning professional leader and advanced beginning clinician in the practice setting.
- vi. Integrate professional behavior as described in specific codes of nursing practice, agency, and departmental policies.
- vii. Formulate a leadership/management project relevant to the practice setting and communicate findings of the leadership/management project to a professional group and/or faculty.

**N4901: Professional Nursing Practicum** 

## Written Notice to Clinical Instructor of Clinical Setting and Calendar of Clinical Hours

Student is required to submit this form to instructor before beginning hours in your agency.

**Student Information:** 

Student Name:	<del></del>	
Student Phone #:		
Student Email:	<del></del>	
Clinical Setting Info	rmation:	
Facility/Unit:		
Unit Phone #:		
Preceptor Name:		
schedule must be subi	led shifts that will meet clinical hours (75 required). mitted in writing, in advance, to the instructor, precedent	
Date	Shift Time	

## CALIFORNIA STATE UNIVERSITY, BAKERSFIELD

## **Department of Nursing**

N4901: Professional Nursing Practicum

#### CLINICAL PERFORMANCE EVALUATION TOOL

Student Name:	Clinical Instructor:
Course Name/#:	Date:
eodibe i tunie, ii:	Dute.

Evaluation will be based on the degree to which the student meets the course objectives as they are delineated by the criteria stated in this evaluation tool. The Preceptor provides feedback, which is incorporated into the midterm and final evaluations of the students' performance.

### A. To achieve a passing grade, the student must meet the criteria in one of the following ways:

### 5. <u>Independent Performance:</u>

- \*Performs safely and accurately each time without supportive cues from preceptor or instructor
- \*Demonstrates dexterity and spends minimal time on task
- \*Focuses on client
- \*Applies theoretical knowledge each time

## 4. <u>Supervised Performance:</u>

- \*Performs safely and accurately each time, requires supportive cues occasionally during performance of tasks
- \*Demonstrates coordination and spends reasonable time on task
- \*Applies theoretical knowledge with occasional cues

### 3. Assisted Performance:

- \*Performs safely and accurately each time, requires frequent supportive and occasional directive cues
- \*Demonstrates partial lack of dexterity
- \*Focuses primarily on own behavior, not on client
- \* Can identify principles but needs direction to coordinate with application

## B. A student fails the objectives if any of the following are indicated:

### 2. Provisional Performance:

- \* Performs safely under close supervision. Not always accurate, requires continuous, supportive, and directive cues
- \*Demonstrates lack of skill and/or performs tasks with considerable delay or omissions
- \*Focuses entirely on task or own behavior
- \*Applies principles inappropriately or inadequately

#### 1. Dependent performance:

- \*Performs in an unsafe manner, requires continuous supportive directions and cues
- \*Performs in an unskilled manner
- \*Attempts activity or behavior yet is unable to complete
- \*Focuses entirely on task or own behavior
- \*Unable to identify principles or apply them

### 0. Negative pattern:

\* Demonstrates a pattern of unacceptable performances

**NSO** Not sufficiently observed

N No opportunityP Preceptor

CI Clinical Instructor

Adapted from: Bondy, K. N. (1983). Criterion-Referenced definitions for rating scales in clinical evaluation. *Journal of Nursing Education*, 22(9), 376-382.

## CALIFORNIA STATE UNIVERSITY, BAKERSFIELD

## **Department of Nursing**

N4901: Professional Nursing Practicum

## CLINICAL PERFORMANCE EVALUATION TOOL

Student Name: A	Agency:			
Preceptor Name: U	J <b>nit:</b>			
Course Objectives: To be completed by Preceptor [P] or To be completed evaluate using the 0-5, NSO (Not sufficiently observed), N (No opposite the opposite that the opposite	_	linical Instr	uctor	[CI]
1. Perform patient-centered care utilizing the various nursing roles a	t an	Midterm	Fir	nal
advanced beginner level of professional nursing practice.		CI	P	CI
A. Document the use of the nursing process in the care and management	of patients			
B. Demonstrate, through the use of a nursing care plan, the process for in and revising evidence based practice				
C. Perform nursing skills that are entry level expectations in the selected setting	clinical			
D. Identify the ANA Standards of Nursing for the specific clinical area				
		/1pt	/	1pt
2. Integrate legal and ethical responsibilities into each of the nursing	roles.	Midterm	Fiı	nal
		CI	P	CI
A. Identify legal issues for the specific clinical setting and mode				
B. Discuss ethical concerns with the preceptor for the specific clinical ex	perience			
		/1pt	/	1pt
3. Collaborate with other members of the inter-professional team to	promote	Midterm	Fir	nal
patient-centered care while maintaining system stability and maximufunctional health status.	ım	CI	P	CI
A. Attend multidisciplinary team meetings (rounds)				
B. Document multidisciplinary team meetings (rounds)				
C. Sustain collaborative relationships with other health care personnel				
		/1pt	/	1pt
4. Synthesize nursing research based on evidence-based practice in the	1e	Midterm	Fir	nal
professional nursing practice setting.		CI	P	CI
A. Share recent research Article (last 5 years) relevant to the clinical area				
B. Suggest change in nursing practice based on nursing research				

C. Assess or implement a change in nursing procedure based on nursing research				
	/	lpt	/	1pt
5. Assess issues related to use of technology/informatics and be compliant with	Mid			nal
regulatory mandates in the practice setting.	(	CI	P	CI
A. Describe examples of how technology and information management are related to the quality and safety of patient care				
B. Explain technologies that support clinical decision-making, error prevention,				
and care coordination				
C. Demonstrate the use of high quality electronic sources of healthcare information				
		/11	ot _	/1pt
6. Apply clinical reasoning and evaluation skills of a beginning professional	Mid	term	Fi	nal
leader and advanced beginner clinician in the practice setting.		CI	P	CI
A. Report on the effectiveness (outcome) of nursing procedures				
B. Demonstrate critical thinking skills in staff assignments, delegation of				
assignment, and client management				
C. Use initiative to think through problems, examine alternatives, and make				
decisions within capabilities	/	l nt		1nt
	/	lpt	/	1pt
7. Integrate professional behavior as described in specific codes of nursing	Mid	Midterm		nal
practice, agency, and departmental policies.	(	CI	P	CI
A. Behave consistently within the ANA Code of Ethics for Nursing				
, ,				
B. Follow agency and departmental policies for the following:				
1. Accurate documentation and record-keeping				
2. Maintain confidentiality of records and client communication				
3. Use appropriate agency forms				
4 Follow policy for use of agency equipment				
5. Arrive on time for clinical experience				
6. Notify preceptor/clinical instructor of absence				
C. Informs preceptor/instructor of progress/problems in the clinical experience				
	/	l pt	/	1pt
VII. Individual Objectives. See directions for criteria.	Mid	term	Fir	nal
Please Attach Individual Student Objectives		ľ	P	CI
1.				
2.				
3.				
	/′.	3pts	/	3pts

N4901: Professional Nursing Practicum

## CLINICAL PERFORMANCE EVALUATION TOOL

Midterm Evaluation	
Student Signature:	Date:
Clinical Instructor Signature (CI):	Date:
Comments:	
Final Evaluation	
Completion of Learning Contract (Final Evaluation) Student has completed 75 hours and met the objective completed required forms and must submit final evalue awarded by the Clinical Instructor (CI).	es of this N4901 course. Student and Preceptor
Student Signature:	Date:
Preceptor Signature (P):	Date:
Clinical Instructor Signature (CI):	Date:
Comments:	

Rev 12/13 SP/KG; 07/16 AH/PH

## N4121 / N4221: Community/Public Health Nursing Practicum COURSE SPECIFIC DOCUMENTS

## Overview of Community Health Nursing Practicum

The community/public health nursing courses include a total of 3 theory units and 3 clinical units the courses cover community health nursing process as applied to individuals, families and communities. Specific content areas include, but are not limited to principles of epidemiology, health education, community resources and referrals, nursing research, and sociocultural, environmental and political factors that impact health.

<u>Clinical Hours</u>: To meet the requirements of the course, each student must complete a total of 135 clinical hours; this includes the 90 clinical hours required by the California Board of Registered Nursing to obtain a Public Health Nursing Certificate.

## **Course Objectives:**

- 1. Apply family and community health concepts to the nursing process with individuals, families, and communities and function in a variety of nursing roles including clinician, educator, leader, and researcher.
- 2. Describe social determinants of health including environmental factors, ecological factors, and the availability of equitable community resources.
- 3. Utilize community assessment data to develop an understanding of health needs, prioritize goals, and implement population health interventions.
- 4. Identify policy issues that impact the health of individuals, families, and groups in a population and provide nursing care and documentation consistent with laws and regulations.
- 5. Design health education strategies in consideration of physiological, psychological, sociocultural, and developmental issues for effective teaching with diverse populations using a variety of methods.
- 6. Demonstrate culturally appropriate community/public health nursing practice and discuss the impact of health disparities.
- 7. Develop strategies based on epidemiological data to plan and implement measures for health promotion, disease prevention, risk reduction, and reduce the incidence of disease for individuals, families, and communities.
- 8. Incorporate ethical standards into all aspects of community/ public health nursing practice, and utilize these standards to promote social justice at the individual, family, and community level.
- 9. Develop competence in collaboration with individuals, families, communities and other partners of the inter-professional team to achieve improved health outcomes.
- 10. Utilize evidence based research relevant to community / public health nursing to guide interventions for individuals, families, and communities.

N4121/N4221: Community Health Nursing Clinical RN-BSN Timesheet

## **Student Name:**

Date	Activities / Site	Hours	Cumulative Hours

## N442 Community Health Nursing Practicum CLINICAL PERFORMANCE EVALUATION TOOL

Evaluation will be based on the degree to which the student meets the course objectives.

**Students:** Review the objectives and provide brief, specific examples of how each objective was met. Then complete a self-assessment for each objective using the rating scale below. You will rate one number for each objective, so you should have a total of 10 scores. Your preceptor and your instructor will each complete this process. You will then meet with your instructor to determine your final score for each objective. This process will be completed twice, at mid-term and during the final week.

**Preceptors:** Review the objectives and rate the student for each objective using the rating scale below. You will rate one number for each objective, so you should have a total of 10 scores. The student does not need to be present. Return the form to the student. The instructor/student will meet at midterm and during the final week to determine their final scores for each objective. You may be present if you desire, but this is not required.

## Students who fail any objective (score of 1 or 0) on the final assessment will fail the course.

## <u>5=Independent Performance</u>

- \*Performs safely & accurately each time without supportive cues from preceptor or instructor.
- \*Focuses on client, spends minimal time on tasks.
- \*Applies theoretical knowledge each time.

## 4=Supervised Performance

- \*Performs safely & accurately each time, requiring supportive cues occasionally.
- \*Focuses on client with some focus on task; spends reasonable time on task.
- \*Applies theoretical knowledge.

### 3=Assisted Performance

- \*Performs safely & accurately each time, requiring frequent supportive & occasional directive cues.
- \*Focuses primarily on task or own behavior, not on client.
- \*Can identify principles, but needs direction to coordinate with application.

## 2=Provisional Performance

- \*Performs safely under close supervision. Not always accurate, requiring continuous supportive & directive cues.
- \*Focuses entirely on task or own behavior.
- \*Demonstrates lack of skill.
- \*Applies principles inappropriately or inadequately.

## A student fails the objectives if any of the following are indicated:

### 1=Dependent Performance

- \*Performs in an unsafe manner, requiring continuous supportive directions or cues.
- \*Focuses entirely on tasks or own behavior.
- \*Attempts activity or behavior, yet is unable to complete it.
- \*Unable to identify principles or apply them.

### 0=Negative Performance

\*Demonstrates a pattern of unacceptable performances.

NSO indicates not sufficiently observed. N indicates no opportunity.

Adapted from Krichbaum et al. (1994). Criterion referenced definitions. Journal of Nursing Education, 22, 376.

## N442 Community Health Nursing Practicum CLINICAL PERFORMANCE EVALUATION TOOL

Student Name: Semester / Year:

**5**= Independent Performance; **4**= Supervised Performance; **3**= Assisted Performance; **2**= Provisional Performance (Passing); **1**= Dependent Performance; **0**= Negative Performance (Failing); **NSO**= Not Sufficiently Observed; **N**= No Opportunity

- I. Apply family and community health concepts to the nursing process with individuals, families, and communities and function in a variety of nursing roles including clinician, educator, leader, and researcher.
  - 1. Assessment: Recognize the significance of abnormal findings and establish appropriate priorities
  - 2. Diagnosis: Based upon the presenting data, develop suitable nursing diagnosis (es) and prioritize.
  - 3. Plan: Develop mutually agreed-upon plan of care that falls within the client's ability to achieve change and will be a guide to determine continuing or closing nursing services.
  - 4. Interventions: Implement appropriate interventions, case management, treatment and/or referral.
  - 5. Evaluate: Effectiveness of nursing interventions

Midterm Examples:	Midterm	Midterm	Midterm
	Score	Score	Score
	Student:	Preceptor:	Instructor:
Final Examples:	Final	Final Score	Final Score
	Score	Preceptor:	Instructor:
	Student:		

- II. Describe social determinants of health including environmental factors, ecological factors, and the availability of equitable community resources.
  - 1. Assess individual, family, or community health based upon biological, psychosocial and environmental risk factors.
  - 2. Examine social patterns affecting community health.
  - 3. Examine risk factors in the physical environment.
  - 4. Elicit and analyze data to determine patterns of health and illness, family life patterns, current use of services (e.g., health, social, legal), and patterns of high risk (e.g., parents, infants, family, environment).

5. Examine the availability of community resources for health services (e.g., interpreter services, transportation, financial assistance, social, and other services).

services, trainspertation, innament assistance, seems	.,	, , .	
Midterm Examples:	Midterm	Midterm	Midterm
	Score	Score	Score
	Student:	Preceptor:	Instructor:
Final Examples:	Final	Final Score	Final Score
	Score	Preceptor:	Instructor:
	Student:		

III. Utilize community assessment data to develop an understanding of health needs, prioritize goals, and implement population health interventions.

(See Community Assessment Guide)

- 1. Assessment: Gather community data through research, observation, and interviewing skills.
- 2. Diagnose: Develop community diagnoses by analyzing assessment data.
- 3. ID Outcomes: Describe desired outcomes and goals that reflect strengths and weaknesses of the community.

(See Community Intervention Guide)

- 4. Plan: Identify objectives for improved health outcomes.
- 5. Implement: Nursing interventions to inform, educate, empower, and/or link to providers.
- 6. Evaluate: Evaluate progress toward meeting goals and objectives and effectiveness of nursing interventions.

nursing interventions.	ı	ı	ı
Midterm Examples:	Midterm	Midterm	Midterm
	Score	Score	Score
	Student:	Preceptor:	Instructor:
Final Examples:	Final	Final Score	Final Score
	Score	Preceptor:	Instructor:
	Student:		

- IV. Identify policy issues that impact the health of individuals, families, and groups in a population and provide nursing care and documentation consistent with laws and regulations.
  - 1. Identifies issues and outcomes of health policy relevant to PHN practice.
  - 2. Practice within the scope of the Nurse Practice Act, adhere to health laws, agency, and CSUB regulations.
  - 3. Maintain an accurate documentation of all client services provided.
  - 4. Obtain informed consent prior to collaboration with other health and social service agencies.
  - 5. Maintain client confidentiality.
  - 6. Mandated Reporter: Appropriate use of available community resources for the protection and support of neglected/abused children and adults.
  - 7. Practice within Health department guidelines and follow the chain of command.
    - Records returned at end of day, no photocopies
    - Use correct forms
    - Follow policies for use of agency equipment
    - Follow dress code
    - Arrive on time/Utilize clinical time appropriately
    - Notify faculty of absences

Midterm Examples:	Midterm	Midterm	Midterm
	Score	Score	Score
	Student:	Preceptor:	Instructor:
Final Examples:	Final	Final Score	Final Score
	Score	Preceptor:	Instructor:
	Student:		

- V. Design health education strategies in consideration of physiological, psychological, sociocultural, and developmental issues for effective teaching with diverse populations using a variety of methods.
  - 1. Recognize normal physiological, psychological, and socio-cultural/behavioral conditions.
  - 2. Identify the family developmental level and support system.
  - 3. Apply concepts of health teaching and health promotion in the nursing care of individuals, families, and groups in the community.
  - 4. Teach the individual and family appropriate self-care techniques, procedures, and skills.
  - 5. Provide appropriate interventions for illnesses and conditions that come under community health nursing management.

nearth harsing management.			
Midterm Examples:	Midterm	Midterm	Midterm
	Score	Score	Score
	Student:	Preceptor:	Instructor:
Final Examples:	Final	Final Score	Final Score
	Score	Preceptor:	Instructor:
	Student:		

- VI. Demonstrate culturally appropriate community/public health nursing practice and discuss the impact of health disparities.
  - 1. Identify the usual coping patterns of the individual, family, or group and evidence of dysfunctional coping.
  - 2. Recognize cultural beliefs and behavior that can influence individual, family, and community health.
  - 3. Demonstrate respect for people with differing values, behaviors, and lifestyle
  - 4. Recognize health risks of ethnic groups and the association between ethnicity and health disparities.
  - 5. Incorporate cultural beliefs, life experiences, and views when assessing, planning, and implementing care for individuals, families or communities.

Midterm Examples:	Midterm	Midterm	Midterm
	Score	Score	Score
	Student:	Preceptor:	Instructor:
Final Examples:	Final	Final Score	Final Score
	Score	Preceptor:	Instructor:
	Student:		

- VII. Develop strategies based on epidemiological data to plan and implement measures for health promotion, disease prevention, risk reduction, and reduce the incidence of disease for individuals, families, and communities.
  - 1. Describe the process utilized in investigation of a suspected communicable disease (i.e. Host, Agent, and Environment).
  - 2. Understand the concept of risk reduction and its application in C/PHN practice
  - 3. Plan appropriate nursing interventions to prevent disease, reduce risk or resolve health problems of the individual, family, and/or community.
  - 4. Implement strategies that include the three levels of prevention.

Midterm Examples:	Midterm	Midterm	Midterm
	Score	Score	Score
	Student:	Preceptor:	Instructor:
<u>Final Examples:</u>	Final	Final Score	Final Score
	Score	Preceptor:	Instructor:
	Student:		

VIII. Incorporate ethical standards into all aspects of community/ public health nursing practice, and utilize these standards to promote social justice at the individual, family, and community level.

- 1. Demonstrates professional behaviors that uphold the standards of nursing: care and compassion; advocacy; accountability to clients, peers, agency, and faculty; positive demeanor; responsibility for actions; and effective communication.
- 2. Demonstrates respect for the inherent ethical values of altruism, autonomy, human dignity, integrity and social justice within the context of C/PHN nursing.
- 3. Uses ethical problem-solving strategies to address dilemmas related to care of individuals, families communities and populations
- 4. Assists clients in developing skills for self-advocacy

5. Promote social justice by utilizing strategies that improve population health outcomes.

et l'ionioté social justité s' avilleng su avegrés una l'	inprove popus		
Midterm Examples:	Midterm	Midterm	Midterm
	Score	Score	Score
	Student:	Preceptor:	Instructor:
Final Examples:	Final	Final Score	Final Score
	Score	Preceptor:	Instructor:
	Student:		

- IX. Develop competence in collaboration with individuals, families, communities and other partners of the inter-professional team to achieve improved health outcomes.
  - 1. Meet with faculty regularly to review client records and discuss progress toward attaining course objectives.
  - 2. Integrate feedback and constructive criticism from faculty, and agency personnel.
  - 3. Maintain professional relationship with peers, faculty, agency staff, and other health team members.
  - 4. Demonstrate use of effective communication and collaborative skills as part of an interprofessional team to deliver patient-centered care.
  - Make appropriate referrals to partner agencies or professionals, based upon individual or family needs.
  - 6. Follows through with clients and agencies or professionals to evaluate outcome of referrals made.
  - 7. Use self-reflection to examine the effectiveness of nursing actions that contribute to the team collaborative process.

8. Effectively contributes meaningful comments and insights into group discussions.

Midterm Examples:	Midterm	Midterm	Midterm
	Score	Score	Score
	Student:	Preceptor:	Instructor:

Final Examples:	Final	Final Score	Final Score
That Examples.			
	Score	Preceptor:	Instructor:
	Student:		
<ul> <li>X. Utilize evidence based research relevant to community interventions for individuals, families, and community 1. Engage in self-reflection, dialogue and collaborative evidence-based guidelines to C/PHN practice.</li> <li>2. Demonstrate the ability to analyze, critique, and in nursing practice and improve nursing care.</li> <li>3. Identifies sources of C/PHN health data and evide 4. Incorporate evidence based practices when planning individuals and families within the community set Midterm Examples:</li> </ul>	es. on with profe ntegrate resea nced based profe ng, implemen	essional colleag	ues to adapt
	Student.	rieceptor.	ilistructor.
Final Examples:	Final Score Student:	Final Score Preceptor:	Final Score Instructor:
7	Γotal Points	/50	/50
MIDTERM EVALUATION: Objectives met / partially i	met / not met	(circle one)	
Solves met, pattany	inet inet	(energ one)	
Student Self Evaluation:			
Faculty Evaluation:			
•			
Student Signature		Date	
Faculty Signature		Date	

<b><u>FINAL EVALUATION:</u></b> Objectives met / not met (circle one)	
Student Self Evaluation:	
Faculty Evaluation:	
Student Signature	Date
Faculty Signature	Date

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