TEXAS STATE UNIVERSITY

ST DAVIDS SCHOOL OF NURSING

**NURS 5310 Adult/Gerontology—SUMMATIVE CLINICAL FACULTY EVALUATION**

Student: Site: Term:

Date: Faculty Evaluator:

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|  | **Clinical Behaviors and Performance Quality** |
| 1 – Deficient | Practices in an unsafe manner and is unable to identify components for safe care. |
| 2 – Beginner | Practices in a questionably safe manner, requiring repeated prompting and direction from preceptor. |
| 3 – Advanced Beginner | Practices in a safe manner but may require frequent prompting and minimal direction from preceptor. |
| 4 – Competent | Practices in a safe, accurate and competent manner with minimal prompting and reinforcement from preceptor. |
| 5 – Proficient | Practices in a safe, accurate, proficient and self-directed manner, while independently seeking preceptor validation. |

**Instructions:**

* Using the descriptions above, please evaluate your student’s performance from 1-5 in each of the areas below.
* Utilize the comments box to highlight areas of strengths and weaknesses.
* To score, add up the number of points received and divide by the total number of possible points.
  + Students must achieve an average of “competent” (80%) to earn credit on this evaluation.

For grading purposes, the total points achieved will be entered into the gradebook.

* For this summative evaluation, any student not receiving a 3 or above on an item with an “ \* ” is required to meet with faculty. These items are designated safety objectives, failure to pass these criteria at an “advanced beginner” (3) level can result in course failure.

**Scoring: Total Points Achieved/Total Points Possible**

Total­­­­: \_\_\_\_\_ /­­­\_\_225\_\_\_ = \_\_\_\_\_%

|  |  |  |
| --- | --- | --- |
| **I. Assessment** | | |
| Subjective Data-History |  | Comments |
| 1. Obtains accurate and complete history for comprehensive, episodic, or acute visits for adult and geriatric patients. | 1 2 3 4 5 |  |
| 1. Demonstrates therapeutic interviewing skills. | 1 2 3 4 5 |  |
| 1. Organizes pertinent positives and negatives in history to arrive at priority differential diagnoses. | 1 2 3 4 5 |  |
| 1. Identifies psychological and socio-economic factors in history. | 1 2 3 4 5 |  |
| Objective Data-Physical Exam |  |  |
| 1. Performs and modifies comprehensive or focused physical examination on adult-geriatric patients. | 1 2 3 4 5 |  |
| 1. Identifies appropriate developmental, behavioral, and/or mental health screenings according to evidence-based guidelines. | 1 2 3 4 5 |  |
| 1. Correctly uses assessment techniques and equipment for physical exam. | 1 2 3 4 5 |  |
| Health Promotion & Risk |  |  |
| 1. Identifies health and psychosocial risks when implementing treatment plan. | 1 2 3 4 5 |  |
| 1. Promotes self-care, including for those with disabilities. | 1 2 3 4 5 |  |
| 1. Identifies potential risks to patients and providers at the individual and systems levels. | 1 2 3 4 5 |  |
| Differential Diagnosis |  |  |
| 1. Identifies probable differential diagnoses based upon history and physical exam. | 1 2 3 4 5 |  |
| ASSESSMENT SCORE TOTAL: |  |  |
| **II. Management** | | |
| Clinical Reasoning |  | Comments |
| 1. Identifies data from evidence and best available resources to assist clinical decisions. | 1 2 3 4 5 |  |
| 1. Identifies clinical decisions promoting functionality and quality of life while minimizing complications and risks. | 1 2 3 4 5 |  |
| 1. Identifies connections of pathophysiology or psychosocial findings to support diagnosis formulated. | 1 2 3 4 5 |  |
| Diagnostic Strategies & Interpretation |  |  |
| 1. Identifies accurate diagnoses with guidance. | 1 2 3 4 5 |  |
| 1. Participates in ordering appropriate tests, procedures, or screenings and discusses fiscal responsibility. | 1 2 3 4 5 |  |
| 1. Participates in reviewing tests results, procedures, or screenings accurately. | 1 2 3 4 5 |  |
| Patient Care Management |  |  |
| 1. Participates in management of health and illness including acute and/or chronic physical and/or mental illnesses, exacerbations, and common injuries in adult-gero patients. | 1 2 3 4 5 |  |
| 1. Participates in safely prescribing medications using understanding of pharmacodynamics and pharmacokinetics for patients in adult-gero patients.\* | 1 2 3 4 5 |  |
| 1. Participates in prescribing or making appropriate recommendations for non- pharmacological therapies including CAM.\* | 1 2 3 4 5 |  |
| 1. Participates in primary care skills or procedures accurately and safely.\* | 1 2 3 4 5 |  |
| 1. Participates in follow up, consults, referrals in a timely manner. | 1 2 3 4 5 |  |
| Documentation & Presentation |  |  |
| 1. Participates in timely documentation using SOAP or designated format for practice setting. Identifies coding/billing procedures. | 1 2 3 4 5 |  |
| 1. Oral presentation is brief and contains pertinent, accurate information. | 1 2 3 4 5 |  |
| Patient & Family Relationship | 1 2 3 4 5 |  |
| 1. Identifies patient preferences such as spirituality, cultural, and ethical beliefs. | 1 2 3 4 5 |  |
| 1. Works to establish a relationship with the patient/family characterized by mutual respect, empathy, and cultural considerations. | 1 2 3 4 5 |  |
| 1. Elicits patient participation in decision making for patient centered care. | 1 2 3 4 5 |  |
| Evaluation |  |  |
| 1. Participates in review of patient outcomes and follow through. | 1 2 3 4 5 |  |
| Patient Education | 1 2 3 4 5 |  |
| 1. Participates in providing relevant and accurate health education to patients for adult-gero patients. | 1 2 3 4 5 |  |
| 1. Considers language and cultural considerations of patients when participating in patient education. | 1 2 3 4 5 |  |
| 1. Considers patients’ readiness to learn prior to education, and comprehension level after education. | 1 2 3 4 5 |  |
| MANAGEMENT SCORE TOTAL: |  |  |
| **III. Leadership & Role** | | |
| Accountability & Professionalism |  | Comments |
| 1. Demonstrates accountability for own learning and professional behaviors | 1 2 3 4 5 |  |
| 1. Seeks out learning opportunities. | 1 2 3 4 5 |  |
| 1. Arrives prepared and in appropriate clinical attire. | 1 2 3 4 5 |  |
| 1. Models behaviors of self-efficacy, ethics, and advocacy—i.e. punctuality, confidentiality, respect, and communication. | 1 2 3 4 5 |  |
| 1. Integrates ethical principles in decision making.\* | 1 2 3 4 5 |  |
| 1. Accepts feedback from faculty/preceptor(s) and knows own limitations.\* | 1 2 3 4 5 |  |
| Role & Healthcare Systems |  |  |
| 1. Communicates NP Role and practice accurately. | 1 2 3 4 5 |  |
| 1. Identifies roles of interprofessional healthcare members in delivery of specialty services to provide a continuum of patient care. | 1 2 3 4 5 |  |
| 1. Uses knowledge of family theories to individualize care. | 1 2 3 4 5 |  |
| 1. Participates in patient centered care that includes confidentiality, privacy, comfort, support, and dignity. | 1 2 3 4 5 |  |
| 1. Uses informatics for knowledge to improve own practice and healthcare outcomes. | 1 2 3 4 5 |  |
| 1. Identifies barriers to access, quality, and/or cost-effective care. | 1 2 3 4 5 |  |
| 1. Identifies research that can improve practice and outcomes. | 1 2 3 4 5 |  |
| 1. Collaborates with interprofessional healthcare members to provide continuity of care. | 1 2 3 4 5 |  |
| LEADERSHIP & ROLE SCORE TOTAL: |  |  |

Comments/Recommendations:

# Student Signature Date

**Faculty Signature** Date