TEXAS STATE UNIVERSITY

ST DAVID’S SCHOOL OF NURSING

**NURS 5350 Integrated Family Primary Care—PRECEPTOR EVALUATION**

Student: Site: Term:

Date: Preceptor:

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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.

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| I. Assessment |
| Subjective Data-History |  | Comments |
| 1. Obtains accurate, complete, and timely history for comprehensive, episodic, or acute visits for patients across the lifespan for this course.
 | 1 2 3 4 5 |  |
| 1. Demonstrates therapeutic interviewing skills.
 | 1 2 3 4 5 |  |
| 1. Utilizes pertinent positives and negatives in history to arrive at priority differential diagnoses.
 | 1 2 3 4 5 |  |
| 1. Elicits physiologic, 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 of patients in an organized and timely manner.
 | 1 2 3 4 5 |  |
| 1. Conducts 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. Addresses 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. Articulates the impact of acute or chronic illness/injury on the patient/family as a whole.
 | 1 2 3 4 5 |  |
| 1. Practices minimizing risk to patients and providers at the individual and systems levels.
 | 1 2 3 4 5 |  |
| Differential Diagnosis |  |  |
| 1. Prioritizes differential based on history and physical exam.
 | 1 2 3 4 5 |  |
| II. Management |
| Clinical Reasoning |  | Comments |
| 1. Appraises data from evidence and best available resources to assist clinical decisions.
 | 1 2 3 4 5 |  |
| 1. Executes clinical decisions promoting functionality and quality of life while minimizing complications and risks.
 | 1 2 3 4 5 |  |
| 1. Synthesizes pathophysiological or psychosocial connections to support diagnoses formulated.
 | 1 2 3 4 5 |  |
| Diagnostic Strategies & Interpretation |  |  |
| 1. Selects and prioritizes accurate diagnoses.
 | 1 2 3 4 5 |  |
| 1. Orders appropriate tests, procedures, or screenings while maintaining fiscal responsibility.
 | 1 2 3 4 5 |  |
| 1. Interprets tests, procedures, or screenings accurately.
 | 1 2 3 4 5 |  |
| Patient Care Management |  |  |
| 1. Manages health and illness including acute and chronic physical and/or mental illnesses, exacerbations, and common injuries in assigned populations.
 | 1 2 3 4 5 |  |
| 1. Safely prescribes medications using understanding of pharmacodynamics and pharmacokinetics for patients across the lifespan.\*
 | 1 2 3 4 5 |  |
| 1. Participates in prescribing or making appropriate recommendations for non-pharmacological therapies including CAM therapies.\*
 | 1 2 3 4 5 |  |
| 1. Performs primary care skills or procedures accurately and safely.\*
 | 1 2 3 4 5 |  |
| 1. Adapts interventions to meet the complex needs of a diverse patient population.
 | 1 2 3 4 5 |  |
| 1. Designates follow up, consults, referrals in a timely manner.
 | 1 2 3 4 5 |  |
| Documentation & Presentation |  |  |
| 1. Documents or dictates timely and accurately using SOAP or designated format for practice setting; develops and/or updates patient problem list and plan. Uses accurate billing/coding procedures.
 | 1 2 3 4 5 |  |
| 1. Oral presentation is organized, succinct, and accurate.
 | 1 2 3 4 5 |  |
| Patient & Family Relationship | 1 2 3 4 5 |  |
| 1. Integrates patient preferences such as spirituality, cultural, and ethical beliefs into the healthcare plan.
 | 1 2 3 4 5 |  |
| 1. Establishes a relationship with the patient/family characterized by mutual respect, empathy, and cultural considerations.
 | 1 2 3 4 5 |  |
| 1. Collaborates with patient/family as a full partner in decision making for patient centered care.
 | 1 2 3 4 5 |  |
| 1. Assesses patient’s decision-making abilities and consults/refers when appropriate.
 | 1 2 3 4 5 |  |
| Evaluation |  |  |
| 1. Evaluates impact of life transitions and health status of patient outcomes.
 | 1 2 3 4 5 |  |
| 1. Uses informatics to capture data for evaluation of patient outcomes and nursing practice.
 | 1 2 3 4 5 |  |
| Patient Education | 1 2 3 4 5 |  |
| 1. Effectively provides relevant and accurate health education to patients across the lifespan.
 | 1 2 3 4 5 |  |
| 1. Utilizes appropriate patient education materials to address language and cultural considerations of patients.
 | 1 2 3 4 5 |  |
| 1. Analyzes patients’ health literacy and readiness to learn to guide appropriate education. Evaluates patient and/or family comprehension of the education provided.
 | 1 2 3 4 5 |  |
| III. Leadership & Role |
| Accountability & Professionalism |  | Comments |
| 1. Demonstrates accountability for 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 knowledge effectively and accurately.
 | 1 2 3 4 5 |  |
| 1. Discusses 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. Promotes patient centered care that includes confidentiality, privacy, comfort, support, and dignity.
 | 1 2 3 4 5 |  |
| 1. Integrates informatics for knowledge management to improve health outcomes.
 | 1 2 3 4 5 |  |
| 1. Advocates for improved access, quality, and/or cost-effective care.
 | 1 2 3 4 5 |  |
| 1. Translates research and knowledge to improve practice, policies, and outcomes.
 | 1 2 3 4 5 |  |
| 1. Collaborates with interprofessional healthcare members to optimize healthcare and practice outcomes and continuity of care for patients.
 | 1 2 3 4 5 |  |
| 1. Generates knowledge from clinical practice to improve practice and patient outcomes.
 | 1 2 3 4 5 |  |

Comments/Recommendations:

# Student Signature Date

**Preceptor Signature** Date