**TEMPLE COLLEGE Name: \_\_\_\_\_\_\_\_\_\_**\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Vocational Nursing Program

VNSG 2461: Clinical-LVN Training III

Clinical Evaluation Tool

*Using the Rating Scale for Clinical Performance, rate student performance using a* ***“0”, “1”, “2”, or “3”.*** *Cite specific care examples to support your ratings whenever possible. Use the definitions on the rating scale.*

**Critical elements are those performance expectations which are marked with a (\*). These behaviors are those which may stand alone as evaluation criteria. If a student receives a zero on an asterisked item on their final evaluation, they will fail VNSG 2461: Clinical-LVN Training III.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Grade** | | **Student Comments** | | **Grade** | | **Instructor Comments** |
| **I. PROVIDER OF PATIENT CENTERED CARE** | | | | | | | |
| **1. Assessment/Diagnosis** | | | | | | | |
| \*A. Perform, report, and document assessments |  | |  | |  | |  |
| \*B. Report any changes in the patient’s condition |  | |  | |  | |  |
| **2. Goals/Plan for Care** | | | | | | | |
| A. Identify measurable, patient centered goals |  | |  | |  | |  |
| B. Select interventions considering cultural aspects, and establishing priorities for care in collaboration with patient(s), their families, and the interdisciplinary team |  | |  | |  | |  |
| C. Implement plan of care safely and effectively for multiple patients |  | |  | |  | |  |
| **3. Implementation** | | | | | | | |
| A. Correctly perform skills for level |  | |  | |  | |  |
| B. Maintain professional nurse/patient boundaries |  | |  | |  | |  |
| C. Organize care for assigned patients based upon problem solving and identified priorities |  | |  | |  | |  |
| D. Proactively manage patient care priorities and follow-up on patient’s problems, taking into consideration patient risks |  | |  | |  | |  |
| E. Analyze pharmacotherapy for patient(s), and monitor patient response |  | |  | |  | |  |
| \*F. Administer medications according to the “6 Rights” |  | |  | |  | |  |
| **4. Teaching-Learning** | | | | | | | |
| A. Identify patient teaching-learning needs |  | |  | |  | |  |
| **5. Clinical data** | | | | | | | |
| A. Written work reflects knowledge base and patient data and prepared according to standards |  |  | |  | |  | |
| **II. MEMBER OF THE HEALTH CARE TEAM** | | | | | | | |
| **1. Collaboration with patients and health care team members** | | | | | | | |
| A. Communicate and collaborate in a timely manner with patients and members of the interdisciplinary health care team |  |  | |  | |  | |
| B. Demonstrate effective communication with instructor |  |  | |  | |  | |
| **2. Patient Advocate** | | | | | | | |
| A. Act as an advocate in activities that focus on improving the health care of patient(s) and their families, following established procedures and using correct chain of command |  |  | |  | |  | |
| **3. Technology** | | | | | | | |
| A. Use resources and current technology to provide patient care |  |  | |  | |  | |
| **III. MEMBER OF THE PROFESSION** | | | | | | | |
| **1. Accountability & Responsibility** | | | | | | | |
| A. Demonstrate clinical preparedness |  |  | |  | |  | |
| B. Adhere to all Temple College, VN Department, and clinical agency policy and procedures |  |  | |  | |  | |
| C. Seek out new learning opportunities |  |  | |  | |  | |
| \*D. Adapt behavior in response to instructor feedback |  |  | |  | |  | |
| E. Demonstrate respect for patient, instructors, peers & staff |  |  | |  | |  | |
| F. Participate in clinical conferences |  |  | |  | |  | |
| \*G. Maintain patient confidentiality and privacy |  |  | |  | |  | |
| H. Demonstrate effective time management |  |  | |  | |  | |
| **IV. PATIENT SAFETY ADVOCATE** | | | | | | | |
| \*A. Promote safe, effective environment for self and others |  |  | |  | |  | |
| B. Accurately identify patients |  |  | |  | |  | |
| C. Seek assistance when practice requires behaviors or judgment outside individual knowledge or expertise. |  |  | |  | |  | |
| **TOTALS** |  |  | |  | |  | |

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**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Clinical Evaluation Tool

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| --- | --- | --- | --- |
| **Scale average** | **Percentage Grade** | **Student Comments** |  |
|  |  |  |  |
| **Student’s Signature** | | | **Instructor’s Signature** |
| **Student’s Signature** | | | **Instructor’s Signature** |
| **Student’s Signature** | | | **Instructor’s Signature** |