

Print Student Name: Charity/ Lara Lun Block # 4
Unit: women's services

LVN-RN Preceptor Appraisal of Student Performance
(Preceptor Completes and Reviews with Student)

1. Please reflect on the student's clinical performance during the capstone preceptorship and rate the following: **[Place a ✓ in the appropriate box]**

(Graduate Competency-GC)	Below Average Performance Needs Significant Guidance	Satisfactory Performance Needs Average Guidance	Outstanding Performance Needs Minimal Guidance
Student uses the Nursing Process to provide comprehensive, evidence-based nursing practice. (GC 1)			✓
Student coordinates and develops a plan of care using time management and prioritization. (GC 1 & 3)			✓
Student makes safe clinical decisions. (GC 3)			✓
Student advocates for patient/family rights and quality nursing practice. (GC 4)			✓
Student uses professional, assertive, and collaborative communication. (GC 2, 5, & 6)			✓
Student documents according to agency/unit standards. (GC 2)			✓
Student develops teaching/learning strategies to meet patient/family needs. (GS 3 & 7)			✓
Student assumes a leadership role in clinical practice. (GC 6)			✓
Student is self-directed and demonstrates an interest in learning. (GC 8)			✓

2. What do you think are the student's personal strengths?

3. What have you identified as an opportunity for improvement for the student?

Preceptor Print & Sign: Tia Harper-Begorra RN, Diathapu Beema RN Date: 4/3/22
Student signature: C. Lara Lun Date: 4-3-22

Print Student Name: Charity Lara LVN Block # 4
Unit: OB Womens Services

EVALUATION OF PRECEPTOR BY STUDENT

Name of Preceptor: Tia Beccera Clinical Unit: Womens Services

Please rate your preceptor on each statement 1=Never/Poor 2=Seldom/Mediocre 3=Sometimes/Good 4=Often/Very Good 5=Always/Superb	Rating Please circle one				
	1	2	3	4	5
Establishes a good learning environment (approachable, nonthreatening, enthusiastic, etc.)	1	2	3	4	5
Stimulates me to learn independently	1	2	3	4	5
Allows me autonomy appropriate to my level/experience/competence	1	2	3	4	5
Organizes time to allow for both teaching and care giving	1	2	3	4	5
Offers regular feedback (both positive and negative)	1	2	3	4	5
Clearly specifies what I am expected to know and do during the training period	1	2	3	4	5
Adjusts teaching to my needs (experience, competence, interest, etc.)	1	2	3	4	5
Asks questions that promote learning (clarifications, probes, socratic questions, reflective questions, etc.)	1	2	3	4	5
Give clear explanations/reasons for opinions, advice, or actions	1	2	3	4	5
Adjusts teaching to divers settings (bedside, charting, nurses station, etc.)	1	2	3	4	5
Coaches me on my clinical/technical skills (patient history, assessment, procedural, charting)	1	2	3	4	5
Incorporates research data and/or practice guidelines into teaching	1	2	3	4	5
Teaches diagnostic skills (clinical reasoning, selection/interpretation of tests, etc.)	1	2	3	4	5
Teaches effective patient and/or family communication skills	1	2	3	4	5
Teaches principles of cost-appropriate care (resource utilization, etc.)	1	2	3	4	5

1. What did you like best about your preceptor?

Very easy going and knowledgeable.

2. Do you have any suggestions for your preceptor to consider when working with future students?

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Student Signature: C. Lara LVN Date: 4/3/22

Clinical Preceptorship Attendance Policy LVN-RN Track CSON

You must complete **192 hours** with your preceptors. The goal is to transition from the student nurse to the RN role by working **12-hour shifts**.

- The time prior to the shift starting and the time after does NOT count extra. **0645-1915 is simply a 12-hour shift**. If circumstances arise where you are staying later than 30 minutes, please let your faculty advisor know.
- Schedules must be submitted to your assigned **faculty advisor** via LMS drop box, LMS email, or text to your faculty advisor. Notify faculty advisor by text message or phone call of ANY changes to schedule, illness or getting pulled to a different unit. Promptness is expected so faculty is aware of your presence on the unit. **Failure to notify faculty will result in a clinical absence.**
- **Do not** pre-fill your Record of Precepted Clinical Experiences. You need to document your actual time after each shift and have your preceptor sign it.
- Submit a copy of your Record of Precepted Clinical Experiences with both your midterm and final evaluation.

Student Signature: _____

C. Au

Date: _____

4-3-22

Time & Attendance Record of Precepted Clinical Experiences
 (To be filled out daily at the end of each shift.)

Date:	Total Hours:	Location:	Preceptor: Print & Signature (Please print legibly)
3/13/22	12	L&D	Print: Tia Harper-Becerre Signature: <i>Tia Harper Becerra RN</i>
3/14/22	12	L&D	Print: Tia Harper-Becerre RN Signature: <i>Tia Harper Becerra RN</i>
3/15/22	12	L&D	Print: Tia Harper-Becerre RN Signature: <i>Tia Harper Becerra RN</i>
4/3/22	12	L&D	Print: Tia Harper-Becerre RN Signature: <i>Tia Harper Becerra RN</i>
			Print:
			Signature:
			Print:
			Signature:
			Print:
			Signature:
			Print:
			Signature:
			Print:
			Signature:
			Print:
			Signature:

****Important to keep up with and submitted to your advisor****