**California State University, Dominguez Hills**

**School of Nursing**

**MSN570 Nurse Administrator Role Performance II**

**Preceptor Assessment of Student Progress**

## Course:

**Semester/Year:**

**Date:**

**Student’s Name:**

**Preceptor’s Name/Title Email address Phone # (including area code)**

## Agency Name

**Agency Address**

Dear Preceptor, we appreciate your involvement in facilitating the professional education, development, and growth of our students. Feedback from the preceptor for the purpose of assessing the field experience portion of the student’s performance is an essential part of the evaluation process for this course.

Your student will provide you with this form and a stamped envelope with the instructor’s name and mailing address if you prefer to mail this form to the instructor. The instructor’s email address is also included on this form if you prefer to send the form by email.

There are two rating tools; one which covers general behaviors and one which identifies content/activity specific behaviors for the course. Each tool uses a five-point scale with 1 point indicating that progress was poor up to 5 for excellent. Utilize Not Observed category if the behavior was not applicable, assessed, or appropriate for your agency. Your comments regarding the level of performance of the student will be appreciated and you may add those to the back of this form.

It is strongly recommended that you share this assessment with the student. Ongoing feedback is helpful in promoting professional growth and alerting the student if improvement/corrective action is necessary.

Please contact the instructor if questions or concerns arise regarding the assessment process or the student’s performance.

*Student is to insert Instructor’s name & contact information before submitting this form to the Preceptor.*

**Instructor’s Mailing Address**

1000 E. Victoria Street, Carson, CA 90747

|  |  |  |  |
| --- | --- | --- | --- |
| **Instructor’s Name** |  |  | |
| **Instructor’s Email** |  | **Instructor’s Phone #** |  |

## Student’s Name

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **GENERAL BEHAVIORS** | **POOR** | | **EXCELLENT** | | | **NOT OBSERVED** |
| 1. Utilize approved Learning Contract to guide the field experience | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Participates in and takes advantage of agency learning opportunities | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Assumes responsibility for own actions. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Functions independently; seeks assistance when needed. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Abides by agency protocols and procedures. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Completes agency records promptly and accurately. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Bases professional practice on legal and ethical principles. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Uses the nursing process to provide professional nursing care. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Make decisions based on knowledge synthesized from physical and behavioral sciences, humanities and nursing science. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Performs primary care skills essential for client health assessment and health maintenance. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Demonstrates communicative, collaborative and administrative skills as a member or leader of a health care team. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Manages time effectively to accomplish goals. | 1 | 2 | 3 | 4 | 5 | N/O |

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| --- | --- | --- | --- | --- | --- | --- |
| **SPECIFIC SKILLS** | **POOR** | | **EXCELLENT** | | | **NOT OBSERVED** |
| NURSE ADMINISTRATOR SKILLS |  |  |  |  |  |  |
| 1. Demonstrates knowledge of appropriate nurse administrator behavior. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Devise an activity that positively impacts the role performance setting and demonstrates synthesis and integration of prior learning. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Collaborate with the instructor and preceptor to implement the nurse administrator role in a previously identified setting, and with a previously selected population, guided by an approved Learning Contract. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Appropriately applies techniques for managing conflict with professionals in the clinical setting. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Applies appropriate decision-making process to problems encountered in the academic or practice setting. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Construct and/or select evaluation measures appropriate to a given clinical learning assessment situation. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Analyze the governance, operational, and decision-making structures and processes of the role performance setting, including how resources are obtained and allocated. | 1 | 2 | 3 | 4 | 5 | N/O |
| 1. Formulate a plan for personal development and evaluation of leadership/management effectiveness that is congruent with your predicted role evolution and reflects current nurse administrator role expectations as well as personal career aspirations. | 1 | 2 | 3 | 4 | 5 | N/O |

**Written Comments by Preceptor (Optional):**

I verified that the student has completed the required clinical hours as recorded in the Clinical Hours-Activity log.

**Preceptor’s**

**Signature Date**