

Appraisal of a Clinical Learning Site of the National University College of Nursing

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Abstract

Clinical placement constitutes an essential and integral component of undergraduate nursing education programs globally. A supportive clinical learning environment is necessary to transfer students' knowledge to clinical practice. In line with the University's thrust on providing quality-related learning experiences for students in the College of Nursing, there is a need to continuously monitor and appraise clinical learning sites or affiliation agencies in order to ensure relevancy in the clinical instruction program. A descriptive correlational design was used to assess the relationship between satisfaction and effectiveness in the areas: objectives of the course or exposure, staff, students' learning activities, experiences, and facilities. The Appraisal revealed a satisfactory and effective evaluation. (M=1.58 and 1.64) Complementing the satisfactory assessment were the areas of Staff Effectiveness in terms of approachability and accountability. (M=1.520 and 1.479) The Operating Room and the Emergency Room were consistently assessed as extremely satisfactory and effective clinical learning placements. A strong relationship exists between satisfaction and the effectiveness of a clinical learning site. ($r=0.863$; $p=0.05$) An Orientation to the clinical focus and objectives of the exposure must be carried out on the first day, and towards the end of the exposure, this will minimize unclear expectations of the clinical placement. Clinical or RLE Coordinator must evaluate current clinical areas of exposure of students vis-à-vis clinical focus and curricular offerings, considering likewise the assessment of the clinical instructor who supervises the students in the clinical site. The Operating Room and Emergency Room learning placements are recommended to be retained. Areas of improvement on learning activities and clinical focus or objectives may be considered during the Faculty Development Program to ensure proper alignment, thus maximizing student learning. A cross-sectional study among year levels in the program may provide further substantial assessment of the satisfaction and effectiveness of other clinical learning sites of the university.

Introduction

Appraisal is an essential part of the educational process. The focus of appraisal is on local quality improvement and is analogous to clinical audit. Nursing schools require appraisal as part of their quality assurance procedures, but the value of appraisal is much greater than the provision of simple audit information. It provides evidence of how well students' learning objectives are achieved and whether teaching standards are maintained. Importantly, it also enables the curriculum to evolve. A nursing curriculum should constantly develop in response to the needs of students, institutions, and society. Appraisal can check that the curriculum is evolving in the desired way. It should be viewed positively as contributing to the academic development of an institution and its members.

Clinical placement constitutes an essential and integral component of undergraduate nursing education programs globally. (Al-Hassan, 2023) The quality of clinical placements significantly influences how students acquire skills, knowledge, and clinical reasoning, as well as how they develop as professional nurses and midwives. (Jamshidi, 2016) The clinical learning environment is crucial in helping students meet their learning objectives. A supportive clinical learning environment is necessary to transfer students' knowledge to clinical practice.

In line with the University's thrust on providing quality-related learning experiences for students in the College of Nursing, there is a need to continuously monitor and appraise clinical learning sites or affiliation agencies in order to ensure relevancy in the clinical instruction program. The felt necessity to assess these learning sites or affiliation agencies using a tool that addresses peripheral processes like the number of patient census that affects the entire system in the delivery of learning experience is the basis of this study. The indicators identified in the appraisal tool as parameters of quality learning in the clinical areas reflect the organization's goals

Research Questions

The study aimed to assess the satisfaction of students and the effectiveness of the clinical learning site of the College of Nursing. It specifically aims to answer the following specific objectives:

1. What is the degree of satisfaction of the clinical learning site by students based on the following parameters?
 - a. objectives of the course or exposure
 - b. staff
 - c. students' learning activities and experiences
 - d. facilities
2. What is the degree of effectiveness of hospital/agency affiliation as a clinical learning site?
3. Is there a relationship between students' effectiveness and satisfaction ratings as to clinical site, staff, students' learning activities, experiences, and facilities?

Significance of the Study .The study will be beneficial to the following:

1. Administration: The result of the study will contribute to the policy formulation of the institution since it will reflect the benefit of another appraisal tool measuring the effectiveness of clinical learning sites; thereby, it can be adopted as a form of monitoring mechanism in the clinical instruction program
2. Faculty Members: The result will ensure that teaching efficiency is further enhanced since the faculty are made aware of what factors affect the clinical teaching program
3. Students: The result will benefit the learners in as much as parameters of what constitutes efficient clinical learning sites are evaluated and addressed by the faculty and administration; therefore, it can be utilized in the selection of appropriate clinical learning sites or affiliation agencies

Review of Related Literature

Appraisal/Evaluation in Education.Educational evaluation is the systematic appraisal of the quality of teaching and learning. In many ways, evaluation drives the development and change of curriculum. At its core, evaluation is about helping educators improve education. Evaluation can have a formative role, identifying areas where teaching can be improved, or a summative role, judging the effectiveness of teaching. Although educational evaluation uses methods and tools similar to those used in educational research, the research results are more generalizable, and more value is invested in the interpretation of the results of evaluation. Nursing education is a complex combination of systematic teaching and learning activities within a professional environment where unplanned learning is an important part of clinical learning. How students learn is as important as what they learn, and understanding how they learn can contribute much to improving what they learn.

Evaluation may cover the process and/or outcome of any aspect of education, including the delivery and content of teaching. Questions about delivery may relate to the organization for example, administrative arrangements, physical environment, and teaching methods. Information may also be sought about the aptitude of the teacher(s) involved. The content may be evaluated for its level (it should not be too easy or too difficult), its relevance to curriculum objectives, and integration with previous learning.

Outcome measures may show the impact of the curriculum on the knowledge, skills, attitudes, and behavior of students. Kirkpatrick described four levels on which to focus evaluation; these have recently been adapted for use in health education evaluation by Barr and colleagues. Some indication of these attributes may be obtained by specific methods of inquiry — for example, by analyzing data from student assessments.

An ideal evaluation method would be reliable, valid, acceptable, and inexpensive. Unfortunately, ideal methods for evaluating teaching in nursing schools are scarce. Establishing the reliability and validity of instruments and methods of evaluation can take many years and be costly. Testing and retesting of instruments to establish their psychometric properties without any additional benefit for students or teachers is unlikely to be popular with them. There is a need for robust "off the shelf" instruments that can be used to evaluate curriculums reliably.

The evaluation process may produce a positive educational impact if it emphasizes those elements considered valuable and important by nursing schools. Evaluation may involve subjective and objective measures and qualitative and quantitative approaches. The resources devoted to evaluation should reflect its importance, but excessive data collection should be avoided. A good system should be easy to administer and use information that is readily available.

Interviews — Individual interviews with students are useful if the information is sensitive — for example, when a teacher has received poor ratings from students, and the reasons are not clear. A group interview can provide detailed views from students or teachers. A teaching session can end with a reflection by the group.

Surveys —Questionnaires are useful for obtaining information from large numbers of students or teachers about the teaching process. Electronic methods for administering questionnaires may improve response rates. The quality of the data, however, is only as good as the questions asked, and the data may not provide the reasons for a poorly rated session.

Information from student assessment —Data from assessment are useful for finding out if students have achieved the learning outcomes of a curriculum. A downward trend in examination results over several cohorts of students may indicate a deficiency in the curriculum. Caution is needed when interpreting this source of information, as students' examination performance depends as much on their application, ability, and motivation as on the teaching.

Several issues should be considered before designing an evaluation that collects information from students. **Competence** —Students can be a reliable and valid source of information. They are uniquely aware of what they can consume, and they observe teaching daily. They are also an inexpensive resource. Daily contact, however, does not mean that students are skilled in evaluation. Evaluation by students should be limited to areas in which they are competent to judge.

Ownership —Students who are not committed to an evaluation may provide poor information. They need to feel ownership for an evaluation by participating in its development. The importance of obtaining the information and the type of information needed must be explicit. The results of an evaluation will affect only subsequent cohorts of students, so current students must be convinced of the value of providing data.

Sampling —Students need to feel that their time is respected. If they are asked to fill out endless forms, they will resent the waste of their time. If they become bored by tedious repetition, the reliability of the data will deteriorate. One solution is to use different sampling strategies for evaluating different elements of a curriculum. If reliable information can be obtained from 100 students, why collect data from 300? .Anonymity is commonly advocated as a guard against bias when information is collected from students. However, those who support asking students to sign evaluation forms say that this helps to create a climate of responsible peer review. If students are identifiable from the information they provide, this must not affect their progress. Data should be collected centrally and students' names removed so that they cannot be identified by teachers whom they have criticized.

Feedback: Students need to know that their opinions are valued, so they should be informed of the evaluation results and provided with details of the resulting action. Evaluation of a clinical learning environment, particularly the clinical setting, is central to assessing the effectiveness of clinical education components in the pre-registration nursing program (Papastavrou, Dimitriadou, Tsangari, & Andreou, 2016). An understanding of nursing students' perceptions of the environment aids in formulating practical initiatives to meet their learning needs to improve their experiences in clinical placements (Serçekuş & Başkale, 2016). The main purpose of evaluation is to inform curriculum development. No curriculum is perfect in design and delivery. If the results of an evaluation show that no further development is needed, doubt is cast on the methods of evaluation or the interpretation of the results.

Student Satisfaction on Clinical Learning Site/Environment. Clinical placement constitutes an essential and integral component of undergraduate nursing education programs globally. (Al-Hassan, 2023) Thus, the provision of effective clinical learning sites contributes to the satisfaction of students.

Student satisfaction with the clinical placement reflects the quality of the clinical learning experience (Materne, Henderson, & Eaton, 2017). Nursing students' satisfaction with the clinical learning environment varied across countries and studies. It ranged from 50.5 to 84.5 % in Asia (Dahal & Acharya, 2020; Ergezen, Akcan, & Kol, 2022; Karim, Abdul Majid, Mohd Rashdan, Awang Besar, & Yaman, 2020), 42 %-89 % in Europe (Cant, Ryan, & Cooper, 2021; Warne et al., 2010), and 54.86 %-65.5 % in Africa (Adam et al., 2021; Mokadem, Shima, & Ibraheem, 2017; Musabyimana et al., 2019). Previous studies found that less frequent supervision (Papastavrou, Dimitriadou, Tsangari, & Andreou, 2016), increased the student- to-clinical educator ratio (Fernandez-García, Gimenez-Espert, Castellano-Rioja, & Prado-Gasco, 2020), short duration of clinical practice (Gonzalez-Garcia, Diez-Fernandez, Leino-Kilpi, Martínez-Vizcaíno, Strandell-Laine et al., 2021), inadequate clinical staff support and interpersonal relationship (Lawal, Weaver, Bryan, & Lindo, 2016), lack of pre-clinical orientation, shortage of medical equipment (Mbakaya et al., 2020), increase year of study (Papastavrou et al., 2016), and lower cumulative grade point average of students were factors that decrease nursing students' satisfaction towards clinical learning environment.

Papastavrou (2016) concluded that satisfaction level could be used as an important contributing factor towards the development and/or reforms of clinical learning environments to satisfy the needs and expectations of students.

Ultimately, the quality of clinical placements significantly influences how students acquire skills, knowledge, and clinical reasoning, as well as how they develop as professional nurses and midwives. (Jamshidi, 2016)

Description of the Instrument: The evaluation tool on the Effectiveness of clinical learning sites is a product of the need to monitor the affiliated agencies that provide student learning experiences. The tool was premised on the efficiency of the hospitals in terms of patient census, staff, and resources. The tool was anchored on a five-point Likert scale where 5 is highly satisfactory, 4 is very satisfactory, 3 is moderately satisfactory, 2 is satisfactory, and 1 is poor. The tool was previously used in a College of Nursing in Paranaque, Philippines. (Appendix 1)

Results and Findings: Satisfaction and Effectiveness of Clinical Learning Sites are crucial in the delivery of quality clinical programs in the BSN Curriculum. The provision of effective clinical learning sites contributes to the satisfaction of students. Table 1 shows the satisfaction of graduating nursing students with the clinical learning site of the university.

Table 1: Degree of Satisfaction on Clinical Learning Site

Components	Satisfaction	Standard Deviation
The client census was adequate and enough to meet course objectives of the students.	1.699	1.11
The students were able to use therapeutic nursing interventions according to level capabilities.	1.593	1.02
The agency provided the types of experiences necessary for students to meet course objectives	1.626	1.07
The supplies, equipment, and meeting space were adequate for student learning.	1.495	0.98
The staff assisted students when approached.	1.520	1.04
The staff were role models who demonstrate responsibility and accountability in client care.	1.479	1.00
The staff used good teaching skills with students.	1.536	1.02
The students could engage in self-directed learning activities.	1.626	1.02
References for student learning are available.	1.682	1.09
This agency is recommended as a teaching site.	1.593	1.13
ighted Mean	1.585	Satisfactory

- Legend:
- 1.0-1.5 Extremely Satisfied
 - 1.6-2.0 Satisfied
 - 2.1-3.0 Moderately Satisfied
 - 3.1-4.0 Fairly Satisfied
 - 4.1-5.0 Dissatisfied

Analysis: The degree of satisfaction with the clinical learning site by students based on objectives and patient census of the exposure was satisfactory (M=1.669, SD=1.11). This finding was noted in the areas of Intensive Care Unit and Hemodialysis with a mean of 1.6 and 2.0, respectively. The Emergency Room and Operating Room were assessed as extremely satisfactory (M = 1.45 and 1.5). A notable 13% of the total sample rated the objectives of the exposure in the learning site as fair. The data suggests that there is minimal satisfaction with the objectives and patient census of the exposure in the Private Hospital. The dissatisfaction may be attributed to less emphasis placed on the discussion of the clinical focus of the exposure. This means that students might not have been given adequate information as to the need for exposure in the clinical areas of the Private Hospital. This finding is supported by the study of Bisholt in 2014, stressing that dissatisfaction might be attributed to the barriers in accomplishing their learning objectives. Al Sabae's study (2017) revealed that students' satisfaction with their clinical experience was mainly because they met their rotation objectives, enjoyed their time, and worked with a team who were willing and available to assist them in learning. Likewise, in a study of Kim (and Kwon, 2014 and Sweet and Broadbent (2017) found that adequate satisfaction results with the creation of an active learning environment in which objectives are established that facilitate professional development appropriate to the student's level of ability. In terms of Staff satisfaction, students evaluated the staff in terms of approachability as extremely satisfactory (M=1.520), and (M=1.479) as to demonstration of accountability and responsibility in patient care. It was noted that the areas of the Operating Room and Emergency Room were evaluated as extremely satisfactory. (M=1.42 and 1.33) This means that students were enormously satisfied with the members of the staff. This suggests further that students felt good with the treatment they were

receiving from the personnel. This result is similar to the study done in Ethiopia in 2024, which found that students who got technical support from the clinical staff were more than two times as satisfied in their clinical learning environment as compared with those who did not get support. (Belay, 2024) Furthermore, this is consistent with studies conducted in Jamaica (Lawal et al., 2016), Iran (Rambod, Sharif, Khademian, Javanmardi Fard, & Raiessi, 2016), and Malawi (Mbakaya et al., 2020; Phuma Ngaiyaye et al., 2017). This might be related to students having better confidence, feeling like teammates and colleagues, and being motivated while working with clinical staff. This suggests that nursing students could be better involved in clinical practice due to the clinical personnel's support. With regard to student learning activities and experiences, students evaluated the Private Hospital as satisfactory in both areas. (M=1.626, SD=1.00) The Operating Room and Emergency Room were evaluated as extremely satisfactory (M=1.47 and 1.39); a notable 18% of the sample rated the learning activities as fairly satisfying. The rating of experiences acquired in the hospital revealed a satisfactory rating. (M=1.626, SD=1.07) The Operating Room and the Emergency Room were assessed to have provided the necessary experience based on the course objectives, with mean scores of 1.44 and 1.51, rated as extremely satisfied, respectively. A notable 14% of the sample evaluated the experiences in the hospital units as fair. These suggest that learning activities that the students can perform may be fairly adequate, and these affect their acquisition of experiences. This further means that with adequate experiences and the ability to perform in the clinical area, it provides acceptable learning capacities. The findings are similar to the study by Papastavrou (2016) in Cyprus, a strong and significant correlation was found between the pedagogical atmosphere and premises of nursing care, indicated that students' satisfaction is higher when they are actively involved in individual patient care with clear information flow and clear documentation of nursing care within a welcoming and educationally structured environment. As emphasized by Bibi (2023), to address this issue of fair to low satisfaction, clinical placement coordinators can work with healthcare facilities to ensure that students are offered diverse clinical experiences.

Facilities, equipment, and space were evaluated as extremely satisfactory. (M=1.495, SD=0.98) This means that students are impressed with the facilities of a Private Hospital, since state-of-the-art equipment is available. The finding was evident in the satisfaction ratings in the Operating Room, Intensive Care Unit, and the Emergency Room, with satisfaction ratings of 1.28, 1.40, and 1.39 interpreted as extremely satisfied, respectively. This result contradicts the satisfactory rating given to learning activities and experiences. Experiences that are adequate given the facilities and equipment complement each other. The result further suggests that equipment and facilities may not only be a source of adequate experience in the clinical areas, thus a satisfactory evaluation. This result is contrary to the result of a systematic review on satisfaction, stressing the relevance of the type of the hospital as crucial in satisfaction and learning environment. Publicly administered facilities have varied human resources, materials, and even the way pupils are supervised, making the experience satisfying (O'Brien et al., 2018, in Jadmiko, 2023). The degree of satisfaction with the learning site was evaluated as satisfactory (M=1.58). This result complements the satisfactory rating in experiences and learning activities acquired in the learning site. Several studies corroborated the current findings, emphasizing satisfaction of nursing students with their clinical learning environment, indicating favorable but not overly positive impressions (Thapur, 2023; Woo and Li, 2020).

Table 2: Effectiveness of Clinical Learning Site

Components	Effectiveness	Standard Deviation
The client census was adequate and enough to meet course objectives of the students.	1.691	0.978
The students were able to use therapeutic nursing interventions according to level capabilities.	1.617	0.909
The agency provided the types of experiences necessary for students to meet course objectives	1.731	0.940
The supplies, equipment, and meeting space were adequate for student learning.	1.544	0.820
The staff assisted students when approached.	1.560	0.886
The staff were role models who demonstrate responsibility and accountability in client care.	1.552	0.849
The staff used good teaching skills with students.	1.577	0.922
The students could engage in self-directed learning activities.	1.634	0.974
References for student learning are available.	1.804	0.965
This agency is recommended as a teaching site.	1.699	1.002
ighted Mean	1.641	Effective

Legend: 1.0-1.5 Extremely Effective

1.6-2.0 Effective

2.1-3.0 Moderately Effective

3.1-4.0 Fairly Effective

4.1-5.0 Not Effective

Analysis: The degree of effectiveness of the clinical learning site by students based on objectives and patient census of the exposure was effective (M=1.691, SD=0.978). The Operating Room and Emergency Room were assessed to be extremely effective in the objectives and patient census areas. (M=1.34 and 1.48) A notable 16% of the total sample rated the objectives of the exposure in the learning site as fairly effective. The data suggests that there is minimal effectiveness with the objectives and patient census of the exposure in the Private Hospital. The effectiveness may be attributed to the less emphasis placed on discussing the clinical focus of the exposure, which thus leads to dissatisfaction with it. There might be students who may have felt that the clinical learning site was fairly providing them with enough patients necessary for them to realize the objectives of exposure. This means that students might not have been given adequate information as to the need for exposure in the clinical areas of the Private Hospital, so they were assessed as fair. This finding is supported by Löfmark et al. (2012), who stressed that students had comparable judgements of the importance of completing learning goals in clinical practice as a quality clinical placement.

In terms of Staff effectiveness, students evaluated the staff in terms of approachability, finding it effective (M=1.560) and effective (M=1.552) in demonstrating accountability and responsibility in patient care. The findings were consistently observed in the Operating Room and the Emergency Room. (M=1.18 and 1.33) This means that students believed that the members of the staff are effective in terms of their accountability and approachability. This suggests further that students felt good with the treatment they were receiving from the personnel and perceived them to be responsible. Zulu (2021) in a qualitative exploratory study on experiences in clinical placement, found out that professional nurses at PHC clinics were experienced as being supportive, nurturing independence, warm, welcoming, non-judgmental, skilled, and, finally, encouraging the nursing students to explore. This finding contradicts the study made by Baghdadi (2023) that despite a positive satisfaction rating in the survey, 20.43% of respondents were unsatisfied with staff willingness/attitudes toward students in the learning environment. It was further emphasized by Baghdadi that exclusion is a problem that influences the whole experience since students need to feel like they belong (Jack et al., 2018) and are welcomed (Lamont et al., 2015) in a friendly environment (Van Der Riet et al., 2018). Furthermore, the educational environment was a barrier when it was not connected with students' clinical focus or objective, with worries that assignments such as elderly care were not sufficiently challenging (Robinson & Cubit, 2007). With regard to student learning activities and experiences, students evaluated the Private Hospital as effective in both areas. (M=1.634, SD=0.974) The assessment of the Operating Room and the Emergency Room of extremely satisfactory was commendable (M=1.28 and 1.42). A notable 18% of the sample rated the learning activities as fairly effective. The rating of experiences acquired in the hospital represents an effective rating. (M=1.731, SD=0.940) The Operating Room and the Emergency Room were consistently assessed to be extremely effective in the provision of experience. (M=1.34 and 1.39) A notable 13% of the sample evaluated the experiences in the hospital units as fair. The considerable number of students who have rated the learning activities and the experiences as fair may have perceived that activities and experiences in the learning site may not be enough to effectively achieve the learning objectives. These suggest that learning activities that the students can perform may be effective to a certain extent, and these affect their acquisition of experiences adequately. This further means that with adequate experiences and the ability to perform in the clinical area, it provides acceptable learning capacities.

Facilities, equipment, and space were evaluated as extremely effective. (M=1.544, SD=0.820) The operating Room and the Emergency Room are consistently assessed as extremely effective in the area of facilities, equipment, and space. (M=1.28 and 1.39) This means that students are impressed with the facilities of the Private Hospital, since state-of-the-art equipment is available. This result contradicts the fairly satisfactory rating given to learning activities and experiences. Experiences that are adequate given the facilities and equipment complement each other. The result further suggests that equipment and facilities may not only be a source of effective experience in the clinical areas. Zulu's (2021) study supports the findings of this study, when students evaluated the clinical

placement experience as effective. They emphasized that concerning the environment and services, the participants experienced that there was adequate availability of resources and equipment. In contrast, the study of Baba (2024) showed students agreed (58.9%) that the typical missing and inadequate equipment component could lead to an unpleasant clinical experience. Furthermore, Jacob's (2017) study revealed that most students had negative experiences, including a lack of equipment, inadequate clinical supervision, a high student population, and an inability to complete clinical objectives.

The degree of effectiveness with the learning site was evaluated as effective (M=1.64). This result complements the effective rating in experiences and learning activities acquired in the learning site. Several studies corroborate these findings, including Gemuhay (2019) and Baba (2024)

Table 3: Relationship of Effectiveness and Satisfaction on Clinical Learning Site

Effectiveness of Clinical Site	$r=0.86399314$
Satisfaction of Clinical Site	$p=0.5$

Analysis: The correlation statistics revealed a strong relationship between Satisfaction and Effectiveness of the clinical learning site. The satisfaction of students in the clinical site is related to their perception of effectiveness. As satisfaction increases, the evaluation of the effectiveness of the clinical site similarly improves.

Conclusion:

1. The Appraisal of Clinical Site revealed a satisfactory and effective evaluation. Complementing the satisfactory assessment were the areas of Staff Effectiveness in terms of approachability and accountability.
2. The Operating Room and the Emergency Room were consistently assessed as extremely satisfactory and effective clinical learning placements.
3. There is a strong relationship between satisfaction and the effectiveness of a clinical learning site.

Recommendations:

1. Orientation to clinical focus and objectives of the exposure must be carried out on the first day, and towards the end of the exposure, this will minimize unclear expectations of the clinical placement.
2. Clinical or RLE Coordinator must evaluate current clinical areas of exposure of students vis-à-vis clinical focus and curricular offerings, considering likewise the assessment of the clinical instructor who supervises the students in the clinical site.
3. The Operating Room and Emergency Room learning placements are recommended to be retained.
4. Areas of improvement on learning activities and clinical focus or objectives may be considered during the Faculty Development Program to ensure proper alignment, thus maximizing student learning.
5. A cross-sectional study among year levels in the program may provide further substantial assessment of the satisfaction and effectiveness of other clinical learning sites of the university.

Appendix 1

APPRAISAL OF A CLINICAL LEARNING SITE OF THE NATIONAL UNIVERSITY COLLEGE OF NURSING

Clinical Agency: _____

Units: _____

Term: _____

This appraisal was developed to provide information about the appropriateness, effectiveness, and satisfaction of the clinical facility for your learning experiences. Thank you for your assistance!

Instructions:

1. Mark your answers in the appropriate space by a check
2. Use an additional comment area to address positive/negative comments about a particular unit.

Components	Effectiveness					Satisfaction				
	5 Highly Effective	4 Very Effective	3 Moderately Effective	2 Slightly Effective	1 Not Effective	5 Highly Satisfactory	4 Very Satisfactory	3 Moderately Satisfactory	2 Satisfactory	1 Poor
The client census was adequate and enough to meet course objectives of the students.										
The students were able to use therapeutic nursing interventions according to level capabilities.										
The agency provided the types of experiences necessary for students to meet course objectives										
The supplies, equipment, and meeting space were adequate for student learning.										
The staff assisted students when approached.										
The staff were role models who demonstrate responsibility and accountability in client care.										
The staff used good teaching skills with students.										
The students could engage in self-directed learning activities.										
References for student learning are available.										
This agency is recommended as a teaching site.										