

# Basic Nursing Assistant Training Program

## Final Clinical Evaluation

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Student Name: \_\_\_\_\_

Clinical Instructor: \_\_\_\_\_

Clinical Site: \_\_\_\_\_

Evaluation Date: \_\_\_\_\_

|                        |  |          |          |
|------------------------|--|----------|----------|
| <b>Attendance</b>      | Meets clinical hour requirements.                          | <b>P</b> | <b>F</b> |
| <b>Communication</b>   | Respectful communication with residents and staff.         | <b>P</b> | <b>F</b> |
|                        | Reports resident information accurately to the nurse.      | <b>P</b> | <b>F</b> |
|                        | Asks questions and seeks guidance when needed.             | <b>P</b> | <b>F</b> |
|                        | Responds in a positive manner to feedback from instructor. | <b>P</b> | <b>F</b> |
| <b>Professionalism</b> | Demonstrates dependability.                                | <b>P</b> | <b>F</b> |
|                        | Works with a sense of urgency.                             | <b>P</b> | <b>F</b> |
|                        | Takes initiative.  | <b>P</b> | <b>F</b> |
|                        | Maintains confidentiality.                                 | <b>P</b> | <b>F</b> |
|                        | Shows empathy and understanding of residents needs.        | <b>P</b> | <b>F</b> |
|                        | Performs duties in a conscientious manner.                 | <b>P</b> | <b>F</b> |
|                        | Maintains residents rights.                                | <b>P</b> | <b>F</b> |
|                        | Follows safety guidelines.                                 | <b>P</b> | <b>F</b> |
|                        | Shows leadership skills.                                   | <b>P</b> | <b>F</b> |
|                        | Functions as a team player.                                | <b>P</b> | <b>F</b> |
|                        | Receptive to instruction and constructive criticism.       | <b>P</b> | <b>F</b> |
| <b>Manual Skills</b>   | Competent performance of mandated clinical skills.         | <b>P</b> | <b>F</b> |

### Summative Clinical Evaluation:

\_\_\_\_\_ **Pass:** Meets all clinical requirements and performs with minimal guidance in clinical.

\_\_\_\_\_ **Fail:** Does not meet clinical requirements and/or requires frequent to constant guidance.

**Overall Clinical Grade:** \_\_\_\_\_

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_