CLINICAL EDUCATOR SELF-EVALUATION TOOL
CLINICAL INSTRUCTION STRATEGIES
(Reuler, Messick, Gavett, McCready, & Raleigh, 2011)

Use the scale provided to rate yourself on the <u>frequency of use</u> of implementing the clinical instruction strategies listed. These items were developed from a multi-disciplinary EBP review of the research on clinical instruction across 4 topic areas: *group/team-based supervision; relationships; critical thinking skills;* and *feedback strategies*. Use the self-evaluation tool to then develop goals for improving your clinical instruction abilities (organized by topic areas).

RATING SCALE			
0	**1**	**2**	**3**
NEVER/RARELY	**OCCASIONALLY**	**FREQUENTLY**	**CONSISTENTLY**

I. RELATIONSHIPS (E. Reuler)	**0**	**1**	**2**	**3**
I-A. Clinical Instructor to Student				
1. I clarify and define my primary role(s) as the clinical instructor				
2. I clarify the secondary role(s) of mentor and advocate				
3. I clarify the role(s) of the student in the supervisory relationship				
4. I clarify the <u>style</u> of supervision/leadership that will be used based on the student's experience				
5. I set-up specific opportunities for communication with the student				
6. I clarify expectations for student and for myself as clinical instructor				
7. I seek input on a regular basis regarding whether the communication is satisfactory for the student				
8. I recognize when I am experiencing role strain				
I-B. Student to Clinical Instructor	**0**	**1**	**2**	**3**
1. I ask/check-in with student about expectations for my role as clinical instructor				
2. I ask/check-in with student about expectations for his/her role in the supervisory process				
3. I modify my supervision/leadership style based on input and feedback from student				

I-C. GOAL(S) TO PROMOTE OPTIMAL RELATIONSHIPS:

RATING SCALE			
0	**1**	**2**	**3**
NEVER/RARELY	**OCCASIONALLY**	**FREQUENTLY**	**CONSISTENTLY**

II. CRITICAL THINKING (E. Gavett)	**0**	**1**	**2**	**3**
II-A. Clinical Instructor to Student				
1. I orient student to expectations regarding problem solving				
2. I have a strategic questioning sequence in mind when assisting student to process information at increasingly complex levels				
3. I am aware of the complexity (low-level versus higher-level) of questions posed to student				
4. I am aware of and sensitive to potential barriers student may experience when asking questions				
5. I explicitly model and/or teach student how to pose questions that lead to greater independence in problem solving				
6. I encourage reflection and suggest/teach specific strategies that will facilitate in-depth understanding of situations				
7. I use the "think out loud" strategy to model the complexity of clinical reasoning and problem solving				
II-B. Student to Clinical Instructor	**0**	**1**	**2**	**3**
1. I seek input from student regarding self-awareness of strategies used to promote problem solving				
2. I seek input from student regarding possible barriers to asking questions				
3. I modify/change teaching strategies based on student feedback and/or developing levels of independence				

II-C. GOALS TO PROMOTE CRITICAL THINKING SKILLS:

RATING SCALE			
0	**1**	**2**	**3**
NEVER/RARELY	**OCCASIONALLY**	**FREQUENTLY**	**CONSISTENTLY**

III. GROUP SUPERVISION AND TEAM LEARNING **(V. McCready)**	**0**	**1**	**2**	**3**
III-A. Clinical Instructor to Student				
1. I include student-active teaching methods in my clinical instruction				
2. I appreciate the experience with collaborative teamwork of the younger generation students and include group learning experiences in clinical education				
3. I am willing to try a team model of supervision and let students engage in active problem-solving (versus my doing all the problem-solving).				
4. When meeting with students in a group, I make my expectations explicit from the very beginning				
5. I teach students how to incorporate critical thinking and objective observations into the group process				
6. I promote problem-solving through team learning				
7. Before using a group supervision format, I obtain knowledge and skills in group management and dynamics				
8. When interacting with groups of students, I take risks, give constructive feedback, and communicate openly				
III-B. Student to Clinical Instructor	**0**	**1**	**2**	**3**
1. When using a team model or small group format of supervision, I ask student about their expectations for my role and for their role				
2. I modify my role as group facilitator based on student input				
3. If appropriate, I pursue continuing education in group leadership/dynamics/process				
4. If appropriate, I pursue continuing education in student-active teaching methods				

III-C. GOAL(S) ON GROUP SUPERVISION & TEAM LEARNING SKILLS:

RATING SCALE			
0	**1**	**2**	**3**
NEVER/RARELY	**OCCASIONALLY**	**FREQUENTLY**	**CONSISTENTLY**

IV FEEDBACK STRATEGIES (C. Messick)	0	1	2	3
IV-A. CLINICAL INSTRUCTOR FEEDBACK TO STUDENT				
1. I use a respectful and considerate manner when conveying feedback				
2. I solicit student input on feedback preferences (timing; form) & use the suggestions				
3. I give immediate feedback on performance (minimally by the end of day)				
4. I present balanced feedback with clear description of what has been done well and specific aspects to improve				
5. I provide some feedback in writing to beginning level student clinicians				
6. I give fair feedback focusing on critical issues related to the student's performance				
7. I address challenging/difficult issues directly with the student in an open non-judgmental manner				
8. When giving negative feedback, I facilitate student understanding of why the skill is important and how to implement the behavior more effectively				
9. I develop specific goals with the student based on skills to improve				
10. I provide the student with data on performance of defined goal(s) allowing student to monitor their own progress				
IV-B. Student to Clinical Instructor Feedback	**0**	**1**	**2**	**3**
1. I ask student to give feedback on the clinical teaching I provide (e.g., what do I do that facilitates your learning; what could I do/change in order to optimize your skill acquisition?).				
2. I make modifications in my clinical teaching based on student input and/or provide a clear rationale for why a change is not optimal				
3. I develop written professional goals and pursue continuing education to increase my knowledge and skills in goal areas				

IV-C. GOAL(S) ON FEEDBACK STRATEGIES: