Dear ______________________:

This is to confirm your offer to provide me with _______ hours of clinical experience in accordance with the Wicks Wound Care Nursing Education Program requirements. The dates of the on-site clinical experience will be from ______________________ to ______________________. I understand that you will be able to provide the following experience: _______ hours of Wound Management. I agree to pay an honorarium in the amount of $ __________________________ to__________________________________ (name of agency) upon request. If any provision in this agreement cannot be met, the balance of the agreement will remain valid.

Sincerely,

________________________________
Wound Care Nursing Student
Document a clinical experience that demonstrates specific challenge and critical decision making.

WOUND Code: __________

Description of Problem: ______________________________________________________

Risk Factors: _______________________________________________________________

Assessment Findings:

Plan:

Rationale:

Evaluation (when appropriate):

Impression:
HARRISBURG AREA WOUND CARE SPECIALTY EDUCATION PROGRAM
CLINICAL COMPETENCY EVALUATION

STUDENT NAME: _________________________________

Please complete the clinical competency form using the directions that have been provided.

- Place your name followed by your initials at the end of this form. Where signature of evaluator is requested you may initial instead of placing your signature.
- Please rate the student performance using the rating scale provided.
- Record method used to document student competence using the key provided.
- Record clinical hours for each practice setting (student completes this section).

<table>
<thead>
<tr>
<th>Rating Scale</th>
<th>Key</th>
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<tbody>
<tr>
<td>A = Acceptable</td>
<td>D = Direct Patient Care</td>
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<tr>
<td>N = Needs Improvement</td>
<td>O = Observation</td>
</tr>
<tr>
<td>NV = Not validated</td>
<td>S = Simulation</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Competencies</th>
<th>Date &amp; Initials</th>
<th>Rating</th>
<th>Method</th>
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</table>

I. Acute & Chronic Wounds & Fistulas

1. Utilization of PU risk assessment tools
2. Assessment, classification and nursing management of wounds related to:
   - Pressure
   - Venous insufficiency
   - Arterial insufficiency
   - Diabetic Neuropathy
   - Surgery
   - Dehiscence
   - Infection
3. Utilization of PUSH or Pressure Sore Status Tools
4. Determine and perform ABI
5. Utilize three methods of debridement
6. Utilization of different types of compression
7. Select and use wound dressings appropriately
8. Select and utilize pressure redistribution devices
9. Demonstrate Wound Management Techniques
   - Cleansing
   - Irrigation
   - Packing
   - Culturing
10. Assessment and management of peri-wound, peritubular and peri-fistula skin.
11. Stabilization of tubes and drains.
12. Management of Fistulas
## II. Professional Practice

1. Demonstrates appropriate counseling techniques

2. Teaches patients/families effectively

3. Cost analysis/Budget (for position, project or program)

4. Development/presentation of in-service program

5. Ability to function autonomously to collaborate effectively with other health team members.

6. Basic Role Implementation Plan
   - Long and short term goals
   - Proposal for out-patient clinics
   - Data collection/medical records management
   - Involvement in professional activities
   - Recognize own strengths and limitations in knowledge and skills
   - Know when to seek appropriate assistance.
   - Value the continuing development of skills throughout one’s professional life

7. Utilizes evidence-based practice.

### TOTAL CLINICAL HOURS

<table>
<thead>
<tr>
<th>PRACTICE SETTING</th>
<th>TIME (Expressed in hours)</th>
<th>CLINICAL EXPERIENCE</th>
<th>TIME (Expressed in hours)</th>
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<tbody>
<tr>
<td>ACUTE CARE</td>
<td></td>
<td>WOUND</td>
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<tr>
<td>HOME CARE</td>
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<td>PROFESSIONAL ROLE</td>
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<td>LONG TERM CARE</td>
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<tr>
<td>CLINIC SETTING</td>
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<td>TOTAL</td>
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EVALUATION OF WOUND CARE SPECIALTY EDUCATION
CLINICAL PRACTICUM

Student __________________________________________________________

Clinical Preceptor ________________________________________________

Date of Clinical Experience __________________ to __________________

Total Number of Points: ________________

Final grade (to be calculated by Program Co-Director): _____________

The minimum passing grade for the clinical practicum is 75 points. If the student's grade is less than 75 points, the student, preceptor and program director will jointly develop a plan, i.e. additional hours, to support the student in meeting the course objectives. A grade of "1" (is not competent) requires a written summary of events to support the grade. When a student is evaluated as not competent during the practicum, they should have the opportunity to demonstrate competency prior to the summative evaluation.

IMPORTANT: The final evaluation should be reviewed in the student’s presence and the student must sign the evaluation form. Clinical evaluations that have not been signed by the student will be returned to the preceptor.
DIRECTIONS: Using the following scale, please indicate your evaluation of the student's performance for each objective.

1 = Not competent, 2 = Somewhat competent, 3 = Competent, 4 = Very competent
0 = Not observed

A. Demonstrates clinical proficiency in providing Wound Care nursing to the client throughout the life cycle.

1. Assesses the biopsychosocial response of the client with draining wound, fistula, pressure ulcer, lower extremity ulcer.  1 2 3 4 0

2. Utilizes information to analyze and interpret data to recognize relationships and outcomes.  1 2 3 4 0

3. Transfers knowledge from the classroom to the clinical setting.  1 2 3 4 0

B. Utilizes the nursing process to formulate a comprehensive plan of care for the client and family.

1. Assesses and documents the behavioral response of the client and family to an altered state of health.  1 2 3 4 0

2. Prioritizes clients' needs according to the nursing diagnosis.  1 2 3 4 0

3. Establishes short-term and long-term goals for health restoration and rehabilitation with the client and family.  1 2 3 4 0

4. Reassesses treatment regimens for appropriateness and effectiveness on a continuing basis.  1 2 3 4 0

5. Evaluates decision-making and judgment concerning all aspects of client care.  1 2 3 4 0

C. Integrates the teaching/learning process in providing healthcare to clients with fistulas, draining wounds and pressure sores

1. Relates the principles of teaching/learning to developmental stage in developing and implementing a teaching plan.  1 2 3 4 0

2. Evaluates teaching effectiveness as evidenced by the client's understanding and compliance.  1 2 3 4 0
D. Communicates effectively with the clients, families and health care professionals

1. Communicates effectively with clients, families and all members of the interdisciplinary team.  
   1 2 3 4 0

2. Verbalizes own feelings, attitudes and values with regard to student/patient interaction and student/faculty interaction.  
   1 2 3 4 0

3. Maintains records of learning progress and time.  
   1 2 3 4 0

4. Documents clinical care experience in accordance with clinical guidelines.  
   1 2 3 4 0

E. Demonstrates leadership skills, responsibility and accountability for self-direction.

1. Assumes the initiative in planning and developing goals for the learning experience.  
   1 2 3 4 0

2. Displays an ability to role model professional behavior.  
   1 2 3 4 0

3. Responds positively to new ideas and suggestions.  
   1 2 3 4 0

4. Demonstrates knowledge of theoretical concepts related to clinical situations.  
   1 2 3 4 0

5. Demonstrates adequate preparation utilizing a variety of resources.  
   1 2 3 4 0

6. Acts within established ethical/legal parameters in providing care and interaction with preceptor/agency.  
   1 2 3 4 0

F. Demonstrates leadership, responsibility and accountability for nursing care.

1. Exhibits self confidence in practice setting.  
   1 2 3 4 0

2. Assumes responsibility and accountability for nursing intervention/interaction.  
   1 2 3 4 0

3. Displays assertive behavior in collaboratively planning comprehensive client care with other members of the healthcare team.  
   1 2 3 4 0
G. Demonstrates critical thinking and decision-making in formulating plan of care for select individuals.

1. States rationale for clinical decision making.  

2. Incorporates knowledge of scientific principles in decision making process related to treatment regimens for the individual.

PRECEPTOR'S COMMENTS

STUDENT'S COMMENTS

FUTURE GOALS

FUTURE GOALS

Preceptor’s Signature Date 

Student’s Signature Date
PRECEPTOR NOTIFICATION FORM

Student ________________________________________________

<table>
<thead>
<tr>
<th>NAME</th>
<th>INSTITUTION</th>
<th>ADDRESS</th>
<th>WORK #</th>
<th>DATES OF CLINICAL</th>
<th>TYPE OF CLINICAL</th>
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Please mail this form to:

Wicks Educational Associates, Inc.
5012 Lenker Street
Suite 202 Maple Building
Mechanicsburg, PA  17050

Or, fax it to:  717-737-7683