



Once **each month** the **Primary Preceptor** and **student** are required to assess the student's progress using this tool. We would suggest that separate "draft" forms be completed independently by both the preceptor and the student prior to reviewing and discussing the student's progress together. Both will benefit by looking at the previous DATs to make this assessment. Obvious discrepancies in the evaluation between the student and preceptor should facilitate discussion between the two regarding their different perspectives. **One single monthly DAT should be completed at the conference.**

Because the Primary Preceptor may not be the only preceptor working with the student, a review of the Daily DATs by the Primary Preceptor, or a discussion with the other preceptors in the practice may need to occur before completing this form. The preceptor that guides the student on any given day will complete the Daily DAT but we ask that only the Primary Preceptor complete and sign the monthly form.

Please note that for each competency, there is a place to indicate when a competency is attained in the OUTPATIENT SETTING and in the INPATIENT SETTING. These may or may not occur simultaneously.

CRITERIA	CLINICAL COMPETENCIES	UNMET	MET - Outpatient (date met)	MET - Inpatient (date met)
1. ASSESSMENT SKILLS	a. Understands data collection process	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	b. Gives a complete patient presentation with minimal help.....	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
2. IDENTIFICATION OF PROBLEMS AND NEEDS	a. Lists all potential and actual problems and needs for this client.....	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	b. Provides anticipatory guidance for nursing staff in preparation of clients needs in both ambulatory and Intrapartum settings with assistance.....	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
3. ESTABLISHMENT OF PLANS AND PRIORITIES FOR ACTION	a. Begins to prioritize appropriately	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	b. Suggests a range of alternative plans and selects a plan with assistance	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
4. VERBAL INTERACTION SKILLS	a. Develops rapport with clients and staff	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	b. Appropriately teaches and counsels for common problems and concerns.....	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
5. PSYCHOMOTOR SKILLS	a. Performs hand maneuvers previously practiced in an appropriate manner.....	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	b. Accurately interprets own clinical findings in most common situations	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	c. Combines verbal explanations to client with performance of skills in all settings as appropriate	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
6. KNOWLEDGE BASE	a. Identifies common deviations from normal	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	b. Provides rationale for management plans and priorities	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	c. Uses resources, including clinical guidelines, appropriately to increase knowledge base.....	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
7. DOCUMENTS	a. Legibly records with verification, all parts of NMW management on client record	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	b. Ensures that student records are complete	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____



CRITERIA	CLINICAL COMPETENCIES	UNMET	MET - Outpatient (date met)	MET - Inpatient (date met)
8. SAFETY OF STUDENT PERFORMANCE	a. Demonstrates knowledge of own boundaries of safe management.....	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	b. Represents self and skill level accurately	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	c. Plans with preceptor prior to performing manual tasks or implementing NMW management plans	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
9. PROFESSIONAL ROLE	a. Conveys motivation and enthusiasm	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	b. Concentrates on tasks and completes them	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	c. Begins to identify own learning needs and is developing self evaluation skills	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	d. Incorporates preceptor feedback into performance	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	e. Demonstrates recognition of client rights.....	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	f. Demonstrates follow up study of client's problems from the previous clinical day.....	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
	g. Identifies and demonstrates some behaviors necessary in the role transition to nurse midwife	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____

Primary Preceptor Signature: _____ Date _____

Student Signature: _____ Date _____