

Lactation Clinical Training: Student Evaluation Form (to be completed by Supervising Preceptor)

Student: _____ **Preceptor:** _____ **Term and Year:** _____

Instructions for Evaluating Preceptor: For each area of evaluation, please rate your student’s performance and provide specific and constructive feedback comments for the academic term under consideration. Remit completed and signed form to Birthingway by the Monday following the last day of the term (date _____).

Note: Your comments are valuable! Please make sure to clarify your feedback in the comments fields, especially if you are marking “Disagree” or “Strongly Disagree.” Attach additional comments on a separate sheet of paper if necessary.

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| <p>The student exhibits accountability in their work with me. <i>Examples: Good attendance and punctuality at visits and meetings, completes tasks as assigned and on time, easily reachable and responsive via phone/text/email, shows commitment to lactation profession, student is committed to her own personal and professional growth and education, etc.</i></p> <p style="text-align: center;"> Strongly Agree Agree Neutral Disagree Strongly Disagree </p> <hr/> <p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5 4 3 2 1 </p> | <p>Accountability Comments:</p> |
| <p>The student works with professionalism and respects confidentiality. <i>Examples: Arrives prepared for meetings and visits, has healthy boundaries around personal and work life, professional appearance and behavior within the context of the work setting, respects confidentiality, able to learn from situations where student is not yet fully confident, practices within IBLCE’s Code of Professional Conduct, etc.</i></p> <p style="text-align: center;"> Strongly Agree Agree Neutral Disagree Strongly Disagree </p> <hr/> <p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5 4 3 2 1 </p> | <p>Professionalism and Confidentiality Comments:</p> |
| <p>The student demonstrates good interpersonal communication skills. <i>Examples: Uses active listening and nonviolent communication skills with clients and preceptor, able to give and accept constructive feedback, sensitive to the needs and feelings of others, cooperative with preceptor and other team members in various settings, asks for help and advocates for their own needs, appropriate tone of voice and choice of words, etc.</i></p> <p style="text-align: center;"> Strongly Agree Agree Neutral Disagree Strongly Disagree </p> <hr/> <p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5 4 3 2 1 </p> | <p>Interpersonal Communications Comments:</p> |

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| <p>The student is capable of communicating with other healthcare providers. <i>Examples: Thorough, legible, complete, and coherent charting skills, knowledge of relevant medical terminology and correct pronunciation, appropriate interactions with other healthcare personnel, etc.</i></p> <p style="text-align: center;"> Strongly Agree Agree Neutral Disagree Strongly Disagree </p> <hr style="width: 100%;"/> <p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5 4 3 2 1 </p> | <p>Healthcare Communications Comments:</p> |
| <p>The student's clinical skills are appropriate for her level of experience. <i>Examples: Asks relevant and insightful questions, helpful in visits, knows what skills/interventions to use and why, demonstrates holistic lactation knowledge and shares knowledge appropriately, observant and uses senses, develops thoughtful and effective care plans, demonstrates understanding of how to provide lactation care, communicates well with clients and is sensitive to clients' feelings and needs, etc.</i></p> <p style="text-align: center;"> Strongly Agree Agree Neutral Disagree Strongly Disagree </p> <hr style="width: 100%;"/> <p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5 4 3 2 1 </p> | <p>Clinical Skills Comments:</p> |
| <p>The student's overall performance meets or exceeds my expectations. <i>Examples: Your general impressions and evaluation of this student's overall performance and growth within your time as their preceptor.</i></p> <p style="text-align: center;"> Strongly Agree Agree Neutral Disagree Strongly Disagree </p> <hr style="width: 100%;"/> <p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5 4 3 2 1 </p> | <p>Overall Evaluation Comments:</p> |

I have discussed my feedback with the student. Yes No

I would like to discuss my feedback with the Lactation Program Coordinator. Yes No

Preceptor Signature: _____ Date: _____

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| Office Use Only: | Date/Time/Initials: |
| Routing: | _____ LPC _____ File |