

Sultan Qaboos University
College of Nursing

Student Evaluation Tool of Clinical Training Sites

Name of Clinical Training Site:.....

Course Name (Code):..... Semester:.....

Student Name (**optional**):..... Student Id #(**optional**):.....

INTRODUCTION:

The *Student Evaluation Tool of Clinical Training Sites* was developed to obtain a feedback from students to help in determining the effectiveness of the clinical training sites in achieving clinical course learning objectives.

The feedback collected will be used to determine if current clinical training sites meet the overall curriculum objectives and promote teaching-learning environments that allow students to develop clinical confidence and competence.

INSTRUCTIONS:

This form is designed to determine your (student) perception of the appropriateness of the clinical training site. Read each item carefully before you respond.

Mark your responses by putting a circle in the box that corresponds to your choice.

Mark number “4” when you *strongly agree*, number “3” when you *agree*, number “2” when you *disagree*, and number “1” when you *strongly disagree*.

Thank you for your input.

No.	Variables	Strongly Agree	Agree	Disagree	Strongly Disagree
1	Physical Layout of Training Site				
	<ul style="list-style-type: none"> Training site provided physical space to accommodate student learning. 	4	3	2	1
2	Orientation and Support at Training Site				
	<ul style="list-style-type: none"> Training site staff supported the students in meeting the learning needs. 	4	3	2	1
	<ul style="list-style-type: none"> Student functions and responsibilities are clear. 	4	3	2	1
	<ul style="list-style-type: none"> Training site allowed for adequate time to interact with clients, training site staff, students etc. 	4	3	2	1
	<ul style="list-style-type: none"> Training site provided a comfortable learning environment. 	4	3	2	1
	<ul style="list-style-type: none"> Training site provided safe learning environment. 	4	3	2	1
	<ul style="list-style-type: none"> Training site facilitated to access client information. 	4	3	2	1
3	Clinical Experience at Training Site				
	<ul style="list-style-type: none"> Training site helped me to meet the course objectives. 	4	3	2	1
	<ul style="list-style-type: none"> Training site provided adequate variety of clients/families for care. 	4	3	2	1
	<ul style="list-style-type: none"> Training site provided interdisciplinary collaboration experiences. 	4	3	2	1
	<ul style="list-style-type: none"> Training site staff practiced current evidence based practices. 	4	3	2	1
	<ul style="list-style-type: none"> Training site offered opportunities to refer to its resources (formulary, web access, protocols, guidelines, etc.) 	4	3	2	1
	<ul style="list-style-type: none"> Training site offered opportunities for hands on care. 	4	3	2	1
	<ul style="list-style-type: none"> Training site allowed for opportunities for the integration of theory with practice. 	4	3	2	1
4	Recommendation of Training Site				
	<ul style="list-style-type: none"> I would recommend continued use of this training site as it provided beneficial learning experience. 	4	3	2	1

In your opinion, what may be the strengths of this Training Site?

In your opinion, what may be the limitations of this Training Site?

If you have any other comments pertaining to the Training Site, please describe them below.

Thank you