Mandatory Remediation Referral: **Clinical**

Date:

Student:      Course: Nurs
Referring Faculty:       Lead Course Faculty:

**Reason for Referral:**[ ] Unsatisfactory clinical performance
[ ] Other

|  |  |  |  |
| --- | --- | --- | --- |
| **Problem Area** | **Action** | **Date to be completed** | **Faculty signature/date completed** |
| **[ ]** Clinical skills – S*pecify skill(s):*      | **[ ]** Required clinical time and lab tutor sign-off in on campus skills lab.[ ]  Required time scheduled with clinical or course faculty to review skills.[ ] Required practice/return demonstrations in clinical setting.[ ] Additional assignments to enhance comprehension of material.|      |  |  |
| [ ] Critical Thinking -*Describe the problem(s):*  | **[ ]** Required time scheduled with clinical or course faculty to discuss critical thinking.[ ] Completion of case study.[ ] Completion of critical thinking worksheets.[ ] Other assignments to be determined by faculty.      |  |  |
| [ ] Time Management - *Describe the problem(s):*       | [ ] Required time scheduled with clinical or course faculty to discuss time management.[ ] Development of Organizational tool.[ ] Completion of required number of completed tools.[ ] Other assignments to be determined by faculty.      |  |  |
| [ ] Other - *Describe the problem(s):*  |       |  |  |

**Clinical Action Plan developed in collaboration with clinical/course faculty:**

I,       have reviewed the Clinical Remediation Plan.

Student signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ] Mandatory remediation plan has been completed with all required signatures\*.

Student signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Course instructor signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Completed form to be maintained in the student file in the Nursing Office with a copy sent to the course instructor. All signatures must be original (not typed) and are required prior to filing.*