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|  | | **MSc Occupational Therapy (pre-registration)**  **Practice Experience - PE4**  **Assessment Booklet** | | | | | | |  |
| Student name: | | |  | | | |
| Student ID number: | | | |  | | |
|  | | | | | |
| Final mark: | | **(F / P / P+ / P++)** | | |  |
| Hours: | |  | | |  |

Updated December 2018

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**MSc (pre-registration) Occupational Therapy**

**PRACTICE EXPERIENCE - PE4 - ASSESSMENT FORM**

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| SUMMARY OF GRADES (i.e. P++ / P+ / P / F) | **GRADE** | **PLACEMENT DETAILS** | | |
| 1. OCCUPATIONAL THERAPY PROCESS |  | STUDENT |  | |
| 1. PROFESSIONAL COMMUNICATION |  | PRACTICE PLACEMENT EDUCATOR |  | |
| 1. PERSONAL & PROFESSIONAL DEVELOPMENT |  | NAME OF TRUST/PLACEMENT PROVIDER  (Please confirm with your Placement Educator) |  | |
| ADDRESS |  | |
| 1. WORKING PRACTICES |  | TELEPHONE NO. |  | |
| UNIVERSITY LIAISON TUTOR |  | |
| 1. STUDENT RECORD OF PLACEMENT ATTENDANCE | Student to complete electronic hours on **Record of Placement Attendance** form and print hardcopy for their PPE. PPE to confirm placement hours and record on Assessment Form and sign. Student to submit electronic **Record of Placement Attendance** to [HWB-AHPTimesheets-mb@exchange.shu.ac.uk](mailto:HWB-AHPTimesheets-mb@exchange.shu.ac.uk) for recording. | | | |
| NB: In order to gain a pass in each of the above sections, all components of that section must be passed. A fail in any section at the final report will constitute an overall fail of the placement. | CLIENT GROUP | |  | |
| DATE OF PLACEMENT (FROM & TO) | |  |  |
| HOURS COMPLETED  (Includes study time, but not lunch breaks or Bank Holidays) | |  | |
| PE SIGNATURE TO CONFIRM HOURS | |  | |

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# Practice Experience - PE4

## Module Aims

This practice learning experience gives students the opportunity to make the first steps in the transition from student to newly qualified practitioner. To enable the students to develop into independent practitioners, fit for practice, this practice experience will provide them with the opportunity to engage in practice in a range of complex situations and with a variety of complex issues with the support of their practice educator. They will be expected to use reflection to review and develop their practice, to work in a client-centred way and to integrate their knowledge and experience from the three years of the course to critically appraise their own and current occupational therapy practice.

## Learning Outcomes

By the end of the practice, the student will be able to:

* Apply, appraise and evaluate the use of the occupational therapy process in the practice area, including carrying out and planning independently a range of both assessments and treatment sessions.
* Communicate effectively, appropriately and sensitively with service users and carers, occupational therapy colleagues and other professionals and produce accurate and concise written and verbal reports.
* Behave in a professional and safe manner at all times, showing insight into their own abilities and learning needs and using reflective practice to develop and synthesise their practice experience.
* Employ useful management strategies in prioritising their workload and learning needs in the context of inter-professional working and critically appraise the impact of policy and change in health & social care.

## Using this assessment booklet

Please read the section in the practice experience handbook. It is important that you indicate, in the boxes provided, a **final level** of competency. You can either use a coloured highlighter to indicate the boxes which most represent the level of performance you have observed, or you may draw (in thick pen preferably) around the boxes to indicate the appropriate level.

**Please do not use the boxes for halfway assessment; this is in the supervision log.**

The pass / pass + and pass ++ grades do not affect the student's degree award. However, it is an acknowledgement of achievement on placement which may be useful for CPD and recruitment evidence. A placement commendation will be given to students who pass three out of four placements with an overall grade of pass ++.

The overall mark for a placement is determined by the marks given for the individual sections. It is suggested that the PPE take the most commonly given mark, across all areas, as the overall mark if there are other issues which have affected the mark given (e.g. attendance, general attitude etc.). The PPE can use their discretion, but will need to explain this in the placement final report.

### Please refer to Assessment Processes in the Placement Handbook for more details.

## Placement assessment booklet - induction checklist

|  |  |  |
| --- | --- | --- |
| **When** | **Task** | **Completed () or N/A** |

|  |  |  |
| --- | --- | --- |
| **Pre-Placement (if applicable) STUDENT** | Learning Contract and reasonable adjustments (in relation to disability support), if applicable, negotiated and agreed between student, PPE and visiting tutor |  |
| **Start of Placement STUDENT AND PPE** | Learning objectives negotiated and agreed between student and educator |  |
| **Start of Placement STUDENT** | Learning objectives written into assessment booklet |  |

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**MSc (pre-registration) Occupational Therapy**

**Practice Experience - PE4**

**LEARNING CONTRACT (to be completed by student at start of the place****ment)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Initial Learning Objectives: Specific, Measurable, Attainable, Realistic and Timed (S.M.A.R.T.)** What do you want to learn or develop during this placement? | **Learning Resources:**  **What resources do you need in order to achieve these?** | **Evidence: How can you show yourself and your practice placement educator that you have met these objectives?** | **Date set** | **Date achieved** |
|  |  |  |  |  |

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**Student:** **Practice Placement Educator:**

**Date:**

**Occupational Therapy Process - PE4 (Please differentiate clearly on the grid the** **halfway mark and final mark)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Grade** | 1. **Assessment** | 1. **Identification and prioritisation of need** | 1. **Intervention planning** | 1. **Intervention implementation** | 1. **Evaluation and planning** |
| **PASS**  **++** | Uses professional reasoning to consistently select appropriate assessments. Skilfully uses a range of assessment techniques and independently analyses data. | Independently identifies a holistic range of needs. Is able to prioritise taking into consideration client need, medical condition and resources. | Justifies use of assessment data to develop individualised programmes that meet negotiated and prioritised need. Adapts to other people involved and resource implications. | Independently implements interventions. Is able to utilise skills, abilities and knowledge gained during the course. | Independently critically evaluates intervention. Uses information to develop complex planning for clients future and recognises implications for practice |
| **PASS**  **+** | Consistently selects appropriate assessments. Justifies and uses a range of assessment techniques. May require minimal assistance to analyse data. | Needs minimal supervision to identify holistic range of needs in relation to the medical condition. Able to prioritise with minimal assistance. | Plans appropriate individual therapy programmes considering resource implications. Justifies intervention plans and outcomes. Considers other persons involved. | Independently implements interventions, has a flexible approach and anticipates problems or changing needs with minimal guidance. | Independently evaluates intervention sessions and programmes. Can incorporate this evaluation in planning for client's future or discharge plan. |
| **PASS** | Independently selects appropriate assessments to identify client-centred health and social care. Uses a range of assessment techniques.  May require assistance to analyse data. | Needs minimal assistance to identify and prioritise client need considering the implications of their medical condition. Understands and applies the underpinning theoretical concepts of occupational therapy practice. | Able to use activity analysis to develop individual therapy programmes independently or with minimal support.  Aware of resource implications and other persons involved. | Independently implements intervention and can undertake planned therapy with minimal guidance, maximising support, learning and change. | Independently evaluates intervention sessions and programmes. Is able to use information appropriately to discuss and modify plans for future. |
| **FAIL** | Selects inappropriate assessments. Requires regular assistance to develop a range of assessment techniques.  Requires regular assistance to analyse data. Poor professional reasoning skills. | Regular assistance required to ensure identification of range of needs considering the implications of their medical condition. Regular assistance to prioritise complex needs. | Requests assistance in developing comprehensive planning skills. Produces repetitive, “text book” plans. Lack of insight into persons involved and resource implications. | Unable to implement intervention plans as appropriate to area of work. | Unable to initiate evaluation of each session, requires assistance to consider all relevant factors. With assistance can identify development required. |

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| --- | --- | --- | --- | --- | --- |
| **Occupational Therapy Process - PE4** | OVERALL HALFWAY MARK:  PASS++ / PASS + / PASS / FAIL |  |  | OVERALL FINAL MARK:  PASS++ / PASS + / PASS / FAIL |  |
| PLEASE INDICATE LEVEL OF HALFWAY MARK AND WRITE YOUR HALFWAY COMMENTS ON THE **FORMATIVE FEEDBACK** FORM ON PAGE 27. | | | PLEASE INDICATE LEVEL OF FINAL MARK | | |
| 1. **Assessment** | |  |  | |  |
|  | |  |  | |  |
| 1. **Identification and prioritisation of need** | |  |  | |  |
|  | |  |  | |  |
| 1. **Intervention Planning** | |  |  | |  |
|  | |  |  | |  |
| 1. **Intervention Implementation** | |  |  | |  |
|  | |  |  | |  |
| 1. **Evaluation and planning** | |  |  | |  |

Comments: **(This box is for the completion of the final report. Please include your comments here or attach separate sheets)**

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| **Please note: General final comments, including feed forward, should be completed on page 47.** |

**Professional Communication - PE4 (Please differentiate clearly on the grid the halfway mark and final mar****k)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Grade** | **1. Communication with Clients/Carers** | **2. Communication with Occupational Therapy Team and other agencies.** | **3. Assertiveness** | **4. Anti-Oppressive Practice** | **5. Documentation** |
| **PASS**  **++** | Sensitive interaction in complex and daunting situations. | Has influenced dynamics of team in positive and imaginative ways. Proactive in communicating with others. | Respects self and others. Acts with courage as necessary.  Uses own assertiveness skills to guide others to be more assertive. | Non-judgmental attitudes expressed calmly and assertively to influence others. | Independently gathers relevant information in order to write concise and accurate notes, reports and written communications of a consistently excellent standard. |
| **PASS**  **+** | Has excellent rapport. Responds sensitively to underlying needs. | Always communicates with others in helpful and positive way. | Takes full responsibility for self. Recognises responsibilities towards others. | Looks for ways to extend truly client-centred practice in this environment. | Independently undertakes documentation - content is consistently succinct and accurate and of a good standard. No need to refer to supervisor. |
| **PASS** | Listens well. Is clear and sensitive to specific needs understanding the importance of informed consent and confidentiality. Exercises a professional duty of care.  Demonstrates care and compassion to others. | Understands team well and actively contributes and communicates effectively with others. | Open and clear and considerate approach towards others. | Values others' differences. Quickly recognises occasional instances when is judgmental. Understands the impact of occupational dysfunction and deprivation on service users. Is aware of socio-cultural diversity. | Independently undertakes documentation - content is appropriate and concise. May need assistance with complex reports. |
| **FAIL** | Communication confused in new or difficult situations.  Does not listen. Not able to leave go of own concerns and tensions. | May not heed advice. May neglect to keep team/ supervisor informed, and communication with others is sometimes inappropriate. Has not understood or become involved with dynamics of team. | Does not always consider feelings and situation of others. May rush in without thought. May be aggressive or manipulative. May confuse negotiating skills with winning. | Does not appear to be judgemental but no evidence of active consideration of roots and meanings of people's behaviour. Judgmental attitudes disclosed when talking to other members of staff. | Gathers information that may not be relevant. Notes, reports and written communications can be inappropriate. Needs constant supervision. |

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| **Professional Communication - PE4** | OVERALL HALFWAY MARK: PASS++ / PASS +/PASS/FAIL |  | |  | OVERALL FINAL MARK: PASS++ / PASS +/PASS/FAIL |  |
| PLEASE INDICATE LEVEL OF HALFWAY MARK AND WRITE YOUR HALFWAY COMMENTS ON THE **FORMATIVE FEEDBACK** FORM ON PAGE 27. | | | | PLEASE INDICATE LEVEL OF FINAL MARK | | |
| 1. **Communication with clients/carers** | | |  |  | |  |
|  | | |  |  | |  |
| 1. **Communication with the Occupational Therapy team and other agencies** | | |  |  | |  |
|  | | |  |  | |  |
| 1. **Assertiveness** | | |  |  | |  |
|  | | |  |  | |  |
| 1. **Anti-Oppressive Practice** | | |  |  | |  |
|  | | |  |  | |  |
| 1. **Documentation** | | |  |  | |  |

Comments: **(This box is for the completion of the final report. Please include your comments here or attach separate sheets)**

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| **Please note: General final comments, including feed forward, should be completed on page 47.** |

**Personal and Professional Development - PE4 (Please differentiate clearly on the grid the halfway mark and final mar****k)**

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| --- | --- | --- | --- | --- | --- | --- |
| **Grade** | **1. Professional Suitability** | **2. Self-Appraisal** | **3. Self-Development** | **4. Initiative and Motivation** | **5. Reflective Practitioner** | **6. Safety** |
| **PASS**  **++** | Completely reliable, honest, thorough. Displays confidence and a high level of responsibility. | Accurately and honestly assesses personal strengths and weaknesses and development needs. Has excellent insight into own level of ability and performance. | Planned and achieved a high quality self- development programme based on accurate identification of needs, setting long and short term goals and perceived outcomes. | Dynamic and has ideas and vision.  Demonstrates a high level of enthusiasm, motivation and appropriate use of initiative. | Combines creative problem solving with a more interactive, intuitive reasoning process. | Consistently assesses and demonstrates a wide appreciation of safe practice with regard to policies, environment, patient, others and self. |
| **PASS**  **+** | Good level of reliability, honesty, thoroughness, confidence and ability to take responsibility. | Good honest assessment of personal level of ability and performance and development needs.  Perceptive level of insight. | Planned and developed a good self-development programme based on  self-appraisal, identification of needs and suitable goal setting. | A good consistent level of enthusiasm, well- motivated and demonstrates good use of initiative and ideas. | Demonstrates insight into subtle, underlying aspects of practice.  Uses imagination. | Beginning to demonstrate a wider awareness of safety and able to justify actions.  Suggest recommendations for change. |
| **PASS** | Reliable, honest, trustworthy and reasonably confident. Adheres to HCPC and COT Standards of Proficiency. | Demonstrates appropriate level of self- appraisal with reasonable insight into own abilities and limitations. | Identifies and sets appropriate goals and outcomes within a well- planned programme/ framework and steadily works towards them.  Maintains CPD. | Consistent positive and well-motivated approach with an ability to use own initiative. Able to practice as an autonomous professional using own professional judgement. | Evaluates practice objectively and independently. | Actions demonstrate their awareness of safety and risks within immediate work environment.  Practices within the legal and ethical boundaries of the profession. |
| **FAIL** | Sometimes unreliable. Unable to accept responsibility.  Demonstrates some inappropriate behaviour and/or appearance. | Lacks appropriate insight and shows inability to accurately assess own level of ability and performance. | Experiences difficulty in identifying and setting self-development goals or objectives. | Appears to lack enthusiasm/interest and demonstrates little initiative. | Rarely evaluates practice. Is not aware of lack of ability to be objective. | Requires constant supervision and prompting regarding safety issues. Lacks insight and would place self and others at risk |

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| --- | --- | --- | --- | --- | --- |
| Personal and Professional Development - PE4 | OVERALL HALFWAY MARK PASS++ / PASS +/PASS/FAIL |  |  | OVERALL FINAL MARK PASS++ / PASS +/PASS/FAIL |  |
| PLEASE INDICATE LEVEL OF HALFWAY MARK AND WRITE YOUR HALFWAY COMMENTS ON THE **FORMATIVE FEEDBACK** FORM ON PAGE 27. | | | PLEASE INDICATE LEVEL OF FINAL MARK | | |
| 1. **Professional Suitability** | |  |  | |  |
|  | |  |  | |  |
| 1. **Self-Appraisal** | |  |  | |  |
|  | |  |  | |  |
| 1. **Self-Development** | |  |  | |  |
|  | |  |  | |  |
| 1. **Initiative and Motivation** | |  |  | |  |
|  | |  |  | |  |
| 1. **Reflective Practitioner** | |  |  | |  |
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| 1. **Safety** | |  |  | |  |

Comments: **(This box is for the completion of the final report. Please include your comments here or attach separate sheets)**

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| **Please note: General final comments, including feed forward, should be completed on page 47.** |

**Working Practices - PE4 (Please differentiate clearly on the grid the halfway mark and final mar****k)**

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| --- | --- | --- | --- | --- | --- |
| **Grade** | **1. Self-Management** | **2. Workload Management** | **3. Policies and Procedures** | **4. Information Handling** | **5. Inter-professional working** |
| **PASS**  **++** | Demonstrates excellent time management and organisational skills. Is calm and is well organised at all times. Works unprompted towards gaining new skills. Is self-motivated and actively seeks opportunities. Creative in problem solving. Always reacts appropriately under stress. | Demonstrates excellent workload management and is able to apply theory to practice. Understands and demonstrates the ability to prioritise. Always makes sound and well-reasoned judgements. Is always efficient and effective. | Is completely aware of the policies and procedures of the work place and is able to apply them to best effect.  Understands the effects of legislation. Seeks to ensure quality is achieved at all times. Keeps up-to-date with new legislation. Ensures health and safety regulations are always applied. | Always gathers and processes appropriate information. Always maintains confidentiality. Writes excellent, appropriate reports. Is able to seek out relevant information and consistently informs other people where appropriate. | Demonstrates inter professional consultation, collaboration and team working as a means to achieving integrated care for clients. Is able to critically evaluate roles and responsibilities in providing a patient-focused service. |
| **PASS**  **+** | Demonstrates a good level of organisation and time management. Well-motivated and good at problem solving. Applies personal management skills. Is able to isolate personal problems from the work place. | Efficient and effective, demonstrating good workload management skills. Can justify reasons for priorities. | Aware of importance of policies, procedures and legislation and applies them to daily work. Seeks to achieve quality and safety. | Good at gathering and processing information. Respects confidentiality. Reports are sufficient and relevant. Seeks out information and keeps others informed. | Actively seeks to work collaboratively with inter-professional colleagues and contributes positively to inter- professional team working. |
| **PASS** | Usually exhibits good time management and organisational skills. Mostly meets deadlines and makes use of spare time.  Can problem solve and rarely requires prompting. Mostly is able to separate personal problems from the work place. | Able to prioritise reasoned arguments for decisions. Aware of the need for workload management and able to put it into practice. | Is aware of the importance of policies, procedures and legislation and is able to apply these to daily work. Is safe overall and corrects errors.  Understands need for quality and audit. | Gathers and processes information. Respects appropriate information and passes it on where relevant. Reports are succinct and relevant. Understands the principles of audit and quality. | Demonstrates awareness of need to work inter professionally with relevant colleagues.  Contributes positively to team working. Is client-centred, facilitating autonomy and empowerment of individuals and communities. |
| **FAIL** | Appears chaotic and disorganised unable meet deadline when prompted. Unable to problem solving. Often reacts inappropriately under stress. | Ineffectual workload management and requires help to prioritise. Lacks understanding of the need for both. Often inefficient and ineffective. | Needs reminding of need for policies, procedures and legislation. Is sometimes unsafe and quality issues are often forgotten. | Needs help in gathering and processing information and prompting to keep others informed. Reports can be inappropriate. | Needs persistent prompting to consult or co-operate with inter professional colleagues. |

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| **Working Practices - PE4** | OVERALL HALFWAY MARK: PASS++ / PASS +/PASS/FAIL |  |  | OVERALL FINAL MARK: PASS++ / PASS +/PASS/FAIL |  |
| PLEASE INDICATE LEVEL OF HALFWAY MARK AND WRITE YOUR HALFWAY COMMENTS ON THE **FORMATIVE FEEDBACK** FORM ON PAGE 27. | | | PLEASE INDICATE LEVEL OF FINAL MARK | | |
| 1. **Self-Management** | |  |  | |  |
|  | |  |  | |  |
| 1. **Workload Management** | |  |  | |  |
|  | |  |  | |  |
| 1. **Policies and Procedures** | |  |  | |  |
|  | |  |  | |  |
| 1. **Information Handling** | |  |  | |  |
|  | |  |  | |  |
| 1. **Inter-professional working** | |  |  | |  |

**Comments:** **(This box is for the completion of the final report. Please include your comments here or attach separate sheets)**

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| **Please note: General final comments, including feed forward, should be completed on page 47.** |

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SUPERVISION LOG: - WEEK 1

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| Agenda | |
| Discussion points | |
| Action Plan | |
| Placement hours Week 1 |  |
| Date: | |
| Signed: | |
| Signed: | |

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SUPERVISION LOG: - WEEK 2

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| Agenda | |
| Discussion points | |
| Action Plan | |
| Placement hours Week 2 |  |
| Date: | |
| Signed: | |
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SUPERVISION LOG: - WEEK 3

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| Agenda | |
| Discussion points | |
| Action Plan | |
| Placement hours Week 3 |  |
| Date: | |
| Signed: | |
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SUPERVISION LOG: - WEEK 4

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| Agenda | |
| Discussion points | |
| Action Plan | |
| Placement hours Week 4 |  |
| Date: | |
| Signed: | |
| Signed: | |

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## Placement halfway checklist

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| --- | --- | --- |
| **When** | **Task** | **Completed () or N/A** |

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| **Midway through placement STUDENT** | Student self-assesses on copy of assessment grids and gives to PPE **before** the halfway report |  |
| **Gathering evidence for report**  **PPE** | PPE considers how service user and carer feedback is incorporated into the report |  |
| **Halfway report PPE** | PPE completes formative feedback and marks student progress on assessment grids.  Comments and feedback given. Areas for development identified. University liaison tutor is contacted and visits if student is failing at this point. |  |
| **After halfway report STUDENT** | After the halfway report the student considers the feedback given and areas for further development identified. The learning objectives for the remainder of placement are reviewed and written into the assessment booklet. |  |

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## FORMATIVE FEEDBACK - WEEK 5

**(This section must be completed by the Practice Placement Educator)**

|  |  |
| --- | --- |
| **Occupational Therapy Process** | Tick |
| Working towards a pass |  |
| Some areas of concern |  |
| Failing |  |
| **Comments (including areas for development):** | |

|  |  |
| --- | --- |
| **Professional Communication** | Tick |
| Working towards a pass |  |
| Some areas of concern |  |
| Failing |  |
| **Comments (including areas for development):** | |

|  |  |
| --- | --- |
| **Personal and Professional Development** | Tick |
| Working towards a pass |  |
| Some areas of concern |  |
| Failing |  |
| **Comments (including areas for development):** | |

|  |  |
| --- | --- |
| **Working Practices** | Tick |
| Working towards a pass |  |
| Some areas of concern |  |
| Failing |  |
| **Comments (including areas for development):** | |

|  |
| --- |
| **Summary of progress and areas for development for remainder of placement (PPE)** |

|  |  |
| --- | --- |
| **General comments: (student)** | |
| **Please update your learning objectives taking into consideration the areas of development identified** | |
| **Placement hours Week 5** |  |

**Signed (PPE):** ..........................................................................

**Signed (student):** ...............................................................................

**Date:** ..............................................................................

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**MSc (pre-registration) Occupational Therap****y**

**Practice Experience - PE4**

**LEARNING CONTRACT FOR SECOND HALF OF PLACEMENT (To be completed by student following discussion with PPE)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Initial Learning Objectives: Specific, Measurable, Attainable, Realistic and Timed (S.M.A.R.T.)** What do you want to learn or develop during this placement? | **Learning Resources:**  **What resources do you need in order to achieve these?** | **Evidence: How can you show yourself and your practice placement educator that you have met these objectives?** | **Date set** | **Date achieved** |
|  |  |  |  |  |

|  |  |  |  |  |
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**Student:** ..................................................................... **Practice Placement Educator:** .....................................................................

**University Liaison Tutor:** ..................................................................... **Date:** ......................................................

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SUPERVISION LOG: - WEEK 6

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| --- | --- |
| Agenda | |
| Discussion points | |
| Action Plan | |
| Placement hours Week 6 |  |
| Date: | |
| Signed: | |
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SUPERVISION LOG: - WEEK 7

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| Agenda | |
| Discussion points | |
| Action Plan | |
| Placement hours Week 7 |  |
| Date: | |
| Signed: | |
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SUPERVISION LOG: - WEEK 8

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| --- | --- |
| Agenda | |
| Discussion points | |
| Action Plan | |
| Placement hours Week 8 |  |
| Date: | |
| Signed: | |
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SUPERVISION LOG: - WEEK 9

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| --- | --- |
| Agenda | |
| Discussion points | |
| Action Plan | |
| Placement hours Week 9 |  |
| Date: | |
| Signed: | |
| Signed: | |

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## End of placement checklist

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| --- | --- | --- |
| **When** | **Task** | **Completed () or N/A** |

|  |  |  |
| --- | --- | --- |
| **Gathering evidence for report**  **PPE** | PPE considers how service user and carer feedback is incorporated into the report. |  |
| **Final Assessment PPE** | PPE completes final assessment and gives final report to student prior to end of placement. |  |
| **Final Assessment LINK TUTOR** | University liaison tutor to attend if a fail grade is to be given. |  |
| **End of placement PPE** | Assessment form needs to be signed, total number of placement hours completed needs to be given. All details on page 1 completed in full. PPE signs to confirm placement hours. PPE needs to complete date of most recent update (this can include using placement website). |  |
| **End of placement STUDENT** | Student to keep copy of assessment booklet and original copy submitted to university by hand in date. |  |
| **End of placement STUDENT** | Student to photocopy page 1 if claiming placement expenses as proof of placement dates. |  |
| **End of Placement STUDENT** | Student to complete online evaluation form (sent by AHP Placements Team). |  |
| **End of placement STUDENT AND PPE** | Student to complete electronic hours on **Record of Placement Attendance** form and print hardcopy for their PPE. PPE to confirm placement hours and record on Assessment Form and sign. Student to submit electronic Record of Placement Attendance to  [HWB-AHPTimesheets-mb@exchange.shu.ac.uk](mailto:HWB-AHPTimesheets-mb@exchange.shu.ac.uk) for recording. |  |

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## Report on overall achievement

**(This section must be completed by the Practice Placement Educator)**

Please address these comments to the student and include anything you have not previously commented on in the form including achievements throughout the placement, areas needing further learning or development, advice and any other details you may wish to note. Please be clear about how service user and carer feedback has been considered within the assessment and report process.

**The feedback provided in this assessment booklet may be used to inform references which are written for students.**

### Areas for development and considerations for next placement/future practice

**Please ensure that the student completes their comments on the final page.**

**Signature of Practice Placement Educator:** ...........................................................................

**Date:** ................................. **Professional Qualification(s):** ....................................................

**Date of last update on SHU OT course (curriculum/policy changes):** ................................   
(e.g. Practice Placement Educator meeting; SHU OT Placement Website <https://www3.shu.ac.uk/HWB/placements/OccupationalTherapy/index.html>)

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### Comments by student (you may find it helpful to reflect on the areas of development for your future practice that have been identified and consider how you might address these):

**TOTAL PLACEMENT HOURS:** ..........................

I received this assessment report on (date)........................................and have read and discussed this with my Practice Placement Educator.

**Signed:** ....................................................... **Date:** ......................................