QAPL (2012) Student Practice Placement Evaluation

Allocation of practice placement

- 1. Student Name
 - Student HEI ID Number
- 2. HEI Name
- 3. Year Commenced Training
- 4. Details of practice placement setting
- 5. Name of on-site practice educator
- 6. Name of on-site practice supervisor (if applicable)
- 7. Name of off-site practice educator (if applicable)
- 8. Name of placement establishment
- 9. Dates of placement period

From:

To:

- 10. Number of placement days
- 11. Which practice learning placement is this?

First assessed practice

Final assessed practice

- 12. Did your placement start according to the agreed timetable?
- 13. Did you liaise with the prospective provider before commencing?
- 14. Is there anything critical you needed to know which was not made known to you at the time?

If yes, please give details

- 15. How do you rate the information you received about the placement before commencement? (Please tick the rating which best expresses your evaluation)
- 16. From your point of view how do you rate the process for allocating you to this particular placement? (Please tick the rating which best expresses your evaluation)

Commencement of the practice placement

17. Did you discuss, complete, and then sign a contract or learning agreement?

If yes, was it completed within the expected time frame?

If no, please give details why not

18. Did you have a planned induction period?

If yes, please indicate which of the following it covered:

- a. Agency, policy and procedures
- b. Familiarisation with services and key staff
- c. Introduction to local communities and people and groups who use the service
- d. Networking opportunities with allied professionals and other linked service providers
- e. Health and safety
- f. Working arrangements
- 19. How do you rate your induction period? (Please tick the rating which best expresses your evaluation)

Your support arrangements, accountability and role clarity

- 20. Was it clear to you who you were accountable to for your work with service users and carers?
- 21. Were the roles of all of the following participants in your learning and assessment made clear to you?
 - a. On-site practice educator
 - b. On-site practice supervisor (if applicable)
 - c. Off-site practice educator (if applicable)
 - d. HEI tutor
 - e. Agency manager
 - f. Other staff
- 22. Did you have both an on-site practice supervisor and an off-site practice educator? If yes, how well did this arrangement work for you? (Please tick the rating which best expresses your evaluation)
- 23. Was it clear to you how you could raise any concerns about any aspects of your work learning or assessment?
 - a. Complaints
 - b. Grievances
 - c. Harassment
 - d. Bullying
 - e. Whistle blowing
 - f. Disagreements
 - g. Dissatisfaction
- 24. Were any specifically agreed needs not fully met?

If not, please explain

- 25. Overall, do you feel you were well supported throughout the placement?
- 26. Did you encounter any major concerns regarding this placement?

If yes, please describe the concern

How do you rate the response? (Please tick the rating which best expresses your evaluation) Please explain the rating you have given

Your learning and assessment programme

(Please tick the rating from 1 to 4 which best expresses your evaluation)

- 27. Did you have a placement learning programme that:
 - a. Developed your knowledge and skills?
 - b. Developed your values?
 - c. Addressed your areas for development?
 - d. Required you to integrate theory with practice?
 - e. Enabled holistic assessment against the Professional Capabilities Framework?
- 28. Did your placement learning programme cover:
 - a. Inter-professional or multi-disciplinary practice?
 - b. The HCPC Standards of proficiency and Standards of conduct, performance and ethics?
 - c. Opportunities to undertake tasks involving formal assessment of risk, safeguarding and use of authority?
- 29. How do you rate the placement learning programme overall?

- 30. Which of the following did your placement assessment programme include? (Please tick all that are applicable)
 - a. Direct observation of your practice
 - b. Direct feedback from service users or carers
 - c. Direct feedback from other people
 - d. Regular supervision
 - e. Constructive and timely feedback
 - f. Periodic assessment and review
- 31. Were your areas for development and improvement made clear to you throughout the placement?

If no:

- a. Did you have the support and opportunity to address these areas?
- b. Did your assessor make clear to you the reasons for the final holistic assessment decision?
- c. Has your practice educator recommended a placement pass?
- 32. Was the end of your placement delayed?

 If yes, please explain the reason for the delay
- 33. Overall, how do you rate your placement assessment? (Please tick the rating which best expresses your evaluation)

You have made a number of evaluative statements about this practice placement against a number of practice learning quality assurance benchmark precepts. Please feel free to highlight below and explain further why you have evaluated any particular ones very positively or negatively. Please also feel free to make any other comments about this practice placement.