

**College of Health, Wellbeing and Life Sciences**

# **BSc Student Clinical Assessment Guidelines and Competency Profiles (Version 1 for use for cohorts 2019 onwards)**



**All information is found in your online student competency book which you will be required to share with your clinical department ATLAS site on pebblepad.**

**This booklet is for information only**

## Contact information

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## Welcome

This handbook aims to provide you with an overview of the expectations of you whilst in the clinical department. Although this covers your assessment requirements you should ensure you develop as a well-rounded, multi-professional, empathetic, effective, and efficient health care practitioner. An excellent Therapeutic Radiographer will ensure they are up to date and know the reasons why they are carrying out a task. Please do not be task orientated for your assessments but focus on skill development which will result in excelling in these modules.

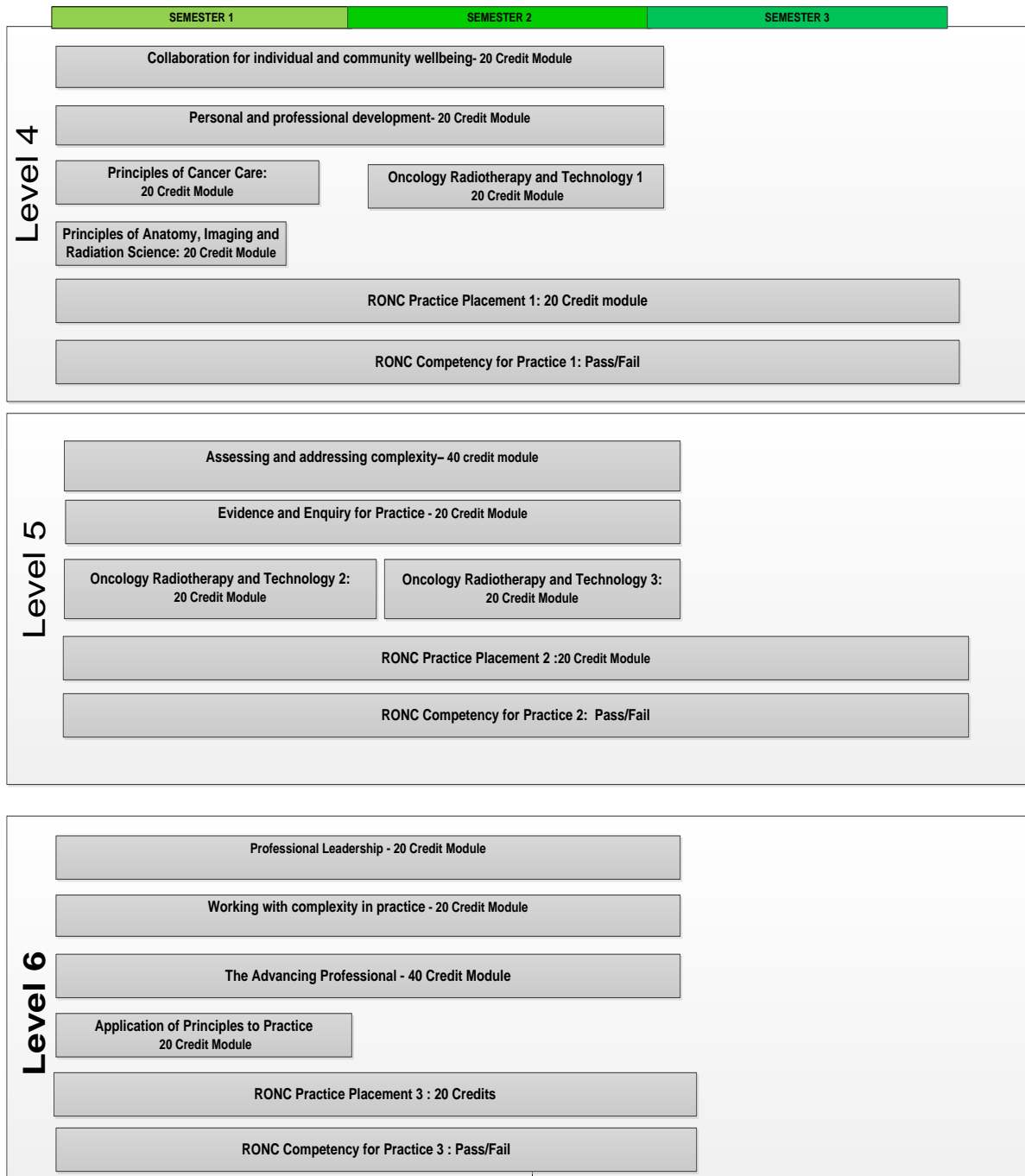
Your clinical assessments are split each year into a RONC Practice Placement module and RONC Competency to Practice module. RONC Practice Placement is your academic submission for clinical practice. RONC Competency to Practice is the clinical competency for your clinical practice. We will go into more detail on these modules throughout this booklet.

This booklet is also available to download as well as other useful information from the SHU Radiotherapy Placement Website.

<https://www.shu.ac.uk/health-social-placements/profession-information/radiotherapy-and-oncology>

You should also revisit the Clinical BB site for each of the RONC Practice Placement modules where you will also find information on the RONC Competency to Practice module.

## BSc Programme design and structure (new programme)



**BSc Clinical assessment flowchart**



**Year 1 (level 4)**

**RONC Practice Placement 1: 20 Credits**

**Completion of a 2000 word extended case study**

**RONC Competence for Practice 1 (Pass/Fail)**

**Completion of professionalism profile (year 1)**

**Year 2 (level 5)**

**RONC Practice Placement 2: 20 credits**

**Pivotal Incident Reflection (1500 words)**

**Completion of 1 Practice viva (treatment)**

**RONC Competence for Practice 2: Pass/Fail**

**Completion of 4 profiles (1 of which must be professionalism for year 2)**

**Year 3 (level 6)**

**RONC Practice Placement 2: 20 credits**

**A profile of Evidence**

**Completion of 2 Practice viva's (treatment and pre-treatment)**

**RONC Competence for Practice 2: Pass/Fail**

**Completion of all profiles**

## RONC Practice Placement Modules

	Learning Outcomes	Outline
<b>RONC Practice Placement 1</b>	<p>1. Explain and evaluate the Radiotherapy technique of a specific case from practice,</p> <p>2. Explain and evaluate relevant psychological aspects of Radiotherapy patient care</p> <p>3. Critically reflect on your involvement within multi-professional care, demonstrating a holistic approach to service users.</p>	<p><b>Academic Taught Sessions</b></p> <ul style="list-style-type: none"> <li>• Introduction to clinical education (overview of assessment process/induction package)</li> <li>• Action Planning</li> <li>• Reflective Practice</li> <li>• Social Networking sites and Work Ethics</li> <li>• PebblePAD Training Sessions</li> <li>• Practice Competence Preparation</li> <li>• Clinical Debriefing</li> </ul> <p><b>Clinical Placement Learning</b></p> <ul style="list-style-type: none"> <li>• Appropriately apply terminology associated with pathology, oncology, simple radiotherapy techniques, patient care and patient management</li> <li>• Employing safe working practices in general and with ionising radiation's in particular</li> <li>• Take an active role in the safe delivery of radiotherapy techniques including patient and equipment manipulation commensurate with placement opportunities</li> <li>• Identify and demonstrate understanding of the safe use of controls and accessory equipment utilised on the relevant equipment</li> <li>• Apply a sound knowledge of surface and radiographic anatomy (including cross sectional anatomy)</li> <li>• Emergency procedures and locate, identify and demonstrate understanding of the safe and correct use of emergency equipment</li> </ul>

		<ul style="list-style-type: none"> <li>• Correctly identify and receive patients and communicate and interact effectively with patients and colleagues in a professional manner</li> <li>• Develop an awareness of the appointment system and the way in which the department integrates into the day to day running of the hospital</li> <li>• Contribute to the production of a clinically acceptable beam direction shell and appreciate the patients' perspective of the impression process</li> <li>• Follow departmental protocols on hygiene and the disposal of clinical waste</li> <li>• Accurately undertake and record simple treatment calculations using prescribed data</li> <li>• Learn from, with and about other health care disciplines relevant to the patient pathway</li> <li>•</li> </ul>
<p><b>RONC Competence for Practice 1</b></p>	<p>1. Demonstrate professional attitudes and behaviours expected for current stage of clinical training.                  2. Begin to demonstrate the required practice competence in the localisation, planning, dose calculations, delivery and verification of a specified range of Radiotherapy techniques.</p>	<ul style="list-style-type: none"> <li>• Effective and efficient communication skills with staff, service users and carers.</li> <li>• Application of the sound knowledge of surface and radiographic anatomy (including cross sectional anatomy)</li> <li>• Experience a variety of placements to aid skill development for qualification</li> <li>• Departmental protocols on emergency procedures, hygiene, and the disposal of clinical waste</li> <li>• Acting on feedback for skill development</li> <li>• Working within departmental treatment protocols, IR(ME)R, IRR SCoR code of conduct and HCPC standards</li> </ul>

	<b>Learning Outcomes</b>	<b>Outline</b>
<p><b>RONC Practice Placement 2</b></p>	<p>1. Discuss and evaluate a range of radiotherapy techniques using examples from practice.                      2. Discuss and evaluate psychological issues of oncology patients using examples from practice.                      3. Critically reflect on your involvement within multi-professional care, demonstrating a holistic approach to service users.</p>	<p><b>Academic Taught Sessions</b></p> <ul style="list-style-type: none"> <li>• Further development of Practice Placement (overview of assessment process)</li> <li>• Conflict Resolution</li> <li>• Preparation for cross site and elective placements</li> <li>• Advanced Communication Skills</li> <li>• PebblePAD Training Sessions</li> <li>• Clinical debrief developing resilience</li> </ul> <p>• <b>Practice Placement Learning</b></p> <ul style="list-style-type: none"> <li>• Demonstrate initiative and effective organisation skills in being actively involved in arranging your clinical learning experiences</li> <li>• Demonstrate knowledge and understanding of the information needs of patients undergoing a course of radiotherapy treatment</li> <li>• Display a holistic approach to the care of the patient and/or the patients relatives/carers</li> <li>• Take an active role in the delivery of radiotherapy techniques including patient and equipment manipulation commensurate with placement opportunities</li> <li>• Accurately undertake and record all treatment calculations using prescribed data</li> <li>• Learning from, with and about other health care disciplines relevant to the patient pathway</li> </ul>
<p><b>RONC Competence for Practice 2</b></p>	<p>1. Demonstrate professional attitudes and behaviours for current stage of clinical training</p>	<ul style="list-style-type: none"> <li>• Effective and efficient communication skills with staff, service users and carers.</li> </ul>



	<p>2. Demonstrate the required practice competence in the localisation, planning, dose calculations, delivery and verification of a specified range of Radiotherapy techniques</p>	<ul style="list-style-type: none"> <li>• Application of the sound knowledge of surface and radiographic anatomy (including cross sectional anatomy)</li> <li>• Experience a variety of placements to aid skill development for qualification</li> <li>• Departmental protocols on emergency procedures, hygiene, and the disposal of clinical waste</li> <li>• Acting on feedback for skill development</li> <li>• Working within departmental treatment protocols, IR(ME)R, IRR SCoR code of conduct and HCPC standards</li> </ul>
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	Learning Outcomes	Outline
<p><b>RONC Practice Placement 3</b></p>	<ol style="list-style-type: none"> <li>1. Critically evaluate a range of Radiotherapy techniques using examples from practice</li> <li>2. Critically evaluate the relevant psychological issues relevant to a range of case examples</li> <li>3. Critically reflect on your involvement in multi-professional and holistic approaches to care and appraise your own professional development as you transition into practice.</li> </ol>	<p><b>Academic Taught Sessions</b></p> <ul style="list-style-type: none"> <li>• Further development of practice placement (overview of assessment process)</li> <li>• PebblePAD Training Sessions</li> <li>• Emotional intelligence</li> <li>• Service user involvement</li> <li>• Clinical Debriefing/ developing resilience</li> </ul> <p><b>Practice Placement Learning</b></p> <ul style="list-style-type: none"> <li>• Continue to build upon current knowledge and clinical skills</li> <li>• Demonstrate initiative and effective organisation skills in being activity involved in arranging your clinical learning experiences</li> <li>• Demonstrate extensive knowledge on patient information requirements</li> <li>• Exhibit a holistic approach to providing patient care</li> <li>• Participate in verification and image interpretation</li> <li>• Show knowledge of the use of contrast agents in pre treatment</li> </ul>

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		<ul style="list-style-type: none"> <li>• Produce and critique of a variety of Radiotherapy treatment plans</li> <li>• Participate in a number of different Quality Assurance tests</li> <li>• Learning from, with and about other health care disciplines relevant to the patient pathway</li> </ul>
<p><b>RONC Competence for Practice 3</b></p>	<p>1. Demonstrate professional attitudes and behaviours expected for current stage of clinical training</p> <p>2. Demonstrate the required practice competence in the localisation, planning, dose calculations, delivery and verification of a specified range of Radiotherapy techniques</p>	<p>Effective and efficient communication skills with staff, service users and carers.</p> <p>Application of the sound knowledge of surface and radiographic anatomy (including cross sectional anatomy)</p> <p>Experience a variety of placements to aid skill development for qualification</p> <p>Departmental protocols on emergency procedures, hygiene, and the disposal of clinical waste</p> <p>Acting on feedback for skill development</p> <p>Working within departmental treatment protocols, IR(ME)R, SCoR code of conduct and HCPC standards</p>

## **RONC Practice Placement Assessment**

### **Year 1- Extended Case Study**

From your clinical practice, you will be required to identify a suitable patient case study you have observed during your first year in clinical experience, and write a **2000-word** case study on your chosen patient

### **Year 2- Pivotal Incident**

From practice you will be expected to identify a pivotal incident to your learning and reflect on this situation and the impact on you. This will be **1500 words** and will be expected to follow a recognised reflective model.

### **Year 2-Treatment VIVA**

Throughout the year you will collect **3 case examples** (a variety of palliative, breast, chest or pelvis) that you will be able to discuss and present at the beginning of your VIVA. Your presentation will last not more than **15 minutes** and you will then be asked questions for the remaining **45 minutes** from a clinical assessor and a SHU RONC team member.

### **Year 3- Profile of Evidence**

At the end of the year you will be expected to submit a **2000-word** profile of evidence showing how you meet the HCPC standards for proficiency of a state registered Therapeutic Radiographer.

### **Year 3- Treatment VIVA**

Throughout the year you will collect **3 case examples** (breast, chest, pelvis or head and neck) that you will be able to discuss and present at the beginning of your VIVA. Your presentation will last not more than **15 minutes** and you will then be asked questions for the remaining **45 minutes** from a clinical assessor and a SHU RONC team member.

### **Year 3- Pre-treatment VIVA**

Throughout the year you will collect **3 case examples** (palliative, breast, chest, pelvis or head and neck) that you will be able to discuss and present at the beginning of your VIVA. Your presentation will last not more than **15 minutes** and you will then be asked questions for the remaining **45 minutes** from a clinical assessor and a SHU RONC team member.

## **RONC Competency to Practice Guidance**

### **RONC Competency to Practice 1**

Professionalism, Communication and Team Working: Year 1 (mandatory)

### **RONC Competency to Practice 2**

Professionalism, Communication and Team Working: Year 2 (mandatory)

Plus three of the Following ;

Palliative Techniques

Radical Techniques: Chest

Radical Techniques: Pelvis

Radical Techniques: Breast

### **RONC Competency to Practice 3**

Professionalism, Communication and Team Working: Year 3

Treatment Verification

Radical Techniques: Head & Neck

Pre-treatment Techniques (Split into sites)

Patient Information (Split into sites)

Plus, the remaining competency from year 2 (palliative, breast, chest or pelvis)

## Profile Boxes

### CLINICAL COMPETENCY PROFILES

#### Summary of clinical competencies

Assessment undertaken	Direct Participation (Date signed)	Active Participation (Date signed)	Supervised Practice Competence (Date signed)
<b>Year 1</b>			
Professionalism, Communication and Team Working: Year 1			
<b>Year 2</b>			
Palliative techniques			
Radical Techniques: Chest			
Radical Techniques: Pelvis			
Radical Techniques: Breast			
Professionalism, Communication and Team Working: Year 2			
<b>Year 3</b>			
Radical Techniques: Head & Neck			
Patient Information			
Palliative			
Radical: Head and Neck			
Radical: Pelvis			
Radical: Chest			
Radical Breast			
Pre-Treatment			

## Student Clinical Assessment Guidelines and Competency Profiles

Pelvis			
Chest			
Breast			
Head and neck			
Palliative			
Professionalism, Communication and Team Working: Year 2			
Treatment Verification			

**Professionalism, Communication & Team Working: Year 1**

Date	
PLT/ PE Signature	

This profile will be signed by the Placement Learning Tutor (PLT) or Practice Educator following a discussion with clinical staff at the end of the year. It will also consider all the mentors' comments within the Placement Report Book over the course of the year.

This profile considers the following activities:

Good time keeping and attendance

Reliability & Responsibility

Appropriate attire

Respect for patient & staff

Working effectively within the MDT

Maintaining patient confidentiality

Use of professional language

Acceptance of constructive criticism

Maintaining interpersonal boundaries

## Palliative Techniques

	Directed Participation	Active Participation	Supervised Practice Competence*
Date			
Mentor Signature			

\*Only to be completed following a team discussion

**Directed Participation:** Staff use a directive approach, imparting their knowledge and skills to you the student. Your participation is facilitated by staff and will require explanations and prompts as appropriate.

**Active Participation:** You can assist and participate as a member of the team but still require some assistance from staff. You are building your confidence by being supported by staff resulting in reduced need for prompts. To achieve this level, you will require opportunities to be involved in technique delivery with continued feedback to support skills and confidence.

**Supervised Practice Competence:** You actively participate in the technique showing an appropriate level of clinical skills, prompting is minimal; you can recognise when there are possible issues and seek advice when appropriate. This section is completed based on team feedback as you will be required to demonstrate accurate and consistent performance.

**Once the profile is completed staff will ensure that you do not become complacent and ensure that you continue to develop your skills and knowledge.**



**Radical Techniques: Chest**

	<b>Directed Participation</b>	<b>Active Participation</b>	<b>Supervised Practice Competence*</b>
Date			
Mentor Signature			

\*Only to be completed following a team discussion

**Directed Participation:** Staff use a directive approach, imparting their knowledge and skills to you the student. Your participation is facilitated by staff and will require explanations and prompts as appropriate.

**Active Participation:** You can assist and participate as a member of the team but still require some assistance from staff. You are building your confidence by being supported by staff resulting in reduced need for prompts. To achieve this level, you will require opportunities to be involved in technique delivery with continued feedback to support skills and confidence.

**Supervised Practice Competence:** You actively participate in the technique showing an appropriate level of clinical skills, prompting is minimal; you are able to recognise when there are possible issues and seek advice when appropriate. This section is completed based on team feedback as you will be required to demonstrate accurate and consistent performance.

**Once the profile is completed staff will ensure that you do not become complacent and ensure that you continue to develop your skills and knowledge.**

**Radical Techniques: Breast**

	<b>Directed Participation</b>	<b>Active Participation</b>	<b>Supervised Practice Competence*</b>
Date			
Mentor Signature			

\*Only to be completed following a team discussion

**Directed Participation:** Staff use a directive approach, imparting their knowledge and skills to you the student. Your participation is facilitated by staff and will require explanations and prompts as appropriate.

**Active Participation:** You can assist and participate as a member of the team but still require some assistance from staff. You are building your confidence by being supported by staff resulting in reduced need for prompts. To achieve this level, you will require opportunities to be involved in technique delivery with continued feedback to support skills and confidence.

**Supervised Practice Competence:** You actively participate in the technique showing an appropriate level of clinical skills, prompting is minimal; you can recognise when there are possible issues and seek advice when appropriate. This section is completed based on team feedback as you will be required to demonstrate accurate and consistent performance.

**Once the profile is completed staff will ensure that you do not become complacent and ensure that you continue to develop your skills and knowledge.**

**Radical Techniques: Pelvis**

	<b>Directed Participation</b>	<b>Active Participation</b>	<b>Supervised Practice Competence*</b>
Date			
Mentor Signature			

\*Only to be completed following a team discussion

**Directed Participation:** Staff use a directive approach, imparting their knowledge and skills to you the student. Your participation is facilitated by staff and will require explanations and prompts as appropriate.

**Active Participation:** You can assist and participate as a member of the team but still require some assistance from staff. You are building your confidence by being supported by staff resulting in reduced need for prompts. To achieve this level, you will require opportunities to be involved in technique delivery with continued feedback to support skills and confidence.

**Supervised Practice Competence:** You actively participate in the technique showing an appropriate level of clinical skills, prompting is minimal; you can recognise when there are possible issues and seek advice when appropriate. This section is completed based on team feedback as you will be required to demonstrate accurate and consistent performance.

**Once the profile is completed staff will ensure that you do not become complacent and ensure that you continue to develop your skills and knowledge.**

**Professionalism, Communication & Team Working: Year 2**

Date	
PLT/ PE Signature	

This profile will be signed by the PLT/ PE following a discussion with clinical staff at the end of the year. It will also consider all the mentors' comments within the Placement Report Book over the course of the year.

This profile considers the following activities:

Good time keeping and attendance

Reliability & Responsibility

Appropriate attire

Respect for patient & staff

Working effectively within the MDT

Maintaining patient confidentiality

Use of professional language

Acceptance of constructive criticism

Maintaining interpersonal boundaries

**Radical Techniques: Head & Neck**

	Directed Participation	Active Participation	Supervised Practice Competence*
Date			
Mentor Signature			

\*Only to be completed following a team discussion

**Directed Participation:** Staff use a directive approach, imparting their knowledge and skills to you the student. Your participation is facilitated by staff and will require explanations and prompts as appropriate.

**Active Participation:** You can assist and participate as a member of the team but still require some assistance from staff. You are building your confidence by being supported by staff resulting in reduced need for prompts. To achieve this level, you will require opportunities to be involved in technique delivery with continued feedback to support skills and confidence.

**Supervised Practice Competence:** You actively participate in the technique showing an appropriate level of clinical skills, prompting is minimal; you are able to recognise when there are possible issues and seek advice when appropriate. This section is completed based on team feedback as you will be required to demonstrate accurate and consistent performance.

**Once the profile is completed staff will ensure that you do not become complacent and ensure that you continue to develop your skills and knowledge.**

**Pre-treatment Techniques**

	Directed Participation	Active Participation	Supervised Practice Competence*
Palliative			
Date			
Mentor Signature			
Radical Chest			
Date			
Mentor Signature			
Radical Pelvis			
Date			
Mentor Signature			
Radical Breast			
Date			
Mentor Signature			
Radical Head and neck			
Date			
Mentor Signature			

\*Only to be completed following a team discussion

**Directed Participation:** Staff use a directive approach, imparting their knowledge and skills to you the student. Your participation is facilitated by staff and will require explanations and prompts as appropriate.

**Active Participation:** You can assist and participate as a member of the team but still require some assistance from staff. You are building your confidence by being supported by staff resulting in reduced need for prompts. To achieve this level, you will require opportunities to be involved in technique delivery with continued feedback to support skills and confidence.

**Supervised Practice Competence:** You actively participate in the technique showing an appropriate level of clinical skills, prompting is minimal; you can recognise when there are possible issues and seek advice when appropriate. This section is completed based on team feedback as you will be required to demonstrate accurate and consistent performance.

**Once the profile is completed staff will ensure that you do not become complacent and ensure that you continue to develop your skills and knowledge.**

**Patient Information**

	Directed Participation	Active Participation	Supervised Practice Competence*
Palliative			
Date			
Mentor Signature			
Radical Chest			
Date			
Mentor Signature			
Radical Pelvis			
Date			
Mentor Signature			
Radical Breast			
Date			
Mentor Signature			
Radical Head and neck			
Date			
Mentor Signature			

\*Only to be completed following a team discussion

**Directed Participation:** Staff use a directive approach, imparting their knowledge and skills to you the student. Your participation is facilitated by staff and will require explanations and prompts as appropriate.

**Active Participation:** You can assist and participate as a member of the team but still require some assistance from staff. You are building your confidence by being supported by staff resulting in reduced need for prompts. To achieve this level, you will require opportunities to be involved in technique delivery with continued feedback to support skills and confidence.

**Supervised Practice Competence:** You actively participate in the information giving showing an appropriate level of clinical skills, prompting is minimal; you can recognise when there are possible issues and seek advice when appropriate. This section is completed based on team feedback as you will be required to demonstrate accurate and consistent performance.

**Once the profile is completed staff will ensure that you do not become complacent and ensure that you continue to develop your skills and knowledge.**

**Professionalism, Communication & Team Working: Year 3**

Date	
PLT/ PE Signature	

This profile will be signed by the PLT/ PE following a discussion with clinical staff at the end of the year. It will also consider all the mentors' comments within the Placement Report Book over the course of the year.

This profile considers the following activities:

Good time keeping and attendance

Reliability & Responsibility

Appropriate attire

Respect for patient & staff

Working effectively within the MDT

Maintaining patient confidentiality

Use of professional language

Acceptance of constructive criticism

Maintaining interpersonal boundaries



**Treatment Verification**

Date	
Mentor Signature	

This profile will be signed following a team discussion (Clinical staff & PLT) at the end of the year. It will consider all the mentors' comments within the Placement Report Book over the course of the year.

This profile considers the following activities:

Patient Identification

Quality Assurance checks

Dose calculations/checking

Basic image verification

Treatment verification & switching on

## **Referral**

If you do not achieve a pass in your first attempt at completing the required competencies for that year you are entitled to have one additional refer attempt after the exam board. If you still do not achieve a pass at the refer attempt, you will fail the module, and this will result in your removal from the programme

Please refer to your Clinical Module BB site if you require further clarification or contact the Module Leader.

## **Enhancing the Quality of Your VIVA**

### **Hints and Tips:**

- Ensure you have detailed and accurate case studies to use for your VIVA. Ensure you have a variety of patients to discuss. The more challenging the better.
- Gain as much feedback on your presentation as possible
- Make your presentation personable to your own clinical experiences
- Practice with friends and family to ensure you do not rush and you complete the presentation in the allocated time.
- Include or take in appropriate props/images. Images may assist in demonstrating your knowledge and understanding.
- If you struggle to answer a particular question, where appropriate, you may draw a diagram to assist in your explanation.
- We would not expect the VIVA to last longer than one hour
- Be sure to refer to the assessment criteria when preparing and conducting the VIVA
- You may take in your presentation notes

## **What's Expected from You Prior to your VIVA?**

A list of available dates and times will be provided to your cohort 3 weeks before the VIVA assessment window. Assessment slots are allocated on a first come first served basis. It is your responsibility to email the PLT with your preferred assessment slot, this will be confirmed with a meeting request, please ensure you reply to this request. If you do not achieve a pass in your first attempt at completing the viva(s) for that year you are entitled to have one additional refer attempt after the exam board. This refer attempt will be conducted by the same clinical assessor and SHU RONC academic and if successful your mark will be capped at 40%. If you still do not achieve a pass at the refer attempt, you will fail the module, and this will result in your removal from the programme.

We advise you work on a selection of cases throughout the year in preparation for your VIVA. The VIVA will take no more than 1 hour.

## **Feedback**

As part of the assessment process you will be given verbal and written feedback on your performance. This feedback should be made available to you within 1 week of completing the VIVA.

This feedback should allow you to see where marks have been allocated using the assessment grid and how you could have improved. Feel free to ask for clarification if the feedback is not explicit enough. You should also look to use the feedback to help inform you of areas requiring development to focus on when you are working clinically.

Remember to utilise your PLT and their experience prior to sitting another attempt.

## **Moderation and Cross Moderation**

As you will be assessed by a Clinical and academic member of staff this will ensure that your mark is moderated internally across the department. The presentation and the VIVA will be recorded to ensure the assessment can be moderated externally.

**Do not compare yourself to other students and other departments. Unless you are present in someone else's VIVA you are not able to draw conclusions or comparisons about the equity of a VIVA.**

### **Clinical Assessor Training and Updates**

All clinical assessors will have attended a training session before commencing any VIVA's. From then on clinical assessors will engage with assessor training every year to ensure their consistency. Every two years they must reapply for the assessment role to ensure they have engaged with the training and peer review. This will ensure a consistent and equitable approach to your assessment.

### **Support**

The whole of the SHU RONC team and our clinical partners are here to support you throughout your clinical practice. Further information on the roles of Placement Learning Tutors (PLTs), Practice Educators (PE's), Mentors and assessors can be found in the practice placement handbook.

Should you require RESD or RRAA then please contact your module leader and Hallam help <https://www.shu.ac.uk/myhallam/help-and-support> in a timely manner.

We wish you the best of luck with the programme and your clinical practice.

## **Glossary**

RONC- Radiotherapy and Oncology

PLT- Placement Learning Tutor (academic staff)

PE- Practice Educator (clinical staff)

Mentor- Trained clinical staff member who will support your learning experiences and complete your placement report book and review your competency book.

VIVA (Viva voce)- A professional discussion for assessment