

MSc (Pre-registration) Speech & Language Therapy

Year 2 Term 1 / Term 2 SLT Adult 8 Day Practice Placement Assessment

University of Essex

Student Name		
Registration Number		
Personal Tutor		
Dates of Placement		
Practice Educator		
Placement Site		
Speciality		
Retrieval Placement	Yes/No	
Visiting Lecturer		Date of Visit(s)

**If you have any concerns/issues regarding this student please phone 01206 874557
as soon as possible**

Part 1 Health and Safety, Non-discriminatory practice and Professionalism	Pass/Fail	Signature of Practice Educator
Part 2 Learning Outcomes	Pass/Fail	
Part 3 Skills Checklist	Pass/Fail	Date

Total Scores:	Pass/Excellent		Pass/Competent		Fail	
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University use only:		
Part 4 Reflective Component	Pass/Fail	Signature of University Lecturer
		Date

Overall placement mark	Pass/Fail
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If this booklet is misplaced please send to the address below, or email hhsplace@essex.ac.uk

Placement Administrator
School of Health & Human Sciences
University of Essex
Wivenhoe Park
Colchester
Essex
CO4 3SQ

Service improvement:

Under the NHS Service Improvement Agenda service improvement is now expected of anyone working in the NHS. Therefore, since 2006, there has been an ongoing national project to include service improvement within all pre-registration healthcare education programmes in England.

The University of Essex follows the nationally agreed mandate set out by the Institute for Innovation and Improvement, and in accordance with this students are expected to undertake a small scale service improvement analysis and planning activity from an idea they have had during any **one** of their placements. Students are required to write-up their idea using a specific PDSA pro-forma which is aligned with the service improvement process adopted by the NHS.

Clinicians involved with students' education are being asked to facilitate this process as much as possible. It is recommended that students provide the clinical education site with a copy of this completed PDSA pro-forma and can be asked to deliver a presentation on it to clinicians.

Health Education East of England require the University of Essex to report on the number of student service improvement ideas adopted by the NHS, so it would be extremely helpful if you could complete the following, thank you.

	Yes (please add any comments you have)	No
Did this student undertake their service improvement project during this placement?		
Has their idea been implemented?		
If it has not yet been implemented, is it likely to be?		

Practice Education Placement Student Induction Record

Health & Safety

Duties of Placement Providers

'Under the Health and Safety (training for employment) Regulations 1990, students participating in work experience are regarded as the placement providers' employees for the purpose of health and safety. Providers must therefore ensure, so far as it is reasonably practicable, the health, safety and welfare at work of all their employees'.

Please note: for any incident affecting the student's health or safety, please attach a copy of the incident form completed.

On day 1 of the placement the student has been given information relating to:

	Date completed	Educator Initials	Student Initials
• The named person to go to in the event of difficulties			
• Information about the bleep system (where appropriate) and relevant emergency telephone numbers			
• Emergency procedures, including Cardiac Resuscitation Procedures, Fire and Security			

Also during their induction period, the following policies and procedures have been made available to the student:

	Date Completed	Educator Initials	Student Initials
• Incident Reporting			
• Health & Safety including COSHH			
• Manual Handling, Infection Control & Fire			
• Harassment and Bullying			
• Equal Opportunities			

NB. This should not replace but be in addition to, the student information pack

Record of contact with University

Initiated by:	Person Contacted:	Date and Method:	Response received:

If you have any concerns/issues regarding this student please phone 01206 874557 as soon as possible.

Part of induction is the **learning contract** completed by the Student and the Practice Educator and is included below. This is intended to assist both students and clinical staff in identifying individual needs and in planning the progression of the placement. Please be aware that students with identified special needs should be assessed as to whether they can achieve the learning outcomes only once they have been given the extra support they require.

Student expectations discussed **Practice Educator expectations discussed**

Personal Placement Needs and Aims		Identified Specific Learning Needs
Needs identified before placement starts or following previous placement (to be completed by student prior to placement)		<p>I have disclosed a disability or specific learning need to my educator. Yes/No Date:</p> <p>Sign by educator:</p> <p>Sign by student:</p> <p>If yes, the ways in which this may impact upon my learning experience have been identified and discussed. Strategies to be implemented include:</p>
Current Placement Needs and Aims (Agreed in discussion with Practice Educator)		Resources Available in the Department (Identified by discussion with practice educator)
1		
2		
3		

Reflection on Achievement of Learning Contract

Interim (to be completed by student)		Final (to be completed by student)
1		
2		
3		

Part 1

Failure of any objective in Part 1 will override Part 2 of the assessment and cause the student to fail the placement. If there are concerns relating to the Student's performance in Part 1, please contact the University immediately on **07775753766**.

Record of warnings must be completed in situations where there are concerns relating to safety or professional behaviour and must be signed by both Student and Practice Educator.

Learning Outcome 1	Fail			
1). Integrates health and safety legislation into speech and language therapy practice taking account of local policy and procedures.	Fails to apply knowledge of departmental health & safety policy to specific patient groups/conditions (e.g. infection control, moving and handling, hazard control and risk management). <ul style="list-style-type: none"> • Persistently fails to protect self or use protective equipment correctly. • Is unaware of or disregards the contraindications of treatment. • Persistently applies treatment techniques and handling skills in a way which puts patient and/or self at risk. • Is unreliable in reporting and often fails to tell the educator about adverse findings and/or patient complaints. • Persists in unsafe practice despite verbal instruction and/or warnings. 			
Record of warnings given: Any entries should be dated and signed by both the student and the clinical educator. NB. A warning in this section would usually trigger a Danger of Failure procedure.				
Part 1: Learning Outcome 1			Pass	Fail
Signed / dated:				

Learning Outcome 2	Fail			
2) Demonstrates non-discriminatory practice.	May exploit the mutual trust and respect inherent within a therapeutic relationship. Persistently fails to uphold, the rights, dignity and autonomy of patient's, including their role in the diagnostic and therapeutic process			
Record of warnings given: Any entries should be dated and signed by both the student and the Practice Educator. NB. A warning in this section would usually trigger a Danger of Failure procedure.				
Part 1: Learning Outcome 2			Pass	Fail
Signed / dated:				

Learning Outcome 3	Fail
3) Fulfil all responsibilities related to legal ethical and local considerations of professional practice including clinical information (HPC, 2003).	Fails to comply with and has inadequate knowledge of the rules of professional conduct. Persistently poor time keeping and fails to implement arrangements and agreed procedures. Persistently demonstrates poor record keeping. Does not respect patient confidentiality. Poor / or inappropriate standards of dress and/or hygiene. Persists in unprofessional behaviour despite verbal instructions and/or warnings.
Record of warnings given: Any entries should be dated and signed by both the student and the Practice Educator.	
References: Health Professions Council – HPC (2008) Standards of Conduct, Performance and Ethics. The Health Professions Council, London. Health Professions Council – HPC (2010) Guidance on Ethics and Conduct for Students The Health Professions Council, London. Royal College of Speech and Language Therapists RCSLT (2005) National Standards for Practice Based Learning RCSLT London.	
Part 1: Learning Outcome 3	Pass
Signed / dated:	Fail

We encourage Practice Educators and Students to actively use this section throughout the placement. A reminder: If there are concerns relating to the Student's performance in Part 1, please contact the University immediately on 07775753766.

Please ensure you have ticked either pass or fail and signed and dated all three learning outcomes in this section. If not completed, you will be contacted by the relevant University to clarify the students pass or fail status for this section.

For any objective failed, please outline the reasons and actions taken why in the box below:

Reason for Failure and actions taken
Signatures:
Practice Educator:..... Date.....
Student:.....Date.....

Part 2 Learning Outcomes:

This part contains three areas of practice (sections) on which the student is assessed.

- Interpersonal and Interprofessional Skills
- Professionalism
- Treatment/Management

Learning outcomes have been identified and listed for each section. The learning outcomes indicate what the student should have achieved by the **end** of the placement. Students are expected to progress in their learning and achievement across the course of the placement; they may achieve progress at different rates.

The interim and the final assessments should take the form of collaborative discussion between the student and their Practice Educator; space is provided for additional comments at both interim and at final assessment. If a particular learning outcome is not applicable within that placement, then it can be noted as such and signed by the Practice Educator in the Additional Comments Box.

The interim assessment is an opportunity for formative feedback; this is feedback that supports the student's ongoing learning towards successful, summative completion. Practice Educators record a student's achievement against learning outcomes as below

Descriptor	Action
'exceeding' expected level	Student and Practice Educator reflect on student's strengths at this stage of the placement and consider extension activities.
'meeting' expected level	Student and Practice Educator reflect on continued development needs
'working towards' expected level	Student and Practice Educator devise action plan to support achievement
'at risk of failure'	Student, Practice Educator and University Lecturer convene meeting to address concern; a Danger of Failure process must be triggered.
N/A to placement setting	Reflective discussion held as to why N/A within placement setting. Learning outcome should be carried forward to next placement.

If it is identified at interim assessment or at any other time that the student has learning needs which may give rise to a Risk of Failure then the Practice Educator should contact the University Speech and Language Therapy Team immediately to arrange a three way meeting and the implementation the Risk of Failure Process

Final Assessment is the summative assessment of the student's performance.

By the end of the placement the student should be able to demonstrate the achievement of all the following Learning Outcomes:

Level	Description
Pass-competent	Student has completely passed the learning outcome for their current stage of training.
Pass – excellent	Student has demonstrated excellent ability for their current stage of training (area of relative strength)
Fail	Learning outcome not achieved – initiate retrieval placement process.

Interpersonal/Interprofessional skills	Interim Progress Formative feedback				Final			N/A
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held
1. Reflecting on prior learning and experiences, discuss how personal communication can be adapted to suit adult clients at all levels of functioning (e.g. considering clients physical, social, cognitive and psychological needs).								
Evidence:								
2. Extend your understanding of the nature of the therapeutic relationship including; <ul style="list-style-type: none"> - how it is built and maintained - the importance of client choice (e.g. self-determination in critical and terminal care) and their role in maintaining health and wellbeing - how it impacts on efficacy of care by considering its application in the adult population.								
Evidence:								
3. Effectively communicate with client's family / significant others.								
Evidence:								
4. Effectively communicate with, and contribute to the work of, the inter-professional / inter-agency team within a clinical context; providing and responding to information and feedback where appropriate.								
Evidence:								
Totals to complete								

Additional Comments at interim if applicable
(e.g. Learning Outcome 3 not achievable in this placement setting)

Professional Knowledge	Interim Progress				Final			N/A
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held
<p>1. Apply prior learning, background knowledge (including linguistics, psychology, sociology and biological sciences) and the evidence base (including current legislation and professional guidance) to understand observations of simple speech, language or swallowing difficulties in adults drawing inferences regarding;</p> <ul style="list-style-type: none"> - the clients communication / swallowing profile - the nature of their difficulties 								
Evidence:								
<p>2. Extend understanding of methods of SLT assessment (e.g. informal, formal, standardised, non-standardised), by considering their transference to the adult population exploring their rationale for their selection, application and interpretation.</p>								
Evidence:								

Professional Knowledge	Interim Progress				Final			N/A
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion
3. Understand the nature and function of appropriate instrumental analysis techniques used within SLT (e.g. during Dysphagia / voice assessments), and associated professionals, relevant to the adult client (as appropriate to placement)								
Evidence:								
4. Extend understanding of the variety of methods of data (including quantitative, qualitative) collection and recording used within SLT, to consider those in place within an adult clinical setting.								
Evidence:								
5. At a client level, understand the significance of review and outcome measurement and Care Aims in the provision of client intervention.								
Evidence:								
6. Apply prior learning, background knowledge (including linguistics, psychology, sociology and biological science) and the evidence base (including current legislation and professional guidance) to understand the rationale for SLT case management (from referral to discharge) targeting simple speech, language or swallowing difficulties in adults considering; <ul style="list-style-type: none"> - working in the best interests of the client - factors influencing the clients profile (e.g. context of interaction, physical, social, psychological, cognitive ability) - models of working (e.g. direct-individual, group / indirect– training, environmental modification, health education) 								

Evidence:

Professional Knowledge	Interim Progress				Final			N/A
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held
7. Understand the role and scope of SLT in modern healthcare and be aware of the ethical and legal issues involved in clinical practice (e.g. working with ‘at risk’ adults, withholding or withdrawing feeding).								

Evidence:

8. Understand the nature of, and seek to exercise a professional ‘duty of care’								
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Evidence:

9. Extend your understanding of others roles, by considering the role of professionals involved in the care of the adult client (e.g. health, social care and voluntary sector staff) and be aware of the need to make referrals to other services.								
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Evidence:

10. Understand the importance of involving family / significant others in the clients care plan (including impact on treatment efficacy).								
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Evidence:

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Professional Knowledge	Interim Progress				Final			N/A
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held
<p>11. Reflect on prior learning and experiences to understand the importance of adopting a holistic approach to intervention within the adult population and consider;</p> <ul style="list-style-type: none"> - the impact of the speech, language and / or swallowing difficulty on the individual client and significant others (e.g. occupational role, social integration, psychological wellbeing, personal identity) - the client’s quality of life 								
Evidence:								
<p>Additional Comments if applicable (e.g. Learning Outcome 6 – exceptional skills level achieved)</p>								

Treatment and Management	Interim Progress				Final			N/A
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held
<p>1. Contribute to the development of care plans and participate in their delivery (including client assessment, diagnosis and intervention) within the adult population.</p>								
Evidence:								
<p>2. Understand and use appropriate SLT terminology regarding more simple speech, language, communication and / or swallowing difficulties.</p>								
Evidence:								
<p>3. Extend the use of existing skills to accurately record and analyse clinical language samples of adults with speech and language impairments at all levels of linguistic processing.</p>								
Evidence:								
<p>4. Maintains confidentiality at all times and ensures that informed consent is established (including additional consent required for audio and visual recording).</p>								
Evidence:								
<p>5. Be aware of and practice within local health and safety guidelines.</p>								
Evidence:								

Treatment and Management	Interim Progress				Final			N/A
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held
6. Manage own time efficiently demonstrating good time keeping and attendance and meeting work deadlines.								
Evidence:								
7. Reflect on prior learning and experiences to reconsider the factors that may impact on healthcare and the therapeutic relationship (including culture, age, ethnicity, gender, religious beliefs and socio-economic status) and practice in a non-discriminatory manner respecting the client’s rights, dignity, values and autonomy								
Evidence:								
8. Recognise and reflect on the strengths, limitations and development of your personal and professional knowledge and practice; and be able and willing to request advice and second opinion where appropriate.								
Evidence:								
Totals to complete								
Additional Comments if applicable								

Part 3: Skills Checklist

To pass this component the student must have actively sought and engaged in relevant activities relating to the skills below. The student must have carried out the skills safely and effectively with appropriate clinical reasoning, as relates to the nature of the placement. (N.B. The practice educator will have assessed the student's ability with practicing these in Part 2 of the placement assessment. The University Lecturer will assess the student's written log and reflective commentary.) Where a skill cannot be reasonably achieved at the placement setting a reflective discussion will be held between the practice educator and the student and the skill highlighted for the student's next placement. This checklist should be cross referenced with the student's placement log and reflective commentary.

	Skill experienced/ Carried out If X, reflective discussion as to why N/A within current placement setting ✓ / X	Cross reference to written skills log and reflective commentary (marked by University Lecturer)
Initial client interview and review		
2.1 Initial client interview		
2.2 Follow up client interview		
Skills related to assessment		
3.1 Subjective & non- standardised assessment		
3.2 Objective & standardised assessment		
Skills related to treatment planning		
4.1 Treatment planning		
4.2 Therapy resources		
Skills related to treatment implementation		
5.1 Treatment sessions		
5.2 Indirect treatment		
5.3 Total communication		
Skills related to the working environment		
6.1 Multi-disciplinary working		
6.2 Record keeping		

Practice Educator Signature:

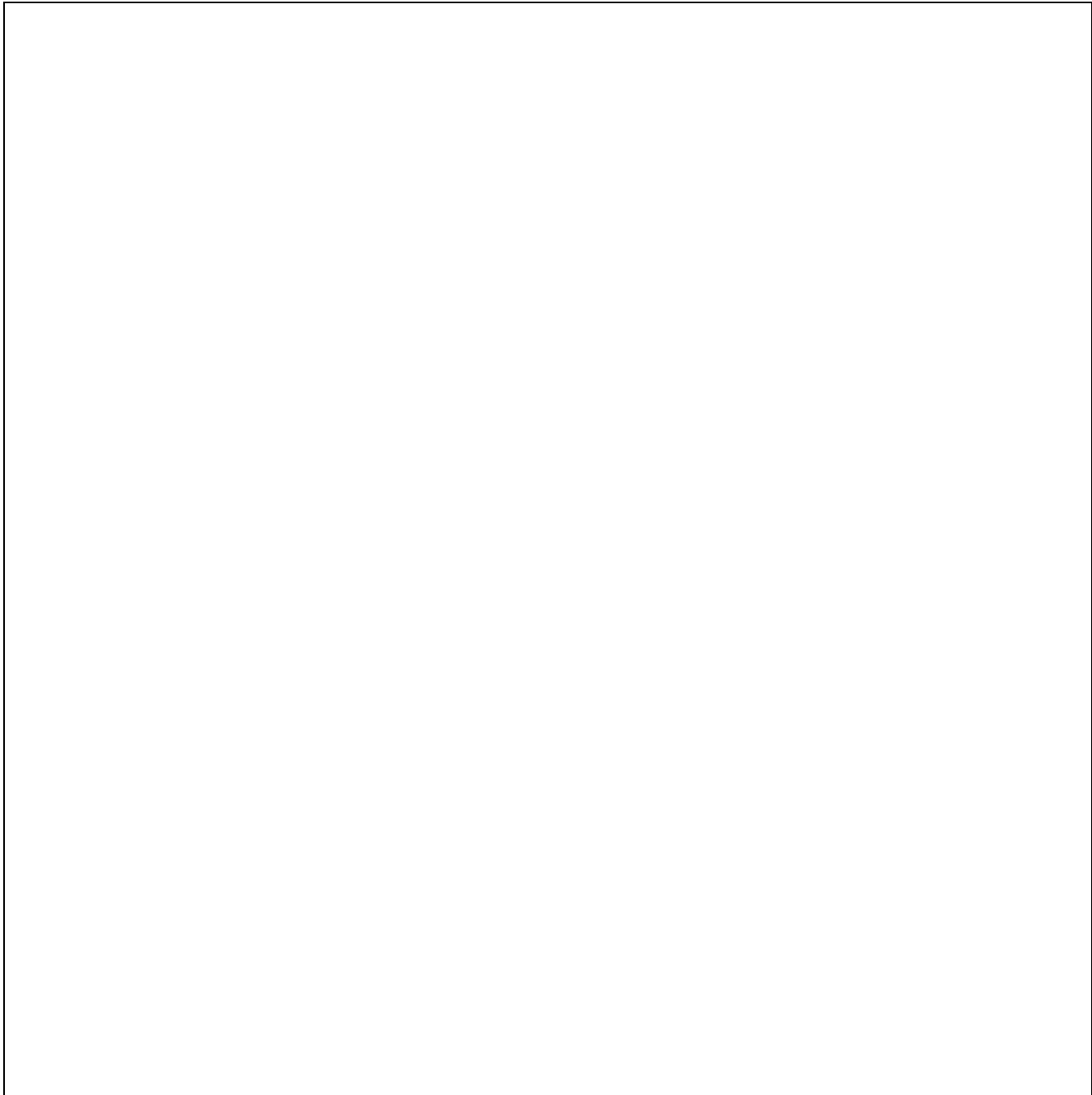
Date:

January 2016

Recommendations / Action Plan for Future Learning / Practice Placements/ Clinical Practice

This section should be completed collaboratively by the Student and Practice Educator with the aim of facilitating the student's continuing development (CPD). This should include **strengths and areas for development** which the Student can take forward into their next practice placement experience.

All written comments must be discussed by the Student and Practice Educator before the document is signed.



Please photocopy this page before final hand-in to direct your future learning

Practice Educator's Summing Up comments

Student Name:	
Placement Setting:	

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Name of Practice Educator:	
Signature of Practice Educator:	
Date:	

Student Signature:	
Date:	

NB. Please ensure you have also signed the front page of this assessment document.

Record of Clinical Hours Completed

The university is required to ensure that all students have the opportunity to complete a total 150 sessions/575 hours of placement experience. The Student completes this record but **the Practice Educator should monitor and sign** that the record is accurate.

This placement equates to 16 sessions (where a session is 3.5 hours), 8 days or 56 hours in total.

If not completed, you will be contacted by the Student or relevant University to clarify the Student's clinical sessions and hours.

Day	Date	Sessions	Hours
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
Additional Days			
Additional Days			
		Total:	Total:

Absences and Reasons:

I

I confirm that this is an accurate record of the hours completed by the student.

Name of Practice Educator:	
Signature of Practice Educator:	
Date:	

Student Name	
Signature	
Date	