

MSc (Pre-registration) Speech & Language Therapy

Year 2 Term 3 / Term 4 SLT Adult Block Practice Placement Assessment

University of Essex

Student Name							
Registration Number							
Dates of Placement							
Practice Educator							
Placement Site							
Speciality							
Retrieval Placement	Yes/No						
Visiting Lecturer			Date	of Visit(s)			
Part 1 Health and Safety, Norpractice and Professionalism	n-discriminator	y Pass/Fail		ire of Prac	tice Educ	cator	
Part 2 Learning Outcomes		Pass/Fail					
Part 3 Skills Checklist		Pass/Fail	Date				
Total Scores: Pass/Excell	ent	Pass/Compo	etent		Fail		
Hairereity use only							
University use only: Part 4 Reflective Componer	nt Pass/Fail	Signature o	f Univer	sity Lectu	ırer		
Date							

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 comp	leted	Educator Initials	Student Initials
•	The named per	son to go to in the ever	nt of difficulties				
•		out the bleep system (whergency telephone nu	• • • •				
•	Emergency pro- Procedures, Fir	cedures, including Car e and Security	diac Resuscitation	n			
	Also during thei available to the	r induction period, the student:	following policies		rocedu		
				Date Comp	leted	Educator Initials	Student Initials
•	Incident Report	ing					
•	Health & Safety	including COSHH					
•	Manual Handling, Infection Control & Fire						
•	Harassment and						
•	Equal Opportun	nities					
	NB. This should	ld not replace but be	in addition to, th	e stu	dent in	formatio	n pack
		Record	of contact with l	Jnive	rsity		
	Initiated by:	Person Contacted:	Date and Metho	od:	Res	sponse re	eceived:

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 Aim	s Identified Specific Learning Needs
Needs identified before placement sta	
following previous placement (to be	learning need to my educator. Yes/No
completed by student prior to place	ment) Date:
	Sign by educator:
	Sign by student:
	If yes, the ways in which this may impact upon my learning experience have been identified and discussed. Strategies to be implemented include:
Current Placement Needs and Aims (Agreed in discussion with Practice Ed	
1	
2	
3	

Reflection on Achievement of Learning Contract

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

Part 1

Failure of any objective in Part 1 will override Part 2, 3 and 4 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	Fails to apply knowledge of departmental health & safety policy						
and safety legislation	to specific patient groups/conditions (e.g. infection control,						
into speech and	moving and handling, hazard control and risk management).						
language therapy	 Persistently fails to protect self or use protective 						
practice taking	equipment correctly.						
account of local policy	 Is unaware of or disregards the contraindications of 						
and procedures.	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 give	en:						
Any entries should be dat	ed and signed by both the student and the clinical educator.						
Any entries should be dated and signed by both the student and the clinical educator.							
Part 1: Learning Outcon	ne 1 Pass Fail						
Signed / dated:							

Learning Outcome 2	Fail
2) Demonstrates non-	May exploit the mutual trust and respect inherent within a
discriminatory	therapeutic relationship. Persistently fails to uphold, the rights,
practice.	dignity and autonomy of patient's, including their role in the
	diagnostic and therapeutic process
Record of warnings give	en:
Any entries should be dat	ted and signed by both the student and the Practice Educator.
Part 1: Learning Outcon	ne 2 Pass Fail
Signed /dated:	

Learning Outcome 3	Fail	
3) Fulfil all responsibilities related	Fails to comply with and has inadequate knowledge of the	Э
to legal ethical and local	rules of professional conduct. Persistently poor time	
considerations of professional	keeping and fails to implement arrangements and agreed	
practice including clinical	procedures. Persistently demonstrates poor record	
information (HPC, 2003).	keeping. Does not respect patient confidentiality. Poor /	or
111101111ation (111 0, 2003).		
	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 signe	d by both the student and the Practice Educator.	
Part 1: Learning Outcome 3	Pass Fail	
Signed /dated:		

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.

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 of: Practice Educator:DateStudent:Date	
Tactice EducatorDate	

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 (informing the Student and Practice Educator as to the progress the Student is making). Practice Educators record a student's achievement against learning outcomes as

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	Student and Practice Educator devise action plan to
level	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 (evaluating the student's skills).

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 Skills	•			Final Achieved			N/A	
					Achie	vea		
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held
Reflecting on prior learning and experiences, modify personal communication (style and means) effectively in order to successfully communicate information regarding progress and treatment options.								
Evidence:								
2. Build an effective therapeutic relationship with the client and, where appropriate, their families and / or carers that applies an understanding of; - how the therapeutic relationship 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 the therapeutic relationship impacts on efficacy of care. Evidence:								
		T						
3. Effectively communicate with, and involve, the client's family / significant others in the client's care plan (where appropriate)								
Evidence:								
4. Build professional working relationships; effectively communicating and collaborating with the inter-professional / inter-agency team.								
Evidence:						•		
Totals to complete								

Interpersonal Skills								
Additional Comments if applicable (e.g. 3 – no opportunity to speak w	ith client's family	directly	have o	rganised	d teleph	none m	neeting)
Professional Knowledge	Inte	rim Pro	gress		Final Achie			N//
				Φ	Achie	vea		

				1	Acrile			
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held
Apply and integrate prior learning, background knowledge (including linguistics, psychology, sociology and biological sciences) and the evidence base (including current legislation and guidance) to understand observations of more complex speech, language and swallowing difficulties in adults drawing inferences regarding; - the clients communication / swallowing profile - the nature of their difficulties								

Evidence:

Professional Knowledge	Interim Progress Final Achieve					wod	N/A	
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – 2	Pass – competent	Fail	Reflective discussion held
2. 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:								
3. Understand the way in which the SLT, wider health, social and voluntary sector services work together in client care and be aware of the application of the relevant ethical / legal issues and policy / legislation (e.g. working with 'at risk' adults, withholding or withdrawing feeding).								
Evidence:								
4. Understand the nature of, and seek to exercise a professional 'duty of care'								
Evidence:								

Professional Knowledge	Interi	m Pro	gress		Final Achie	N/A		
	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held
 5. Integrate and apply prior learning, background knowledge (including linguistics, sociology, psychology 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 more complex speech and language difficulties in adults considering; 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. directindividual, group / indirect – training, environmental modification, health education) 								
L viderice.								
6. At a client and service level, understand the role of review and audit in quality management; including quality assurance, quality control and the use of appropriate outcome measures								
Evidence:								
Totals to complete								
Additional Comments if applicable (e.g. 5 – insightful use of integrated background	l knowl	edge ir	n under	rstandin	g client	's need	ds)	

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Treatment and Management	Inte	rim Pro	ogress	•	Final Achie		N/A	
	Exceeding Meeting Working Towards Risk of failure				Pass – excellent	Pass – competent	Fail	Reflective discussion held
1. Develop and implement care plans (including client assessment, diagnosis and intervention) within the adult population .								
Evidence:								
2. Select and administer appropriate methods of SLT assessment, recording and analysing results and seeking guidance as appropriate.								
Evidence:								
3. Refine 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 that are appropriate to the client and case management.								
Evidence:								
4. Apply prior learning and knowledge of data collection and recording in order to maintain appropriate clinical notes, departmental and multi-disciplinary.								
Evidence:								

Treatment and Management	Interim Progress Final Achieved								N/A
5. Understand and use appropriate SLT	Exceeding	Meeting	Working Towards	Risk of failure	Pass – excellent	Pass – competent	Fail	Reflective discussion held	
terminology, regarding more complex speech, language, communication and / or swallowing difficulties.									
Evidence:									
6. Maintains confidentiality at all times and ensures that informed consent is established (including additional consent required for audio and visual recording).									
Evidence:									
7. 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, applying understanding of second opinion processes. - Undertake additional training where appropriate									
Evidence:									

Treatment and Management	Interim Progress				Final Achieved			N/A
	Exceeding	Meeting	Working Towards	Risk of failure	Pass –	Pass – competent	Fail	Reflective discussion held
8. Apply understanding of the importance of adopting a holistic approach to intervention, by practicing in a manner that considers; - 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:								
9. Be aware of and practice within local health and safety guidelines.								
Evidence:								
10. Practice in a non-discriminatory manner respecting the rights, dignity, values and autonomy of the client.								
Evidence:								
11. Apply your understanding of the role of professionals involved in the care of the adult client (e.g. health, social care and voluntary sector staff) by making referrals to other services where appropriate.								
Evidence:								

Treatment and Management	Interim Progress					Final Achieved			
	Exceeding	Meeting	Working Towards	Risk of failure	Pass –	excellent	Pass – competent	Fail	Reflective discussion held
12. Manage own time efficiently demonstrating good time keeping and attendance and meeting work deadlines.									
Evidence:									
13. Apply understanding and experiences of review and audit to monitor progress of interventions using accepted methods of outcome measurement; modifying interventions according to personal and client performance.									
Evidence:									
Totals to complete									
Additional Comments if applicable (e.g. 3 – at times under-estimates abilities, this i	s like	ly to im	nprove	as con	fide	nce	grows	5)	

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 <u>ability</u> 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 Olivert Internations O. Dou		
Initial Client Interview & Rev	view	
3.1 Initial Client Interview		
3.2 Follow Up Client		
Interview		
Assessment		
3.3 Subjective and non-		
standardised assessment		
3.4 Objective and		
standardised assessment		
Skills related to treatment p	lanning	
4.1 Treatment planning		
4.2 Therapy resources		
Skills related to treatment in	mplementation	
5.1 Treatment sessions		
5.2 Indirect treatment		
5.3Total communication		
Skills related to the working	environment	
6.1 Multi-disciplinary working		
6.2 Record keeping		

Practice Educator Signature:

Date:

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.

Recommendations/Action plan for future learning/Practice placements/Clinical practice

This section should be completed collaboratively by the Student and Practice Educator with the

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

Practice Educator's Summing Up comments

Student Name:	
Placement Setting:	
Name of Practice Educator:	
Signature of Practice Educator:	
Signature of Fractice Luucator.	
Date:	
Student Signature:	
Joén.	
Date:	

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

Additional Educator's Summing Up comments

Student Name:	
Placement Setting:	
Name of Practice Educator:	
Signature of Practice Educator	r:
J 1 21 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Date:	
Student Signature:	
Judeni Oignature.	
Dato:	-
Date:	

Part 5 – 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.

Including study times, this placement equates to 50 sessions (where a session is 3.5 hours), 25 days or 175 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.

Neek 1	Hours	Sessions	Week 2	Hours	Sessions
Date			Date		
Mon			Mon		
Tues			Tues		
Wed			Wed		
Thurs			Thurs		
Fri			Fri		
TOTAL			TOTAL		
Week 3	Hours	Sessions	Week 4	Hours	Sessions
Date	- Ilouio	GGGGIGIIG	Date	110410	000010110
Mon			Mon		
Tues			Tues		
Wed			Wed		
Thurs			Thurs		
Fri			Fri TOTAL		
TOTAL			IOTAL		
Week 5	Hours	Sessions	Additional	Hours	Sessions
Date			Date		
Mon			Mon		
Tues			Tues		
Wed			Wed		
Thurs			Thurs		
Fri			Fri		
TOTAL			TOTAL		
Total			Total		
Hours			Sessions		
110013	I		003310113		
Absences a	ind Reasons:				
confirm tha	t this is an acc	urate record of the	hours completed by	the student.	
Name of Pra	actice Educato	or:			
Signature o	f Practice Edu	cator:			
Date:					
Student Sig	ınature:				
Student Sig	ınature:				

Date: