

## NATIONAL STUDENT CLINICAL COMPETENCY EVALUATION PACK\*

## Student Clinical Competency Evaluation (2015) Student Clinical Competency Performance Indicators

The Performance Indicator Developmental Progression was devised to help practice educators and students to evaluate progress towards target levels of competency in each area. These indicators should be used across all levels in conjunction with the SCCE when grading students at mid and end of placement. Performance indicators outline what is expected at the **EVIDENT** level for the stage the student. For example if you are marking a student who is at entry-level you should look at the entry-level column only. Where a student does not meet the indicator they should be marked as **EMERGING**. Students who demonstrate competency above their level should be allocated the **PLUS** grade.

	Competency	2 <sup>nd</sup> Year (SF): Novice	3 <sup>rd</sup> Year (JS): Transition	4 <sup>th</sup> Year (SS): Entry
1.	Collects and collates relevant client-related information systematically from case history, interviews and health records.	Identifies some information needed and possible sources. Needs direction from Practice Educator to ensure all relevant information is sought, obtained and documented appropriately. May need to use scripts and templates to ensure all information is gathered.	Uses theoretical knowledge to identify key information needed and possible sources for routine clinical presentations.	Identifies all information needed and possible sources from referral note and knowledge base. Independently interviews client /carer synthesizing information in real time and probing for relevant details as the interview proceeds. Documents and synthesises all information appropriately.
2.	Applies theory to practice in the selection of formal and informal assessment procedures and tools appropriate to clients' needs, abilities and cultural background.	Shows awareness of general assessment procedures for use with client group, and selects appropriate assessments with direction. Will need specific direction to adapt and modify tasks, if necessary.	Identifies appropriate assessments for client group. May need guidance in selection of tools for specific individual presentations and in adapting procedures to suit individual needs.	Independently selects appropriate formal and informal assessments for the routine client group presentations. Modifies and adapts assessment approach as dictated by emerging client profile. Will need to collaborate and consult with Practice Educator for complex case presentations.
3.	Administers, records and scores a range of assessments accurately.	Administers assessments accurately with specific direction. Needs additional time for recording and scoring. May need audio / video recording as additional support with complex presentations.	Administers formal assessments accurately. May need additional time to complete testing and scoring. Uses informal assessments appropriately to obtain a fair and accurate sample with guidance.	Follows test directions in the administration recording and scoring of formal assessments within an acceptable time frame. Records quantitative and qualitative data simultaneously. Adapts and uses informal assessments in a flexible manner to obtain and record a fair sample.

<sup>\*</sup> The Student Clinical Competency Evaluation Forms and indicators are currently under review. Students will be issued with forms for inclusion at the start of each clinical year.

	Competency	2 <sup>nd</sup> Year (SF): Novice	3 <sup>rd</sup> Year (JS): Transition	4 <sup>th</sup> Year (SS): Entry
4.	Analyses, interprets and evaluates assessment findings using the professional knowledge base and client information.	Identifies strengths and weaknesses in communication / FEDS profiles and compares to typical profile. Quantifies differences and determines severity ratings. Requires specific direction to interpret holistically and link to knowledge base and case history.	Uses the professional knowledge base to analyse assessment results holistically. Formulates a diagnostic hypothesis supported by assessment findings and relevant theoretical knowledge. May need guidance to ensure that qualitative information is applied.	Evaluates and interprets assessment findings linking theory and client history, presentation and communication / FEDS profile in a holistic manner. Applies qualitative information to quantitative data and determines appropriate severity rating.
5.	Formulates appropriate diagnostic hypotheses linking assessment findings and client profile to theoretical knowledge.	Applies knowledge of communication / FEDS to assessment findings and formulates a tentative diagnostic hypothesis. Needs specific direction to identify indicators of possible alternative diagnoses from background information and assessment results.	Applies knowledge of typical and atypical communication / FEDS profiles to assessment findings and background information to formulate a diagnostic hypothesis. Seeks guidance to ensure that all information is used and alternatives considered.	Formulates accurate diagnostic hypothesis theoretically grounded and supported by supported by clinical evidence. Discusses diagnosis and possible alternatives collaboratively with Practice Educators.
6.	Makes appropriate recommendations for management based on a holistic client profile.	Identifies key information needed from client communication / FEDS profiles. Will need to review profile holistically under the direction of the Practice Educator.	Uses relevant information from client communication / FEDS profiles to make informed evidence based recommendations. Guidance may be needed to integrate the needs of the client / carer and available service resources.	Synthesises all relevant information from all stakeholders to make informed evidence based recommendations with reference to client's needs and wishes in the context of available service provision.
7.	Demonstrates understanding of the indicators and procedures for onward referral.	Identifies factors to consider when referring on clients with routine profiles. Will need specific direction in identifying appropriate services and, obtaining consent and applying onward referral procedures.	Provides rationale and identifies the need for onward referral. Will need guidance and support to identify services, obtain consent and follow agency referral procedures.	Following consultation evaluates the need and provides rationale for onward referral to SLT and other disciplines for atypical communication / FEDS profiles. Obtains consent and seek service provision appropriately in a timely manner.
8.	Reports assessment findings orally in an appropriate professional manner to client / carer and team members.	Outlines and communicates basic assessment findings appropriately with specific direction (including scripts) on language and order.	Communicates key assessment findings in coherent, logical order and in language appropriate to all recipients with guidance.	Reports assessment findings in a concise, coherent and logical manner covering all content relevant to the client's profile using language appropriate to all recipients.
9.	Presents accurate written client reports conforming to professional and legal guidelines and appropriate to the needs of all recipients.	Communicates general findings. Will need direction to identify relative relevance of findings and how these should be presented in written reports.	Communicates key findings in coherent logical order using appropriate language and formats with general guidance on agency procedures.	Writes reports independently covering all necessary information in logical order contents, language and format, appropriate to the needs of all recipients.

## Student Clinical Competency Performance Indicators cont./...2

Student Clinical Competency Performance Indicators cont./3
--

	Competency	2 <sup>nd</sup> Year (SF): Novice	3 <sup>rd</sup> Year (JS): Transition	4 <sup>th</sup> Year (SS): Entry
10.	Demonstrates the ability to provide clients and carers with information in appropriate formats to facilitate decision-making and informed consent.	Identifies key facts to be communicated to client / carer. Will need specific direction in standardised procedures, sample templates, scripts, etc., to ensure that information is communicated efficiently and consent recorded appropriately.	Identifies information needed by client / carer for informed decision making with minimal guidance. Will need to consult with Practice Educator on formats, specific resources, etc., to meet the needs of clients and to record consent appropriately.	Provides clients / carers with sufficient information on all options available to them in appropriate language and formats to ensure that decision making is informed and consent obtained for all procedures and processes.
11.	Demonstrates the ability to consult and collaborate with clients / carers when developing management plans.	With specific direction, consults and collaborates with clients/carers to identify relevant information needed to develop management plan. Considers key factors with direction from Practice Educator to generate a holistic management plan.	With guidance, consults with clients / carers to identify information needed to develop management plan. Collaborates with clients/carers to in using this information to generate a holistic management under guidance from the Practice Educator	Identifies all relevant factors influencing management plan in with clients/carers and consults with Practice Educator to generate a holistic management plan.
12.	Determines care pathway for clients based on client needs, service resources and the professional evidence base.	Identifies and summarises relevant theoretical and practice-based evidence with specific direction, to determine a client centred, evidence based care pathway making best use of all available resources	Sources and appraises relevant theory and practice-based evidence with guidance to determine a client centred care pathway making best use of all available resources	Consults with Practice Educator and independently sources, synthesises relevant theoretical and practice-based evidence to determine a client centred care pathway making best use of all available resources.
13.	Recognizes the roles of other team members and consults and collaborates appropriately to develop and implement client management plans.	Demonstrates knowledge of roles of team members and with direction, engages in collaborative consultation and /or practice when indicated to advance management plans	Demonstrates knowledge of roles of team members and with guidance engages in collaborative consultation and / or practice when indicated to advance management plans.	Acknowledges the potential contribution of each team member and engages in collaborative consultation and / or practice in consultation with Practice Educators. T
14.	Writes holistic management plans incorporating short and long term goals in session, episode and discharge plans.	Under specific direction, develops holistic management plans, demonstrating evaluation of all relevant information with cohesion across session, short, long term goals and discharge plans. Goals are SMART and phrased clearly and concisely.	With guidance, develops holistic management plans, demonstrating evaluation of all relevant information with cohesion across session, short, long term goals and discharge plans. Goals are SMART and phrased clearly and concisely.	Independently develops holistic management plans in collaboration with Practice Educator, demonstrating evaluation of all relevant information with cohesion across session, short, long term goals and discharge plans.
15.	Maintains precise and concise therapy records, carries out administrative tasks and maintains service records.	Completes all necessary therapy and service records and administrative tasks in a timely and organised manner using professional language with specific direction from the Practice Educator.	Under guidance from the Practice Educator, completes all necessary therapy and service records and administrative tasks in a timely and organised manner using professional language.	Following collaboration and consultation with Practice Educator independently completes all necessary therapy and service records and administrative tasks in a timely and organised manner.

Student Clinical Competency Performance Indicators cont./4
--

1/	Competency Implements therapy using	2 <sup>nd</sup> Year (SF): Novice With specific direction, selects appropriate	<b>3<sup>rd</sup> Year (JS): Transition</b> With general guidance, demonstrates the	4 <sup>th</sup> Year (SS): Entry Researches, integrates and appraises the
16.	theoretically grounded, evidence	techniques and resources and outlines the	ability to appraise, select, and adapt	evidence for different approaches,
	based techniques and resources.	evidence base to implement therapy. Uses	appropriate techniques and resources	techniques and resources appropriate to
		basic techniques during clinical sessions	between sessions and the ability to use	client needs and interests. Justifies therapy
		following instruction and preparation.	and evaluate these during therapy sessions.	approach with support from evidence in consultation with Practice Educators.
17.	Introduces, presents and closes all	Explains the format and goals of a session	Introduces, presents and closes all clinical	Introduces, presents and closes all
17.	clinical sessions clearly in a client-	clearly to client /carer following specific	sessions clearly in a client centred manner	activities and sessions in a client-centred,
	centred manner.	direction such as scripting, with the Practice	with self -reflection and general guidance	jargon-free manner.
		Educator before the session.	from the Practice Educator between	
10	Demonstrates appropriate	With specific direction and structured	sessions. Adapts communication skills and	Demonstrates appropriate communication
18.	communication and therapeutic	feedback during and between contacts	therapeutic skills following general	and therapeutic skills during all
	skills during all interactions	demonstrates appropriate communication	guidance and feedback between	interactions. Accurately judges own
	including:	and therapeutic skills. May require specific	contacts. Appraises own performance	performance within sessions and adapts in
	<ul> <li>Observes, listens and responds</li> </ul>	direction in therapeutic techniques.	after a session, outlines adaptations	response to client / carer needs in real
	to client/carer.		required with guidance from Practice	time.
	<ul> <li>Uses appropriate vocabulary and syntax.</li> </ul>		Educator and implements these in following sessions.	
	<ul> <li>Uses appropriate intonation,</li> </ul>			
	volume and rate.			
	<ul> <li>Uses appropriate modelling,</li> </ul>			
	expansions and recasting.			
	<ul> <li>Uses appropriate and varied prompts and cues.</li> </ul>			
19.	Provides appropriate verbal and	Identifies all who may require feedback	Provides appropriate feedback to	Predicts accurately type and quantity of
17.	non-verbal feedback and	during a clinical session. Gives appropriate	client/carer/team member for routine	feedback needed and appropriate to the
	direction to client / carer / team	feedback on pre-set tasks following specific	interactions when provided with guidance	all during clinical interactions. Devises clear
	member on performance during	direction from Practice Educator.	by the Practice Educator. Develops and	non-verbal and verbal feedback and
	a clinical interaction.		adapts scripts for a variety of situations with	directions and appraises own delivery in
			minimal guidance.	real-time and revises appropriately during interactions.
20.	Continuously evaluates	Requires specific direction to select	Uses appropriate outcome measures to	Evaluates efficacy in real time and revises
±v.	intervention efficacy and modifies	appropriate tools to evaluate intervention	examine intervention efficacy between	intervention and discharge plans as
	intervention and discharge plans	efficacy. Needs direction to identify	sessions with general guidance. Identifies	needed following consultation /
	as required.	appropriate modifications to intervention	appropriate modifications to intervention	collaboration with Practice Educator.
		and discharge plans.	discharge plans with guidance from Practice Educator.	