Trinity College Dublin
Coláiste na Tríonóide, Baile Átha Cliath
The University of Dublin

Discipline of Physiotherapy
Clinical Placement Assessment Form
LEVEL 3

Student Name _____
Name of Clinical Site _____
Clinical Specialty/Specialties _____
Dates of Placement From _____ To_____
No. of Days Absent _____Reason _____
Name of Practice Tutor _____
Name of Practice Educator _____
Name of Visiting Academic Staff _____Date of Visit _____
P1 □ P2 □ P3□ P4□ P5□

Section	Mark
Patient Assessment	**/100**
Patient Treatment / Management	**/100**
Professionalism	**/90**
Documentation	**/40**
Communication	**/50**
Total Mark	**/380**

Overall Placement Score ☐ Overall Grade ☐

It is the responsibility of the student to ensure that this form is completed and returned to the Practice Education Co-ordinator within one week of the placement.

I feel the following 3 needs should be addressed on subsequent placements
1._____
2._____
3._____

Other Comments

I confirm that I have received feedback during the course of this placement and on this CAF

Student Signature: **Date:**

Practice Educators Signature: **Date:**

CORU Registration Number:

GUIDELINES FOR COMPLETING THE CLINICAL PLACEMENT ASSESSMENT FORM

The assessment of the student's performance is divided into two parts.

Part 1 contains five areas of practice each of which contribute to the overall grade. These comprise:

- Patient Assessment
- Patient Treatment/Management
- Professionalism
- Documentation
- Communication

Learning outcomes have been identified and listed for each area.
The learning outcomes indicate what the student should have achieved by the end of the placement.

There are 10 learning outcomes in each of the areas of patient assessment, patient treatment/management and 9 in professionalism. There are 4 learning outcomes in documentation and 5 in communication.

For each of the learning outcomes, there are a number of expected behaviours, designed to help you decide if the learning outcome has been achieved at a particular level. This list of behaviours is not exhaustive but aims to guide you in assigning a mark.
The learning outcomes do not change from level one to level three, rather the *behaviours* change.

Assessment criteria for each area are given. You should apply these criteria to the learning outcomes in order to analyse the student's performance and decide upon the mark to be awarded. Forty percent reflects the minimum standard required of students to achieve a pass mark for any of the learning outcomes in that area. Within the first class honours grade, the mark 7 is reserved only for those students who are deemed to demonstrate outstanding achievement for their level in relation to the individual learning outcomes. When marking, it is essential to award the student a mark which most clearly reflects their achievement in relation to each individual learning outcome in each individual section.

A mark is awarded at both midway and end of placement. Midway assessment should be based on the work completed within the first half of a placement and marked in the mid way section. The final mark should be based primarily on the performance on the latter half of a placement. For shorter placements or for specific placement sites, midway marks can be allocated as a total mark for each section rather than for individual learning outcome.

The final mark is given in the last days of placement. However, this mark can be adjusted to reflect changes in behaviours which may occur up until and including the last day of placement.

Space is provided for both comments and a mark to be recorded at midway and at the end of the placement.
On the front page space for any general comments you may wish to make and for comments by the student is also provided. Please complete and sign this at the end of the placement.

Both the Professionalism and the Documentation section have tick boxes which should be completed with a √ indicating agreement that the student has adhered to **all** the behaviours described or X the student has not adhered to the behaviours. If he student does not adhere to one or two of the behaviours by the end of the placement then X is indicated in the box and the area that needs improvement is clarified e.g. X non-compliant with c. This also applies for midway assessment.

A student must meet the following criteria to pass the placement: score > 40% overall & pass Part 2. Students who score < 40% overall **or** score < 40% in 2 or more sections of the evaluation form or who fail Part 2 are deemed to have failed the placement. Anticipated failure in Part 1 should be identified as far as possible, discussed with the student and documented.

Part 2 carries no marks but the student's performance must normally be satisfactory in order to pass the placement. Failure in part 2 should normally be preceded by a formal warning, which should be documented on the assessment form and discussed with the student following the specific incident(s).

A record of clinical hours is also included. The university is required to ensure that all students have completed 1000 hours of clinical work. The student will complete the record but please monitor and sign that the record is accurate. On the front page space for any general comments you wish to make is provided.

NB Both the Practice Educator and the Student must sign the form after feedback is given to the students on their performance. The Practice Educator must also sign the 'Record of Clinical Hours' page to confirm that the record of hours completed is accurate. It is the students' responsibility to ensure these hours are recorded and totalled accurately. Students should complete the final table regarding time spend in different clinical areas before submitting this form to the Practice Education Co-ordinator.

The **Level 1** form should be used for :
Placement 1

The **Level 2** form should be used for:
Placement 2
Placement 3

The **Level 3** form should be used for :
Placement 4
Placement 5

Clinical Experience Profile

Students are required to complete the table below for each placement.
Information provided by students in this section gives a profile of the student's clinical experiences and includes hours completed in core areas of practice. Please complete the table below as accurately as possible considering all patients seen during the placement. In particular clinical areas such as paediatric, acute rehab, acute medical admission etc. require hours completed to be broken down into core areas of practice e.g. a care of the elderly placement may have Neuro. 170 hours, Resp. 20. If you have any questions in relation to this part of the form please contact the Practice Education Co-ordinator.

Clinical Area	Age Category	Clinical Setting	Clinical Hours
Musculoskeletal			
Neurology			
Cardiorespiratory			
Other (please state)			

Key:
Clinical Setting

1. **Acute hospital rehabilitation inpatients or outpatients or both.**
2. **Community based rehabilitation – please specify one or more of the following settings: school based care, disability service, primary care outpatient, home care, step-down rehabilitation unit/hospital, classes in community centers. Some placement may be a combination of these settings.**
3. **Specialised Services e.g. NRH, maternity hospitals.**

Age categories

A. **Adults 15-64 years**
B. **Elderly 65+**
C. **Paediatrics 0-14**

Patient Assessment

LEARNING OUTCOME By the end of this placement the student will:	BEHAVIOURS LEVEL THREE	Midway Mark /10	Final Mark /10
1. Demonstrate appropriate background knowledge	a. Comprehensively answers questions from educator/tutor on core clinical knowledge and skills. b. Justifies assessment with reference to theoretical concepts, supported texts and the available evidence.		
2. Retrieve relevant information from available sources	a. Efficiently selects all relevant information from all available sources prior to initiation of assessment. b. Efficiently integrates this information into the subsequent assessment. c. Has a clear understanding of the patient's presenting complaint and management and engages in effective discussion with educator regarding this.		
3. Perform a subjective examination	a. Efficiently executes a logical, systematic and comprehensive interview to identify and elucidate the patients problem/s within a given time period. b. Avoids closed questioning. c. Efficiently generates pertinent information which informs the subsequent objective examination. d. Exhibits flexibility in enquiry responding appropriately to patient cues.		
4. Perform an objective examination	a. Concisely explains purpose and format of objective assessment so that patient is fully informed. b. Efficiently selects and accurately applies appropriate assessment techniques thereby demonstrating clear awareness of issues such as irritability, fatigue etc. c. Selects and applies evidence based outcome measures. d. Carefully employs effective handling skills. e. Exhibits flexibility in the execution of the assessment by responding quickly to patient cues. f. Maintains a safe environment.		
5. Demonstrate appropriate handling skills	a. Optimally positions self displaying an adherence to the documented site policy on safe manual handling when executing the subjective and objective examination. b. Employs appropriate, effective and skilful handling of patients during assessment.		
6. Ensure patient comfort and dignity during assessment	a. Positions patients for their comfort and dignity during assessment. b. Minimises physical and psychological stress during assessment. c. Uses appropriate touch during assessment.		
7. Interpret and evaluate assessment findings	a. Identifies, analyses and evaluates salient points from assessment. b. Relates clinical signs and symptoms to underlying pathology and integrates this knowledge into management programme. c. Recognises typical patterns of clinical presentation and relates this to current problems/ objective findings. d. Discusses factors which limit patient's ability to continue or comply with assessment tasks and demonstrates this understanding when designing management programme. e. Formulates a comprehensive, prioritised problem list based on assessment findings.		
8. Plan a treatment programme	a. Integrates assessment findings to plan a comprehensive treatment. b. Selects and justifies a range of treatment. approaches which address identified problems and goals in a holistic manner. c. Sets appropriate priorities in planning treatment which demonstrate a clear insight of patient goals, lifestyle and capabilities.		
9. Set realistic goals	a. Uses assessment findings, and clinical reasoning skills to set appropriate, SMART short term and long term goals of treatment. b. Predicts likely clinical outcomes on the basis of background knowledge of disease processes and experience and plans for this.		
10. Perform assessment safely	a. Identifies and clears hazards in environment prior to and during assessment. b. Maintains appropriately close proximity to patients during assessment. c. Monitors patient response to assessment and modifies/discontinues assessment where patient safety is at risk.		
TOTAL MARK AWARDED			

Numerical band	Criteria
1 **Score 7-10**	Excellent level of relevant knowledge, understanding and synthesis. Demonstrates an excellent ability to retrieve patient information from relevant sources. Excellent standard in the ability to carry out a comprehensive, efficient and appropriate assessment. Always demonstrates excellent practice in terms of safety and patient handling. Excellent and thorough interpretation and evaluation of assessment findings. Excellent ability to formulate a problem list and set realistic goals. Excellent ability to design a treatment plan with sound justification and can offer a broad repertoire of appropriate treatment techniques. Integrates reflective analytical and practical skills. Very high level of clinical reasoning skills. **The mark 8+ is reserved for a student whose performance on these criteria is outstanding.**
2.1 **Score 6-6.9**	Very good level of relevant knowledge, understanding and synthesis. Demonstrates a very good ability to retrieve patient information from relevant sources. Very good standard in the ability to carry out a comprehensive, efficient and appropriate assessment. Always demonstrates very good practice in terms of safety and patient handling. Very good and thorough interpretation and evaluation of assessment findings. Very good ability to formulate a problem list and set realistic goals. Designs a treatment plan with sound justification and can offer a repertoire of appropriate treatment techniques Shows very good level of reflective, analytical and practical skills. High level of clinical reasoning skills.
2.2 **Score 5-5.9**	Good level of relevant knowledge, understanding and synthesis. Demonstrates a good ability to retrieve patient information from relevant sources. Good standard in the ability to carry out a comprehensive, efficient and appropriate assessment. Most of the time demonstrates good practice in terms of safety and patient handling. Good interpretation and evaluation of assessment findings. Good ability to formulate a problem list and set realistic goals. Designs a treatment plan with some justification and can suggest some appropriate treatment techniques. Shows good level of reflective, analytical and practical skills. Good clinical reasoning skills.
3 **Score 4-4.9**	Adequate level of relevant knowledge, understanding and synthesis but shows some shortfalls. Gathers most of necessary information but does not fully use all resources. Performs an adequate assessment but not always comprehensively, efficiently or appropriately. Demonstrates adequate practice in terms of safety and patient handling. Only satisfactory interpretation and evaluation of assessment findings. Some of the time has difficulty in formulating problem lists and setting realistic goals. Designs a treatment plan with some justification but has a limited repertoire of appropriate treatment techniques. Has difficulty in integrating reflective, analytical and practical skills. Adequate clinical reasoning skills.
FAIL Score 0-3.9	Significant gaps in relevant knowledge, understanding and synthesis. Gathers insufficient or irrelevant information. Inadequate standard of assessment. Displays an inadequate standard with regard to safety and patient handling skills and requires maximum guidance. Demonstrates poor skills in the evaluation and interpretation of assessment findings. Inadequate ability to formulate a treatment plan. Inadequate repertoire of treatment techniques. Shows little improvement with guidance. Poor ability to integrate reflective, analytical and practical skills. Unsatisfactory clinical reasoning skills.

Midway Comments

Final Comments

Treatment/Management

LEARNING OUTCOMES By the end of this placement the student will:	BEHAVIOURS LEVEL THREE	Midway Mark /10	Final Mark /10
1. Justify the treatment programme using evidence based practice	a. Able to explain the rationale for choice of treatment to supervisor /patient comprehensively. b. Demonstrates comprehensive links between theory and practice. c. Uses evidence based practice to justify own clinical reasoning during discussions. d. Is prepared to challenge existing custom and practice with in the clinical environment in an informed and constructive manner.		
2. Implement a treatment programme	a. Applies treatment approaches accurately and appropriately. b. Adapts his/her skills to work within a specific clinical context / environment. c. Considers patients lifestyle/ hobbies and integrates this into treatment programme where appropriate d. Carries out clinical/treatment instructions fully.		
3. Carry out treatment tasks within a reasonable time period	a. Manages his/her patient time efficiently prioritising time allocated. b. Sets appropriate priorities in planning treatment c. Manages unexpected free time in a useful, conscientious manner. d. Carries out treatment tasks fully within designated time period.		
4. Educate patient appropriately	a. Teaches aspects of management and care to patients comprehensively and in an effective manner. b. Writes down instructions e.g. HEPs for patients. c. Checks to see that the patient has understood. d. Educates and facilitates patients to manage their own health and well-being.		
5. Evaluate the effects of treatment	a. Measures clinical outcome for own patients using defined subjective and objective markers and reviews same. b. Appropriately assesses patient response to treatment techniques within a treatment session and adjusts/ progresses accordingly. c. Analyses the reasons behind success or failure of treatment interventions.		
6. Modify treatment	a. Has a range of solutions to flexibly adopt treatment techniques according to patient response.		
7. Manage the end of the patient care episode	a. Documents treatment summaries / discharge reports. b. Recognises when discharge criteria have been met independently. c. Aware of onward referral options and organises onward referral where required.		
8. Demonstrate appropriate manual handling skills for self and patient during treatment	a. Uses appropriate manual handling practices for self and patient. b. Positions self optimally when treating patients. c. Selects appropriate pieces of manual handling equipment for individual patients and can justify use of same.		
9. Implement safe practice during treatment	a. Checks contraindications prior to treatment. b. Checks equipment conforms to patients needs. c. Ensures a safe environment during and after treatment. d. Always gives standard warnings to patients about treatments. e. Carries out standard checks on patients after treatment. f. Consults with seniors and other staff before taking new or unfamiliar action in the clinical situation. g. Acts and advises only within scope of practice.		
10. Demonstrate an appreciation of a holistic approach to patient treatment and management	a. Identifies and understands physical, mental, emotional and social factors in a patient's condition. b. Incorporates treatment approaches that aim to maintain and improve health rather than just treating at impairment level.		
TOTAL MARK AWARDED			

Treatment/Management

Numerical band	Criteria
1 **Score 7-10**	Excellent ability to link theory and practice. Demonstrates an excellent standard of evidence based practice. Procedures are consistently applied accurately, efficiently and fluently. Interventions are tailored to meet the patient's specific needs and may be flexible, innovative and/or imaginative. Always manages time efficiently. Consistently excellent in explaining aspects of management and care to the patient. Excellent standard of evaluation of treatment. Procedures are consistently progressed accurately, efficiently and fluently. Consistently effective in managing the end of the patient care episode. Consistently demonstrates accurate and confident handling skills that are sensitive to the patients needs. Excellent awareness of safety issues at all times. Always aware of and adapts a holistic approach to patient management. **The mark 8+ is reserved for a student whose performance on these criteria is outstanding.**
2.1 **Score 6-6.9**	Very good ability to link theory and practice. Demonstrates a very good standard of evidence based practice. Procedures are applied accurately and efficiently with minimal prompting. Interventions are effective and flexible. Interventions are completed within an agreed time frame. Very good at explaining aspects of management and care to the patient. Demonstrates very good ability to carry out ongoing assessment and re-evaluation following some consultation. Procedures are progressed accurately and efficiently with minimal prompting. Manages the end of the patient care episode with minimal prompting. Demonstrates accurate and confident handling skills, preparing patient, self and environment appropriately. Demonstrates safe practice at all times. Aware of and adopts a holistic approach to patient management most of the time.
2.2 **Score 5-5.9**	Good ability to link theory and practice. Demonstrates a good standard of evidence based practice. Applies selected procedures accurately, with some prompting but lacks confidence in the selection of appropriate techniques. Most interventions are effective. Most interventions are completed within a reasonable time period. Good at explaining aspects of management and care to the patient. Demonstrates good ability to carry out ongoing assessment but requires some help in evaluating the treatment programme. Procedures are progressed accurately with prompting. Manages the end of the patient care episode with guidance. Handling skills are generally effective. Prepares patient, self and environment appropriately. Demonstrates safe practice. Aware of and adopts a holistic approach to patient management with guidance.
3 **Score 4-4.9**	Demonstrates some shortfalls in linking theory and practice but acceptable. Limited evidence of evidence based practice, lacking confidence in the justification of selected procedures. Applies procedures adequately but requires guidance in determining the aims of treatment and programme of treatment. Interventions may be poorly sequenced and / or incomplete. Experiences difficulties with time management. Adequate at explaining aspects of management and care to the patient. Requires a substantial amount of guidance with regard to the evaluation of treatment outcome. Difficulty with modifying / progressing treatment. Experiences difficulty in managing the end of the patient care episode and requires repeated assistance. Variable accuracy and some hesitancy demonstrated in the application of handling skills. Adheres to safe practice. With repeated assistance, is aware of and adopts a holistic approach to patient management.
FAIL **Score 0-3.9**	Consistent shortfalls in linking theory and practice. Poor ability to demonstrate evidence based practice and make/ justify clinical decisions. Experiences considerable difficulty in the selection of appropriate techniques and requires maximum guidance an instruction. Procedures tend to be applied inadequately. Inaccurate and/or inappropriate treatments present much of the time. Demonstrates an inadequate standard in terms of treatment skills required for patient care despite guidance. Poor time management skills despite guidance. Fails to explain aspects of management and care to the patient despite guidance. Demonstrates consistently inadequate reassessment of patients despite guidance. Consistently fails to progress or modify treatment despite guidance. Poor ability to manage end of patient care episode despite guidance. Consistently poor handling skills demonstrated. Fails to adhere to principles of safe practice . Despite guidance, remains unaware of and does not adopt a holistic approach to patient management.

Midway Comments

Final Comments

Professionalism

LEARNING OUTCOMES By the end of this placement the student will:	BEHAVIOURS LEVEL THREE	Midway Mark /10	Final Mark /10
1. Demonstrate adequate preparation for placement	a. Shows evidence of pre placement reading and ongoing placement preparation. b. Has identified needs from previous placement and has prepared strategies for self-improvement. c. Has comprehensive knowledge of conditions encountered on placement and integrates this in discussions with educator.		
2. Identify their own learning needs	a. Recognises and takes responsibility for individual learning needs and identify areas for future development. b. Uses a reflective approach to practice.		
3. Set learning outcomes for the placement	a. Sets SMART learning outcomes relevant to the placement location. b. Reviews and modifies learning outcomes as appropriate and initiates discussion with educator regarding progress. c. Documents ongoing evidence of evaluation of goals and /or additional needs.		
4. Demonstrate initiative and willingness to learn	a. Shows active interest through appropriate questioning. b. Seeks out available opportunities for practice/learning. c. Voluntarily participates in CPD opportunities.		
5. Act on and accept guidance and/or feedback	a. Modifies practice according to feedback. b. Demonstrates appropriate and professional response to feedback.		
6. Demonstrate an awareness of their own limitations and seek help where necessary	a. Reports findings to supervising clinician appropriately. b. Can identify strengths and weaknesses in discussion with supervisor and seeks to address these c. Discusses new treatments and conditions with supervisor prior to implementation and justifies possible solutions / strategies.		
7. Prioritise and manage their caseload according to the needs of the department	a. Organises self in response to needs of department b. Demonstrates organisational skills including prioritisation and management of appropriate workload. c. Take responsibility for managing an appropriate caseload.		
8. Recognise the role of the physiotherapist in the multidisciplinary team	a. Recognises and respects the roles of all members of the multidisciplinary team and initiates communication as appropriate. b. Liaises with other members of MDT about shared patients management. c. Is aware of organisational structures in the workplace.		
9. Demonstrate appropriate professional behaviours and attitudes	a. Dresses professionally according to local policy. b. Is punctual for clinical duties and appointments. c. Completes delegated tasks fully and properly. d. Negotiates in a learning or professional context and manages conflict. e. Uses initiative in dealing with difficult situations.		
TOTAL MARK AWARDED			

Please tick √ or X as appropriate

Maintain patient confidentiality	a. Complies with best practice in this area. b. Does not remove patient notes from the placement site. c. Does not have any identifying features on personal notes or reflections on patients.		

Professionalism

Numerical band	Criteria
1 **Score 7-10**	Demonstrates evidence of excellent pre-placement preparation and ongoing preparation during placement. Demonstrates excellent awareness of own weaknesses and learning needs and acts on same. Requires minimal facilitation in setting and achieving placement objectives demonstrating evidence of continuous reflection and review of goals. Demonstrates excellent, independent ability to seek out opportunities for practice and learning. Excellent judgement in recognising personal limitations and always seeks help appropriately. Always modifies practice/behaviour in response to feedback. Maintains excellent patient confidentiality. Excellent management of own workload, demonstrating excellent responsibility for own patients and always keeps educator fully informed. Effective, proactive member of the MDT. Demonstrates excellent professional behaviour and attitudes. . **The mark 8+ is reserved for a student whose performance on these criteria is outstanding.**
2.1 **Score 6-6.9**	Demonstrates evidence of very good pre-placement preparation and ongoing preparation during placement. Demonstrates very good awareness of own weaknesses and learning needs. Requires some facilitation in setting and achieving placement objectives although demonstrates evidence of continuous reflection and review of same. Demonstrates very good ability to seek out opportunities for practice and learning. Very good judgement in recognising personal limitations and seeks help appropriately. Modifies practice/behaviour in response to feedback most of the time. Maintains very good patient confidentiality. Very good management of own workload, demonstrating very good acceptance of responsibility for own patients. Keeps educator informed most of the time. Shows the ability to relate to all members of MDT. Very good professional behaviour and attitudes
2.2 **Score 5-5.9**	Demonstrates evidence of good pre-placement preparation and ongoing preparation during placement, but can occasionally lapse. Demonstrates good awareness of own weaknesses and learning needs although occasionally requires prompting. Requires facilitation in setting and achieving placement objectives and occasional prompting to review and reflect on same. Demonstrates good ability to seek out opportunities for practice and learning but may require prompting/ encouragement. Good judgement in recognising personal limitations but may not always seek help when required. Modifies practice/behaviour in response to feedback most of the time but can need reminding. Maintains good patient confidentiality. Good management of own workload, demonstrating good acceptance of responsibility for own patients. May not always keep the educator informed about all patients all of the time. Can relate to all members of the MDT most of the time. Good professional behaviour and attitudes.
3 **Score 4-4.9**	Demonstrates some evidence of pre-placement preparation and preparation during placement, but inconsistent. Demonstrates some awareness of own weaknesses and learning needs but requires prompting and some facilitation to progress these. Requires considerable facilitation in setting and achieving placement objectives and further facilitation/ prompting to review and reflect on same. Demonstrates acceptable ability to seek out opportunities for practice and learning but requires a lot of prompting and encouragement. Limited but acceptable judgement in recognising personal limitations, does not always seek help when required but remains safe. Modifies practice/behaviour in response to feedback some of the time. Maintains acceptable patient confidentiality. Has difficulty managing workload and occasionally does not report back to educator. Demonstrates acceptance of responsibility for own patients. Can relate to some members of the MDT some of the time. Acceptable professional behaviour and attitudes.
FAIL **Score 0-3.9**	Demonstrates unsatisfactory pre-placement preparation and inadequate ongoing preparation. Unable to identify own weaknesses, learning needs and requires an unacceptable level of assistance in order to complete learning contract. Does not review or reflect on achievement of learning goals despite prompting. Demonstrates unsatisfactory ability to seek out opportunities for practice and learning. Unable to recognise personal limitations and does not seek help appropriately. Does not modify practice/behaviour in response to feedback. Unacceptable patient confidentiality. Reluctant to take on responsibility demonstrating difficulty managing workload and does not report back to educator adequately. Unsatisfactory in relating to MDT. Unacceptable or poor professional behaviour and attitudes.

Midway Comments

Final Comments

Documentation

LEARNING OUTCOMES By the end of the placement the student will:	BEHAVIOURS LEVEL 3	Midway Mark /10	Final Mark /10
1. Document a comprehensive and appropriate database	a. Follows a systematic approach to writing a clear, concise database. b. Includes, understands and can justify all components of a database relevant for the patient. c. Records accurate information from available resources that is relevant to the patient management.		
2. Accurately record the assessment findings showing evidence of clinical reasoning	a. Includes all relevant subjective findings accurately and without omissions. b. Includes all relevant objective findings accurately and without omissions. c. Records information in a logical, factual manner. d. Comprehensively documents appropriate analysis of assessment and treatments demonstrating a clear understanding of the main problems and justification of chosen treatments.		
3. Demonstrates evidence of clinical reasoning in documentation	a. Completes accurate and comprehensive POMR notes. b. Writes full, logical and concise treatment summaries and discharge letters independently. c. Documents appropriate SMART short and long term goals. d. Documents a clearly prioritised problem list		
4. Record clear, concise, legible notes that have appropriate use of abbreviations	a. Writes concise and legible records. b. Uses appropriate terminology/abbreviations.		
TOTAL MARK AWARDED			

Please tick √ or X as appropriate

Adhere to legal requirements and local guidelines regarding documentation/signature	a. Adheres to all national legal requirements. b. Completes and signs all documentation as per local guidelines. c. Ensures notes countersigned by educator d. Follows all local guidelines relating to storage of documentation.		

Documentation

Numerical band	Criteria
1 **Score 7-10**	Excellent documentation skills. Evidence of excellent clinical reasoning in documentation. Consistently demonstrates outstanding ability in record keeping. Always independently documents full comprehensive and accurate POMR. Consistently keeps clear, concise, legible and appropriate records. Always conforms to national and local guidelines on documentation**. The mark 8+ is reserved for a student whose performance on these criteria is outstanding.**
2.1 **Score 6-6.9**	Very good documentation skills. Evidence of very good clinical reasoning in documentation. Keeps succinct and coherent POMR with all details required for most patients. Records are legible and appropriate but occasionally lack detail. Conforms to national and local guidelines on documentation.
2.2 **Score 5-5.9**	Good documentation skills. Evidence of good clinical reasoning in documentation. Correctly documents POMR with most detail required. Records are legible and appropriate but sometimes lack detail. Conforms to national and local guidelines on documentation most of the time.
3 **Score 4-4. 9**	Adequate documentation skills. Evidence of adequate clinical reasoning in documentation. Creates POMR that contains inaccuracies and omits some important details. Needs prompting to correctly document a database and SOAP notes. Written communication sometimes difficult to read and inconcise. Adheres to national or local guidelines on documentation some of the time.
FAIL **Score 0-3.9**	Unsatisfactory/poor documentation skills. Evidence of unsatisfactory clinical reasoning in documentation. Demonstrates persistently unsatisfactory/poor record keeping. Uncertain about merits of database. Fails to document POMR to a satisfactory level despite prompting. Most of the time lacks detail and frequently contains inaccuracies or may be illegible. Consistently not conforming to national or local guidelines on documentation.

Midway Comments

Final Comments

Communication

LEARNING OUTCOME By the end of this placement the student will:	BEHAVIOURS LEVEL THREE	Midway Mark /10	Final Mark /10
1. Communicate effectively with the patient	a. Demonstrates an appropriate level of confidence in approaching patients and establishes a rapport with patients. b. Is aware of and demonstrates appropriate verbal and non-verbal skills and listening skills in interactions with patients. c. Listens skilfully and flexibly and uses information to redirect questions. d. Initiates discussion and encourages patients to express their own opinions and ask questions during assessment and treatment. e. Comprehensively explains the aspects of management and care to patient. f. Respects the rights, dignity and individuality of the patient. g. Asserts self sensitively and adapts in response to unexpected events.		
2. Communicate effectively with the family/carer	a. Demonstrates an appropriate level of confidence in approaching patients and establishes a rapport with family/ carer. b. Is aware of and demonstrates appropriate verbal and non-verbal skills and listening skills in interactions with family/ carer. c. Comprehensively explains the aspects of management and care to family/ carer. d. Respects the rights, dignity and individuality of the family/ carer. e. Asserts self sensitively and adapts in response to unexpected events.		
3. Communicate effectively with physiotherapy colleagues	a. Demonstrates regular and timely communication with clinical educator and physiotherapy colleagues. b. Participates in and/ or initiates appropriate dialogue with clinical educator and professional colleagues about professional issues and patient management.		
4. Communicate effectively with MDT (e.g. ward staff, health professionals, administration staff, personnel, porters)	a. Seeks and feeds back salient clinical information about patients and treatment information from ward staff. b. Participates in and/or initiates appropriate and professional dialogue with the MDT at all levels. c. Establishes appropriate professional relationships and engages in effective discourse with other members of the MDT. d. Communicates inappropriate referral/ cessation of treatment effectively.		
5. Demonstrate appropriate presentation skills	a. Gives talks/ case presentations to colleagues and other professionals confidently and professionally. b. Speaks audibly and clearly. c. Demonstrates comprehensive preparation for presentations and answers questions comprehensively.		
TOTAL MARK AWARDED			

NOTE: If Learning Outcomes **2** and/ or **5** are not encountered by the student during placement, please place **N/A** in the mark box and note this change on the front page. The marks for this section will be readjusted.

Communication

Numerical band	Criteria
1 **Score 7-10**	Excellent communication skills. Always speaks so that the patient/ carer is totally informed. Always aware of verbal and non-verbal communication skills. Always demonstrates respect for the rights, dignity and individuality of the patient. Excellent communicator with physiotherapy staff and expresses self clearly with colleagues and MDT. Excellent presentation skills with clear structure and clear evidence of background preparation **The mark 8+ is reserved for a student whose performance on these criteria is outstanding.**
2.1 **Score 6-6.9**	Very good communication skills. Speaks so that the patient/carer is totally informed. Aware of verbal, non-verbal communication skills. Shows ability to relate to all members of the MDT and respects the rights, dignity and individuality of the patient. Very good communicator with physiotherapy staff and MDT colleagues and supervisor. Very good presentation skills.
2.2 **Score 5-5.9**	Good level of communication skills. Speaks so that the patient/carer is informed most of the time. Demonstrates respect for the rights, dignity and individuality of the patient. Good communicator with physiotherapy staff and MDT colleagues. Could communicate better with supervisor. Needs to work actively at seeking/ delivering information to get the most from the MDT. Good presentation skills.
3 **Score 4-4.9**	Adequate communication skills. Adequate communication with patient/ carer. Inconsistently demonstrates respect for the rights, dignity and individuality of the patient. Needs encouragement to build up relationships within MDT. Does not always use other members of the MDT for information nor inform them of the physiotherapy input. Presentations skills weak, needing more work at preparation and structure.
FAIL **Score 0-3.9**	Unsatisfactory level of communication skills. Unsatisfactory communication with patient/ carer. Little evidence of ability to respect the rights, dignity and individuality of patients. Poor at relating to physiotherapy colleagues and keeping senior fully informed despite verbal instructions. Little evidence of interaction with MDT. Poor presentation skills, demonstrating poor preparation and structure.

Midway comments

Final Comments

PART 2

This section carries no marks. Students' performance must normally be satisfactory on all aspects of Part 2 in order to pass the placement.
Failure of either section in Part 2 will normally override Part 1 of the assessment and cause the student to fail the placement.

Has the student completed their planned and unplanned learning activities and discussed it with their Practice Educator/Tutor? **Yes** □ **No** □

A record of warnings must be completed in situations where there are significant concerns relating to safety or professional behaviour.

SAFETY **Pass** ☐ **Fail** ☐

Fail : Fails to apply knowledge of departmental health & safety policy to specific patient groups/conditions (e.g. infection control, moving and handling). Is unaware of or disregards the contraindications of treatment. 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.

PROFESSIONAL BEHAVIOR **Pass** ☐ **Fail** ☐
Students should follow the Rules of Professional Conduct of the Irish Society of Chartered Physiotherapists.

Fail : 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. Demonstrates persistently poor record keeping. Does not respect patient confidentiality. Poor or inappropriate standards of dress and/or hygiene. May exploit the mutual trust and respect inherent within a therapeutic relationship. 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 clinical educator.

RECORD OF CLINICAL HOURS COMPLETED
It is the students' responsibility to endure these hours are recorded and totalled accurately

Placement Hours	Monday	Tuesday	Wednesday	Thursday	Friday	Weekend	Total
Week 1							
Week 2							
Week 3							
Week 4							
Week 5							
Week 6							
Week 7							

**Lunch breaks do not contribute to the total hours completed.*

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

PRACTICE EDUCATOR/TUTOR NAME _____

PE/PT SIGNATURE _____ **CORU REG** _____

DATE _____