



BSc (Honours) Physiotherapy, Level/Year 4

Practice-based Learning

Assessment of Professional Practice

Practice Placement Assessment Form

Academic Session 2018 -19

Student's Name and Matriculation Number	Name:	
	Matric:	
Placement Number	Elective	
Placement Dates (from and to)		
Practice Educator Name/s Please list all educators		
Practice Educator Email/s		
Practice Site and Address		
Practice Area/Specialism		
Name of Personal Academic Tutor (PAT)		
Email of Personal Academic Tutor (PAT)		
Total hours	Total available hours	Total achieved hours
Final Grade	Pass / Fail	
<i>Note: all grades are provisional until ratified by the Board of Examiners</i>		
Educator signature and date confirming grade and hours	Educators signature:	Date:

QMU contact details: telephone 0131 474 0000 and say the name of the person you wish to speak to when prompted by the automated service.



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Note for all students:

Returning the completed assessment form to Queen Margaret University, Edinburgh.

At the end of the placement, the completed assessment form must be submitted to the School of Health Sciences assessment drop box. Alternatively, the assessment form can be mailed to the University addressed to:

School Office, Queen Margaret University, Queen Margaret University Drive, Musselburgh, East Lothian, EH21 6UU.

All students **must photocopy** the completed assessment form and keep this copy for their own reference and in the event that a document goes missing in the post.

All assessment forms must be submitted to the School Office within **five working days** from the last day of placement.

If the assessment form is posted to the University you must obtain a Proof of Posting document from the Post Office, to evidence the date of posting.

Note: We require all completed assessment forms to be returned in a timely manner to ensure that you are processed at the relevant Board of Examiners. Failure to return the forms may have a negative impact upon ratification of your marks, progression and ultimately graduation.



Checking student identity and attendance monitoring

Identity Check

To enable an identity check we have asked all students to show the relevant practice educator their QMU Matriculation card. This card shows the photograph and name of the student. All practice educators are asked to sign the declaration below, to indicate that the photograph matches the student who has arrived on placement. Please contact us immediately if there is a discrepancy.

Attendance

We require that all students inform both their practice educator and the University should they be unable to attend their placement on any given day. Where the student has an agreed absence from placement, we ask that the practice educator informs the University of this arrangement within a 48 hour period. In the event that a student has an unauthorised/unexpected absence from placement, we ask that the practice educator informs the University of this absence immediately, and certainly within 48 hours.

Contact

Pamela Knox on 0131 474 0000 / pknox@qmu.ac.uk in the first instance. If she is not available, please redial and ask to speak to the School Office. If more convenient, please email HSAAdmin@qmu.ac.uk stating the student's name, the date and the nature of the absence.

Practice educator declaration:

I have seen _____'s QMU matriculation card and can confirm that the photograph on the card matches the student on placement. I also understand the action I should take in the event of any student absence from placement.

Signature: _____

Date: _____

Print Name: _____

Organisation: _____

If there are absences for any reasons please record the reason and hours missed below:

Date/s	Hours missed	Reason (e.g. <i>Sickness / Funeral / Unauthorised leave</i>)



Introduction/Guidance

Section One is completed by the student and should be seen as a positive method of progressing learning throughout the placement as well as from one placement/ other learning experience to another.

Section Two is completed by the Practice Educator (PE). This section contains pass/fail criteria, all of which the student must achieve in order to pass the placement. A fail in any one or more of these criterion will result in a failed placement.

Section Three is completed by the PE and contains criteria for grading the student's performance. Performance in all areas must be deemed at least satisfactory for the student to pass the placement. A fail in any one or more of these criterion will results in a failed placement. There is also a further option for the practice educator to provide written comments on the students overall performance if required.

Section Four is completed by the student and is primarily intended for their own record keeping.

To ensure that the student is aware of his/her standard of performance during the placement, a "mid-placement review" is given approximately halfway through the placement. This should take the form of a discussion between the student and Practice Educator/s (PE). Students should prepare for the mid-placement review by considering their progress and their goals for the second half of the placement. The PE will highlight areas of progress, areas requiring further development in the second half of placement and priorities to be addressed in the second half of placement. The PE will refer to the criteria in Sections 2 and 3 of the tool when providing the student with on-going and formal feedback. Following the mid-placement review the student completes section 1, part (ii) to document the main points discussed, reflect on the feedback received and outline a plan for the rest of the placement. The PE, to ensure the student understands the feedback given, should review this. Both student and PE should sign and date this record.

The student has the opportunity to comment on his/her final assessment in section 1 (iii). Every student will also have the opportunity to comment on their placement experiences within a confidential questionnaire after each placement as part of course monitoring processes.

Reportable incidents

If there has been a reportable incident during the placement please contact QMU with information about this at the earliest opportunity and record this below.

Date of incident	Date reported to QMU	Member of QMU staff contacted



Support for Practice Educators

QMU has a dedicated website for the support of practice educators - <http://www.qmu.ac.uk/pbl/>. Many frequently asked questions are answered here. You may also contact the Personal Academic Tutor (PAT) indicated on the front of this form if you have any questions.

Guidance if the Practice Educator feels that a student is failing a placement

By mid-placement review, at the latest, if the PE is concerned that the student is not making satisfactory progress towards achieving any of the outcomes for the placement, the student needs to be informed that they are currently “failing” the placement. **The word “fail” must be clearly used in this discussion** and the attributes / knowledge gaps where the student is not passing must be clearly indicated to the student. Examples should be given. At this point, if not before, the PE must contact Queen Margaret University by either phoning or emailing Personal Academic Tutor (PAT) named on the front of the assessment form. A discussion will then ensue between the PAT and the PE to decide the most appropriate form of action to ensure support for both student and PE. Sections 1.2 and 2.0 should be used to document the mid-placement review, indicating clearly **areas** causing concern and identify realistic goals for the remainder of the placement.

The following process for dealing with the failing student should be followed:

- Inform the student as soon as possible if their performance is causing concern.
- Inform the PAT as soon as possible if the student's performance is causing concern.
- Ensure the student receives timely, clear, honest, non-judgemental feedback which focuses on the key areas causing concern.

Document all discussions, goals, action plans and reviews on a ‘Cause for concern’ form which can be obtained from either the PAT or downloaded from www.qmu.ac.uk/pbl/. This form should be signed by both student and educator and returned to QMU following the placement.

- Review the student's report of the mid-placement review ensuring that they have clearly documented the areas of concern and the extent on the shortfall of their performance. Both student and PE must sign this.
- Schedule weekly feedback sessions (more frequently if possible) indicating progress on the set goals using the cause for concern form.
- Encourage the student to use reflection as much as possible to allow them to assess their own performance – giving some focus to where things go well as well as those where performance has not been satisfactory.
- Keep in touch with the PAT; contact to feedback on progress and to discuss future plans.
- Contact the PAT for information on grading a fail.
- If at the final assessment the student has not been able to retrieve their performance, ensure that verbal and written comments leave the student with a clear picture of where their performance did not meet expected levels. If felt appropriate the PAT (or alternate) can also be present at this discussion.
- Students should be encouraged to talk with the personal academic tutors at the earliest opportunity.



Section 1 – To be completed by the student.

i) **Pre-placement planning.** Use this space to highlight your personal strengths, areas for development, preferred ways of learning and SMART goals for this placement. Use a range of previous learning to inform your thoughts. **Complete this before you attend placement and discuss with your Practice Educator(s) within the first 2 days of placement.**

Strengths:	Areas for development:
Preferred ways of learning:	SMART goals:
Students signature _____ Date _____	
Practice Educator's/s' Signature/s _____ Date _____	



Section 1 continued – to be completed by student

ii) Mid-way evaluation. Use this space to record the feedback you receive from your Practice Educator midway through the placement. Outline your plan for the rest of the placement. Discuss and agree this with your Practice Educator.

My understanding of mid-way feedback – strengths, areas for improvement	My priorities to be addressed in second half of the placement
Students signature _____ Date _____ Practice Educator's/s' Signature/s _____ Date _____	



Section 1 continued – to be completed by the student

iii) End of placement review. After your final assessment, use this space to reflect on your learning throughout the placement and to identify and review your strengths, areas for development, needs and goals for subsequent placements. You may wish to show this to your practice educator, but this is not essential. You should also complete the Hub based placement feedback form.

Reflection on my learning:	
Review and identification of areas for development:	
Review of SMART goals:	
<input type="checkbox"/> I have completed the Hub based placement feedback form	
Student signature	Date



Section 2 Pass / fail criteria

This section should be completed making use of the Attributes of Performance for Practice Based Learning document Section 2. **Student must achieve a pass in all criteria, by the end of the placement, in order to pass the placement.** Where an educator is concerned at the mid-way stage that the student is not making satisfactory progress, this should be clearly written in the mid-way comments, using a statement such as, 'failing to achieve a satisfactory standard midway'.

A – Achieved, N – Not achieved

Criteria	Midway Comments	Final Comments	A	N
Adhere to key Health Board/organisational policies and regulations and professional and regulatory body standards.				
Apply effective routine communication skills with patients, carers, physiotherapists and other professionals.				
Under guidance conduct effective patient assessments that are appropriate to individuals, groups and settings.				
Under guidance select, design and apply safe, effective, routine patient-centred management programmes for individual patients/groups.				
Demonstrate a caring and compassionate approach towards patients, carers, family.				
Educators signature			Date	



Section 3 – Criteria graded for formative feedback

Grades are provided for formative feedback only, overall the placement is only awarded a pass or fail. This section should be completed making use of the Attributes of Performance for Practice Based Learning document, information on grading Section 3.

For each of the five grading criteria, towards the end of the placement, the practice educator will select and tick the description that matches the student's performance the most.

At minimum a satisfactory performance is required in all criteria in order for the student to pass the placement.

The practice educator should provide specific examples or supporting evidence to support their grading, giving clear feedback to the student to facilitate development

Grading Criterion 1	Excellent/ Exceptional 1	Very good. Above average 2	Sound/Good. Average 3	Satisfactory/ lower than average. 4	Unsatisfactory (Fail) 5
1. Level of engagement with the learning process					
Comments:					



Grading Criterion 2	Excellent/ Exceptional 1	Very good. Above average 2	Sound/Good. Average 3	Satisfactory/ lower than average. 4	Unsatisfactory (Fail) 5
2. Clinical reasoning, assessment, gathering, analysing and synthesising available information to form a holistic, person-centred understanding of patients' problems.					
Comments:					

Grading Criterion 3	Excellent/ Exceptional 1	Very good. Above average 2	Sound/Good. Average 3	Satisfactory/ lower than average. 4	Unsatisfactory (Fail) 5
3. Clinical reasoning, treatment justifying physiotherapy approaches/ interventions					
Comments:					



Grading Criterion 4	Excellent/ Exceptional 1	Very good. Above average 2	Sound/Good. Average 3	Satisfactory/ lower than average. 4	Unsatisfactory (Fail) 5
4. Modifying and adapting physiotherapy approaches in response to on-going evaluation of the needs of individual patients and the availability of resources within the practice setting.					
Comments:					

Grading Criterion 5	Excellent/ Exceptional 1	Very good. Above average 2	Sound/Good. Average 3	Satisfactory/ lower than average. 4	Unsatisfactory (Fail) 5
5. Contribution to the practice area.					
Comments:					

Now add up all the ticks in each category for the five grading criteria and enter into the table on the next page.



Summary of formative feedback and placement outcome

Grading Criteria	Excellent/ Exceptional 1	Very good. Above average 2	Sound/Good. Average 3	Satisfactory/ lower than average. 4	Unsatisfactory (Fail) 5
Total no. of ticks in each criteria					

Placement outcome	Criteria
Pass	All criteria in section 2 are assessed as achieved All criteria in section 3 are assessed as a pass
Fail	One or more criteria in section 2 is assessed as not achieved And / or One of more criteria in section 3 is assessed as a fail

Educators overall comments	
Please comment on areas of strength during the placement and areas for future development	
Practice educator signature:	Date:



Section 4 – Record of techniques, conditions, skills etc.

To be completed by the student

Student name:	Matriculation number:
Practice placement address:	Practice placement dates: From: To: Total hours achieved:
Client/patient group description (delete as appropriate, you may need to select multiple groups): <ul style="list-style-type: none">• Paediatric (under 18)• Adult (18-64)• Older person (65 and over)• Mixed paediatric/adult• Mixed adult/older person• Mixed paediatric / older person• Mixed client group (all ages)	
Placement setting (delete as appropriate): <ul style="list-style-type: none">• Community: health centre / school / resource centre / hospice / care home• Community: hospital / combination (e.g. out-reach teams)• Hospital: inpatients / ward / outpatients / combination of out-in patients	
Placement sector: <ul style="list-style-type: none">• Primary care / community care• Secondary / tertiary care• Private health care sector• Voluntary sector• Ministry of defence• Other:	
Placement experiences (you may need to select multiple areas): <ul style="list-style-type: none">• Cardiovascular / cardiorespiratory• Health promotion• Learning disabilities• Maternity services• Mental health• Neuromusculoskeletal / rheumatology / orthopaedics• Neurology• Oncology• Palliative care• Other:	



Health conditions considered* and/or managed as part of the placement experience:

***some health issues are not the direct focus of physiotherapy management, but are still considered as part of a holistic approach to patient care.**

Clinical reasoning skills demonstrated:

For example:

Analysis, interpretation and synthesis of data (patient data, from records, other health/social care staff etc.) to generate:

- classification / categorisation / clinical diagnosis of health condition and/or
- generation of patient centred problem list and/or
- generation of patient centred action plan

Evaluation of options for physiotherapy 'action' / management integrating information about patient presentation, contextual factors and evidence base

Establishing priorities for current or next physiotherapy-patient/family encounter

Evaluation of outcomes , determination of modifications , design of monitoring systems

Subjective and/or physical examination approaches used:



Approaches and techniques used in the management of patient/clients:
Training events/in-service education events attended by the student:
Education sessions led by or supported by the student whilst on placement:
Participation in quality assurance or improvement activities:
Management skills demonstrated, for example: <ul style="list-style-type: none">- prioritisation of cases, management of work load/tasks- management of time, effort, resources, data/information- constant and on-going risk assessment related to physiotherapy management, and/or management of adverse events- delegation of tasks
Administration tasks undertaken:

Practice educator/s details	Name:
	Email address:
	Signature:



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Section 5: Attributes of performance

Guidance

This section should be used in conjunction with the linked practice placement assessment form. The following tables describe the student behaviours that may be observed in each of the categories. These descriptions are intended to assist the educators in evaluating the students' performance.

Descriptors of behaviour in both pass / fail categories and the grading categories are included. These may be used both for assessment purposes and for feedback discussions with the student.



Attributes of performance: linked to Section 2 of the practice placement assessment form

The following tables describe the student behaviours that may be observed in each of the categories. These descriptions are intended to assist the educators in evaluating the students' performance.

Section 2: Pass / fail criteria and related behaviours

Description of criteria	In order to pass this criteria the student must demonstrate the following behaviours	Demonstration of the following behaviours associated with the criteria will result in a fail for the placement
<p>Adhere to key Health Board/ Organisational policies and regulations and professional and regulatory body standards; including, where appropriate, those concerned with health and safety, patient care, child and adult protection, moving and handling, confidentiality, infection control, hand washing, record keeping IT access, professional conduct and appearance, HCPC Standards of conduct, performance and ethics (HPC, 2008)</p>	<p>A pass will include awareness, where appropriate, of policies and regulations concerned with health and safety, patient care, child and adult protection, moving and handling, confidentiality, infection control, hand washing, record keeping IT access, professional conduct and appearance, the HCPC Standards of conduct, performance and ethics (HPC, 2008). A passing student should require minimal, or no prompting to adhere to the above policies and regulations</p> <p>A passing student should also demonstrate awareness from an early point in the placement, issues relating to moving and handling, confidentiality, infection control, hand washing, record keeping, professional conduct and appearance. Minimal or no prompting should be required and a consistent demonstration of awareness and ability to adhere to professional and regulatory body standards relating to these aspects.</p>	<p>A student will fail if they are unable to consistently demonstrate ability to adhere to key Health Board/ Organisational policies and regulations which may include with health and safety, patient care, child and adult protection, record keeping and IT access following introduction at a relevant induction.</p> <p>or</p> <p>they fail to demonstrate (and continue to fail to demonstrate) awareness from an early point in the placement, issues relating to moving and handling, confidentiality, infection control, hand washing, record keeping, professional conduct and appearance. A fail will occur where despite minimal prompting, a student does not adhere to professional and regulatory body standards relating to these aspects.</p>



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Description of criteria	In order to pass this criteria the student must demonstrate the following behaviours	Demonstration of the following behaviours associated with the criteria will result in a fail for the placement
Apply effective communication skills with patients, carers, physiotherapists and other professionals	Demonstrates effective communication in routine situations. Recognises complex situations but may require guidance to address complex issues. Can select from a range of communication styles in order to be effective. Seeks help appropriately.	Limited ability to communicate appropriately, may not be aware of inappropriateness of communications. Communications inadequate and ineffective.
Independently conduct effective patient assessments that are appropriate to individuals, groups and settings.	Is consistently able to recognise, gather and appraise relevant clinical and research data. Is able to select appropriately from a range of assessment tools although may need some support to recognise complex situations and to integrate findings.	Requires frequent support to gather or recognise the range of clinical and research data relevant to the patient. Rarely integrates the patient's physical, psychological, social and cultural needs.
Independently select, design and apply safe, effective, patient-centred management programmes for individual patients/groups	Is consistently able to construct an appropriate, effective management programme in routine cases. The programme is feasible within the resources and is appropriately patient-centred. Is aware of the need to support rationale with evidence but may need support. Is able to undertake an appropriate risk assessment and applies relevant policies and procedures to ensure the safety of both the patient and clinician.	Is often unable to construct an appropriate plan for routine cases. Does not consider the needs of the patient nor the resources available. Is not able to recognise safety issues or apply relevant health and safety procedures.
Demonstrate a caring and compassionate approach towards patients, carers, family	Consistently takes into account the patient's emotional status. Adapts approach to the patient's circumstances. Demonstrates empathy.	May be technically able but fails to demonstrate compassion and empathy.



Section 3: Grading criteria linked to Section 3 of the practice placement assessment form

Grading Criterion 1	Excellent/ Exceptional performance. 1	Very good. Above average performance. 2	Sound/Good. Average student performance. 3	Satisfactory. Performance lower than average. 4	Unsatisfactory performance. (Fail) 5
Level of engagement with learning process.	<p>Evidence of thorough preparation throughout.</p> <p>Independently sought and arranged learning opportunities to gain wider understanding of practice. Demonstrated high level of awareness of own limitations and when to seek assistance/advice from others. Independently sought feedback at appropriate times throughout.</p> <p>Responded appropriately to constructive feedback throughout.</p> <p>Made optimal use of time in the PBL environment.</p>	<p>Well prepared throughout.</p> <p>Required minimal prompting to arrange learning opportunities to gain wider understanding of practice. Demonstrated good awareness of own limitations.</p> <p>Sought appropriate levels of assistance, advice and feedback most of the time.</p> <p>Responded appropriately to constructive feedback most of the time.</p> <p>Made good use of time in the PBL environment.</p>	<p>Mostly well prepared.</p> <p>Occasionally required prompting and assistance to seek additional learning opportunities. Mostly aware of own limitations.</p> <p>Sought assistance, advice and feedback but at times, this may have been too much or too little of the time.</p> <p>Mostly responded well to constructive feedback but at times required repeated feedback. Needed occasional prompting to make the best use of time available in the PBL setting.</p>	<p>Not well prepared on arrival.</p> <p>Required consistent prompting to carry out back-ground reading and other forms of preparation for practice. Mostly required prompting, direction and assistance to organise additional learning opportunities and to recognise own limitations. Required on-going feedback to reach a satisfactory standard of performance.</p> <p>Feedback mostly prompted by practice educator.</p>	<p>Not well prepared on arrival.</p> <p>Did not demonstrate satisfactory levels of back-ground reading and other forms of preparation for practice, despite constant prompting.</p> <p>Did not organise or respond positively to organised additional learning opportunities despite prompting, direction and assistance. Required constant feedback. Feedback mostly prompted by practice educator.</p> <p>Did not make the best use of time.</p>



				Needed consistent prompting to make the best use of time.	
Grading Criterion 2	Excellent/ Exceptional performance.	Very good. Above average performance.	Sound/Good. Average student performance.	Satisfactory. Performance lower than average.	Unsatisfactory performance. (Fail)
	1	2	3	4	5
Clinical Reasoning Assessment Gathering, analysing and synthesising available information to form a holistic, person- centred understanding of patients' problems.	Consistently gathered a comprehensive range of patient-appropriate information – including assessment data, information from patients' carers and relatives, information from colleagues, notes/records/test results, relevant research and theory. Independently analysed and synthesised information to present a thorough, person-centred awareness of	Gathered a good range of patient-appropriate information -including assessment data, information from patients' carers and relatives, information from colleagues, notes/records/test results, relevant research and theory most of the time. Analysed and synthesised information to present a good, person-centred awareness of patients' problems,	Gathered a satisfactory range of patient-appropriate information – including assessment data, information from patients' carers and relatives, information from colleagues, notes/records/test results, relevant research and theory most of the time. May have required prompting at times to fill occasional gaps in relevant patient data. Presented a satisfactory awareness of	Required prompting and assistance throughout the placement to gather patient-appropriate information in order to gain a satisfactory picture of patients' problems, needs and goals.	Despite constant prompting throughout the placement, did not consistently gather sufficient data to form a sufficiently thorough picture of patients' problems, needs and goals.



	patients' problems, needs and goals throughout the placement.	needs and goals most of the time.	patients' problems, needs and goals most of the time.		
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Grading Criterion 3	Excellent/ Exceptional performance. 1	Very good. Above average performance. 2	Sound/Good. Average student performance. 3	Satisfactory. Performance lower than average. 4	Unsatisfactory performance. (Fail) 5
Clinical reasoning Treatment Justifying physiotherapy approaches/ interventions	Consistently drew on a comprehensive range of sources of evidence to justify physiotherapy approaches. Initiated very well-informed, in-depth discussions around the range of possible treatment approaches and their suitability for individual patients.	Drew on a good range of sources of evidence to justify physiotherapy approaches most of the time. Willing to discuss the range of possible treatment approaches and their suitability for individual patients in an in-depth, mostly well-informed manner.	Drew on sources of evidence to justify physiotherapy approaches but range may have been occasionally limited and may have required occasional prompting. Attempted to discuss the range of possible treatment approaches and their suitability for individual patients but discussions may have occasionally lacked depth and background.	Required considerable prompting and guidance to consider the evidence base to inform approaches. Required encouragement to discuss possible treatment approaches and their suitability for individual patients. Required prompting and encouragement to increase the depth of discussions.	Despite considerable prompting and guidance, mostly did not consider the evidence base to inform approaches. Mostly unwilling to discuss possible treatment approaches and their suitability for individual patients. On the whole, unsatisfactory depth of discussion.



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Grading Criterion 4	Excellent/ Exceptional performance. 1	Very good. Above average performance. 2	Sound/Good. Average student performance. 3	Satisfactory. Performance lower than average. 4	Unsatisfactory performance. (Fail) 5
Modifying and adapting physiotherapy approaches in response to on-going evaluation of the needs of individual patients and the availability of resources within the practice setting.	Independently evaluated physiotherapy approaches. Independently suggested appropriate modifications and adaptations to enhance effectiveness of practice throughout the placement. Highly appropriate and useful creative suggestions presented and employed. Independently re-evaluated suggestions.	Required minimal prompting to evaluate, modify and adapt practice to enhance effectiveness. Good suggestions presented and employed, some of which were creative. Required minimal prompting to re-evaluate suggestions.	Required moderate prompting to evaluate, modify and adapt practice to enhance effectiveness. Some good suggestions presented. Required moderate prompting to re-evaluate suggestions.	Required constant prompting to satisfactorily evaluate, modify and adapt practice to enhance effectiveness. Demonstrated a tendency to imitate and replicate treatment ideas of others in an uncritical manner before considering the requirements of individual situations. Required maximal prompting to re-evaluate treatments.	Despite constant prompting, on the whole, did not satisfactorily evaluate, modify and adapt practice to enhance effectiveness. Mostly imitated and replicated treatment ideas of others in an uncritical manner. Despite maximal prompting, mostly did not re-evaluate treatments to a satisfactory level.



Grading Criterion 5	Excellent/ Exceptional performance. 1	Very good. Above average performance. 2	Sound/Good. Average student performance. 3	Satisfactory. Performance lower than average. 4	Unsatisfactory performance. (Fail) 5
Contribution to the practice area.	<p>Worked very effectively within the team throughout the placement. Very highly valued by the team/colleagues and patients. Within appropriate limitations, consistently accepted high levels of responsibility for actions/ smooth running of the workplace.</p> <p><i>If relevant to the practice setting/context:</i> Independently contributed an excellent new resource or idea to enhance practice in the future.</p>	<p>Required minimal support and guidance to work effectively within the team.</p> <p>Highly valued by the team/colleagues and patients. Within appropriate limitations, consistently accepted appropriate levels of responsibility for actions/ smooth running of the workplace.</p> <p><i>If relevant to the practice setting/context:</i> Required minimal prompting to contribute a good new resource or idea to enhance practice in the future.</p>	<p>Required moderate support and guidance to work effectively within the team. Valued by the team/colleagues and patients. Within appropriate limitations, accepted appropriate levels of responsibility for actions/ smooth running of the workplace most of the time.</p> <p><i>If relevant to the practice setting/context:</i> Required moderate prompting and some assistance to contribute a useful new resource or idea to enhance practice in the future.</p>	<p>Required maximal support and guidance to work effectively within the team. Valued by the team/colleagues and patients but tendency to take from the team rather than offer contributions. Required constant prompting to accept appropriate levels of responsibility for actions/ smooth running of the workplace.</p> <p><i>If relevant to the practice setting/context:</i> Needed maximal assistance to contribute a useful resource or idea to enhance practice.</p>	<p>Despite maximal support and guidance, did not work effectively within the team. Undesirable number of unsatisfactory reports from the team/colleagues or patients.</p> <p>Despite constant prompting did not accept appropriate levels of responsibility for actions/ smooth running of the workplace.</p> <p><i>If relevant to the practice setting/context:</i> Did not offer or contribute a useful resource or idea to enhance practice.</p>