****

**School of Health Sciences**

**Division of Occupational Therapy & Arts Therapies**

**Master of Occupational Therapy**

**Learner Evaluation of Practice based**

**Learning Form**

|  |  |
| --- | --- |
| **Learner details** | |
| Name:  Signature:  Date: | |
| Year of programme:**Y11 2 3 4**  *(circle as appropriate)* |  |
| Name of Practice based Learning service:  Address of Practice based Learning (*full address include post code*)  Tel: | |
| **Signature /s of practice educator /s** | |
| Name:  E-mail:  Signature:  Date: | Name:  E-mail:  Signature:  Date: |
| Name:  E-mail:  Signature:  Date: | Name:  E-mail:  Signature:  Date: |
| **Date of Practice based Learning** | |
| Dates of Practice based Learning: from\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**Guidance for learners**

The Learner Evaluation of Practice based Learning Form is designed to help you provide feedback to your practice educator/s regarding aspects of your experience. This form is based on the NES Quality Standards for Practice Placements (2008) (section 1).

Statements highlighting crucial aspects of Practice based Learning follow. Use the tick boxes to indicate your responses to these statements. Please use the additional feedback section to provide more specific comments. Some prompts have been provided to help your recall of relevant information. It is not necessary to respond to all of the prompts given. You may like to highlight experiences you found particularly helpful as well as offering specific suggestions for change. Your feedback will assist your practice educators in providing meaningful and relevant learning opportunities for future learners.

It is expected that you will discuss the completed form in person with your practice educator(s) after your placement grade has been confirmed and **before** you leave the placement site. You are required to submit a fully signed copy of the Learner Evaluation of Practice based Learning Form to the drop box in the Hub within 5 working days of completion of practice-based learning.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1. The pre-practice based learning information was helpful.** | | **Strongly agree** | | **Agree** | **Undecided** | **Disagree** | **Strongly disagree** |
|  | |  |  |  |  |
| **Additional feedback**: e.g. clarity of information; most useful information; information that would have been helpful… | | | | | | | |
| **2. The induction/orientation was helpful, including an opportunity to discuss your learning needs.** | **Strongly agree** | | **Agree** | | **Undecided** | **Disagree** | **Strongly disagree** |
|  | |  | |  |  |  |
| **Additional feedback**: e.g. most useful information/experiences; balance of reading/observing/participating; suggested experiences/information that would have been helpful… | | | | | | | |
| **3. I felt a welcome member of the workgroup.** | **Strongly agree** | | **Agree** | | **Undecided** | **Disagree** | **Strongly disagree** |
|  | |  | |  |  |  |
| **Additional feedback**: e.g. nature of interactions – respectful communications/contributions valued; responsiveness of staff; adequacy of learner facilities; suggestions for change… | | | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **4. I had a named PE or PEs whose expectations throughout practice based learning were clear and reasonable.** | **Strongly agree** | **Agree** | **Undecided** | **Disagree** | **Strongly disagree** |
|  |  |  |  |  |
| **Additional feedback**: e.g. expectations documented/discussed; level and variability of workload responsibilities; balance of supervision/autonomy; level of flexibility in response to feedback; suggestions for change… | | | | | |
| **5. My practice educator/s facilitated my learning by providing a supportive environment and a range of learning opportunities.** | **Strongly agree** | **Agree** | **Undecided** | **Disagree** | **Strongly disagree** |
|  |  |  |  |  |
| **Additional feedback**: e.g. adequacy of time available – formal supervision/general availability; efficacy of model of supervision (e.g. long-arm supervision or a team approach to supervision); questions welcomed; openness to learner feedback; flexibility in response to individual learning needs; inclusion of university staff as necessary; suggestions for change…. | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **6. My PE(s) offered me constructive feedback.** | **Strongly agree** | **Agree** | **Undecided** | **Disagree** | **Strongly disagree** |
|  |  |  |  |  |
| **Additional feedback**: e.g. quantity/clarity/timeliness of feedback; balance between positive feedback and discussions re concerns; suggestions for change… | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **7. I was encouraged to evaluate my performance and develop strategies for improvement.** | **Strongly agree** | **Agree** | **Undecided** | **Disagree** | **Strongly disagree** |
|  |  |  |  |  |
| **Additional feedback**: e.g. reflection encouraged; collaborative approach to formulating learning strategies; efficacy of formal learning strategies used (e.g. learning agreement/diaries); suggestions for change…. | | | | | |

|  |
| --- |
| If not already stated what experiences/information /resources do you think future learners would particularly benefit from? |