

Level 1 (3rd Year) Placement Information Booklet

2025/2026

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This is an abbreviated version of the Practice Education Handbook and has been created to provide the ‘core information’ for placement. The full handbook can be found at http://www.NUI Galwayalway.ie/medicine-nursing-and-health-sciences/health-sciences/disciplines/occupational-therapy/practiceeducation/

**B.Sc. (Hons.) Occupational Therapy  
School of Health Sciences  
College of Medicine, Nursing & Health Sciences  
University of Galway**

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NUI Galway**

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# Introduction

This booklet has been designed to provide all involved in practice education with the core information that you need when educating a University of Galway third year student in practice.

In addition to the contents of this booklet, please find the full Practice Education Handbook for more detailed information on student placements. This can be found at [Practice Education – University of Galway](https://www.nuigalway.ie/medicine-nursing-and-health-sciences/health-sciences/disciplines/occupational-therapy/practiceeducation/). All forms are also available on the University of Galway Practice Education website in electronic versions. Those not included as hard copies in this booklet are listed below. These include:

* Calendar of placements
* Site Profile
* Student Orientation Checklist
* Learning Contract Template
* Supervision Forms
* Concerns Exist Form
* Student Record of Study Time
* Electronic version of competency assessment forms
* Practice Educator Feedback Forms (sent via survey monkey)
* Student Feedback Forms
* Consent to retain a copy of the practice education assessment form

Essential reading

OTRB CORU Standards of Proficiency [otrb-standards-of-proficiency-for-occupational-therapists.pdf (coru.ie)](https://coru.ie/files-education/otrb-standards-of-proficiency-for-occupational-therapists.pdf)

There is also a short power point presentation on the OTRB CORU Standards of Proficiency on the University of Galway website [Practice Education – University of Galway](https://www.nuigalway.ie/medicine-nursing-and-health-sciences/health-sciences/disciplines/occupational-therapy/practiceeducation/).

Other relevant resources to assist in preparation for taking a student

1. Guidelines for Good Practice in Practice Education (Therapy Project Office, 2008) [Guidelines-for-good-practice-in-practice-education.pdf (tcd.ie)](https://www.tcd.ie/medicine/physiotherapy/assets/pdf/Guidelines-for-good-practice-in-practice-education.pdf)
2. Practice Educator Competencies (Therapy Project Office, 2008) [untitled (tcd.ie)](https://www.tcd.ie/medicine/physiotherapy/assets/pdf/PE-Competencies.pdf)
3. Any feedback on the resources provided or additional resources required to facilitate your role as Practice Educator is welcome.

With many thanks for taking a University of Galway Student on placement,

# Contact Information

**Should you require advice or assistance prior to, during or after a student is on placement it is advisable that you contact one of the following:**

1. The practice Tutor (if there is a tutor in your department) or Regional Placement Facilitator (if there is one in your region for University of Galway).
2. The Practice Education Coordinator at the University. It is better to email in the first instance and you will be contacted back immediately. Do not leave voice mail messages as this may delay communications. E: [mmulry@universityofgalway.ie](mailto:mmulry@universityofgalway.ie) and 091 495295
3. If neither is available, please contact another member of the University of Galway staff who will be more than happy to deal with your query or concern. E: [otpracticeeduation@universityofgalway.ie](mailto:otpracticeeduation@universityofgalway.ie) or [janebowman@universityofgalway.ie](mailto:janebowman@universityofgalway.ie)

# Process if a concern regarding a student

Identify concerns regarding the behaviour, performance or competency development of a student. Share concerns with student. Provide clear expectations of performance.

Discuss your concerns with a practice tutor or regional placement facilitator if available, if not contact the Practice Education Co-ordinator for support and advice/strategies to manage concerns. Do this as soon as concerns are identified as it is important to address any issues as early as possible.

Concerns continue, persist or the student is not progressing complete a concern identified Form and send to the practice education coordinator. This form is on the practice education website. List concerns and give examples of them. Share the form with your student.

Practice Education Co-ordinator will contact.  
Discussions will be completed with practice educator, student and then together.  
If there are medical issues or compassionate issues impacting on the student performance, then withdrawal from placement may be considered.  
A SMART remediation plan will be completed and agreed by all parties.

Agreed support systems will be put in place to review the remediation plan. This will be developed on an individual basis and can include further meetings with the practice education co-ordinator or telephone contacts with all parties.

# Outline of Programme Modules for Years 1- 4

|  |  |  |
| --- | --- | --- |
| **Year** | **Semester 1 Modules** | **Semester 2 Modules** |
| **1** | Human Body Function Psychology 1 Principles for Practice Mental Health 1 & 2 | Human Anatomy Psychology 2 Enabling Occupation – Physical Disability Fundamentals of Occupational Therapy 1 Group work & Professional Skills |
| **2** | Communication for Practice  Neuroanatomy Neurophysiology Health Psychology Enabling Occupation – Paediatrics Social Policy  Fundamentals of Occupational Therapy 2 | **Practice Education 1**  Case Study 1  Enabling Occupation – Intellectual Disability  Occupational Science |
| **3** | Evidence Based Practice Standardised Testing Enabling Occupation – Older Adults Cognitive Neuropsychology Community Engagement | **Practice Education 2**  Case Study 2  Research Methods Enabling Occupation – Community Practice Community Engagement Neurology |
| **4** | **Practice Education 3** (Level 2, Block 1) Case Study 3 **Practice Education 4** (Level 2, Block 2)) Case Study 4 | Preparation for Practice Management and Leadership Research Project |

# General Information about Level One Placement

Timetabling of Practice Education

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Aug** | **Sept** | **Oct** | **Nov** | **Dec** | **Jan** | **Feb** | **Mar** | | **Apr** | **May** | **Jun** | **Jul** |
| **Y1** |  |  |  |  |  |  |  |  | |  | **1 Wk** |  |  |
| **Y2** |  |  |  |  |  | **Placement Level 1: 1X8 weeks** | | |  |  |  |  |  |
| **Y3** |  |  |  |  |  |  |  |  | **Placement Level 1: 1X8 weeks** | |  |  |  |
| **Y4** | **Placement Level 2**  **2 x 8 weeks** | | | | |  |  |  | |  |  |  |  |

# Placement learning outcomes: 3rd year: OY3108 Practice Education 2

**Introduction to Module**

This is the second practice education module and provides the opportunity for students to participate in the delivery of occupational therapy services in a work placement. Students will build on their previous learning in practice education placements and at the end of the placement evidence their progression towards the attainment of practice competencies. Practice competencies are defined by (i) the CORU Occupational Therapists Registration Board Standards of Proficiency (2017), (ii) the Association of Occupational Therapists of Ireland (AOTI) Minimum Standards for Practice Education in Ireland (2010), and (iii) the World Federation of Occupational Therapists Minimum Standards for the Education of Occupational Therapists (2016). Students will be supervised by a named qualified CORU registered occupational therapist/s. The student’s progress will be monitored by telephone, videoconference and/or in a placement visit by the practice education coordinator.

**Module Prerequisites**

Students must complete all placement pre-requisites that are assessment items in the preparation for placement module.

**Student’s fitness to practice: Protocol 30**

The main purpose of this policy is to ensure protection of public interest, client safety and placement providers. Students who are enrolled in professionally accredited programmes with clinical/placement element are expected to adhere to the professional code of conduct of the registering body and other applicable codes deemed appropriate to the discipline. They are also expected to be healthy of body and mind so as to be able to practice competently in their profession. Students will be asked to declare they are fit for practice via the SHS COVID-19 module. Should this change post this declaration they should inform the practice education coordinator immediately.

**Learning Outcomes**

**Learning outcome 1:** To demonstrate their application of the complete occupational therapy process and of adherence to the scope of practice in the practice education context to an intermediate standard under the guidance and supervision from a qualified CORU registered occupational therapist.

**Learning outcome 2:** To demonstrate the application of theory, evidence-based practice and clinical reasoning to their practice to an intermediate standard under the guidance and supervision from a qualified CORU registered occupational therapist (See section Occupational Competencies and Occupational Process competencies of the University of Galway Practice Education Competency Form).

**Learning outcome 3:** To demonstrate adherence to professional standards, including the ethical, legal, and work based policies when working within a work placement to practice standard under the guidance and supervision from a qualified CORU registered occupational therapist.

**Learning outcome 4:** To demonstrate being a self-directed learner who maximises opportunities to seek information to maximise the quality of service to the service users in this practice context to an intermediate standard (See Professional Development Section of the University of Galway Practice Education Competency Form).

**Learning outcome 5:** To demonstrate progression towards the attainment of practice competence in relation to skills, knowledge, attitude and behaviour in accordance with the standards of the CORU standards of proficiency. (See all sections of the University of Galway Practice Education Competency Form).

# OTRB CORU Standards of Proficiency

The Occupational Therapy Registration Board of CORU have published the Standards of Proficiency for Occupational Therapists (2017). This document delineates the threshold standards that set by the registration board for entry to the registry. The standards of proficiency provide detail on the knowledge and skills that all graduates must possess at entry to the register.

There are five domains:

1. Professional autonomy and accountability

2. Communication, collaborative practice and teamworking

3. Safety and Quality

4.Professional Development

5. Professional knowledge and skills

All placements should show student progression towards the attainment of these standards and final placement should evidence attainment of these standards. All details on the OTRB CORU standards of proficiency can be found on the Practice Education Website. Resources include 1) The OTRB CORU Standards of Proficiency, 2) The OTRB Standards of Proficiency mapped to the University of Galway practice education competency assessment form and 3) A voice over power point on the OTRB CORU Standards of Proficiency. [Practice Education – University of Galway](https://www.nuigalway.ie/medicine-nursing-and-health-sciences/health-sciences/disciplines/occupational-therapy/practiceeducation/).

# Agreement to fulfil the role of practice educator

When taking a student, a practice educator is asked to complete an online agreement form. This form included the following:

**In agreeing to take a student/s on placement, I confirm that the following requirements are met:**

1. I have more than 1 years’ work experience as an occupational therapist (CORU requirement).
2. If this placement is shared with another educator, agreements are in place regarding how the split of work tasks will be shared and these will be communicated to the student during orientation.
3. If you are taking annual leave, supervision cover for the student has been organised for your absence.

**Agreement to fulfil the role of practice educator for a 2nd/ 3rd / 4th year placement**

1. Provide a site profile to the student with suitable pre-reading and preparation information that details the service and amended service requirements due to management of infection control of COVID-19.
2. Ensure that unsupervised presence of students in clinical areas (for example unaccompanied students seeing patients to practice hands on examination skills) is avoided or is very carefully controlled.
3. Ensure that student(s) and teacher(s)/educator(s) presence in clinical areas is limited to events/time that have a specific focus on student education so that students are not present in clinical areas without a specific purpose.
4. Ensure that no more than four people present for bedside teaching and similar situations, there should be no more than four people present at one time (including students, teachers/educators). In procedure/operation rooms there should be no more than one student at a time.
5. Ensure that students and teachers/educators will be “bare below the elbows/bare above the wrist” when in clinical areas.
6. Read the CORU standards of proficiency prior to the placement.
7. Discuss, agree and provide any accommodations for student disabilities as detailed in the reasonable adjustment plan provided by the university.
8. Read the Booklet on the requirements of the placement.
9. Provide orientation for the student to the department, team and service.
10. Provide an induction on all work practices and expectations with regard to of COVID-19.
11. Provide a safe working environment to the student and provide them with the appropriate policies and procedures relevant to your working environment.
12. Negotiate and review a learning contract with the student that is operational throughout the placement.
13. Provide regular feedback to the student on their progression towards the attainment of competencies and the CORU standards of proficiency.
14. Provide weekly supervision that is documented and signed by both student and educator.
15. Facilitate the student in the provision of 3 hours study leave per week.
16. Educate the student in the practice context, maintaining standards as set by AOTI, CORU and your employer.
17. Ensure that client/patient consent is obtained for student participation in their intervention/treatment.
18. Countersign any contributions the student makes to the service user’s health care record, completion of reports, referrals or session plans.
19. Enable the student to participate in interprofessional or multi-disciplinary communications or working.
20. Provide access to resources appropriate to student learning in this practice context.
21. Provide opportunities for student to practice within their abilities in the practice context.
22. Encourage the student to self-evaluate and identify their strengths and issues to be worked on.
23. Complete and sign a half-way report.
24. Contact the University Practice Education Coordinator in a timely manner if concerns are identified about any aspect of the student performance.
25. Complete a halfway and final report with the student, sign it and return the documentation to the University and sign off on students’ hours on placement (includes three hours study, excludes bank holidays, lunch breaks or student remaining at work completing non-essential work tasks).
26. Complete and return a feedback form to the University.

# Practice educators Courses and Preparation to take a student

Practice education courses are provided in June and December of each year. These one-day free interdisciplinary course covers the following topics:

1. Managing the underperforming student/fitness to practice
2. Students with disability
3. Providing feedback
4. Teaching and learning approaches in Practice Education
5. Learning contract and setting learning objectives

# Roles and Responsibilities of Practice Educator, Student, and Practice Education Co-ordinator/ Team

|  |  |  |  |
| --- | --- | --- | --- |
|  | Educator | Student | Practice Education Co-ordinator (PEC)/Team |
| **Before Placement** | Complete a site profile. Read the Practice Education Booklet. Prepare an orientation file for the student. Familiarise self with the assessment form and student assignments.  Send the site profile and details to the student on contact. Sign the University of Galway Checklist/agreement form and return to the University. Review accommodations identified in reasonable adjustment plan if one provided. | Complete Placement passport, C.V. and letter of introduction, and send to the Practice Educator by the due date. Ensure all immunisations are up to date.  Read the Practice Education Booklet  Read the CORU code of professional conduct.  Read the site profile and complete pre-readings for the placement.  Develop a draft learning contract. | PEC: Prepare the student for Practice Education. PEC: Provide information to the Practice Educator on the student, and expectations of placement (i.e. relevant placement information booklet). PEC: Provide information on Garda Clearance, insurance, and assessment. PEC: Complete and forward reasonable adjustment plan. PEC: Have a signed University of Galway agreement form in place. Practice tutors (PT)and Regional Placement Facilitator (RPF): Assist educator to prepare |
| **First Week of Placement** | Discuss and apply reasonable adjustment plan if one provided by the PEC. Orient the student to the setting. Negotiate and agree a learning contract. Establish regular supervision using one of the University of Galway supervision forms and set weekly learning objectives. | Attend placement in appropriate dress.  Negotiate and agree a learning contract.  Maximize all learning opportunities.  Ask questions | PT/RPF: Provide induction and Intro to the site and supports available in the area. PEC: Maintain Blackboard contact with all students.  PEC: Visit if needed. Maintain contact with student and practice educator |
| **Half-way** | Complete the halfway report. Contact the University if student not progressing.  Review and maintain the learning contract. | Complete the half-way report. Review and maintain the learning contract.  Listen to feedback and continue to maximize opportunities for competency development. | PT/RPF: Provide tutorials and support student and educator. PEC: Provide support via phone, email, skype or a site visit to both student and educator. |
| **End of Placement** | Complete final report. Meet with student and discuss report contents. (If keeping a copy of the competency assessment form, obtain consent (see template in Appendix) | Complete the final report. Self- evaluate if asked prior to students final marking. Thank educator for taking you as a student.4th year students can ask their educator to keep a copy of their assessment form for the purpose of providing a reference; Original copies of supervision forms are to be held in the student portfolio. | Collate final reports at the University.  Review feedback on students |
| **After Placement** | Complete feedback form and return to University of Galway. | Complete feedback form and return to University of Galway. Attend compulsory debriefing. | Collate feedback form and return to Practice Educators. Review feedback for quality improvements & implement change where possible. |

# Educational expectations of Students at Each Level of Placement

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Level** | **Observation Placement** | **Year 2 Level 1 Placement** | **Year 3**  **Level 1 Placement** | **Year 4 Level 2 Placement(s)** |
| **Purpose of Placement** | Introduction. | Practice | Practice and developing competency | Practice and Competency |
| **Competency Level** | Novice | Emerging | Consolidating | Competent |
| **Supervision** | Educator is a teacher: Participate in explanatory observations. Ask basic questions | Educator: direct active supervision of student. | Facilitator: Collaborative approach to supervision of student. | Mentor: Consultative approach to supervision of student. |
| **Application of theory** | Educator Introduces basics of theory application | Student discusses how theory is applied using one OT model/frames of references/treatment approaches. | Student can evaluate different models and defend the choice of a chosen model, apply it in practice with frames of reference and treatment approaches | Student can defend and critically analyse the selection of models of practice applied in practice, as well as identifying the frames of reference and treatment approaches using best practice/evidence/ expert opinion or other relevant resources |
| **Students Autonomy** | None. | Guided participation | Developing autonomy in routine tasks | Autonomous on allocated tasks, seeks guidance and supervision. Contributes to developments |
| **Clinical Reasoning** | None. Student listens to the educator’s reasoning | Student listens and questions/explores educator’s reasoning | Students participates in clinical reasoning discussions | Student takes Unprompted lead on clinical reasoning discussions for exploration of alternatives and confirmation of decisions |
| **Reflection** | Reflect on new experiences | Reflect on what did go well and not so well, develop a plan | Reflect on self and others in events. Bring in best practice, develop a plan | Reflect on events: performance, thinking and problem solving, bring in evidence-based practice and theory. Develop personal learning plans. |
| **Competency Attainment** | Understanding practice. | Developing basic skills | Demonstrating skills in both reasoning and performance | Prepare to enter work as a competent, critical and reflective practitioner |

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# Recommended Educational Approaches for Each Placement Level

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Level** | **Observation** | **2nd Year (Level 1)** | **3rd Year (Level 1)** | **4th Year (Level 2)** |
| **Focus of Placement** | Exposure to a practice context. | Acquisition of basic practice skills and competence | Developing and consolidating competence and skills | Integration of skills and demonstration of competence to graduate, meeting the CORU standards of Proficiency |
| **Educational Approach** | Teach. | Educate and provide opportunities for practice. | Facilitate guided participation in practice skills, students learn through learning by doing. | Relinquish control, allow student to develop and show competence and autonomy. |
| **OT Practice** | Student observes or participates with direct instruction. Allow some ‘hands on’. | Student begins to participate in all aspects of practice. Increase challenges in routine situations, and allow students to take responsibility caseload under supervision for straightforward, routine clients/patients | Student participates in all aspects of the OT Process. Set expectations that the student must begin to take responsibility for clinical decisions. Facilitate the student to deliberate on the complexities of practice and the role of the MDT/others. Trust the student with independent tasks and basic case management. | Student to organize, lead, choose assessments/interventions under supervision. Evaluate performance collegially. Allow to manage a caseload and identify strategies for managing complexity. Student to work collaboratively with other professionals /MDT and evidence person centred care. |
| **Feedback** | Provide direct and specific feedback. | Provide a mix of direct feedback and asking student to identify what went well and what were the challenges. | Ask student to self-evaluate by stating what went well, what did not go well and what they would do differently next time. Facilitate this discussion and provide feedback on gaps identified | Ask student to reflect and self-evaluate before giving direct and specific feedback. |
| **Reasoning** | Use case narratives or stories and explain your thinking and decision making to the student. | Use narratives and case stories and discuss options (get students to choose correct options) for clinical decisions. | Use narratives and case stories but prompt student to identify their reasoning by asking them to describe explore/discuss options or alternatives to interventions. | Provide expectations that students will instigate clinical reasoning discussions pre and post client interventions |
| **Theory** | Prompt student to think about how the Person, their Occupation, the Environment, and their participation (PEO-P) can be applied | Ask the student to report on a model or theories that may apply to clients in this practice context. Discuss their choice and give guidance. | Ask student to analyse and present on an application of a model / theory relevant to a chosen client in this setting. The students should be able to compare and contrast models and argue for the relevance of their choice and apply the model and theories to practice standard. | Set expectations that a model of practice and theory will be or was applied to clients and give time for student to defend their choice and how it was applied in practice. Set expectations that best practice, research or opinion must be discussed in their defence of their choice |
| **Evidencing Learning** | Prompt student to ask questions and provide options for answers, students can choose the one they think may be correct. | Ask students to tell you why a task is being completed / approached in a certain way. | Prompt student to communicate their thinking in pre and post intervention including possible options for the next action. Have discussions that allows the student to demonstrate their learning. Encourage students to seek out learning opportunities and report back | Expect the student to report on their thinking (options and choices), reflections, and self-evaluation of performance. Facilitate critical evaluation of their performance and identified plans to for improvements. |

# Guidance on 60/40 Placement Model (optional placement model)

**Discipline of Occupational Therapy**

**The Placement Process**

**Discipline of Occupational Therapy**

**The Placement Process**

|  |  |
| --- | --- |
| **Question** | **Guidance** |
| **What preparation have students have in relation to COVID-19?** | Students have completed a range of online and reading materials on a) signs and symptoms, b) infection control c) contact tracing c) social distancing d) respiratory etiquette e) handwashing /handwashing competency f) donning and doffing PPE g) dress, hygiene and cleanliness h) putting on/taking off a medical mask i) evidence of immunisations and j) have signed a declaration of completion of all of these tasks. Use of laptops are permitted? (No client information on if personal laptop) |
| **What are the processes for student monitoring of wellness in practice education?** | Students must complete the daily wellness APP from University of Galway 30 minutes before placement. This is monitored daily. Students must show their educator their green badge. If they have any symptoms, they must not attend placement and report to the student health unit/GP. Students that are tested negative for COVID-19 must self-isolate until 48 hours after resolution of symptoms Students are to apply the contact tracing system of the site. If students are identified as coming into contact with a person with COVID-19 they need to self-isolate and contact the student health unit/GP and follow the advice given which is to self-isolate for 14 days. They cannot return to placement without approval from the university who will have agreed the return of the student with the site. Students who are working on one or more site or working in health care outside of placement need to fill in a HSE self-risk assessment each time they move sites <https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/covid-19-guidance/covid-19-testing-protocol-for-healthcare-workers-moving-to-a-different-service.pdf> |
| **What is the role of the practice educator in the management of COVID-19 and student education?** | Ensure that the student is familiar with all workplace expectations including the system for contact tracing. Any PPE used in the setting needs to be available for the student and social distancing maintained. Ensure that unsupervised presence of students in clinical areas (for example unaccompanied students seeing patients to practice hands on examination skills) is avoided or is very carefully controlled. Ensure that student(s) and teacher(s)/educator(s) presence in clinical areas is limited to events/time that have a specific focus on student education so that students are not present in clinical areas without a specific purpose. Ensure that no more than four people present for bedside teaching and similar situations, there should be no more than four people present at one time (including students, teachers/educators). In procedure/operation rooms there should be no more than one student at a time. Ensure that students and teachers/educators will be “bare below the elbows/bare above the wrist” when in clinical areas.  Discuss with student a) use of public transport, b) activities outside of placement c) expectations of COVOD-19 workplace behaviour and conduct. |
| **What is considered client tasks for a min of 3 days per week?** | Client related tasks may include face to face work, telehealth, telerehabilitation, giving advice or information online or by phone, team liaison/networking, making referrals, discharge planning or evaluation, monitoring or evaluating interventions, shadowing other team members, |
| **What is considered non client related tasks, suggested for a maximum of 1.5 days per week** | Students can be asked to complete a range of administration tasks including, report writing, investigation/research, prepare for face-to-face sessions, case study or portfolio. They can also complete projects for the service including information handouts, develop or evaluate programs, research evidence-based practice on a given topic but all must be related to placement. They can also participate in team CPD activities. |
| **How do I prepare the student for the changing work environment?** | Students may need to read/review/ be educated in new ways of working on placement including telehealth, online communications, tele rehabilitation or tele practice and other news ways of working in your setting. A list of resources that are relevant to your setting would assist the student in working in this new way. Some include AOTA <https://www.aota.org/Practice/Manage/telehealth.aspx> and WFOT <https://www.wfot.org/resources/telehealth> and <https://www.wfot.org/news/2020/occupational-therapy-response-to-the-covid-19-pandemic> |
| **How do I assess student competency?** | Students can be evaluated in many ways. Observation of work practice wither including virtually. Through discussion, retrospective conversations. Ask the student to talk the process, i.e step by step reporting on tasks, observations, reasoning and decision making providing their considerations, options, considerations of risk and research evidence. Discussing how they applied theory to practice regarding their clients this may include them presenting a full case report verbally or in writing. Checking of documentation for accuracy of content, correct measurement i.e. correct application and interpretation of standardised assessments or tools. Reading of the portfolio and application of Legislation and work-based protocols. Prospective conversation, asking the student to provide step by step planning/preparation of sessions or interventions, questioning using ‘what if’ scenarios. 360-degree appraisal, reports from other team members, service users or others they have worked with during the placement. Commitment to self-development: Discussion in supervision completed work tasks in non-client time, and the work completed on learning contract goals. Being attentive to management of time, attention to detail, response to feedback, self-evaluation, use of initiative, and code of conduct/application of standards and procedures and compliance with HSE work practices/codes of conduct and workplace procedure. All competencies must evaluate and graded as evident or enhanced at the end of the placement on the competency assessment form. Please note if groups are not being delivered, note that this competency is not available in this service at this time on the competency assessment form. |

# The Placement Process

# Students Professional Behaviour and Code of Conduct

**Professional misconduct procedures on placement**

If professional misconduct is suspected, the Practice Educator must immediately notify the Practice Education Coordinator as well as the Head of Discipline and the student.

Students are then invited to meet with the Head of Discipline, Practice Education Coordinator, Practice Educator, as appropriate. Issues are identified and a plan of action is agreed by all parties identifying clear targets and behaviours and the student is made aware of these.

In the first instance, if the student does not amend their behaviour accordingly it is the responsibility of the practice educator to reflect the seriousness of the professional misconduct in the ‘comments’ section of the student’s assessment form and to determine if that misconduct is sufficient to warrant an overall ‘not competent’ grade.

In the event of a serious breach of conduct, and/or an escalation of misconduct with no further improvement the student will fail the placement. The matter is referred immediately to the Head of Discipline who consults with the Code of Conduct Committee

## Code of Conduct

There is a new Code of Conduct for students attending University of Galway which includes professional behaviour on placement. This can be found at http://www.Universityof Galway.ie/code of conduct. Breaches of this Code and of any University regulations make students liable to the imposition of sanctions.

*This code states that:* Student behaviour in the wider community reflects on the University and the University will deal with complaints brought by members of the public to the University in respect of student behaviour under this Student Code of Conduct. In particular, students are obliged to behave in a manner that will not bring the University into disrepute when outside the precincts of the University. This includes, but is not limited to, a student’s place of residence and during a work placement, fieldwork or clinical practice.

Students will behave in a professional manner at all times. They will be particularly cognisant of issues relating to confidentiality and will be careful to respect the client/professional boundaries that exist in a therapeutic relationship. Students should be familiar with and will abide by the Association of Occupational Therapists of Ireland Code of Ethics and Professional Conduct:

<http://www.aoti.ie/page.aspx?contentid=859> and the Codes of Conduct as published by CORU <http://www.coru.ie/uploads/Framework%20Code%20of%20Professional%20Conduct%20and%20Ethics.pdf>

## Fitness to Practice

The University is responsible, in the delivery of its professional and accredited programmes which involve direct assessed practice with service users/client groups, to ensure that students are deemed to be fit for practice. It also has a responsibility, as far as is possible in its provision of professional and practice-based training, to have policies that seek to ensure the protection and safety of vulnerable adults and children. The main purpose of this policy is to ensure protection of public interest, client safety and placement providers. Students who are enrolled in professionally accredited programmes; programmes due to be accredited and/or programmes with clinical/placement element are expected to adhere to the professional code of conduct of the registering body and other applicable codes deemed appropriate to the discipline. They are also expected to be healthy of body and mind so as to be able to practice competently in their profession. A referral to the Fitness to Practice Panel (FPP) will be made as a last resort when all other reasonable efforts have been made to support the student and/or address the concern about practice. This will include full consideration of other mechanisms in place within the university and/or the relevant placement site with the intention to minimise duplication where possible. Where possible and appropriate, the university will endeavour to offer student’s an alternative route and/or assist them in transferring credits earned.

**Procedure**

(a) Informal: Where possible, the concerns regarding fitness to practice must be addressed via the normal support and pastoral provision of the programme and the university. Each School is required to have its own mechanisms for addressing such concerns (sample school referral procedures are provided in Appendix 2). (b) Formal: The university will commence formal referral to the fitness to practice committee if required.

Educators who are concerned about a) fitness to practice, or b) code of conduct, must review the following protocols. Protocol 13: Student conduct on placement, Protocol 14: Student dress and presentation, Protocol 15: Student punctuality and Protocol 30: Fitness to practice. These can be found in the Practice Education Handbook. The most important action is to contact with the university (practice education coordinator or head of discipline) on these issues is required as soon as concerns are identified.

## Punctuality and Time Management

Students are expected to arrive for work on time and be fit for work. Punctuality and appropriate time management are expected work-based behaviours. Students who persistently arrive late and have been given warnings, may fail the placement due to poor time management. Students who are not fit for work should be sent home and the Practice Education Co-ordinator contacted.

## Garda Clearance

The National Vetting Bureau (Children and Vulnerable Persons) Act 2012 stipulates that a written agreement must be in place between University of Galway and the placement provider in line with section 12(3A) of the act. Per the agreement, upon receiving the formal consent of its students, University of Galway will apply for Garda Vetting from the National Vetting Bureau in respect of the students, on its own behalf and on behalf of your organization and undertakes to inform the organisation that the Garda Vetting has been undertaken.

Where no agreement is signed, the placement provider is responsible for seeking Garda vetting for students. Students must sign consent forms to share their disclosure forms on placement.

# Use of Private Cars by Students

It is the policy of the University that students do not carry service users in their cars. If students are required to use a car to travel during placement, students should have appropriate business class insurance. Some placement providers may have local car insurance requirements. Practice Educators need to advise the student of these prior to beginning placement. Students must identify if they can use cars on placement in a form completed prior to placement allocations.

# Dress Code

Practice educators are asked to define the dress code requirements when completing the site profile. Students are expected to wear the standard uniform for occupational therapy students at University of Galway whilst on placements where a uniform is worn by the practice educator or by the clinicians working in the department. In placements where a uniform is not appropriate students must wear their student name-badge at all times unless advised not to by the practice educator. Students will adhere to the dress code of the practice placement. It is important that students become aware of the need to create the appropriate professional image in order to gain credibility and the confidence of their clients. The following dress code has been drawn up to assist them in this:

1. No jewellery may be worn with the exception of wedding rings and a single stud earring in each earlobe. Wrist watches may not be worn on physical hospital placements in line with HSE infection control policy.
2. Long hair should be tied back. Clothes should be clean and pressed. Clothes should be appropriate to working in the placement environment e.g. smart trousers/skirt/dress etc.
3. Footwear should be suitable for moving and handling.
4. Jeans, leggings or skirt less than 18’’ long must never be worn. Perfume or aftershave should not be worn as it can cause an allergic reaction with some clients.

# Students with Disability

Student registered with University of Galway disability services will have a reasonable adjustment plan for placement. This will be sent to the practice educator prior to placement. Students do not have to disclose their disability and must meet the competency requirements of the placement.

# Retention of Student Records

All student records must be returned to University of Galway at the end of placement. This includes supervision forms. Copies of final assessment forms can be retained with the written consent of the Second-Year student only. Refer Appendix C for Consent Form.

# PRACTICE EDUCATOR FACT SHEET

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| --- | --- |
|  | **Discipline of Occupational Therapy Fact Sheet** |

# **FACT SHEET 10: COMPETENCY EXPECTATIONS BY WEEK- 3RD YEAR**

|  |  |
| --- | --- |
| This fact sheet defines expectations of student performance during the weeks although each student may progress through these stages differently the final outcome should be that the student can work competently under direction. | |
| **Week One** | **To include** |
| Supervision agreement &  Orientation | Make an agreement on how you are going to supervise your student. A protected time for once, a week is planned and informal supervision on going agreed each day. Be explicit that both will provide feedback on performance and outline the expectations you have of the student for supervision preparation. |
| Review learning objectives | Review Learning contract. Ensure that these are relevant to the placement and CORU standards of proficiency. Set weekly expectations. Students should show learning from their previous placement |
| Active Observation | The student should have demonstrated an effective ability to introduce self to others appropriately. They should also be aware of departmental policies and procedures. The student should be asking some relevant questions about cases. |
| **Week Two** | **To include** |
| Active Observation and first participation | In week two, students should actively observe the work of the OT in this setting and begin to use procedural reasoning to explain to the supervisor their understanding of occupational therapy intervention. Students should be investigating and reporting on diagnoses and demonstrating evidence of pre-placement and ongoing reading. They should be able to name the main assessments/ interventions in the placement setting. They should be participating in work tasks |
| **Week Three** | **To include** |
| Actively observation, & beginning to participate under close supervision | By week three, students should begin to gather information on referrals. Students should be developing pragmatic reasoning of how occupational therapy works in a team. The student should present the educator with written notes, reflective of their active observations. They should begin to participate in aspects of assessment and interventions with supervision e.g. setting the room up for a session. They should be reflective of their performance in supervision and seek guidance on areas of improvement. The student should ask for clarification if they do not understand something or are not clear what is expected of them. They should be able to begin to participate in client interventions. They should be communicating with team members |
| **Week Four** | **To include** |
| Participating under supervision | By week four, students should be demonstrating their communication, intervention, and documentation skills and these should be to an intermediate standard under supervision. They should be demonstrating an understanding of occupation discuss the relationship of theory to the practice setting. They should be able to engage a client in meaningful occupations in order to achieve goals. They must show insight into the reasoning for practice decisions correctly and follow through on actions |
| **Week Five** | **To include** |
| Participating with supervision | By week five, the student should be able to manage time effectively and prioritise tasks. The student should be able to independently complete health care record review/gather information on a client accurately from medical chart. The student should be able to complete basic work tasks. Documentation is to practice standard with few errors. Communicate with others to standard, apply work-based policies, discuss evidence-based practice and application of theory |
| **Week Six** | **To include** |
| Collaborative approach to supervision (coaching style) | By week six, the student should continue developing note skills, needing fewer corrections on content. The student should be able to identify the specific need to liaise with other team members independently. By week six, the student should be able to clearly communicate in a group setting. The student should be able to plan and carry out sessions for a minimum of 2 clients with assistance from their practice educator. The student should be able to analyse activities verbally and in written work. |
| **Week Seven** | **To include** |
| Consolidating practice competence | By week seven the student should carry out full preparation and delivery of sessions under supervision or independently. The student should be able to complete and interpret specific assessments required and explain reasoning for this for a minimum of 6 clients (depending on setting). The student should be able to demonstrate an ability to prioritise tasks and manage time effectively and efficiently. The student should show ability to modify/ adapt occupations or activities to match the client’s occupational performance level. They can reflect and self-evaluate, show initiative and plan next steps to standard |
| **Week Eight** | **To include** |
| Practice competence for 3rd year level | By week eight, the student can show consistency of their ability to think, plan, organise, use their initiative, and evaluate all occupational therapy interventions at an intermediate level be able to complete straightforward tasks independently. They can discuss and argue for their reasoning and can communicate effectively with the client and the team. They show an enquiring mind about more complex situations and know the limits of their expertise. They complete handover appropriately |

# Student Assessment on Level 1 Placement

## The Level 1 Competency Assessment Form

The student is assessed using the Level 1 Placement Assessment Form by the Practice Educator. A hard copy version is in the Appendix A of this booklet.

Refer to the Practice Education website for an electronic version at http://www.Universityof Galway.ie/faculties\_departments/occupational\_therapy/practice\_education.html

**The Competency assessment form and the OTRB CORU Standards of Proficiency**

**Students need to meet the OTRB CORU Standards of Proficiency. The competency form is mapped to these standards. Refer to the** [Practice Education – University of Galway](https://www.nuigalway.ie/medicine-nursing-and-health-sciences/health-sciences/disciplines/occupational-therapy/practiceeducation/) and the Guidance on completing the Level 1 (2nd and 3rd year) Competency assessment Form

## Setting Expectations

The Level 1 Competency Placement Assessment Form is very generic so that competencies can be individually assessed in a variety of work settings. Prior to the placement it is appropriate to review the form in conjunction with the CORU Standard of Proficiency and provide examples of how the competency can be evidenced in your work setting. Provide these to your student so that they know what you expect from them in this placement. Some examples are given below, but it is important that these are written for your setting.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Not Competent** | | **Competent** | |
| **Competencies** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** |
| Work safely in compliance with health and safety regulations as specified in the practice setting.  *Example: Completes moving and handling procedures to work standard*  *Reviews and adheres to risk assessments*  *Arrives punctually, prepared and fit for work* |  |  |  |  |
| Adhere to the ethical, legal, professional and local practice contexts that inform occupational therapy practice.  *Example: Listens to, records and communicates client perspectives, demonstrating client centred practice*  *Adapts communication to meet preferred communication styles of the client/carers*  *Demonstrates anti-discriminatory practice* |  |  |  |  |
| Adhere to confidentiality as described in the local context.  *Example: Manages case records appropriately*  *Speaks about clients respectfully in appropriate environment* |  |  |  |  |

# The Competency Assessment Process

Please refer to the separate document, Guidance on Completing the University of Galway Occupational Therapy Competency Assessment Form. This links each of the competency statements to the CORU standards of proficiency [Practice Education – University of Galway](https://www.nuigalway.ie/medicine-nursing-and-health-sciences/health-sciences/disciplines/occupational-therapy/practiceeducation/)

To pass this placement all competencies must be either evident or enhanced. Students must be assessed at halfway and at the end of the placement using the Level 2 Competency Assessment Form.

Halfway

It is important that halfway assessment must be completed at the halfway point. Feedback should be given on areas to be developed so that students have time to work on areas of ‘emerging’ or ‘not evident’ competency. It is normal for students to have many ‘not evident’ or ‘emerging’ grades at the halfway point as competencies may yet not have been consistently demonstrated.

Final

It is recommended that the final assessment is not given on the last day so that students have time to reflect and review the content of the competency form and complete student sections. The original signed competency assessment form must be returned to the university. A student who does not consistently amend behaviour which is not appropriate to practice should be awarded an emerging grade.

|  |  |
| --- | --- |
| **NOT COMPETENT** | **COMPETENT** |
| **NOT EVIDENT** – This competency was not demonstrated. | **EVIDENT** – This competency was consistently demonstrated. |
| **EMERGING** – This competency was not consistently demonstrated. | **ENHANCED** – This competency was consistently demonstrated. The performance was to a high standard. |

# Devising a Learning Contract with your Student

The student should bring a draft learning contract. The contents should be negotiated and agreed in the first week of placement and reviewed in supervision. The learning contract focuses the learner on their goals of the placement. A sample format for the Learning Contract can be found at <http://www.UniversityofGalwayalway.ie/faculties_departments/occupational_therapy/practice_education.html>

Learning Contracts should specify the following:

* The learning objectives or goals to be achieved.
* The support required and resources available.
* Details of how learning goals or objectives will be addressed.
* The timeframe within which goals or objectives should be achieved.
* The nature of the evidence that will indicate when goals or objectives have been met.
* The criteria to be used to assess the evidence.
* The signatures of the parties involved in the contract.

Twelve steps to working through a learning contract:

**Step 1:** The Learner’s needs or gaps in knowledge or skills are clarified: student identifies strengths, knowledge and skills and identifies weaknesses in relation to current placement. Practice educator can provide guidance.

**Step 2:** Learning outcomes are defined: Agreeing on what will be achieved in a defined timescale.

**Step 3:** Learning opportunities and resources needed to attain outcomes are identified e.g. literature, technology, members of the multi-disciplinary team etc.

**Step 4:** The process by which learning is to occur is specified in a plan. Plan reflects learning strategies to be used.

**Step 5:** Responsibilities of the people involved are detailed.

**Step 6:** Timeframe for completion is determined: Practice educator facilitates the student to set a realistic timeframe.

**Step 7:** The criteria against which the achievement of goals is to be assessed are recorded: A checklist for the evidence required to ensure that the terms of the learning contract are fulfilled.

**Step 8:** The learning contract is signed by both or all parties: shows commitment to a contractual activity.

**Step 9:** The learning activities are undertaken: new themes or interests may emerge through original outcomes should not be discarded.

**Step 10:** The contract is revisited and revised as necessary as the plans progress.

**Step 11:** Outcomes are evaluated against the recorded criteria: Good to consider what helped or hindered learning process.

**Step 12:** Future needs may indicate a renegotiation of the contract.

# Supervision

Supervision is an integral part of Practice Education for students. The educational and supportive supervisory functions of Practice Education supervision are closely aligned to those of professional supervision for qualified staff therefore, the experiences that students gain from being supervised and of taking on the responsibilities of being a supervisor begin early in an Occupational Therapist’s career (Professional supervision in occupational therapy, AOTI, 2010).

1. Supervision should be scheduled as a formal meeting weekly. Students must retain all supervision records and are expected to include 6-8 completed and signed supervision forms in their portfolio. Supervision forms can be handwritten.
2. Students should prepare new items for the supervision meeting as well as be prepared to report on actions from the previous meeting. These can be based on student reflections or informal feedback given since the last meeting.
3. The learning contract should be an integral part of supervision and should be reviewed or added to in the supervision meeting. Supervision is collaborative with both parties setting objectives, talking and planning future actions.

Supervision can be separated into the following sections:

**Competency Review (Learning and Development):** Progress from last week (including student self-appraisal from reflection), what went well, what were the challenges, what is to be completed by the next week and to what standard.

**Development of reasoning and reflection (Developing practice thinking):** Discussion on case study or other cases regarding the occupational therapy process, best practice, local policy and procedure, application of theory or duty of care. Encourage multiple perspectives including those of the service user to develop critical thinking skills.

**Support and encouragement (Developing as a professional):** Discuss personal challenges of working in this setting and strategies for management of self and as well as professional approaches to others. Practice Educators need to give space for students to be supported in managing emotions, stress and anxiety generated from new experiences on placement. They are being socialised into the profession so supervision can facilitate a sense of ‘belonginess’ to this placement and to the profession.

**Accountability (Developing professional autonomy and confidence):** Ask student to report on how they have used their initiative this week, such as what they have researched or read, what progress they have made on project work or what ideas they have for the development of new resources. Encourage and reinforce appropriate use of time in the workplace as they need to develop as independent and proactive professionals.

Supervision should be recorded on one of the NUI Galway supervision forms **(Appendix G)**. Actions should be specific and time framed. The supervision form can be found at <http://www.UniversityofGalwayalway.ie/faculties_departments/occupational_therapy/practice_education.html>.

# Providing Feedback to the Student

## Informal

Feedback is the most important part of educating students in work settings. It is highly valued by students, but they prefer realistic feedback, so be direct and factual. After a student contributes to an activity is the ideal time to give informal feedback. This can be an overall performance, verbal and non-verbal communication, content, knowledge, approach, pace or attitude to the activity. Tell the student what went well and give goals that they need to achieve next time… ‘you did this well on these aspects 1) 2) and 3) but next time I would like to see you work towards achieving 1) 2) and 3)’. Respond positively to feedback seeking behaviour. Sometimes it is useful to use the word ‘feedback’ as some conversational style feedback may not be perceived by the student as feedback on their performance. If a student is becoming over demanding of feedback and this is impacting on your workload, agree some ground rules or boundaries.

## Formal

Make a time to meet mid-week as this is a one-week placement. Ask the student to prepare for the meeting with a reflection on one or two activities they contributed to during that day or during a specific time period. Give them time to self- evaluate and evidence that they have heard your previous informal feedback and to describe the actions they have completed as a result of that feedback. Discuss how they can ensure they work towards achieving the performance goals. Discuss their proposed strategies to achieve these goals and their relevance to this placement. In other words, reflect but also ensure they are travelling towards achievement of competencies. The student will want realistic feedback. Give examples of good performance, their strengths and their skills. Identify areas that need to be addressed in future placements. Make a plan for the following week. This will ensure that the student is clear about the next steps that need to be completed.

If concerns exist be specific on these concerns. Give clear expectations on what they need to show or perform to indicate the achievement of an ‘evident’ competence grade at the end of this placement.

## Written

Please use one of the University of Galway student supervision templates which can be found at:<http://www.UniversityofGalwayalway.ie/faculties_departments/occupational_therapy/practice_education.html>.

# University Marked Assessment item: The case study

Students will be required to present a case study upon successful completion of the placement. This provides the student with a second opportunity to produce a case study report on a service user with whom they are currently working during Practice Education. The case is a typical service user of the practice education site and is chosen in collaboration with the practice educator. Guidelines for the case study are provided to the student by the University. The student is expected to apply their learning from their previous modules, to deliver a Third Year Level 1 case study. The student may present the case study to the practice education site team towards the end of their placement for formative feedback. This is negotiated between student and practice educator.

**Type of Case Study**

The case study should be a typical service user of the practice education site with one complexity or challenge and is chosen in collaboration with the practice educator. The case study should reflect the knowledge, skills, and attitudes of a third-year intermediate level student.

# Practice Educator Role in the Case Study

This marked case study is part of a separate module to practice education and therefore the mark does not impact on practice education placements pass/fail grade. The case study is marked by the practice education co-ordinator/lecturer.

The Practice educator has a responsibility to assist the student in identifying an appropriate service user for a case study. This should be completed no later than week five so the student has time to work with the person identified.

Practice educators should facilitate opportunities for the student to work with the chosen service user and discuss and explore application of theory, and clinical reasoning with the student.

The practice educator can ask for a presentation of the case study in week 7 or 8. This is for formative feedback only. Practice educators are asked to sign a form regarding this presentation which should be completed by the student. This form identified the feedback that the student received on their presentation. If the practice educator has not asked for a presentation of the case study and this is acceptable, please could they sign the case study form for the student confirming that a presentation was not completed.

It must be noted that the case study is an academic piece of work, and therefore is the responsibility of the student to complete. Practice educators are not expected to mark or comment on drafts.

The clinical practice of the setting is not critiqued or marked in this case study and students who fail this item have done so because they have not met the marking criteria. This is no reflection on the educator, the setting or practice in this setting.

|  |  |  |
| --- | --- | --- |
| **Student Responsibilities** | **Shared** | **Practice Educator (PE) Responsibilities** |
| The student has been provided with guidelines for the case study, (available in the Practice Education Handbook, Module Guides for Case study) | The case is chosen in collaboration with the Practice Educator by no later than week 5 of placement. | The Practice Educator should facilitate opportunities for the student to work with the chosen service user. |
| It is the responsibility of the student to complete the case study. |  | The PE should discuss and explore the application of theory, evidence-based practice and clinical reasoning with the student. |
| The student **may** present the case study to the Practice Education site team |  | The PE **can** provide formative feedback on the case study presentation. (Form to be completed) |
| The placement setting is not critiqued or marked in the case study and students who fail the case study have done so because they have not met the marking criteria. |  | Practice Educators are not expected to mark or comment on drafts of the case study. |
| For 4th year the student should show independence in leading, planning and delivering OT to this service user but also seek assistance appropriately when required. |  | The PE should provide feedback to the student if they are getting too focused on the case study and remind them to avail of the learning opportunities placement offers and that they need to demonstrate overall competency in all assessment areas. |

# The Case Study Process

# Guidelines for Case Study 2 Third Year

Students should read the CORU Standards of Proficiency

**Clarity of expression (including accuracy, spelling. grammar and punctuation)**

Spelling/Grammar refers to the expectation that a high-quality assignment will not have misspellings and that the grammar will be of a high standard throughout.

**Professional Language**

Professional language refers to the use of language appropriate for professional writing (factual, objective, sources provided, and concise but detailed/comprehensive), including avoidance of slang or chat acronyms and, most importantly, avoidance of language that in any way might be taken as disrespectful to any individual(s).

Avoid additional descriptors for example “hugely important” or “crucially important”. Or emotive language for example “the person is suffering from” . Instead state, “this is important or very important” and “the person has been diagnosed with.” Where possible support practice thinking with reference to research, best practice or policy/ guidance.

**The OT Process and Clinical reasoning**

Clinical reasoning can be described as practice decision making or professional thinking. Many factors can influence practice-based decisions and students need to demonstrate factors that influenced their problem solving and decision making throughout their case study but particularly at assessment and intervention. In effect, the student must therefore demonstrate understanding, analysis and argument. This professional thinking includes 1) Thoughtful and deliberate application of an occupational therapy model is presented and its influence on the perspective taken by the student when delivering the service to the client. 2) Reporting on how the safety of the client/person was considered throughout the process 3) Rationale for choice of assessments or alternatives considered 4) Client consultation and person centred practice should be evidenced in understanding and prioritising the occupational issue and strengths. 5) Considerations and rational for intervention within the constraints of the context for the person by the application of relevant research. 6) Thoughtful consideration on how best to evaluate these outcomes with close consideration to service user satisfaction 7) that the student has communicated at relevant point throughout the OT process with client/person consent to gather or provide information to the wider team to show collaborative working 8) evidenced ethical practice and adherence to the CORU code of conduct.

**Case profile /demographic data**

Details that could identify an individual must be changed or omitted. You may not use documents that identify the placement setting.

The following details may be included:

* Age
* Gender
* Diagnosis (Define, describe, and reference to health professional standard)
* Prognosis (Reference)
* Reason for referral to Occupational Therapy
* Previous relevant medical and social history
* Marital and family status
* Home and/or social situation and support services provided
* Occupation / employment

*Sub-headings can be useful here.*

**Occupational Therapy Model of Practice**

The model of practice must be occupational, described and applied to the client at each step of the OT process but particularly at assessment and intervention. Rationale for the choice of the model and how it was applied to the case study must be reported.

**Initial assessment**

Process of informed consent should be identified. If communication strategies were indicated to ensure effective communication, include them in this section. Provide reasoning for your choice of assessments. Rigour of the assessments reported. Results of initial interview and standardised and/or informal assessments fully reported. Present results clearly and include interpretations of results. Alternative assessments that could have been used and reasons for not being used should be identified. Liaison with other team members or sources reported with information on how confidentiality was maintained. Subheadings may be useful in this section.

**Occupational problems**

A full list of occupational problems and strengths must be presented and prioritized with client/carer consultation. These must be supported by the results of the initial assessment and /or knowledge of the condition. Occupational problems do not need to be referenced. No new information on the client should be presented in this section.

**Goals of Intervention**

These must be comprehensive and meaningful list of occupational SMART or COAST goals (not service goals) which are relevant to the setting and broken down into steps if relevant. Evidence should be provided of client/carer consultation and goals should be appropriately prioritized. Evidence of person-centred care should be reported. A clear rationale should be provided regarding goal choice or selection. There should be based on:

a) occupational problems

b) the results of the initial assessment

c) knowledge of the condition

**Search strategy**

A relevant search strategy (e.g. PICO but others permitted) is provided that relates to sourcing evidence to inform one planned intervention. Clear search terms are identified. Inclusion and exclusion criteria should be identified. Boolean Logic applied to a range of relevant databases**.** Two relevant research articles to be critically reviewed in relation to one planned intervention.

**Critical appraisal of two research articles/ literature**

Two relevant articles that relate to one planned intervention should be selected and critically appraised in relation to aims, methods and outcomes of the research with view to level of rigour of the research. The reliability and applicability of the research findings should be identified in relation the search strategy question. Full title authorship and dates of publications should be provided when each article is introduced.

**Discussion of application of evidence to case study**

The relevance of the literature to the planned intervention for this client, the setting and the resources should be identified. This section should provide informed reasoning regarding the interventions planned. Discuss here how these articles applied if at all, to your client and your planned interventions. It is important not to try to fit the outcomes of the research to your client but give careful thought to their relevance, if any, to the intervention that is planned or delivered to the client.

**Description of intervention sessions**

This should include a brief description of each session with details of the goal(s)

being addressed during the session, the treatment approach (es) and frames of reference (s) applied (define, describe, and reference), the content of the sessions and evaluation of the session from the client and therapist perspectives. If many sessions were completed these can be grouped together. Collaborative practice and integration of goals with the team goals should be reported.

**Evaluation of intervention**

Evaluation of intervention should include evidence of re-assessment where appropriate. There should be an evaluation from multiple perspectives including the client/patient/service user/person. Evaluation should include discussion with the about their level of satisfaction and whether goals were met or not met or why this was the case where appropriate. In some cases (e.g. long-term clients), it may not be possible to evaluate all outcomes. Where this is the case, a plan for evaluating overall outcome together with evaluation of the results of the intervention provided during placement will be sufficient.

**Appropriate presentation and referencing**

Referencing should be in Harvard Style as per University of Galway Library Guidelines.

Referencing should be from sources where possible published in the last ten years or the latest versions of textbooks.

Reference list is not included in the word count. There should be evidence of reading of relevant academic texts/published literature.

Literature Sourcing, Use of Referencing

**Breadth and depth of reading** refers to providing evidence of consulting a wide range of relevant, contemporary, and seminal (original and important) sources of theoretical and empirical (research) literature.

**Use of academic literature/research** is demonstrated by the critical integration of relevant literature and research, to support each discussion point. Assignment reflects deep and considered evaluation of reading sources.

**Use of Harvard referencing and acknowledgment of sources**

Assignment adheres to the University of Galway James Hardiman Harvard Referencing guide in the text of the essay and in the reference list. All sources (both written and personal communication) used in the assignment must be acknowledged both in the text of the assignment and in the reference list.

**Penalties**

|  |  |
| --- | --- |
| **Type of Breach** | **Penalty** |
| Student includes copies of client records with or without identifiers removed | Automatic fail (mark of 35% is awarded) |
| Student does not identify that the name used is a pseudonym | Automatic fail (mark of 35% is awarded |
| Student identifies hospital or site | 10% deduction of marks.  Further 10% deduction for each such incidence |
| Student uses a pseudonym throughout but uses the client’s real first name on one occasion e.g., “Mrs. X was seen in the OT Department........... I obtained informed consent from *Catherine* ....”. | 10% deduction of marks.  Further 10% deduction for each such incidence |
| Student uses a pseudonym throughout, but the first name of a client’s family member is visible on one occasion | 10% deduction of marks.  Further 10% deduction for each such incidence |
| Client’s first and second name is visible in the case study.  First and second name of a client’s family member is visible. | 20% deduction of marks.  More than one incidence is awarded an automatic fail. |
| Client’s name and address is visible in the case study | Automatic fail (mark of 35% is awarded) |
| Client’s photograph or other highly identifiable information is visible e.g. hospital ID number. | Automatic fail (mark of 35% is awarded) |
| Reference to unreferenced websites such as ‘Wikipedia’ or ‘depression.com’ or sites specifically aimed at the public (rather than health professionals) | 5 marks deducted |

# University Marked Assessment Item: The Portfolio Pass/Fail

The portfolio is used to record the student learning and development while on practice education in relation to the OTRB CORU Standards of Proficiency. The portfolio is submitted online and marked by the practice education coordinator.

# Role of the Practice Educator and Portfolios

The practice educator can ask the student at any time to review the portfolio as this is an item on the competency assessment form. Alternatively, educators can ask student to complete templates during work or study time.

# Guidelines for the Portfolio

The portfolio is used to record your learning and development while on practice education. The aim is to record information which will be useful for the rest of the course and on future practice education placements. The Practice Education Portfolio is submitted to the Practice Education Co-ordinator at the end of placement and is marked on a Pass/Fail basis.

All material should be typed except for supervision forms which can be handwritten. The portfolio should be neat and professionally presented.

Each student is required to compile and maintain a practice education/continuous professional development portfolio. This portfolio should be a systematic and organized collection of evidence collected by the student to:

1. Monitor the development of their knowledge, skills and attitudes in practice education.
2. Monitor their progress towards attaining competence as entry-level practitioners throughout the four years of their course.
3. Promote a high quality of service delivery during practice education placements

It is the responsibility of each individual student to make decisions about the kind of CPD activities that are relevant to their learning and development. The content of the CPD portfolio should reflect the student’s placement allocations and his/her individual learning needs and where necessary the Practice Education Team will assist with queries.

The following sections are recommended to promote structure:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Proposed sections** | | |  | | | **Comments** |
| Background Information | | |  | | | 1. Curriculum Vitae 2. Personal learning styles questionnaire   \*Should be updated on a yearly basis |
| CPD in practice | | |  | | | Placement related documentation i.e. learning contracts; assessment forms; supervision records; reflections relating to placements; case study presentations; project work etc. |
|  | Supervision forms and learning contract are mandatory. | |  | |  |
|  |  |  | |
|  | Reflection Templates - Mandatory | |  | | | Use reflection template provided to complete four reflections.  Outside of the four reflections completed, explore the use of varying models of reflection to guide reflections. |
|  | |
| Training certificates/records | | |  | | | Include certificates of training completed to date e.g. hand hygiene, child first training, mental health act training, infection control training etc. |
| Courses, conferences and in-services | | |  | | | Attendance at courses, conferences and in- services provide good learning opportunities. Activities in this area also include reflection on what type of learning has occurred and how this may impact on your practice. Examples are:   1. OT-specific conferences and courses   (e.g.   AOTI annual conference) 2. Multidisciplinary and subject specific conferences (e.g. Stroke Study Day) • Certified conferences, workshops or courses on practice, management or research 3. Attendance at compulsory in-house training, (e.g. health & safety) 4. Specialist lectures, workshops and demonstrations   Designing and providing a course, in- service or a presentation at a conference |
| Evidence of Professional Membership – not a mandatory section. | | | | | | Learning and professional development associated with active involvement and participation in profession or practice- specific groups.  Examples are: |
|  | | | | | | 1. Membership of and active   participation in the professional body (AOTI) and affiliated special interest groups 2. Involvement in working groups or committees associated with professional practice or the  development of the profession 3. Active involvement in multidisciplinary groups, support groups, development groups and voluntary work |
| Reading and writing | | | | | | Self-directed learning and study is an effective form of CPD. It can inform and help you develop your practice. Examples include:  • Reading and reflecting on literature. This may be done individually or in a group (e.g.  journal club)  Keeping up-to-date with research evidence in support of best practice • Learning through the use of online resources such as databases and online discussion groups |
|  | Summary of strengths and areas for development - mandatory | | |  | | At the end of the placement, list your strengths and areas for development for your next placement. |
|  | | |
|  |  |  |  |  |  |  |

|  |  |
| --- | --- |
|  | **Discipline of Occupational Therapy, University of Galway** |

# Appendix A: Practice Education Assessment Form – Level 1

**Practice Education Assessment Form – Level 1**

This form is completed for 2nd and 3rd Year Students

***(Developed in collaboration with the School of Occupational Therapy, University of Dublin, Trinity College)***

(Please return completed report [not a copy] *directly to the Discipline Office)*

|  |  |  |
| --- | --- | --- |
| **Name of Student** |  | |
| **Name of Service** |  | |
| **Type of Experience** |  | |
| **Date of Experience (dd/mm/yyyy)** | **From** | **To** |
| **Name of Practice Educator** |  | |
| **CORU NUMBER** |  | |

|  |  |
| --- | --- |
| **Number of Days Absent** |  |
| **Total Hours Completed** |  |

**OVERALL LEVEL OF ACHIEVEMENT**

|  |  |
| --- | --- |
| **Competent** | **Not Competent**    *(Student required to repeat placement)* |

**N.B.** If a student is awarded a **not competent grade (Not Evident or Emerging) for one or more competencies at the final assessment, this indicates an overall not competent level of achievement**

|  |  |
| --- | --- |
| **Signature of Practice Educator** |  |
| **Email of educator/s** |  |
| **PRACTICE EDUCATOR CORU NUMBER** |  |
| **Signature of Student** |  |

***Both*** *signatures are required.*

**Student Hours Log**

|  |  |  |
| --- | --- | --- |
| **Week (From – To) (dd/mm/yyyy)** | **Hours Completed** | **Initials of Practice Educator** |
| **1.** to |  |  |
| **2.** to |  |  |
| **3.** to |  |  |
| **4.** to |  |  |
| **5.** to |  |  |
| **6.** to |  |  |
| **7.** to |  |  |
| **8.** to |  |  |

**To be completed by Practice Educator:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sick leave hours taken:** |  | **Sick leave hours made up:** | |  |
| **Sick leave certified:** | **Yes  No** | **Sick leave cert forwarded to PEC\*:** | | **Yes  No** |
| **Other leave/absence** | **Number of hours:**  **Reasons** | | | |
| **Number of public holidays:** |  | **Total hours completed:** | |  |
| **Signature of Practice Educator:** |  | | **Date:** |  |

*\* It is the responsibility of the student to forward their sick certs to the PEC directly.*

**To be completed by Student:**

|  |  |
| --- | --- |
| **Student Name and Number** | **Student Signature / Date** |
|  |  |

FINAL FORMATIVE ASSESSMENT

|  |  |
| --- | --- |
| **Name of Student:** |  |
| **Name of Practice Educator:** |  |

|  |
| --- |
| **Summary of Practice Educator’s Comments and Feedback** |

*Please continue comments on separate page if required.*

|  |
| --- |
| **Student’s Comments and Feedback** |

*Please continue comments on separate page if required.*

HALF-WAY FORMATIVE ASSESSMENT

|  |  |
| --- | --- |
| **Name of Student:** |  |
| **Name of Practice Educator:** |  |

|  |
| --- |
| **Summary of Practice Educator’s Comments and Feedback** |

*Please continue comments on separate page if required.*

|  |
| --- |
| **Student’s Comments and Feedback** |

*Please continue comments on separate page if required.*

|  |  |
| --- | --- |
| **Signature of Student** |  |
| **Signature of Practice Educator** |  |
| **Date (dd/mm/yyyy)** |  |

|  |  |
| --- | --- |
| **NOT EVIDENT** – This competency was not demonstrated. | **EVIDENT** – This competency was consistently demonstrated. |
| **EMERGING** – This competency was not consistently demonstrated. | **ENHANCED** – This competency was consistently demonstrated. The performance was to a high standard. |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Half-Way** | | | | **End of Placement** | | | |
|  | **Not Competent** | | **Competent** | | **Not Competent** | | **Competent** | |
| **Occupational Competencies** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** |
| 1. Demonstrate through either verbal or written communication an understanding of the meaning of occupation for the client and the client group or community. |  |  |  |  |  |  |  |  |
| 2. Demonstrate through either verbal or written communication the person-occupation-environment relationship within the client’s context. |  |  |  |  |  |  |  |  |
| 3. Apply the therapeutic use of occupation to influence health and well-being of the client or group positively. |  |  |  |  |  |  |  |  |
| 4. Support engagement and participation in meaningful occupation. |  |  |  |  |  |  |  |  |

|  |
| --- |
| **Halfway Comments on OccupationAL Competencies** |

|  |
| --- |
| **final Comments on OccupationAL Competencies** |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Half-Way** | | | | **End of Placement** | | | | |
|  | **Not Competent** | | **Competent** | | **Not Competent** | | **Competent** | | |
| **Communication Competencies** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** | **Not Evident** | **Emerging** | **Evident** | | **Enhanced** |
| 5. Demonstrate listening, verbal and non-verbal communication skills, both formally and informally. |  |  |  |  |  |  |  |  | |
| 6. Give and receive feedback in an open and honest manner. |  |  |  |  |  |  |  |  | |
| 7. Present oral information in a clear, concise and well-structured manner both formally and informally. |  |  |  |  |  |  |  |  | |
| 8. Write accurate, clear, contemporaneous records in accordance with legal and professional requirements. |  |  |  |  |  |  |  |  | |
| 9. Communicate effectively and in a professional manner with individuals. |  |  |  |  |  |  |  |  | |
| 10. Communicate effectively and in a professional manner in a group environment. |  |  |  |  |  |  |  |  | |
| 11. Use computer and/or communication technologies appropriately in the placement setting**.** |  |  |  |  |  |  |  |  | |

|  |
| --- |
| **Halfway Comments on communication Competencies** |

|  |
| --- |
| **final Comments on communication Competencies** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Half-Way** | | | | **End of Placement** | | | |
|  | **Not Competent** | | **Competent** | | **Not Competent** | | **Competent** | |
| **The Occupational Therapy Process Competencies** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** |
| 12. Select and apply appropriate conceptual and practice models to guide the occupational therapy process. |  |  |  |  |  |  |  |  |
| 13. Demonstrate an integration of occupational therapy theory within practice. |  |  |  |  |  |  |  |  |
| 14. Demonstrate engagement in reflection and evaluation of practice. |  |  |  |  |  |  |  |  |
| 15. Facilitate a culturally sensitive approach to practice. |  |  |  |  |  |  |  |  |
| 16. Facilitate a client centred approach. |  |  |  |  |  |  |  |  |
| 17. Apply the principle of informed consent prior to and throughout the occupational therapy process. |  |  |  |  |  |  |  |  |
| 18. Demonstrate the use of observation and interview skills to gather relevant information. |  |  |  |  |  |  |  |  |
| 19. Select and administer appropriate standardised and non-standardised assessment tools. |  |  |  |  |  |  |  |  |
| 20. Collaboratively identify goals for intervention with the client (or people acting on his/her behalf). |  |  |  |  |  |  |  |  |
| 21. Facilitate effective individual and/or group work interventions. |  |  |  |  |  |  |  |  |
| 22. Evaluate outcomes in collaboration with all parties. |  |  |  |  |  |  |  |  |
| 23. Prioritise and manage a caseload either group or individual, under supervision. |  |  |  |  |  |  |  |  |
| 24. Facilitate the service users management of their own health and wellbeing |  |  |  |  |  |  |  |  |

|  |
| --- |
| **Halfway Comments on Occupational Therapy Process Competencies** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **final Comments on Occupational Therapy Process Competencies** | | | | | | | | |
|  | **Half Way** | | | | **End of Placement** | | | |
|  | **Not Competent** | | **Competent** | | **Not Competent** | | **Competent** | |
| **Professional Behaviour Competencies** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** |
| 25. Work safely in compliance with health and safety regulations as specified in the practice setting. |  |  |  |  |  |  |  |  |
| 26. Adhere to the ethical, legal, professional and local practice contexts that inform occupational therapy practice. |  |  |  |  |  |  |  |  |
| 27. Adhere to confidentiality as described in the local context. |  |  |  |  |  |  |  |  |
| 28. Present self in a manner appropriate to the working environment. |  |  |  |  |  |  |  |  |
| 29. Respond constructively to changing circumstances and demands. |  |  |  |  |  |  |  |  |
| 30. Demonstrate an awareness of personal and professional boundaries within practice. |  |  |  |  |  |  |  |  |
| 31. Demonstrate a positive approach to clients and team members. |  |  |  |  |  |  |  |  |
| 32. Demonstrate effective time management. |  |  |  |  |  |  |  |  |
| 33. Demonstrate best use of resources available. |  |  |  |  |  |  |  |  |

|  |
| --- |
| **Halfway Comments on PROFESSIONAL BEHAVIOUR Competencies** |

|  |
| --- |
| **final Comments on PROFESSIONAL BEHAVIOUR Competencies** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Half Way** | | | | **End of Placement** | | | |
|  | **Not Competent** | | **Competent** | | **Not Competent** | | **Competent** | |
| **Professional Development Competencies** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** | **Not Evident** | **Emerging** | **Evident** | **Enhanced** |
| 34. Take responsibility for personal and professional development. |  |  |  |  |  |  |  |  |
| 35. Actively engage in supervision and request and utilise professional support. |  |  |  |  |  |  |  |  |
| 36. Implement a learning contract. |  |  |  |  |  |  |  |  |
| 37. Identify own personal and professional strengths and limitations. |  |  |  |  |  |  |  |  |
| 38. Maintain a record of personal and professional development (i.e. portfolio) |  |  |  |  |  |  |  |  |

|  |
| --- |
| **Halfway Comments on professional development competencies** |

|  |
| --- |
| **final Comments on professional development competencies** |

# Appendix B: ****Practice Educator Portfolio Marking Grid****

|  |  |
| --- | --- |
|  | **Discipline of Occupational Therapy, University of Galway** |

**Practice Education Portfolio Marking Grid 3rd Year**

Students are asked to complete these templates, a) concisely b) factually and c) to the standard expected in the work site. They must include one relevant resource. This can be Legislation, National or Local policy, Local procedures document, Code of Conduct, Professional Best Practice document or published research. The whole resource does not need to be included; the relevant page/s only need to be included with a reference stating the source/title of the resource.

|  |  |  |
| --- | --- | --- |
| **Name of Student** | Fail | Pass |
| **DESCRIPTION OF LEARNING ENVIRONMENT** | One Template not completed or of poor quality, incomplete or incorrect content. Resource not relevant | One Template completed to practice standard. Relevant resource |
| **Reflection one** | One Template not completed or of poor quality, incomplete or incorrect content | One Template completed to practice standard. |
| **reflection two** | One Template not completed or of poor quality, incomplete or incorrect content | One Template completed to practice standard. |
| **reflection three** | One Template not completed or of poor quality, incomplete or incorrect content | One Template completed to practice standard. |
| **reflection four** | One Template not completed or of poor quality, incomplete or incorrect content | One Template completed to practice standard. |
| **Learning contract** | Learning contract not present not completed | Learning contract present and complete |
| **Case study presentation** | One Template not fully completed | One Template completed to practice standard. |
| **Study hours form** | One Template not fully completed | One Template completed to practice standard. |
| **Learning needs summary** | One Template not fully completed | One Template completed to practice standard. |
| **Supervision forms** | Less than six forms provided without explanation or not, signed by educator | Six forms provided, all signed by educator |

Signed:

Date Block Capitals

# Appendix C: 21. Consent Form for Retention of Copy of Student Practice Education Assessment Form

|  |  |
| --- | --- |
|  | **Discipline of Occupational Therapy, University of Galway** |

I.............................................................................................................................. (Print name)

Occupational Therapy Student at University of Galway

hereby fully and freely consent to my final assessment form for my Level Two Placement (Block 1) / Level Two Placement (Block 2) \* being held by the Occupational Therapy Manager / Educator/ Tutor\*\*

Name of Manager / Educator/ Tutor \*

……………………………………………………

I understand and acknowledge that the form will be accessed by (Name of Manager / Educator/ Tutor \*)

………………………………………………………………… only and will not be accessed by anyone else without my written consent. I understand that the form will be accessed for the sole purpose of providing a reference for me should this be requested on my behalf. I understand that this form will be held for a period of five years, will be stored in a secure locked cabinet at all times and that access to it will be restricted to those named above.

I note that I may withdraw my consent at any stage and that the purposes of holding my assessment and the reasons for accessing it in the future have been explained to me by

……………………………………………………………………….. and that I have been given an opportunity to discuss this with him/her.

I ………………………………………………………………………………. do not wish my assessment form to be kept on file. I understand that I if I do not agree that a copy of my assessment form is retained the Occupational Therapy Manager / Educator/ Tutor\*\* of this service they will be unable to provide a reference if requested on my behalf due to lack of information.

**Signed:** **Date:**

WITNESS to signature of student and to fact that he/she has read the document and freely given his/her consent:

**Signed:** **Date:**

(Witness **must not** be the person who will have access to the file). \* Delete as appropriate.

**Please return the original copy of this form to the University.**