

Speech and Language Sciences Section School of Education, Communication and Language Sciences

BSc/MSLS Stage 3 Students Semester One 8-week Block Placement

Placement Specific Information for Practice Educators

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1. Introduction

This document contains information specifically related to the BSc 3 placement in semester 1.

The document should be read in conjunction with the 'General Placement Pack', where more detailed information regarding Newcastle University placement procedures can be found.

Prior to each placement, students are encouraged to read their 'Placement Handbook'; the student equivalent to the Practice Educator Packs.

Practice Educators can access placement documentation, including documents produced for students, via the university Extranet. This is a password protected site. You should approach your CCC representative for password details.

2. DATES OF PLACEMENT 20/10/25 - 12/12/25 3. AIMS OF PLACEMENT

To provide clinical practice that will allow students to implement, under supervision, a case-based management approach, applying theory of assessment and intervention, and to evaluate their own

LEARNING OUTCOMES

performance.

At the end of the placement, students will be able to:

- apply theory to assessment selection and interpretation of assessment data
- critically question and compare assessment and treatment procedures
- use assessment data to plan intervention
- plan and implement case management using a problem-solving approach
- · critically evaluate assessment and intervention
- work as a member of the inter-professional team
- evaluate own performance

4. PLACEMENT OPTIONS AND REQUIREMENTS

This eight-week block placement is a flexible placement to give students optimum exposure to the workplace with experienced Speech and Language Therapists. The student is expected to complete five full days per week of clinical or clinically related work including the following options:

- 4 days of client contact in one clinical context, 1 day preparation and reading
- 2 days of client contact in each of two clinical contexts (not necessarily in the same organisation), 1 day preparation and research

- 3 days of client contact in one clinical context, 1 day client contact in non-clinical context
 with the aim of gaining deeper understanding of the client group or the context e.g., care
 home, day centre, school, nursery; 1 day preparation and research
- Other options as discussed and agreed with the Director of Clinical Education (DCE)

Number of clients: Manage approximately 8-10 clients per 4-day week by the final weeks of

placement. This will depend on the type of client and the number of clinical

sessions provided and may of course vary from this.

For the purpose of the case report, it is helpful if the student has at least

one case they are seeing regularly.

Service delivery: In person or remote (telehealth) delivery (whichever method(s) are being

employed by a specific service/practice educator)

Preparation time: Allocation of 2 sessions per week for preparation is recommended. This

enables the student to gain access to the University/other library to explore

the evidence base.

Observation is a valuable part of the student's learning and may particularly useful initially when the student is working with a new client group.

5. ASSESSMENT

Semester 1 Written Case Report (50%) (details can be found in appendix i)

Unseen Clinical Viva (50%) (examination at the university)

Clinical Evaluation Report – competency-based assessment

6. IN THE EVENT OF ANY PROBLEMS...

Sometimes problems are encountered on placement. These may relate to concern over the student's progress, uncertainty around expectations or worries around possible failure. In these instances, it is extremely important that we talk with you about your concerns. If you have already discussed these with your colleagues and/or Manager and feel that you need advice or further discussion, please do not hesitate to contact us. We need to support you in these situations as well as ensure that the student has had an opportunity to fairly address your concerns during the course of the placement. Please contact the Director of Clinical Education (Helen Nazlie). Depending on the level and nature of your concern, we will discuss these over the telephone/MS Teams or arrange to visit you and the student immediately.

There are clear guidelines in place setting out the procedures in the event of failure in clinical assessments – you can access this information from your CCC or SPEC representative or contact us to discuss.

7. PRACTICE EDUCATOR CHECKLIST

The aim of the checklist is to summarise the main events that are encouraged during each clinical placement. The checklist reflects a number of recent changes to clinical placement education, whereby

students are encouraged to make clear links between approaches introduced during teaching and

application to clinical cases.

When	Activity	Guidance (Section(s) of pack)	Completed (√)
Before the placement begins	CCC reps/Practice Educator (PE) send placement information packs to students Students to email a copy of their clinical passport to PE(s)	8	
	Practice educators refer to placement packs for information, guidance and placement preparation (General Placement Pack and Placement Specific Pack)		
At the start of the placement	Students to provide a copy of their Personal Clinical Goals (included in clinical passport)	8.b	
	Students should select one case that she/he is seeing regularly to write up as a case study	4	
During the placement	Mid-placement evaluation (Using mid-placement review record sheet)	10	
	Students to complete 'My Cases' section of ePortfolio for at least 2 clients whilst on placement. Students to submit printed copy to Practice Educator(s)	8.c	
	Students encouraged to record experiences and reflections on their Clinical ePortfolio, as part of the supervisory process	8.f	
	Practice educators to provide opportunity for interprofessional learning and / or dysphagia, where possible	8.d 8.e	
	Students to complete their sections of the final CER first and submit to PE(s)	10	
At the end of placement	Final Evaluation (CER)	9, 10	
	Practice educators send completed Clinical Evaluation Report(s) to Clinical Secretary		

8. THE CLINICAL PASSPORT & EPORTFOLIO

The clinical passport is a student-held record of clinical placement experience and is the document that students take to each placement. The clinical ePortfolio facilitates student learning on each

placement and allows demonstration of learning, providing evidence for the Clinical Evaluation Report. The clinical ePortfolio is integrated within the main university ePortfolio.

The clinical passport and clinical ePortfolio are similar to the on-line tools used by qualified Speech and Language Therapists to record evidence of their continued professional development; this is a mandatory requirement of the HCPC.

Clinical Passport

The clinical passport contains information relevant for the placement provider and practice educators. The information within the passport enables practice educators to gain an idea of a student's previous experience and learning needs and can assist with placement planning. It also provides essential information about fitness to practise.

The clinical passport has a number of sections:

- About Me
- Record of placement experience
- Training record
- Health and/or disability information
- Personal clinical goals
- Placement letter

Record of Placement Experience

This is a detailed record of a student's clinical experience and attendance for each placement; it builds over time. The record breaks down previous experience by setting and by client group. This helps practice educators to think about the opportunities that may be available on placement and the support the student may require.

Training Record

This section allows students to record any relevant training they have undertaken. This will include the pre-placement training carried out at the university e.g. information governance, safeguarding sessions, any additional statutory and mandatory training completed during placements e.g. infection control, plus any additional relevant training students have carried out for interest or as part of a voluntary role e.g. Makaton training.

Health and/or Disability Information

This section contains information for the practice educator about health conditions or disability. This includes any recommendations/adjustments that have been provided by student wellbeing or occupational health and a risk assessment if needed. Where relevant, the content of this section will be agreed in discussion between the student and director of clinical education.

Personal Clinical Goals

The clinical passport will contain a student's provisional personal clinical goals for the current placement. The ePortfolio enables students to develop their personal clinical goals and maintain a record of progress over time (see later section). Prior to placement, students are required to devise goals in preparation for their initial meeting with the practice educator. These goals are then included in the passport. It is recognised that goals are likely to undergo some change/update following this initial discussion (e.g. goals may be altered in line with opportunities available on a placement).

Placement Letter

The placement letter includes information about DBS date and certificate number, occupational health clearance confirmation, information governance training and safeguarding training. The clinical secretary will issue students with a placement letter which will form an appendix to the passport. The letter provides information for the placement provider but may also need to be shown to other organisations e.g. schools, day centres.

Students are required to update the electronic version of their clinical passport prior to each placement. It is a student's responsibility to send a copy to the practice educators via email, as soon as possible before the placement start date.

The Clinical ePortfolio

The Clinical ePortfolio has a number of sections:

- My Placements
- My Goals and My Competencies
- My Cases
- Inter-professional Opportunities and Reflections
- Dysphagia Opportunities and Reflections
- My Blog

a. MY PLACEMENTS

This enables students to keep a record of their placements.

b. MY GOALS AND MY COMPETENCIES

This enables students to develop personal clinical goals and maintain a record of progress.

Practice Educator Role:

- Students are required to take a printed copy of their Personal Clinical Goals from their eportfolio to PEs during the first week of placement. Although it is their responsibility, students may need reminding.
- Students are encouraged to record evidence relating to goals and competencies using the
 e-portfolio. Practice Educators may ask students to refer to their records of evidence on the
 e-portfolio when completing the CER during the mid-term and final evaluation.

c. MY CASES

This encourages students to apply the Case Based Problem Solving (CBPS) approach to cases whilst on placement.

The 'My Cases' section uses the seven questions of case management as a guide.

Practice Educator Role:

- Students should be encouraged to work through 'My Cases' for at least 2 clients whilst on placement.
- Students are asked to submit a printed copy of the 'My Cases' document to their Practice Educator. This ensures students are applying the CBPS framework to clinical management. Practice educators can choose how they use this piece of work. It does not have to be marked or commented upon. It can however provide evidence of student's ability that may contribute to assessment of the student (i.e. the CER) and can be used as a basis for case discussion (this is helpful preparation for the unseen viva assessment).

d. Inter-professional Opportunities and Reflections

Students are required to record any inter-professional experiences (some or all) in their Clinical ePortfolio and reflect on what they have learnt from these.

Students are encouraged to draw on their vast experience of working in groups (on the course, outside the course e.g. at work, sports teams, committees) and the frameworks they have been given for exploring group membership and development, describing group dynamics and for identifying whether group work is effective. Students may wish to show written reflections in relation to this as a basis for discussion.

A number of the competencies that students are expected to develop over the course of the programme relate to effective team-working. Learning to work with other professionals in the workplace is a very important part of providing seamless client-centred care and essential in order to meet the competencies required to work as a Speech and Language Therapist.

A subset of the clinical competencies on the Clinical Evaluation Report relate directly to interprofessional working.

Practice Educator Role:

- To provide opportunity for inter-professional learning, where possible.
- To encourage students to record and reflect on experiences using the IPL blog section of the Clinical ePortfolio

e. Eating, drinking and Swallowing - Experience and Reflections

Students can record any clinical experience and reflections they might have during placement that relates to dysphagia in their Clinical ePortfolio.

Each student has a RCSLT Pre-Registration EDS Competencies Hours Log which is used on placement to record evidence of experience related to eating, drinking and swallowing.

PEs are not required to arrange specific EDS opportunities for this placement but should sign to verify any EDS experience that the student undertakes as part of the usual placement opportunities.

Practice Educator Role:

To sign to verify EDS experience on placement.

PEs are not expected to sign off student competencies.

f. My BLog

This allows students to reflect on any aspect of their clinical or academic work. The blog provides an opportunity to develop reflective writing skills whilst facilitating students' learning and is an important part of the reflective model of supervision.

Practice Educator Role:

 Practice educators may encourage students to record their written reflections of sessions, experiences etc. on the e-portfolio. Students are able to print entries from the 'my blog' section to share with their Practice Educator as part of the supervisory process.

9. CLINICAL EVALUATION REPORT

The CER lists the competencies that students are expected to develop and demonstrate during the course. The competencies underpin the achieving of the clinical and professional Standards of Proficiency set out by the HCPC. The competencies are organised into six broad areas: -

- Professionalism
- Assessment
- Description and diagnosis of the client's communication and/or swallowing
- Planning of client management
- Intervention
- Service delivery

When completing the report, students and Practice Educators need to review the opportunities that have been available to demonstrate the skill and then consider whether the competency has been met.

Expected level of competency

Students are expected to demonstrate consistent ability in each of the competencies by the end of the course. The levels of competence that the student is expected to achieve by the end of the academic year are in **bold underlined print** on the report form relevant to the year of study. Each competency is rated according to whether the competency is not evident, emerging, competent or not applicable.

Rating Scale

Competent: The student has demonstrated consistent ability in this area.

Emerging: The student has demonstrated some ability in this skill and is aware

of his/her need to develop it

Not evident: The student has not demonstrated this skill during his/her

placement

Not applicable: The student has not had the opportunity to demonstrate this skill during the

placement

Overall Assessment Mark

Students are awarded an overall mark of PASS or FAIL.

PASS: The student has reached competency in most or all areas expected for the

corresponding stage of the course

FAIL: The student has not reached the level of competence required for the corresponding stage of the course.

The mark does not form part of the module mark but each CER needs to be passed for students to continue with the clinical programme. Following the mark, there is an opportunity for Practice Educators to comment on particular strengths and areas where improvement has been seen and areas for future development. Students should consider these sections when thinking about their personal clinical goals.

The CER was updated in consultation with CCC and SPEC in 2014. Any comments are always welcome to your CCC member with respect to content, format and procedure.

The CER is emailed to Practice Educators via their CCC Reps with PE Packs.

Copies of the CER are also available on the Extranet.

Please complete the CER electronically and return to the university via email: SLSClinic@ncl.ac.uk

If you are unsure how to complete it please contact the DCE for help before you talk to the student about it.

You may also refer to 'Helpful Hints for Completing the Clinical Evaluation Report'.

See the procedure for mid-placement and final evaluations, below.

10. MID AND FINAL EVALUATION

Students receive an evaluation mid-way through the placement and at the end of the placement. The mid-placement evaluation has been identified by students as an essential milestone in their development. Students should be given advance notice so that they can reflect on where they think they are in relation to achieving their personal goals and meeting the clinical competencies.

The Clinical Evaluation Report (CER) would ideally form the basis of the mid-placement evaluation, drawing on the Student Personal Clinical Goals to ensure that the appropriate competencies are being developed. There is a section on the Personal Clinical Goals document to note remarks at both evaluation points. Practice Educators should record the outcome of the mid-placement meeting using a *mid-placement review record sheet* which identifies clear learning needs and provides the student with clear account of progress at the mid-placement stage. This is signed by the Practice Educator and student and a copy is held by the Practice Educator. A copy of the form can be found within the main CER. The completed form should be submitted with the final CER. A copy of the form can also be found within the general placement pack and on the SLT Extranet.

It is advisable to make systematic observations and notes during the course of the placement to act as a basis for giving on-going feedback to the student. This will ensure as objective assessment as possible.

Before the final evaluation the student should be requested to complete their reflections on the CER and submit it in advance to the Practice Educator(s) for the Practice Educator(s) to complete. Detailed comments help the student to reflect on their learning and future development needs. Where more than one Practice Educator is involved, it is recommended that Practice Educators meet and agree how information will be collated and how feedback will be given to the student. If your assessment of performance is that the student is borderline Pass/Fail, please contact the Director of Clinical Education to discuss the mark before meeting with the student. Only one CER should be filled out per student.

The **general feedback section** at the end of the CER is important to identify areas of particular strength and to help the student plan for the next stage in their development.

Please ensure students sign the CER during the final feedback session.

11. FEEDBACK TO PRACTICE EDUCATORS

The Speech and Language Sciences Section, in conjunction with the CCC, has introduced a **Clinical Placement/Educator Feedback Form** that is completed by all students at the University immediately following the placement. This feedback is completed electronically by the student and anonymised before a copy is sent to each individual Practice Educator and the Manager. A summary of this feedback (all information anonymous) is collated by the DCE and circulated to and discussed at CCC and SPEC to ensure relevant issues are addressed.

12. USEFUL CONTACTS...

Director of Clinical Education: Helen Nazlie (0191 208 8763)

helen.nazlie@ncl.ac.uk

Placement Coordinator: Lucinda Somersett (0191 208 5196)

lucinda.somersett@ncl.ac.uk

Clinical Education Assistant: Bethany Jones (0191 208 6377)

SLSClinic@ncl.ac.uk

APPENDIX I: WRITTEN CASE REPORT

Guidelines for Stage 3 Written Case Report

In the first two weeks of the placement, each student should select one case that she/he is seeing regularly to write up as a case study. The content of the case study will vary depending on the client seen and the stage of the clinical process e.g. assessment versus intervention.

The aim of the case report is for you to demonstrate:

- 1. an awareness of the implications of the communication impairment for the client (i.e. how does the impairment influence the client in contexts other than the clinic?)
- 2. an ability to produce a communication profile for the client, integrating information from the case history, information about previous SLT intervention, observation, informal and formal assessment.

You may wish to highlight further information that would be beneficial and any further assessment you would have liked to carry out.

3. an awareness of the theory supporting the client's diagnosis

You might use models that attempt to capture the **typical development** of speech, language or literacy, or models that attempt to capture the locus of an **impairment/s** in children or in adults e.g. psycholinguistic or cognitive neuropsychological models. Sometimes neither a developmental nor an impairment model are primary, rather a **social model** where the focus is on interaction (between people and people or people and environment etc) is more suitable. Sometimes there is no appropriate available box-and-arrow model that is right for a client – in this case you will refer to appropriate literature to explain the diagnosis.

- 4. an ability to integrate assessment findings into the intervention programme (i.e. know which assessments, data and client led choices have informed your intervention and why).
- 5. an ability to evaluate the intervention programme.

Within the report, it is important to justify all of your decisions with reference to evidence. This will include reference to related research evidence, demonstrating an objective understanding of the significance of the findings to the client.

This piece of work is submitted to the university for marking after the placement has ended and is not assessed as part of the placement.

In structuring the case report, a possible framework may be:

- a) a brief overview of the client
- b) description of the communication profile and diagnosis
- c) the aims of, rationale for and content of intervention
- d) evaluation of the intervention

If you have the opportunity to carry out intervention, you should describe this, outline how you evaluated effectiveness and describe the client's progress. If appropriate, you may then want to discuss any future recommendations. If you do not have the opportunity to carry out intervention, you should describe what you would do and how you would evaluate it, with discussion about the hypothesised change.

APPENDIX II: CASE BASED PROBLEM SOLVING APPROACH

Seven Steps of Clinical Management

1.	What is the client's communication profile and diagnosis?
2.	Is any action indicated?
3.	What are the goals of intervention?
	a. Ultimate (prognosis)
	b. Long term (for episode of care)
	c. Short term (session plan)
	Which therapy approach or approaches should be used?
4.	What service delivery model should be chosen?
5.	How will generalisation be aided?
6.	How will the effectiveness of treatment be assessed?
7.	What range of options would be available to this client following this episode of care?

APPENDIX III: CLINICAL PLACEMENT TOOLKIT FOR STUDENTS







- ► Clinical Evaluation Report
- Clinical Passport share with PE(s) before placement commences
- ▶ Personal Clinical Goals
- ▶ ePortfolio



- ▶ Hard copy of your placement letter
- ▶ Smartcard as ID badge
- ▶ Basic equipment stationery items
- ▶ Reading, activities to complete



- Consider the skills required for the workplace and expectations within the service
- You are representing the service, the university and SLT profession
- ► CER: Ensure familiarity with 'Section A: Professionalism' competencies – consider how you will demonstrate competencies across all aspects of the placement