

# School of Health Sciences

# MSc DIAGNOSTIC RADIOGRAPHY (Pre-registration)

# MANAGEMENT OF CLINICAL EDUCATION

HANDBOOK

## 1 CLINICAL EDUCATION FOR STUDENTS OF DIAGNOSTIC RADIOGRAPHY

## 1.1 INTRODUCTION

Clinical education placements have a theoretical as well as a practical focus. They provide clear opportunities for students to develop, evaluate, organise and build upon academic learning in a progressive fashion. They enable integration of theory with practice and the safe, effective assimilation of the student into the multidisciplinary health care team.

Clinical and academic blocks are integrated programme elements and should not be viewed as standing al ( ) iwed u

#### Lecturers / Clinical Tutors / Student Liaison Officers

In addition to providing pastoral care and support, lecturers / clinical tutors / student liaison officers have responsibility for management and education of students on clinical placement and must adopt a key role in collaborating with practitioners to ensure equity of student experience and learning opportunity. They will contribute to the continuous evaluation and development of clinical education and will establish effective relationships with members of the multi-professional team.

#### **Clinical Supervisors**

Radiographers are responsible for the teaching and effective supervision of the student on a daily basis as

The student undertakes 11 weeks of clinical placement. The learner continues to develop their general radiographic expertise and further integrates into the multidisciplinary team. Theory is closely related to practice through critical reflection.

#### Practice Based Learning 3

The student undertakes 5 weeks of clinical placement. Close integration of theory with practice is facilitated with experience of specialised radiodiagnostic imaging modalities.

#### Practice Based Learning 4

The student undertakes 17 weeks of clinical placement. The learner continues the safe, effective and efficient integration into the multidisciplinary health care team whilst consolidating a general knowledge and skills base. The development of high level skills in problem-solving, critical analysis, evaluation and appraisal will prepare the student for continuing professional development and life-long learning in a multi-professional environment. An elective placement enables the student to expand their analytical and evaluation skills in a new environment, which broadens the experience and enables recognition of individual approaches to clinical practice (Appendix C).

## 2 FITNESS TO PRACTISE

The University has an obligation to ensure that graduates from its pre-registration healthcare programmes are fit to practise. This means we need to consider whether students:

have a long-term health condition or disability which could prevent them from practising safely without supervision;

have any criminal convictions or cautions which could make them unsuitable for registration;

have demonstrated that they can maintain the standards of conduct expected of a health professional.

## 3 APPEARANCE AND DRESS CODE

- 3.1 It is important for the student to develop the personal discipline and professional attitudes necessary for successful clinical practice. Patients attach great importance to the appearance of hospital staff and a high standard of personal hygiene and appearance should be maintained. Students should therefore dress in a manner which is likely to inspire public confidence and appropriate steps should be taken to minimise the risks of infection and cross contamination for patients and the public.
- 3.2 During clinical placement, students are required to wear the stipulated uniform. Name badges and dosimeters must be worn.
- 3.3 Duty shoes will be soft-soled, closed toe in black, navy or white. Fashion footwear or canvas shoes are not permitted.

3.4

#### 4 ATTENDANCE

- 4.1 Prior to clinical placement, the student will be given a timetable illustrating weekly clinical placements. These may not, except under exceptional circumstances and after discussion with the module coordinator, be altered.
- 4.2 For the 38 weeks of clinical placement in Practice Based Learning 1, 2, 3 and 4 100% attendance is required. All absence MUST be notified to the module coordinator and the clinical supervisor. A medical certificate is required for absence of more than 5 working days, this must be submitted to the module coordinator. All sick leave will be re-timetabled appropriately to ensure 100% attendance. Occasional absence of a day may be recovered by foregoing study half days; this must be negotiated with the module coordinator. Requests for consideration of extenuating circumstances should be

Any supervisor or assessor who has concerns about student performance levels in any of the domains of clinical practice has a clear responsibility to notify the module coordinator (Appendix C). After completion, the individual will notify the module coordinator who will arrange a meeting to discuss their concerns and explore possible actions.

On occasion a student may have concerns about the clinical placement experience they are having. If this cannot be rectified through communication and negotiation with the radiography team or they feel there may be a risk of them failing a component of their assessment then they must notify the module coordinator.

If a student is involved in a radiation incident, or near miss, the supervisor and the student must advise the module coordinator and the QMU Radiation Protection Supervisor (RPS) as soon as possible (Appendix E). The student is required to complete a radiation incident form and email the completed form to the module coordinator and the RPS within 48hours of the incident occurring (Appendix F).

If during placement the student has concerns about their well being or the well being of patients there is a support network in place to ensure the situation is dealt with quickly and efficiently (Appendix G).

#### 5.3 After the Clinical Placement

The student will submit Continuous Clinical Assessment Documentation (Section 14) to the assignment drop-box outside the school office in accordance with the assessment timetable published on the Hub. P

## 6 INSURANCE

Due to professional requirements, students on Nursing, Allied Health Profession and Healthcare Science qualifying programmes are required to hold professional indemnity insurance as a precondition of progressing to placement. This is most easily gained through the joining of the appropriate professional body, and information on this will be provided during the induction process into your programme.

If a student chooses to travel overseas for an elective placement, the overseas placement provider should insure the student for public liability insurance as a minimum. The University has in place travel insurance, the student should notify the Finance Office that they are going on placement where and when and obtain Insurance Policy Number and Emergency Contact information. Details can found on the Finance area of the intranet:

http://intranet.qmu.ac.uk/sites/finance/Insurance/Forms/AllItems.aspx

## 7 COMPLAINTS

The University has a Complaints Handling Procedure which can be found here: <u>http://www.qmu.ac.uk/quality/gr/default.htm</u>. The Procedure has three stages: frontline resolution, investigation and external review.

If a student has a complaint, they should discuss this with someone in the area which the student wishes to complain about (for example, for a complaint relating to speech and hearing sciences, this should be discussed with the Programme Leader or Module Coordinator for the module concerned).

The complaint will be considered under frontline resolution (unless complex) and a response will

take it to investigation stage immediately or it may be referred to the investigation stage by the person the student determined to discuss the complaint with at frontline resolution. Should the complaint be

## 8 GENERIC LEARNING OUTCOMES

8.1 By the end of Practice Based Learning 1, the student will be able to:

identify the key components of X-ray tubes, tables and accessories and describe their operation;

identify the display components of generator control consoles and demonstrate their functions;

demonstrate safe and effective handling and positioning of X-ray tubes;

demonstrate safe and effective use of collimation devices;

Describe and demonstrate correct utilisation of moving and stationary secondary radiation grids, erect buckys and cassette holders;

make X-ray exposures safely whilst

#### 8.2 By the end of Practice Based Learning 2, in addition to the above, the student will be able to:

describe the type and specification of imaging equipment in use;

describe and demonstrate correct utilisation of moving and stationary secondary radiation grids, erect buckys and cassette holders;

demonstrate effective communication with carers, relatives and members of the multi-professional team;

describe and utilise

8.4 By the end of Practice Based Learning 4, in addition to the above, the student will be able to:

demonstrate competence in performing all specified examinations;

critically evaluate radiographic images to distinguish the normal from the abnormal, discuss possible causes of abnormality and identify diagnostic and clinical significance;

demonstrate the ability to offer total patient care;

analyse the needs of patients and demonstrate competence in supporting them, their relatives and carers both physically and psychologically;

integrate with the multi-disciplinary team, give professional advice and act as an informed source of expertise;

discuss and evaluate the physical and technological principles of all imaging modalities;

analyse and critically evaluate the capabilities, strengths and weaknesses and hazards of all imaging modalities;

reflect on the physical and emotional impact of preparation and procedure upon the patient;

evaluate and discuss quality control procedures in imaging;

## 9 SPECIFIC LEARNING OUTCOMES – ROUTINE RADIOGRAPHY

9.1 Radiography in the Imaging Department, Wards and Operating Theatres

By the end of Practice Based Learning 1 the student will be able to:

demonstrate the ability to perform correctly and in their entirety, routine projections of: fingers and hand; wrist and carpal bones; forearm; elbow; humerus; shoulder girdle; toes and tarsal bones; ankle and tibia and fibula; knee.

demonstrate the ability to perform correctly and in their entirety, routine projections of: femur and hip; pelvis and sacroiliac joints; thorax.

demonstrate the ability to perform correctly and in their entirety, routine examinations of: thoracic contents; abdominal contents; kidneys, ureters and bladder.

demonstrating and describing appropriate methods of radiation protection;

demonstrate correct management of patients in routine situations.

By the end of Practice Based Learning 2, in addition to the above, the student will be able to:

demonstrate the ability to perform correctly and in their entirety, additional and alternate projections of:

fingers and hand; wrist and carpal bones; forearm; elbow; humerus; shoulder girdle; toes and tarsal bones; ankle and tibia and fibula; knee. demonstrate the ability to perform correctly and in their entirety, additional and alternate projections of:

## 9.2 Radiography Using Contrast Media

By the end of Practice Based Learning 2 the student will be able to:

identify and verify the expiry date and condition of contrast media;

under supervision, prepare contrast media for administration and discuss contraindications for use;

identify and discuss the indications and contraindications for intravenous urography and contrast examination of the biliary system, upper and lower gastrointes

describe and discuss local patient information documents and preparation instructions.

# 9.4 Image Processing

participate

# 11 CLINICAL EDUCATION

# 11.1 Practice Based Learning 1

#### 11.4 Practice Based Learning 4

The focus for Practice Based Learning 4 is the consolidation of general skills in radiography and the achievement o The Elective Placement is a required element of Practice Based Learning 4 and an exemption can be given only by the Module Coordinator or Programme Leader. Students will undertake an Elective Placement of four weeks duration to encourage the development of their practical, analytical and evaluative skills. The placements are arranged by the student and can be world-wide. Students will arrange the elective placement in Semester 7. Students who do not complete the continuous or staged assessment in Practice Based Learning

# 12 CLINICAL ASSESSMENT

## 12.1 Introduction

The technologies employed in the practice of diagnostic radiography are diverse and complex, the range of procedures undertaken is vast and the risks associated with the application of ionising radiation well known. It is necessary therefore that the student be supervised, observed and monitored throughn

# 13 STAGED CLINICAL ASSESSMENT

# 13.1 Format for Practice Based Learning 1 and 2

A total of four clinical staged assessments are required in Practice Based Learning 1 and 2:

The Assessor must terminate the assessment and take over the procedure if any SECOND REPEAT radiographs are required. This is recorded as a failed assessment and the Assessor notifies the module coordinator at the earliest opportunity. After appropriate counselling by the academic team, further clinical practice as required, and approval from the Convener of the Board of Examiners, the student will arrange a second diet assessment as soon as is practicable.

In the event of termination of assessment, the student MUST be told that the Assessor is taking over along with the reasons associated with this decision. The patient must be informed that the examination will continue with qualified staff and assured of a satisfactory outcome.

The student must be allowed to negotiate location(s) with the assessor, with the period being divided between areas if appropriate. For example, an assessment conducted between an Accident and Emergency room and a general room will allow the student to demonstrate a variety of skills and techniques.

It is the responsibility of the Clinical Tutor or Clinical Assessor to ensure that the student is prepared for the assessment procedure. However, the student has a responsibility for indicating the following points prior to commencement of the examination:

the student feels that the patient selected by the Assessor is unsuitable;

the student feels that, during this clinical block, they have had insufficient experience of the examination and/or the equipment.

These points cannot be used as mitigating factors in the event of failure of the assessment unless identified prior to the start of the assessment process. The student must immediately notify the module coordinator of any grievance.

13.4

In Practice Based Learning 1 and 2, supplementary and additional projections are NOT included in the assessment process.

In Practice Based Learning 1, a single patient must be used for ONE assessment only. If, for example, a patient is referred for examination of the knee and spine, they may NOT be used for assessment in both categories.

#### 14 OPERATION OF THE CLINICAL ASSESSMENT

#### 14.1 Clinical Assessor

The cover sheet records student, hospital, Assessor and examination information and should be completed by the student before examination starts.

Section 1 must be completed before the start of the examination with the Clinical Assessor completing the patient consent and pregnancy check appropriateness categories.

The student must indicate each point in section 1 verbally.

An automatic fail results if 1a) and 1b) carries a NO response and the assessment is terminated.

The student must be able, under 1e), to discuss the implications of patient sex, age and condition upon dose limitation.

In section 2 and 3, care must be taken not to tick the boxes as a matter of routine and without due consideration.

An automatic fail results if 3b) carries a NO response and the assessment is terminated. A clear, positive identity must be given by the patient or established by following local protocol.

An automatic fail results if 3g) carries a NO response and the assessment is terminated. Pregnancy check, if required, must be carried out according to local protocol.

Failure is the result of a total of three NO responses in sections 1e) and 5b) and 5h). Feedback is given to the student at the end of the assessment.

Failure is the result of NO responses in any 3 categories of section 4 and feedback is given to the student at the end of the assessment.

In sections 4-6, care must be taken not to tick the boxes as a matter of routine and without due consideration.

## 15 CT HEAD COMPETENCY

Students in Practice Based Learning 3 are required to demonstrate competency in CT Head imaging. To evidence completion of this competency the CT Head Checklist should be completed (Appendix J). Only one checklist is required to be completed. The individual elements of the checklist can be completed as the student develops their skills throughout the placement week. To pass the assessment the checklist should evidence

### 16 OPERATION OF THE ASSESSMENT OF COMPETENCE TO PRACTICE

In Practice Based Learning 4, theory is integrated with practice to provide a sound framework for the competent clinical practitioner. The development of high level skills in problem-solving, critical analysis, evaluation and appraisal will prepare the student for continuing professional development and life-long learning in a multi-

# 17 CONTINUOUS CLINICAL ASSESSMENT

#### 17.1 Introduction

The Continuous Clinical Assessment Programme will enable the student to develop from observer through participant to competent practitioner. The programme will demonstrate a clear pathway from the novice who is able to perform single tasks or discrete elements of a task to a competent member of the multi-disciplinary team who is able to apply a range of skills and knowledge to a wide range of situations. Evaluation of this progression is supported by continuous formative assessment (Appendix J), ePortfolio of clinical practice and

# TS3 OPERATION OF IMAGING EQUIPMENT

PBL 1: the student will be able to operate imaging equipment and accessories safely, effectively and

PBL 4: the student is able to function as an effective and efficient member of the multidisciplinary team promoting patient care and optimum service delivery.

### CS3 COMMUNICATING WITH PATIENTS, RELATIVES AND CARERS

PBL 1: the student is able to provide clear instructions to patients and carers before, during and after diagnostic imaging.

PBL 2: questions.

PBL 3: the student communicates clearly with regard to preparation for, experience during and consequences of specialist imaging procedures.

PBL 4: skills effectively.

-verbal

### 17.4.5 ORGANISATIONAL SKILLS

### OS1 PERSONAL PRESENTATION

All students must comply with QMU, local and national requirements as specified in the module handbooks.

### OS2 TIME MANAGEMENT

PBL 1: the student makes good use of unstructured time by using quieter times for study, reflection and role-play.

PBL 2: the student makes effective use of programmed and unstructured time to develop skills and

PBL1: the student willingly participates in all aspects of the department routine, including cleaning.

PBL2: the student initiates discussions with supervisors to enhance their learning and proactively engages in all aspects of the department workload.

PBL3: the student proactively makes use of departmental resources to enhance their learning.

PBL 4: the student proactively seeks learning opportunities: attends MDT meetings, arranges reporting sessions and participates in quality assurance tests/clinical audits.

It is the responsibility of the supervising radiographer to be aware of the outcomes in the performance report and to rate each student objectively and equitably. The ratings are:

The overall rating for Clinical Appraisal is achieved by rating the elements of each domain on a six-point scale

level of achievement in the specified learning outcomes.

- A The student is consistently performing well above the level of the learning outcome.
- B The student is performing above the level of the learning outcome.

### COLLATION AND MARKING SCHEME

Achievement levels from all outcomes, of every domain, of clinical practice are entered by the student onto the continuous Assessment Spreadsheet. The spreadsheet will automatically calculate and map the inputted data to the appropriate rating. The previous sheet provides examples of the ratings obtained from various combinations. The Module Coordinator will check the student marking and collate achievement levels.

**Collation and Marking Process:** 

the student downloads the spreadsheet from the Hub;

calculated. The half

the student inputs the data from the continuous assessment sheets into the spreadsheets using the codes A, B, C, D, E, F or Y, N for yes/no responses;

any missing or incomplete data leave the cell blank

the numerical values attached to each of the codes are:

А	6.5		
В	5.5		
С	4.5		
D	3.5		
Е	2.5		
F	1.5	Ν	1.5

Y does not have a numerical value as the student should be consistently working at the level of the learning outcome, the final rating will not be affected. If a student is rated N have a detrimental effect on the rating for the week, the domain of practice and the overall rating.

the spreadsheet automatically calculates the weekly, overall block and module domain ratings, this provides the student with feedback to evaluate their current status and progression throughout the module;

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Thorax and Contents

RNI

^ Mammography placements in the Breast Unit are for females only.
All students will experience an assessed CT placement and at least two additional 'specials'.
Students who do not achieve the CT scan outcomes for the head in PBL 3 will be placed in CT in PBL4.

5

Practice Based Learning 4

By the end of PBL 4 the student must have documented

### 18 ePORTFOLIO

As part of the Continuous Clinical Assessment strategy, the student is required to maintain an electronic portfolio of clinical practice and professional development using QMU ePortfolio (Pebble+). This will give the student opportunities to reflect upon clinical practice, learning and performance and to provide evidence of clinical experience and progress. It will form the foundation for continuing professional development and will be maintained and developed throughout the programme.

The ePortfolio will require collection and collation of information from a wide range of sources to provide evidence of competence, learning and understanding.

The ePortfolio will also include elements of personal reflection from individual clinical experiences.

### 18.1 Guidelines: See also ePortfolio Handbook

Use QMU ePortfolio which is accessed from the home page via the student IT login. A structural template is available through a gateway for students to utilise if they wish.

For each week of clinical practice in PBL1, 2 and 3 a full, reflective account of at least one procedure, experience or critical incident should be recorded using the appropriate proforma or blog. The student should also make the key elements of their learning on placement specific; this commentary should make reference to the learning outcomes stated in the handbook.

In PBL4 the students are required to critically reflect and provide evidence of clinical learning and development linked to six core, and two specific dimensions of the Knowledge and Skills Framework.

Additional and supplementary evidence of extended learning must be included and its relevance referred to explicitly in the writing.

Tutorials and discussions must be recorded and key elements of learning reflected upon.

The ePortfolio must contain a personal learning and development plan linked to the Knowledge and Skills Framework.

In PBL 4, a C-(I) 5 (2 792re W 2 9.316.4991235.0-9 (w) 2 ETT 9.9I10 (I) 5 (ec) -3.96 338.83 515.45 T(TT3 1(, re)



# School of Health Sciences Radiography Clinical Placement Initial and Continuous Monitoring Report

Organisation:	Clinical Tutor / Student Liaison officer(s)	:
Hospital:	Date of completion:	

Please complete the following form, indicating compliance with the following requirements for student placements. Please
use the notes section to provide evidence of how the requirement is met, or the action(s) required to achieve the
requirement.

denotes a mandatory requirement for placement approval.

Requirement

Yes No Notes

Section 1: Policies and Procedures

The placement provider can demonstrate the following policies are in place, in relation to students, and provide evidence of how they are implemented and monitored:

	Requirement	Yes	No	Notes
2.6	Local rules on all imaging equipment			
27	NHS Education for Scotland Quality Standards for Practice			

2.7 NHS Education for Scotland Quality Standards for Practice Placements

	Requirement	Yes	No	Notes
	Section 4: Supervisor and Assessor support The placement can provide evidence to demonstrate the follo	wing:		
4.1	There are sufficient experienced supervisors/ assessors to support the student learning experience			
4.2	Staff received appropriate training prior to supervising and	I	I	1

assessing students

	Section 5: Organisational The placement provider can provide evidence to meet the follow	wing requir	ements:
5.1	Promotion of a welcoming, supportive learning environment		
5.2	The department provides a range of learning experiences		
5.3	There is a system in place to provide pastoral care for the student		
5.4	Access to a library		
5.5		,	



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Practice Education Passport

FITNESS TO PRACTISE

The University has an obligation to ensure that graduates from its pre-registration healthcare programmes are fit to practise. Student Name \_\_\_\_\_

Completion of passport verified by:

Matriculation Number \_\_\_\_\_

Please date and sign the following on completion:

	Date	Signature
Receipt of PVG certificate		
Measured for uniforms		
Collection of name badge		
Health clearance check with Occupational Health Nurse		
Confirmation of Professional Indemnity Insurance		

Please date and sign when you have read the following documents:

	Date	Signature
HCPC guidance for students on Conduct and Ethics		
HCPC Guidance on Health and Character		
HCPC Standards of Proficiency: Radiographers		
HCPC Managing Fitness to Practise		
QMU guidance on Fitness to Practise		
SCoR guidance: dealing with bullying and harassment a guide for student radiographers		

	Date	Signature
Basic Life Support		
Child Protection		
Duty of Candour		
Infection Control (SIPCEP modules)		
Information Governance		

SCoR: verifying patient identification and seeking consent		
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# Supervisor and Assessor Reporting Proforma

The following proforma should be completed by a supervisor or assessor who has concerns about student performance levels in any of the domains of clinical practice. After completion, the

## **General Requirements**

The elective placement must be considered by the student in the same way as any other clinical placement. The elective placement is arranged by the student for 4 weeks during semester 7. A reflective account for each week must be included in the elective documention and the clinical procedures encountered included in the activity log.

# SUMMARY OF ELECTIVE PLACEMENT

Student to record dates as well as departments / hospitals attended.

Student name.....

Week Beginning

Hospital / Department

Student to complete a form for each elective week.

Week beginning.....

Hospital / Department.....

Procedures etc.

Outcomes achieved

Day 1

Radiation Incident Flowchart



APPENDIX F

# Radiation Incident Form

Please complete the following form and email to the Practice Placement Coordinator and the Radiation Protection Supervisor within 48hours of the incident.

Fill in as many details as you can, but remember if a patient is involved do not include any patient identifiable information.

Student:

Hospital Site:

Placement:

Date of incident:

Practice Educator(s):

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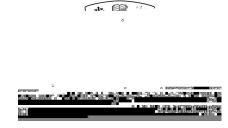
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Raising and Escalating Concerns Form



# MSc DIAGNOSTIC RADIOGRAPHY (Pre-registration)

# PRACTICE BASED LEARNING 1 and 2 STAGED CLINICAL ASSESSMENT

This page to be completed by the student.

\_\_\_\_\_

Name

Clinical Assessor completes the remainder of this document by ticking the boxes.

### 4 THE EXAMINATION – TECHNICAL

For ALL projections did the student:

- Yes a) position the patient and image receptor correctly? b) use the correct surface markings, centering point(s) and central ray direction(s)? protect the patient correctly through the use of collimators c) and accessory devices? select the correct anatomical marker and place it appropriately d) on the image receptor? correctly adjust and check pre-set exposure factors? e) f) instruct the patient clearly and concisely? use immobilisation and support devices appropriately to g) facilitate patient comfort and stability? observe the patient closely throughout the procedure? h) i) check that the exposure occurred?
- j) comply with the local rules governing safe use of ionising radiations?
- 5 THE EXAMINATION PATIENT CARE Did the student:
- a) adopt appropriate infection control measures and practices?
- b) communicate effectively with the patient throughout the examination?
- c) answer patient queries adequately?
- d) give consideration to the patients' physical condition and special requirements?
- e) attend to safety issues appropriately?
- f) upon completion of the examination, give appropriate and accurate information to the patient or their carer?
- g) ensure that the patient was fit to leave the department or was left in a comfortable condition on the ward?
- h) appear and act in a professional manner throughout?

# 6 THE EXAMINATION – ADMINISTRATION Did the student:

Yes	No
Yes	No

No



a)

## 7 THE EXAMINATION – DIAGNOSTIC QUALITY

### 9 GENERAL INFORMATION

Please delete inapplicable.

a) Was the student assisted with the examination? YES / NO

Specifically, what assistance was given?

b) Did the student encounter any difficulties? YES / NO

Specifically, what were they and how did the student deal with them?

c) Please make any other comments regarding student performance in this staged assessment that you feel are relevant.

# THE STUDENT SHOULD COMPLETE THIS PAGE TO RECORD EXAMINATION DETAILS

1.	Projection(s)	
2.	No. and size of image receptors	

3. For each projection, list the exposure factors as tabulated:

Projection	KVp	mA	Time	SID	IR	Grid?	Focus Size	S-Value/ Exposure Index

\_\_\_\_\_

## STAGED CLINICAL ASSESSMENT

### MARKING SCHEME

The student must pass the practical element of the Clinical Assessment before proceeding to the element of discussion with the Academic Tutor.

### CRITICAL ELEMENTS

- 1 An automatic fail is the result of a NO response in any of the following sections: 1a, 1b, 3b, 3c, or 3f.
- 2 An automatic fail is the result of a NO response in section 3g( if appropriate).
- 3 Failure is the result of three NO responses in section 1e and section 5b and h.
- 4 Failure is the result of NO responses in any 3 categories in section 4.

The clinical assessor and the student must report the failure to the Module Coordinator as soon as possible. As necessary, the student will be counselled and retrained prior to reassessment.



# MSc Diagnostic Radiography (Pre-registration) Practice Based Learning 4 Competence to Practice Clinical Assessment

Student	•••••
Assessor	
Date	
lospital	
Department(s)	

To be completed by Assessor:

PASS REFER

Percentage

### Feedback

The assessor should discuss the process and provide feedback to the student as soon as possible after the assessment is completed. Written comments should be provided below. What were the particular strengths of the student performance?

What specific aspects of student skills require further development?

Assessor's general comments.

I have discussed this assessment with the student. Assessor

## **CT Head Checklist**

Student: Matriculation Number			
The student can (please tick):	1	2	3
discuss CT Head requests appropriately			
(is contrast media indicated?);			
prepare the examination room;			
greet, positively ID and prepare patients;			
explain the procedure to the patients;			
assist patients on and off the couch;			
position and immobilise patients correctly;			
manoeuvre the gantry and couch correctly;			
recognise and discuss contrast agent contraindications, if appropriate;			
assist with the preparation and administration of contrast media, if appropriate;			
set up and produce a topogram / scannogram / scout;			
set up scan range;			
perform scan;			
offectively communicate with motionte during the		•	

effectively communicate with patients during the examination;

APPENDIX K

#### APPRAISAL INTERVIEW

Appraisal interviews will be conducted with Year 1 students following each PBL module. Students will receive feedback regarding levels of achievement in the clinical domain for the year based upon the collation of continuous clinical assessment documentation. The process will include discussion on students strengths and areas for development in addition to planning placements for the following year.

DATE OF INTERVIEW.....

Summary of points discussed and actions agreed

THE STUDENT SHOULD ONLY SIGN BELOW IF HE/SHE AGREES WITH AND ACCEPTS THIS APPRAISAL. IN CASES OF DISAGREEMENT THE APPRAISAL WILL BE REFERRED TO THE COURSE LEADER WITH ALL RELEVANT DOCUMENTATION.

STUDENT: \_\_\_\_\_LECTURER: \_\_\_\_\_

SIGNED:\_\_\_\_\_\_SIGNED:\_\_\_\_\_

## PRACTICE BASED LEARNING 1 CONTINUOUS ASSESSMENT

PLACEMENT TYPE	General Radiography
STUDENT NAME	
HOSPITAL & DEPT.	
DATES	

On a daily basis, the student and supervisor jointly completes the formative feedback. The student is responsible for ensuring that the supervisor completes the

Completion of the daily sheets:

Day	3:date	
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Morning

Afternoon

Day 5: date		Morning			Afternoon	
<u>Supervisor:</u>						
learning outcome:						
<ul><li>A well above the learning outcome level</li><li>B above the level of the learning outcome</li><li>C meeting the learning outcome</li></ul>		D E F		level of the learn the learning out		

ORG	ANISATIONAL SKILLS	<u>YES</u>		<u>NO</u>			
OS1	general appearance and uniform is professional and complies with local policies;						
		<u>A</u>	B	<u>C</u>	<u>D</u>	E	<u></u>

OS2

## PRACTICE BASED LEARNING 2 CONTINUOUS ASSESSMENT

#### Completion of the daily checte:

The student should initiate a discussion with their supervisor no later than one hour before the end of the day.

performance for the day and record the main points of the discussion on the relevant daily feedback section.

on the first day of placement the student anrET E8 -5 (k) -17 4 rvisoremus r(ni)14 () -9 g ou(s) -3 t for th

Day 3:date

## PRACTICE BASED LEARNING 3 CONTINUOUS ASSESSMENT

PLACEMENT TYPE	Cross Sectional Imaging or Specialist Placement
STUDENT NAME	
HOSPITAL	
DATES	

On a daily basis, the student is responsible for ensuring that the supervisor completes the Continuous Clinical Assessment proforma for attendance. Please rate the student using the categories listed below on the final day of placement:

- A The student is consistently performing well above the level of the learning outcome.
- B The student is performing above the level of the learning outcome.
- C The student is performing at the level of the learning outcome.
- D The student is performing below the level of the learning outcome, support is still required. Continued development of knowledge, skills or confidence required.
- E The student is performing well below the level of the learning outcome, constant support is required. Significant development of knowledge, skills or confidence required.
- F

made to meet the learning outcome.

#### Practice Based Learning 3

#### For Student Use Only

It is vital that QMU can provide meaningful feedback to departments that offer clinical placements. This will enable maintenance and improvement of standards and allow the sharing of good practice.

Please help by describing the experiences during this placement that had an effect – either positive or negative - upon your learning. Your comments will be collated into a report made available to participating departments. To encourage free expression of opinion and ensure confidentiality, individuals will not be identified. This page will be detached from the marking pack upon submission to the clinical coordinator.

Areas that you may wish to reflect on might include:

Were the radiographers expecting you?

Did they make you feel welcome?

Were you able to put some theory into practice, no matter how trivial? What was it?

Did the radiographers have an understanding of what you were capable of doing? If not, did you explain your previous experience?

## PRACTICE BASED LEARNING 4 CONTINUOUS ASSESSMENT

PLACEMENT TYPE	General Radiography
STUDENT NAME	
HOSPITAL & DEPT.	
DATES	

On a daily basis, the student and supervisor jointly completes the formative feedback. The student is responsible for ensuring that the supervisor completes the Continuous Clinical Assessment proforma on the final dais-61prof acmeent

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#### Completion of the daily sheets:

The student should initiate a discussion with their supervisor no later than one hour before the end of the day.

formance for the day and record the main points of the discussion on the relevant daily feedback section.

on the first day of placement the student and supervisor must agree learning outcomes for the week.

s attendance by signing the attendance boxes.

Day 1: date

Morning

Afternoon

Day 3:date

Morning

Afternoon

# ORGANISATIONAL SKILLS YES NO

OS1

### PRACTICE BASED LEARNING 4

#### For Student Use Only

It is vital that QMU can provide meaningful feedback to departments that offer clinical placements. This will enable maintenance and improvement of standards and allow the sharing of good practice.

Please help by describing the experiences during this placement that had an effect – either positive or negative - upon your learning. Your comments will be collated into a report made available to participating departments. To encourage free expression of opinion and ensure confidentiality, individuals will not be identified. This page will be detached from the marking pack upon submission to the clinical coordinator.

Areas that you may wish to reflect on might include:

Were the radiographers expecting you?

Did they make you feel welcome?

Were you able to put some theory into practice, no matter how trivial? What was it?

Did the radiographers have an understanding of what you were capable of doing? If not, did you explain your previous experience?

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