



## Summary of Work Based Assessments: Year 2

<u>Module</u>	<u>Assessment</u>	<u>Date completed</u>
RD2003	Clinical Evidence Log	
RD2003	Continuous Evaluation	
RD2004	Clinical Evidence Log	
RD2004	Continuous Evaluation	
RD2007	Clinical Evidence Log and Evaluation	

Signature of student \_\_\_\_\_ Date \_\_\_\_\_

Signature of link lecturer \_\_\_\_\_ Date \_\_\_\_\_

Signature of clinical co-ordinator \_\_\_\_\_ Date \_\_\_\_\_



<b>RD2003</b>	
<b>Axial Skeletal Radiography</b>	
Module Leader: Sue Humphries	
<b>Content</b>	<b>Weighting</b>
OSCE 1 - Positioning Simulation	20%
OSCE 2 - Image Evaluation	20%
Short Answer Exam	20%
Clinical evidence log – PWAs	40%
Continuous evaluation	Pass/Fail

<b>STUDENT CANDIDATE NUMBER:</b>	
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Year	Module Code	Axial Skeletal Radiography
2	RD2003	

## Aims and Objectives – RD2003

**Module RD2003** runs through Year 2, Terms 1 and 2, over part of a 12-week period of clinical practice.

### **Aim:**

This clinical module aims:

- To produce a competent and reflective health professional who is able to undertake general radiography of the axial skeleton and evaluate the resultant images, including the recognition of normal anatomy and common pathologies.

### **Learning outcomes:**

On completion of this module, the student should be able to:

1. Discuss the relevant imaging technique with reference to the anatomy and physiology of the axial skeleton
2. Explain the requirements of the imaging systems available for investigation of the axial skeleton
3. Show respect for clients and clinical colleagues in the working environment
4. Respect the confidentiality of patient details at all times
5. Discuss a range of evidence based practice in the imaging and management of clients
6. Discuss the necessary variations in imaging technique due to additional underlying pathologies
7. Demonstrate accurate preparation of the room
8. Communicate effectively with the patient and healthcare team
9. Discuss patient management in an inter-professional forum
10. Evaluate images effectively
11. Utilise IT skills effectively
12. Communicate effectively

### **Note:**

Students must work under the supervision of a qualified radiographer at all times.

Year	Module Code	Axial Skeletal Radiography
2	RD 2003	

## Clinical Evidence Log – Procedures Without Assistance

<b>Module Name/Year:</b> RD2003 Axial Skeletal Radiography/Year 2												
<b>Programme:</b> Undergraduate Diagnostic Radiography	<b>Degree contribution:</b> 3% <b>Pass Mark:</b> 40%											
<b>Hand in date:</b> Monday 6 <sup>th</sup> June 2011 by 3pm												
<b>Assignment Title:</b> RD 2003 Clinical Portfolio – Clinical Evidence Log – Procedures Without Assistance												
<b>Assessment Criteria:</b>												
<p>This component of the Clinical Portfolio aims to provide evidence that the student has participated in sufficient clinical examinations to have gained competence in routine and supplementary radiographic techniques of the axial skeleton. Over the duration of Module RD2003, the student is required to compile a record of evidence of clinical experience in the following aspects of clinical practice:</p> <table style="width: 100%; text-align: center;"> <tr> <td>Patient positioning Communication</td> <td>Patient care Image critique</td> <td>Health and safety</td> </tr> </table> <p>During the course of the module the student is required to undertake a total of <b>FIFTEEN (15)</b> examinations of the axial skeleton, which must be recorded and submitted as part of the student's Clinical Evidence Log. The student must record <b>at least one of each</b> of the following examinations:</p> <table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">Spine</th> <th style="width: 50%;">Skull/Facial bones</th> </tr> </thead> <tbody> <tr> <td>Cervical Spine</td> <td>Dental or DPT</td> </tr> <tr> <td>Thoracic Spine</td> <td>Skull (facial bones, orbits, mandible, TMJs, zygoma, lat. cephalogram)</td> </tr> <tr> <td>Lumbar Spine</td> <td></td> </tr> </tbody> </table>		Patient positioning Communication	Patient care Image critique	Health and safety	Spine	Skull/Facial bones	Cervical Spine	Dental or DPT	Thoracic Spine	Skull (facial bones, orbits, mandible, TMJs, zygoma, lat. cephalogram)	Lumbar Spine	
Patient positioning Communication	Patient care Image critique	Health and safety										
Spine	Skull/Facial bones											
Cervical Spine	Dental or DPT											
Thoracic Spine	Skull (facial bones, orbits, mandible, TMJs, zygoma, lat. cephalogram)											
Lumbar Spine												
<b>To make a total of 15 PWAs</b>												
<p>An examination is considered to be <b>all projections</b> required to complete the investigation for the patient. <b>Non-compliance with any of these criteria will result in an automatic fail for the assessment.</b>  <b>(A resubmission mark will be capped at 40%)</b>  <b>Only 15 forms will be issued; if more than 15 are submitted, the highest scoring sheets will be removed and not used for the overall mark.</b></p>												
<p>For each of these, the student <b>must complete a procedure without assistance but under supervision</b>; the supervising radiographer will observe the student during the procedure and will complete a 'Procedure Without Assistance' (PWA) form immediately afterwards, based on the aspects of clinical practice identified above. The radiographer will be required to sign and date the form, a technical fail will be given if the form is not marked and signed at the time of the examination. <b>Only ORIGINAL forms on the correct paper will be accepted.</b></p>												
<p>The student will be advised of interim deadlines, which are designed to help them keep on target and ensure that they complete the evidence log as they progress through the practice placement and module. If they experience or anticipate problems with completion of the log, they must notify the module leader and link lecturer <b>at least three weeks prior</b> to the submission date so that their placement allocation can be amended without inconvenience to other students or clinical staff.</p>												
<p>The student must attach the relevant front coversheet and obtain a receipt for their work.</p>												
<p><b>The pass mark is 40%. Please be aware that inclusion of any details which would make it possible to identify the patient will result in a technical fail.</b></p>												
<p>If you require additional guidance please contact Sue Humphries, <a href="mailto:s.humphries@city.ac.uk">s.humphries@city.ac.uk</a> or 020 7040 5680.</p>												

Forms are issued by the Module Leader/Clinical Co-ordinator only

Year	Module Code	Axial Skeletal Radiography
2	RD2003	

## Continuous Evaluation

<b>Module Name/Year:</b> RD2003 Axial Skeletal Radiography /Year 2							
<b>Programme:</b> Undergraduate Diagnostic Radiography	<b>Degree contribution:</b> 0.0% <b>Pass Mark:</b> Pass/Fail						
<b>Hand in date:</b> Monday 6 <sup>th</sup> June 2011 by 3pm							
<b>Assignment Title:</b> RD2003 Clinical Portfolio - Continuous Evaluation							
<p><b>Assessment Criteria:</b> Throughout the student's clinical training they will undergo continuous evaluation of their development in a number of key aspects in the clinical setting:</p> <table border="0"> <tr> <td>Knowledge</td> <td>Technical skill</td> <td>Communication with patients</td> </tr> <tr> <td>Team skills</td> <td>Dependence</td> <td>Communication with staff</td> </tr> </table> <p>As well as recording the student's progress in these aspects, continuous evaluation aims to provide an opportunity for reflection upon their development and practice whilst on clinical placement. Aspects to be considered might include:</p> <ul style="list-style-type: none"> <li>- the required learning outcomes for the module</li> <li>- the learning opportunities available</li> <li>- the student's expectations of the placement</li> <li>- the practical skills they have developed</li> <li>- their interactions with others in the clinical setting</li> <li>- what went well during the placement; what needs further development</li> <li>- what problems, if any, occurred; how these were dealt with and what has been learnt</li> <li>- the support they were offered</li> <li>- targets for future practice placements</li> </ul> <p>This evaluation will be completed towards the end of the student's placement in a particular area. For Module RD2003, this is likely to be after a placement where <b>Axial Skeletal Radiography is performed</b>.</p> <p>The evaluation will be completed by the student and a named supervising radiographer, and recorded on the 'Continuous Evaluation Form'. Both the student and the radiographer are required to consider and record the level of development that the student has reached, and to record reflective comments upon their progress, including areas for improvement and constructive criticism. Following its completion, the link lecturer will review the evaluation and record their comments on the form. In this way the link lecturer will monitor the student's progress and identify aspects requiring attention, which will be fed back to the module leader, personal tutor and student support co-ordinator.</p> <p><b>This evaluation is marked on a pass/fail basis:</b></p> <p>The clinical performance criteria to be achieved are graded from A to E; where a radiographer feels that the student is performing at a level <b>lower than grade C</b> in any of the criteria, the student is deemed to have <b>FAILED</b> the evaluation and, therefore, the module. In this case, the radiographer must inform the link lecturer who in turn must notify the module leader; the completion of a 'Cause for Concern' form will be required. The student cannot gain credit for the module until they have passed the Continuous Evaluation satisfactorily, which may require further clinical time in the relevant placement area.</p> <p>If the student experiences or anticipates problems with completion of the evaluation, they must notify the module leader and link lecturer <b>at least three weeks prior</b> to the submission date so that their placement allocation can be amended without inconvenience to other students or clinical staff.</p> <p>The student must attach the relevant front coversheet and obtain a receipt for their work.</p> <p>If you require additional guidance please contact Sue Humphries, <a href="mailto:s.humphries@city.ac.uk">s.humphries@city.ac.uk</a> or 020 7040 5680.</p>		Knowledge	Technical skill	Communication with patients	Team skills	Dependence	Communication with staff
Knowledge	Technical skill	Communication with patients					
Team skills	Dependence	Communication with staff					



CITY UNIVERSITY  
LONDON

DEPARTMENT OF RADIOGRAPHY

**CONTINUOUS  
EVALUATION FORM**  
**Module RD2003**  
Axial Skeletal Radiography

Student			
Placement		Date	
Named Radiographer			

*Placement objectives (these must relate to module subject):*

- The student's performance should be assessed according to each of the Clinical Performance Criteria below.
- The student is required to complete their evaluation, followed by discussion with and evaluation by their supervising radiographer; BOTH are required to indicate on this form their separate evaluation levels for the module.
- Please sign the appropriate box ('Student' or 'Staff') to indicate the student's performance (from A to E) over this placement.
- A form submitted without appropriate signatures will be deemed an **automatic fail** and therefore the module.
- N.B. Where the radiographer feels that the student is performing at a level **lower than grade C**, the student is deemed to have **FAILED** the evaluation and therefore the module. A 'Cause for Concern' form should be completed – please see the Link Lecturer.

<b>CLINICAL PERFORMANCE CRITERIA</b>												
	<b>KNOWLEDGE</b>		<b>TECHNICAL SKILL</b>		<b>DEPENDENCE</b>		<b>COMMUNICATION</b>				<b>TEAM SKILLS</b>	
							<b>PATIENTS</b>		<b>STAFF</b>			
<b>A</b>	The student consistently demonstrated: ▪ Evidence of theoretical knowledge. ▪ Sound use of professional vocabulary ▪ Good application of theory to practice. ▪ Achievement of all objectives.		The student consistently demonstrated: ▪ Appropriate confidence. ▪ Proficiency. ▪ Co-ordination. ▪ Accuracy. ▪ A professional attitude. ▪ Completion of tasks in appropriate time. ▪ Ability to identify and solve non-routine problems.		The student consistently demonstrated: ▪ Initiative. ▪ A sense of responsibility. ▪ Little need for support, although was supervised at all times		The student consistently: ▪ Communicated with all patients irrespective of gender, age or ethnicity using appropriate verbal and non-verbal communication. ▪ Demonstrated excellent listening skills. ▪ Communicated with patients in the presence of staff ▪ Showed sensitivity in all situations.		The student consistently: ▪ Communicated effectively across the range of staff levels, using appropriate verbal and non-verbal communication. ▪ Demonstrated good listening skills and a good telephone manner. ▪ Demonstrated excellent written communication.		The student consistently: ▪ Demonstrated professionalism in relations with staff. ▪ Participated in all areas of daily routine. ▪ Integrated very well as a member of the team.	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	
<b>B</b>	Frequently demonstrated: ▪ Evidence of theoretical knowledge and professional vocabulary. ▪ Some application of theory to practice. ▪ Achievement of major objectives.		Frequently demonstrated: ▪ Appropriate confidence. ▪ Efficiency. ▪ Co-ordination. ▪ Some evidence of problem solving. ▪ Professionalism. ▪ Accuracy. ▪ Completion of tasks within reasonable time.		Frequently demonstrated: ▪ Reasonable initiative. ▪ A sense of responsibility. ▪ Some need for support, although was supervised at all times		Frequently: ▪ Communicated with most patients irrespective of gender, age, ethnicity using appropriate verbal and non-verbal communication. ▪ Demonstrated good listening skills. ▪ Communicated with patients in the presence of staff. ▪ Showed sensitivity in most situations.		Frequently: ▪ Communicated effectively with most staff levels using appropriate verbal and non-verbal communication. ▪ Demonstrated good listening skills and a good telephone manner. ▪ Demonstrated good written communication.		Frequently: ▪ Demonstrated professionalism in relations with staff. ▪ Participated in most areas of daily routine. ▪ Integrated well as a member of the team. ▪ Demonstrated good progress whilst in the placement area	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	

## CLINICAL PERFORMANCE CRITERIA

C	CLINICAL PERFORMANCE CRITERIA											
	KNOWLEDGE		TECHNICAL SKILL		DEPENDENCE		COMMUNICATION				TEAM SKILLS	
							PATIENTS		STAFF			
C	<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Demonstrated evidence of theoretical knowledge and professional vocabulary.</li> <li>▪ Demonstrated application of theory to practice.</li> <li>▪ Achieved objectives.</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Skilful in some areas.</li> <li>▪ Accurate.</li> <li>▪ Experienced difficulties with co-ordination.</li> <li>▪ Demonstrated professionalism.</li> <li>▪ Demonstrated some evidence of problem solving.</li> <li>▪ Lacked confidence.</li> <li>▪ Inefficient.</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Needed verbal cues.</li> <li>▪ Demonstrated initiative.</li> <li>▪ Needed support, although was supervised at all times</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Communicated with patients using appropriate verbal and non-verbal communication.</li> <li>▪ Demonstrated listening skills.</li> <li>▪ Communicated with patients in the presence of staff.</li> <li>▪ Showed sensitivity in some situations.</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Communicated effectively with some staff levels.</li> <li>▪ Demonstrated good listening skills and a good telephone manner.</li> <li>▪ Demonstrated good written communication.</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Demonstrated professionalism in relations with staff.</li> <li>▪ Participated in areas of daily routine.</li> <li>▪ Demonstrated adequate integration into the working team.</li> <li>▪ Demonstrated some progress during their allocation.</li> </ul>	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	
D	<b>Seldom:</b> <ul style="list-style-type: none"> <li>▪ Demonstrated evidence of basic theoretical knowledge and professional vocabulary.</li> <li>▪ Demonstrated some application of theory to practice.</li> <li>▪ Achieved relevant objectives.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Safe with supervision.</li> <li>▪ Some evidence of professionalism</li> <li>▪ Poorly co-ordinated.</li> <li>▪ Required excessive amount of time to complete tasks.</li> <li>▪ Achieved relevant objectives.</li> <li>▪ Demonstrated some progress</li> </ul>		<ul style="list-style-type: none"> <li>▪ Some evidence of a willingness to learn</li> <li>▪ Retreated from responsibility.</li> <li>▪ Asked pertinent questions on occasions</li> <li>▪ Needed instruction in routine procedures.</li> <li>▪ Was supervised at all times</li> </ul>		<b>Seldom:</b> <ul style="list-style-type: none"> <li>▪ Communicated with patients using either verbal or non-verbal communication.</li> <li>▪ Demonstrated listening skills.</li> </ul>		<b>Seldom:</b> <ul style="list-style-type: none"> <li>▪ Communicated effectively with staff.</li> <li>▪ Demonstrated listening skills.</li> <li>▪ Demonstrated adequate written communication.</li> <li>▪ Demonstrated a good telephone manner</li> </ul>		<ul style="list-style-type: none"> <li>▪ Participated in some areas of daily routine.</li> <li>▪ Worked well with some members of the team.</li> </ul>	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	
E	<ul style="list-style-type: none"> <li>▪ No evidence of theoretical knowledge or professional vocabulary.</li> <li>▪ No application of theory to practice.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Inaccurate. Unsafe.</li> <li>▪ Inefficient. Very slow</li> <li>▪ Demonstrated a lack of professionalism.</li> <li>▪ Anxious</li> <li>▪ Failed to recognise their own limitations.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Needed repeated instruction in routine procedures.</li> <li>▪ Showed no initiative.</li> <li>▪ Inconsistent.</li> <li>▪ Was supervised at all times</li> </ul>		<ul style="list-style-type: none"> <li>▪ Communicated ineffectively with patients.</li> <li>▪ Demonstrated poor listening skills.</li> <li>▪ Over familiar.</li> <li>▪ Insensitive.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Communicated ineffectively with staff irrespective of level.</li> <li>▪ Demonstrated poor listening skills.</li> <li>▪ Over familiar.</li> <li>▪ Poor written communication.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Did not integrate into the working team.</li> <li>▪ Did not participate in areas of daily routine.</li> <li>▪ Did not demonstrate progress during their allocation.</li> <li>▪ Unprofessional in relations with staff.</li> </ul>	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	

**Students: if you do not sign a box/s in this section you will fail the evaluation.**

## **Named Radiographer's Reflective Feedback**

**Please comment as honestly and constructively as you can on the student's progress and achievements during this evaluation period (referring to competencies in the portfolio and following discussion with other radiography team members).**

**Signature of Radiographer :**

## **Student's Reflective Feedback**

**Please comment as honestly and constructively as you can on your perceived progress and achievements during this evaluation period (referring to your objectives on this form and in the competency summary in your portfolio).**

**Signature of Student :**

**Please read each other's reflective feedback and discuss any problems or issues arising. Minutes of pertinent or constructive points should be written below and fed back to the link lecturer and/or module leader.**

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### **End of Placement Discussion Summary**

Please identify any objectives that have yet to be met below (to be fed back to the module leader):

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<b>Signature of Radiographer :</b>	<b>Date:</b>
<b>Signature of Student :</b>	<b>Date:</b>

**This evaluation has been discussed with both parties present.**

<b>Signature of Radiographer :</b>	<b>Date :</b>
<b>Signature of Student :</b>	<b>Date :</b>





## RD2004

### Theatres, Mobiles and Mammography

Module Leader: Jo Thorogood

Content	Weighting
Case Study	50%
Clinical evidence log - PWAs	50%
Continuous evaluation	Pass/Fail

**STUDENT  
CANDIDATE  
NUMBER:**

Year	Module Code	Theatres, Mobiles and Mammography
2	RD2004	

## Aims and Objectives – RD2004

**Module RD2004** runs through Year 2, Terms 1 and 2, over part of a 12-week period of clinical practice.

### Aim:

This clinical module aims:

- To produce an informed and reflective practitioner, able to assist in a range of theatre, mobile and mammography examinations.

### Learning outcomes:

On completion of this module, the student should be able to:

1. Explain the equipment and legislative requirements when working in external environments such as operating theatres, general wards and external clinics
2. Discuss the imaging/film recording requirements for investigations undertaken in environments away from the X-ray department
3. Discuss a variety of reasons why imaging has to take place in external environments
4. Demonstrate respect for the unconscious patient
5. Acknowledge the range of conditions that necessitate imaging outside the X-ray department
6. Suggest a range of adaptation of technique to suit the environment the patient is in and pathology under review
7. Appreciate the limitations of theatre and mobile imaging
8. Discuss the radiation protection needs of staff and patients during theatre and mobile imaging
9. Recognise normal and abnormal radiographic appearances
10. Develop inter-professional working
11. Acquire time management and organisational skills

### Note:

Students must work under the supervision of a qualified radiographer at all times.

# Case Study

<b>Programme:</b> Undergraduate Diagnostic Radiography	<b>Degree contribution:</b> 1.9% <b>Pass Mark:</b> 40%
<b>Hand in date:</b> Monday 7 <sup>th</sup> February 2011 by 3pm	
<b>Module Title:</b> Theatres, Mobiles and Mammography	
<b>Assessment title:</b> RD2004 Clinical Portfolio - Case Study	
<b>Assessment Criteria:</b> This component of the Clinical Portfolio aims to provide evidence that you have participated in radiographic procedures in theatres, on mobiles or in mammography. The chosen case study must be one that you have participated in to a large extent.  The aims of the assessment are to: <ul style="list-style-type: none"><li>- Ensure that you reflect on practice and encourages consideration for the patients, staff and visitors throughout the procedure</li><li>- Ensure that you consider each stage of the examination effectively</li></ul>	
<b>Content – (85 marks)</b> The work must be in the form of a structured case study using the following headings:  <b>Introduction: (5 marks)</b> <ul style="list-style-type: none"><li>• Outlines aim of assignment</li><li>• Sets context of assignment</li><li>• Appropriate background information relating to the patient's condition and the procedure undertaken.</li><li>• Length is appropriate to word count</li></ul>	
<b>Main text – (70 marks)</b> <ul style="list-style-type: none"><li>• Discussion which explores and evaluates a range of issues under <b>all</b> of the following subheadings:<ol style="list-style-type: none"><li>1. Communication with both patient and staff,</li><li>2. patient positioning,</li><li>3. patient care and preparation,</li><li>4. health and safety,</li><li>5. radiation protection,</li><li>6. choice of equipment,</li><li>7. safe use of equipment,</li><li>8. difficulties encountered,</li><li>9. image evaluation,</li><li>10. patient outcome</li></ol></li></ul>	
<b>Conclusion – (10 marks)</b> <ul style="list-style-type: none"><li>• Clearly summarises and evaluates the main points discussed in assignment</li><li>• Text is related back to aim(s) of assignment</li><li>• New topics not raised within conclusion.</li><li>• Includes suggestions as to how future practice may be improved and quality can be maintained</li></ul>	
<b>Presentation (5 marks)</b>	
<b>Referencing (10 marks)</b>	
<b><i>For the assessment criteria on presentation and referencing students must access the feedback proforma via the following link:</i></b>	
1 hard copy and 1 electronic copy (on disc) <b>MUST</b> be handed in together at the time of submission - otherwise the work will not be accepted.	
<b>The word limit is 2000 words.</b>	

**Additional information:**

**For examples and guidance of how to reference visit the 'Upgrade' module in Cityspace or 'SCHS Learning Support' in Moodle.**

See the following link for guidance on essay style/format

<http://www.city.ac.uk/radiography/student/ugassessmentgeneral.html>

**See the following link for guidance on grade related criteria:**

<http://www.city.ac.uk/radiography/dps/student/course%20documents%20ug/Grade%20related%20criteria%20UG%20July%202010.pdf>

If you require additional guidance please contact Jo Thorogood ([j.thorogood@city.ac.uk](mailto:j.thorogood@city.ac.uk) OR 020-7040-5654)

If you experience or anticipate problems with completion of this case study, you must notify the module leader and link lecturer at least three weeks prior to the submission date so that your placement allocation can be amended without inconvenience to other students or clinical staff.

**On submission you will be required to confirm that:**

- The course work attached has not been presented for any other external award or publication and is exclusively my own work except where explicitly indicated (with quotations and citations).
- I have read and understood all assessment regulations relating to this assignment via the following link - <http://www.city.ac.uk/radiography/student/commonassessmentpp.html>
- I have no extenuating circumstances that I have not already declared.

*Please note that admin will not accept you coursework unless you sign agreeing with above statements. If you cannot sign at the time of submission you must speak to an academic member of staff (preferably the module leader).*

**Module learning outcomes that will be assessed:**

- Explain the equipment and legislative requirements when working in external environments.
- Discuss the image recording requirements for investigations undertaken in environments away from the x-ray department
- Discuss why imaging had to take place away from the x-ray department.
- Discuss the radiation protection needs of staff and patients during the procedure
- Appreciate the limitations of this type of imaging

Year	Module Code	Theatres, Mobiles and Mammography
2	RD2004	

## Clinical Evidence Log – Procedures Without Assistance

<b>Module Name/Year:</b> RD2004 Theatres, Mobiles and Mammography/Year 2										
<b>Programme:</b> Undergraduate Diagnostic Radiography	<b>Degree contribution:</b> 1.9% <b>Pass Mark:</b> 40%									
<b>Hand in date:</b> Monday 6 <sup>th</sup> June 2011 by 3pm										
<b>Assignment Title:</b> RD2004 Clinical Portfolio - Clinical Evidence Log - Procedures Without Assistance										
<p><b>Assessment Guidelines:</b> This component of the Clinical Portfolio aims to provide evidence that the student has participated in sufficient clinical examinations to have gained competence in mobile and theatre radiography. Over the duration of Module RD2004, the student is required to compile a record of evidence of clinical experience in the following aspects of clinical practice:</p> <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">Patient positioning Communication</td> <td style="text-align: center;">Patient care Image critique</td> <td style="text-align: center;">Health and safety</td> </tr> </table> <p>During the course of the module the student is required to undertake a total of <b>EIGHT (8)</b> examinations using mobile or theatre technique which must be recorded and submitted as part of the student's Clinical Evidence Log. The student must record the following examinations:</p> <table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: center;">Examinations</th> <th style="text-align: center;">Number Required</th> </tr> </thead> <tbody> <tr> <td>Mobile chest</td> <td style="text-align: center;"><b>Five (5)</b></td> </tr> <tr> <td>Operating theatre cases</td> <td style="text-align: center;"><b>Three (3)</b></td> </tr> </tbody> </table> <p><b>To make a total of 8 PWAs</b></p> <p><b>An examination is considered to be all projections required to complete the investigation for the patient. Non-compliance with any of these criteria will result in an automatic fail for the assessment. (A resubmission mark will be capped at 40%)</b>  <b>Only 8 forms will be issued, If more than 8 are submitted, the highest scoring sheets will be removed and not used for the overall mark.</b></p> <p>For each of these, the student is required to complete a procedure without assistance but under supervision; the supervising radiographer will observe the student during the procedure and will complete a 'Procedure Without Assistance' (PWA) form immediately afterwards, based on the aspects of clinical practice identified above. The radiographer will be required to sign and date the form, a technical fail will be given if the form is not marked at the time of the examination. <b>Only ORIGINAL forms on the correct paper will be accepted.</b></p> <p>The student will be advised of interim deadlines, which are designed to help them keep on target and ensure that they complete the evidence log as they progress through the practice placement and module. If they experience or anticipate problems with completion of the log, they must notify the module leader and link lecturer <b>at least three weeks prior</b> to the submission date so that their placement allocation can be amended without inconvenience to other students or clinical staff.</p> <p>The student must attach the relevant front coversheet and obtain a receipt for their work.</p> <p><b>The pass mark is 40%. Please be aware that inclusion of any details which would make it possible to identify the patient will result in a technical fail.</b></p> <p>If you require additional guidance please contact Jo Thorogood, <a href="mailto:j.thorogood@city.ac.uk">j.thorogood@city.ac.uk</a> or 020 7040 5654.</p>		Patient positioning Communication	Patient care Image critique	Health and safety	Examinations	Number Required	Mobile chest	<b>Five (5)</b>	Operating theatre cases	<b>Three (3)</b>
Patient positioning Communication	Patient care Image critique	Health and safety								
Examinations	Number Required									
Mobile chest	<b>Five (5)</b>									
Operating theatre cases	<b>Three (3)</b>									

**Forms are issued by the Module Leader/Clinical Co-ordinator only**



Year	Module Code	Theatres, Mobiles and Mammography
2	RD2004	

## Continuous Evaluation

<b>Module Name/Year:</b> RD2004 Theatres, Mobiles and Mammography/Year 2							
<b>Programme:</b> Undergraduate Diagnostic Radiography	<b>Degree contribution:</b> 0.0% <b>Pass Mark:</b> Pass/Fail						
<b>Hand in date:</b> Monday 6 <sup>th</sup> June 2011 by 3pm							
<b>Assignment Title:</b> RD2004 Clinical Portfolio - Continuous Evaluation							
<p><b>Assessment Criteria:</b> Throughout the student's clinical training they will undergo continuous evaluation of their development in a number of key aspects in the clinical setting:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Knowledge</td> <td style="width: 33%;">Technical skill</td> <td style="width: 33%;">Communication with patients</td> </tr> <tr> <td>Team skills</td> <td>Dependence</td> <td>Communication with staff</td> </tr> </table> <p>As well as recording the student's progress in these aspects, continuous evaluation aims to provide an opportunity for reflection upon their development and practice whilst on clinical placement. Aspects to be considered might include:</p> <ul style="list-style-type: none"> <li>- the required learning outcomes for the module</li> <li>- the learning opportunities available</li> <li>- the student's expectations of the placement</li> <li>- the practical skills they have developed</li> <li>- their interactions with others in the clinical setting</li> <li>- what went well during the placement; what needs further development</li> <li>- what problems, if any, occurred; how these were dealt with and what has been learnt</li> <li>- the support they were offered</li> <li>- targets for future practice placements</li> </ul> <p>This evaluation will be completed towards the end of the student's placement in a particular area. For Module RD2004, this needs to be after a placement on <b>mobiles or in theatre</b>.</p> <p>The evaluation will be completed by the student and a named supervising radiographer, and recorded on the 'Continuous Evaluation Form'. Both the student and the radiographer are required to consider and record the level of development that the student has reached, and to record reflective comments upon their progress, including areas for improvement and constructive criticism. Following its completion, the link lecturer will review the evaluation and record their comments on the form. In this way the link lecturer will monitor the student's progress and identify aspects requiring attention, which will be fed back to the module leader, personal tutor and student support co-ordinator.</p> <p><b>This evaluation is marked on a pass/fail basis:</b></p> <p>The clinical performance criteria to be achieved are graded from A to E; where a radiographer feels that the student is performing at a level <b>lower than grade C</b> in any of the criteria, the student is deemed to have <b>FAILED</b> the evaluation and, therefore, the module. In this case, the radiographer must inform the link lecturer who in turn must notify the module leader; the completion of a 'Cause for Concern' form will be required. The student cannot gain credit for the module until they have passed the Continuous Evaluation satisfactorily, which may require further clinical time in the relevant placement area.</p> <p>If the student experiences or anticipates problems with completion of the evaluation, they must notify the module leader and link lecturer <b>at least three weeks prior</b> to the submission date so that their placement allocation can be amended without inconvenience to other students or clinical staff.</p> <p>The student must attach the relevant front coversheet and obtain a receipt for their work.</p> <p>If you require additional guidance please contact Jo Thorogood, <a href="mailto:j.thorogood@city.ac.uk">j.thorogood@city.ac.uk</a>, or 020 7040 5654.</p>		Knowledge	Technical skill	Communication with patients	Team skills	Dependence	Communication with staff
Knowledge	Technical skill	Communication with patients					
Team skills	Dependence	Communication with staff					



CITY UNIVERSITY  
LONDON

DEPARTMENT OF RADIOGRAPHY

**CONTINUOUS  
EVALUATION FORM  
Module RD 2004**

**Theatres, Mobiles and Mammography**

Student			
Placement		Date	
Named Radiographer			

*Placement objectives (these must relate to module subject):*

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- The student's performance should be assessed according to each of the Clinical Performance Criteria below.
- The student is required to complete their evaluation, followed by discussion with and evaluation by their supervising radiographer; BOTH are required to indicate on this form their separate evaluation levels for the module.
- Please sign the appropriate box ('Student' or 'Staff') to indicate the student's performance (from A to E) over this placement.
- A form submitted without appropriate signatures will be deemed an **automatic fail** and therefore the module.
- N.B. Where the radiographer feels that the student is performing at a level **lower than grade C**, the student is deemed to have **FAILED** the evaluation and therefore the module. A 'Cause for Concern' form should be completed – please see the Link Lecturer.

CLINICAL PERFORMANCE CRITERIA												
	KNOWLEDGE		TECHNICAL SKILL		DEPENDENCE		COMMUNICATION					
							PATIENTS		STAFF		TEAM SKILLS	
<b>A</b>	The student consistently demonstrated: ▪ Evidence of theoretical knowledge. ▪ Sound use of professional vocabulary ▪ Good application of theory to practice. ▪ Achievement of all objectives.		The student consistently demonstrated: ▪ Appropriate confidence. ▪ Proficiency. ▪ Co-ordination. ▪ Accuracy. ▪ A professional attitude. ▪ Completion of tasks in appropriate time. ▪ Ability to identify and solve non- routine problems.		The student consistently demonstrated: ▪ Initiative. ▪ A sense of responsibility. ▪ Little need for support, although was supervised at all times		The student consistently: ▪ Communicated with all patients irrespective of gender, age or ethnicity using appropriate verbal and non-verbal communication. ▪ Demonstrated excellent listening skills. ▪ Communicated with patients in the presence of staff ▪ Showed sensitivity in all situations.		The student consistently: ▪ Communicated effectively across the range of staff levels, using appropriate verbal and non-verbal communication. ▪ Demonstrated good listening skills and a good telephone manner. ▪ Demonstrated excellent written communication.		The student consistently: ▪ Demonstrated professionalism in relations with staff. ▪ Participated in all areas of daily routine. ▪ Integrated very well as a member of the team.	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	
<b>B</b>	Frequently demonstrated: ▪ Evidence of theoretical knowledge and professional vocabulary. ▪ Some application of theory to practice. ▪ Achievement of major objectives.		Frequently demonstrated: ▪ Appropriate confidence. ▪ Efficiency. ▪ Co-ordination. ▪ Some evidence of problem solving. ▪ Professionalism. ▪ Accuracy. ▪ Completion of tasks within reasonable time.		Frequently demonstrated: ▪ Reasonable initiative. ▪ A sense of responsibility. ▪ Some need for support, although was supervised at all times		Frequently: ▪ Communicated with most patients irrespective of gender age, ethnicity using appropriate verbal and non-verbal communication. ▪ Demonstrated good listening skills. ▪ Communicated with patients in the presence of staff. ▪ Showed sensitivity in most situations.		Frequently: ▪ Communicated effectively with most staff levels using appropriate verbal and non-verbal communication. ▪ Demonstrated good listening skills and a good telephone manner. ▪ Demonstrated good written communication.		Frequently: ▪ Demonstrated professionalism in relations with staff. ▪ Participated in most areas of daily routine. ▪ Integrated well as a member of the team. ▪ Demonstrated good progress whilst in the placement area	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	

## CLINICAL PERFORMANCE CRITERIA

C	CLINICAL PERFORMANCE CRITERIA											
	KNOWLEDGE		TECHNICAL SKILL		DEPENDENCE		COMMUNICATION				TEAM SKILLS	
							PATIENTS		STAFF			
C	<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Demonstrated evidence of theoretical knowledge and professional vocabulary.</li> <li>▪ Demonstrated application of theory to practice.</li> <li>▪ Achieved objectives.</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Skilful in some areas.</li> <li>▪ Accurate.</li> <li>▪ Experienced difficulties with co-ordination.</li> <li>▪ Demonstrated professionalism.</li> <li>▪ Demonstrated some evidence of problem solving.</li> <li>▪ Lacked confidence.</li> <li>▪ Inefficient.</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Needed verbal cues.</li> <li>▪ Demonstrated initiative.</li> <li>▪ Needed support, although was supervised at all times</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Communicated with patients using appropriate verbal and non-verbal communication.</li> <li>▪ Demonstrated listening skills.</li> <li>▪ Communicated with patients in the presence of staff.</li> <li>▪ Showed sensitivity in some situations.</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Communicated effectively with some staff levels.</li> <li>▪ Demonstrated good listening skills and a good telephone manner.</li> <li>▪ Demonstrated good written communication.</li> </ul>		<b>Occasionally:</b> <ul style="list-style-type: none"> <li>▪ Demonstrated professionalism in relations with staff.</li> <li>▪ Participated in areas of daily routine.</li> <li>▪ Demonstrated adequate integration into the working team.</li> <li>▪ Demonstrated some progress during their allocation.</li> </ul>	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	
D	<b>Seldom:</b> <ul style="list-style-type: none"> <li>▪ Demonstrated evidence of basic theoretical knowledge and professional vocabulary.</li> <li>▪ Demonstrated some application of theory to practice.</li> <li>▪ Achieved relevant objectives.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Safe with supervision.</li> <li>▪ Some evidence of professionalism</li> <li>▪ Poorly co-ordinated.</li> <li>▪ Required excessive amount of time to complete tasks.</li> <li>▪ Achieved relevant objectives.</li> <li>▪ Demonstrated some progress</li> </ul>		<ul style="list-style-type: none"> <li>▪ Some evidence of a willingness to learn</li> <li>▪ Retreated from responsibility.</li> <li>▪ Asked pertinent questions on occasions</li> <li>▪ Needed instruction in routine procedures.</li> <li>▪ Was supervised at all times</li> </ul>		<b>Seldom:</b> <ul style="list-style-type: none"> <li>▪ Communicated with patients using either verbal or non-verbal communication.</li> <li>▪ Demonstrated listening skills.</li> </ul>		<b>Seldom:</b> <ul style="list-style-type: none"> <li>▪ Communicated effectively with staff.</li> <li>▪ Demonstrated listening skills.</li> <li>▪ Demonstrated adequate written communication.</li> <li>▪ Demonstrated a good telephone manner</li> </ul>		<ul style="list-style-type: none"> <li>▪ Participated in some areas of daily routine.</li> <li>▪ Worked well with some members of the team.</li> </ul>	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	
E	<ul style="list-style-type: none"> <li>▪ No evidence of theoretical knowledge or professional vocabulary.</li> <li>▪ No application of theory to practice.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Inaccurate. Unsafe.</li> <li>▪ Inefficient. Very slow</li> <li>▪ Demonstrated a lack of professionalism.</li> <li>▪ Anxious</li> <li>▪ Failed to recognise their own limitations.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Needed repeated instruction in routine procedures.</li> <li>▪ Showed no initiative.</li> <li>▪ Inconsistent.</li> <li>▪ Was supervised at all times</li> </ul>		<ul style="list-style-type: none"> <li>▪ Communicated ineffectively with patients.</li> <li>▪ Demonstrated poor listening skills.</li> <li>▪ Over familiar.</li> <li>▪ Insensitive.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Communicated ineffectively with staff irrespective of level.</li> <li>▪ Demonstrated poor listening skills.</li> <li>▪ Over familiar.</li> <li>▪ Poor written communication.</li> </ul>		<ul style="list-style-type: none"> <li>▪ Did not integrate into the working team.</li> <li>▪ Did not participate in areas of daily routine.</li> <li>▪ Did not demonstrate progress during their allocation.</li> <li>▪ Unprofessional in relations with staff.</li> </ul>	
	Student		Student		Student		Student		Student		Student	
	Staff		Staff		Staff		Staff		Staff		Staff	

**Students: if you do not sign a box/s in this section you will fail the evaluation.**

## **Named Radiographer's Reflective Feedback**

**Please comment as honestly and constructively as you can on the student's progress and achievements during this evaluation period (referring to competencies in the portfolio and following discussion with other radiography team members).**

**Signature of Radiographer :**

## **Student's Reflective Feedback**

**Please comment as honestly and constructively as you can on your perceived progress and achievements during this evaluation period (referring to your objectives on this form and in the competency summary in your portfolio).**

**Signature of Student :**

**Please read each other's reflective feedback and discuss any problems or issues arising. Minutes of pertinent or constructive points should be written below and fed back to the link lecturer and/or module leader.**

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### **End of Placement Discussion Summary**

Please identify any objectives that have yet to be met below (to be fed back to the module leader):

<b>Signature of Radiographer :</b>	<b>Date:</b>
<b>Signature of Student :</b>	<b>Date:</b>

**This evaluation has been discussed with both parties present.**

<b>Signature of Radiographer :</b>	<b>Date :</b>
<b>Signature of Student :</b>	<b>Date :</b>





<b>RD2007</b>	
<b>Specialised Modalities</b>	
Module Leader: Kevin McHugh	
<b>Content</b>	<b>Weighting</b>
Group Presentation	50%
Clinical Evidence Log	50%
CNS Pathology Review	PASS

<b>STUDENT CANDIDATE NUMBER:</b>	
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Year	Module Code	Specialised Modalities
2	RD2007	

## Aims and Objectives – RD2007

**Module RD2007's** clinical component runs throughout Year 2, the academic sessions are streamed with RD2005 and RD2006.

### **Aim:**

This clinical module aims:

- To enable the student to understand the basic physical principles of Magnetic Resonance Imaging, Nuclear Medicine and Ultrasound
- To allow the student to apply this knowledge and evaluate the clinical applications of Computed Tomography, Magnetic Resonance Imaging, Nuclear Medicine and Ultrasound.

### **Learning outcomes:**

On completion of this clinical module, the student should be able to:

1. Recognise normal anatomy and common variants of the nervous system
2. Describe the basic theoretical principles of MRI, NM, US, and CT
3. Describe the equipment requirements for MRI, NM, US and CT
4. Evaluate the applications of MRI, NM, US and CT for a range of pathologies and patient presentations
5. Evaluate the benefits and limitations of MRI, NM, Vascular and Non-Vascular Imaging, US, and CT when imaging patients
6. Discuss the most appropriate imaging modality for use with a particular condition

### **Note:**

Students must work under the supervision of a qualified radiographer at all times.

Year	Module Code	Specialised Modalities
2	RD2007	

## Clinical Evidence Log & Evaluation – Clinical Objectives

<b>Module Name/Year:</b> RD2007 Specialised Procedures/Year 2	
<b>Programme:</b> Undergraduate Diagnostic Radiography	<b>Degree contribution:</b> 3.75% <b>Pass Mark:</b> 40%
<b>Hand in date:</b> 13 <sup>th</sup> June 2011 – by 3pm	
<b>Assignment Title:</b> RD2007 Clinical Portfolio – Clinical Objectives	
<p><b>Assessment Criteria:</b>  This component of the Clinical Portfolio aims to provide evidence that the student has not only gained experience in the imaging modalities listed below but also gained knowledge through experience and enquiry based learning:</p> <ul style="list-style-type: none"> <li>- Computed Tomography</li> <li>- Magnetic Resonance Imaging</li> <li>- Ultrasound</li> <li>- Nuclear Medicine</li> <li>- Vascular and Non-Vascular Imaging</li> </ul> <p>The aims of the assessment are to:</p> <ul style="list-style-type: none"> <li>- Observe and investigate various procedures through experience and enquiry based learning</li> <li>- Gain knowledge of patient preparation, technique, and aftercare for the imaging modalities listed above</li> <li>- Evaluate the students' knowledge of anatomy</li> </ul> <p>The assessment itself comprises of three sections:</p> <ul style="list-style-type: none"> <li>- Clinical Evidence Log – A record of examinations that the student has observed</li> <li>- Anatomy – For one of the examinations recorded in the clinical evidence log the student will be asked to identify anatomy to the supervising radiographer</li> <li>- Discussion – For one of the examinations listed in the clinical evidence log the student will be asked to discuss patient preparation, technique, and aftercare with their supervising radiographer</li> </ul> <p>Students will be asked to complete a total of <b>6</b> clinical evidence log and evaluation forms:</p> <ul style="list-style-type: none"> <li>- CT – Brain (1),</li> <li>- CT - Chest, Abdomen, &amp; Pelvis (1)</li> <li>- MRI – Brain, Spine, Abdomen, Pelvis (1)</li> <li>- Ultrasound (1)</li> <li>- Nuclear Medicine (1)</li> <li>- Vascular Imaging &amp; Non-Vascular Imaging (1)</li> </ul> <p>Of the three sections the student will only be assessed by the supervising radiographer on the anatomy and discussion sections. Students are graded on their performance from A to E for both the anatomy and discussion sections, with an A being 5 marks and an E being equivalent to 1 mark. Students must achieve a minimum of a grade C for both the anatomy and discussion sections to pass the evaluation. Where a radiographer feels that the student is performing at a level <b>lower than grade C</b> in any of the criteria, the student is deemed to have <b>FAILED</b> the evaluation and, therefore, the module. In this case, the radiographer must inform the link lecturer who in turn must notify the module leader; the completion of a 'Cause for Concern' form will be required. The student cannot gain credit for the module until they have passed the Clinical Evidence Log &amp; Evaluation satisfactorily, which may require further clinical time in the relevant placement area.</p> <p>If the student experiences or anticipates problems with completion of the evaluation, they must notify the module leader and link lecturer <b>at least three weeks prior</b> to the submission date so that their placement allocation can be amended without inconvenience to other students or clinical staff. During clinical teaching weeks tutorials will be arranged to review the Clinical Portfolio. These will provide the opportunity to review the student's progress and to preview their targets for forthcoming practice placements.</p> <p>The student must attach the relevant coversheet (Clinical coversheet) and obtain a receipt for their work.</p> <p>If you require additional guidance please contact Kevin McHugh, <a href="mailto:k.mchugh@city.ac.uk">k.mchugh@city.ac.uk</a> or 020 7040 5677.</p>	

**Forms are issued by the Module Leader only**

## Recommended Reading/Resources

### **Clinical Radiography**

Stewart Whitley, A., Sloane, C., Hoadley, G. and Moore, A. D. (2005). *Clark's Positioning in Radiography*. 12th ed. Hodder Arnold  
ISBN-10: 0340763906 ISBN-13: 978-0340763902

Sutherland, R. (2003). *Pocketbook of Radiographic Positioning*. 2nd ed. Churchill Livingstone  
ISBN 0-443-07210-8.

### **Patient Care**

Ehrlich, R.A., McCloskey Doble, E. and Daly, J.A. (2004). *Patient Care in Radiography*. Mosby-Wolfe.

### **Anatomy**

Gunn, C. (2005) *Bones and Joints: a Guide for Students*. 4th ed. Churchill Livingstone.

Tortora, G.J., Grabowski, S. (eds.) (2002). *Principles of Anatomy and Physiology*. Harper Collins.

### **Imaging**

Wier, J., and Murray, A. (1998) *Mosby's Atlas and Text of Clinical Imaging*. Mosby-Wolfe.

Drafke, M. and Nakayama, H. (2000), *Trauma and Mobile Radiography*, F.A Davis.

Dandy, D. and Edwards, D. (2003). *Essential Orthopaedics and Trauma*, Churchill Livingstone 0443072132

### **Reflection**

Bulman, C., Schutz, S. and Burns, S. (2004) *Reflective Practice in Nursing: The Growth of the Professional Practitioner*. 3<sup>rd</sup> ed. Blackwell Publishing Ltd. ISBN 1405111127

Jarvis, P. (1992) *Reflective Practice and Nursing*. Nurse Education Today. **12** pp.174–181.

### **Professional Issues**

The College of Radiographers. (2004). *Statements for Professional Conduct*.

The Department of Health (2001) *Working Together – Learning Together: A Framework for Lifelong Learning for the NHS*. Department of Health Publications:

[www.publications.doh.gov.uk/lifelonglearning](http://www.publications.doh.gov.uk/lifelonglearning)

### **Legislation**

Health and Safety Executive. (2004) *Manual Handling Operations Regulations*. 3<sup>rd</sup> ed. HMSO.