Disclosure of Student Concern

Concerns about students can be at academic, clinical and personal levels. The following protocol has been agreed.

Where a student needs to attend for a resit clinical placement the full extent of concern about the student will be discussed with the supervising practice educator. This is a continuation of current practice.

In all other cases, the responsibility for informing the supervising practice educator of academic, clinical or personal concerns lies with the student. This decision has been taken in order to allow all students to begin new placements with a ‘clean sheet’ and also to encourage them to develop their own strategies for managing their needs. In such cases the clinical tutor will make contact with the practice educator early and it is likely that a ‘live’ clinic visit will be recommended. Ultimately it is the responsibility of the clinical tutor to disclose information to the practice educator if he or she feels it is essential to the support of the student and the practice educator. This will be done following discussion with the Module Leader, the Year leader and the Director of Professional Education and after informing the student.

Clinical Warning System and Resit Procedure

The majority of students successfully complete clinical placements and their clinical assessments throughout the course. However, a number of students will experience difficulties. This document applies to those students who:

1. are at risk of failing or have failed Professional Standards
2. are not making sufficient progress in their clinical placement
3. are at risk of failing or have failed the practical examination
4. are at risk of failing or have failed Professional Standards

This document will identify four procedures:

1. The initial identification of a problem in clinical practice on placement
2. Resit Procedure following a fail in the Clinical Placement Assessment
3. Resit procedure following a fail in the In-house Practical Examination
4. Procedure for students who successfully appeal against the Assessment Board’s recommendations

A form is available at the end of this section and should be used by educators, tutors and students to track the student’s progress through the resit process.

1. Initial Identification of Problem in Clinical Practice

N.B. There are two main types of problem which may occur for students at this stage. One is the risk of failure at a clinical or academic level and the other is cause for concern in clinical skill development and Professional Standards. Please consult the Professional Standards form and Procedure for additional information on this type of failure.

The following is the recommended procedure for warning students whose progress in clinical practice and/or professional standards is unsatisfactory. Triggers are identified at the initial stage in the system and the recommended course of action is specified.

1. Clinical tutor and/or practice educator may be alerted to the student’s:
   • inconsistent / unreliable attendance at clinical placement and/or clinical tutorials;
   • lack of clinical responsibility and failure to carry out required clinical duties;
• clinical practice which is considered to be counter therapeutic or unethical, placing clients at physical or emotional risk;
• clinical practice which is considered to be unsafe due to a lack of skills development in the student;
• quality of interaction/therapy planning

Ideally, as soon as anxieties surface, whether by
• routine meeting between practice educator and student
• completion of an onsite clinical visit to observe the student,
• a video visit at City,
• the practice educator’s expression of concerns or
• the clinical tutor’s observation in tutorial,

The following action is recommended:

2. Clinical tutor completes observation of student onsite in the clinical placement.
3. Clinical tutor and practice educator meet with student to identify their concerns using the Review of Progress and Professional Standards forms. These forms are completed in draft by the student, the practice educator and the clinical tutor. The student is made aware that there is a problem. Learning objectives are identified and agreed with the student.
4. The clinical tutor writes to the student with a copy to the practice educator, explicitly stating the concerns that have been discussed, the risk to the student’s success in either or both of the final practical assessments, including the risk of failure in Professional Standards and consolidating the learning objectives.
5. The previously established learning objectives are monitored by the practice educator and clinical tutor. This may take the form of:
   • a phone call from the clinical tutor to the practice educator;
   • a second clinical visit by the clinical tutor or appraisal of the student’s clinical work on video;
   • encouraging the student to video self in clinical sessions for the purposes of self-evaluation;
   • reviewing the Review of Progress and Professional Standards forms and reassessing the student’s progress, paying particular attention to the learning objectives that have been identified previously;
   • giving feedback to the student, stating explicitly the areas for concern in their clinical skills development as well as the positive changes observed
6. If problems persist after initial follow-up, the tutor will closely monitor student’s progress and provide regular feedback. Further learning objectives are set together with clear suggested strategies to support the student in meeting these objectives. Regular monitoring continues. The student is once again made aware that they are at risk of failing the Clinical Placement assessment including Professional Standards and/or In-house Practical Examination.
7. At the end of the placement, the practice educator and/or clinical tutor complete the Review of Progress and Professional Standards forms indicating whether they are satisfactory or unsatisfactory. This is copied to the student, the practice educator, clinical tutor, module leader and the Director of professional education. NB: An unsatisfactory Professional Standard Report will result in a fail of the clinical placement assessment for the year (please see Professional Standards procedure).