

# Guidance on using assessment tools for B and C practice education placements



University of  
**Nottingham**  
UK | CHINA | MALAYSIA

Dietetic students from both the University of Nottingham and Sheffield Hallam University will be using the same core assessment tools for practice education. Both universities expect students to have spent time reading through all of the materials and making sure they know what is expected of them before going on placement. **Students are responsible** for completing the assessment tools and compiling their practice placement portfolio, with support from their practice educators.

The latest versions of the assessment tools and paperwork are available from the Dietetic Practice Education website <https://www.nottingham.ac.uk/dietetic-practice-education/index.aspx>. Students and practice educators should download materials from the website to ensure they have the most current versions.

The following list contains the core assessment tools that each student will need to complete and have signed off as competent by the end of their placement:

1. Case review (1)
2. Individual Consultation Assessment Tool (ICAT) (6)
3. CARE Measure (3-4)
4. Group presentation and facilitation tool (1-2)
5. IPL/Team working tool (1)
6. Professionalism tool (including consolidation tool for C placement students) (1 completed at weeks 3, 6, 9 and 12)
7. *Reflective practice*: Weekly FFF (12-14) and reflection tool (4-6)
8. Verified witness statement (as required)

The **progression rules** are provided at the end of this document.

## 1. Case review

One case review will usually be completed during both B and C placements. Students will be given opportunities to ask questions and clarify details of their case prior to submission. Students on B are expected to have a less complex case than those on C. Ideally, students should (with help from practice educators) have identified case by week 5. The time period to complete the case review will normally be 3-6 weeks. The case review will usually include an initial dietetic assessment (which may have been undertaken by a dietitian already) and 1 or 2 reviews.

**Assessment method:** Direct observation of a verbal presentation (15 minutes plus 5 for questions) of the case to a group of practice educators and/or other healthcare professionals with supporting information in the form of PowerPoint slides. The case review tool provides a suggested structure for the case review but this does not need to be completed by the student (see case review tool). The reflection and action plan at the end of the tool will however need to be completed.

The case review is **not** pass or fail and will not be graded in any way but it may be used to provide evidence for a range of learning outcomes, usually L01, LO2 and LO7. A draft case review should **not** be submitted for feedback prior to the agreed submission date.

## 2. Individual Consultation Assessment Tool (ICAT)

At least 3 new and 3 review ICATs will be completed and submitted for assessment during both B and C placements. These should include a variety of medical conditions, settings and diverse service user characteristics (e.g. age, ethnicity). C placement students are expected to manage more complex service users than those on a B.

**Assessment method:** Direct observation of a service user consultation in which the student takes the lead (may be face to face or telephone). The learning outcomes are a guide only and may not always be met with every consultation. Summative tools therefore do not necessarily have to demonstrate all learning outcomes. The consultation **may** provide evidence for learning outcomes: LO1, LO2, LO3, LO4, LO5, LO6, LO7, LO8 and LO10.

Placement timetables will differ but most students will start using ICATs during weeks 3 to 6. At this stage many will be formative (i.e. not competent) and the student will use reflection and practice educator feedback to support their learning and development. In many cases students will have 1 or 2 summative tools around halfway and ideally should have their 6 summative (competent) tools by around week 10. It is not necessary for students to keep completing extra tools unless practice educators have concerns about the consistency of their practice.

Students must be proactive and request that practice educators complete a tool for a consultation in advance. Students must complete the first section 'key action points from previous consultation'. Assessment tools will be filled in by the student, discussed with the supervising dietitian for the session and then agreed and signed off, ideally within 24 hours of the consultation. There may be occasions (if the service user is particularly complex) when a student can receive a summative tool if they have successfully completed all of a consultation that is expected of a B placement student (or a Band 5 dietitian in the case of a C student) would be expected to do, as opposed to the complete consultation.

### **3. CARE Measure**

This is a validated tool, which will provide evidence of how the service user has experienced interacting with the student. They should take no more than 10 minutes for the service user to complete. It is expected that 3-4 of these will be completed in both B and C placement, ideally with consecutive student led dietetic consultations (such as an out-patient clinic) rather than just when the student thinks that it went well. It is likely that these would be completed when the student is undertaking complete consultations. The CARE measure is designed for an out-patient type scenario as opposed to an in-patient setting.

Students must take responsibility for asking the service user/carer to complete these at the **end** of their consultation. This could be completed in a waiting area without the student present. Possible ways to organise this could be asking reception staff if they are willing to distribute and collect the measure during a clinic or leaving a CARE measure with a stamped addressed envelope during a home visit. Service users/carers should not have to provide any personal identifying information on the CARE measure, so their scores can remain anonymous if they wish them to be so. CARE measures are not valid if more than 2 responses are marked as 'does not apply'.

**Assessment method:** Completion of 3-4 valid CARE measures. In order to be considered competent on B placement, no questions should assess the student as poor (although these are measures that should prompt some reflection). By the end of C placement, no responses should rate the student as fair or poor. This tool relates mostly to LO3, LO4, LO5, LO7 and LO8.

### **4. Group presentation and facilitation tool**

Normally 2 presentations will be given during both B and C placements e.g. to a service user group and dietetic department for B placement and for professional groups and the dietetic department for C placement. Examples include case review, journal club, cook

and eat sessions and MUST training. A student will have a practice educator allocated to them to support them to develop their presentation. On B placements it is likely that a student will deliver a presentation that is already prepared e.g. cardiac rehabilitation. They may observe the practice educator delivering the presentation first and then deliver one themselves at a later date. On C placement they would be expected to develop a presentation as well as deliver it. The key learning outcome this relates to is LO9.

**Assessment method:** Direct observation of a presentation.

## 5. IPL/Team working tool

One team working tool is to be completed on both B and C placements.

**Assessment method:** Reflection (using the tool) on the care of a service user where other healthcare professionals have been involved in the intervention. The tool should evidence an understanding of the roles, responsibilities and professional boundaries of those professionals. This relates mostly to LO3, LO6, LO7 and LO8

## 6. Professionalism tool

There is one professionalism tool which is to be completed 4 times during B and 4 times during C placement.

**Assessment method:** Self-assessment by the student and review by the practice educator at weeks 3, 6, 9 and before the final assessment at 12 weeks.

It is possible that practice educators or other healthcare professionals/service users may highlight a lack of professionalism. If an aspect of the professionalism tool cannot be signed off for any reason then a clear action plan must be documented and acted upon.

Students are expected to reflect on their learning about professionalism, agree action points with their practice educator and subsequently provide evidence for addressing the action points. The actions required will relate to specific situations or behaviours. Appropriate reflection should give the student opportunity to demonstrate their understanding of the unprofessional behaviour, the learning that they will take from it and to describe how they will respond professionally in a similar future situation. This may be sufficient to demonstrate that they have reached the expected threshold (including 'professional attitude and commitment throughout placement' referred to in LO5). If a similar or comparable situation arises, they should demonstrate progression and ideally deal with the situation in a professional manner. By the final assessment, C placement students are expected to be professional in all situations.

If an issue of unprofessional behaviour does occur early in the placement and the student reflects on it and responds appropriately as above, then the incident should not continue to be referred to. Professionalism relates to all LOs.

## 7. Reflective practice: weekly FFF and Reflection tool

Ongoing reflection should be integral throughout both B and C placement, either verbally or in written form. The weekly review will include the Feed Forward Form (FFF), part of which must be completed by the student prior to the weekly review meeting and then discussed with a clear action plan agreed and documented in the meeting.

Additionally, students will complete 4-6 reflective pieces across the placement. This does not have to be in a particular format but should focus on the **what**, the **so what** and the **now what** aspects in a concise manner. Reflections need to be more than a description of an event. Students may wish to reflect on events that did not go so well,

anything they found challenging or on any aspect of their learning and development. Some students and practice educators also use a hand-held record as a day to day record of activity and to identify and record reflection.

**Assessment method:** Weekly FFF which the student has prepared in advance of the weekly review meeting. 4-6 pieces of reflective writing on specific events/learning. Hand-held record document (if used).

### 8. Verified witness statement

Verified witness statements provide an opportunity for someone who is supervising the student or observing them to give feedback on their performance in a specific situation. Due to variation in placement experiences, opportunities for these will differ but should normally be completed at least 3 times (with 3 different witnesses) during the placement. Students are expected to take responsibility to ask for these to be completed.

**Assessment method:** Completion of the written tool demonstrating professional behaviour, good communication skills with both professional and service user/carer and an understanding of the role of the witness they are with. Witness statements usually relate to LO2, LO3, LO4, LO5, LO6, LO8, LO9 and LO10.

### Progression rules

In order to pass B or C placement, the student must have satisfied practice educators that they have demonstrated competence in each LO to the required level. The final assessment should be undertaken at the end of the placement. If a student has not passed placement, any extra time allowed will relate to the number of LOs outstanding. This can range from 2 extra weeks to a full repeat placement (see below).

Working towards competency in (and having achieved competency in the others):	Additional weeks allowed
1 to 2 LOs	2 weeks
3 to 4 LOs	4 weeks
5 to 7 LOs	Repeat placement
8 to 10 LOs	No extra time or repeat placement

In some cases the initial placement provider may not be able to offer the period of extended training. The student will be placed as soon as suitable capacity is available elsewhere. If the additional weeks are with a different placement provider, then an induction week will usually be offered to allow the student to become familiar with the new location.