Form 007: Practice Placement Evaluation Form

In this form we have provided some questions we would like the student to complete in order for us to receive feedback directly from them on the practice placement they have had with us. They need to answer as comprehensively and as honestly as possible. It is essential that they answer honestly so that we can accurately evaluate and, where appropriate, address issues that have arisen so that we can actively look to address these for future students. We ask that the student puts their name on the form so that we can feedback to the student group as appropriate. If they feel there is anything they wish to raise and would like a personal answer then they can write this on a separate piece of paper supplied on the back page and detach it. This form is to be filled out at the end of each placement year.

Thank you for your time in completing this evaluation.

**Practice Placement Coordinators**

**South Western Ambulance Service NHS Foundations Trust**

**SWASFT Placement**

|  |  |
| --- | --- |
| **Ambulance Stations attended on placement** | 1. **…………………………….**
2. **…………………………….**
3. **…………………………….**
4. **…………………………….**
 |
| **Education Provider** |  |
| **Programme**  |  |
| **Year** |  |
| **Please rate your placement experience from 1 to 5 – 1 is lowest** |
| **1.** | **I felt that SWASFT provided appropriate support for me as a learner in practice** | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **2.** | **I worked regularly alongside my assigned mentor** | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **3.** | **I had regular reviews with my mentor** | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **4.** | **My mentor understood the placement paperwork provided**  | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **5.** | **I was given regular constructive feedback** | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **6.** | **I felt I was able to ask questions and seek clarification** | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **7.** | **My mentor provided me with sufficient opportunity to identify, achieve and evaluate my learning needs** | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **8.** | **The placement provided sufficient opportunity for the achievement of the module learning outcomes** | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **9.** | **I was satisfied with my placement experience**  | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **10.** | **I was made to feel part of the team** | * **5**
* **4**
* **3**
* **2**
* **1**
 |
|  | **Comments** |
| **Finally, this is your opportunity to add any further feedback and comments that you wish to make which has not been covered in the questions. If you would like to have a personal reply please detach this form from the rest of the questionnaire and put your name on this so that we can respond. This will be collected separately. Thank you.** |
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