



University of
South Australia

Guide for Clinical Supervisors

**Bachelor of Medical Radiation Science
(Medical Imaging)**

CONTENTS

Aims	3
University Contacts	3
Roles of the Academic Staff	4
Roles of the Clinical Supervisors & Mentors	4
UniSA Bachelor of Medical Radiation Science (Medical Imaging)	5
Development of Clinical Skills	6
Allocation of Clinical Placements	6
Assessment of Clinical Skills	7
Retention of Clinical Skills	9
Program Schedule	10
1 st Year	10
2 nd Year	10
3 rd Year	10
4 th Year	11
Clinical Placement Information	13
Attendance	13
Clinical Placement Policies and Procedures	14
Accident/ Incident Report Procedure	14
‘Passport to Placement’	14
Supervision Levels & Student Expectations	15
Clinical Reports	22
Formative Report Instructions	22
Summative Report Instructions	22
‘Safe Practice and Duty of Care’ & ‘Professional and Ethical Conduct’	22
Appendices	24

Aims

The purpose of this guide is to provide clinical supervisors and mentors with a convenient reference to the academic and clinical education of Medical Radiation Science (Medical Imaging) at the University of South Australia (UniSA). Please use this guide for general information only. The student is expected to provide you with specific information relating to their current clinical course when they meet with you at the beginning of their placement.

Please use this guide in conjunction with information on the following pages:

[Clinical Placement Unit](https://study.unisa.edu.au/student-placements-and-internships/nursing-health-medical-sciences/cpu/)

(<https://study.unisa.edu.au/student-placements-and-internships/nursing-health-medical-sciences/cpu/>)

[Program Information for Industry Partners - Medical Radiation](https://lo.unisa.edu.au/course/view.php?id=7611§ionid=127640)








(<https://lo.unisa.edu.au/course/view.php?id=7611§ionid=127640>)

If you are not able to access the website or the information you require is not there, please contact the relevant UniSA Course Coordinator in the first instance.

This guide provides a variety of information including, but not limited to, the roles of UniSA academic staff, clinical mentors and clinical supervisors, as well an overview of the Bachelor of Medical Radiation Science (Medical Imaging) program, and clinical practice supervision guidelines.

We hope you find this guide valuable. Please do not hesitate to contact the UniSA Academic team if you have further queries regarding the program.

University Contacts

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Roles of the Academic Staff

The academic staff within medical imaging at UniSA are responsible for:

- Course co-ordination of all academic and clinical courses within the Bachelor of Medical Radiation Science (Medical Imaging) (including honours program)
- Calculation of the final grades for all courses and monitoring of student progress
- Clinical student placement allocation (local and interstate) in conjunction with the UniSA Clinical Placement Unit (CPU)
- Coordination and delivery of pre-clinical skill development workshops
- Providing learning opportunities relating to Medical Imaging theory
- Conducting practical sessions and simulated learning experiences in the on-campus X-ray suites
- Maintaining regular contact with students during their clinical placement. This includes:
 - Monitoring development and progress of assessment tasks through face-to-face, telephone and/or email contact for metropolitan, rural and interstate placement students
 - Monitoring of student online discussion during placement
 - Counselling of students when necessary
- Maintain regular contact with clinical supervisors and mentors

Roles of the Clinical Supervisors and Mentors

The clinical supervisor has an overall role of liaison with the relevant UniSA course coordinator, the students and the clinical mentors within the department.

The clinical supervisor is responsible for:

- Orientating students to the clinical site
- Directly supervising the student or allocating a suitable mentor to each student
- Maintaining an overall awareness of the students' clinical progress and wellbeing within the clinical environment by discussion with the student and mentors and liaison with the UniSA academic staff if any issues should arise
- Providing the student with formative feedback during the clinical placement
- Facilitating completion of the student summative clinical report
- Advising the student on the how to act professionally, safely and with respect to staff and patients
- Allocation of clinical mentors as required
- Providing a role model for the students within the clinical environment

The clinical mentor is responsible for:

- Supervising the students in the clinical placement as requested by the clinical supervisor
- Providing informal feedback during the clinical placement
- Reporting to the clinical supervisor if concerns are raised relating to the well-being or performance of the student during their clinical placement
- Providing a role model for students within the clinical environment
- When requested, assist the clinical supervisor with completion of the student's clinical report by providing information relating to the performance of the student during their placement

UniSA Bachelor of Medical Radiation Science (Medical Imaging)

The Bachelor of Medical Radiation Science (Medical Imaging) is designed to produce graduates who are life-long learners, who can adapt to an environment of rapidly changing technologies, with the necessary skills, knowledge and attitudes to enable them to gain full registration. The clinical program aims to develop professional knowledge, skills and attitudes using an integrated approach where placements are preceded by on campus academic learning. Students are encouraged to apply their academic knowledge to the clinical environment during their clinical program and to bring their clinical experiences to their academic studies.

The Bachelor of Medical Radiation Science (IBRS) and the Bachelor of Medical Radiation Science with honours (IHRS) programs are built on nine graduate qualities which have been developed and integrated from the 'Professional Capabilities' and 'Code of Conduct' of the Medical Radiation Practice Board of Australia (MRPBA), as well as the broader graduate qualities of UniSA. These qualities define how our graduates will act when they exit the program and begin to practice as entry level radiographers.

Development of Clinical Skills

The clinical experience is introduced in second year with placements which follow theory and pre-clinical skills sessions in the academic environment. In the third year of the program students are given the opportunity to apply their developing body of knowledge to the clinical environment in alternating academic and clinical blocks. Fourth year clinical placement blocks are commenced with a one week's pre-clinical workshop series to introduce additional professional information. This approach aims to build on the student's competency achievements and consolidate prior learning in preparation for graduating as fully registered practitioner.

Participating in clinical placements is vital for the development of the student's professional skills and competencies to assist the students to become registered with the MRPBA. When developing the objectives, aims and assessments of academic and clinical courses within the IBRS and IHRS programs, the MRPBA Professional Capabilities and Codes of Conduct for Medical Radiation Practice were used. Currently the graduating student is eligible for full registration as a medical radiation practitioner. Skills developed during this program include:

- Patient and clinical assessment
- Application of the science of medical imaging to include:
 - General Radiography
 - Fluoroscopy
 - Theatre
 - Emergency/Trauma
 - Computed Tomography
- Image processing and data recording
- Quality management and diagnostic efficiency
- Image interpretation
- Mentoring, clinical reasoning and research

The students will also have the theoretical knowledge to underpin future specialist training. Students are exposed to engage clinical observation in specialist areas, without an expectation of the graduate to practice competently and independently in these areas. These areas include:

- MRI
- Mammography
- BMD
- Advanced applications in CT scanning
- Ultrasound

- Interventional imaging and advanced angiographic applications
- Information systems
- Nursing
- Administration

Students are expected to build and maintain clinical competence through both academic and clinical courses, as they work towards the graduate level and the capacity to work independently. Each course has stated aims and objectives informed by the Professional Capability Statements of the MRPBA. The discipline specific academic courses include the underlying principles and skills required for clinical practice. The clinical courses (Medical Imaging Clinical Practice 1, 2, 3 and 4, Medical Imaging Honours Clinical Practice 4, Medical Imaging Professional Entry Practice 1 and 2 and Medical Imaging Honours Professional Entry Practice 1) provide the student with opportunities to develop clinical skills from novice to entry-level practitioner.

To ensure that the student has an opportunity to gain a diverse range of experiences throughout their degree, guiding principles for allocation of clinical placements are used.

Allocation of Clinical Placements

As per the Medical Radiation Practice Accreditation Committee (MRPBAC) accreditation standard 3.12 (MRPAC, Accreditation Standards: Medical Radiation Practice 2019), 'the quality, quantity, duration and diversity of student experience during work integrated learning in the program is sufficient to produce a graduate who has demonstrated the knowledge, skills and professional attributes to safely and competently practice across a broad range of medical radiation practice settings'. To ensure this standard is met, students will be required to undertake a range of clinical placements from the following categories: 1) public and private hospitals (metropolitan), 2) private practice not attached to a hospital, 3) specialty hospital, and 4) regional/rural hospitals/clinics. The allocated placement time within each category may vary and will depend on the required learning experience and placement availability. In their 4th year, students attend at least one placement in a major public hospital. All students require shift or out of hours experience during their program.

Assessment of Clinical Skills

Students are required to demonstrate evidence of their developing clinical skills, knowledge and attitudes through competency assessments in the clinical setting, a clinical report (from the clinical supervisor), and through other assessments administered by the academic teaching team.

To pass each clinical course the student must reach a '*competency milestone*'. This is a collection of competency assessments which introduce higher grades of complexity as the student progresses through their clinical courses. The complexity of the '*competency*

milestones involves two elements. The first of these elements involves a prescribed set of *competency assessments*. Added to this, each *competency assessment* is categorised by levels of difficulty ranging from class 1 to 3. Some of the *competency assessments* are mandatory, and some are elective; giving the student some flexibility for some skills that are less frequently performed but still required. In some special cases, if the student can't achieve a competency in the clinical setting, they will be given an opportunity to demonstrate the competency in a simulated manner within the University of South Australia or at the individual clinical sites. Failure to reach the *competency milestone* may impact on the student's progression into the next clinical course. By the end of their program of study the student must have successfully completed the required number of *competency assessments* outlined in their clinical workbook. These numbers may vary according to the changes made in consultation with industry partners and technical and procedural changes in the workplace.

Type of experience expected		
Course	Stage of program	Class
Clinical Practice 1	Second half of year 2	1
Clinical Practice 2	Across year 3	1,2
Clinical Practice 3	First half year 4	1,2,3
Clinical Practice 4 and Honours Clinical Practice 4	First half year 4	1,2,3
Professional Entry Practice 1 and Honours Professional Entry Practice 1	Second half year 4	1,2,3
Professional Entry Practice 2	Second half year 4	1,2,3
EXPLANATION OF CLASSES:		
Class 1 (easy)	patient mobile and cooperative, with no modification to technique required	
Class 2 (moderately difficult)	patient mobile or in a wheelchair, possible communication barrier, age or language related, minor modifications to technique may be required	
Class 3 (very difficult)	immobile patient including trauma situation, ward patient, theatre case or mobile radiography, limited series or major modification to technique required.	
Please refer to the student's clinical workbook for milestone requirements associated with competency assessments		

To record examinations in the workbook for all sections except the MODALITIES section, the student must undertake the lead role with minimal direction, during the examination. Under this definition it is acceptable for the supervising radiographer to assist the student. When a completed examination satisfies the current clinical department's criteria for acceptability, the supervising radiographer is to print and sign their name next the examination record in the student workbook.

When the student has performed and recorded the defined number of examinations for a particular competency, they may approach the clinical supervisor or a delegated registered radiographer to perform a *competency assessment*. The assessing radiographer will mark

each section as Competent or Not Competent and include comments to support their decisions. The sections included in the competency assessment page are outlined in the text box below. Further information is also available in the student's clinical workbook.

The student must be deemed competent in all aspects listed below to achieve a pass for a competency assessment.

1. **Safe Practice** - Appropriate personal and patient safety, safe application of radiographic equipment, safe application of manual handling, works within scope of practice.
2. **Professional Conduct** – Professional behavior shown to staff, patient and carers at all times, uniform, name badge and luxel visible and maintenance of strict patient confidentiality
3. **Communication and Care** - Clear explanations to the patient, respect and courtesy shown at all times, recognition of patients' needs, respects rights and sensitivities of the patient, appropriate interaction with other members of health care team
4. **Motivation and Organisation** – Seeks new information, displays respect and trust in authority of others, responds well to constructive criticism, shows initiative
5. **Radiation Protection** – Checks request form for correct ID, authorisation, adheres to ALARA principle, checks for pregnancy and responds appropriately and uses appropriate radiation protection for self and others
6. **Radiographic Technique** – Uses radio-opaque markers, ensures all technical factors correct prior to exposing, ensures logical sequence of projections taken, selects correct grid/non grid technique, , SID.
7. **Patient Positioning** – Accurate positioning of the patient, correct centring points chosen, good use of positioning aids.
8. **Equipment/Instrumentation Manipulation** – Understanding of exposure factors, select correct factors, sound knowledge of control console, appropriate use of automatic exposure devices, understanding of CR/DR system
9. **Concluding the Examination** – Completion of examination fluently, refers to Radiologist appropriately, offers appropriate information to the patient, processing/post processing completed correctly, films dispatched appropriately.
10. **Anatomy & Pathology Knowledge** – Thorough image evaluation (PACEMEN), good suggestions for improvements, thorough knowledge of radiographic anatomy and relevant pathology

To record entries in the MODALITIES section of the clinical workbook, the student must be present for the entire examination to observe and may play an assistant role. The student will be required to complete all rows in the table of observation experiences for the various modalities over the duration of the program.

NOTE:

It is important for the supervising registered radiographer(s) to complete their details in the appropriate section of the student workbook. These details include their name, location of employment and signature. This will facilitate cross referencing of signatures if needed when the clinical workbook is assessed.

Retention of Clinical Skills

Students are encouraged to not only concentrate on developing new skills, but also to maintain the ones that they have developed earlier in their program. The student's ability to retain skills

will be assessed through the clinical report (by the clinical supervisor), and also through activities that are assessed by academic staff.

Program Schedule

Commencing students in the IBRS and IHRS are offered a discipline specific place ie Medical Imaging, Nuclear Medicine or Radiation Therapy. Students are not given an option to change their discipline specific stream. In the second half of the second year of the program, students may apply to enroll in an Honours program as part of their degree. These students will enroll in all the same courses as those students not participating in the Honours program with the exception of 'Medical Imaging Honours Clinical Practice 4' and 'Medical Imaging Honours Professional Entry Practice 1'. Students completing these two courses have their written assessment workload adjusted. A representative clinical grid is available at the end of this guide to outline the clinical requirements for both the 'pass' and 'with honours' options of the program.

First Year

Academic Courses (Foundation Sciences)		Clinical Placement
First Half	Second Half	
Human Anatomy 100 Human Physiology 100 Foundations of Health Physics for Medical Radiation 1	Medical Radiation Human Anatomy Human Physiology 101 Pathology Physics for Medical Radiation 2	

Second Year

Academic Courses (Foundation Sciences and Medical Imaging specific)		Clinical Placement
First Half	Second Half	Second Half
Human Anatomy 201(Gross and Sectional) Applied Psychology Medical Imaging Studies 1 Physics for Medical Radiation 3	Medical Imaging Studies 2 Introduction to Evidence-Based Practice and Health Research Physics for Medical Radiation 4	Medical Imaging Clinical Practice 1
Medical Imaging Studies 1		
Principles of Computer Radiography and Digital Radiography; PACS; accurate positioning techniques and image evaluation of the upper and lower extremities, thorax, abdomen and shoulder and pelvic girdles; radiographic equipment (including accessories); automatic exposures, exposure factors; patient care, privacy and communication; radiation safety.		
Medical Imaging Studies 2		
Radiographic procedures of the spine, head and associated regions; digital imaging technology; quality assurance; image evaluation; cultural considerations; teamwork; radiation safety.		
Medical Imaging Clinical Practice 1 (Entry-Level to Novice student)		
clinical skills development building on technical skills gained in previous clinical courses including patient care and communication, safety, professional behaviour, team working, self-motivation, self-directed learning and clinical reasoning.		

Third Year

Academic Courses (Foundation Sciences and Medical Imaging specific)		Medical Imaging Clinical Placement
First Half	Second Half	First Half & Second Half
Medical Imaging Studies 3 CT and PET imaging Advanced Evidence Based Practice or Health Science Honours Preparation	Specialised Medical Radiation Medical Imaging Studies 4	Medical Imaging Clinical Practice 2

Elective		
Medical Imaging Studies 3		
Modified radiographic techniques and patient care relating to trauma, mobiles & operating theatres, geriatric, paediatric; digital imaging manipulation; image analysis and evaluation; principles of tomography; infection control; fluoroscopy; contrast media; radiographic examinations involving contrast media; the disabled patient; teamwork; scope of practice.		
CT and PET Imaging		
Physical principles of CT, PET and PET/CT and their application to medical diagnosis and treatment; instrumentation; generations of scanners; Helical/spiral CT systems; multislice scanners; imaging/scanning parameters; patient positioning; examination preparation; contrast media; image reconstruction; image quality; artefacts; quality assurance procedures; image evaluation; image interpretation; anatomy recognition in multiple planes; pathology; image manipulation; patient and staff safety issues; biological effects; patient care including risk factors; radiation safety; dosimetry; interpersonal communication, responding empathically, nursing skills/patient interactions; hybrid imaging; image co-registration; image fusion; attenuation correction; clinical applications of co-registration and image fusion; quality assurance and control; protocols of contemporary practice; advanced current CT procedures; radioisotopes, biodistribution of radiopharmaceuticals, paediatric considerations; radiation therapy simulation and planning; professionalism; ethics; legalities.		
Medical Imaging Studies 4		
Equipment and physical principles of imaging systems including digital imaging; image acquisition; image manipulations; angiography procedures; DSA; interventional techniques; mammographic procedures; bone mineral density; image interpretation; image quality; image evaluation; anatomy recognition in multiple planes; pathology; artefacts; quality assurance procedures; conflict resolution, patient care; nursing role; teamwork.		
Medical Imaging Clinical Practice 2 (Novice to Intermediate Student)		
clinical skills development building on technical skills gained in previous clinical courses including patient care and communication, safety, professional behaviour, team working, self-motivation, self-directed learning and clinical reasoning.		
Specialised Medical Radiation		
Principles of MRI and US and their application to medical diagnosis and treatment; instrumentation; imaging parameters; image reconstruction; image quality; artefacts; image evaluation; anatomy recognition in multiple planes; pathology; patient and MRI staff safety issues; biological effects; patient care including risk factors; interpersonal communication skills contact, responding empathically, nursing skills/patient interactions; image co-registration; NEMA standards, International Electrotechnical Commission (IEC) 'Standards for Australia/New Zealand'; DICOM standards; the tendering process; revision of quality control of the gamma camera including common terminology/definitions; quality management; molecular imaging agents/probes; treatment of inflammatory and tumor processes; professionalism; ethics; legalities; IMRT; Brachytherapy; MRI in RT planning; MRI fusion imagery.		

Fourth Year

Medical Imaging Skills Development	
First Half (Clinical Courses)	Second Half (Clinical Courses)
Medical Imaging Clinical Practice 3 Medical Imaging Clinical Practice 4 or Medical Imaging Honours Clinical Practice 4 Health Science Honours thesis	Medical Imaging Professional Entry Practice 1 or Medical Imaging Honours Professional Entry Practice 1 Medical Imaging Professional Entry Practice 2 Health Science Honours thesis
Medical Imaging Clinical Practice 3 (Intermediate to Independent Student)	
Clinical skills development to a level of thorough knowledge and understanding of the technical skills; patient care and communication; safety; professional behaviour, team working, self-motivation, self-directed learning, quality assurance and legal and ethical issues.	
Medical Imaging Clinical Practice 4 and Medical Imaging Honours Clinical Practice 4 (Independent to Autonomous Student)	
Clinical skills development to a level of thorough knowledge and understanding of the technical skills; patient care and communication, safety, professional behaviour, team working, self-motivation, legal and ethical issues, scope of practice, self-reflection, clinical reasoning, preparation of recruitment and job selection procedures.	
Medical Imaging Professional Entry Practice 1 and Medical Imaging Honours Professional Entry Practice 1 (Autonomous to Proficient Student)	
Clinical skills development; patient care and communication; safety; professional behaviour; teamwork; self-motivation and legal and ethical issues; clinical reasoning; emergency procedures; self-reflection; specialised modalities; mentoring.	
Medical Imaging Professional Entry Practice 2 (Proficient to Entry Level Practitioner)	

Clinical skills development (entry level) building on technical skills gained in previous clinical courses including patient care and communication, safety, professional behaviour, team working, self-motivation, self-directed learning and clinical reasoning; continuing professional development.

Clinical Placement Information

At the beginning of each placement the student should provide you with an abridged clinical mentor's guide which will provide you with information that is relevant to the clinical course they are undertaking. This will include:

- The expectations of the student
- An overview of what the student has been taught to date
- The objectives of the clinical course
- Performance Guidelines for the clinical report
- University contact/s

The student has a clinical workbook which they will use to record their performance and attendance. The student should ask you to fill out documentation in this workbook, including:

- Attendance record (registering the student's clinical attendance)
- Supervisor and mentor specimen signature (used to verify recorded signatures)
- Outline of competency milestones required for the placement
- Practical competency assessment forms

You will also be asked to assess the student mid-placement ('Formative Clinical Report') and at the end of each clinical placement ('Summative Clinical Report'). The student will pass this separate documentation to you on the first day of their clinical placement. A reference example of one of these reports is included in Appendix 1. These instructions may vary slightly depending on the level of student; however, the requirements will be carefully explained to the students.

Attendance

The University of South Australia Clinical Placement Unit (CPU) will allocate each student to a clinical department, in accordance with the published teaching schedule for the Bachelor of Medical Radiation Science program (Appendix II).

Students are required to attend all scheduled clinical days, subject to the 'Clinical Attendance' Policy of this program. Student hours are 8.30am - 5.00pm (7.5 hours per day), but may be adjusted to fit within departmental normal work patterns or shift work. If a student is unable to attend clinical placement due to illness they must contact the Clinical Supervisor/Mentor at the placement no later than 9.00am and email (or telephone) the Course Coordinator.

Students are required to have a lunch break each day, the duration of which is designated by the Clinical Supervisor/Mentor. Tea breaks may be given at the discretion of the Clinical Supervisor/ Mentor.

At the end of the clinical course, completed clinical placement hours will be calculated. Absences may need to be made up, by the student, at the discretion of the Course Coordinator. If time is to be made up, this will be organized by the student in liaison with the Course Coordinator the CPU ie **students are required to negotiate with the University of South Australia Course Coordinator and then the Clinical Supervisor/ Mentor, a suitable day for additional clinical placement time due to absent days/ times due to illness.** These 'make up' hours are to be recorded on a clinical placement attendance record which will be signed by the Clinical Supervisor/ Mentor.

Clinical Placement Policies and Procedures

The University of South Australia Medical Radiation Clinical Placement policies and procedures can be found on the Clinical Placement Unit website:

[Clinical Placement Unit: Policies, Forms and Documents](https://study.unisa.edu.au/student-placements-and-internships/nursing-health-medical-sciences/cpu/)

(<https://study.unisa.edu.au/student-placements-and-internships/nursing-health-medical-sciences/cpu/>)

Accident / Incident Report Procedure

If a student is involved in an accident / incident, please inform the Course Coordinator as soon as possible. There is a link to the required form on the student's course home page that needs to be completed and submitted to the course coordinator as soon as practicable. There is a requirement for the course coordinator to complete an additional online form. The content of this online form will be informed by the information included in the form completed at the clinical site.

'Passport to Placement'

The student is required to maintain their 'Passport to Placement' folder to contain updated evidence of all pre-clinical documentation (e.g. immunisation record, first aid course, National Criminal History Record Check etc.). The student is asked to carry their 'Passport to Placement' with them to each clinical site and if requested present this folder to the clinical supervisor.

Supervision Levels & Student Expectations

A set of 'Medical Imaging supervision levels and student expectations per clinical course' have been compiled to assist the Clinical Supervisor/ Mentor in the supervision and assessment of students on clinical placement.

As the student progresses through the program, she/he will gradually build and maintain clinical skills by completing both academic and clinical courses. It is, therefore, vital that the Clinical Supervisor/ Mentor is aware of the expected level of performance of a student during any clinical course and, hence, the level of supervision with which the student should be provided.

On the following pages, you will find a set of guidelines ('Medical Imaging supervision levels and student expectations per clinical course') to assist in the supervision and assessment of students. There is a set of guidelines for each clinical course/ placement. The information under the headings 'Student Characteristics', 'Communication', 'Technical Aspects', 'Patient Care', 'Patient Assessment, Clinical Decision Making/ Reasoning', 'Image Critique/ Interpretation' and 'Departmental Procedures/ Policies' relate to the student's performance during a course. The information under 'Supervision level, Supervision Characteristics' is the recommended level/type of supervision required by a student participating on clinical placement. If you read the information, you will see that as the student gains more experience and clinical skills and, hence, becomes more independent, the close supervision of the student is slowly withdrawn.

It is extremely important, that the Clinical Supervisor/Mentor(s) familiarise themselves with the guidelines as they form the basis of the completion of the 'Formative' and 'Summative' Clinical Reports.



Supervision Level

General Student Characteristics

Communication

Technical Aspects

Patient Care

Patient Assessment, Clinical Decision Making & Reasoning

Image Critique & Interpretation

Departmental Procedures/ Policies

<p>2nd Year</p> <p>Course: Medical Imaging Clinical Practice 1 'Block A'</p> <p><i>Entrance Level Novice Student</i></p>	<p>Supportive Supervision Characteristics</p> <p>Close support and demonstration of procedures. Immediate feedback to promote confidence building. Simple, clear direction. Focus on direction for fewer tasks at a time.</p>	<p>Very little experience in the clinical environment to this stage. Understands the principles of privacy and confidentiality.</p>	<p>Basic communication skills with patients, significant others and staff. Able to communicate with patients on a simple level for example collect a patient or change a patient.</p>	<p>Would begin observing then move to simple examinations closely supervised. Need exposures to be set and explained. Take considerable time with all procedures.</p>	<p>Assist with changing and moving patients.</p>	<p>Simple patient assessment in terms of ability to change themselves. Simple history taking such as mobility needs.</p>	<p>Very limited critiquing of basic images using a system such as PACEMAN. Very tentative with image critique and interpretation.</p>	<p>Able to follow departmental procedures and policies. Lacks confidence in the radiographic environment.</p>
<p>Course: Medical imaging Clinical Practice 1 'Block B'</p> <p><i>Primary Student</i></p>	<p>Supportive Supervision Characteristics</p> <p>Close support and demonstration of procedures. Immediate feedback to promote confidence building. Simple, clear direction. Focus on direction for fewer tasks at a time.</p>	<p>Some experience in basic procedures. Still requiring close supervision of all examinations. Limited practice to less complex clients and patients. Thorough knowledge of radiation protection and infection control measures to a level to support safe practice.</p>	<p>Basic communication skills with patients, staff and significant others. Able to communicate with patients at a basic level for example collecting and changing patients or explaining simple procedures.</p>	<p>Lacks ease in positioning patients. Able to perform only one task at a time. Extra time required to complete tasks. Tentative regarding exposure setting.</p>	<p>Assist with changing and moving patients. Lacks ease in directing patients. Difficulty focusing on patient care and technical aspects simultaneously.</p>	<p>Reflects and discusses ways to improve their clinical practice. Simple history taking relating to performing basic radiographic examinations.</p>	<p>Able to identify basic errors in resultant images though may not be able to accurately identify how to correct errors. Able to identify obvious basic abnormality though may not be able to use correct medical/scientific terminology to name the abnormality.</p>	<p>Lacks confidence in the radiographic environment. Understands the departmental structure and patient pathway. Understands incident reporting mechanisms.</p>



Supervision Level

General Student Characteristics

Communication

Technical Aspects

Patient Care

Patient Assessment, Clinical Decision Making & Reasoning

Image Critique & Interpretation

Departmental Procedures/ Policies

<p>3rd Year</p> <p>Course: Medical Imaging Clinical Practice 2</p> <p><i>Intermediate Student</i></p>	<p>Supportive Supervision characteristics</p> <p>Close support and demonstration of procedures. Immediate feedback to promote confidence building. Simple, clear directions. Care exercised with pacing of instructions to avoid confusion. Withdrawal to a slightly more distant supervision (corner of the room) is encouraged through this course as the supervisor and student gain confidence with each other.</p>	<p>Able to attempt all basic examinations and procedures with close supervision. Ability to assess their own level of competence and client/patient ability to decide when assistance is required.</p>	<p>Communication skills at a higher level with straightforward procedures and examinations being explained to patients by students.</p>	<p>All routine procedures on uncomplicated patient should be within student's capability. Students able to set exposure from chart but may still need assistance with adjusting factors. Extra time for examinations is still expected at this stage of development.</p>	<p>Able to manage and respond appropriately to simple patient care requests. Implement patient transfers with minimal disruption to patient care. Manage patient auxiliary equipment such as urinary catheter or oxygen during transfers or simple procedures.</p>	<p>Recognising possible patient situations and reporting concerns to supervising radiographers. Clinical decisions relating to suitability of continuing with a particular examination would still be made by the supervising radiographer though students may input into this process. Reflecting on their performance during and after examinations.</p>	<p>Able to identify images requiring repeating and reasons for the repeats. Offer suggestions to improve images. Abnormalities able to be identified though may not be able to name the abnormality. Critiquing images and abnormality detection requires extra time at this stage.</p>	<p>Confidence building in the clinical environment. Ability to follow and interpret departmental policies and procedures is increasing. Able to source information relating to policies and procedures in the clinical environment. Understanding of the structure of the clinical environment beyond their department and the role of the department in the patient journey.</p>
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	Supervision Level	General Student Characteristics	Communication	Technical Aspects	Patient Care	Patient Assessment, Clinical Decision Making & Reasoning	Image Critique & Interpretation	Departmental Procedures/ Policies
<p>4th Year (First Half)</p> <p>Course: Medical Imaging Clinical Practice 3</p> <p><i>Independent Student</i></p>	<p>Collaborative Supervision characteristics</p> <p>Tailoring style of supervision to what the student already knows. Immediate feedback still encouraged. Able to withdraw slightly to behind the control panel for supervision. Instructions are able to be more complex. Still assessing suitability of patients/clients for the student's level of comfort with the procedure/ examination. At this stage the student is encouraged to be actively involved in this process.</p>	<p>Good with basic examinations/ procedures on less complex patients/clients. Ability to undertake, with supervision, more complex examinations/ procedures on more challenging patient/ client presentations.</p>	<p>Improved patient interaction. Able to explain procedures to patients/clients utilising suitable language. More eye contact and personalised instructions for the patient.</p>	<p>Integrating knowledge of previous cases with academic knowledge. Still needing assistance with exposure adjustment for unusual patient presentations. More aware of underlying pathology and its effect on exposure selection. Examinations are still requiring extra time at this stage.</p>	<p>Improved patient interaction. More eye contact and personalised instructions for the patient. Able to manage more complex patient presentations and auxiliary equipment. Able to anticipate patient care issues associated with radiographic examinations and procedures.</p>	<p>Integrating knowledge of previous cases with academic knowledge. Coping with more than one demand at a time. Developing strong history taking skills and is now able to act upon information gained and make suggestions to improve patient experience. Still needing assistance in this area at this stage.</p>	<p>Critiquing all images produced though at times requiring assistance to decide if sufficient or how to correct more complex examinations. Able to identify and name common abnormalities in images produced. Good use of medical and radiographic terminology. Complex abnormalities may be identified but not named at this stage.</p>	<p>Understands and implements all departmental policies and procedures. Able to identify procedures required to implement improvements. Comfortable in the clinical environment though may still be apprehensive in remote or unusual locations such as theatre or wards.</p>



	Supervision Level	General Student Characteristics	Communication	Technical Aspects	Patient Care	Patient Assessment, Clinical Decision Making & Reasoning	Image Critique & Interpretation	Departmental Procedures/ Policies
<p>4th Year (First Half)</p> <p>Course: Medical Imaging Clinical Practice 4 and Medical Imaging Honours Clinical Practice 4</p> <p><i>Autonomous Student</i></p>	<p>Collaborative Supervision characteristics</p> <p>Tailoring style of supervision to what the student already knows. Immediate feedback still encouraged. Able to withdraw slightly to behind the control panel for supervision. Instructions are able to be more complex. Still assessing suitability of patients/clients for the student's level of comfort with the procedure/ examination. At this stage the student is encouraged to be actively involved in this process. Supervisor still prioritizing student's workload though at this stage the student is encouraged to take a greater role in this process. As the course progresses the supervision moves to a little more remote though still within 'geographical area' of the examination room.</p>	<p>The student would be expected to attempt all examinations/ procedures with increasing complexity and challenges. The student is able to structure their examination in a logical sequence, though they may require assistance at times with this task.</p>	<p>Improved patient interaction. More eye contact and personalised instructions for the patient. Able to answer basic patient questions. Provide information at a basic level to patients.</p>	<p>Integrating knowledge of previous cases with academic knowledge. Confidence increasing with exposure selection. Able to adjust exposures with greater accuracy for pathologies and patient conditions. Coping with more than one demand at a time and beginning to prioritise (with supervisor input) their work demands. Anticipates potential problems so mistakes are fewer. Aware of patient advocacy issues associated with radiographic examinations. Time for examinations is decreasing.</p>	<p>Improved patient interaction. More eye contact and personalised instructions for the patient. Able to manage more complex patient presentations and auxiliary equipment. Able to anticipate patient care issues associated with radiographic examinations and procedures. Beginning to develop a patient-centred approach to their examinations.</p>	<p>Integrating knowledge of previous cases with academic knowledge. Clinical history taking skills improving and able to anticipate basic alterations to technique as a result of information gained. Making suggestions of adaptations to technique required for more straightforward examinations. Still requiring assistance for more complex situations.</p>	<p>Critiquing all images and identifying abnormalities where appropriate. Gaining confidence in naming of abnormalities and pathologies and the use of medical terminology.</p>	<p>Greater level of comfort in the clinical department and remote or unusual locations. Understand the role of the radiographer in the multidisciplinary team.</p>



	Supervision Level	General Student Characteristics	Communication	Technical Aspects	Patient Care	Patient Assessment, Clinical Decision Making & Reasoning	Image Critique & Interpretation	Departmental Procedures/ Policies
<p>4th Year (Second Half)</p> <p>Course: Medical Imaging Entry Practice 1 and Medical Imaging Honours Professional Entry Practice 1</p> <p><i>Proficient Student</i></p>	<p>Consultative Supervision characteristics Supervisor available for consultation by student as support still needed. Supervision would still be provided for these students though it is now provided in a remote manner. Supervisor encouraging the student to lead the examination process. Supervisor consulted at the beginning of the examination to ensure comfort on both sides with patient and examination/ procedure. Gradual changing of roles across this course from supervisor initiated to student initiated discussion and decisions.</p>	<p>Students are able to complete all examinations with the ability to set priorities and solve problems as they arise. At this stage they would be working independently with supervision available remotely as required.</p>	<p>Comfortable with communicating with patients and answering their questions. Beginning to converse with other health professionals in relation to required imaging procedures and benefits of differing techniques and modalities. Able to use Evidence Based Practice to support clinical decisions.</p>	<p>Problems are anticipated and solved as they arise. Able to prioritise workflow within a defined area of practice. Assistance still required with organising workflow across areas of practice. Developing the ability to advocate on the patient's behalf with respect to radiographic examinations. Able to complete examinations in a timelier manner.</p>	<p>Problems are anticipated and solved as they arise. Comfortable with communicating with patients and answering their questions. Adapting where necessary to the patient's values, customs, spiritual beliefs and practices. Adopting a patient- centred approach to radiographic procedures and examinations.</p>	<p>Reflecting critically on their clinical performance. Collecting complex patient histories to supplement information supplied and able to act upon this information in an appropriate manner. Able to solve most problems relating to patient situations as they arise. Seeking help from supervisors as required but encouraged to solve their own problems where possible.</p>	<p>Critiquing all images and offering suggestions for improvement. Able to identify more accurately when repeat images are required based on clinical information obtained and other considerations. Identifying abnormalities and pathologies within acceptable accuracy levels. Using appropriate medical terminology at all times.</p>	<p>Comfortable in the clinical environment. Able to suggest possible improvements to basic procedures. Understands the role of the radiology department in the multidisciplinary team. Developing mentoring relationships with less experienced students.</p>



	Supervision Level	General Student Characteristics	Communication	Technical aspects	Patient Care	Patient assessment, clinical decision making/ reasoning	Image Critique/ interpretation	Departmental procedures/ policies
<p>4th Year (Second Half)</p> <p>Course: Medical Imaging Professional entry Practice 2</p> <p><i>Entry Level Practitioner</i></p>	<p>Consultative Supervision characteristics Supervisor available for consultation by student as support still needed. Supervision would still be provided for these students though it is now provided in a remote manner. Students to seek assistance from supervisor. Supervisor may initiate 'verification' of students and their decision-making process. Supervisor involved in decision making process but gradually withdrawing their input across the course.</p>	<p>Students are able to complete all examinations within scope of practice, with the ability to set priorities and solve problems as they arise. Further they are able to predict and accommodate possible difficulties and challenges in the workflow and patient/client presentations. Students prioritising their workload in accordance with guidelines operating within current clinical placement.</p>	<p>Competent in discussing issues with patients or their significant others relating to radiographic examinations. Able to answer patient's questions and provide information to them in a manner appropriate to the patient. Able to communicate with other members of the Multidisciplinary team in a professional and informed manner. Communicating with all levels of staff as required including at a level associated with decisions relating to imaging procedures and examinations. Able to support ideas with evidence from the literature.</p>	<p>More confident in their own ability to modify protocols in relation to patient history/pathology. Able to organise workflow across areas of practice. Able to competently and efficiently perform complex procedures on most patients or clients. Able to assess their own strengths and request assistance as required. Take responsibility for planning entire examination/ procedure. Planning workload within an area or room. Performing examinations/ procedures in a time efficient and organised manner. Adopt a patient-centred approach to their examinations. Able to advocate on the patient's behalf with respect to radiographic examinations.</p>	<p>Able to anticipate most situations where assistance is required and take the leading role in most examinations regardless of the patient presentation. Adapting to the patient presentations in most situations and ensuring care is delivered to achieve best practice. Able to empathise with patients. Answering patient's questions and provide information to them in a manner appropriate to the patient. Adopting a patient-centred approach to examinations.</p>	<p>Competent in gathering patient history and adapting techniques. Anticipating issues based on information gathered. Able to solve many of the clinical problems as they arise and adapt techniques to situations encountered. They are able to critically reflect on and in their practice to improve their clinical performance. Able to accurately assess the patient's ability to continue with the examination. Able to discuss decisions with members of the Multidisciplinary team in a professional and appropriate manner.</p>	<p>Critiquing and offering ways to improve all images. Seeking assistance as and when required to identify more unusual abnormalities and pathologies. Able to discuss all images with referring clinicians in a professional manner.</p>	<p>Confident in the clinical environment. Able to discuss and implement policy changes being suggested, within the clinical environment, based on evidence of best practice. Able to identify best practice within the clinical environment and use this to develop their own practice. Further assisting less experienced students within the clinical environment.</p>

Clinical Reports

The student should provide the clinical supervisors with the assessment forms at the beginning of the clinical placement.

For each clinical course, the student will be assessed using both a 'Formative' and 'Summative' Clinical Report. The next section contains information relating to the Clinical Reports and an example of the form is included in Appendix 1. The form included is an example only as each Clinical Report form will vary slightly depending on the expectations associated with the particular clinical course being assessed. The report forms have been informed and developed in line with the supervision levels and student expectations documentation included in the previous section.

Formative Clinical Report Instructions

Mid-way through each long placement the Clinical Supervisor or Delegated Supervisor will be responsible for completing the 'Formative' report as a performance indicator for the student. Please refer to the previous section (supervision levels and student expectations) to assist you with completing the formative section of the Clinical Practice Report. This Formative Report is an important assessment of student progress and provides an opportunity to identify learning needs and goals for the remainder of the placement. This mid-placement assessment should provide the foundation for the end of placement 'Summative' Report and should NOT be omitted without prior consultation with the Course Coordinator. It is expected that this 'Formative' Report will be discussed with the student, highlighting their strengths and weaknesses and used as a means to assist the student to continue to improve their clinical skills and attitudes.

Summative Clinical Report Instructions

At the end of each Clinical placement, the Clinical Supervisor or Delegated Supervisor will be responsible for completing the Summative Clinical Report, which will be based on the student's performance during that placement and will contribute to the final mark.

'Safe Practice and Duty of Care' and 'Professional and Ethical Conduct'

It is an expectation of the clinical sites and the university that students follow safe practices whilst completing their clinical experience and students who breach Safety and/or Professional Conduct will be excluded from completing the placement.

Safe Practice and Duty of Care:

The student must demonstrate safe practice in the clinical setting.

Safe student practice includes, but is not limited to, at all times demonstrating:

- An awareness of manual handling principles in patient and staff safety

- The safe application of all equipment
- Responsibility for patient and personal safety
- Behaviours that do not put other persons in the workplace at any risk
 - Wearing a current 'Luxel' in accordance with the Medical Radiation 'Luxel' policy
- Appropriate infection control practices
- Application of the ALARA principle

Professional and Ethical Conduct:

The student must behave in a professional and ethical manner, according to the Medical Radiation Practice Board of Australia Code of Conduct and Ethics, the University of South Australia Clinical Policies as well as the Australian Society of Medical Imaging and Radiation Therapy code of conduct and ethics, throughout the clinical placement.

Professional and ethical student conduct includes, but is not limited to, at all times:

- Clearly wearing the student identification badge
- Being punctual in accordance with the Medical Radiation attendance policy
- Maintaining confidentiality of staff and patient information
- Maintaining personal hygiene and dress as stated in the Medical Radiation 'Uniform' policy
- Behaving in a professional manner to colleagues, supervisors, patients and their families

If a student is deemed unsafe or unprofessional at any time during clinical placement, he/she may be removed from the clinical placement, subject to a review to assess her/his suitability to participate in the course, as per the 'Assessment Policies and Procedures Manual', which can be found at:

<https://i.unisa.edu.au/policies-and-procedures/codes/assessment-policies/>



Autonomous to Proficient Student
 UniSA Allied Health & Human Performance
 Bachelor of Medical Radiation Science

SUMMATIVE CLINICAL REPORT - 2022

Medical Imaging Professional Entry Practice 1 and Honours Medical Imaging Professional Entry Practice 1

Student Name: Study Period: 5

Placement Location:

GRADUATE QUALITIES (GQ) ASSESSED BY THIS SUMMATIVE CLINICAL REPORT:

- GQ1 Your body of knowledge will be expanded in the clinical environment, with particular regard to more complex radiographic examinations.
- GQ3 In the clinical environment you will continually develop problem solving skills to deal with a variety of situations that arise.
- GQ4 You will be able to further develop effective team working skills within the clinical environment.
- GQ5 You will be acting in an ethical and socially responsible manner whilst on clinical placement and in your dealings with the patients and the public.
- GQ6 You will demonstrate effective communication all with members of the professional healthcare team, patients and the public. You will be able to translate written instruction to clinical situations.
- GQ7 You will demonstrate an awareness of cultural diversities encountered within the clinical setting.

SUMMATIVE REPORT INSTRUCTIONS:

At the end of each clinical placement, the clinical supervisor or delegate will be responsible for completing the summative clinical report, based on the student's performance during the placement.

To complete the summative report the clinical supervisor should:

- 1 Circle satisfactory or unsatisfactory for the summative sections of safe practice and duty of care as well as professional and ethical conduct, making comments where appropriate.
- 2 Tick the most appropriate category that describes the student's work. No mark is required
- 3 Include their name, signature and date along with any additional comments in the section provided.
- 4 Discuss the contents of this report with the student.

STUDENT'S RESPONSIBILITIES:

- It is the responsibility of the student to ensure that the summative clinical report is submitted to the course coordinator by the due date as indicated in the course outline.
- The student is encouraged to comment, in the space provided at the end of the report.
- The report must be signed by the student.

PERFORMANCE GUIDELINES:

Below are guidelines to help assess a student's level of expertise by the end of Honours Medical Imaging Professional Entry Practice 1 and Professional Entry Practice 1.

Please use them to help you when completing the formative and summative clinical reports.

Proficient student

- Able to complete all examinations and procedures with increasing complexity.
- Able to set priorities within their individual workload supported with reasons.
- Ability to solve problems, relating to their own clinical practice, as they arise.

Common observed or noted characteristics:

- Confident in a variety of radiographic environments
- High level communication skills appropriate to the individual patient
- Has a patient centred approach to their practice
- Reflects and discusses the examination, in a professional manner, with a variety of health professionals utilising evidence based practice



Marking Process

The report for this course requires you to select the field that most appropriately describes the student's work. You are then asked to type comments in the appropriate area to support the student and identify areas that you think could be improved or enhanced.

SAFE PRACTICE, DUTY OF CARE AND PROFESSIONAL AND ETHICAL CONDUCT:

Professional and ethical conduct as well as safe practice and duty of care are essential components of clinical practice. Please circle either satisfactory or unsatisfactory for these elements.

A satisfactory grade in all of these elements is essential to pass this course.

Safe Practice and Duty of Care:

The student must demonstrate safe practice and duty of care in the clinical setting.

Safe Practice will be evidenced by, but not limited to, the student who at all times:

- Demonstrates awareness of manual handling principles in patient and staff safety
- Demonstrates the safe application of all equipment
- Is responsible for patient and personal safety
- Demonstrates awareness of the ALARA principle
- Demonstrates an awareness of radiation protection practices for patients, staff and others
- Does not put other persons in the workplace at risk
- Demonstrates an awareness of infection control practices

Satisfactory

Unsatisfactory

Comment if appropriate:

Professional and Ethical Conduct:

The student must behave in a professional manner according to the Medical Radiation Practice Board of Australia Code of Conduct (2014) as well as the University of South Australia Clinical Placement Policy (2013), throughout the clinical placement.

Professional conduct is evidenced by, but not limited to, the student who at all times:

- Wears the student identification badge
- Wears a current 'Luxel' at all times in accordance with the UniSA Medical Radiation 'Luxel' policy
- Is punctual at all times in accordance with the Medical Radiation attendance policy
- Maintains confidentiality of patient, site, and staff information
- Maintains personal hygiene and dress as stated in the UniSA Medical Radiation Uniform policy
- Behaves in a professional manner to colleagues, supervisors, and patients and their families.

Satisfactory

Unsatisfactory

Comment if appropriate:



SUMMATIVE CLINICAL ASSESSMENT

Domain guidance comments	Field and Comments				
<p>Communication Comfortable with communicating with patients and answering their questions. Beginning to converse with other health professionals in relation to required imaging procedures and benefits of differing techniques and modalities. Able to use Evidence Based Practice to support clinical decisions.</p>	<input type="radio"/> Well above expected level	<input type="radio"/> Above expected level	<input type="radio"/> At expected level	<input type="radio"/> Below expected level	<input type="radio"/> Well below expected level
	Comments:				
	Positive aspects:				
	Areas for future development:				
<p>Technical Aspects Comfortable with equipment, technology and patient presentations Able to produce accurate radiographs Problems are anticipated and solved as they arise. Able to prioritise workflow within a defined area of practice. Assistance still required with organising workflow across areas of practice. Developing the ability to advocate on the patient's behalf with respect to radiographic examinations. Able to complete examinations in a timelier manner.</p>	<input type="radio"/> Well above expected level	<input type="radio"/> Above expected level	<input type="radio"/> At expected level	<input type="radio"/> Below expected level	<input type="radio"/> Well below expected level
	Comments:				
	Positive aspects:				
	Areas for future development:				
<p>Patient Care Problems are anticipated and solved as they arise Comfortable with communicating with patients and answering their questions. Adapting where necessary to the patient's values, customs, spiritual beliefs and practices. Adopting a patient centred approach to radiographic procedures and examinations.</p>	<input type="radio"/> Well above expected level	<input type="radio"/> Above expected level	<input type="radio"/> At expected level	<input type="radio"/> Below expected level	<input type="radio"/> Well below expected level
	Comments:				
	Positive aspects:				
	Areas for future development:				



Autonomous to Proficient Student Level

	<input type="radio"/> Well above expected level	<input type="radio"/> Above expected level	<input type="radio"/> At expected level	<input type="radio"/> Below expected level	<input type="radio"/> Well below expected level
Patient Assessment, clinical decision making/reasoning Reflecting critically on their clinical performance. Collecting complex patient histories to supplement information supplied and able to act upon this information in an appropriate manner. Able to solve most problems relating to patient situations as they arise. Seeking help from supervisors as required but encouraged to solve their own problems where possible.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments:					
Positive aspects:					
Areas for future development:					
Image critique/interpretation Critiquing all images and offering suggestions for improvement. Able to identify more accurately when repeat images are required based on clinical information obtained and other considerations. Identifying abnormalities and pathologies within acceptable accuracy levels. Using appropriate medical terminology at all times.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments:					
Positive aspects:					
Areas for future development:					
Department policy/procedures Comfortable in the clinical environment. Able to suggest possible improvements to basic procedures. Understands the role of the radiology department in the multidisciplinary team. Developing mentoring relationships with less experienced students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comments:					
Positive aspects:					
Areas for future development:					



Autonomous to Proficient Student Level

Motivation and organisation Seeks new information and knowledge Takes an active role in assisting patients and staff Responds appropriately to constructive criticism Maintains a neat and orderly work area Demonstrates a positive work ethic	<input type="radio"/> Well above expected level	<input type="radio"/> Above expected level	<input type="radio"/> At expected level	<input type="radio"/> Below expected level	<input type="radio"/> Well below expected level
	Comments:				
	Positive aspects:				
	Areas for future development:				

OVERALL CLINICAL SUPERVISOR'S SUMMATIVE COMMENTS

I this student has met all criteria to be deemed to be practicing at a proficient student level.

Clinical Supervisor Name: Date:

Use the buttons below to save or print this form for your own records. Please email the completed form to medrad.supervisor@unisa.edu.au using the email UniSA button or manually if you prefer.

Save as

Print

Email to UniSA

PLEASE NOTE:

This is a confidential document and constitutes only one element of a range of assessment procedures. As such, it requires correlation with further indicators of both knowledge and performance, during this clinical course. Therefore this Report remains the property of UniSA Allied Health & Human Performance, at the University of South Australia and is not to be duplicated or used as an employment reference.

