**OBSERVATION TOOL**

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| --- | --- | --- | --- | --- | --- |
| **Student** | |  | | **Date** |  |
| **Type of task/ visit/ meeting** | |  | | **Placement week** |  |
| **Observer** | |  | | **Profession/ Role** |  |
| **Statement to support competencies** | | |  | **Observer comments (if required)** | |
| Was the student punctual? Did they complete tasks, activity in a timely manner? | | |  |  | |
| Was the student adequately prepared for, and knowledgeable about, the task/ visit/ meeting? | | |  |  | |
| Did the student respect confidentiality (if appropriate)? | | |  |  | |
| Did the student treat others with compassion, empathy, courtesy and respect? | | |  |  | |
| Did the student maintain professional boundaries? | | |  |  | |
| Did the student demonstrate engagement and enthusiasm? | | |  |  | |
| Did the student communicate clearly and effectively? | | |  |  | |
| Did the student demonstrate appropriate listening skills? | | |  |  | |
| Did the student show initiative and were they aware of their limitations and ask for guidance/ advice appropriately? | | |  |  | |
| Did the student ask questions which were appropriate in relation to the visit/ task/ meeting? | | |  |  | |
| Did the student comply with all appropriate policies and procedures? | | |  |  | |
| **Observer Signature** |  | | | **Date** |  |

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| --- | --- | --- | --- |
| **Student Reflection** | | | |
|  | | | |
| **Student Signature** |  | **Date** |  |