

Diagnostic Radiography Clinical Assessment Tool (DRAD CAT)



SoR
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RADIOGRAPHERS



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This output has been developed through an externally CoR-commissioned project with funding received from NHSE. This work marks the initial stages of the College of Radiographers' scoping regarding standardised clinical assessment. As outlined in the report recommendations, the College recommends that further research be undertaken to understand and evidence the effectiveness of this tool, including a pilot and evaluation phase. The CoR does not yet endorse use of this tool however, policy and guidance will be updated accordingly as the evidence base grows.



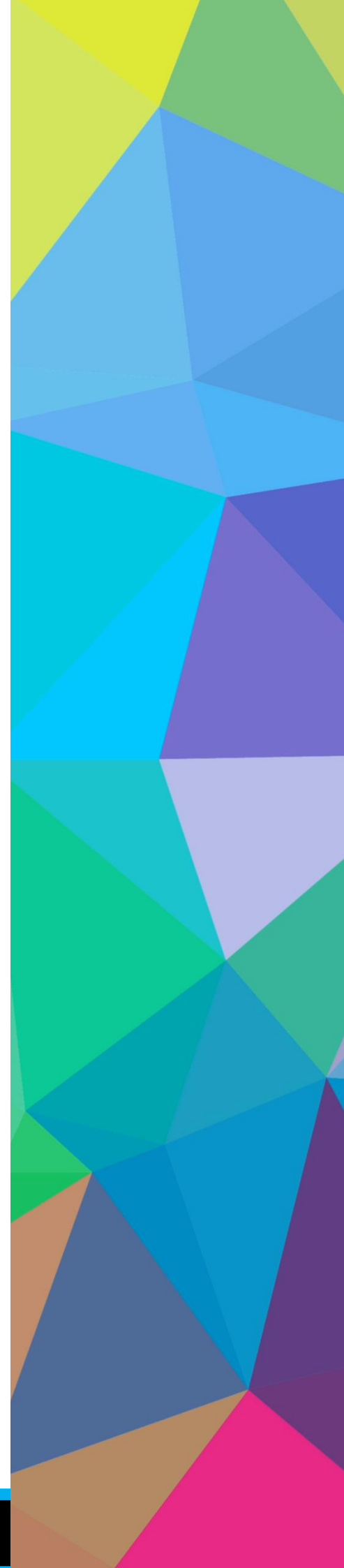
DIAGNOSTIC RADIOGRAPHY CLINICAL ASSESSMENT TOOL (DRAD CAT)

Pre-Registration BSc / MSc / BSc Apprenticeship / MSc Apprenticeship

This proposed new standardised Clinical Assessment Tool has been designed to meet the HCPC Standards of Proficiency for Diagnostic Radiographers (2023), HCPC Standards of Conduct (2024), Society & College of Radiographers Education & Career Framework (2022) and Diagnostic Radiography Apprenticeship standards.

The proposed new standardised Clinical Assessment Tool was developed by University of Derby and Keele University in collaboration with clinical partners, academic colleagues, and pre-registration diagnostic radiography learners across the UK.

The proposed new standardised Clinical Assessment Tool was part of a commissioned programme of work led by the Society of Radiographers and funded by NHS England.



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An Introduction to DRAD CAT



Welcome to the Diagnostic Radiography Clinical Assessment Tool (DRAD CAT)

Background

The proposed new standardised Diagnostic Radiography Clinical Assessment Tool (DRAD CAT) has been designed to assess pre-registration diagnostic radiography learners against the HCPC Standards of Proficiency for Diagnostic Radiographers (2023), HCPC Standards of Conduct (2024), Society & College of Radiographers Education & Career Framework (2022), and Diagnostic Radiography Apprenticeship standards.

DRAD CAT was commissioned and funded by NHS England. DRAD CAT was developed by University of Derby and Keele University in collaboration with clinical partners, academic colleagues, and learners across the UK. DRAD CAT was informed by a systematic review of the literature about clinical assessment tools, methods and marking criteria, a scoping review of current clinical assessment tools used in pre-registration diagnostic radiography education in the UK, and a modified Delphi consensus study which included key stakeholders (current learners / clinical colleagues / academic colleagues) as expert panel members.

Underpinning principles

DRAD CAT has been designed to take a holistic approach to the clinical education and assessment of pre-registration diagnostic radiography learners. Therefore,

there is an equal emphasis on professional behaviours and clinical proficiencies.

DRAD CAT has been designed to be used as a continuous assessment of clinical proficiencies and professional behaviours over the duration of a learner's programme of study, whether they are on a traditional BSc route, MSc Pre-Reg route, or Apprenticeship.

DRAD CAT has been designed with the recognition that learners develop clinical proficiencies and professional behaviours at different speeds, depending on their prior knowledge and skills.

DRAD CAT has been designed to enable flexibility within clinical placement learning. Learners are supported to develop their knowledge and skills in a range of different clinical environments, as well as Imaging departments. This will also benefit placement providers, by supporting more flexibility within clinical rotas.

DRAD CAT has been designed to have a strong emphasis on reflective practice and regular self-assessment of progress.

DRAD CAT uses a mixture of formative and summative assessment methods to measure learner's progress. Formative assessment includes self-assessment, clinical proficiencies, professional behaviours, observed practice and feedback from others (peers, service users and carers). Summative assessment is via an integrated review process.

DRAD CAT incorporates an integrated review process for each placement, including an initial objective setting meeting (formative), mid-point review (formative) and end of placement review (summative). The summative is informed by all elements of formative assessment and acts as a progression gateway to the next stage of clinical education.

DRAD CAT incorporates a feedback and grading system which recognises learner's achievements and makes recommendations for areas of development.

DRAD CAT has been mapped to the HCPC Standards of Proficiency (2023), the HCPC Standards of Conduct (2024), the 4th edition of College of Radiographers Education & Career Framework (2022) and the Knowledge, Skills and Behaviours of the Apprenticeship Standard for Diagnostic Radiography (2023).

What elements of assessment does DRAD CAT use?

The formative and summative assessments in DRAD CAT are detailed below.

Professional Behaviours

These are formative assessments of learner's progress towards meeting the standards of professional behaviour. Eight domains of professional behaviours are assessed. Progress with professional behaviours should be reviewed by the member of staff undertaking the Mid-Placement and End of Placement reviews.

Clinical Proficiencies

These are formative assessments of learner's progress towards clinical proficiency as a diagnostic radiographer. Sixteen domains of clinical proficiency are assessed, with a further optional proficiency for specialist projection radiography such as mammography, DXA and dentals (depending upon availability in the placement setting).

An additional template is provided for reflection upon additional experiences

which have contributed to placement learning. For example, interprofessional learning opportunities such as attending a Multi-Disciplinary Team meeting, or spending time in the Emergency Department.

Progress with clinical proficiencies should be reviewed by the member of staff undertaking the Mid-Placement and End of Placement reviews.

Observations of Practice

These are formative assessments of learner's clinical practice. These holistic assessments facilitate demonstration of the learner's competency and progress.

Observations of practice are typically conducted over half a day and should be undertaken in clinical areas such as projection radiography (axial and appendicular skeleton), standard and mobile chest x-rays, theatre radiography, adapted technique, or a CT head list.

At the end of the observation, supportive, constructive, developmental feedback should be provided by the assessor, to guide the learner's development and enable updates to their SMART action plan.

Observations of practice should be conducted by a trained clinical assessor or practice educator and recorded using the template provided in DRAD CAT. Observations of practice must be completed before the End of Placement review meeting.

Reflections and Self-Assessment

These are formative assessments. Learners are required to write regular reflections on their placement learning, using the templates provided in the appendices of

DRAD CAT. The reflections should be discussed in the Mid-Point and End of Placement review meetings and used to inform the learner's SMART action plan.

Learners are required to regularly review their SMART action plans and update them to reflect any areas which require further development. All the reflections and action plans completed within a single placement should be reviewed by the member of staff undertaking the End of Placement review.

Feedback from peers / service users / carers

Feedback should be sought in relation to how the learner interacted with their peers (usually by another learner on a similar programme of study) during their placement. Feedback should also be sought from people receiving care (service users) or their carers. A template has been provided within DRAD CAT to facilitate this.

This feedback is classed a formative assessment; therefore, it will not be summatively assessed but will contribute towards overall learner feedback. Feedback should be reviewed by the member of staff undertaking the Mid-Placement and End of Placement reviews.

Feedback from colleagues

A template has also been provided in DRAD CAT to facilitate collection of feedback from colleagues supporting learner's learning. This could be from Radiology Nurses, Assistant Practitioners, Radiology Department Assistants, or Radiology Department Administrators.

Record of placement hours completed

A proforma has been provided in DRAD CAT for learners to record the number of hours completed during each week of a clinical placement. This record must be signed off each week by a clinical supervisor or assessor. Any absence from a clinical placement (whether due to sickness or extenuating circumstances) must be documented in the record.

Integrated Review process

This is a three-stage process, which spans each clinical placement consisting of an initial objective setting meeting (formative), a mid-placement review (formative) and an end of placement review (summative). A flow chart showing the process is included on page 8. A placement will often mean all the placement time completed within one academic year. However, as programme structures differ depending on whether they are a BSc or MSc route, or an Apprenticeship, the term placement has been used to ensure flexibility.

Reviews should be completed by a practice educator or clinical assessor from the placement setting and may also be attended by a university representative. Before the meeting, learners should review their complete a self-assessment of their progress using a reflective tool. During the review, the learner's progress during the placement should be discussed, learning and development needs should be identified, and the learner's SMART action plan should be updated. Meetings should be documented using the templates provided in DRAD CAT, which all parties should sign off.

Integrated Review Process Flow Chart

Prior to Placement

Learner makes contact to obtain information to support their preparation for practice.



Placement Induction

The induction checklist should be used to guide and structure induction to placement.



Initial objective setting meeting (formative)

Learning and development needs are identified via SWOC analysis. SMART Objectives agreed.



Mid-Point Review (formative)

Progress is reviewed. Learning and development needs updated using SWOC and SMART tools.



End of Placement Review (summative)

Progress and achievement are explored. Any outstanding development needs are noted.

Further information/guidance is included in the Clinical Assessment Tool

Guidance for using DRAD CAT by role

Learner responsibilities

The Diagnostic Radiography Clinical Assessment Tool (DRAD CAT) has been designed to support and guide you towards successfully achieving the standards set out in the Standards of Proficiency for Diagnostic Radiographers (HCPC, 2023), Standards of Conduct for Registrants (HCPC, 2024) and the Society & College of Radiographers Education & Career Framework (2022), and if applicable and Knowledge, Skills and Behaviours of the Apprenticeship Standard for Diagnostic Radiography (2023).

DRAD CAT will be a significant part of your overall programme assessment, and as such, must be passed for your degree to be awarded. DRAD CAT uses a continuous assessment approach; therefore, you are expected to show evidence of consistent development and achievement in your clinical skills. You should engage positively in learning opportunities, take responsibility for your development and know how to access support. You will work with and receive written feedback from a range of staff including practice educators, clinical assessors and clinical supervisors, as well as your university team. You are required to reflect on your learning and plan your personal development.

You are responsible for raising concerns with a nominated person in the placement setting in a timely manner. You should also alert staff to any reasonable adjustments that may be required to support your learning.

You should ensure you are familiar with your university assessment and submission processes for this document and contact the

academic representative from your university or refer to your university's virtual learning environment if you require support or advice on specific university procedures.

You are responsible for the safekeeping and maintenance of your DRAD CAT document. It should always be available to your practice educator, clinical supervisor/assessor and your placement link tutor when you are in placement.

You will have access to confidential information when on placement. Your DRAD CAT should not contain any patient/service user/carers identifiable information. Contents must not be disclosed to any unauthorised person or removed, photocopied or used outside the placement or university.

People must be offered the opportunity to give and if required withdraw their informed consent to learner participation in their care and staff in practice will provide guidance as required. Before approaching any patient/service user/carers for feedback you must discuss with your practice educator or clinical supervisor/assessor who will facilitate consent.

Practice Educator responsibilities

(Registered diagnostic radiographer who is experienced in supporting clinical learning and assessment and is usually accredited by the College of Radiographers. This role may have other titles such as Clinical Tutor.)

As a practice educator you are a registered practitioner who supports learners in the workplace at all levels of practice. You will lead and facilitate practice education with the support of clinical and academic colleagues. Practice educators are supported in their role by the wider

radiography workforce who work with learners.

As a practice educator you are likely to hold responsibility for conducting learners' integrated placement reviews. You will be required to facilitate learning opportunities for learners and plan to support any reasonable adjustments a learner may need to get maximum benefit from their placement. You may also confirm learner's clinical proficiency and professional behaviours.

Clinical assessor responsibilities

(Registered diagnostic radiographer who has completed clinical assessor training)

As a clinical assessor you have a key role in assessing and confirming the learner's clinical proficiencies and professional behaviours. You will supervise the learner, and record observations on their practice, informed by learner reflections, and feedback from clinical supervisors and other relevant people. You will liaise with the practice educator and/or placement link tutor regularly.

There are numerous elements of DRAD CAT which require assessment. When assessing the learner, you should consider their knowledge, skills, behaviours, and the views of those receiving care. Comments should acknowledge those exceptional learners who are exceeding expectations for their stage in practice or who have particularly commendable attitudes, behaviours, knowledge and/or skills. If the learner is not meeting the required standards this should be highlighted as a development need. If there is a cause for concern that requires prompt action, the learner's SMART action plan should be reviewed and updated to address their specific needs.

In the event of a fitness for practice issue, please seek guidance from the practice educator, placement link tutor and/or senior placement management team.

Clinical supervisor responsibilities

(Registered diagnostic radiographer or other registered health/social care professional)

As a clinical supervisor you have an important role in supporting and guiding the learner through their learning experience to ensure safe and effective learning. It is your responsibility to contribute to the learner's assessment through the recording of regular feedback on their progress towards, and achievement of their proficiencies. Specific feedback must be provided to the practice educator on the learner's progress, as required.

In many placement areas learners will be supported by several clinical supervisors. Some areas may adopt a team-based approach due to the nature of the placement setting.

Placement Link Tutors responsibilities

Placement link tutors are employed by a higher education institution providing pre-registration diagnostic radiography education. They will work in partnership with practice educators, clinical assessors and clinical supervisors to evaluate learner's progress. The placement link tutor will regularly communicate with the practice educators, clinical assessors and clinical supervisors in a variety of forms. This role may sometimes be known by alternative titles such as Lecturer-Practitioner or Placement Co-ordinator.

RECORD OF ASSESSMENT



Learner Details

Learner Details	
Learner Name	
Learner Number	
University	
Programme	
Year of study	

Placement Details

Placement Provider (e.g. Trust/Organisation)	Name of Department	Type of Experience (e.g. Projection Radiography, CT, MRI)
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Placement Tel. Number	Placement Contact Email:
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Start Date	End Date	No. of Hours
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Nominated Person to Support Learner and Address Concerns

Name	Designation	Email Address
------	-------------	---------------

Practice Educator Details

Name	Designation	Email Address
------	-------------	---------------

Placement Link Tutor Details

Name	Designation	Email Address
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List of Clinical Assessors

A sample signature must be obtained for all entries within this document

[illegible]

List of Clinical Supervisors

A sample signature must be obtained for all entries within this document

[illegible]

Placement Induction Checklist

Placement Area		
Name of Placement Area:		
Name of Staff Member:		
The following need to be completed on the first day of placement:	Initial/Date (Learner signature)	Initial/Date (Staff signature)
A general orientation to the placement setting has been undertaken.		
The local fire procedures have been explained, and telephone number has been provided. Tel:		
The learner has been shown the: fire alarms, fire exits, fire extinguishers.		
The resuscitation policy and procedures have been explained and telephone number provided. Tel.:		
The resuscitation equipment has been shown and explained.		
The learner knows how to summon help in the event of an emergency.		
The learner is aware of where to find: <ul style="list-style-type: none"> • health and safety policies • radiation safety policy and procedures • incident reporting policy and procedures • infection prevention and control policies • handling of messages and enquiries policies 		

<ul style="list-style-type: none"> any other relevant policies 		
The learner has been made aware of information governance requirements.		
The shift times, mealtimes and reporting sickness and absence policies have been explained.		
The learner is aware of their role in practice.		
The learner is aware of the policy and process for safeguarding.		
The learner is aware of the policy and process of raising concerns.		
The lone working policy has been explained (<i>if applicable</i>).		
Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed).		
The following need to be completed prior to first use:		
The learner has been shown and given a demonstration of the imaging equipment used in the placement area.		
The learner has been shown and given a demonstration of the moving and handling equipment used in the placement area.		
The learner has been shown and given a demonstration of the medical devices used in the placement area.		

Integrated Review process: Initial Objective setting meeting (Formative Assessment)

This can be completed by a practice educator or clinical assessor. This meeting should take place within the first week of the placement.

Initial objective setting

Factors which may impact on learning, to be completed by the learner.

Factors could include:

- Concerns about risk of discrimination linked to protected characteristics (age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership and pregnancy and maternity)
- Concerns regarding accessibility/access adjustments,
- Social or family circumstances such as living environment, caring responsibilities or travel issues
- Health or wellbeing issues relating to physical and/or mental health
- Financial issues such as travel costs or access
- Religious or cultural beliefs, values or practises
- Previous problems encountered during placements
- Previous experiences such as bereavement, personal or family health or wellbeing issues that may be relevant to how the learner experiences the placement setting

Learner to identify learning and development needs using a **SWOC** (Strengths, Weaknesses, Opportunities, Challenges) analysis (with guidance from the practice educator or clinical assessor)

Strengths

What do you do well? What do others see as your strengths?

Weaknesses

What could you improve? What are you less confident about?

Opportunities

What opportunities are available to you? How can you turn your strengths into opportunities?

Challenges

What challenges or hurdles may you meet along the way?

Taking available learning opportunities into consideration, the learner and practice educator / clinical assessor to negotiate and agree SMART objectives - Specific, Measurable, Achievable, Realistic and include a Time frame. Ask yourself 'what do I want to achieve? By when? How do I measure success?'

Learners Personal Learning Objectives

How will this be achieved? What resources (time, support, people) are needed?

Learners Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Integrated Review process: Mid-Point Review meeting (Formative Assessment)

Learner to reflect on progress and identify learning and development needs using SWOC analysis. This meeting should take place approximately halfway through the placement.

Mid-Point Review

Placement Area Name:

Strengths

What do you do well? What do others see as your strengths?

Weaknesses

What could you improve? What are you less confident about?

Opportunities

What opportunities are available to you? How can you turn your strengths into opportunities?

Challenges

What challenges or hurdles may you meet along the way?

Taking available learning opportunities into consideration, the learner and practice educator / clinical assessor to negotiate and agree SMART objectives for the rest of the placement.

Learners Personal Learning Objectives

How will this be achieved? What resources (time, support, people) are needed?

Learners Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Integrated Review process: End of Placement Review meeting

(Summative Assessment)

Learner to reflect on progress during the placement and identify any outstanding learning and development needs using SWOC analysis. This can be completed by a practice educator or clinical assessor.

End of Placement Review

Placement Area Name:

Strengths

What did you do well? What did others see as your strengths?

Weaknesses

What could you have improved? What did you feel less confident about?

Opportunities

What opportunities were available to you? How did you turn your strengths into opportunities?

Challenges

What challenges or hurdles did you meet along the way?

SMART action plan - specific development needs to take forward to next placement

Learners Personal Learning Objectives

How will this be achieved? What resources (time, support, people) are needed?

Practice Educator / Clinical Assessors comments

Discuss with the learner their reflection and comment on their progress, detailing the evidence used to come to your decision.

Was an action plan required to support the learner?

YES / NO

If yes, was the placement link tutor informed?

YES / NO

If yes, have the objectives been achieved?

YES / NO

End of Placement Checklist	Tick	Practice Educator / Clinical Assessor Initials	Learner Initials
Progress in the professional behaviour domains has been documented for this placement.			
Progress in the clinical proficiency domains has been documented for this placement.			
The number of clinical placement hours completed in this placement have been checked and signed.			
The observation of practice for this placement has been completed and signed.			
There is evidence of learners' reflection and self-assessment of their progress during the placement.			
There is evidence of feedback from service users, carers and/or peers on the learners' interactions during this placement.			
The integrated review process for this placement has been completed.			
The practice educator/s, clinical assessor/s, and clinical supervisor/s have provided their full name, HCPC registration number and a sample of their signature in this document			

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Professional Behaviour Domains Checklist

(Formative Assessment)

These formative assessments measure learner's progress towards meeting the standards of professional behaviour required to be a HCPC registered diagnostic radiographer.

Progress with domains of professional behaviours should be reviewed by the member of staff undertaking the Mid-Placement and End of Placement reviews.

Professional Behaviour Domain	Progress at Mid-Point	Initial / Date	Progress by End	Initial / Date
1 - Safe and effective practice				
2 - Professional conduct				
3 - Person-centred care				
4 - Wellbeing of self and others				
5 - Communication skills				
6 - Interprofessional relationships				
7 - Leadership qualities				
8 - Continuing Professional Development				

Professional Behaviour Domain 1:

Safe and effective practice

Ability to consistently work safely and effectively within scope of practice, make reasonable adjustments as required, report concerns in a timely manner, and make informed decisions.

This professional behaviour considers whether the learner demonstrates the ability to:

- Work safely & effectively within scope of practice
- Make reasonable adjustments as required
- Report concerns in a timely manner
- Make informed decisions

This domain maps to:

HCPC SoPs: 1.1, 1.2, 4.6, 4.7, 4.8, 5.4, 13.7, 14.1, 14.2, 14.3, 14.4, 14.5, 14.6, 14.8, 14.9

HCPC SoCs: 3.1, 3.2, 3.3, 4.1, 6.1, 6.2, 7.1, 7.2

SCoR ECF: 3.1, 3.9, 3.10, 3.11, 3.31, 4.3, 7.2

KSBs: K13, K49, S1, S3, S17, S25, S66, S68, S69, S73, S74, S76, S79, S103, S104, S106, S107, S108, S109

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently demonstrates this professional behaviour. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this professional behaviour:

Please provide brief written feedback on the development areas for this learner for this professional behaviour:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this professional behaviour:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Professional Behaviour Domain 2:

Professional conduct

Ability to maintain appropriate professional boundaries, work in a trustworthy and ethically sound way, act as a role model for others, and reflect on impact on self and others.

This professional behaviour considers whether the learner demonstrates the ability to:

- Work in a trustworthy and ethically sound way
- Act as a role model for others
- Reflect on impact on self and others

This domain maps to:

HCPC SoPs: 2.1, 2.2, 2.3, 2.4, 2.9, 2.11, 4.1, 5.3, 8.3

HCPC SoCs: 1.7, 1.8, 1.9, 1.11, 1.12, 2.1, 2.8, 2.10, 2.12, 7, 7.5, 7.6, 7.7, 8.1, 8.2, 8.4, 9.1, 9.2, 9.3, 9.4, 9.5, 9.6

SCoR ECF: 2.1, 3.19, 3.20, 3.21, 3.27, 3.28, 3.33

KSBs: S4, S8, S10, S12, S30, S45, B1, B2, B4, B5, B6

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently demonstrates this professional behaviour. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this professional behaviour:

Please provide brief written feedback on the development areas for this learner for this professional behaviour:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this professional behaviour:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Professional Behaviour Domain 3

Person-centred care

Ability to practice inclusively, upholding the rights, dignity, values, beliefs and autonomy of individuals, and empowering people by recognizing and supporting their individual needs.

This professional behaviour considers whether the learner demonstrates the ability to:

- Practice inclusively
- Uphold the rights, dignity, values, beliefs and autonomy of individuals
- Empower people by recognising and supporting the individual needs

This domain maps to:

HCPC SoPs: 2.2, 2.3, 2.5, 2.6, 2.8, 4.3, 4.4, 5.1, 5.5, 5.6, 5.7, 5.8, 6.3, 7.11, 8.5, 8.12, 13.3, 13.13, 13.14, 13.18, 13.21, 13.22, 13.27, 13.28, 13.30, 13.31

HCPC SoCs: 1.1, 1.2, 1.5, 1.6, 2.2, 2.3, 2.4, 2.5, 7.1, 7.3, 7.4, 8.3

SCoR ECF: 1.1, 1.2, 1.3, 1.4, 1.7, 2.6, 3.32, 3.34, 3.35, 3.37, 4.1, 7.12, 7.4, 7.5, 7.6, 7.7, 7.8

KSBs: K2, K6, K16, K28, K31, S5, S6, S7, S23, S24, S26, S28, S31, S34, S47, S87, B3

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently demonstrates this professional behaviour. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this professional behaviour:

Please provide brief written feedback on the development areas for this learner for this professional behaviour:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this professional behaviour:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Professional Behaviour Domain 4

Wellbeing of self and others

Ability to empower and enable individuals and self to manage own physical health, mental health, and wellbeing, adjust practice as required, and promote public health initiatives.

This professional behaviour considers whether the learner demonstrates the ability to:

- Work safely & effectively within scope of practice
- Make reasonable adjustments as required
- Report concerns in a timely manner
- Make informed decisions

This domain maps to:

HCPC SoPs: 3.1, 3.2, 3.3, 3.4, 7.4, 12.6, 15.3

HCPC SoCs: 1.3, 2.11, 6.3, 6.4

SCoR ECF: 3.29, 3.30, 3.38

KSBs: K9, K10, S14, S15, S108, B3, B7

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	<i>Learner requires direct supervision and frequent direction (around 75% of the time).</i>	<i>Learner requires direct supervision and some direction (around 50% of the time).</i>	<i>Learner requires low levels of direct supervision and minimal direction (around 25% of the time).</i>	<i>Learner consistently demonstrates this professional behaviour. Learner is performing at the required standard for entering the profession.</i>

Please provide brief written feedback on the strengths demonstrated by this learner for this professional behaviour:

Please provide brief written feedback on the development areas for this learner for this professional behaviour:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this professional behaviour:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Professional Behaviour Domain 5

Communication skills

Ability to adapt all forms of verbal and non-verbal communication to the individual needs, preferences and circumstances in the placement setting. Responsible use of social media, as per HCPC Standards of Conduct.

This professional behaviour considers whether the learner demonstrates the ability to:

- Adapt all forms of verbal and non-verbal communication to individual needs, preferences and circumstances
- Use social media responsibly, as per HCPC SoCs.

This domain maps to:

HCPC SoPs: 4.4, 7.1, 7.2, 7.3, 7.5, 7.6, 7.7, 7.8, 7.9, 7.10, 7.11

HCPC SoCs: 1.10, 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9, 2.10, 2.11, 2.12

SCoR ECF: 2.1, 2.2, 2.3, 2.5, 2.6, 2.7

KSBs: K21, K22, K23, K55, S29, S30, S31, S32, S36, S41

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently demonstrates this professional behaviour. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this professional behaviour:

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Please provide brief written feedback on this learner's level of effort and attitude towards learning for this professional behaviour:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Professional Behaviour Domain 6

Interprofessional relationships

Ability to work in partnership with colleagues from the multi-disciplinary team, recognising their professional knowledge and skills, and sharing relevant information where appropriate

This professional behaviour considers whether the learner demonstrates the ability to:

- Work in partnership with MDT colleagues
- Recognise professional knowledge and skills
- Share relevant information where appropriate

This domain maps to:

HCPC SoPs: 7.10, 8.1, 8.2, 8.3, 8.4, 8.5

HCPC SoCs: 2.6, 2.7, 2.9

SCoR ECF: 4.2, 4.4

KSBs: K38, S35

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	<i>Learner requires direct supervision and frequent direction (around 75% of the time).</i>	<i>Learner requires direct supervision and some direction (around 50% of the time).</i>	<i>Learner requires low levels of direct supervision and minimal direction (around 25% of the time).</i>	<i>Learner consistently demonstrates this professional behaviour. Learner is performing at the required standard for entering the profession.</i>

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Learner's Name:

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Signature:

Date:

Professional Behaviour Domain 7

Leadership qualities

Ability to demonstrate leadership qualities and behaviours, act as a role model, support and mentor colleagues and peers, and provide appropriate supervision.

This professional behaviour considers whether the learner demonstrates the ability to:

- Demonstrate leadership qualities and behaviours
- Acts as role model
- Support and mentor colleagues and peers
- Provide appropriate supervision

This domain maps to:

HCPC SoPs: 4.5, 4.8, 8.9, 8.10, 8.11, 8.13

HCPC SoCs: 4.2

SCoR ECF: 2.4

KSBs: K11, K26, S43, S44, S48

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	<i>Learner requires direct supervision and frequent direction (around 75% of the time).</i>	<i>Learner requires direct supervision and some direction (around 50% of the time).</i>	<i>Learner requires low levels of direct supervision and minimal direction (around 25% of the time).</i>	<i>Learner consistently demonstrates this professional behaviour. Learner is performing at the required standard for entering the profession.</i>

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Please provide brief written feedback on this learner's level of effort and attitude towards learning for this professional behaviour:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Professional Behaviour Domain 8

Continuing Professional Development

Ability to reflect on own practice to continually improve, and to engage with peers and colleagues to support their development. To keep up to date with research and developments within the profession, such as new technologies, applications, innovations and practices.

This professional behaviour considers whether the learner demonstrates the ability to:

- Reflect on own practice to continually improve
- Engage with peers and colleagues' development
- Keep up to date with research and developments, Such as new technologies, applications, innovations and practices.

This domain maps to:

HCPC SoPs: 1.3, 4.8, 5.6, 13.1

HCPC SoCs: 3.4, 3.5, 3.6

SCoR ECF: 2.4, 3.2, 5.10, 5.11, 5.12

KSBs: K11, K32, S3, S61, S63, B5, B6

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently demonstrates this professional behaviour. Learner is performing at the required standard for entering the profession.

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Please provide brief written feedback on this learner's level of effort and attitude towards learning for this professional behaviour:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiencies Domains Checklist

(Formative Assessment)

These formative assessments measure learner's progress towards meeting the standards of clinical proficiency required to be a HCPC registered diagnostic radiographer. Progress with clinical proficiency domains should be reviewed by the member of staff undertaking the Mid-Point and End of Placement reviews.

Clinical Proficiency Domain	Progress at Mid-Point	Initial / Date	Achieved by End	Initial / Date
1. Informed Consent				
2. Safety of self, service users, carers and colleagues				
3. Record keeping and confidentiality				
4. Radiation Protection				
5. Use of imaging related digital technology and supporting systems				
6. Safe use of contrast media and IV cannulation in line with HCPC SoPs				
7. Image evaluation and escalation of concerns <i>7a Ability to appraise images for quality, technical acceptability and accuracy and suggest improvements if required.</i> <i>7b Ability to take appropriate action to escalate concerns if unexpected findings are identified.</i>				
8. Projection Radiography - Axial, Appendicular, Chest and Abdomen – standard technique				

9. Projection Radiography - Axial, Appendicular, Chest and Abdomen - adapted technique				
10. Technique / Examination - Fluoroscopy, Interventional and Theatre <i>10a Ability to assist in a range of interventional and fluoroscopy procedures. 10b Ability to perform a range of examinations within a theatre environment.</i>				
11. Projection Radiography - Mobiles				
12. Technique / Examination - CT Head, Body, Spine				
13. Technique / Examination - Magnetic Resonance Imaging				
14. Assist with Ultrasound examinations				
15. Assist with Radionuclide examinations				
16. Projection Radiography - Paediatrics				
17. Additional experience (optional) DXA / Mammography / Dentals				

Clinical Proficiency Domain 1

Informed Consent

Ability to obtain valid consent, which is voluntary, informed, has due regard to capacity, is proportionate to the circumstances and is appropriately documented.

This clinical proficiency considers whether the learner demonstrates the ability to obtain valid consent, which is:

- Voluntary
- Informed
- Has due regard to capacity
- Is proportionate to the circumstances
- Is appropriately documented

This domain maps to:

HCPC SoPs: 2.7, 13.2

HCPC SoCs: 1.4, 2.2

SCoR ECF: 7.3

KSBs: K4, K23, K48, S9

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

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Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 2

Safety of self, service users, carers and colleagues

Ability to maintain a safe environment for self, service users, carers and colleagues by careful use of equipment, and adherence to health and safety policies and procedures.

This clinical proficiency considers whether the learner demonstrates the ability to maintain an environment which is:

- Safe
- Adheres to health and safety policies and procedures
- Considers self, service users, carers and colleagues' safety

This domain maps to:

HCPC SoPs: 13.19, 13.20

HCPC SoCs: 3.1, 6.1, 6.2

SCoR ECF: 3.5, 3.6, 3.9, 3.10, 3.11, 3.12, 3.15, 6.8, 7.1

KSBs: K60, S18, S19, S78, S82

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

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Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 3

Record keeping and confidentiality

Ability to maintain full clear accurate records in line with relevant legislation, guidelines and protocols, particularly confidentiality.

This clinical proficiency considers whether the learner demonstrates the ability to maintain records which are:

- Full and accurate
- In line with relevant legislation, guidelines, policies and procedures
- Maintain confidentiality

This domain maps to:

HCPC SoPs: 9.1, 9.2, 9.3

HCPC SoCs: 5.1, 5.2, 10.1, 10.2, 10.3

SCoR ECF: 3.3, 7.3

KSBs: S37, S65

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

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Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 4

Radiation protection

Ability to ensure the safety of individuals regarding radiation and high-strength magnetic fields, and to maximise the health gain for individuals from their imaging, whilst minimising the risks from exposure to radiation, and complying with IRR and IR(ME)R.

This clinical proficiency considers whether the learner demonstrates the ability to:

- Ensure safety of individuals regarding radiation and high-strength magnetic fields
- Maximise the health gain for individuals from their imaging
- Minimise risk from exposure to radiation
- Comply with relevant legislation, guidelines, policies and procedures such IRR and IR(ME)R

This domain maps to:

HCPC SoPs: 2.12, 8.15, 11.4, 12.11, 13.19, 13.20, 13.24, 14.7

HCPC SoCs: 6.1

SCoR ECF: 3.8, 3.12, 3.13, 3.14, 6.1, 6.3, 6.4, 6.5, 6.6, 6.7, 6.8, 6.9, 7.2, 7.9, 7.11, 7.13

KSBs: K35, K43, K45, K60, S13, S50, S54, S58, S80, S84, S91, S106

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this proficiency:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 5

Use of imaging related digital technology and supporting systems

Ability to use to best effect imaging related digital technology, such as post processing and AI, and supporting systems, such as PACS and RIS.

This clinical proficiency considers whether the learner demonstrates the ability to:

- 1. Use to best effect imaging related digital technology, such as post processing and AI
- 2. Use to best effect supporting systems such as PACS and RIS

This domain maps to:

HCPC SoPs: 7.7, 13.4, 13.33
HCPC SoCs: N/A
SCoR ECF: 3.31, 6.10, 6.12
KSBs: K29, S33, S61, S62, S93

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this proficiency:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 6

Safe use of contrast media and IV cannulation in line with HCPC SoPs.

Ability to perform a broad range of imaging examinations which require the use of contrast media, across a range of diagnostic or screening pathways, and to recognise adverse or abnormal reactions, and respond to them appropriately.

This clinical proficiency considers whether the learner demonstrates the ability to:

1. Perform a broad range of imaging examinations requiring use of contrast media, across a range of diagnostic or screening pathways
2. Recognise adverse or abnormal reaction and respond to them appropriately

This domain maps to:

HCPC SoPs: 12.11, 12.21, 13.25, 13.26, 13.34

HCPC SoCs: N/A

SCoR ECF: 3.5, 3.6, 3.7

KSBs: S60, S84, S85, S94

Novice	Developing	Strengthening	Consolidating	Profession Ready
<i>Learner requires high levels of direct supervision and consistently needs direction.</i>	<i>Learner requires direct supervision and frequent direction (around 75% of the time).</i>	<i>Learner requires direct supervision and some direction (around 50% of the time).</i>	<i>Learner requires low levels of direct supervision and minimal direction (around 25% of the time).</i>	<i>Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.</i>

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this proficiency:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 7a

Image evaluation and escalation of concerns

7a. Ability to appraise images for quality, technical acceptability and accuracy, suggest improvements if required.

This clinical proficiency considers whether the learner demonstrates the ability to:

1. Appraise images for quality, technical acceptability and accuracy
2. Suggest improvements if required

This domain maps to:

HCPC SoPs: 13.17, 13.39

HCPC SoCs: N/A

SCoR ECF: 7.17, 8.2, 8.4, 8.5, 8.6

KSBs: K57, S59, S99

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

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Learner's Name:

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Signature:

Date:

Clinical Proficiency Domain 7b

Image evaluation and escalation of concerns

7b. Ability to take appropriate action to escalate concerns if unexpected findings are identified.

This clinical proficiency considers whether the learner demonstrates the ability to:

- 1. Identify unexpected findings
- 2. Take appropriate action to escalate concerns

This domain maps to:

HCPC SoPs: 12.16, 13.40
HCPC SoCs: N/A
SCoR ECF: 7.14, 8.3
KSBs: S100

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

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Please provide brief written feedback on the development areas for this learner for this proficiency:

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Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 8

Projection radiography (axial, appendicular, chest and abdomen – standard techniques)

Ability to perform a broad range of standard axial and appendicular skeleton, chest and abdominal imaging techniques, across a variety of diagnostic or screening care pathways.

This clinical proficiency considers whether the learner demonstrates the ability to:

1. Perform a broad range of standard axial and appendicular skeleton imaging techniques
2. Perform chest and abdomen imaging techniques

This domain maps to:

HCPC SoPs: 13.4, 13.23, 13.26

HCPC SoCs: N/A

SCoR ECF: 6.6, 7.1, 8.4

KSBs: S78, S84

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

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Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 9

Projection radiography (axial, appendicular, chest and abdominal – adapted techniques)

Ability to perform a broad range of imaging examinations where the service user's individual characteristics require non-standard imaging techniques.

This clinical proficiency considers whether the learner demonstrates the ability to perform a broad range of imaging examinations where the service user's individual characteristics require non-standard imaging techniques.

This domain maps to:

HCPC SoPs: 13.18, 13.26, 13.28, 13.32, 13.4

HCPC SoCs: N/A

SCoR ECF: 7.1, 7.5, 7.6, 7.7, 7.8

KSBs: S88, S92

Novice	Developing	Strengthening	Consolidating	Profession Ready
<i>Learner requires high levels of direct supervision and consistently needs direction.</i>	<i>Learner requires direct supervision and frequent direction (around 75% of the time).</i>	<i>Learner requires direct supervision and some direction (around 50% of the time).</i>	<i>Learner requires low levels of direct supervision and minimal direction (around 25% of the time).</i>	<i>Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.</i>

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Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 10a

Technique/examination (Fluoroscopy, Interventional and Theatre)

10a. Ability to assist in a range of interventional and fluoroscopy procedures.

This clinical proficiency considers whether the learner demonstrates the ability to assist in a range of interventional and fluoroscopy procedures. The focus of this proficiency should be safe use of imaging equipment.

This domain maps to:

HCPC SoPs: 13.25, 13.26, 13.34, 13.40
HCPC SoCs: N/A
SCoR ECF: 6.6, 6.8, 7.15
KSBs: S78, S94

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

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Please provide brief written feedback on the development areas for this learner for this proficiency:

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Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 10b

Technique/examination

(Fluoroscopy, Interventional and Theatre)

10b. Ability to perform a range of examinations within a theatre environment.

This clinical proficiency considers whether the learner demonstrates the ability to perform a range of examinations within a theatre environment. The focus of this proficiency should be safe use of imaging equipment.

This domain maps to:

HCPC SoPs: 13.30
HCPC SoCs: N/A
SCoR ECF: 7.12
KSBs: S90

Novice	Developing	Strengthening	Consolidating	Profession Ready
<i>Learner requires high levels of direct supervision and consistently needs direction.</i>	<i>Learner requires direct supervision and frequent direction (around 75% of the time).</i>	<i>Learner requires direct supervision and some direction (around 50% of the time).</i>	<i>Learner requires low levels of direct supervision and minimal direction (around 25% of the time).</i>	<i>Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.</i>

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Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 11

Projection radiography (mobiles)

Ability to safely and proficiently perform imaging techniques using mobile (radiography) equipment.

This clinical proficiency considers whether the learner demonstrates the ability to perform imaging techniques using mobile (radiography) equipment. This will usually be mobile chest imaging.

This domain maps to:

HCPC SoPs: 13.4, 13.26, 13.29

HCPC SoCs: N/A

SCoR ECF: 6.1, 6.6

KSBs: S89

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

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Learner's Name:

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Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 12

CT – Head, body, spine

Ability to perform a range of CT examinations, including a standard CT head, and assist with CT examinations of the spine, chest and abdomen in acute trauma, and contribute effectively to other CT studies.

This clinical proficiency considers whether the learner demonstrates the ability to:

1. Perform a standard CT head examination
2. Assist with CT spine, chest and abdomen examinations in acute trauma
3. Contribute effectively to other CT studies

This domain maps to:

HCPC SoPs: 13.4, 13.25, 13.26, 13.35

HCPC SoCs: N/A

SCoR ECF: 3.5, 3.7, 6.6, 8.4

KSBs: S95

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this proficiency:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 13

Magnetic Resonance Imaging

Ability to ensure the physical safety of all individuals in relation to high-strength magnetic fields, and perform examinations routinely undertaken within an MRI department, as per the HCPC SoPs.

This clinical proficiency considers whether the learner demonstrates the ability to:

1. Ensure physical safety of all individuals in relation to high-strength magnetic fields
2. Perform examinations routinely undertaken within an MRI department

This domain maps to:

HCPC SoPs: 13.4, 13.25, 13.26, 13.36, 14.7

HCPC SoCs: N/A

SCoR ECF: 3.5, 6.6, 8.4

KSBs: S96

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this proficiency:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 14

Assist with Ultrasound examinations

Ability to assist with ultrasound imaging procedures, across a variety of diagnostic or screening care pathways.

This clinical proficiency considers whether the learner demonstrates the ability to assist with ultrasound imaging procedures, across a variety of diagnostic or screening care pathways.

This domain maps to:

HCPC SoPs: 13.4, 13.25, 13.37
HCPC SoCs: N/A
SCoR ECF: 6.6, 8.4
KSBs: S97

Novice	Developing	Strengthening	Consolidating	Profession Ready
<i>Learner requires high levels of direct supervision and consistently needs direction.</i>	<i>Learner requires direct supervision and frequent direction (around 75% of the time).</i>	<i>Learner requires direct supervision and some direction (around 50% of the time).</i>	<i>Learner requires low levels of direct supervision and minimal direction (around 25% of the time).</i>	<i>Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.</i>

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this proficiency:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 15

Assist with Radionuclide examinations

Ability to assist with imaging procedures using radionuclides including PET tracers and particle emitters, across a variety of diagnostic or screening care pathways.

This clinical proficiency considers whether the learner demonstrates the ability to assist with imaging procedures using radionuclides including PET tracers and particle emitters, across a variety of diagnostic or screening care pathways.

This domain maps to:

HCPC SoPs: 13.4, 13.25, 13.38
HCPC SoC's: N/A
SCoR ECF: 6.6, 8.4
KSB's: S98

Novice	Developing	Strengthening	Consolidating	Profession Ready
Learner requires high levels of direct supervision and consistently needs direction.	Learner requires direct supervision and frequent direction (around 75% of the time).	Learner requires direct supervision and some direction (around 50% of the time).	Learner requires low levels of direct supervision and minimal direction (around 25% of the time).	Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this proficiency:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 16

Projection Radiography - Paediatrics

Ability to perform projection radiography for paediatric patients.

This clinical proficiency considers whether the learner demonstrates the ability to perform projection radiography for paediatric patients.

This domain maps to:

HCPC SoPs: 13.32

HCPC SoC's: N/A

SCoR ECF: 7.6

KSB's: S92

Novice	Developing	Strengthening	Consolidating	Profession Ready
<i>Learner requires high levels of direct supervision and consistently needs direction.</i>	<i>Learner requires direct supervision and frequent direction (around 75% of the time).</i>	<i>Learner requires direct supervision and some direction (around 50% of the time).</i>	<i>Learner requires low levels of direct supervision and minimal direction (around 25% of the time).</i>	<i>Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.</i>

Please provide brief written feedback on the strengths demonstrated by this learner for this proficiency:

Please provide brief written feedback on the development areas for this learner for this proficiency:

Please provide brief written feedback on this learner's level of effort and attitude towards learning for this proficiency:

Learner's Name:

Signature:

Date:

Practice Educator / Clinical Assessor's Name:

Signature:

Date:

Clinical Proficiency Domain 17

Additional Experience (optional formative assessment)

Recording Additional Experiences

This template is for you to use to reflect upon additional experiences you have had which have contributed to your placement learning. You may use it to record experiences in areas not covered by the other clinical proficiencies, such as DXA, Mammography, Dentals and Forensic radiography.

Nature of Additional Experience:

Location:

Dates:

Learner Reflection:

Learner Name:

Signature:

Date:

Clinical Supervisor's Comments:

Clinical Supervisor's Name:

Signature:

Date:

Experiences of Interprofessional or Multi-Disciplinary Team working

(Formative assessment)

Recording Additional Experiences

This template is for you to use to reflect upon additional experiences you have had which have contributed to your placement learning. For example, interprofessional learning opportunities such as attending a Multi-Disciplinary Team meeting, spending time in the Emergency Department or an Orthopaedic Clinic, or spending time in a ward area. It should link to Professional Behaviour 6 – Interprofessional Relationships.

Nature of Additional Experience:

Location:

Dates:

Learner Reflection:

Learner Name:

Signature:

Date:

Clinical Supervisor's Comments:

Clinical Supervisor's Name:

Signature:

Date:

Record of feedback from peers / service users / carers

(Formative assessment)

Record of feedback

Feedback should be sought from peers (other learners that you have worked with on placement), and service users and carers. Feedback should be collected using the below. Feedback should be reviewed by the member of staff undertaking the End of Placement review.

Name:

Role:

Signature:

Date:

Record of feedback from colleagues

(Formative assessment)

Record of feedback

This page is to record additional feedback from colleagues who have supported your learning, such as Radiology Nurses, Assistant Practitioners, Radiology Department Assistants, Radiology Department Administrators.

Name:

Role:

Signature:

Date:

Observations of practice

(Formative assessment)

Observations of practice should be carried out between the mid-placement review and end of placement review. Observations of practice should provide comprehensive and constructive formative feedback to support the progression of the learner in their practice.

Observations of practice should usually be carried out in a projection radiography clinical area, which may include mobile chest x-rays, theatre radiography, or adapted technique. However, there may be circumstances where an observation is carried out in CT or MRI, depending on the learner's programme of study, e.g. an apprentice who will be working in CT or MR upon qualification.

Novice	Developing	Strengthening	Consolidating	Profession Ready
<i>Learner requires high levels of direct supervision and consistently needs direction.</i>	<i>Learner requires direct supervision and frequent direction (around 75% of the time).</i>	<i>Learner requires direct supervision and some direction (around 50% of the time).</i>	<i>Learner requires low levels of direct supervision and minimal direction (around 25% of the time).</i>	<i>Learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.</i>

Please provide brief written feedback on the strengths demonstrated by this learner during their observation of practice:

Please provide brief written feedback on the development areas for this learner identified during their observation of practice:

Please provide brief written feedback on this learner's level of effort and attitude towards learning during their observation of practice:

Do you have any concerns around this learner's progress?

Yes ☐ No ☐

If yes, please comment:

Responding "Yes" to this question will alert the member of staff responsible for learner development and support (e.g. Practice Educator) to allow for further support to be provided.

Learner signature:

Date:

Reviewer signature:

Review Date:

Record of Placement Hours completed

	No. of hours	Comments	Dates of any absence	Reasons for absence
Week 1				
Week 2				
Week 3				
Week 4				
Week 5				
Week 6				
Week 7				
Week 8				
Week 9				
Week 10				
Week 11				
Week 12				
Week 13				
Week 14				
Week 15				

Week 16				
Week 17				
Week 18				
Week 19				
Week 20				
Total Hours completed				
Any comments				
Learner signature:				
Date:				
Reviewer signature:				
Review Date:				

APPENDICES



Appendix 1 - Template for Reflection (1) - Kolb's Learning Cycle

Based on Kolb DA (1984) Experiential learning: experience as the source of learning and development. Upper Saddle River, NJ; Prentice-Hal

Kolb's Learning Cycle

Briefly describe a critical incident which happened during your last placement.

What did you do... and why?

What went well? What could have been better?

What would you do differently, if anything, if faced with a similar situation again?

How did you feel during the experience?

Describe what you learnt from this experience

What is your action plan from this incident?

I can use this evidence for: Mid-Placement Review / End of Placement Review / CPD /
Evidencing how I meet the KSF / other* (*Delete/indicate as appropriate)

Learner signature:

Date:

Reviewer signature:

Review Date:

Appendix 2 - Template for Reflection (2) - What? So what? Now what?

Based on Borton T (1970) Reach, touch and teach: student concerns and process education.
New York: McGraw Hill

What? So what? Now what?

What?

This is the description and self-awareness level. All questions start with the word 'what'. Ask yourself: What happened? What did I do? What was I trying to achieve? What was good/bad about the situation?

So what?

This is the level of analysis and evaluation. All questions start with the phrase so what? Ask yourself: So, what is the importance of this? So, what more do I need to know about this? So, what have I learnt about this?

Now what?

This is the level of synthesis. All questions start with the phrase now what? Ask yourself: Now what could/should I do? Now what do I need to do? Now what might be the consequences of this action?

I can use this evidence for: Mid-Point Review / End-point Review / CPD / Evidencing how I meet the KSF / other

Learner signature:

Date:

Reviewer signature:

Review Date:

Appendix 3 - Glossary of Terms

Assist - to help or support someone or something.

Autonomous - learner can make informed, reasoned decisions about their own practice.

Critical thinking - learner can think in a way which questions, analyses, interprets, evaluates and makes a judgement about what they read, hear, say or write. It is a way of thinking that does not automatically accept that what you are reading or hearing is true. It is about gathering evidence, analysing all aspects and reaching your own conclusions.

Competency - the skills and knowledge needed to perform a task.

Consolidating - learner requires low levels of direct supervision and minimal direction (around 25% of the time).

Developing - learner requires direct supervision and frequent direction (around 75% of the time).

Development Areas - areas of practice that the learner needs to improve. Once identified, development areas should be included in the learner's personal development plan, with clear SMART objectives to support the learner to improve in this area.

Domain - several professional behaviours or clinical proficiencies (as defined by the HCPC, SCoR ECR or KSB's) that are interrelated.

Formative assessment - formal or informal assessment that supports learning and attainment.

Independent - learner can work autonomously at the level required to enter the profession.

Leadership - learner can lead others or make suggestions to improve care.

Novice - learner requires high levels of direct supervision and consistently needs direction.

Perform - to carry out, execute or do something in a skilled manner.

Profession Ready - learner consistently needs no direction from supervising radiographer. Learner is performing at the required standard for entering the profession.

Proficiency - standard of practice required to become registered with the Health and Care Professions Council. Proficiency reflects an individual's expertise in a specific area, in this case diagnostic radiography.

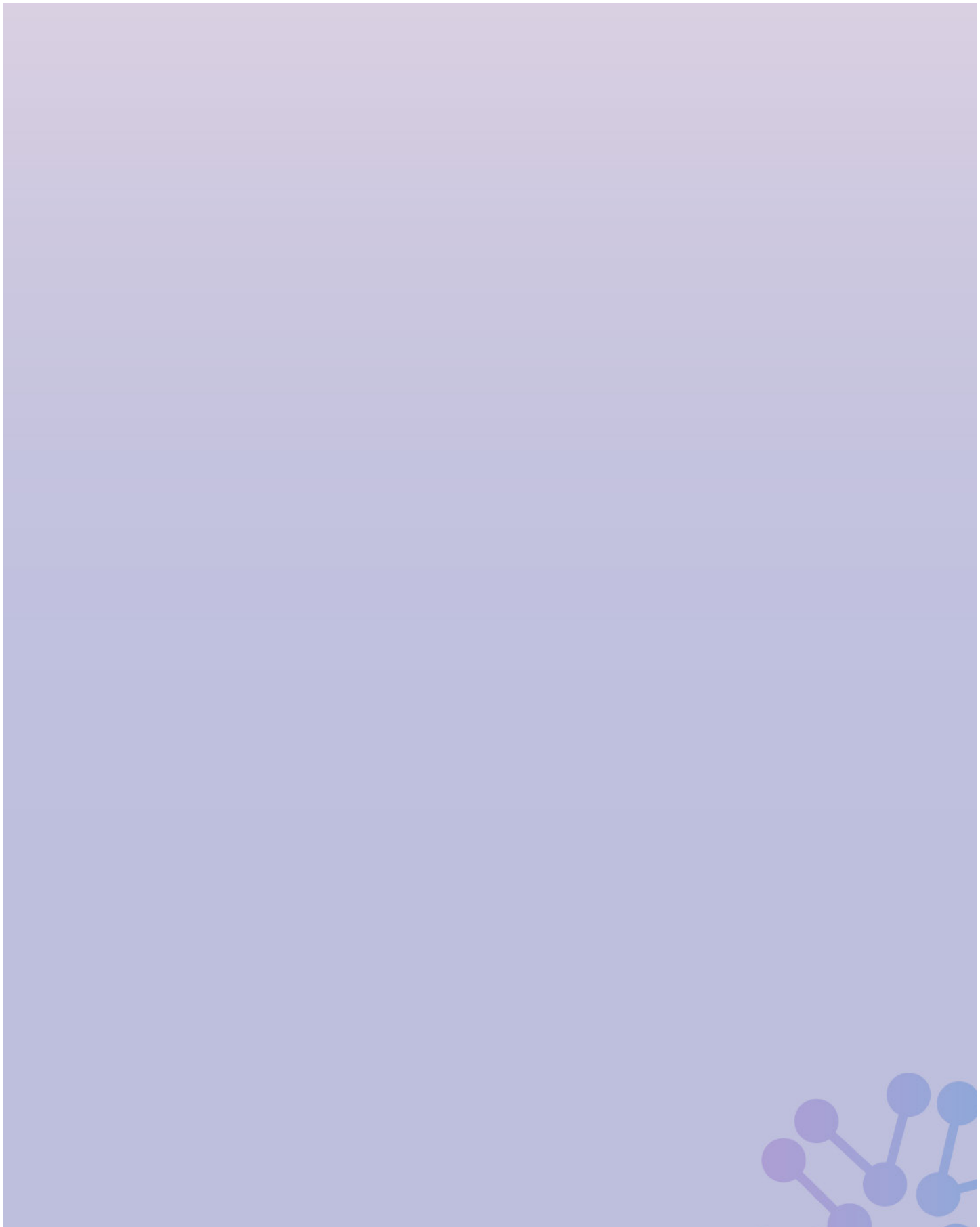
Prompting - learner requires input such as use of key words, or indirect or open questioning to facilitate learning during placement.

Reflective Practice - the process of reflecting on placement experiences to describe, analyse, evaluate and inform learning. This process may modify previous perceptions, assumptions and understanding and influence interventions and outcomes.

Strengthening - learner requires direct supervision and some direction (around 50% of the time).

Summative assessment - an assessment used at a particular point in time to determine learning and attainment.

Support - learner requires explanations, guidance and direction to facilitate learning during placement.



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