



## Student Practice Education Feedback Form

Your feedback on your placement experience is valued. Please take some time to reflect on your recent placement experience by completing this form. This form must be submitted with your reflective report 5 working days post close of placement.

The purpose of this form is to assist in evaluating OT student placement experiences in an effort to ensure high quality placement experiences for current and future OT students.

The Practice Educator Coordinator (PEC) and Regional Placement Facilitator (RPF) will collect this data and review accordingly. Should specific issues be raised during the evaluation phase, these issues may be summarised and fed back to placement sites in an objective manner.

<b>Date:</b>	
<b>Student name:</b>	
<b>Placement Level 1/2/3/4:</b>	
<b>Site name/location:</b>	
<b>Area of practice:</b>	
<b>Placement type (please circle):</b>	<b>1:1; 2:1; split placement.</b>

Please adhere to the following ranking system whereby:

- 1 = very satisfied
- 2 = satisfied
- 3 = neither satisfied/dissatisfied
- 4 = dissatisfied
- 5 = very dissatisfied

**1. Were you provided with sufficient pre-placement information to enable you to prepare for this placement?**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**2. Did you receive adequate on-site induction?**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**3. Were the facilities/resources for students satisfactory?**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**4. Was there a sufficient amount of education/teaching support (both formal and informal)?**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**5. Did you receive adequate supervision?**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**6. How would you rate the quality of the feedback you received from your practice educator (both formally and informally)? Please comment.**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**7. Were your practice educator's expectations clear and reasonable throughout your placement?**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**8. Were you satisfied with your practice educator-student relationship? (please consider your PE's approachability, reliability; and professionalism AND the mutuality and respect within your working relationship etc.)**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**9. Did you feel you comfortable/content with the level of responsibility allocated to you?**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**10. Were you satisfied with the variety of your clinical exposure/experience?**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**11. Do you feel the TCD Practice Education staff offered adequate support before and during this placement experience? Please note that this includes the Practice Educator Coordinator, Regional Placement Facilitator, site-based Practice Tutors.**

Very satisfied    1    2    3    4    5    Very dissatisfied

Comments:

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**12. Please give details about the positive aspects of this placement?**

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**13. Please give details about the aspects of this placement that require further development?**

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**14. Do you have any suggestions for improving student experiences at this placement site in the future?**

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**15. Do you have any other comments to share?**

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