Pre-registration Practice Education Risk of Failure Form

This form is an official record of the under-performance of a pre-registration health student. It is completed by the placement educator in discussion with the university and the student. The use of the form signifies the failure of the student to perform at a satisfactory level, which, if improvement is not demonstrated, is likely to result in the student failing the placement. The form outlines the areas of poor performance and is used to create an action plan to assist the student in improving their performance to the required level. A copy of this form is given to the student, the placement educator and the university lecturer. A copy must be given to the placement administration team for confidential storage in the student’s placement file. Educator copies must be treated as confidential documents and must be destroyed when the student finishes the placement.

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| Student |  | Date |  |
| Programme of Study |  | Level/Type of Placement |  |
| Placement Educator |  | Placement Speciality |  |
| Placement Locality, i.e. trust, hospital |  | University Lecturer (if present) |  |
| Indicators of poor performance:  (these must be aligned with the relevant placement learning outcomes) | | | |
| Safe practice |  | | |
| Effective practice |  | | |
| Informed practice |  | | |
| Occupational focused practice |  | | |
| Professional conduct |  | | |
| Student and date (cont.) |  | | |
| Objectives to be achieved by first review:  (these should include what action will be taken and how success will be demonstrated) | | | |
| Objective 1 |  | | |
| Objective 2 |  | | |
| Objective 3 |  | | |
| Objective 4 |  | | |
| Objective 5 |  | | |
| Date of Review: (Usually 1 week after this form is completed and then weekly until student is performing at the required level or has failed the placement). | | | |

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| The university have been  informed of engagement  in the process | Tutors name | Signature (of who informed the university) | Date |
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| Signature of Student |  |
| Signature of Practice Educator |  |
| Signature of University Lecturer (if present) |  |