

This tool is designed to enable the learner to receive regular feedback as part of their continuing development.

Learner's name:	Date: / /
Assessor's Name:	Assessor's title:
DISCIPLINE (please mark learner's discipline below):	
<input type="checkbox"/> Nursing – RN <input type="checkbox"/> Midwifery <input type="checkbox"/> Dietetics and Nutrition <input type="checkbox"/> Allied Health Assistant <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Other – (please specify)	<input type="checkbox"/> Nursing - EN <input type="checkbox"/> Medicine <input type="checkbox"/> Pharmacy <input type="checkbox"/> Social Work <input type="checkbox"/> Speech Pathology <input type="checkbox"/> Physiotherapy

Nursing only				
Acute	Aged Care	High Acuity	Women's & Children	Community
<input type="checkbox"/> Combined Ward <input type="checkbox"/> Surgical <input type="checkbox"/> Subacute (Armitage House)	<input type="checkbox"/> Kirrak House <input type="checkbox"/> GPL	<input type="checkbox"/> Emergency <input type="checkbox"/> Theatre <input type="checkbox"/> High Dependency Unit	<input type="checkbox"/> Midwifery <input type="checkbox"/> Maternal & Child Health	<input type="checkbox"/> DNS <input type="checkbox"/> HITH <input type="checkbox"/> Other
<input type="checkbox"/> Other - (please specify)				

1. How satisfied were you with the learner's ability to conduct themselves in a professional and ethical manner?	<input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied
2. The learner was able to identify learning goals and objectives??	<input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied
3. The learner has taken every opportunity to consolidate theoretical knowledge and skills?	<input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied
4. How satisfied were you with the learner's critical thinking skills e.g. providing rationales for their practice?	<input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied
5. The learner was able to identify priorities of the allocated workload and contribute to the formulation of care planning?	<input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied
6. How satisfied were you with the learner's level of accountability and responsibility?	<input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied

<p>7. The learner conforms to BCHs policy and procedures with regard to Infection Control and Uniform standards?</p>	<p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Needs improvement - Please provide example: _____ </p>
<p>8. The learner adheres to acceptable OH&S practice standards</p>	<p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Needs improvement - Please provide example: _____ </p>
<p>9. How would you rate the learner's ability to actively listen and follow instructions</p>	<p> <input type="checkbox"/> Excellent <input type="checkbox"/> Very good <input type="checkbox"/> Satisfactory <input type="checkbox"/> Needs improvement <input type="checkbox"/> Poor </p>
<p>10. How satisfied were you with the learner's ability to interpret both verbal and non-verbal cues?</p>	<p> <input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied </p>
<p>11. As requested, how satisfied were you with the learner's ability to reliably provide feedback on delegated care?</p>	<p> <input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied </p>
<p>12. How satisfied were you with the learner's eagerness to help and become involved with patient care?</p>	<p> <input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied </p>
<p>13. List some clinical skills that the learner actively participated in today</p>	
<p>14. This daily feedback form has been discussed with the learner?</p>	<p> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>
<p>15. The learner's ability to receive constructive feedback?</p>	<p> <input type="checkbox"/> Very satisfied <input type="checkbox"/> Satisfied <input type="checkbox"/> Neither satisfied nor dissatisfied <input type="checkbox"/> Dissatisfied <input type="checkbox"/> Very dissatisfied </p>
<p>Additional comments:</p>	
<p>Student comments:</p>	

Thank you for completing this feedback form for the learner