

Placement Audit & Log (PALOG)

**Form for completion *by the Trainee – comments required by Supervisor in box below***

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| **TRAINEE** |  |
| **PLACEMENT LOCATION** |  |
| **SUPERVISOR (S)** |  |
| **MEMBER OF STAFF CONDUCTING VISIT** |  |
| **PLACEMENT DATES**  |  |
| **TYPE OF PLACEMENT** |  |

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| **SUPERVISOR'S COMMENTS on information in this audit/log:** |
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**SUPERVISION – Timing and scheduling**

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| How much **formal** supervision did you receive each week? |   |
| Approx. how much **informal** supervision did you receive each week? |   |
| Please tell us about the scheduling of supervision. E.g.* Setting up supervision
* Changes to supervision arrangements
* Any issues and how they were addressed
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**SUPERVISION – allocation of time within supervision**

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| Did you feel time was allocated, during supervision, to allow for adequate and appropriate support for:  |
| Clinical Cases  | Yes | No |
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| The placement assignment |  |  |
| Evidence-based practice |  |  |
| Professional issues |  |  |
| Organisational/managerial/team issues |  |  |
| Local NHS developments |  |  |
| Integration of theory and practice |  |  |
| Community/contextual issues |  |  |
| Any comments? |

**SUPERVISION – process of supervision**

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| Working with clients (or, indeed, with other members of staff) can often provoke emotional responses (such as feeling angry / helpless / inadequate). How was this managed within your supervision?  |
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| Sometimes issues can come up in the supervisory process about the supervision process itself or the work being undertaken. If there were issues – please describe them below and tell us about what happened with the issue (e.g. attempts to resolve/how it was resolved). |
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**PLACEMENT FACILIITIES**

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| **Did you have adequate access to the following facilities?** |
|  | **Yes** | **No** |
| **Desk space** |  |  |
| **Computer/laptop** |  |  |
| **Clinic space** |  |  |
| **Admin support** |  |  |
| **Parking** |  |  |
| **Kitchen facilities** |  |  |
| **Any comments?** |

**PERSONAL SAFETY & RISK**

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| **How were personal safety issues addressed within the placement? How safe did you feel?** |
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**INDUCTION ACTIVITIES**

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| **Did you feel that the induction activities you undertook were helpful in preparing you for the placement?** **Anything which you feel would be helpful to include or an absolute must to retain?** |
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**OBSERVATION ACTIVITY**

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| **Date observed** **supervisor/colleagues** (include individual and group sessions)(please add rows as needed) | **Activity observed** e.g. assessment with client/ MDT meeting/ family session / formulation session with support team etc | **Please state profession if someone other than supervisor** e.g. MH nurse colleague/ CBT therapist colleague/ Clinical Psychology colleague etc |
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| **Date observed BY supervisor** (can include joint sessions and recorded sessions)(please add rows as needed) | **Activity observed** e.g. assessment with client/ MDT meeting/ family session / formulation session with support team etc | **Comments** |
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**LOG OF CLINICAL ACTIVITY** (see appendix 1 for info about how to complete this section)

**Direct work**

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| **Client** (add rows as required) | **Identified/ preferred gender** | **Age** | **Presenting issue** | **Your role** | **Mode of work** | **Assessment**  | **Intervention** | **Outcome** | **No of contacts** | **Any other info** |
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**Indirect/service related work**

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| **Client/piece of work (**add rows as needed) | **Brief description of work** | **Your role** | **No of contacts** | **No of hours outside of meetings** | **Any other info** |
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**INCLUSIVE PRACTICE AND COMMUNITY ENGAGEMENT**

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| **How connected is the service with its local community?** Please give examples of how it is connected and/or how this can be developed and/or reflections based on the service mapping undertaken. |
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| **How does the service ensure it meets the needs of all those in the general local population?** Please include barriers to inclusive services observed on this placement. |
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| Focusing on one or two themes/issues outlined in the section above, **how could the service overcome barriers and become more inclusive/engaged with the local community?** |
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| **In what way do service-users contribute to and influence the service?** (For example, organising/participating in service-user led groups, routinely being asked for feedback on their experiences of the service, any other way). How could service-user involvement be improved in this service? |
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| **What are your experiences of inclusivity within this service?** For example, have you felt that the service valued and welcomed diversity amongst staff members? If so, what made this possible? If not, what would help to improve this? |
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| **How has your thinking about inclusivity and engagement issues changed over the course of this placement? What were the mechanisms that enabled this change and what learning are you taking away?** |
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**COMMENTS/ REFLECTIONS ON THE PLACEMENT**

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| **General comments - you may wish to offer comments on the following:****What have you most/least enjoyed about the placement?** **Were there any aspects of the work which surprised you?****What will you be taking away from this placement?** |
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Appendix 1

How to complete the Log of activity

**Direct work**

This section is designed to capture information about the people who see on placement. For the purposes of this form any of the following scenarios fall into the remit of direct work:

* Seeing an individual person
* Seeing a couple – please record as e.g. 1A; 1B to indicate that they were seen together and record number of contacts for the first person listed only
* Seeing family members with/without the client present- please list the referred client first e.g. 1A and then other family members as follows i.e. 1B; 1C; 1D
* Meeting with paid carers/other professionals falls under the indirect work logging and needs listing under the indirect skills contacts – but using the client identifier from the direct work
* Recording group contacts – please record the group members individually e.g. G1A; G1B; G1C; G1D; G1E; G1F etc to indicate that they are part of the same group – but please list the number of contacts and group details for the first person listed – please log any prep work outside of the group time with co-facilitators in the indirect work log.
* Please record the preferred gender identity of the person as M/F/NB (non-binary) or DK (don’t know/prefer not to say)
* Please record age of the individual or DK (don’t know)
* Please record any work you have been participant observer of or carried out jointly – please remember to indicate who the work was carried out with
* Mode of work – please record whether face to face i.e. f-f or whether via a virtual means e.g. Attend Anywhere/ Teams/ Zoom etc
* Please list any formal assessment measures – including any formal risk assessments
* Please list any therapy approaches drawn on in the work undertaken in the intervention section
* Add rows as needed
* You will be asked to provide a summary of this information in your ITP form

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| **Client** | **Identified/****preferred Gender** | **Age** | **Presenting issue** | **Any issues relating to Cognitive or Neuro-diversity?** | **Your role** | **Mode of work** | **Assessment** | **Intervention** | **Outcome** | **No of contacts** | **Any other info** |
| 1 | F | 33 | Anxiety and sleep issues | N | Lead therapist | F-F | Informal Formal measures - GADS | CFT and ACT | Improved scores on GADSDischarged | 12 |  |
| 2A | M | 12 | Anxiety related to Chronic Health condition | Y | Joint work with supervisor  | Virtual – Attend Anywhere | Completed before I was involved | CBT | Referred to group support | 8 | Client had a Learning Disability |
| 2B | M | DK |  | N | Lead therapist  | F-F | Informal | Support for parents to implement outcomes from direct sessions with 2A based on behavioural principles | Increased efficacy in supporting 2A | 4 | Saw parents together for 3/4 sessions |
| 2C | F | DK |  | N |  |  |  |  |  |  |  |
| G3A | F | DK | Group – developing self compassion  | DK | Participant observer | Virtual | N/A | Mindfulness | N/A | 2 |  |
| G3B | NB | DK |  | DK |  |  |  |  |  |  |  |
| G3C | M | DK |  | DK |  |  |  |  |  |  |  |
| G3D | DK | DK |  | DK |  |  |  |  |  |  |  |
| G4A | M | 28 | Group for people experiencing psychosis | N | Co-facilitator with nurse therapist |  | Pre-assessment for suitability for group including formal measures | CBT and Mindfulness | Qualitative feedback indicated improvement and better levels of self compassionFormal measures indicated improvement also | 8 |  |
| G4B | M | 59 |  | Possibly |  |  |  |  |  |  | Query of memory issues – referral to OA services |
| G4C | M | 52 |  | N |  |  |  |  |  |  |  |
| G4D | M | 33 |  | N |  |  |  |  |  |  |  |
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**Indirect/ service related work**

This section is designed to capture the different pieces of indirect or service related work you may carry out as part of placement activity. The examples given below are not exhaustive – but hopefully give some ideas about the different kinds of work to capture. We would like you to record times you have contact with people as part of the work (e.g. meetings) but also the time spent working individually outside of time spent with others.

You will be asked to provide a summary of this information in your ITP form.

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| **Client/piece of work** | **Brief description of work** | **Your role** | **No of contacts** | **No of hours outside of meetings** | **Any other info** |
| 4 A-D | Preparation for and review of the group | Co-facilitator | 16 (before & after the group) | 16 – prep for the group |  |
| Audit (PASE) activity | Audit of referral patterns to team | Lead | 6 | 25 – reviewing and processing data/preparing report for team |  |
| Training | Presentation of research on mindfulness for children to MDT | Presenter | 1 | 5 – research and presentation prep |  |
| Care pathway meeting | Care pathway review and development | Observer | 4 | N/A |  |
| Service development | Collaboration with EbyE group to develop an information sheet | Lead | 7 | 15 prepping information for sessions and admin to set up sessions |  |
| Supervision of AP | Supervision of Assistant Psychologist carrying out a discreet piece of behavioural intervention with client aged 6 | Supervisor | 10 | 10 – prep for supervision sessions and time in own clinical supervision to review supervision approach |  |
| 1 - Consultation session | Consultation with MDT colleagues re Client 1 | Lead | 2 | 1 – note entry |  |
| Community engagement/ scoping | Scoping of local community resources re bereavement support | Lead | 5 | 10 Researching and contact prep/ presentation of information to team/developing resources to share with clients |  |