



< lau@leeds.ac.uk >

This page is intentionally blank

# PLACEMENT DETAILS **J**

**This form should be completed by ALL students undertaking a module with a practice placement\***

\*Students may undertake their placements at their usual place of work if it provides a suitable learning environment.

**Before completing this section applicants may find it useful to read Appendix 2 and Appendix 3.**

**The student, along with their practice mentor, line manager (if different) and manager of the practice environment (if different) should complete the Educational Audit Document [Appendix 3 at the back of this form] to enable us to assess the suitability of the proposed practice placement.**

Students undertaking several practice-based modules as part of a programme will be required to complete an Educational Audit Document (Appendix 3) before the start of each module.

**To be completed by your line manager**

Name of line manager	Title of post	Address          Telephone
<p><b>I approve study leave and recommend the above applicant</b></p> <p>Signed..... Date.....</p>		

Please identify a potential practice mentor for the first module you will be studying:

Module Title .....

Start date .....

Name of practice mentor	Title of post	Address          Telephone
-------------------------	---------------	--

*Applicants applying for a practice based programme/module should now complete **APPENDIX 3***

This page is intentionally blank

## **Audit Process**

All students undertaking a module with a practice component are required to provide an evaluation of the practice mentor and the practice area in which they plan to achieve competence for that module, usually referred to as an *Educational Audit Document*, (Appendix 3). For example, if undertaking the Motivational Interviewing module, the student should clarify that the practice placement will provide adequate opportunity to develop their skills in the approach taught in the module through access to appropriate clients/patients.

As an aid to this process the student and the potential practice mentor (and relevant manager if different) should complete this form and return it to Leeds Addiction Unit Training Department.

Students undertaking several such modules as part of a programme will be required to carry out a separate evaluation and complete an *Educational Audit Document* (Appendix 3) for each practice-based module.

## **Practice Mentor Characteristics**

The practice component of modules is not subject to a summative assessment, however it is an important part of the module and inextricably linked to the video assessment.

Therefore the role of the Practice Mentor is an important one. The Practice Mentor will not be expected to assess the input and work of the student but they are expected to ensure the components are completed.

When thinking about who would be suitable to act as your Practice Mentor the following criteria may help you to decide:

### **Is/does the practice mentor:**

Have a good standard of knowledge in the module subjects	<i>Essential</i>
Accessible and have time available for you as a student	<i>Essential</i>
Have regular client contact with substance misusers in a practice setting	<i>Essential</i>
Able to discuss your completion of competencies for specific modules	<i>Essential</i>
Have a teaching or supervision qualification	Desirable
Have experience of teaching/supervision	Desirable
Work in your chosen practice placement	Desirable

**The Educational Audit of the practice learning environment must be approved by Leeds Addiction Unit Training Department before a place can be offered.**

# 3 APPENDIX

*Educational Audit  
of the practice learning environment  
see guidance notes Appendix 2 on previous page*

Module
Practice Learning Environment (Placement Venue)
Date of Audit Document Completed

**Leeds Addiction Unit does not carry out  
Criminal Records Bureau [CRB] checks.**

**-----**  
**The student and placement venue accept FULL  
responsibility for compliance with any legal  
obligations concerning the disclosure of criminal convictions  
and/or CRB checks in the practice learning environment.**

Student	Signature
Practice Mentor	Signature
Student's Line Manager	Signature
Manager of Placement Venue	Signature

## **Audit Process**

All students undertaking a module with a practice component are required to provide an evaluation of the practice mentor and the practice area in which they plan to achieve competence for that module.

For guidance regarding the appointment of a Practice Mentor, please see Appendix 2.

As an aid to this process the student and the potential practice mentor (and relevant managers if different) should complete this form and return it to Leeds Addiction Unit Training Department.

Students undertaking several such modules as part of a programme will be required to complete an *Educational Audit Document* (Appendix 3) before the start of each practice-based module.

Further copies of this document can be obtained from Leeds Addiction Unit Training Department or via: < [www.lau.org.uk/training/forms/](http://www.lau.org.uk/training/forms/) >

APPENDIX 3  
*The Nature of the supervised placement*



What opportunities for practice are there in this placement?

What may hinder the student in achieving the required learning outcomes in this placement?  
Please indicate how these problems might be overcome.

To what degree will the student be "supernumerary" on practice days?

Any other comments?

now go to **SECTION ii** overleaf

**ii****APPENDIX 3*****Availability of a Practice Mentor to provide supervision***

What experience does the mentor have in the approach being taught in the module?

What experience and qualifications does the mentor have in student supervision?

Please confirm the amount of supervision time available to the student by completing the sentence below.

I agree to offer regular mentoring sessions to the student for . . . . . minutes every . . . . . weeks

Will the student have access to facilities to video record their clinical practice during the placement?

Yes  No

now go to **SECTION iii** opposite

**APPENDIX 3**  
*Staff Groups employed at the agency*



Please complete the following table noting the different staff groups/professions/disciplines with the agency

<b>Name of group</b>	<b>Number in total</b>	<b>Number experienced in supervision</b>	<b>Number experienced in therapy taught in module</b>
eg. volunteers	8	0	4

*now go to SECTION iv below*

*Client data for the placement organisation*



Please complete the following table to indicate the number of clients seen at the agency with substance misuse problems. If actual data is not available please provide estimates. Please indicate when estimates have been used.

<b>Weekly Data</b>	<b>Number</b>	<b>% of total clients</b>
Total number of clients seen at the agency		<b>100%</b>
Number of clients with an alcohol problem		
Number of clients with a drug problem		
Estimated number of clients appropriate for intervention taught in module		
Estimated number of clients the student will see during the placement		n/a

Any further comments?
-----------------------

**Completed application forms should be returned to:**

Christine Weatherill  
Training Department  
Leeds Addiction Unit  
19 Springfield Mount  
LEEDS LS2 9NG