|  |  |
| --- | --- |
|  | **Discipline of Occupational Therapy, NUI Galway** |

**Agreement for 1st Year Observation Placement Form**

|  |  |
| --- | --- |
| **Name:** | **Work Address:** |
| **Work Email:** | **CORU Membership Number:** |

**In agreeing to take a student/s on placement I confirm that the following requirements have been met:**

* I have more than 12 months work experience as an occupational therapist (CORU requirement)
* If this placement is shared with another educator, agreements are in place regarding how the split of work tasks will be shared and these will be communicated to the student during orientation
* If you are taking annual leave, supervision cover for the student has been organised for your absence

**Agreement to fulfil the role of practice educator**

1. Providing a site profile to the student
2. Provide a site profile to the student with suitable pre-reading and preparation information that details the service and amended service requirements due to management of infection control of COVID-19
3. Ensure that unsupervised presence of students in clinical areas (for example unaccompanied students seeing patients to practice hands on examination skills) is avoided or is very carefully controlled.
4. Ensure that student(s) and teacher(s)/educator(s) presence in clinical areas is limited to events/time that have a specific focus on student education so that students are not present in clinical areas without a specific purpose.
5. Ensure that no more than four people present for bedside teaching and similar situations, there should be no more than four people present at one time (including students, teachers/educators). In procedure/operation rooms there should be no more than one student at a time.
6. Ensure that students and teachers/educators will be “bare below the elbows/bare above the wrist” when in clinical areas.
7. Read the CORU standards of proficiency prior to the placement
8. Discuss, agree and provide any accommodations for student disabilities as detailed in the reasonable adjustment plan provided by the university
9. Read the Booklet on the requirements of the placement
10. Provide orientation for the student to the department, team and service
11. Provide an induction on all work practices and expectations with regard to of COVID-19
12. Providing orientation for the student
13. Reading the Booklet on the requirements of an observation placement
14. Educating the student in the practice context, maintaining standards as set by AOTI, CORU and your employer
15. Providing access to resources appropriate to student learning in this practice context
16. Contacting the University Practice Education Coordinator if concerns are identified about any aspect of the student performance
17. Completing a final report with the student and returning the documentation to the University
18. Completing and returning a feedback form to the University

**Educator profile: Please tick the most suitable**

I have attended an NUI Galway or Trinity College Dublin Occupational Therapy practice educator course

|  |  |  |
| --- | --- | --- |
| Yes  | No | **Comment** |

I have completed the HSEland online practice educator course (This is an optional course)

|  |  |  |
| --- | --- | --- |
| Yes  | No | **Comment** |

I Would you like to avail of a pre placement phone call or visit?

|  |  |  |
| --- | --- | --- |
| Yes  | No | **Comment** |

Do you require additional supports from the university?

|  |  |  |
| --- | --- | --- |
| Yes  | No | **Comment** |

**General Data Protection Regulation: If you wish to be placed on the NUIG practice education contact list and receive** a) calls for upcoming placements b) upcoming training events; publications of interest; c) research projects and d) the NUIG Occupational Therapy Newsletter.

|  |  |
| --- | --- |
| Yes  | No |

**Signed: Autosign or write/type name and details**

|  |  |
| --- | --- |
| **Name** | **Date** |
| **Title** |  |

**Please return by email to** **caroline.hills@nuigalway.ie** **or rosaleen.Keily@hse.ie if in Sligo, Leitrim or Donegal HSE.**