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| **COMPASS®****Units / Elements** | **Rationale**  | **Learning Goal** | **Plan/Opportunity to Achieve Goal** | **Evidence of Goal Achievement** |
| *Here list the Units or Elements directly related to the proposed learning goal.*  | *Include self-reflections or feedback from current / previous CE that address this learning goal.*  | *Provide the learning goal in a SMART format – this should ideally be a clear statement (single sentence).*  | *Include a plan of how to achieve the proposed learning goal. Break the goal into progressive steps or individual components and set timeframes for each step to ensure the goal is met within the planned timeframe.* | *Use this as a working document – jot down when you have demonstrated evidence of achieving steps in the goal.* |
| ***EXAMPLE GOALS*** |
| Communication (P2.3) | Self-reflection from last placement that I lack confidence explaining assessment results to education staff | I will accurately and succinctly explain the assessment results to at least three teachers either over the phone or in person by mid placement.  | 1. Generate script of what to say
2. Practice explaining to non-Speech Path friends and family
3. Video record a practice situation and watch it back
4. If no opportunity with real client, I can demonstrate this by explain results to others (parents, other members of MDT)
5. Role play with peer might be a helpful strategy
6. I will reference lecture slides, ausmed.com.au and YouTube videos for support before starting placement
 | 21/08: role played with peer, sought feedback22/08: videorecorded explanation of results to my aunt24/08: purposeful observation of CE providing feedback to CC educator25/08: provided feedback to teacher of H.Y. assessment results. Reflected on this after. |
| Reasoning (P1.2) | “need to learn to consider patient functionally as well as impairment” (CE on 2b placement)  | I will correctly identify 5 facilitators/constraints for service delivery for each new speech pathology referral independently, following the initial session and reading the patient’s medical file. These are to be discussed with CE during reflection/ feedback sessions each day. Time frame is 3 weeks.  | 1. Before/ after each session, Student to try identifying all key factors with the potential to influence service delivery.
2. Student will correctly identify 3 facilitators/ restraints requiring moderate assistance of CE.
3. Student will correctly identify 5 facilitators/ restraints and, with assistance from CE, discuss the implications of these factors.
4. Student will be able to correctly identify and discuss the implications that 5 facilitators/ restrictions will exert on service delivery.
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| Learning(P3.1) | “reflections can be superficial at times, without considering bigger picture” (CE on 2a) | I will engage in regular critical reflection considering not only my own perspective but the perspective of the client | 1. Daily journaling (not to submit to CE)
2. Reference SPP1 Workshop 3 framework for critical reflection, and use this to reflect on ‘why does it matter?’ aspect
3. Allocate 20 minutes for written reflection post session
4. When in transit from one session to next, audio record self-reflections
5. Engage in reflection before seeking feedback
6. In each reflection, hypothesise on the experience and emotions of the client in the session
7. For each area for growth, identify a possible reason why I did what I did
8. Reflect on both areas for growth as well as well managed situations
9. Review: Koshy, K., Limb, C., Gundogan, B., Whitehurst, K., & Jafree, D. J. (2017). Reflective practice in health care and how to reflect effectively. International journal of surgery. Oncology, 2(6), e20.
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| **COMPASS®****Units / Elements** | **Targeted feedback or self-reflection to inform goal** | **Learning Goal** | **Plan/Opportunity to Achieve Goal** | **Evidence**  |
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*Students are encouraged to develop 3-4 well thought-out goals in advance of the placement, and modify during their first few days of* *placement.*

Speech Pathology Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Clinical Educator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Secondary Clinical Educator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_