

### **Assessor Feedback Form:**

### **Practice Educator Accreditation**

## **College of Radiographers Approved Qualification Route**

Thank you for agreeing to undertake this application assessment for practice education accreditation via the CoR approved qualification route.

Please complete the following feedback form when undertaking your assessment, providing comments to assist the applicant with their resubmission/next application. Please upload the form when prompted to do so at the end of your assessment.

**Please note**: If any point falls into a highlighted 'No', or if confidentiality is breached, please defer the application at the end of the assessment.

Applicant Name:				
Role Details	Yes	Part	No	Comments
Key employment details provided, including name of employer and dates of employment.				
There is an accurate overview of their current role and practice setting, describing their main duties and responsibilities as a practice educator.				
Role details relate to the role for which accreditation is being sought.				
There is a clear demonstration of education and training undertaken and awareness of how this underpins their practice educator role.				

Describes any significant achievements, or competencies achieved whilst in this employment relevant to their practice educator role.							
Describes further learning/courses they have		N/A					
undertaken since gaining their CoR approved qualification.							
Qualification(s)	Yes	No	Comr	nents			
A CoR approved practice educator qualification has been added to the application*.							
The qualification was obtained within the last three years.							
A certificate for the above qualification has been added to the application							
12 Practice Educator Learning Outcomes	for prachaving	ctice ed	ucator	s will auto	oproved quo omatically b ning Outcor	be acc	
Manager Declaration	Yes	No	Comr				
Must be completed by suitable person: Line Manager/ Service Lead (HCPC/GMC/NMC/RCT registered).			Line N	leted by: ∕lanager □ e Specify:	Service Lea	ad □	Other □
Assessor Overall Decision:	PASS		DEFE	R □			
Assessor Name:							
Date of Assessment:							



### **Assessor Feedback Form:**

### **Practice Educator Accreditation**

# College of Radiographers CPD/ Non-Approved Qualification Route

Thank you for agreeing to undertake this application assessment for practice education accreditation via the CPD / Non- Approved qualification route. This route is for applicants who are currently working in a practice educator role and have developed their practice educator skills in the workplace, or hold a practice education qualification that has not been approved by the College of Radiographers (i.e. a non-approved qualification).

Please complete the following feedback form, including mapping section, when undertaking your assessment, providing comments to assist the applicant with their resubmission/next application. Please upload the form when prompted to do so at the end of your assessment.

**Please note**: If any point falls into a highlighted 'No', or if confidentiality is breached, please defer the application at the end of the assessment.

Applicant Name:				
Role Details	Yes	Part	No	Comments
Key employment details provided, including name of employer and dates of employment.				
There is an accurate overview of applicant's current role and practice setting:  • Describes main duties and responsibilities as a practice educator.				
Role details relate to the role for which accreditation is being sought.				
Qualifications, Learning & Development Summary	Yes	Part	No	Comments
Has undertaken qualifications and/or ongoing learning & development that				

is appropriate to the role of practice educator.				
Demonstrates awareness of how learning and development underpins their practice educator role.				
Has included associated certificates if relevant.		□N/A		
Critical Narrative with verified CPD	Yes	Part	No	Comments
Critical narrative provides a critical evaluation of the learning and development undertaken and how these activities have developed applicant's knowledge, skills, and ability to work as a practice educator.				
There is consideration and supporting evidence of the impact their practice has on their learners.				
Minimum of 6 pieces of verified CPD have been linked to the critical narrative				
All pieces of verified CPD have been completed within the last two years prior to submission of the application.				
The linked verified CPD records demonstrate a broad range of activities undertaken as CPD and comprehensively support the critical narrative.				
Action plans/further learning has been identified.				
A reflective model has been used effectively throughout.				

A range of literature sources have been utilised to enhance the applicant's knowledge and understanding.				
12 PEAS Learning Outcomes	Yes	No		Comments
Overall, the critical narrative clearly evidences how the applicant meets all 12 practice educator outcomes.				
Manager Declaration	Yes	No		Comments
Must be completed by suitable person: Line Manager/ Service Lead (HCPC/GMC/NMC/RCT registered).				Completed by: Line Manager □ Service Lead □ Other □ Please Specify:
Assessor Overall Decision: P	PASS		DEFE	ER □
Assessor Name:				
Date of Assessment:				



# Mapping of reflections to PEAS learning outcomes

Note for Assessor: Please use this document to check for coverage of the 12 PEAS learning outcomes within the applicant's verified CPD records. Check off the relevant learning outcomes against each piece of verified CPD by clicking on the check box provided. A minimum of 6 pieces of verified CPD are required for submission for the initial CPD/Non-approved qualification route, 10 for reaccreditation.

	Verified CPD Reflections: 6 Initial accreditation CPD/Non-Approved route 10 Re-accreditation												
The 12 Learning Outcomes	1	2	3	4	5	6	7	8	9	10			
1. Provide information to learners about the learning experience offered and to clarify/manage expectations.													
2. Apply knowledge of educational theory to learning and assessment practice, creating level-appropriate, inclusive and empowering learning environments and opportunities.													

3. Actively promote policies and practices that acknowledge different needs of students and learners individually and as a group, demonstrating an inclusive approach.					
4. Promote the visibility of practice education and the role of learners within the health and care professional team, amongst stakeholders.					
5. Actively contribute to the assessment of adequate and safe levels and models of learner supervision.					
6. Understand where practice learning fits with taught components of the programme when working with students.					
7. Promote, facilitate, and support self- reflection and peer learning.					
8. Provide a range of opportunities to maximise learning and enable the achievement of directed and self-directed level-appropriate learning outcomes.					

9. Apply and contribute to, where appropriate, various forms and levels of fair, inclusive, sensitive, consistent and robust practice education feedback / feed forward and assessment and involve learners in the process.					
10. Communicate in a skilled and effective manner with students, colleagues, service users and stakeholders to support the facilitation of the programme of learning.					
11. Reflect on and evaluate their role as a practice educator and continually implement improvements.					
12. Evaluate the practice learning environment and formal / informal learning events and implement change based on evidence.					



### **Assessor Feedback Form:**

### **Practice Educator Accreditation**

### College of Radiographers Re-accreditation Route

Thank you for agreeing to undertake this application assessment for practice education accreditation via the re-accreditation route. This route is for applicants who have previously been awarded CoR PEAS accreditation and are now at the end of their five-year accreditation window and are due to renew.

Please complete the following feedback form, including mapping section, when undertaking your assessment, providing comments to assist the applicant with their resubmission/next application. Please upload the form when prompted to do so at the end of your assessment.

**Please note**: If any point falls into a highlighted 'No' or if confidentiality is breached, please defer the application at the end of the assessment.

Applicant Name:				
Role Details	Yes	Part	No	Comments
Key employment details provided, including name of employer and dates of employment.				
There is an accurate overview of their current role and practice setting:  • Describes their main duties and responsibilities as a practice educator.				
Role details relate to the role for which accreditation is being sought.				
Qualifications, Learning & Development Summary	Yes	Part	No	Comments
Has undertaken further qualifications and/or ongoing learning and development since last accreditation that is appropriate to the role of practice educator.				
Demonstrates awareness of how learning & development underpins their practice educator role.				
Has included associated certificates if relevant.		N/A □		

Critical Narrative with verified CPD	Yes	Pa	art	No	Comments
The critical narrative provides a critical evaluation of the learning and development undertaken and how these activities have developed applicant's knowledge, skills and abilities to work as a practice educator.					
There is consideration and supporting evidence of the impact their practice has on their learners.					
Minimum of <b>10 pieces</b> of verified CPD have been linked to the critical narrative.					
All pieces of verified CPD have been <b>completed within the last 5 years</b> prior to submission of the application.					
Linked verified CPD records demonstrate a broad range of CPD activities undertaken and comprehensively support the critical narrative.					
Action plans/further learning have been identified.					
A reflective model has been used effectively throughout.					
A range of literature sources have been utilised to enhance the applicant's knowledge and understanding.					
12 PEAS Learning Outcomes	Yes		No		Comments
Overall, the critical narrative clearly evidences how the applicant meets all 12 practice educator learning outcomes.					
Manager Declaration	Yes		No		Comments
Must be completed by suitable person: Line Manager/ Service Lead (HCPC/GMC/NMC/RCT registered).					Completed by: Line Manager □ Service Lead □ Other □ Please Specify:
Assessor Overall Decision: PAS	SS 🗆		С	EFER	
Assessor Name:					
Date of Assessment:					



# Mapping of reflections to PEAS learning outcomes

Note for Assessor: Please use this document to check for coverage of the 12 PEAS learning outcomes within the applicant's verified CPD records. Check off the relevant learning outcomes against each piece of verified CPD by clicking on the check box provided. A minimum of 6 pieces of verified CPD are required for submission for the initial CPD/Non-approved qualification route, 10 for reaccreditation.

	Verified CPD Reflections: 6 Initial accreditation CPD/Non-Approved route 10 Re-accreditation											
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4. Promote the visibility of practice education and the role of learners within the health and care professional team,					
5. Actively contribute to the assessment of adequate and safe levels and models of learner supervision.					
6. Understand where practice learning fits with taught components of the programme when working with students.					
7. Promote, facilitate, and support self- reflection and peer learning.					
8. Provide a range of opportunities to maximise learning and enable the achievement of directed and self-directed level-appropriate learning outcomes.					

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11. Reflect on and evaluate their role as a practice educator and continually implement improvements.					
12. Evaluate the practice learning environment and formal / informal learning events and implement change based on evidence.					