



MIDTERM EVALUATION

Instructions for Completion:

Halfway through the placement, a broad review of progress is required. When completing the Midterm Evaluation, the final evaluation form may be used as a guide. The mid-term evaluation matches the areas described in detail in the final evaluation, but is intended to be a more general assessment of how the student is progressing given opportunities to observe, practice and receive feedback. Goals are set for the remainder of the externship.

The mid-term is divided into three sections:

- A. Requirements for Professional Practice
- B. Skill Development Evaluation
- C. Goal Setting For Remainder of Externship

Sections A and B: Complete the rating scale.

Grading:

NOTE: Please notify the Clinical Coordinator immediately if a rating of an "I" or "U" is obtained in Section A or more than two "As" (Progress slow but acceptable) are obtained in Section B.

Section C: Create goals for the remainder of the externship.

Together, the Clinical Educator and the student clinician identify goals within specific skill areas, and brainstorm strategies for achieving these goals during the remainder of the placement. Goals may be prioritized.

Goals:

1. focus on specific skills that require practice for continued development
2. develop specific areas where weaknesses are identified
3. even out development across the continuum of clinical skills
4. provide steps aimed at developing more advanced clinical skills, where strengths are identified.

Goals may include interpersonal and professional abilities, as well as assessment, treatment, and communication skills. Broader domains for development, such as problem solving and self-evaluation may cross more than one skill area.

Strategies:

Strategies are the specific steps that will be most effective in achieving a goal. Strategies are developed collaboratively between clinical educator and student, and specify the role that each person will take.

Please review the Clinical Action Plan on a weekly basis in order to ensure progress towards goals.

MIDTERM EVALUATION

*Students to **upload** completed evaluation form to **ePortfolio**.*

Students must keep originals and return them to the school.

Student's Name:	Site:
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A. Requirements for Professional Practice:

*The following characteristics are basic requirements for success in the workplace.
Rate the following five items as (S) Satisfactory (I) Inconsistent, or (U) Unsatisfactory*

1. Preparation for all clinical assignments	
2. Punctuality	
3. Confidentiality	
4. Professional appearance	
5. Language appropriate to professional setting	

B. Skill Development Evaluation:

Rating key:

- !** = A particular strength for this student
- √** = Progress as expected
- A** = Progress slow but acceptable
- C** = Progress minimal, and of concern
- U** = Unsatisfactory performance
- N/A** = Insufficient opportunity to evaluate

1. Interpersonal and Professional Skills	Relates to client, client's family	
	Interacts with clinical educator, other professionals	
	Evaluates own professional knowledge and limits	
	Participates as a team member	
2. Assessment Skills	Plans and prepares for assessments	
	Implements appropriate assessment procedures	
	Makes accurate clinical impressions	
	Makes appropriate recommendations/referrals	
3. Treatment Skills	Determines goals and objectives	
	Plans and prepares prior to treatment sessions	
	Manages sessions as they are in progress	
	Forms accurate clinical impressions and adjusts treatment plans accordingly	
4. Communication Skills	Oral communication	
	Written communication	

C. Goal Setting for the Remainder of the Externship

Identify 3-4 specific goals to focus on clinical skill development for the remainder of the placement. The focus may be: any gaps in clinical experience so far, any areas to build independence or any special opportunities specific to your site. Include specific strategies and actions needed to support skill development.

1. AREA:
GOAL:
STRATEGIES:

2. AREA:
GOAL:
STRATEGIES:

3. AREA:
GOAL:
STRATEGIES:

4. AREA:
GOAL:
STRATEGIES:

Clinical Educator(s) Name(s) _____

Clinical Educator(s) Signature(s) _____

Student Extern Signature _____ DATE: _____

PLEASE SUBMIT MIDTERM EVALUATION VIA e-PORTFOLIO