**MA Music Therapy**

**Music Therapy Professional Practice and Skills with**

**Children & Young People**

**Final Assessment**

**Form completed by Professional Practice Supervisor**

|  |  |
| --- | --- |
| ***Trainee Name***  |  |
| ***Start Date***  |  |
| ***Name of Professional Practice Supervisor***  |  |
| ***Name of Clinical Seminar Leader***  |  |
| **Actual hours achieved**  |  |
|  **Absences due to:** **Sickness****Other (specify)****(please identify dates)** |

|  |
| --- |
| **Rating Summary**1. **Therapeutic skills**
2. **Personal development/reflective capacity**
3. **Professional skills**
 |
| **Is the trainee ready to pass this placement?** |

|  |
| --- |
| *Professional Practice supervisor name:* *Signature* *Date*  |

*See accompanying guidance document for help with completing these sections.*

|  |
| --- |
| Therapeutic skills |
|  |
| **Poor/Unsatisfactory/Satisfactory/Good/Excellent** Rating –  |
| Personal Development/Reflective Capacity |
|  |
| **Poor/Unsatisfactory/Satisfactory/Good/Excellent** Rating -  |
|  Professional Skills |
|     |
| **Poor/Unsatisfactory/Satisfactory/Good/Excellent** Rating –  |

**Any Other Comments**

**Service user/carer feedback**

**Rating Guidelines – to be used in conjunction with the criteria for assessment**

**Poor** – Majority of criteria are consistently unacceptable.

**Unsatisfactory** – some elements may show acceptable standards but competence is consistently lacking.

**Satisfactory** – There is an acceptable competency in most areas. Some areas may be good. Nothing significant is unacceptable but there are weaknesses to be addressed.

**Good** – there is a consistently good performance with some criteria meeting a very high standard and the majority being good.

**Excellent** – the majority or all of the criteria consistently meeting a very good or excellent standard.