## NSHCS CBD Mark Form - Specialty and core modules

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| Assessment details  |
| Trainee’s name | Click or tap here to enter text. |
| Assessor’s name | Click or tap here to enter text. |
| Module title/code  | Click or tap here to enter text. |
| Case title | Click or tap here to enter text. |
| Date of assessment | Click or tap to enter a date. |

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| Marking criteria |
| * Assessors must guide the discussion to make an informed decision on all the elements of practice in this form.
* Within the discussion, the trainee must be allowed, or can be prompted, to identify if and how they have drawn on a specific element of practice.
* If the trainee correctly identifies that they have not drawn on a specific element because it is not relevant to this case, this should be marked as a pass for that element of practice.
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| Descriptor  | Fail | Pass |
| The trainee demonstrates inadequate and/or unsafe clinical and professional judgement, decision-making and problem solving, with little, no, or incorrect reference to the evidence base to justify their actions with respect to this element of practice.  | The trainee demonstrates sound and balanced clinical and professional judgement, decision-making and problem solving, with reference to the evidence base to justify their actions with respect to this element of practice. |
| Indicators include:* A significant number of minor errors or one or more major errors were made in handling the case and are not identified or acknowledged.
 | Indicators include:* Identifying where errors or improvements could be made in handling the case and offering suggestions about how the error could be avoided or improvement applied in future practice
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| Practises safely and effectively | [ ]  Fail | [ ]  Pass |
| Feedback: Click or tap here to enter text. |
| Practises within their scope of practice | [ ]  Fail | [ ]  Pass |
| Feedback: Click or tap here to enter text. |
| Practises within the legal and ethical boundaries of their profession | [ ]  Fail | [ ]  Pass |
| Feedback: Click or tap here to enter text. |
| Practises as an autonomous professional, exercising their own professional judgement | [ ]  Fail | [ ]  Pass |
| Feedback: Click or tap here to enter text. |
| Recognises the impact of culture, equality and diversity on practice and practises in a non-discriminatory and inclusive manner | [ ]  Fail | [ ]  Pass |
| Feedback: Click or tap here to enter text. |
| Reflects on and reviews practice | [ ]  Fail | [ ]  Pass |
| Feedback: Click or tap here to enter text. |
| Assures the quality of their practice | [ ]  Fail | [ ]  Pass |
| Feedback: Click or tap here to enter text. |
| Applies the key concepts of the knowledge base relevant to their profession | [ ]  Fail | [ ]  Pass |
| Feedback: Click or tap here to enter text. |
| Draws on appropriate knowledge and skills to inform practice | [ ]  Fail | [ ]  Pass |
| Feedback: Click or tap here to enter text. |
| Overall outcome  | If the trainee has failed in any element | If the trainee has passed all elements |
| [ ]  Fail | [ ]  Pass |
| Overall Feedback  | Feedback: Click or tap here to enter text. |
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| Assessor declaration |
| By entering my name below, I confirm that:* I have appropriate knowledge, skills, and experience to complete this assessment
* I have performed this assessment according to the School’s work-based assessment standards
* I have completed this assessment objectively and fairly
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| Click or tap here to enter text. | Click or tap to enter a date. |
| Click or tap here to enter text. | Click or tap to enter a date. |