

PET (Nursing) 9.5.23

NPEC Nursing Student Placement Evaluation Tool

This survey has been designed to enable you, as a nursing student, to evaluate your clinical placement experience. Please rate your experience and feel free to add comments at the end of the form. This feedback will enable quality improvements with benefits to educators and students. Please note that all reports are de-identified and only released to industry supervisors when seven (7) or more students have attended the placement in the last 12 months.

n which University/T	AFE are you enr	olled?								
Please start typing for op	tions. Please choos	se only from th	ne options provi	ded.						
am studying for a:										
Bachelor of Nursing Master of Nursing (Graduate Entry) Diploma of Nursing Other										Other
n which year of a de	gree are you enr	olled? (if a c	ombination,	list highest	year)					
First year Se			Second year		Third year			Fourth year		
Are you enrolled as a	domestic or inte	ernational st	tudent?							
	Domesti	c student					Internat	ional student		
Which campus are y	ou located at? (fo	or University	or TAFE)							
In which State or Ter	ritory was your p	placement?								
Australian	Norther		ieensland	South Australia Tasmania		mania	Victoria		Western	
Capital Territory	Wales	Territor	у							Australia
In which health facili	ity/service were y	ou placed?	(e.g. hospital,	GP, commu	inity)					
Please name the Wa	rd/Unit you were	placed in?								
How would you clas	sify this ward/uni	it?								
Acute medical Acute s		surgical	Aged care		Rehabilitation		Menta	al health		Paediatrics
Primary care / Operating theatre Emergence Community		Emergency	department	Intensive care		Coronary care			Other	
On what date did you	ır placement beg	in?		Number of	f days					
Vhen did your placemer	nt start?			Please ente placement	r the number of days of	10				
My primary clinical s	upervisor was a:									
Facility Registered Nurse Fac					nical Educator			University Educator		





Please select the choice that best matches your opinion about your placement experience

					Strongly lisagree	D	isagre	e	Neither agree or disagree		Agree		Strongly agree	
I was fully orient	ated to the clir	nical area			Strongly disagree	0	Disagi	ree		ner agree disagree		Agree	Strongly agree	
Staff were willing	g to work with	students			Strongly disagree	0	Disagi	ree		ner agree disagree		Agree	Strongly agree	
Staff were positi	ve role models	S			Strongly disagree	0	Disagi	ree		ner agree disagree		Agree	Strongly agree	
Staff were ethica	al and professi	onal			Strongly disagree	0	Disagi	ree		ner agree disagree		Agree	Strongly agree	
Staff demonstrat	ted respect an	d empathy towa	rds		Strongly disagree	0	Disagi	ree		ner agree disagree		Agree	Strongly agree	
Patient safety wa	as fundamenta	I to the work of	the unit		Strongly disagree	0	Disagi	ree		ner agree disagree		Agree	Strongly agree	
l felt valued duri	ng this placem	ent			Strongly disagree	0	Disagi	ree		ner agree disagree		Agree	Strongly agree	
I felt safe in the o		nment (e.g. phys	sically,	0	Strongly disagree	0	Disagi	ree		ner agree disagree	0	Agree	Strongly agree	
This placement v	was a good lea	ırning environm	ent	0	Strongly disagree		Disagi	ree		ner agree disagree		Agree	Strongly agree	
My supervisor(s) objectives/needs	•	entify my learnii	ng	0	Strongly disagree	0	Disagi	ree		ner agree disagree	0	Agree	Strongly agree	
I was adequate	ly supervised i	in the clinical er	vironment	0	Strongly	0	Disag	gree		her agree disagree	0	Agree	Strongly agree	
I received regu	lar and constru	uctive feedback		0	Strongly disagree	0	Disag	gree		her agree disagree	0	Agree	Strongly agree	
I was supporte	d to work withi	in my scope of p	oractice	0	Strongly disagree	0	Disag	gree		her agree disagree	0	Agree	Strongly agree	
My supervisor(abilities	s) understood	how to assess i	my clinical	0	Strongly	0	Disag	gree		her agree disagree	0	Agree	Strongly agree	
I had opportun	ities to enhanc	e my skills and	knowledge	0	Strongly	0	Disag	gree		her agree disagree	0	Agree	Strongly agree	
l had opportun disciplinary tea		t and learn with	the multi-		Strongly disagree	0	Disag	gree		her agree disagree		Agree	Strongly agree	
I achieved my I	earning object	ives		0	Strongly disagree	0	Disag	gree		her agree disagree		Agree	Strongly agree	
I have gained to practice	he skills and k	nowledge to fur	ther my	0	Strongly	0	Disag	gree		her agree disagree	0	Agree	Strongly agree	
I anticipate being able to apply my learning from this placement			0	Strongly disagree	0	Disag	gree		her agree disagree		Agree	Strongly agree		
Overall, I was s	atisfied with th	nis placement ex	perience.											
1	2	3	4		5	6			7	8		9	10	

(Decide your overall rating on a scale of 1-10) (1 being very dissatisfied, 10 being extremely satisfied)





What is the primary	language vou	eneak at	home?

	English		Other						
Please feel free to add additional comments about your placement experience:									
						fi.			
Please tell us some	ething about y	ourself							
Do you identify as an Aborig	ginal and/or Torres Str	rait Islander?							
Yes, Aboriginal	Yes, Torres Strait	s, Torres Strait Islander Yes, both Aboriginal and Torres Strait Islander Māori)		er indigenous (e.g. Māori)	No, non-indigenous (e.g. English)				
What is your age? (in years)									
0 of 3 max characters									
What is your sex?									
Female		M	ale		Non-binary sex				

This question is optional

