**Feedback Summary Form**

Student: Supervisor:

Visitor: Date:

This form is to be completed by the Visitor in consultation with the Placement Supervisor at the end of the feedback visit. It should be no longer than one page.

Please email completed form along with detailed comments on B1-5 forms to student, Placement Supervisor and [audplace@soton.ac.uk](mailto:audplace@soton.ac.uk) ASAP.

From the patient appointments observed today list the Top 3 good things?

From the patient appointments observed today list up to 3 things requiring immediate attention/consideration (short term goals)?

From the patient appointments observed today list up to 5 priorities to work on (longer term goals)?

List specific actions required, for whom and by when? (Add more as necessary). Please indicate if no actions are required.