



Royal College
of Nursing
Students

Placement Adjustments Passport



PLACEMENT PASSPORT



Pre-placement plan

Name:

Pronouns:

This document has been shared with:

Name

Role

On (date)

This document can be shared to all university and placement stakeholders:

Yes

No

About me:

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Specific needs including shifts, breaks, nutrition, environment, transport:

Suggested adjustment

Agreed by:

Date:

Review:

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Potential challenges in practice including health & safety risks:

Any further notes:

Completed on: (date)

Signed: (student)

**Signed: (practice supervisor
or academic assessor)**

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Placement plan

Name:

Pronouns:

Placement:

This document can be shared:

Yes

No

About me:

Things I often find helpful:

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Potential challenges in practice:

Health & Safety considerations:

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Suggested adjustment

Agreed by:

Date:

Review:

Completed on: (date)

Signed: (student)

**Signed: (practice supervisor
or academic assessor)**

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Reflections

Name:

Pronouns:

Placement:

During this placement some challenges I faced were:

I was able to overcome them by:

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These are the skills I have developed during this placement:

Suggested adjustments / amendments for the next placement:

Completed on: (date)

Signed: (student)

**Signed: (practice supervisor
or academic assessor)**