

Student Check list to aid in fully meeting Criteria in Client/Case Studies

ABC

Student Name : _____ Client Name: _____

Client Study Case Study No. of Treatments _____ Date: _____

Insert a tick against the Performance Criteria as you meet it, and enter page numbers where relevant

| Element of competence | Performance Criteria |
|---|---|
| 1. Presentation of a study | a) File b) Index c) Bibliography |
| 2. Forming an Initial Impression of the client | a) 1 st Impressions ___ Lifestyle ___ Family circumstances ___ b) Employment/voluntary work c) Emotional or psychological state d) Manner ___ Appearance ___ Body Language ___ |
| 3. Research of Presenting condition | a) Define the Presenting Condition and suggest a cause b) i) Complementary therapy researched for this client ii) Possible conventional treatment/medication researched |
| 4. Completion of the Client's Medical history | a) Summary of consultation sheet b) Consultation sheet attached |
| 5. Observation of the Client's Feet | a) Charting attached b) Description and interpretation of Colour ___ Temperature ___ Texture ___ Hard skin ___ Position ___ |
| 6. Description of the Treatments | a) Observations of reactions during and after treatment b) Aftercare advice given c) Feedback and treatment evaluation from client d) Treatment Plan / FOCUS (<i>Client study – if I were to treat them again, I would suggest...</i>) Treatment records attached |
| 7. Drawing a) conclusion | a) Summary of Progress of client (<i>not client study</i>) b) i) Reflect on your own performance ii) Success of Treatment plan (<i>not client study</i>) c) Identify Lifestyle changes or therapies to assist this client |
| Additional Comments | |
| Tutor | Signature |
| Internal Moderator | Signature |

Pass/Develop/Refer