
Physiotherapy Clinical Educators Handbook

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Version 1

School of Health and Social Care

www.glos.ac.uk

Name:	
Organisation:	

BSc (Hons) Physiotherapy- Clinical Educators Handbook

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1.0 Introduction

This handbook will guide clinical educators through the process of mentoring and supporting students whilst on Physiotherapy placement through the University of Gloucestershire. The early sections of this handbook will outline the course aims, structure and provide detail on the clinical placement modules that form part of the BSc (Hons) Physiotherapy programme.

This booklet is designed to complement the student placement handbook and should be used to guide you through the process of supporting and assessing student placement activity.

2.0 Clinical Education Placement Contacts

HSC Placements <hscplacements@glos.ac.uk>

HSC Practice Support <practicesupport@glos.ac.uk>

HSC Practice Absence <practiceabsence@glos.ac.uk>

Title	Name	Email	Telephone
Strategic Lead for Partnerships and Placements	Nick Oxlade	noxlade@glos.ac.uk	01242 714644
Academic Course Leader	Eve Scarle	escarle@glos.ac.uk	01242 715278

24 Hour Emergency University Contact

In the case of an emergency where a university member of staff is required there is a 24 hour security number below who will be able to contact key senior staff to offer support.

Telephone: 01242 714402

3.0 BSc (Hons) Physiotherapy Programme Structure

3.1 Course Philosophy

The BSc (Hons) Physiotherapy programme at the University of Gloucestershire is student-centred and professionally focused. The teaching philosophy adopted across the School of Health and Social Care is of transformative learning, which aims to develop students as change agents through enabling the development of their critical thinking and problem-solving skills. The skills developed whilst studying on this programme provides the potential to impact on practice by considering service evaluation and improvement from the outset. Inter-professional learning will be promoted through multi-disciplinary shared learning opportunities during team scenario days across the School of Health and Social Care.

The underpinning theme that runs through the programme, and across all programmes in the School of Health and Social Care is the development of clinical leadership. Developing People-Improving Care (NHS Improvement, 2016) clearly identifies the need for leadership development and service improvement skills to be equally embedded within the entire pre-registration clinical curricula in healthcare. The degree programme adopts the guidance provided by Health Education England (2018) on integrating their three themes of leadership (focus on self, working with others and on improving healthcare) in pre-registration programmes.

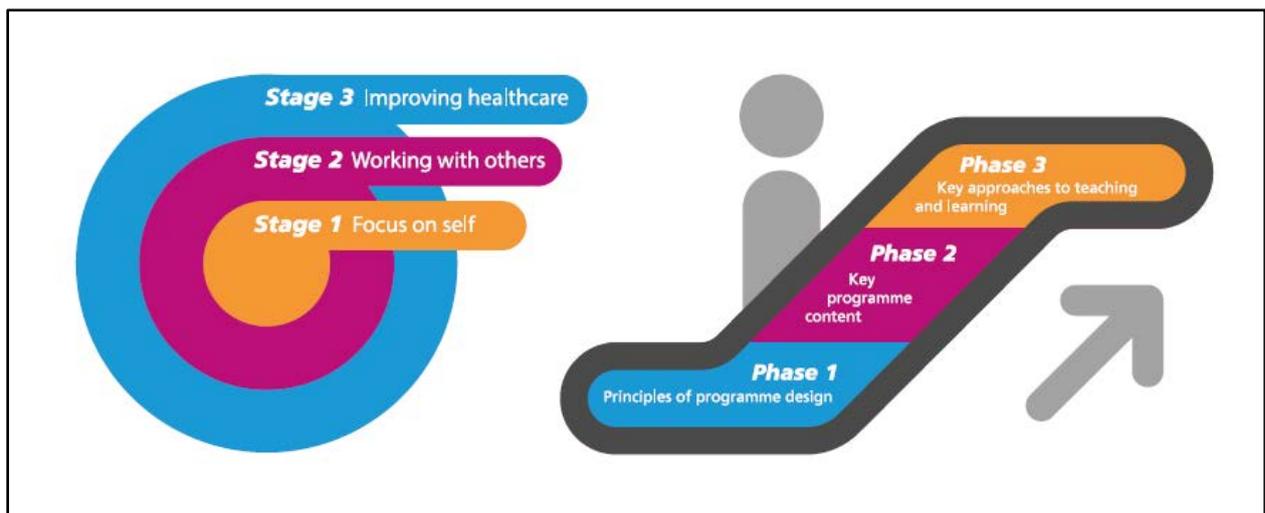


Figure 1- Health Education England: The Three Stages of leadership development and the three phases of curricula design (Health Education England, 2018)

The programme will be delivered by experienced, registered Physiotherapists and other healthcare professionals from the multi-professional team. There is additional support from experienced academics in research methods, biomechanics, psychology and physiology. This will give students access to a breath of expertise across a wide variety of professional specialisms.

We aim to accommodate a variety of learning styles and experiences, through the range of teaching and assessment strategies. Our approach to teaching aims to be continuously relevant to practice by utilising local clinicians and service users in the delivery of the programme content.

3.2 Educational Aims of the Programme

The BSc (Hons) Physiotherapy degree programme aims to develop competent and confident Physiotherapists who are resilient and adaptable practitioners able to meet the needs of a modern and changing healthcare system. The student should become a practitioner, critical thinker and innovator of practice, being part of the development of the emerging role of physiotherapists across a broad spectrum of areas of health and social care. The programme aims to support students to achieve their best possible work, excelling in their academic and clinical study to produce highly qualified practitioners who are eligible to apply for registration with the HCPC and the membership of the CSP.

The overall aims of the programme are as follows:

1. To develop resilient practitioners who have the knowledge and skills required for safe and effective physiotherapy practice in a variety of settings, working within professional boundaries.
2. To develop high-level clinical reasoning skills to allow individuals to work as autonomous practitioners.
3. To promote a deep understanding of person-centred care, ethical practice and leadership in healthcare.
4. To meet the standards of proficiency required of physiotherapists by the Health and Care Professionals Council and the knowledge, skills, behaviour and values required to practice physiotherapy.
5. To develop reflective practitioners who are able to identify learning needs and act upon these to ensure lifelong learning and development.
6. To develop confident practitioners who are able to promote health, well-being and encourage self-management in a variety of clinical and non-clinical settings.

3.3 Programme Learning Outcomes

The overall learning outcomes of the degree programme provide more information about how the programme aims are demonstrated by students. The programme consists of the 18 compulsory modules that form the BSc (Hons) Physiotherapy degree.

The programme provide the opportunities for students to develop knowledge and understanding, intellectual skills, subject specific skills and transferable skills across the three years of study. On successful completion of the course students will be able to:

Knowledge and Understanding

1. Demonstrate a systematic understanding of normal human structure and function and explain the dynamic relationship between structure and function.
2. Explain the aetiology, pathological processes and clinical features of conditions encountered within physiotherapy practice.
3. Understand and evaluate current health and social care policy and appreciate its relevance to current service organisation and delivery.
4. Demonstrate and apply knowledge of biomechanical, behavioural and exercise science disciplines that form a theoretical basis for physiotherapy assessment, diagnosis and treatment practices.
5. Identify, understand and critically evaluate the evidence-base for relevant physiotherapy practices.
6. Demonstrate an in-depth knowledge of a wide range of physiotherapy specialisms.

Intellectual Skills

1. Identify learning needs and take responsibility for their own learning development.
2. Reflect on their experiences, taking into account published sources of information and policy in order to improve practise and identify future learning and development needs.
3. Demonstrate skills in research and critically evaluate sources of evidence relevant to clinical practice.
4. Show a commitment to continuing professional development and life-long learning.

Subject specific skills

1. Comply with professional codes of conduct, performance and ethics, and recognise scope of practice boundaries.
2. Demonstrate autonomous professional practice across a wide range of areas of physiotherapy.
3. Demonstrate logical and thorough assessment skills required for physiotherapy practice across a wide variety of clinical settings.
4. Use problem-solving and clinical reasoning skills to effectively diagnose, treat and manage individuals using a wide variety of physiotherapeutic modalities.

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5. Monitor progress using recognised outcome measures and adjust care in accordance with the findings.
6. Promote the health and well-being of all individuals under their care, encouraging the use of self-management principles.

Transferable skills

1. Demonstrate a person centred approach to care, acting in an ethical, caring and respectful manner to all individuals regardless of background.
2. Communicate effectively with patients, carers, health professionals and the wider population.
3. Respect and value cultural diversity and uphold the individual's rights and beliefs.
4. Demonstrate competency in the use of technology to record, enhance and innovate the assessment, management, evaluation and of clinical care.
5. Demonstrate good practice in data handling and information governance in line with National and local policy.
6. Demonstrate effective workload planning and time management skills, and be resilient and adaptable to the changing pressures and priorities within healthcare.
7. Show emerging skills in leadership, management and service innovation

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3. 4 Course Map- BSc (Hons) Physiotherapy

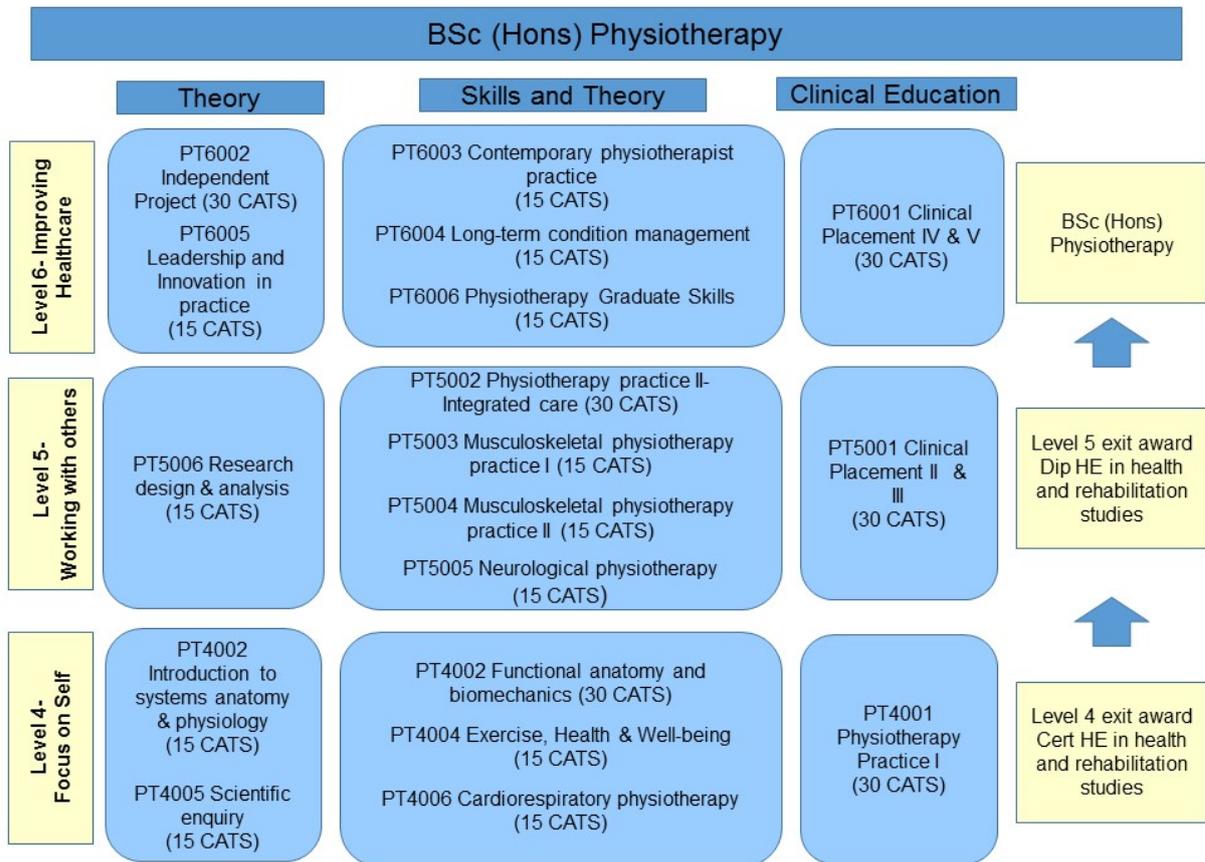
Level 4 (Year 1)		
PT4001 Physiotherapy Practice I	30 CATS	SEM 1&2
PT4002 Functional Anatomy and Biomechanics	30 CATS	SEM 1&2
PT4003 Introduction to Systems Anatomy and Physiology	15 CATS	SEM 1&2
PT4004 Exercise, Health and Well-being	15 CATS	SEM 1
PT4005 Scientific Enquiry	15 CATS	SEM 1
PT4006 Cardiorespiratory Physiotherapy	15 CATS	SEM 2
TOTAL	120 CATS	

Level 5 (Year 2)		
PT5001 Clinical Placement II and III	30 CATS	SEM 1&2
PT5002 Physiotherapy Practice II-Integrated Care	30 CATS	SEM 1&2
PT5003 Musculoskeletal Physiotherapy Practice I	15 CATS	SEM 1
PT5004 Musculoskeletal Physiotherapy Practice II	15 CATS	SEM 2
PT5005 Neurological Physiotherapy	15 CATS	SEM 1
PT5006 Research Design and Analysis	15 CATS	SEM 2
TOTAL	120 CATS	

Level 6 (Year 3)		
PT6001 Clinical Practice IV and V	30 CATS	SEM 1&2
PT6002 Independent Project	30 CATS	SEM 1&2
PT6003 Contemporary Physiotherapy Practice	15 CATS	SEM 1
PT6004 Long Term Condition Management	15 CATS	SEM 1
PT6005 Leadership and Innovation in Practice	15 CATS	SEM 2
PT6006 Physiotherapy Graduate Skills	15 CATS	SEM 2
TOTAL	120 CATS	

3.5 Programme Content and Structure

The curriculum is delivered over three years to meet the overall programme learning outcomes. The theoretical and skills modules are taught in the University and six clinical placement modules will be undertaken in a range of practice settings across the County and beyond. All modules in the programme are compulsory.



Note: Only those who graduate with the full BSc (Hons) Physiotherapy will be eligible to apply for admission to the register. Exit awards do not provide a pathway to registration.

3.6 Overview of Modules

3.6.1 Level 4- Focus of Self

Code	PT4001
Title	Physiotherapy Practice I
Brief description	<p>This module aims to prepare students for clinical placement by introducing some of the key principles that underpin physiotherapy practice. The structure of health and social care in the UK will be explored with key topics such as professionalism, ethics and data protection being covered. The module introduces students to the multi-disciplinary healthcare team and the foundations of person-centred care.</p> <p>In semester I students will learn basic physiotherapy skills such as manual handling and facilitating movement to prepare for placement activity.</p> <p>Students will undertake a week-long introductory placement at the end of semester I (December) and a four-week placement at the end of the semester II (June/July).</p>

Code	PT4002
Title	Functional Anatomy and Biomechanics
Brief description	<p>This module will introduce students to anatomy and biomechanics in relation to movement and function. Students will study in detail the 'normal' structure and function of the musculoskeletal system. The module will consist of both theoretical, practical and laboratory components, giving students the opportunity to develop a range of practical skills.</p> <p>The module will provide the underpinning knowledge required for the development and application of assessment skills in musculoskeletal physiotherapy practice.</p>

Code	PT4003
Title	Introduction to Systems Anatomy and Physiology
Brief description	<p>The module introduces the student to the structure and function of the human body and provides the underpinning knowledge of 'normal function'. A 'systems-based' approach to the human body is adopted throughout the module. The central theme will be how the body maintains homeostasis in a constantly changing environment.</p>

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Code	PT4004
Title	Exercise, Health and Well-being
Brief description	<p>This module introduces the student to the role of the Physiotherapist in health promotion and exercise. Students will explore the relevant public health documents and consider how physiotherapists can influence the health of the nation.</p> <p>In addition, the module will introduce students to design and delivery of exercise programmes. This knowledge underpins the effective prescription of rehabilitation programmes across a wide area of physiotherapy specialities.</p> <p>Students may also opt to undertake recognised Gym Instructor qualification NVQ level 2 (additional fees apply) alongside this module.</p>

Code	PT4005
Title	Scientific Enquiry
Brief description	<p>This module introduces students to the fundamentals of scientific research and enquiry. Students will explore the purposes of research and consider the subsequent impact on the principles of project design, data collection and analysis. Students will be introduced to a range of typical approaches to research that will inform their studies, and they will develop core academic skills such as literature searching, referencing, data presentation and scientific writing.</p>

Code	PT4006
Title	Cardiorespiratory Physiotherapy
Brief description	<p>The aim of this module is to introduce students to the pathophysiology of a range of respiratory and cardiovascular conditions. The module will cover subjective and objective respiratory and cardiovascular patient assessment, identification of problems and the formulation of a treatment plan. Students will study common treatment techniques used to manage and improve respiratory and cardiovascular function.</p> <p>Students will also build upon reflective practice skills introduced in PT4001 Physiotherapy Practice I by identifying and acting upon on strengths and weaknesses in their physiotherapy practice.</p>

What we expect of students at level 4

During level 4 of study students are introduced to the fundamental knowledge and skills that underpin physiotherapy practice. They will learn to demonstrate a sound understanding of the principles of anatomy & physiology, biomechanics, health and exercise that will form the platform of knowledge on which physiotherapeutic skills will be built. Students will be able to show an awareness of professional boundaries, ethical practice and the importance of person-centred care.

By the end of level 4 students should be able to:

Knowledge and Skills

1. Demonstrate a sound understanding of normal structure and function of the body systems.
2. Describe the pathophysiology and clinical features of a small range of health conditions.
3. Undertake literature searches to identify appropriate sources of evidence to make judgement on basic theories and concepts relevant to healthcare.

Intellectual Skills

4. Identify learning needs and take responsibility for their own learning.
5. Understand and demonstrate the importance of reflective practice

Subject Specific Skills

6. Understand the boundaries of professional practice within the profession and the role of the Physiotherapists within the inter-professional team.
7. Demonstrate safe skills in manual handling and patient mobilisation.
8. Undertake clinical assessment using basic clinical reasoning skills to formulate problem lists.

Transferable Skills

9. Demonstrate a person centred approach to care, acting in an ethical, caring and respectful manner.
10. Respect and value cultural diversity and uphold the individual's rights and beliefs.
11. Show the ability to communicate with service users and other health care professionals

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3.6.2 Level 5- Working with others

Code	PT5001
Title	Clinical Practice II and III
Brief description	<p>The module will involve two blocks (six weeks each) of clinical education at two different placement settings. Students will work with a clinical educator (physiotherapist in practice) during their placement blocks. Students and clinical educators will complete the clinical placement handbook. A placement visit will be made by a University member of staff during the placement period (normally at the halfway review).</p> <p>The settings for placement activity will vary between placements and these can include an acute hospital, a community hospital, an outpatient department, community location, specialist school, hospice and other community venues. This will allow students to have a diverse range of clinical experiences.</p>

Code	PT5002
Title	Physiotherapy Practice II- Integrated Care
Brief description	<p>Healthcare in the UK is changing with shorter acute hospital stays and more individuals being managed in the community. This module will explore the patient journey from acute care to community settings. Students will learn about a range of clinical situations where acute care is provided in a hospital setting, and ongoing care is provided in the community. There is a strong emphasis on multi-disciplinary team working within this module and guest lecturers from different health professional backgrounds and clinical settings will provide a diverse curriculum.</p>

Code	PT5003
Title	Musculoskeletal physiotherapy I
Brief description	<p>This module will build on knowledge and skills developed in PT4001 Physiotherapy Practice I and PT4002 Functional Anatomy and Biomechanics. Students will explore subjective and objective assessment skills of the lower limb, spine, upper limb and neck. Common musculoskeletal disorders will be investigated using case examples. Students will be encouraged to develop their communication and listening skills, use basic clinical reasoning and formulate a patient treatment strategy.</p>

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Code	PT5004
Title	Musculoskeletal physiotherapy II
Brief description	<p>This module will build upon skills learnt in PT5003. Students will be introduced to more complex clinical assessment and diagnostic skills and explore more a varied range of patient case studies and health conditions. The module will focus on clinical reasoning and developing evidence-based rehabilitation approaches to managing musculoskeletal disorders.</p> <p>Students will be encouraged to consider treatment strategies and how multi pathology, psychological and emotional health, learning disability and social factors can impact upon their approach to patient care.</p>

Code	PT5005
Title	Neurological Physiotherapy
Brief description	<p>This module introduces students to common neurological conditions with an exploration of the pathological processes involved in their development and the impact this has on normal function.</p> <p>Students will build upon previous knowledge developed in the module PT4003 Foundations of Anatomy and Physiology. Students will develop their problem-solving skills to formulate problem lists and develop treatment strategies. The module uses practical 'case' examples to facilitate practical learning.</p>

Code	PT5006
Title	Research Design and Data Analysis
Brief description	<p>Students will be introduced, to the development of research aims and potential data collection techniques applicable within Physiotherapy. The module will also consider the analysis of a broad range of data types (both qualitative and quantitative) using conventional techniques. Students will have the opportunity to develop data handling and analysis techniques through a hands-on approach. Fundamental understanding of the principles of enquiry relating to qualitative and quantitative research design, planning and ethics will also be explored.</p>

What we expect of students at level 5

During level 5 of study students will build upon knowledge gained in level 4 by applying knowledge and skills learnt to a wider and more complex range of clinical situations. They will cover the physiotherapeutic management of acute and chronic conditions across a range of physiotherapy specialisms. Greater emphasis is placed upon the development of their assessment and clinical reasoning skills.

By the end of level 5 students should be able to:

Knowledge and Understanding

1. Describe and evaluate the pathophysiology and clinical features associated with a range of medical conditions, injuries or illnesses.
2. Articulate how physiotherapeutic interventions may help to enhance or maintain physical function across a range of health conditions.
3. Demonstrate understanding and evaluate research design, method selection and data analysis techniques applicable to healthcare.

Intellectual Skills

4. Evaluate and reflect on own clinical practice and identify strategies to improve clinical performance
5. Reflect upon own practice and relate this to relevant published sources and practice-based evidence

Subject specific skills

6. Apply knowledge of theoretical clinical concepts to practical situations across a range of physiotherapy disciplines.
7. Use a range of techniques to undertake a holistic patient assessment
8. Implement physiotherapy treatment and management techniques across a range of clinical situations

Transferable skills

9. Evaluate how psychological well-being, mental health issues and learning difficulties can impact upon approaches to patient care.
10. Show the ability to communicate effectively with service users and other health care professionals

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3.6.3 Level 6- Improving Healthcare

Code	PT6001
Title	Clinical Practice IV and V
Brief description	<p>This module is designed to allow students to consolidate the learning acquired through their course and improve upon their personal and professional skills. The module is largely practice based with two clinical placements taken over the course of semester I and II. Students will be exposed to a breadth of clinical areas to prepare them for their future graduate career in Physiotherapy.</p> <p>This module ensures that students reflect on their knowledge and skills, recognise limitations and respond to the changing needs of individuals, groups and organisations.</p>

Code	PT6002
Title	Independent Project
Brief description	<p>This module is a piece of sustained independent student work which provides the student with the opportunity to study an approved topic in depth, building on their interest in previously studied modules. Self-managed study will encourage students to examine a critical issue from their discipline. Students are encouraged to challenge or critique primary and, or secondary evidence relevant to their area of interest. There will be the opportunity to conduct a desk-based literature study or pursue an empirical study.</p>

Code	PT6003
Title	Contemporary Physiotherapy Practice
Brief description	<p>This module will explore contemporary areas of practice. Students will be exposed to the patient management of a range of different specialities within physiotherapy. As the profession moves forward this module will consider the 'news areas of practice' that physiotherapists progress into. The aim of the module is to give students a board overview of the areas in which they may work in during their physiotherapy career. The emergence of advanced practitioner roles will be discussed and evaluated. Students will learn through scenario-based practice and consider the 'whole person' approach to healthcare.</p>

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Code	PT6004
Title	Long term condition management
Brief description	<p>In this module students will investigate the growing role of long-term condition management in physiotherapy practice. Long-term conditions cause more deaths than all other causes combined and coupled with an ageing population in the UK there is increasing pressure on healthcare resources.</p> <p>This module will provide students with an in-depth knowledge of long-term conditions and will explore current literature that informs practice in this area. Students will explore the models and frameworks for long-term condition management with an emphasis on empowering self-care, and the prevention of long-term conditions. Students will be encouraged to critically analyse the role of multi-disciplinary, inter-disciplinary and inter-agency working in relation to this clinical area.</p>

Code	PT6005
Title	Leadership and Innovation in Practice
Brief description	<p>This module provides students with an insight into managing and leading change in healthcare. Students are encouraged to engage in critical review of current healthcare services and consider how change in care at an individual, local and National level can be implemented. Students will gain an insight into new developments and innovations in healthcare with the consideration of how technology can enhance services.</p> <p>Expertise from within the University's computing, business I and media school's will be drawn up get students thinking how they can be drivers of change in their practice.</p>

Code	PT6006
Title	Physiotherapy Graduate Skills
Brief description	<p>This module is designed to prepare students for graduate level employment as a Physiotherapist on completion of the degree programme. The module will focus on employability, equipping students with the appropriate skills for becoming a resilient healthcare professional.</p> <p>Students will also learn about the role of the physiotherapist in out of hours working and on-call settings, and consider how to confidently and competently manage the acutely unwell patient in a hospital setting. Students will explore complex clinical scenarios and how to problem-solve and make decisions in these situations.</p>

What we expect of students at level 6

At level 6 of study the focus is upon integration of clinical concepts and critical evaluation. Students are encouraged to be critical thinkers, aiming to seek high quality sources of information and questioning its validity. They will use these critical skills to plan, implement and evaluate an area of research of their choosing in the independent project module.

Students are encouraged to question practice and consider how healthcare can be improved. They are introduced to contemporary areas of physiotherapy practice and to more complex clinical cases (e.g. multi- pathologies) building upon their assessment, clinical reasoning and management skills. During clinical placement activity there is a greater emphasis on independence, by prioritising and managing a patient caseload in order to prepare for their future physiotherapy career.

By the end of level 6 students should be able to:

Knowledge and Skills

1. Engage critically and creatively with academic and sector-based knowledge in order to offer a sustained piece of scholarly writing.
2. Compare and contrast the delivery of physiotherapy services from an organisational, legal and policy context.
3. Critically evaluate the evidence-base for physiotherapeutic interventions across an extensive range of health conditions.

Intellectual Skills

4. Be able to adapt treatment approaches in response to the needs of the service users and upon critical reflection of their own practice to improve future performance.
5. Show a commitment to continuing professional development and life-long learning.

Subject Specific Skills

6. Integrate theory into practice by working as an autonomous member of the multi-disciplinary team across diverse clinical settings providing person-centred and evidence-based physiotherapeutic care.
7. Demonstrate emerging leadership skills by acting to facilitate change and improvement within healthcare in order to enhance the health and well-being of individuals, groups and services.

Transferable Skills

8. Demonstrate a caring and companionate approach towards all individuals treating service users, regardless of background, with dignity and respect, acknowledging the physical, psychological, social and cultural needs of that individual.
9. Demonstrate effective workload planning and time management skills, and be resilient and adaptable to the changing pressures and priorities within healthcare.

4.0 Expectations that we hold for student performance and behaviour

Students are advised from the outset that they are studying to become a registered Physiotherapist and therefore their programme requires them to behave in a professional manner, take responsibility for their own learning journey and treat those around them with compassion.

Students are directed to the Student Charter which sets out the standards of service that students can expect from the University of Gloucestershire together with expectations that the University reasonably has of its students.

<http://www.glos.ac.uk/life/pages/student-charter.aspx>

Conduct of students preparing to register as Physiotherapists should include due care and attention to the appropriate use of social media, thinking through issues and acting professionally, ensuring public protection at all times. Please read the HCPC guidance for the use of social media.

<http://www.hpc-uk.org/registrants/socialmediaguidance/>

4.1 Professional Practice Regulations

All professional programmes at the University of Gloucestershire are validated by their governing regulatory body. Students are advised to review the HCPC standards of proficiency for Physiotherapists please follow this link:

<https://www.hcpc-uk.org/globalassets/resources/standards/standards-of-proficiency---physiotherapists.pdf>

Students are bound by the professional codes of conduct and behaviour reflecting [HCPC student guide concerning ethics and behaviour](#). The guide relates to their behaviour and conduct during the course of their studies (and in their personal life) which may impact on fitness to practice, their ability to complete their studies and register with the HCPC. In addition, they are expected to adhere to the clinical placements codes of conduct and behaviour.

Failure to meet expected standards of conduct may result in referral to the Faculty Fitness to Practice Committee. The committee responds to concerns about professional conduct raised regarding students. The committee is designed to ensure students are fit for registration and fit to practice. A referral to this Committee may be due to conduct demonstrated whilst at university, on placement, or whilst away from either of these activities, for example during personal time.

Concerns regarding practice areas should always be brought to the attention of the University link tutor or personal tutor in the first instance.

5.0 Clinical Education

The University of Gloucestershire is working collaboratively with NHS partners to ensure a high-quality experience, which meets the needs of students, clinical partners and the University. The focus of clinical placements within the programme is on achieving the learning outcomes and themes. Clinical placements will occur in block placements throughout first (level 4), second (level 5) and third year (level 6). The aim of clinical placements is to ensure that, by the time of graduation, students are able to appropriately integrate theory and practice to the standard expected of a physiotherapist in accordance with:

- HCPC (2013) Standards of Proficiency for Physiotherapists
- CSP (2011) Physiotherapy Framework: putting physiotherapy values, knowledge and skills into practice.
- QAA (2001) Benchmark statement for Healthcare Programmes.

The placement hours have been calculated to achieve the minimum 1000 hours of clinical experience to allow successful graduates of the BSc (Hons) Physiotherapy programme eligibility to apply for HCPC registration and membership of the CSP. In first year, student complete 185 hours of placement and this increases to 444 hours in both levels 5 and 6. The increase in the number of placements hours from level 4 to 5 reflects the greater integration of theory learnt into the practice in a work-based setting, preparing physiotherapy students for future employment.

Module	Study Period	Placement Type	Duration/Hours
PT4001 Physiotherapy practice I	Level 4 End of semester I	Introductory placement Pass/fail	1 week 37 hours
PT4001 Physiotherapy practice I	Level 4 End of semester II	% mark awarded	4 weeks 148 hours
PT5001 Clinical placement II and III	Level 5 Semester I	% mark awarded	6 weeks 185 hours
PT5001 Clinical placement II and III	Level 5 Semester II	% mark awarded	6 weeks 185 hours
PT6001 Clinical placement IV and V	Level 6 Semester I	% mark awarded	6 weeks 185 hours
PT6001 Clinical placement IV and V	Level 6 Semester II	% mark awarded	6 weeks 185 hours

5.1 Clinical Placement Activity Hours and Specialty

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The placement hours have been calculated to achieve the minimum 1000 hours of clinical experience to allow successful graduates of the BSc (Hons) Physiotherapy programme eligibility to apply for HCPC registration and membership of the CSP. An additional, 110 hours acts as a buffer for placement time missed due to illness or personal circumstances. In addition, catch up placement hours over the summer period will be offered to those students at level 5 and 6 who have failed to reach their placement hours for legitimate reasons (for example; mitigating circumstances that have been identified with the senior tutor or Helpzone team).

Where level 5 or 6 students have failed to meet their minimum 1000 hours of clinical experience this will have to be completed over the summer period and may result in delayed graduation from the BSc (Hons) Physiotherapy programme. This will be supported and managed through the Supported Study Procedures (see practice education website for further details).

In order to provide an extensive and well-rounded placement experience of physiotherapy, students will undertake placements in the following areas:

1. At least one placement in a cardiorespiratory specialism (acute or community)
2. At least one placement in a neurological specialism (acute or community)
3. At least one placement in a musculoskeletal and/or orthopaedic setting
4. At least one placement at level 4, 5 or 6 in a community location (this may include a community physiotherapy setting, intermediate care, a hospice, nursing home/retirement village, a community rehabilitation programme or health promotion environment).

There may be some cross over between these placement areas. For example, a student may attend a community placement in a neurological setting (i.e. early discharge stroke team) that allows both clinical experience of the community and of neurological rehabilitation in one placement.

5.2 Organising Placement Activity

The Your Future Plan placement team and the Strategic Lead for Partnerships and Placements organise the placement activity for students across the School of Health and Social Care. They will liaise with you regarding placement the allocation of placement students to your workplace and provide ongoing support to you prior to, during and after the placement block. Their contact details are provided at the front of this booklet. If you have any queries or concerns please get in touch with them via telephone or email.

5.3 The Role of the Clinical Educator

The role of the clinical educator is to support and facilitate student learning whilst in the placement setting. You will act as the first point of contact for the student during their placement period, supporting them in their development as an autonomous practitioner.

In order to be fully prepared to support the student you should:

- Read the placement handbook and be familiar with its contents and the roles and responsibilities of all concerned.
- Arrange and induction to the placement and facilitate integration with other team members
- Assist the students in their goal setting activity
- Act as the 'line manager', overseeing the day to day management of the student's work
- Allocate the level, amount and type of work in consultation with the student and the guidance for level of study for their degree programme.
- Provide the student with day to day advice and support.
- Monitor student attendance weekly and sign accordingly.
- Contribute to the completion of placement paperwork.
- Undertake observed practice, question and answer sessions and support reflective practice.
- Support and/or contribute to the teaching and assessment of the student.
- Oversee and monitor the implementation of any action plans to ensure that sufficient opportunities are provided to enable the student to develop as required.
- Participate in the evaluation and monitoring of the course by completing the clinical educators survey
- Attend University workshops for clinical educators as required.

5.4 The Role and Responsibilities of the Student

Students are advised of their role and responsibilities when on placement and are provided with the following guidance:

- Identify own learning needs and make full use of all available learning opportunities.
- Demonstrate professional behaviour at all times in accordance with the Guidance of Conduct and Ethics (HCPC, 2016).
- Act in accordance with all local policy and procedures.

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- Undertake direct work under the instruction and supervision of the clinical educator
- Develop the capability to work with increasingly complex situations commensurate with the level of the placement.
- Develop autonomy in making professional judgements and decisions commensurate with the level of the placement.
- Prepare for, attend and participate in all training and team meetings.
- Proactively make arrangements for direct observations and complete all relevant paperwork prior to and after the observation.
- Utilise the knowledge, values and skills of Physiotherapy to the best of their ability.
- Seek appropriate support, guidance and supervision where needed
- Develop as a reflective practitioner using verbal and written feedback to improve or adapt practice.
- Notify the clinical educator of any significant change in their personal or professional circumstances which may impact on their practice.
- Discuss with the clinical educator any concerns that they have about the placement prior to raising any concerns more formally with their Link Tutor or Module Tutor.
- Raise any concerns concerning practice that they observe within the placement with the team manager prior to formally using agency whistleblowing policy.
- Complete and submit all placement paperwork and assessment requirements by due or agreed dates.
- Comply with confidentiality and anonymisation protocols

5.5 The Role of the Placement Link Tutor

The link tutor is an academic member of staff that is assigned to each student during their placement activity. The tutor assigned to each student will be responsible for liaising with you and the student to make a placement visit at the halfway point in the placement. This will be the point at which the student undergoes their halfway assessment.

During the visit you will have the opportunity to discuss the progress of the student with the link tutor alone and also with the student present. During the visit the link tutor will complete the 'Link Tutor Visit Report' (Appendix C). The purpose of this form is to record the items discussed in the halfway meeting, log any concerns either the clinical educator or the student may have and assist in the setting of an action plan for the remaining weeks of the placement. Issues that cannot be dealt with during the visit may require further follow visits in line with support study procedures.

If a visit is not possible due to geographical location of the placement setting an alternative means of contact will be sought. For example, it may be possible to arrange a Skype meeting at the halfway assessment.

If you have any concerns regarding the student you do not need to wait until this time to contact the University. Any concerns you wish to raise regarding the student

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should be made by following the flowchart 'Raising Concerns' featured in Appendix A and available through the Practice Education website:

Policy- Raising concerns about student

<http://www.glos.ac.uk/academic-schools/health-and-social-care/practice-support/Documents/nursing/raising-concerns-practice-about-student.pdf>

Policy-Raising concerns about practice

<http://www.glos.ac.uk/academic-schools/health-and-social-care/practice-support/Documents/nursing/raising-concerns-student-about-practice.pdf>

5.6 Practice Education Website

The practise education website is where you will find all the relevant policy and guidance on practice education across the School of Health and Social Care. There is information on each degree programme, policies and procedures, raising concerns and training and updates.

<http://www.glos.ac.uk/academic-schools/health-and-social-care/practice-support/Pages/practice-support.aspx>

Within the physiotherapy section you will be able to access course information, the student course handbook, student placement handbook and relevant paperwork to support you in your role as a clinical educator.

5.7 Managing a failing student

If a student is experiencing difficulties during their placement activity or you wish to raise concerns about the student please do this as soon as possible so that the issues can be addressed where possible. In the first instance are you able to raise these concerns directly with the student? Can the issue be discussed and resolved without the need to take the matter further? If the matter cannot be raised please follow the 'raising concerns' flowchart and contact the University via practicesupport@glos.ac.uk and the trust education for your workplace.

Policy- Raising concerns about student

<http://www.glos.ac.uk/academic-schools/health-and-social-care/practice-support/Documents/nursing/raising-concerns-practice-about-student.pdf>

Policy-Raising concerns about practice

<http://www.glos.ac.uk/academic-schools/health-and-social-care/practice-support/Documents/nursing/raising-concerns-student-about-practice.pdf>

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In order to be eligible to apply for HCPC and CSP membership on successful completion of the degree student must pass all elements of their placement modules and have completed over 1,000 hours of supervised clinical experience. A student who fails a placement block must re-take this placement in a different setting over their summer holiday period. The mark for the placement block will be capped at an overall module of 40% if the student passes this placement. Any student who fails their second attempt at the placement block will be withdrawn from the BSc (Hons) Physiotherapy programme and may either be transferred onto another programme of study or exit the University with an interim award that does not allow eligibility to apply for HCPC and CSP membership.

6.0 Modules and Placement Activity

6.1 Mandatory Training

Prior to clinical placement activity students will undertake manual handling training delivered by the local acute hospitals trust manual handling team. In addition, student will complete infection control and first aid training.

6.2 Level 4- Introductory Placement and Placement I

The level 4 introductory placement will be in an in-patient setting (either acute or community) in order to give students an introduction into working in a ward environment. Students often struggle to gain work experience in an acute setting prior to attending University and therefore this may be the first opportunity a student physiotherapist has to observe the an in-patient healthcare environment. The focus of the placement is on becoming familiar with the environment, observing the roles of physiotherapists and other health care professionals. Students will observe with the procedures for infection control, gaining patient consent, manual handling, and professionalism and communication within in the workplace. During this placement students complete the Introductory Placement Handbook. By this stage of the course students will have completed manual handling and first aid training and will be able to actively assist in assessment and treatment activity working alongside a qualified physiotherapist (similar to working as a physiotherapy assistant)

At the end of semester II student complete a four week placement in an acute or community location. At this stage of their study students will have completed musculoskeletal anatomy and basic assessment skills, exercise prescription, the cardiorespiratory physiotherapy module and undertaken practical skills in movement and posture assessment, patient transfers and mobilisation. At this stage students, with supervision; can start to lead patient assessment and treatment activities in the placement setting.

Learning outcomes and assessment for PT4001 are as follows:

A student passing this module should be able to:

1. Describe the professional role of a physiotherapist and define scope of practice boundaries.
2. Describe and demonstrate the key components of relevant health and safety policies, informed consent, ethical practice and patient-centred care.
3. Describe and demonstrate best practice in manual handling, patient transfer and mobilisation.
4. Demonstrate the ability to communicate effectively and understand the role of the multi-disciplinary health care team.
5. Identify own learning needs and the benefits of keeping a reflective practice diary in physiotherapy education.
6. Describe how healthcare is organised in the UK.

Assessment:

001:	0%	Pass/fail Introductory clinical placement
002	50%	Group Presentation, 20 minutes
003:	50%	Clinical placement I

In 002 students work in small groups and are set a presentation subject area to investigate. This encourages team work and cooperation early on in their degree studies.

6.3 Level 5- Placement II and III

At level 5 students undertake two placement blocks towards the end of semester I and semester II. By the time students reach their first Level 5 placement they have undertaken study in cardio-respiratory (PT4006, PT5002), neurological (PT5005), musculoskeletal (PT4001, 4002, 5003) and community care (PT5002), areas of physiotherapy practice. This sets students up well for varied placement settings in both level 5 placements.

By the time they reach the semester II placement students will have undertaken further study in musculoskeletal and (PT5004) and integrated care (acute and community settings) enhancing their problem-solving and clinical reasoning skills in these clinical areas.

Learning outcomes and assessment for PT5001 are as follows:

A student passing this module should be able to:

1. Demonstrate adherence to the rules of professional conduct and show emerging skills in caseload management.
2. Communicate effectively with service users and the multi-disciplinary team demonstrating a person centred approach to patient care respecting individual values, rights and beliefs.
3. Identify, analyse and diagnose key clinical problems by planning and leading subjective and objective assessment across different healthcare settings.

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4. Plan, carry out and justify safe and effective physiotherapy treatment for service users.
5. Reflect upon own clinical practice and relate this to relevant published sources and practice-based evidence.

Assessment

- 001: 40% Clinical placement II
- 002: 20% Coursework: individual, other, 1000 words
- 003: 40% Clinical placement III

In assessment 002 students compose a reflective account of their first level 5 clinical placement and provide a rationale for their clinical decision-making using published sources of information.

6.4 Level 6- Placement IV and V

As students' progress into level 6 they undertake two further placements at the beginning of semester I and in the end of semester II. Students are expected to take on a greater degree of responsibility to manage a caseload as they progress through Level 6 in order to prepare them for working life. They are reflecting on their practice throughout and using more advanced assessment and clinical reasoning skills in their practice.

Learning outcomes and assessment for PT6001 are as follows:

A student passing this module should be able to:

1. To work autonomously within scope of practice and ethical boundaries and recognise the need for seeking advice from others or onward referral.
2. Work effectively as part of a team using high level communication skills appropriate to professional and patient audiences
3. Articulate a comprehensive understanding of clinical conditions relevant to physiotherapy practice, and undertake thorough assessment using clinical reasoning skills to formulate and deliver evidence-based treatment.
4. Demonstrate an ability to manage a clinical caseload and be able to justify the prioritisation of patient need and treatment timescale.
5. Critically evaluate their own practice and identify an action plan to improve clinical performance

Assessment:

- 001: 40% Clinical placement IV
- 002: 20% Coursework: individual, presentation; 20 minutes
- 003: 40% Clinical placement V

In assessment 002 students construct an individual presentation on their on a topic or case study from their placement. The students develop this as a reflective account of their clinical performance and consider the action plan for their final placement.

7.0 Placement Guidelines

The following sections give you guidance about how to manage and structure the placement that may be useful in your role as a clinical educator.

7.1 Prior to the Placement

Students will receive your preferred contact details once they have been assigned to the placement setting. They are asked to make contact with you at least two weeks before the start of the placement.

It may be helpful to have an information sheet to provide to the student prior to commencing the placement to outline any relevant information to them before they start.

Consider using the following information as a guide:

1. Where to report to on first day and whom to ask for.
2. Hours of work expected (students are expected to achieve a 37 hours week following the working pattern of the clinical educator/s).
3. Parking arrangement if required
4. Any essential reading or revision needed prior to the placement.
5. Uniform guidance e.g. footwear.
6. Facilities at workplace e.g. showers, café, library.
7. Useful information on the department
8. How to report absence

7.2 Induction to the Placement Setting

The clinical educator should organise the student/s an induction programme on arrival to the placement setting. This needs to include all the health and safety information students require in order to be able to work safely in that environment. This should include the following:

- Contact details for the clinical educator and department
- The procedure for reporting sickness and absence
- Fire safety
- Infection control policy relevant to the setting
- Manual handling guidance
- Setting specific advice e.g. how to use telephones, equipment, where notes are located
- Incident reporting procedures

A checklist for induction is included in Appendix D

7.3 Specific Information - Community Placement Settings

We aim to provide students with a diverse range of placement activities and therefore we hope all students will experience at least one placement in a community setting. The students should be made familiar with the specific health and safety policy that applies to the community placement setting and lone working considerations in that environment.

The methods of transport will also need to be considered if this is applicable to the setting. For example, how the student will travel to the placement activity. A set point for student pick up may be agreed e.g. a base location point where the student could then travel with the health professional.

Alternatively a student may wish to travel to the community locations independently. In this case car insurance advice must be sought by the student to ensure their insurance covers them to travel in different community locations e.g. a patients home.

7.4 Setting Placement Objectives

During the first few days of placement activity allow the student to observe your day to day role and familiarise themselves with the working environment days so that they are fully prepared for setting placement goals. Goals should be set by the end of the first week of placement and should be reviewed regularly.

The student should provide their clinical placement document in order to set goals for the placement; although the goals should be theirs you can support them in setting realistic and achievable goals. The goals set should be SMART and an action plan should provide the information on how the goals are going to be achieved.

Some example goals have been provided on the following page. Consider the learning of the placement module that this placement sits within (PT4001, PT5001, and PT6001). The learning outcomes for each module are on page 27-29. An example goal setting and action plan sheet is included in Appendix E. Goals should be reviewed regularly.

7.5 Halfway Appraisal Date

During all student placement activity (apart from the observation placement), a visit to the placement location will be made by one of the academic lecturing team (link tutor). This visit will normally take place at the halfway student appraisal. The halfway appraisal date should be set as soon as possible in conjunction with the student, the link tutor and the clinical educator.

The clinical educator and student will have the opportunity to meet the academic member of staff individually and jointly. The halfway appraisal will take place jointly and further objectives for the final weeks of the placement will be set.

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Goal Setting Example

Goal	Specific	Measurable	Achievable	Realistic	Timely	Action Plan- How are you going to achieve the goal?
To conduct a full subjective & objective assessment of a peripheral joint and formulate a patient problem-list	Subjective and objective	Evidence from patient notes	Clinical educator can provide observation and support	Have completed subjective and objective assessments in practical classes at University	Achieve goal in three weeks (halfway assessment)	<ol style="list-style-type: none"> 1. Observe clinical educator assessment of peripheral joint 2. Lead subjective assessment 3. Revise objective tests for peripheral joints 5. Joint objective assessment with educator and feedback following this 4. Undertake observed assessment 5. Complete reflection on the assessment
To demonstrate and articulate the role of other health professionals in the placement setting	Role of MDT team	Will provide written account of team roles to the clinical educator	Able to observe other health professionals work during placement	Have allowed enough time to achieve the goal	Five weeks	<ol style="list-style-type: none"> 1. Book to spend time observing practice of nurse, OT, speech therapist and ward doctor. 2. Make note of role during observation 3. Attend MDT meeting 4. Written report to clinical educator and discussion of roles in question and answer session.

8.0 Assessment of Clinical Placement

Clinical placement is a large element of a Physiotherapy degree programme and therefore the University teaching team feel that it should count towards the student's degree classification. Physiotherapy is a practical hands-on profession and rewarding students for their clinical skill development is vital in developing competent practitioners of the future.

The observation placement at Level 4 is marked as a pass/fail and does not count towards the students final degree mark. The placement at the end of level 4 is graded but does not count towards the degree classification. All further placements are graded and carry a weighted mark for the module at level 5 and 6 (see section 6.2 to 6.4) and count towards final degree classification.

8.1 Formative Assessment in Practice

Students should be observed in practice regularly and receive both verbal and written feedback as appropriate. This will help you ascertain the students' current level of ability and highlight areas of support and development required.

Table 3 below provides examples of methods of formative assessment and feedback that could be utilised during the placement. Within the student placement handbook there is space to record these activities.

Table 3- Formative and Summative Assessment in Practice Examples

Assessment Activity	Evidence definition
Practice Observation:	Practice observation of the student whilst they are working under supervision. More than one observation of the activity/skill may be appropriate for the educator to satisfy themselves that the student is able to sustain an acceptable level of performance and competence. These observations will take place as part of the normal working role of the student, rather than being contrived for the purpose of assessment.
Question and Answer Session:	Between the educator and the student to assess underpinning knowledge the student will demonstrate understanding and applications.
Reflective Discussion:	Between the educator and the student regarding their progress in relation to knowledge, understanding and application.
Reflective Writing:	Demonstrating knowledge and understanding as applied to specific placement experiences supported by sources of evidence. If appropriate the use of a reflective model would enhance this process. This must be retained in the student's own portfolio.
Written Patient/ Carer Feedback:	Service Users should be approached, but only after initial discussion with the clinical educator.

8.2 Providing Feedback to Students

Providing effective feedback to students is an important but not always an easy task. Students should always be provided with feedback in a constructive manner, highlighting the good points as well as the areas that need improvement. Where possible try and offer a solution for the weaker areas of practice by suggesting ways in which they can self-manage the situation. It may be easier to get some self-reflection from the student as a starting point by asking them to discuss how they feel their practice is developing. Get the student to offer their own solutions or strategies to areas they feel need further work. Referring to their goals set at the beginning of the placement may also be a helpful tool.

8.3 Halfway Appraisal- Formative

The halfway appraisal date should be set as soon as possible in conjunction with the student, the link tutor and the clinical educator.

The clinical educator and student will have the opportunity to meet the academic member of staff individually and jointly. The halfway appraisal will take place jointly and further objectives for the final weeks of the placement will be set. The student should be provided with formal written feedback and an overall halfway mark for the placement which is formative and does not count towards the final placement mark. (Appendix F).

8.4 Service User Feedback

Where appropriate the feedback from service users or carers should also be sought. Within the student placement handbook there is a service user feedback form. Further copies of this form can be printed from the practice support website. The clinical educator should approach the service user or carer first and gain consent and then if able ask the individual to provide a short piece of written feedback that can be added to the students practice portfolio.

8.5 Summative Placement Assessment

Summative placement assessment should take place in the final week of the placement block and is a reflection on the student's ability and progress throughout the placement period. You should use the guidance below and the marking grids provided in the student placement handbook. The student will provide this for you during the assessment. The marking grids for level 4, 5 and 6 are provided in Appendix G as a guide.

Marking processes and procedures will have been covered in detail during your clinical educator course. If you have any concerns on the marking process please make contact with the link tutor or raise this at the midway assessment. They will be happy to provide you with further support on the marking processes.

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Students are graded on their overall ability and performance in five key areas:

- **Professional Values**
- **Communication and interpersonal skills**
- **Organisation and learning behaviour**
- **Assessment and clinical reasoning**
- **Treatment and evaluation**

These are used as points for discussion in the midway appraisal and will be familiar to the student. Each of the five sections carries a weighting of 20% to provide an overall percentage score for the student.

Grade boundaries for degrees are as follows:

Percentage	Comment	Grade
70-100	Pass	A
60-69	Pass	B
50-59	Pass	C
40-49	Pass	D
1-39	Fail but with entitlement to reassessment	R
0	Fail without entitlement to reassessment	F

8.6 Placement Debrief for Students

On return to University students will undertake a placement debrief session with their module leader in a small group setting. The aims of the sessions is to discuss their experience whilst on placement and share any significant events, positive and negative experiences. The small group setting allows students to share their experiences with other students, learning from positive and negative events and discuss their feeling about future placements. The module leader will facilitate their discussions in a non-judgemental way and assist students in thinking about their reflection on the placement and how they can set an action plan for their future placement blocks.

9.0 Ideas for Placement Activity

The structure of a student placement will vary between settings and across the three levels of study. The clinical educator is responsible for planning the student's time during their placement block. You may wish to discuss with the student what they want to achieve during their placement or offer ideas of what they could participate in during their placement. Some examples are featured below.

9.1 Inter-professional Learning on Placement

Many placements have opportunities for the student to participate in inter-professional learning to improve students understanding of the scope of practice and skills of other professions. Although students are encouraged to seek out these opportunities for themselves they may need some assistance and guidance at times.

The aims for Inter-professional learning on placement are to:

- Improve understanding of the roles of other health and social care professions
- Participate effectively in inter-professional approaches to health care
- Understand the need for a high level of communication between and within professional groups and service users and carers.
- Recognise the similarities and differences in assessment and management of patients by other professionals

9.2 Attending meeting and training

Students should fully participate in the daily practices of your role and be able to join in appropriate team meetings, case conferences, handovers, in-service training or other meetings. Students at levels 5 and 6 should be encouraged to be actively involved in these meetings, for example; provide feedback on patient progress in an MDT meeting.

9.3 Study time during placement

The educator may allocate the student up to three hours each week for personal study including the preparation of presentations, case study analysis or formal reflection upon learning experiences. Students should be aware that this time is allocated at the discretion of the educator and is likely to vary between placement settings. You may set specific work for them to achieve in this time, for example; investigating a particular treatment approach or medical condition.

9.4 Observation of surgical and investigative procedures

In certain placement settings students may be given the opportunity to observe investigative procedures or surgical intervention. This decision is made locally depending on availability and suitability within the healthcare setting. This may assist students in understanding the patient perspective on recovery from interventions, for example; understanding why individual may experience pain after surgery treatment.

10.0 Procedures for reporting absence whilst on placement

As part of the induction process please advise students of how to report absence during their placement. The students are provided with the information below to help guide them on reporting absence for University activity and placement

Students are advised to:

1. Contact the placement provider direct on their placement telephone number or otherwise agreed absence reporting system
2. Ask to speak to the member of staff who is expecting you
3. Inform them of your absence and likely return date if possible
4. Email the placement team with the date, time and whom the absence has been reported to include a likely return date if you are able to do so.

Please be aware that if the placement provider is severely concerned about a student's absence, they will contact the Academic Course Lead immediately, or if out of hours the on-call University Manager.

In all cases you should ensure that you document down the name of the person you reported sick or absent to as well as the date and time and share this with your Personal Tutor. It is important that absence is kept to a minimum and you should see your Lecturers on your return to ensure that you can catch up with missed work. Failure to adhere to the procedure will result in an unauthorised absence being recorded and this could impact on your ability to finish the course of study.

It is also important that you inform us if you feel that there are circumstances that may impact on your performance more generally. This might include health issues, personal issues or general difficulty with your programme. You may discuss any worries you have with your Personal Tutor at any point during your studies. The Students' Union and University Student Services Department are also there to provide advice and support.

11.0 Evaluation of Placement and Quality Assurance

All practice placements will have an annual educational audit to quality assure the learning experience in practice and comply with professional requirements. The audit and an online placement profile that both educators and students can use as a resource will be produced for each practice area. Quality monitoring of placements will be reported through the School of Health and Social Care Placements Group, and Strategic Workforce Development Partnership Board.

At the end of the placement block the student and the clinical educator are encouraged to evaluate the placement. This helps with the moderation of the quality of the placement and the quality of the student, and the University support system. We strive to keep our standards high and gaining insightful feedback will help us continually improve our performance. A summary report of placement evaluation is produced annually and shared with clinical partners.

12.0 Supporting Students with Disabilities

Students who have declared a disability will be supported by the Student services team at the University during their studies. The team offer a confidential, one-to-one support service for students who have a disability, dyslexia or have additional learning needs. The areas of support provided by the Disability Advisers include:

- Advisory visits to University prior to formal application
- Advice on diagnostic and medical assessments (including dyslexia & other specific learning difficulties)
- Assistance with application for the Disabled Students' Allowance (DSA)
- Provision of note takers, study skills tutors and communicators
- Links with outside agencies concerned with disability issues
- Advice on disability access
- Disability awareness training
- Liaison with academic staff and student services regarding support

A student who has a disability will be asked for their permission to share the details of their disability with the placement provider. If they provide consent you will be informed of the details of their disability and any support mechanisms in place to manage the situation. Further advice and support can be accessed at any time during the placement by contacting the link tutor.

13.0 Clinical Educators Course

The University of Gloucestershire runs annual clinical education courses for health professionals (physiotherapy, adult nursing, mental health nursing and paramedic science). The one day course contains generic (multi-professional) and discipline specific

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sessions to ensure all clinical staff involved in placement activity are suitably prepared to take students on placement and familiar with the clinical placement paperwork and procedures. All staff receiving placement students will need to complete the University's clinical education course. Educators who have completed the course at other institutions will attend a shorter version (half day) of the course.

Further support on anything related to placement can be accessed at any time on the practice education website; <http://www.glos.ac.uk/academic-schools/health-and-social-care/practice-support/Pages/practice-support.aspx>

Alternatively you can contact the academic link tutor for more support.

Appendix A- Raising Concerns

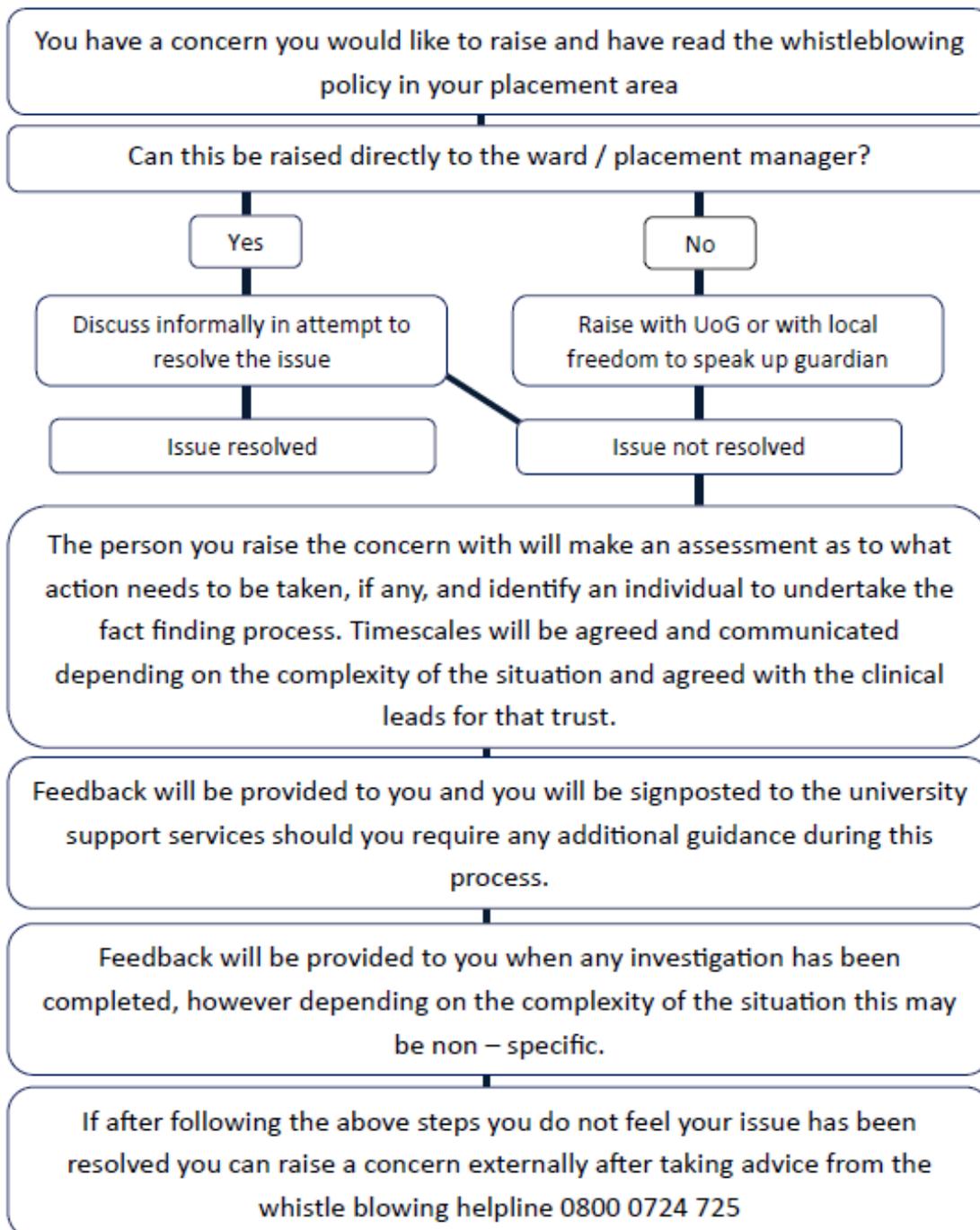
School of Health and Social Care

Raising concerns
Student concern about practice



UNIVERSITY OF GLOUCESTERSHIRE

You should always try in the first instant to resolve any issue informally

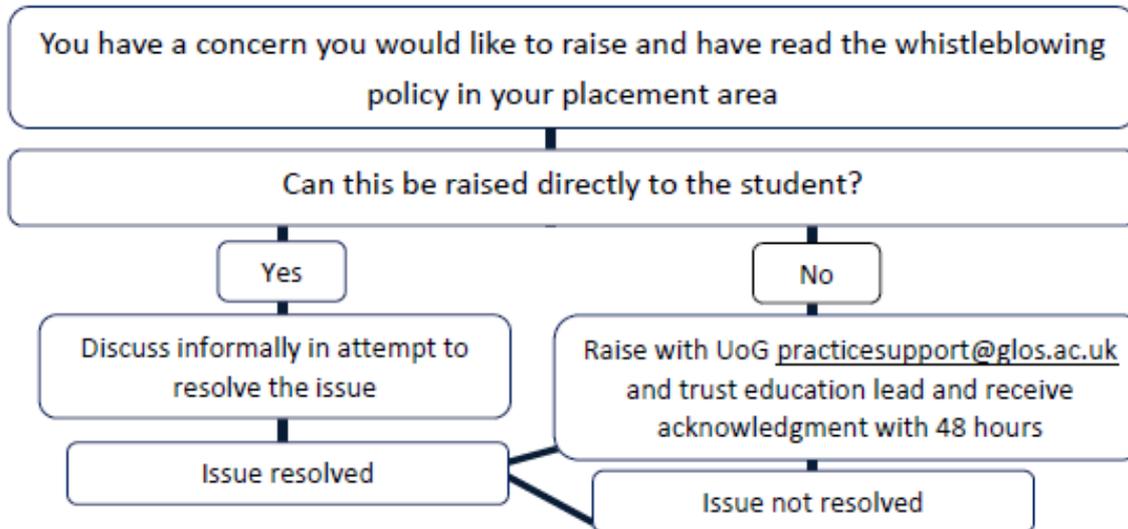




Raising concerns

Practice concern about student

You should always try in the first instant to resolve any issue informally



The person you raise the concern with will make an assessment as to what action needs to be taken, if any, and identify an individual to undertake the fact finding process. Timescales will be agreed and communicated depending on the complexity of the situation and agreed with the clinical leads for that trust.

Feedback will be provided to you about any investigation relating your concern, this will include any immediate action taken / required.

Feedback will be provided to you when any investigation has been completed, however depending on the complexity of the situation this may be non – specific. If after following the above steps you do not feel your issue has been resolved please contact the UoG Helpzone helpzones@glos.ac.uk who will be able to signpost you should you wish to escalate your issue

If a concern is raised to either the UoG or trust information will be shared and managed collaboratively



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Appendix B Placement Structure Map

N.B. Please note the placement weeks for level 5 and 6 have been modelled to show when they would exist for these cohorts based on the academic year 2019/2020.

Semester I

	Ind.	1	2	3	4	5	6	7	8	9	10	11	12	13	14
	9/9/19	16/9/19	23/9/19	30/9/19	7/10/19	14/10/19	21/10/19	28/10/19	4/11/19	11/11/19	18/11/19	25/11/18	2/12/19	9/12/19	13/1/20
Level 4		University lecture weeks- Semester I											Intro placemen t	Lecture week	Assess week
Level 5		University lecture weeks							Clinical placement 6 weeks						Assess week
Level 6		Lecture week	Clinical placement 6 weeks						University lecture weeks						Assess week

Semester II

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16 & 17	1/6/20-	
	20/1/20	27/1/20	3/2/20	10/2/19	17/2/20	24/2/20	2/3/20	9/3/20	16/3/20	23/3/20	30/3/20	27/4/20	4/5/20	11/5/20	18/5/20	26/5/2 0- 1/6/20	3/7/20	
Level 4	University lecture weeks														Exam week	Clinical placement 4 weeks		
Level 5	University lecture weeks					Clinical placement 6 weeks						University lecture weeks				Exam week		
Level 6	University lecture weeks											Clinical placement 6 weeks						

Appendix C- Link Tutor Visit Report

This form is to be completed by the academic link tutor during their visit to the student at the halfway appraisal. Any concerns should be document and the principles of the 'Raising concerns' guidance should be followed where necessary.

Student Name:	
Student Number:	
Name of link tutor:	
Name of clinical educator:	
Placement setting:	
Date of meeting:	

Individual discussion with clinical educator	
Feedback on student progress to date	
Any concerns raised?	
Further support required	

Individual discussion with student	
Reflection of placement at halfway stage	
Any concerns raised?	

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Further support required	

Joint Meeting	
Overall reflection on placement	
Has the students met placement objectives?	
Support goal setting for remainder of placement	
Action plan	

Signatures	
Clinical educator	
Link tutor	
Student	

Appendix D Induction Checklist for Placement Activity

Day 1

1. Orientate students to the placement setting

Activity	Tick
Working hours/pattern expected/lunch/breaks	
Access to the department/ward	
Introduce staff	
Orientate to area- fire exits, toilets, lockers, canteen, library, parking etc.	
Emergency procedures- fire, cardiac arrest, emergency bells	
Relevant policy – manual handling, infection control	
How to report absence/sickness	

2. Getting to know the student.

Activity	Tick
Ask about previous experience	
Check modules covered to date	
Ask to see SWOT analysis	
Ask about preferred learning style	
Ask student about placement objective/ideas	

3. Getting to know you.

Activity	Tick
Discuss your career as a Physiotherapist to date	
Outline your expectations of them during the placement	
Discuss how they would raise and issue or concern with you	
Discuss possible learning opportunities	
Discuss typical working day	

Day 1 and 2

Allow the student to observe your day to day role and familiarise themselves with the working environment over these two days so that they are fully prepared for setting placement goals.

Day 3

The student should provide their clinical placement document in order to set goals for the placement. Although the goals should be theirs, you can support them in setting realistic and achievable goals. The goals set should be SMART and an action plan should provide the information on how the goals are going to be achieved.

Halfway Appraisal Date

The halfway appraisal date should be set as soon as possible in conjunction with the student, the link tutor and the clinical educator.

Ongoing Observation and Support

The student should be observed in practice regularly and receive both verbal and written feedback as appropriate. This will help you ascertain the student's current level of ability and highlight the areas of support and development required.

Appendix E- Student Goal Setting Plan

SMART Personal Goal	Action Plan (How goal will be achieved)	Measure (How will you know goal has been achieved)	Target Date	Has goal been achieved? If not, proposed action plan for future

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Appendix F- Halfway Formative Assessment

It may be helpful to refer to the marking grids for guidance on the grade boundaries. You **do not** need to provide the student with a grade for each section only an overall midway assessment grade. This is a formative assessment and does not count towards the final placement mark.

Criteria	Feedback
Professional Values	
Communication and interpersonal skills	
Organisation and learning behaviour	
Assessment and clinical reasoning	
Treatment and evaluation	

Midway Appraisal Mark (%):	
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To be completed by the student:

Review of Goals	
Action plan for placement	

Student signature and date:	
Clinical Educator signature and date	
Link tutor signature and date	

Appendix G Level 4 Marking Criteria- Physiotherapy Placement

Professional Values are marked consistently across level 4, 5 and 6

Professional Values	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Adherence to policies & procedures	Demonstrates an inadequate awareness of policies and procedures	Demonstrates an awareness and follows basic policies and procedures with guidance	Demonstrates an awareness and follows basic policies and procedures	Demonstrates a good understanding and follows policies and procedures	Demonstrates an excellent understanding and follows all policies and procedures	Demonstrates an excellent understanding of the necessity for policies and procedures and consistently works well within them
Aware of the physical, psychological, social and cultural needs of individuals	Frequently lacks insight into patients individual needs and requires guidance and instruction	Aware of patient individual needs and demonstrates limited application to practice	Aware of patient needs and demonstrates good application to practice	Aware of patient needs and demonstrates consistent application to practice	Aware of patient needs and demonstrates excellent application to practice	Demonstrates insight to patient needs and is consistently sensitive patient needs and applies this knowledge to practise consistently
Responsibility for self-maintain standards of personal and professional conduct	Reluctant to take responsibility for self-development despite encouragement. Does not take initiative or recognise personal and professional limitations.	Reluctant to take responsibility without encouragement. Demonstrates inconsistent initiative and needs reminding of personal and professional limitations	Takes responsibility with encouragement. Demonstrates some initiative but occasionally needs reminding of personal and professional limitations	Accepts responsibility and copes well with it. Demonstrates some initiative but occasionally needs reminding of personal and professional limitations	Accepts responsibility and appears to thrive on it. Demonstrates initiative and recognises personal and professional limitations	Seeks out opportunities to take on responsibility. Demonstrates significant initiative and always recognises personal and professional limitations
Comments:						Grade (%):
Clinical educator name:						
Signed and date:						

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Communication & Interpersonal Skills	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Communication skills	Demonstrates inadequate verbal and non-verbal communication with patients, carers and colleagues leading to inadequate patient care	Demonstrates adequate verbal and non-verbal communication with patients, carers and colleagues	Demonstrates good verbal and non-verbal communication with patients, carers and colleagues with some prompting and guidance to modify communication style.	Demonstrates well developed verbal and non-verbal communication with patients, carers and colleagues with occasional prompting.	Demonstrates highly developed verbal and non-verbal communication with patients, carers and colleagues most of the time.	Demonstrates highly developed verbal and non-verbal communication with patients, carers and colleagues.
Interpersonal skills	Demonstrates inadequate interpersonal skills resulting in difficulties gaining patients confidence	Demonstrates adequate interpersonal skills but does not gain patients confidence initially	Demonstrates appropriate interpersonal skills gaining patients confidence some of the time	Demonstrates very good interpersonal skills, gaining patients confidence some of the time	Demonstrates highly developed interpersonal skills, gaining patients confidence most of the time	Demonstrates highly developed interpersonal skills, gaining patients confidence consistently well
Organisation and Learning Behaviour						
Management of time and workload	Unable to manage time effectively	Frequently needs guidance with time management	Manages time with guidance and support	Manages time well with little support	Manages time well and completes all activity in a timely fashion	Manages time and activity to a consistently high standard
Self-preparation and approach to ongoing learning	Has a poor approach to learning and needs considerable direction	Has an inconsistent approach to learning and needs direction with ongoing learning	Has a consistent approach to learning but needs direction with ongoing learning	Has a consistent approach to learning but occasionally needs direction with ongoing learning	Has a positive, self-directed approach to learning	Is proactive in self-directed learning
Record keeping and documentation	An inadequate ability to record patient notes, poor use of language and have frequent omissions	Demonstrates an adequate ability to record patient notes which may lack conciseness and have frequent omissions	Records appropriate patient notes but lacks conciseness and makes occasional omissions	Records appropriate patient notes but needs to be more succinct with the use of abbreviations and terminology	Records appropriate patient notes but occasionally needs to be more succinct	Demonstrates an ability to record clear and concise patient notes
Comments:						Communication Grade (%):
Clinical educator name: Signed and date:						Organisation: Grade (%):

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Assessment & Clinical Reasoning	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Information Retrieval (subjective questioning, patient notes, referral letters)	Demonstrates an inadequate ability to retrieve information	Needs guidance to retrieve information from all sources	Retrieves appropriate information but is inconsistent in their ability to utilise information	Retrieves information from all sources and is able to utilise it most of the time to support assessment	Retrieves information from all sources and is able to utilise it consistently to support assessment.	Retrieves information from all sources and is able to consistency utilise it to support assessment
Assessment procedures	Demonstrates an inadequate ability in the selection and use of assessment procedures	Demonstrates an adequate and safe ability in carrying out a basic assessment procedures	Demonstrates a good ability in carrying out a basic assessment procedures	Is able to carry out appropriate assessment procedures well and is usually able to justify procedures used	Is able to select and carry out appropriate assessment procedures most of the time and is able to justify procedures used	Is able to select and carry out appropriate assessment procedures all of the time and consistently justifies procedures used
Evaluation, interpretation and synthesis of assessment findings	Is unable to evaluate and interpret basic assessment findings	Has some difficulty in evaluating and interpreting assessment findings	Demonstrates a good ability to evaluate and interpret assessment findings some of the time	Demonstrates very good evaluation and interpretation of assessment findings most of the time	Demonstrates excellent evaluation and interpretation of assessment findings consistently well	Demonstrates excellent evaluation and interpretation of assessment findings beyond their level of study
Clinical reasoning skills	Demonstrates an inadequate level of clinical reasoning skills even with guidance	Demonstrates an adequate level of clinical reasoning skills in straightforward cases with guidance	Demonstrates good clinical reasoning skills in straightforward cases	Demonstrates very good clinical reasoning skills in straightforward cases	Demonstrates excellent clinical reasoning skills in straightforward cases	Demonstrates highly developed clinical reasoning skills consistently well in straightforward cases
Application of knowledge and findings to determine treatment aims	Demonstrates an inadequate level of understanding of relevant knowledge and is unable to determine treatment aims	Demonstrates an adequate level of understanding of relevant knowledge and needs support to determine treatment aims	Is able to apply information and determine treatment aims in straightforward cases with guidance	Is able to apply information and determine treatment aims in straightforward cases some of the time	Is able to apply information and determine treatment aims most of the time	Is able to apply information and determine treatment aims consistently well
Comments:						Grade (%):
Clinical educator name:						
Signed and date:						

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Treatment and Evaluation	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Selection and implementation of treatments	Demonstrates an inadequate ability in the selection and use of treatments which may compromise patient safety	Demonstrates an adequate and safe ability in selecting and carry out treatments with guidance	Is able to select and carry out appropriate treatments with guidance	Is able to select and carry out appropriate treatments and is usually able to justify choices	Is able to select and carry out appropriate treatments and is able to justify choices consistently	Is able to select and carry out appropriate treatments and is able to justify choices consistently with clinical rationale
Evaluation and analysis of management	Is unable to evaluate and justify treatment used, even with guidance	Has some difficulty in justifying the treatment and needs help to evaluate outcome measures	Demonstrates an ability to justify the treatment some of the time but needs guidance to evaluate outcome measures	Demonstrates an ability to justify the treatment and can evaluate outcome measures	Demonstrates an ability to justify the treatment and can evaluate appropriate outcome	Demonstrates an ability to justify the treatment and can evaluate appropriate outcome at a level beyond their level of study
Modification, progression and patient management	Is unable to reassess patients appropriately and fails to evaluate and modify treatment interventions	Makes a reasonable attempt at ongoing assessment but needs help to evaluate and modify treatment interventions	Is able to evaluate and modify treatment interventions with guidance	Is able to evaluate and modify treatment interventions linking them to assessment outcomes some of the time	Is able to evaluate and modify treatment interventions linking them to assessment outcomes most of the time	Is able to evaluate and modify treatment interventions consistently linking them to assessment outcomes

<p>Comments:</p> <p>Clinical educator name:</p> <p>Signed and date:</p>	<p>Grade (%):</p>
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Professional Values (20% weighting)	
Communication and interpersonal skills (20% weighting)	
Organisation and learning behaviour (20% weighting)	
Assessment and clinical reasoning (20% weighting)	
Treatment and evaluation (20% weighting)	
TOTAL PLACEMENT GRADE %	

Appendix G Level 5 Marking Criteria- Physiotherapy Placement

Professional Values are marked consistently across level 4, 5 and 6

Professional Values	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Adherence to policies & procedures	Demonstrates an inadequate awareness of policies and procedures	Demonstrates an awareness and follows basic policies and procedures with guidance	Demonstrates an awareness and follows basic policies and procedures	Demonstrates a good understanding and follows policies and procedures	Demonstrates an excellent understanding and follows all policies and procedures	Demonstrates an excellent understanding of the necessity for policies and procedures and consistently works well within them
Aware of the physical, psychological, social and cultural needs of individuals	Frequently lacks insight into patients individual needs and requires guidance and instruction	Aware of patient individual needs and demonstrates limited application to practice	Aware of patient needs and demonstrates good application to practice	Aware of patient needs and demonstrates consistent application to practice	Aware of patient needs and demonstrates excellent application to practice	Demonstrates insight to patient needs and is consistently sensitive patient needs and applies this knowledge to practise consistently
Responsibility for self-maintain standards of personal and professional conduct	Reluctant to take responsibility for self-development despite encouragement. Does not take initiative or recognise personal and professional limitations.	Reluctant to take responsibility without encouragement. Demonstrates inconsistent initiative and needs reminding of personal and professional limitations	Takes responsibility with encouragement. Demonstrates some initiative but occasionally needs reminding of personal and professional limitations	Accepts responsibility and copes well with it. Demonstrates some initiative but occasionally needs reminding of personal and professional limitations	Accepts responsibility and appears to thrive on it. Demonstrates initiative and recognises personal and professional limitations	Seeks out opportunities to take on responsibility. Demonstrates significant initiative and always recognises personal and professional limitations
Comments:						Grade (%):
Clinical educator name:						
Signed and date:						

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Communication & Interpersonal Skills	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Communication skills	Demonstrates inadequate verbal and non-verbal communication with patients, carers and colleagues leading to inadequate patient care	Demonstrates adequate verbal and non-verbal communication with patients, carers and colleagues	Demonstrates good verbal and non-verbal communication with patients, carers and colleagues with little prompting and guidance to modify communication style.	Demonstrates well developed verbal and non-verbal communication with patients, carers and colleagues with occasional prompting.	Demonstrates highly developed communication skills, able to lead professional conversations e.g. discuss patient at MDT meeting	Demonstrates highly developed communication skills, able to consistently take the lead in professional conversations
Interpersonal skills	Demonstrates inadequate interpersonal skills resulting in difficulties gaining patients confidence	Demonstrates adequate interpersonal skills but does not gain patients confidence initially	Demonstrates appropriate interpersonal skills gaining patients confidence some of the time	Demonstrates very good interpersonal skills, gaining patients confidence some of the time	Demonstrates highly developed interpersonal skills, gaining patients confidence most of the time	Demonstrates highly developed interpersonal skills, gaining patients confidence consistently
Organisation and Learning Behaviour						
Management of time and workload	Unable to manage time & caseload even with guidance	Frequently needs guidance with time and caseload management	Manages time and caseload with guidance	Manages time and caseload with facilitation	Manages time and caseload effectively in most situations	Manages time and caseload effectively
Self-preparation and approach to ongoing learning	Has a poor approach to learning and needs considerable direction	Has an inconsistent approach to learning and needs direction with ongoing learning	Has a consistent approach to learning but needs direction with ongoing learning	Has a consistent approach to learning and is able to work without direction	Has a positive, self-directed approach to learning and able to identify own needs	Is proactive in self-directed learning and able to identify learning needs and act accordingly.
Record keeping and documentation	An inadequate ability to record patient notes, poor use of language and have frequent omissions	Demonstrates an adequate ability to record patient notes which may lack conciseness and have frequent omissions	Records appropriate patient notes but lacks conciseness and makes occasional omissions	Records appropriate patient notes but needs to be more succinct with the use of abbreviations and terminology	Records appropriate patient notes accurately and succinctly	Demonstrates an ability to record clear and concise patient notes at all times
Comments:						Communication Grade (%):
Clinical educator name:						Organisation Grade (%):
Signed and date:						

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Assessment & Clinical Reasoning	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Information Retrieval (subjective questioning, patient notes, referral letters)	Demonstrates an inadequate ability to retrieve information	Needs guidance to retrieve information from all sources	Retrieves appropriate information but is inconsistent in their ability to utilise information	Retrieves information and is able to utilise it to support assessment	Retrieves information and is able to utilise it consistently to support assessment.	Asks insightful questions, retrieves information, and is able to consistency use it to support assessment
Assessment procedures	Demonstrates an inadequate ability in the selection and use of assessment procedures	Demonstrates an adequate and safe ability in carrying out a basic assessment procedures	Demonstrates a good ability in carrying out assessment procedures	Is able to carry out appropriate assessment procedures well and is usually able to justify procedures used	Is able to select and carry out appropriate assessment procedures and is able to justify procedures used	Is able to select and carry out appropriate assessment procedures and verbalises the rationale confidently
Evaluation, interpretation and synthesis of assessment findings	Is unable to evaluate and interpret basic assessment findings	Has some difficulty in evaluating and interpreting assessment findings	Demonstrates a good ability to evaluate and interpret assessment findings some of the time	Demonstrates very good evaluation and interpretation of assessment findings most of the time	Demonstrates excellent evaluation and interpretation of assessment findings consistently well	Demonstrates excellent evaluation and interpretation of assessment findings beyond level of study
Clinical reasoning skills	Demonstrates an inadequate level of clinical reasoning skills even with guidance	Demonstrates an adequate level of clinical reasoning skills in straightforward cases with guidance	Demonstrates good clinical reasoning skills in straightforward cases	Demonstrates very good clinical reasoning skills in straightforward cases	Demonstrates excellent clinical reasoning skills in all cases	Demonstrates highly developed clinical reasoning skills in all cases
Application of knowledge and findings to determine treatment aims	Demonstrates an inadequate level of understanding of relevant knowledge and is unable to determine treatment aims	Demonstrates an adequate level of understanding of relevant knowledge and needs support to determine treatment aims	Is able to apply information and determine treatment aims in straightforward cases with guidance	Is able to apply information and determine treatment aims in straightforward cases some of the time	Is able to apply information and determine treatment aims most of the time	Is able to apply information and determine treatment aims consistently well
Comments:						Grade (%):
Clinical educator name:						
Signed and date:						

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Treatment and Evaluation	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Selection and implementation of treatments	Demonstrates an inadequate ability in the selection and use of treatments which may compromise patient safety	Demonstrates an adequate and safe ability in selecting and carry out treatments with guidance	Is able to select and carry out appropriate treatments with guidance	Is able to select and carry out appropriate treatments and is usually able to justify choices	Is able to select and carry out appropriate treatments and is able to justify choices consistently	Is able to select and carry out appropriate treatments and is able to justify choices consistently with clinical rationale
Evaluation and analysis of management	Is unable to evaluate and justify treatment used, even with guidance	Has some difficulty in justifying the treatment and needs help to evaluate outcome measures	Demonstrates an ability to justify the treatment some of the time but needs guidance to evaluate outcome measures	Demonstrates an ability to justify the treatment and can sometimes evaluate outcome measures	Demonstrates an ability to justify the treatment and can evaluate appropriate outcome	Demonstrates an ability to justify the treatment and can evaluate appropriate outcome consistently
Modification, progression and patient management	Is unable to reassess patients appropriately and fails to evaluate and modify treatment interventions	Makes a reasonable attempt at ongoing assessment but needs help to evaluate and modify treatment interventions	Is able to evaluate and modify treatment interventions with guidance	Is able to evaluate and modify treatment interventions linking them to assessment outcomes some of the time	Is able to evaluate and modify treatment interventions linking them to assessment outcomes all of the time	Is able to evaluate and modify treatment interventions consistently linking them to assessment outcomes
Comments: Clinical educator name: Signed and date:						Grade (%):

Professional Values (20% weighting)	
Communication and interpersonal skills (20% weighting)	
Organisation and learning behaviour (20% weighting)	
Assessment and clinical reasoning (20% weighting)	
Treatment and evaluation (20% weighting)	
TOTAL PLACEMENT GRADE %	

Appendix G Level 6 Marking Criteria- Physiotherapy Placement

Professional Values are marked consistently across level 4, 5 and 6

Professional Values	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Adherence to policies & procedures	Demonstrates an inadequate awareness of policies and procedures	Demonstrates an awareness and follows basic policies and procedures with guidance	Demonstrates an awareness and follows basic policies and procedures	Demonstrates a good understanding and follows policies and procedures	Demonstrates an excellent understanding and follows all policies and procedures	Demonstrates an excellent understanding of the necessity for policies and procedures and consistently works well within them
Aware of the physical, psychological, social and cultural needs of individuals	Frequently lacks insight into patients individual needs and requires guidance and instruction	Aware of patient individual needs and demonstrates limited application to practice	Aware of patient needs and demonstrates good application to practice	Aware of patient needs and demonstrates consistent application to practice	Aware of patient needs and demonstrates excellent application to practice	Demonstrates insight to patient needs and is consistently sensitive patient needs and applies this knowledge to practise consistently
Responsibility for self-maintain standards of personal and professional conduct	Reluctant to take responsibility for self-development despite encouragement. Does not take initiative or recognise personal and professional limitations.	Reluctant to take responsibility without encouragement. Demonstrates inconsistent initiative and needs reminding of personal and professional limitations	Takes responsibility with encouragement. Demonstrates some initiative but occasionally needs reminding of personal and professional limitations	Accepts responsibility and copes well with it. Demonstrates some initiative but occasionally needs reminding of personal and professional limitations	Accepts responsibility and appears to thrive on it. Demonstrates initiative and recognises personal and professional limitations	Seeks out opportunities to take on responsibility. Demonstrates significant initiative and always recognises personal and professional limitations
Comments:						Grade (%):
Clinical educator name:						
Signed and date:						

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Communication & Interpersonal Skills	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Communication skills	Demonstrates inadequate communication skills with patients, carers and colleagues leading to inadequate patient care	Demonstrates adequate verbal and non-verbal communication with patients, carers and colleagues	Demonstrates good verbal and non-verbal communication with patients, carers and colleagues with little prompting and guidance to modify communication style.	Well-developed communication skills and with encouragement can lead professional conversations	Demonstrates highly developed communication skills, confident to lead professional conversations e.g. discuss patient at MDT meeting	Demonstrates highly developed communication skills, able to consistently and confidently take the lead in professional conversations.
Interpersonal skills	Demonstrates inadequate interpersonal skills resulting in difficulties gaining patients confidence	Demonstrates adequate interpersonal skills but does not gain patients confidence initially	Demonstrates appropriate interpersonal skills gaining patients confidence some of the time	Demonstrates very good interpersonal skills, gaining patients confidence some of the time	Demonstrates highly developed interpersonal skills, gaining patients confidence most of the time	Demonstrates highly developed interpersonal skills, gaining patients confidence consistently
Organisation and Learning Behaviour						
Management of time and workload	Unable to manage time & caseload even with guidance. Not able to prioritise patient treatment needs.	Adequate time and caseload management. Requires support and guidance to prioritise treatment.	Good time and caseload management. Requires support on prioritisation of treatment	Very good time and caseload management. Able to prioritise treatment according to patient need	Manages time and caseload effectively. Excellent skills in prioritising treatment.	Manages time, caseload and prioritisation of treatment consistently and independently.
Self-preparation and approach to ongoing learning	Has a poor approach to learning and needs considerable direction	Has an inconsistent approach to learning and needs direction with ongoing learning	Has a consistent approach to learning	Has a consistent approach to learning and is able to work without direction	Has a positive, self-directed approach to learning and acts consistently without direction	Is proactive in self-directed learning and able to identify learning needs and act accordingly.
Record keeping and documentation	An inadequate ability to record patient notes, poor use of language and have frequent omissions	Demonstrates an adequate ability to record patient notes. Better use of abbreviations needed	Records appropriate patient notes with the use of abbreviations and terminology	Records appropriate patient notes accurately and succinctly	Keeps excellent patients records which are accurate and succinct	Demonstrates outstanding ability to record clear and concise patient notes at all times
Comments: Clinical educator name: Signed and date:						Communication Grade (%): Organisation: Grade (%):

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Assessment & Clinical Reasoning	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Information Retrieval (subjective questioning, patient notes, referral letters)	Demonstrates an inadequate ability to retrieve information	Needs guidance to retrieve information from all sources	Retrieves appropriate information but is inconsistent in their ability to utilise information	Retrieves information and is able to utilise it to support assessment	Retrieves information and is able to utilise it consistently to support assessment.	Asks insightful questions, retrieves information, and is able to consistency use it to support assessment
Assessment procedures	Demonstrates an inadequate ability in the selection and use of assessment procedures	Demonstrates an adequate and safe ability in carrying out a basic assessment procedures	Demonstrates a good ability in carrying out assessment procedures	Is able to carry out appropriate assessment procedures well and justify choice	Is able to select and carry out advanced assessment procedures and justify choice	Is able to select and carry out advanced assessment and verbalises the rationale confidently
Evaluation, interpretation and synthesis of assessment findings	Is unable to evaluate and interpret basic assessment findings	Has some difficulty in evaluating and interpreting assessment findings	Demonstrates a good ability to evaluate and interpret assessment findings some of the time	Demonstrates very good evaluation and interpretation of assessment findings most of the time	Demonstrates excellent evaluation and interpretation of assessment findings to a high standard	Demonstrates excellent evaluation and interpretation of assessment findings beyond level of study
Clinical reasoning skills	Demonstrates an inadequate level of clinical reasoning skills even with guidance	Demonstrates an adequate level of clinical reasoning skills in straightforward cases	Demonstrates good clinical reasoning skills in all cases	Demonstrates very good clinical reasoning skills in all cases	Demonstrates excellent clinical reasoning skills in all cases	Demonstrates highly developed clinical reasoning skills in complex cases
Application of knowledge and findings to determine treatment aims	Demonstrates an inadequate level of understanding of relevant knowledge and is unable to determine treatment aims	Demonstrates an adequate level of understanding of relevant knowledge and needs support to determine treatment aims	Is able to apply information and determine treatment aims in straightforward cases with guidance	Is able to apply information and determine treatment aims in straightforward cases some of the time	Is able to apply information and determine treatment aims	Is able to apply information and determine treatment aims to a high standard
Comments:						Grade (%):
Clinical educator name:						
Signed and date:						

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Treatment and Evaluation	1-39%	40-49%	50-59%	60-69%	70-79%	80%+
Selection and implementation of treatments	Demonstrates an inadequate ability in the selection and use of treatments which may compromise patient safety	Demonstrates an adequate and safe ability in selecting and carry out treatments with guidance	Is able to select and carry out appropriate treatments with guidance	Is able to select and carry out appropriate treatments and is usually able to justify choices	Is able to select and carry out treatment and is able to provide a clinical rationale	Is able to select and carry out treatment and justify choices consistently with detailed clinical rationale
Evaluation and analysis of management	Is unable to evaluate and justify treatment used, even with guidance	Has some difficulty in justifying the treatment and needs help to evaluate outcome measures	Demonstrates an ability to justify the treatment some of the time but needs guidance to evaluate outcome measures	Demonstrates an ability to justify the treatment and can evaluate outcome measures	Demonstrates an ability to justify the treatment and can evaluate appropriate outcomes consistently	Demonstrates high quality analysis of treatment and can evaluate appropriate outcome consistently
Modification, progression and patient management	Is unable to reassess patients appropriately and fails to evaluate and modify treatment interventions	Makes a reasonable attempt at ongoing assessment but needs help to evaluate and modify treatment interventions	Is able to evaluate and modify treatment interventions with guidance	Is able to evaluate and modify treatment interventions linking them to assessment outcomes some of the time	Is able to evaluate and modify treatment interventions linking them to assessment outcomes all of the time	Is able to evaluate and modify treatment interventions in accordance with outcomes and progress treatment
Comments: Clinical educator name: Signed and date:						Grade (%):

Professional Values (20% weighting)	
Communication and interpersonal skills (20% weighting)	
Organisation and learning behaviour (20% weighting)	
Assessment and clinical reasoning (20% weighting)	
Treatment and evaluation (20% weighting)	
TOTAL PLACEMENT GRADE %	

Appendix H- Placement Assessment Mapping

Mapping to HCPC Standards of Proficiency and CSP Physiotherapy Framework

	HCPC (2103) Standards of Proficiency- Physiotherapy	CSP (2011) Physiotherapy Framework Domains
1	Be able to practise safely and effectively within their scope of practice	Physiotherapy values
2	Be able to practise within the legal and ethical boundaries of their profession	Knowledge & understanding of physiotherapy
3	Be able to maintain fitness to practise	Political awareness
4	Be able to practise as an autonomous professional, exercising their own professional judgement	Self-awareness
5	Be aware of the impact of culture, equality, and diversity on practice	Physiotherapy practice skills
6	Be able to practise in a non-discriminatory manner	Communicating
7	Understand the importance of and be able to maintain confidentiality	Helping others learn & develop
8	Be able to communicate effectively	Managing self & others
9	Be able to work appropriately with others	Promoting integration & teamwork
10	Be able to maintain records appropriately	Putting the person at the centre of practice
11	Be able to reflect on and review practice	Respecting & promoting diversity
12	Be able to assure the quality of their practice	Ensuring quality
13	Understand the key concepts of the knowledge base	Improving & developing services
14	Be able to draw on appropriate knowledge and skills to inform practice	Lifelong learning
15	Understand the need to establish and maintain a safe practice environment	Practice decision making
16		Researching & evaluating practice
17		Using evidence to lead practice

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University of Gloucestershire Placement Marking Criteria	Mapping to Physiotherapy SOPS	Mapping to Physiotherapy Framework
Professional Values		
Adherence to policies & procedures	1, 2, 3, , 10, 12	2, 3, 8
Aware of the physical, psychological, social and cultural needs of individuals	2, 5, 6, 9	8, 10, 11
Responsibility for self- Maintain standards of personal and professional conduct	1, 2, 3, 4, 6, 7, 9, 10, 13, 15	1, 3, 4, 6, 8, 10, 11
Communication & Interpersonal Skills		
Communication skills	8, 9	6, 9, 11
Interpersonal skills	8, 9	6, 9, 11
Organisation and Learning Behaviour		
Management of time and workload	1, 4	4, 8
Self-preparation and approach to ongoing learning	1, 3, 4, 11, 12, 13, 14, 15	2, 4, , 7, 12, 13, 14, 16
Record keeping and documentation	7, 10	5, 8, 12
Assessment & Clinical Reasoning		
Information Retrieval (subjective questioning, patient notes, referral letters)	1, 4, 8, 12, 14, 15	1, 2, 4, 5, 8, 10, 12, 14, 15
Assessment procedures	1, 4, 14, 15	1, 2, 4, 5, 8, 10, 12, 14, 15
Evaluation, interpretation and synthesis of assessment findings	1, 4, 12, 14, 15	1, 2, 4, 5, 8, 10, 12, 14, 15
Clinical reasoning skills	1, 4, 12, 14, 15	1, 2, 4, 5, 8, 10, 12, 14, 15
Application of knowledge and findings to determine treatment aims	1, 4, 12, 14, 15	1, 2, 4, 5, 8, 10, 12, 14, 15
Treatment and Evaluation		
Selection and implementation of treatments	1, 4, 12, 14, 15	1, 2, 4, 5, 8, 10, 12, 14, 15
Evaluation and analysis of management	1, 4, 12, 14, 15	1, 2, 4, 5, 8, 10, 12, 14, 15, 16, 17
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