Coventry University Faculty of Health & Life Sciences

BSc (Hons) Physiotherapy

Professional Practice Assessment Form YEAR 3 – Engaging in Quality Practice (336PH)

| Name | |
|--|---|
| Module Number : | |
| Dates of Placement : From | to |
| Hospital | |
| Unit | |
| Dates of Absence from | to |
| Total Days Absence | Extra Days Worked |
| | |
| Visiting Tutor | |
| Practice Educator(Block Capitals Please) | |
| This document is CONFIDENTIAL to the na and the appropriate Faculty staff. | med student, the assessing Practice Educator |
| | identification of strengths and areas for improvement. use of the comments column to act as a valuable |
| NB: Unsatisfactory performance in either Safety, Effectiveness and Evaluation or Professionalism will constitute failure which should be reflected in the overall performance mark | Overall Performance Mark Clinical Reasoning Assessment |

of less than 35%.

SECTION I – Health and Safety Guidelines

COVENTRY UNIVERSITY FACULTY OF HEALTH AND LIFE SCIENCES

STUDENT INDUCTION CHECKLIST

| ACEMENT | |
|--|------------------|
| | |
| e following items should be included in your induction into the organisation, preferably on your fire the items below when they occur and inform your placement organiser of any items not covered start of your placement. This list is not exhaustive and other topics may be covered, which you | ed within one we |
| ease show this form to your University Visiting Tutor so that they have seen this form an y health and safety problems. | id do not forese |
| TASK | Date |
| Introduced to key staff members and their roles explained | |
| Location of toilet facilities | |
| Location of rest room, canteen (if relevant) etc. | |
| Lunch, tea and coffee arrangements | |
| Place of work | |
| Dress code | |
| Work space | |
| How to answer the telephone, transfer calls and make calls both internally and externally | |
| Post arrangements | |
| Car parking | |
| HEALTH & SAFETY ISSUES | Date |
| Emergency procedures | |
| Safety policy received or location known | |
| Location of First Aid box | |
| First Aid arrangements (including names of first aiders) | |
| Fire procedures and location of fire extinguishers | |
| Accident reporting and location of accident book | |
| COSHH regulations | |
| Display Screen Equipment regulations/procedures | |
| Manual handling procedures | |
| Protective clothing arrangements | |
| Instruction on equipment participant will be using (list equipment): The Equality Act | |
| . , | |
| Safeguarding The Whistle Blowing Policy | |
| The Whistie Blowing Folicy | |
| E-marketing of plantage | |
| Expectations of placement | |
| Likely pattern of feedback | |
| Learning styles Expectations of placement | |
| Expectations of placement | |
| | |
| gned Student | |
| A NATA ANNA A H | |
| ned Practice Educator | |

SECTION I – Personal Learning Outcomes

| PERSONAL LEARNING OUTCOMES | | | | | | | |
|----------------------------|--------------------|--|--|--|--|--|--|
| Agreed learning outcomes | How to be achieved | Outcomes achieved (including comments) | | | | | |
| 1 | | 1 | | | | | |
| 2 | | 2 | | | | | |
| 3 | | 3 | | | | | |
| 4 | | 4 | | | | | |
| 5 | | 5 | | | | | |
| | | | | | | | |

Signed: Clinical Tutor

Visiting Tutor

Date

| PERFORMANCE CRITERIA | Fail | Pass | Good | Very Good | Excellent |
|--|---|---|--|---|---|
| PROFESSIONALISM Observes confidentiality and ensures informed consent has been obtained. Behaves in a professional manner and role models professional behaviours. Is accountable for own professional and personal scope of practice. Effectively collaborates with clients, carers and other members of the healthcare team in promoting client benefit and team functioning. Assumes responsibility for all aspects of physiotherapy delivery demonstrating enthusiasm, initiative, reliability and adaptability. Recognises own scope of practice and consults appropriately. Professional presentation i.e. appropriate clean uniform and appearance. | Has breached confidentiality and/or not obtained consent Despite feedback and support has shown limited ability to behave in a professional manner. Demonstrates limited ability to recognise own professional and personal scope of practice. Fails or shows limited ability to effectively collaborate with clients, carers and other members of the health care team in promoting clients' benefits. Fails to assume responsibility for all aspects of physiotherapy delivery of care including appropriate consultation. Episodes of unprofessional conduct should be documented. | Has observed confidentiality and obtained consent Has demonstrated an acceptable standard in all aspects of professionalism, may have required some guidance. May require prompting to recognise own ability to work within scope of practice or to effectively collaborate with clients, cares and other members of the health care team. Assumes responsibility in all aspects of physiotherapy delivery but occasionally demonstrates difficulty to show initiative or adaptability. Seeks advice when necessary may need some prompting. | Has observed confidentiality and obtained consent Has demonstrated consistent standards of professionalism. Demonstrates ability to work in own scope of practice and demonstrates the ability to collaborate with clients, carers and other team members promoting client benefit. Willing to assume responsibility for all aspects of physiotherapy delivery and is able to recognise own scope of practice. Seeks advice appropriately and able to act on it. | Has observed confidentiality and obtained consent Has maintained and adhered to professional standards in a variety of challenging situations. Clearly demonstrates an ability to work within own scope of practice. Clear ability to collaborate with clients, carers and other members of the healthcare team. Accepts responsibility readily for all aspects of physiotherapy delivery. Readily and appropriately consults others and clearly acts on advice. | Has observed confidentiality and obtained consent Has consistently maintained professional standards throughout the placement even in demanding situations. Demonstrates consistent ability to work independently within own scope of practice and with clients, carers and other members of the healthcare team. Accepts responsibility for all aspects of physiotherapy delivery in a variety of situations. Proactively consults others and shows ability to act and change own practice. |

| Professionalism Assessment Please document Professional warnings on page 17 of Assessment Form. Halfway: PASS/ FAIL Educator comments | | | Final: | | |
|--|-----------------------------------|-------------|--------|-----------|------------------------------|
| FAIL | PASS | GO | OD | VERY GOOD | EXCELLENT |
| Presentation and Pun Professional presentation i.e. ap Halfway: PASS/ FAIL E | ppropriate clean uniform and neat | appearance. | Final: | | |
| | | | | | Pass / Fail Please circle |

| PERFORMANCE CRITERIA | Fail | Pass | Good | Very Good | Excellent |
|---|--|--|--|---|---|
| KNOWLEDGE AND UNDERSTANDING Critically integrates knowledge and a diversity of current evidence to select and justify appropriate decision making in partnership with the client. | Despite feedback and support, limited ability to critically integrate a diversity of current evidence to select and justify appropriate decision making in partnership with the client. | Satisfactory ability to critically integrate a diversity of current evidence to select and justify appropriate decision making in partnership with the client. | Good ability to critically integrate a diversity of current evidence to select and justify appropriate decision making in partnership with the client. | Very good ability to critically integrate a diversity of current evidence to select and justify appropriate decision making in partnership with the client. | Excellent and consistent ability to critically integrate a diversity of current evidence to select and justify appropriate decision making in partnership with the client. |
| EFFECTIVENESS AND EVALUATION Selecting and modifying professional skills of assessment, treatment and management strategies in partnership with the client. Ensures decisions made with the client are evidence informed. Using appropriate and relevant outcomes of physiotherapy. Appropriately evaluates client and service outcomes. | Despite feedback and support, limited demonstration of ability to select and modify professional skills, in partnership with the client; interventions ineffective. Fails to select appropriate evidence and outcome measures despite guidance and support; ineffective evaluation. | Able to select and modify professional skills in partnership with the client but requires support and guidance to do so. Able to select appropriate evidence and outcome measures and evaluate client and service outcomes with guidance and support. | Able to select and modify professional skills in partnership with the client, may require guidance in non- routine situations. Able to select appropriate evidence and outcome measures and evaluate client and service outcomes with occasional support. | Able to effectively select and modify professional skills in partnership with the client. Able to independently select appropriate evidence and outcome measures and evaluate client and service outcomes. | Consistently demonstrates the ability to effectively and independently select and modify professional skills, in partnership with the client. Able to independently select appropriate evidence and outcome measures and evaluate client and service outcomes. |

| Knowledge and Understanding Assessment Halfway: PASS/FAIL Educator comments | | Final: | | | |
|--|------|--------|----|-----------|-----------|
| FAIL | PASS | GO | OD | VERY GOOD | EXCELLENT |
| Effectiveness and Evaluation Assessment Halfway: PASS/FAIL Educator comments | | Final: | | | |
| FAIL | PASS | GO | OD | VERY GOOD | EXCELLENT |

| PERFORMANCE CRITERIA | Fail | Pass | Good | Very Good | Excellent |
|------------------------------|-------------------------------|--------------------------------|----------------------------|------------------------------|--------------------------|
| PRACTICE SKILL | Despite feedback and | Able to select and apply | Has a range of safe | Demonstrates well | Consistently |
| | support limited or | practice skills reflecting | and appropriate | developed safe and | demonstrates well |
| Provides safe and effective | inconsistent ability to | autonomous decision | practice skills | effective practice skills, | developed safe and |
| client care that reflects | select or apply safe & | making in routine | providing safe and | reflecting autonomous | effective practice |
| autonomous decision | effective practice skills in | situations but requires | effective client centred | client centred practice. | skills, reflecting |
| making in collaboration | routine situations. | guidance to do so. | care. May require | - | autonomous client |
| with the client. | Demonstrates unsafe or | Demonstrates safe and | some support with | | centred practice |
| Demonstrates integration | unacceptable skill. | acceptable skills. | autonomous decision | | throughout the |
| of transferable skills from | | | making. | | placement. |
| previous experiences | Limited ability or unable | Able to integrate or adapt | _ | Integrating transferable | |
| including resource | to progress or adapt | transferable skills from | Able to work | skills and adapting them | |
| allocation, ethical decision | transferable skills from | previous experience with | autonomously in | well in routine and non- | |
| making, risk and quality | previous experience. | support and guidance. | routine situations | routine situations. | Integrating |
| assessment. | | | integrating transferable | | transferable skills and |
| Demonstrates awareness | Limited awareness of | Demonstrates awareness | skills but may require | | adapting them well |
| of own positioning and | positioning of client and | of positioning of client and | support in non-routine | | even in challenging |
| client comfort. | self. | self. | situations. | | and varying situations. |
| LEARNING | Minimal or inadequate | Evidence of preparation | Evidence of good | Evidence of very good | Evidence of excellent |
| | evidence of preparation. | and able to take | preparation and readily | preparation and ability to | preparation and ability |
| Self-preparation, taking | Unable to take | responsibility for own | takes responsibility for | take responsibility for own | to take responsibility |
| responsibility for own | responsibility for own | learning needs and to | own learning needs | learning needs and also to | for own learning |
| learning needs and | learning needs and | identify areas for future | and identify areas for | identify area for future | needs and also to |
| identifying areas for future | identify areas for future | development. | future development. | development. | identify area for future |
| development. | development. | | | Critically reflects to alter | development. |
| | | Able to critically reflect but | | own performance with | |
| Critically reflects on own | Despite feedback and | requires guidance and | Able to critically reflect | minimal support. | Demonstrates critical |
| performance, identifies | support unable or | support to identify | and may require some | Clearly able to identify | reflection to alter own |
| own learning needs and | demonstrates limited | learning needs to develop | support to identify | learning needs to develop | performance. |
| takes appropriate action. | ability to critically reflect | own performance. | learning needs | own performance. | Able to independently |
| | on performance in order | | develop performance. | elop performance. | |
| Accepts feedback & | to identify learning needs | Accepts feedback but | | Has improved performance | needs for self- |
| initiates appropriate | or develop own | requires support to adapt | Accepts feedback but | independently following | development. |
| action. | performance. | performance. | requires guidance to | feedback. | |
| | | | adapt performance. | Accepts feedback readily | Has improved |
| | Unable to accept | | - | but requires occasional | performance |
| | feedback/advice and/or | | | support to adapt | independently |
| | fails to act upon it. | | | performance. | - |

| Practice Skill Assessment Halfway: PASS/ FAIL Educator comments | | | Final: | | |
|---|------|--------|--------|-----------|-----------|
| FAIL | PASS | GO | OD | VERY GOOD | EXCELLENT |
| | | Final: | | | |
| FAIL | PASS | GO | OD | VERY GOOD | EXCELLENT |

| PERFORMANCE CRITERIA | Fail | Pass | Good | Very Good | Excellent |
|---|--|--|--|--|---|
| VERBAL- Communicates professionally, ethically and effectively in establishing a therapeutic relationship with clients and caregivers by sharing information and resources, encouraging and responding to questions, and justifying clinical recommendations. Demonstrates sensitivity in relation to unique client and caregiver circumstances taking into account the cultural, psychosocial, emotional or physical factors. Communicates with other disciplines and stakeholders respectfully, constructively and effectively. Contributes to | Despite feedback and support limited or inconsistent ability to communicate appropriately with some or all parties. Despite feedback and support limited or inconsistent ability to establish therapeutic relationships with clients, carers or communicate effectively with members of the team. Unable to respond to the individual needs of clients, e.g. may lack sensitivity to cultural or psychosocial aspects. | Demonstrates professional and effective communication with all parties but may need guidance to do this. Able to establish appropriate therapeutic relationships with clients and carers in routine contexts. Requires support in more complex situations. Evidence of awareness and sensitivity to respond holistically to individual needs of client with scope for improvement. | Demonstrates professional and effective communication with all parties in routine contexts. Able to establish appropriate therapeutic relationships with clients and carers in most contexts. May requires guidance in more complex situations. Evidence of good awareness and sensitivity to respond holistically and to adjust communication to individual client needs in most cases. | Demonstrates professional and effective communication, able to do this in more complex situations with some guidance. Can readily establish therapeutic relationships and only requires occasional guidance. Evidence of very good awareness and sensitivity to respond holistically and to adjust communication to individual client needs in most cases. | Demonstrates professional and effective communication even in more complex situations. Consistently establishes therapeutic relationships throughout the placement. Excellent holistic communication meeting the needs of clients throughout the placement. |
| WRITTEN communication is appropriate for the specific area of practice and meets professional and legal requirements. Documentation is logical, accurate, clear and concise providing clear evidence of clinical reasoning throughout. | Despite feedback and support limited or inconsistent ability to meet professional and legal requirements of specific practice placement. Despite feedback documentation is inaccurate, lacks logical order and clarity. Support required to document clinical reasoning. | Meets professional and legal standards and is appropriate to area of practice. Possible minor inaccuracies and omissions requiring support. Some guidance required to improve clarity and/or adequate evidence of clinical reasoning. | Meets professional and legal standards appropriate to practice area. Usually demonstrates order and clarity with occasional minor omission, may require occasional support to be concise. Evidence of clinical reasoning. | Meets professional and legal standards appropriate to practice area. Written communication comprehensive, accurate, concise, easy to read. Clinical reasoning evident and logical throughout documentation. | Meets professional and legal standards appropriate to practice area. Communication consistently comprehensive, accurate, concise, easy to read. Clinical reasoning clearly evident and logical throughout documentation. |

| Verbal Communication Assessment Halfway: PASS/ FAIL Educator comments | | Final: | | | |
|--|------|--------|----|-----------|-----------|
| FAIL | PASS | GO | OD | VERY GOOD | EXCELLENT |
| Written Communication Assessment Halfway: PASS/ FAIL Educator comments | | Final: | | | |
| FAIL | PASS | GO | OD | VERY GOOD | EXCELLENT |

| PERFORMANCE CRITERIA | Fail | | Pass | Good | | Very Good | Excellent |
|--|---|---|--|-----------------------|---|---|---|
| SELF-MANAGEMENT Performs as an autonomous practitioner in terms of managing caseload efficiently, effectively delegating to others and utilizing appropriate resources. Demonstrates ability to integrate knowledge and skills to contribute to the function of the team/service | Despite feed support limite inconsistent a manage an a caseload efficieffectively. Hunacceptably found difficult delegating with Has limited a utilise time at resources avides found in knowledge at contribute the unit difficult, adapt to local work. | ed or ability to appropriate ciently and das worked v slowly or ty in ork. ability to ad/or ailable. tegration of and skills to e team/ unable to | support to manage an appropriate caseload in routine efficiently and effectively. Has worked at an acceptable pace in routine situations. Planned own workload and delegation with some assistance. Utilised team members and resources with prompting. Has integrated into Unit and caseload in routine may required to the may required to the may required to the caseload in routine may required to the caseload in routine may required to the may required to the caseload in routine may required to the caseload delegation assistance. | | on with minimal oce. Has made e of all es. egrated well into I made good tion to the of the | Very good pace of work and caseload management, able to be flexible and adapt to all situations. Has planned own caseload and delegation. Has actively maximised use of all resources. Quickly integrated into Unit making a very good contribution to the function of the team/service | Consistent demonstration of excellent pace of work and caseload management able to be flexible and adapt in all situations. Has independently planned own workload and delegation. Has actively maximised use of all resources. Proactively integrated into Unit making an excellent contribution to the function of the team/service |
| Observing general safety precautions and infection control policies at all times in client handling and use of equipment in diverse environments. Awareness of contraindications. Awareness of personal safety. Negligent Reckless Careless Wilful Deceitful Lack of aw Lack of her Lack of her Inability to Unfamiliarity Acting outs Overconfid | | ed to warnings and washing apply reasoning to practice ty with rules of professional co side of scope of practice | | Please docum Form. | ent Safety Warnings on p | page 17 of Assessment | |

| Self-Management Asse Halfway: PASS/FAIL Edu | | Final: | | |
|--|-----------------|--------|-----------|---------------|
| FAIL | PASS | GOOD | VERY GOOD | EXCELLENT |
| Safety Assessment Halfway: PASS/FAIL Edu | icator comments | Final: | • | Pass/Fail |
| | | | | Please circle |

Marks must be allocated within the

following categories:

- a. Excellent (First) 72, 75, 78, 82, 85, 88, 90, 95, 100 b. Very Good (Upper Second) 62, 65, 68 c. Good (Lower Second) 52, 55, 58

- d. Pass (Third) 42, 45, 48
- e. Fail 0, 10, 20, 30, 35

| Overall Performance Mark | |
|--------------------------|--|
| P.E signed | |
| Date | |
| Student signed | |

SECTION III – Halfway Development Needs and Action Plan

| DEVELOPMENT NEEDS IDENTIFIED AND ACTION PLAN AS A RESULT OF HALFWAY DISCUSSION | | | |
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| | | | |
| | | | |
| Practice Educator's Signature | Date | | |
| Student's Signature | Date | | |

SECTION IV – Clinical Reasoning Viva – Poster formative review

336PH Engaging in Quality Practice: Guidance for Formative Feedback

| Relevance & Argument | Does the chosen outcome measure relate to the current placement? Does the use of the measure have value for, or influence on, the quality of service? Is the measure appropriate to the target population? Is the measure justified and supporting evidence explored and made apparent in the appropriate line of argument? Comments: |
|----------------------------|--|
| Visual impact | Will the poster make the intended audience 'stop', 'look' and 'read' and engage with the content? Can the poster be read from a distance of 2 metres (font size / style)? Is there a balance of text to graphical representations (tables or charts etc.) appropriate for the content? Are the text and graphics clearly related where necessary? Is there a key message that can be identified? Comments: |
| Structure | Is the poster organised with a flow of the ideas- can viewer move through poster logically? Is the poster easy to understand? Does it use appropriate language for the intended audience? Is there appropriate visual emphasis made (by font size, colour or bold) and are the key points, references easily identifiable? Is there a clear focussed conclusion drawn? Comments: |

CLINICAL REASONING – Poster Presentation – Formative Feedback

Learning outcomes – Poster Presentation

- Demonstrate the ability to critically utilise a diversity of evidence in decision-making in the 1. context of client centred care
- Articulate the role of physiotherapy in quality health and social care delivery in a wider 2. context
- 3. Demonstrate their development as life-long learners and their ability to engage in

| continuing professional development | | |
|-------------------------------------|------|--|
| Areas of Strength | | |
| | | |
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| | | |
| Areas for Improvement | | |
| | | |
| | | |
| | | |
| | | |
| General Comments | | |
| | | |
| | | |
| | | |
| | | |
| Assessors: | | |
| Signed | Date | |
| Signed | Date | |
| Signed (Student) | | |

SECTION V – Feedback, Progression and Safety Warnings

| COMMENTS - | PRACTICE | E EDUCAT | OR |
|------------|----------|----------|----|
|------------|----------|----------|----|

| (Including comments gleaned from colleagues and other members of the such as organisation, social interaction with colleagues, sense of humo | |
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| | |
| Signed Date | |
| STUDENT'S EVALUATION OF PLACEMENT | |
| Students must record their own evaluation of this placement. This form Only completed forms should be submitted to the Assignment Handling | n is NOT COMPLETE until this has been done g Office. |
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| | |
| What aspects/ objectives do you want to / need to develop in your | next practice experience? |
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| | |
| | |
| Signed Date | |
| Seen by Educator (Educator's signature) | |
| Coon by Educator (Educator o orginature) | |

| COMMENTS – VISITING TUTOR (This section is not mandatory) | |
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| PROFESSIONAL AND SAFETY WARNINGS (Both Educator and student should sign and date after lescription of the incident. Any completed Student Incident Report Form should be attached to the locument). | a is |
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P.T.O.

PLEASE ATTACH TO ASSESSMENT FORM:

- 1. Clinical Reasoning Poster Plan (signed by the student). This enables planning of the Conference Day.
- 2. Any Student Incident Report Forms

Please Return to:

Assignment Handling Office
Richard Crossman Building
Coventry University
Faculty of Health & Life Sciences
Priory Street
Coventry
CV1 5FB

The Practice Educator should email the mark given for Performance and Clinical Reasoning Viva to: physioplacement.hls@coventry.ac.uk