



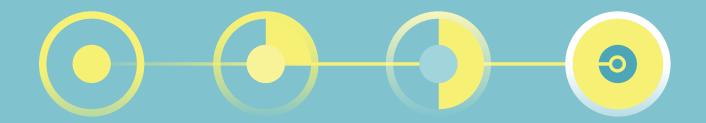
# Introduction

This guidance document is designed to support the practice team in completing the Common Placement Assessment Form (CPAF). It is written to both detail the processes required to assess learners on placement but also, and very importantly, to support your role in facilitating each individual students journey of learning and development in your setting.

The guidance is divided into the different sections of CPAF, focusing on the Learning Agreement, Professional Behaviours and Responsibilities, Learning Domains and Feedback from others. Although they can be read independently, we recommend spending time familiarising yourself with the whole document, coming back to individual sections for specific examples and explanations as and when needed.



# Completion Timeline



#### Pre

- placement

Learner

# Learner prepares learning agreement

Factors that may impact on learning, SWOC analysis and consider personal development plan

### Start

of placement

Practice Educator & Learner

## Placement details page

Learner

## Learning agreement

Complete learning agreement following discussion and agreement with practice educator

### Half way

Practice Educator & Learner

### Halfway assessment

- 1. Professional Behaviours and Responsibilities
- 2. Learning Domains

Review Learning
Agreement

### End

of placement

Practice Educator & Learner

### End of placement assessment

- 1. Professional Behaviours and Responsibilities
- 2. Learning Domains

Review Learning Agreement

**Practice Educator** 

Final Assessment Comments

# Learning agreement

applicable on every day on placement

If **ANY concerns** at **ANY time** throughout the placement, please refer to the university immediately and if applicable, your organisational policy for failing students.



# Learning Agreement

Although this part of CPAF is not formally assessed, it plays a vital role in the learner and practice team experience on placement.

Practice placements are a hugely important part of physiotherapy programmes. It is where learners have the opportunity to apply what they have learnt at university into different areas of physiotherapy practice. It is also where our future workforce get to develop many professional and social skills prior to registration. Placements are very much about learning and this part of CPAF aims to allow students to take ownership of this; helping them to get the very most out of their time in practice.

There are 3 parts within the learning agreement;

- 1. Factors that may impact on learning
- 2. SWOC analysis
- 3. Personal Development Plan

Whilst it is primarily the learner's responsibility to complete their learning agreement, the practice education team has a key part to play. The content should be discussed between learner and educator(s) at regular intervals with support and/or guidance offered as needed.

Students have reported that they often find it challenging to both reflect on and independently plan their learning. This can be particularly hard to do in a practice setting where they have had no previous experience. Dialogue is very much encouraged to work together to best support individual areas of student learning.

To get the most out of this section, it is recommended that learners complete it during the first week on placement (with some preparation ahead of the first day if possible). Plan to discuss the learning agreement with your learner during this time, offering support to the different parts as required.

This should not be a 'one-off' – Learning on placement is a continuum from the first day to the last and even beyond. Revisit this section together frequently, encouraging the learner to add to it as the placement progresses. Information here may be used to evidence achievement within the assessed parts of CPAF so please do ask learners for any reflections that they may have completed and map them to the learning domains.



I will be owning my learning

How will this help me?

It will give me a safe space for my voice to be heard

It will stimulate good conversation with my educator

It will allow me to develop from placement to placement

I will be more in control of my own goals



### Factors that may impact on learning

We all have things that impact on our lives. Sometimes these can affect how we all learn.

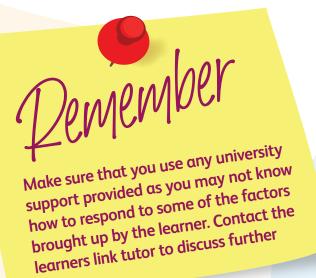
This optional area is designed to be a safe space for learners to share any thoughts with their practice educator(s) that might affect their experience on placement. They are encouraged to discuss these issues with you; to make you aware and, importantly, to make sure that they can be supported appropriately.

It is clear that students often feel anxious about raising these factors. They may be worried about sharing such information, feeling that it may reflect negatively on them. Your role here is crucial in creating safety. Acknowledging and understanding students as individual learners early on in the placement can have a huge impact on the success of the placement. You may want to share examples of factors that impact on your learning and discuss what you may put down on this part of the form to help students feel comfortable about speaking up.

The below diagram, also featuring in the student guidance document, provides some examples of what learners may want to share with you.

Recommended questions to ask;

- 'Is there anything at all that may impact on your learning on placement?'
- 'How can I support you on this placement?'
- 'Have you put anything in this box?' and start the conversation if they do not bring it up







# Let's take a look at some examples you might want to share

I have to do the school run in the morning I'm worried
about catching
infections, and risk
to my family

I have set times I need to pray

I've been feeling low in mood recently

I have dyslexia and need more time to do notes

I have diabetes, I may need time for some snacks during the day



I'm worried about racial comments



### **SWOC Analysis**

Learners are encouraged to consider their individual strengths and weaknesses whilst capturing any opportunities and challenges that there may be on the placement. This should be completed a minimum of twice during their time with you, once at the start and once at the end of placement, allowing for any changes in learning to be captured and a plan put in place for what is to come next – whether this is more time in practice or the university setting. There are more copies within the CPAF appendix should they be required.

Learners have fed back that they find SWOC analysis completion a challenge in itself, often struggling to know what to put in the 'weakness' section without feeling that this will reflect badly on them.

They have also reported not fully understanding what 'opportunities' there may be having little understanding of the specific practice setting. Consider the following actions to support this;

- Ask learners to show you their SWOC analyses and discuss together
- Reassure learners that 'weaknesses' are not 'bad' they are simply things that can be built on
- Take time to explain/discuss any potential opportunities within your setting to individualise their learning further.

### Personal Development Plan

This section allows students to shape their individual learning and seek new experiences whilst on placement. It is here that they should think about what kind of opportunities they may have access to and discuss these together with you, taking into account the resources that may be available.

It can be difficult for learners to complete this section ahead of the placement, possibly not knowing what specific learning opportunities there may be. It may be easier to complete it after a few days or once they know more about the opportunities that they may have access to.

- You may need to support students completing this section by suggesting ideas for opportunities within your placement setting and planning how any goals may be achieved
- Review this section regularly as a minimum at least half way through and at the end of placement points
- The learner should be encouraged to reflect on their individual achievements to review their own performance.



# Professional Behaviours and Responsibilities

This part assesses the fundamental professional qualities, competence and behaviour of the student whilst on placement. They must demonstrate professionalism with adherence to local guidelines, policies and procedures, as well as the HCPC Guidance on Conduct and Ethics for Students (2016) and the CSP Code of Members' Professional Values and Behaviour (2019).

Learners are assessed on 7 key aspects of professionalism;

#### The Learner;

- Is fit to practice safely and effectively; with an awareness if their limitations and scope of practice, honesty about their role and consideration of ethical and moral matters
  - o This is about students practicing within the limits of their knowledge and skills and knowing when to ask for help or refer on when needed (this is not a sign of weakness). Being honest about their knowledge and overall fitness to be on placement
- Promotes and protects the interests of others; following policies on consent, respecting dignity and promoting equity
  - o This focuses on the ability to treat others with respect. To involve people in decisions that may affect them (often referred to as shared decision making), not allowing any personal views to affect professional work and being an advocate (or supporter) for others
- Assesses risks accurately; taking appropriate steps to limit the harm of self and others
  - This professional behaviour shows that learners are aware of potential risks when on placement and that they do all they can to reduce any risk of harm to them self, colleagues, patients and/or carers
- Reports reliably; informing their practice educator of any concerns of safety and putting the wellbeing of others first
  - Learners should speak up if they have any concerns about the safety and wellbeing of others, it is professional behaviour to let their educator know. They should be brave, honest and open
- Respects confidentiality; managing sensitive information and only using information for the purpose in which it is given
  - o When on placement learners MUST keep information that they have gathered confidential, only sharing it when necessary
- Complies with standards of dress, appearance and hygiene in relation to organisational policy
- Is punctual and has good time keeping.



### **Assessment Guidance**

- Marked as 'Pass/Fail' for ALL learners
- The learner MUST pass this section by the end of the placement
- Failure in 'Professional Behaviours and Responsibilities' will override 'Learning Domains' and cause the learner to fail the placement at any stage
- The options for demonstrating the professional behaviour/responsibility are 'yes' or 'no' with space for comments. If a learner fails to achieve an area of professionalism by the end of the placement they will be awarded a 'no' and will result in a fail of the placement.

### I have concerns about a learner's performance, what should I do?

We encourage active use of this part throughout the placement, not waiting for the halfway or end of assessment point. If **AT ANY STAGE** there are concerns about a learner's professional performance, please contact the named university link tutor immediately.

Learners should be given a verbal warning regarding any unsafe practice and/or unprofessional behaviour at the time of the incident. This must then be documented within both 'Professional Behaviours and Responsibilities' and the 'Records of Warning Given' section located in Appendix 1 and must be flagged with the learners university link tutor at the earliest time possible.

An action plan must be clearly documented after any verbal and written warnings as well as during the halfway assessment in order to maximise the learners ability to achieve an acceptable standard of practice. Please refer to the relevant university processes for further information regarding poor performance.

# I am unsure about how some professional behaviours and responsibilities can be achieved in a remote or non-patient facing setting

The professional behaviours and responsibilities should be achievable in all practice settings.

- Learners discussing the limits of their knowledge and asking for help as required when planning or carrying out a health promotion webinar
- Discussing with their educator(s) the correct language to use when creating a survey to ensure they are respecting dignity, promoting inclusion and promoting equity



- Discussing risks to the working environment such as screen time, breaks and remaining active
- Understanding the importance of managing sensitive information and GDPR when creating a focus group or survey.

Demember 1

Ensure that you direct learners to your organisational policies and procedures on professionalism to ensure that they understand each aspect and can relate it to your practice setting



# Learning Domains

There are 10 learning domains on which the learner will be assessed. These are applicable in all placement settings including clinical, non-clinical, in-person, and remote.

Personal Development	1. Independent learning
	2. Seeking, reflecting on and responding to feedback
	3. Organisation and prioritisation
Interpersonal Skills	4. Communication
	5. Working with others
	6. Individuals, communities and populations
Decision Making and	7. Gathering and analysing information
implementation	8. Evidence based practice
	9. Reasoning and intervention
	10. Recording information

- Each learning domain contains 3 associated learning outcomes against which their performance is assessed
- The learning domains and their learning outcomes are consistent for ALL learners.
   Assessment criteria for each of these is shaped to the learners' level of study.



### **Assessment Guidance**

- This part is marked as either 'Pass/Fail' or 'Graded' dependent on university requirements (using the same assessment criteria)
- It is assessed at both the half way and end of placement points
- The learning domain indicates learner achievement by the END of the placement (eg. during the final week)
- The learner MUST pass all 10 learning domains by the end of the placement
- Both summarised and full assessment criteria is provided for each learning domain. Please refer to Appendix 2 of CPAF for the full marking rubric
- Learners and practice educators are required to assess achievement of the learning domains This includes;
  - o Selection of the most appropriate assessment boundary for each learning domain (including self-evaluation for learners)
  - o Written feedback after each 'group' of learning domains (personal development, interpersonal skills and decision making and implementation)

### What is required to pass a learning domain?

Using the assessment criteria, practice educator(s) are required to make a professional judgement about the learner's level of ability. Practice educators and learners should select the appropriate ability achievement at both the half way and final assessment points.

### What if a learner is awarded a 'fail' mark at the halfway assessment?

The learning domains indicate learner achievement by the end of the placement and they may not all be met by the halfway point (either via opportunity or performance). If this is the case however, practice educator(s) and learner should work together to ensure the action plan for the second half of placement clearly details the steps that will be put in place to support achievement. If you feel that a learner is at risk of failing this whole section by the end of placement point, this MUST be flagged with the university link tutor at the earliest possible opportunity.

As there is variation in what constitutes a pass mark between universities (eg. At some it is 40% and others it is 50%), please check with your local university to ensure that you are aware of their Pass/Fail threshold.



### What if a learner is awarded a 'fail' mark at end of placement assessment?

- If a learner is awarded a 'fail' within one of the three learning outcomes within a learning domain, an overall pass mark for the learning domain is awarded
- If a learner is awarded a 'fail' within two or more learning outcomes within a learning domain, an overall pass mark for the learning outcome is not awarded and they will unable to achieve an overall pass mark
- A learner can fail up to three learning outcomes across different learning domains and still achieve an overall pass mark. If they fail four or more learning outcomes across the ten learning domains they will be unable to achieve an overall pass mark.

### When is written feedback provided?

After each group of learning domains (personal development, interpersonal skills, decision making and implementation), there is space for written feedback by both the practice educator(s) and learner. At the halfway point, please complete the 'action plan' to allow any steps to be put in place within the second half of the placement.

### What if a learner is assessed using Pass/Fail?

The same assessment criteria is used. Although these learners may not need a formal grade boundary for their assessment, they will receive the same detail of feedback as those who do. This allows learners' an equal understanding of where have performed well or where they can further develop and enable them to see how they performed against a graded structure.

### What if I feel the learning domain is not achievable in my placement setting?

The learning domains are applicable in a diverse range of placement settings; in person and remote as well as non-patient facing areas of practice. For examples of how they may be demonstrated in different areas with different models of supervision, please refer to the CPAF Guidance Documents. Please seek guidance from the university if you deem any of the domains unachievable in your practice environment.

# Should practice educators provide a specific % or grade boundary for each learning domain?

Please seek university guidance regarding this.



### Is each learning outcome within a domain equally weighted?

Practice educators are encouraged to make a professional judgement here, using their knowledge of the setting and sector. If it is felt that one learning outcome should be weighted higher in their setting this is possible and should be considered in the overall assessment for that specific learning domain.

### How is a final award calculated for the learning domains?

For the end of placement assessment, the practice educator(s) will award the appropriate percentage/grade boundary for each learning domain. Using the 'Final Assessment Summary' Page of CPAF please populate the boxes to detail the award for all learning domains. For those who are assessed as pass/fail select the overall award. For those who are graded, populate a the final numerical boundary or %. This should be an overall mark that represents the learner's performance on placement. Please discuss with the university link tutor if this is a boundary or specific % mark.



### Learning Domains Explained

### 1. Independent Learning

Independent, or self directed, learning is an important skill to develop as a student physiotherapist. Put simply, it means being an active learner and taking responsibility for their own development.

# Ability to identify personalised learning needs and engage in a personalised development plan

Encouraging learners to identify their own learning needs is really important. Why? Because when they have done this, they are much more likely to change your practice than if they were purely being 'told what to do'. This process can be challenging; but as it is personal to them, their motivation to learn often increases as a result.

Learners should head back to the 'Learning Agreement' – complete the **SWOC analysis**, jot some ideas down in their **personalised development plan** and consider factors that may impact on their learning. They should discuss these with their practice educator(s) at regular intervals throughout the placement. Learning is a continuum and you may both become aware of different learning needs part way through a placement. This is OK, learners should add it to their learning agreement and use this to evidence this learning outcome.

# Top tips



- Encourage regular reflections
- Come back to the learning agreement frequently
- Empower the learner to take control



Ability to identify and use a variety of appropriate learning and development resources Once students have identified their learning needs, they then need to think about what they can do to address them. Encourage learners to consider how they personally like to learn – By doing? By watching? By reading? By listening? Or a combination? What different resources could they use to support this? For example, reading, listening to podcasts, shadowing others, mentoring.

Ability to reflect on the learning process, resulting in suitable changes to practice This is where the learner reflects on their learning and considers the 'so what?' by asking themselves some questions to add layers to their learning and deepen understanding. Reflection may take different forms and there are no right or wrong ways to do it – it is completely personal. Learners may choose to write these down, record them on their phone or even speak it out loud (please refer to Appendix 3 of the CPAF for some crib sheets to support this). What is important is that it is meaningful. Encourage the performance of reflection with your learners by asking the following questions (and others) that they can then document.

#### Questions to ask;

- What have you done?
- What did you learn?
- How did you do this?
- How did it impact on your practice?
- How will you approach this next time? Etc



### 2. Seeking, reflecting on and responding to feedback

Practice educators guide and develop students by providing regular feedback throughout the placement. How a student seeks feedback, takes it on board, reflects and changes their practice as a result is important here.

### Ability to seek appropriate feedback

Students are encouraged to seek feedback, thinking about when it would be most useful and not always waiting until it is offered. This may be after a treatment session or following a meeting during a leadership placement; it should also be meaningful and timely. Make sure you discuss this with your students – create a space in which they feel comfortable asking for feedback and make sure there are means in place to make sure this can be completed regularly.

### Ability to accept and reflect on feedback received

Regardless of whether the feedback is good or bad, it is important that learners listen, understand and discuss with their practice educator(s) how it might impact on their future practice. Work together here to agree key actions to take forward and improve on. It is useful to encourage learners to contribute to these discussions.

# Ability to modify personal and professional behaviour as needed in response to feedback received

Here students are encouraged to let their educator see how they have taken your feedback on board and grown as a result. Ask what they did differently? How did it feel? What were the results? What will they do next time? Have they reflected on this?



### 3. Organisation and prioritisation

Organisation and prioritisation are challenging but essential skills for a student physiotherapist. They are also skills that will continue to be developed throughout their career, helping them to be more productive and efficient with time.

Ability to plan, organise and prioritise workload using appropriate available resources For learners to be organised, they will need to take responsibility in planning their own workload by prioritising the tasks that need to be completed first. They should also consider what they need to complete any given task- their resources. For example, they may need support from you as their educator, another healthcare professional, peers, articles, access to documents or additional time to name just a few.

Ask learners to reason through their workload priorities with you. What do they feel needs to be done by when? And in what order? Place appropriate levels of responsibility on them to plan and explore this and create space to feed this back to you.

# Ability to modify behaviour and actions in response to the demands of the situation, service and/or environment

You've made your plan for the day but suddenly something has changed – this is a common occurrence in health care. This skill is about how learners respond to such changes.

Things will always change. This may include time restraints, patients being assessed by other health care practitioners or becoming unwell, late notice for meetings, their educator being off sick – or any other situations outside of their control. What matters here is how the learner responds.

Discuss these situations with learners and ask if and how they can modify their plans, behaviours and/or actions in response to the situation? What would they do if not enough people turned up to a focus group on a leadership placement for example? What about if your intervention made a patient worse? What would they do? And why?

Ability to acknowledge and evaluate the impact of their actions on themselves and others. This is where we are asking learners to take a step back and think about how their actions have affected others, whether good or bad. How did it affect the student? What about their team? Others involved? And even the wider organisation?

For example; a learner suggests to complete a joint assessment with an occupational therapist. As well as saving time, this may also impact on patients energy levels, others workloads and better working relations.



### 4. Communication

Communication is the most important skill of a physiotherapist. It is how we interact with people. When effective, it makes everybody's experience more positive; empowering others and building strong relationships. When ineffective it does just the opposite.

Ability to effectively use a wide range of appropriate communication skills (verbal, non-verbal, written and listening) to both share and receive information

Learners will use many different communication skills on a daily basis when on placement including verbal, non-verbal, written and listening. These skills are fundamental irrespective of the placement setting. Consider here whether they demonstrate a wide range of such skills – How do they listen? How do they communicate in meetings? With the team? How is body language used to present themselves? How is information received as well as shared?

Ability to modify communication styles to meet the needs of different people/users Learners should carefully consider how and when they should change the style of their communication. As no individual or audience is the same, different people prefer different types of communication. This is where learners must demonstrate the ability to alter their communication by choosing the right style for the audience.

Ask them to consider the individual person or audience. What matters to them? How could the learners communication be altered to meet their needs? Why is this important?

Ability to professionally engage with digital information and technology as appropriate Digital information and technology is transforming the future of health and social care and our students very much need to embrace it. On placement, they will be using different technologies possibly in the form of electronic records, virtual consultation, apps that are recommended and social media to name but a few. They must also use it professionally – both appropriately and for its intended purpose.



### 5. Working with others

No matter the setting, learners will almost certainly be working as part of a team. They are required to work well with others, understand the different roles of those around them and make sure they know how their role fits in. Teams offer the potential to achieve more than any person could achieve alone. Leadership starts with students but is a skill that students often feel out of place to practice.

### Ability to understand and respect the role and scope of themselves and others

Learners should consider who is in their team. Their practice educator, other therapists, other medical professionals, support workers, reception and admin staff and so on. Do they take time to get to know the unique roles and what they bring to the team, enabling a better understanding of everyone contributions?

Take time to explain the different roles within your teams and how they then come together with a common goal.

# Ability to build effective and collaborative relationships, engaging with others and working as a team

As well understanding an individual's role within a team, learners should also consider how the roles work together effectively. They should spend time with, talk to, and get to know the team around them, finding out exactly what they offer, understanding when they may ask for their opinion or help and really get to grips with how they can all work together with a common goal.

Create opportunities for learners to spend some time with others, gaining experience of their role and a better understanding. Ask if they should include others in project work or refer a patient on to someone else with the team for another opinion. This will really help to bring this learning to life.

### Ability to identify and apply leadership skills into the practice environment

If learners actions inspire others to achieve more, learn more, do more and be more; then they are a leader. There should be plenty of opportunities for students to demonstrate this on placement. Think about something as simple as empowering a patient to get out of bed for the first time, adapt their training schedule or build activity into their daily life. Non-clinical examples may be easier to think of, possibly including chairing a meeting, leading a focus group, planning their workload or providing feedback constructively to others.

Learners fed back that they do not have a clear awareness of what leadership skill are and how they may evidence these on placement. Consider how you may support them to evidence this in your practice setting and encourage ongoing development of these hugely important skills by creating opportunities.



### 6. Individuals, communities and populations

This domain is one that learners struggle with. When asked 'Do you understand the term population health?' 740 students responded and 59% said 'no'.

Learners are encouraged to think about all the things that can impact on an individual's health, and think broadly. Why do some people stay well and others don't? Why are some communities healthier than others? What do we mean by population health?

When we consider some of the differences that exist between people, their values, their home circumstances, the colour of their skin and their physical ability, we must ensure we treat them all equally and with dignity and respect.

Ability to demonstrate an awareness of the wider determinants of population health Population health is an approach that aims to improve physical and mental health outcomes, promote wellbeing and improve health across an entire population. Many factors affect the health of individuals and communities including genetics, ethnicity, the physical environment, the social environment and health related behaviours to names a few. Learners are encouraged to think about these determinants of health in all placement settings to better understand the effect they can have on an individual's health, the health of a community and even the health of populations.

As experts within your setting you may need to support your learner to understand the importance of these factors. Ask them to find out more about the health of the population in which they are working or, in a leadership or research placement, what aspects of population health they are aiming to impact through their work?

# Ability to identify and understand the impact of health inequalities within the placement setting

Health inequalities is a term used to describe differences and variations in the health achievements of individuals and groups. For example, in 2021 male life expectancy in Glasgow is 54, in London it is 82. Men die younger than women, but women experience more ill health. You must now be asking yourself why? You're not alone, the reasons are complex and still not fully understood.

Learners are encouraged to think about the area where they are on placement; Are there high levels of poverty? Is there access to green space in which to exercise? What are the pollution levels? What are the crime levels? We also know that poverty is associated with behaviour



choices which negatively impact on health such as smoking, drinking and drug taking. How will this impact on the patients that they are likely to see?

Some health conditions are also more common in certain ethnic groups; diabetes, heart disease, strokes to name but a few. Those in more deprived areas with the greatest need for healthcare are least likely to access it. Learners are encouraged to ask themselves why and consider what could be done to address it?

Understanding the community in which you work is so important for physiotherapists if we are to tackle such inequalities and improve the health of populations. <u>This document</u> discusses everyone's roles in tackling health inequalities with some great examples.

For example: a student may see a patient with poorly controlled asthma who is overweight and has knee pain. This will affect her attendance at work, ability to socialise, to exercise and make healthy life choices. Now consider that the asthma is made worse as she lives in the centre of a busy city with high levels of pollution. She lives in a high rise flat that is damp. Both of these circumstances are making her health worse. We aren't expecting students to arrange new housing and a move away from the area. They simply should be able to recognise this and be aware of the impact when assessing her knee and implementing any treatment.

# Ability to promote a sense of inclusion and belonging, demonstrating anti-discriminatory behaviour and acting as an advocate for others

Research and experience tells us that some people experience unacceptable discrimination in placement settings. This may be targeted towards any individual - students, patients, colleagues or others - regarding their gender, sexuality, race, religion, disability or other protected characteristic. This is unacceptable and the CSP promote anti-discriminatory practice, not tolerating discrimination of any kind towards any individual.

### It simply isn't enough not discriminating, we must act as an advocate for antidiscriminatory behaviour.

Learners are advised not to over complicate this or go looking for issues where there may not be any. A sense of inclusion may be created by simply being respectful of a patients time commitments to pray or a sense of belonging by embracing differences. Should learners be unfortunate enough to witness discriminatory behaviour they should be encouraged to tell someone of their concern. Practice educators can play a pivotal role here. Ask yourself 'would I stand up for someone if they are being discriminated against in my setting?' Whether it is racism, sexism, homophobia or something else, being an ally and understanding allyship will support you, your students, your patients and the profession.



### 7. Gathering and analysing information

Students will gather a huge amount of information whilst on placement. This may include subjective and objective assessments, literature searches, polls, questionnaires and focus groups among many other examples. This in turn means that there is a lot of information to then analyse, drawing on appropriate knowledge and skills to inform practice.

### Ability to extract relevant information from a range of sources

In a clinical placement, information gathering could include the subjective and/or objective assessment. Whereas in a non-clinical placement, learners may gather information for a research project, collecting this from a range of sources such as literature, professionals, or social media.

At times, students may feel overloaded with information and there is skill in gathering information that is both relevant and useful. Ask learners how their questioning or lines of enquiry will help to better understand the issue they are trying to address? How will the information inform their next steps? Is it meaningful?

Ability to analyse gathered information, drawing reasoned conclusions to identify key issues. This is where learners will examine the information that they have gathered in order to understand, interpret and explain it.

You may need to support learners here, helping them to 'join the dots' of reasoning. Demonstrating how this relates to the individual person, the project or possible diagnosis. Ask open questions to generate solutions and/or direct to any appropriate supporting evidence that could help with their analysis. Try not to jump to the solution and information giving as the learning here may not be as rich.

For example: on a virtual consultation, a student observes their patient walking slowly. But why? They state it is painful. Why? They delve deeper into their past medical history and discover that they have osteoarthritis of the hip. The learner reasons that they are likely experiencing a flare up of OA resulting in decreased mobility. They have managed to find the connections between the information and the possible diagnosis.

### Ability to develop goals and/or objectives to address identified issues

Once learners have gathered and analysed the information, they must then use it to develop realistic, achievable and meaningful goals. With patients, this will mean exploring together what matters to them. What they want to achieve? And by when? Is this realistic?

In non-clinical placements, this may mean considering the aims of a certain project or developing clear goals from what learners would like to get out from a focus group.



### 8. Evidence Based Practice

Evidence based practice is fundamental to underpin and shape how physiotherapy is practiced - no matter the setting. It is vital for students to develop the skills in translating and applying evidence into practice at pre-registration level, ensuring they are embedded to apply throughout their career. This learning domain considers how students use the available evidence and expertise to select the most appropriate, effective way of achieving the outcome they desire.

### Ability to source research/ evidence to inform effective physiotherapy practice

Here students should gather research and evidence to inform their practice. Encourage them to consider the different forms that this may take including research and audit, university lectures and text books, journal articles sourced through databases, best practice guidance, focus groups, questionnaires and polls.

### Ability to evaluate and apply research/ evidence in practice

Once learners have sourced research and/or evidence, they must then evaluate it and apply it into the practice setting. Encourage reasoning and critical thinking here to really explore it's use and application. To both assess a learners ability as well as provide guidance if required, you may consider asking;

- What was the design of the study?
- Was there a control?
- Were there any biases?
- Was it recent?
- What was the population? It is representative of the setting/demographics that you see?
- Are the conclusions made appropriate? Etc.

Students often do not tell their educator(s) about all of the reading they may do. Make sure you bring this up, ask what they have learned and how this may or may not be applied into practice.

### Ability to reflect upon their application of evidence-based practice

The value of EBP in physiotherapy practice is something consistently recognised as important but there is still wide variation in its implementation. Students' practice will continually change as they learn and develop as a physiotherapist. This is a lifelong skill.



Whenever possible ask learners to reflect on their application of evidence into practice and discuss this with yourselves. You may support his by asking;

- How did you use the evidence to inform your practice?
- What benefits did it bring?
- Will it change what you do in the future?
- What challenges did you have?
- Were there any gaps in the research/evidence base?



### 9. Reasoning and intervention

Reasoning is fundamental to physiotherapy and a skill which all students must continually develop as they learn and gain experience. This is the student's ability to analyse information, evaluate its meaning, and decide the best course of action or intervention.

Ability to reason appropriate interventions to the needs of the setting and/or person Learners should demonstrate how they can use appropriate reasoning to choose one specific intervention over others. They should be encouraged to link this to evidence based practice, to consider the setting in which they are in and the needs of the individual, communities or population to whom the intervention is aimed.

For example: in a virtual placement the learner may have been tasked to create a guidance document for students. They have two interventions in mind. To inform their decision-making they complete a literature search to understand what resources students find easier to use. They also speak to the target audience to understand their preference. From this, they will have been able to reason the most appropriate intervention.

Ability to (safely) apply interventions appropriate to the needs of the setting and/or person Once an intervention has been chosen, can the learner apply it safely and effectively? Are they able to identify any potential risks, the contraindications or necessary precautions? These can be risk to the patient, themselves, others or to the environment.

Are they able to adjust the intervention to address risks? Such as, choosing a different intervention, adjusting their technique, or even changing the setting?

# Ability to monitor and review the ongoing effectiveness of interventions and modify if appropriate

Wherever possible encourage your students to monitor their interventions using outcome measures. They should try to select an appropriate outcome measure from the very beginning to use as a baseline and continue to review this regularly. This will provide valuable feedback to enable them to evaluate the effectiveness of their intervention, to modify where necessary, to empower others and to refer on for others opinions when necessary.



### 10. Recording information

The focus here is how all information is recorded. Regardless of the placement setting, this is really important.

In a clinical placement, in person or remote, this is record keeping / patient notes. Clearly it is imperative students are taught how to do this as once qualified, they will have a professional and legal obligation to keep an accurate record of interactions with patients.

This domain is also very relevant on a non-patient facing placement, although it may be a bit trickier to demonstrate.

# Ability to identify and structure relevant information to record, demonstrating evidence of reasoning

Being able to identify what information is important to record (and what is not) is essential. On a clinical placement, this will likely include selecting the relevant history and examination findings, differential diagnosis, patient concerns, preferences and goals, reasoning, interventions completed and the plan going forwards.

On a non-patient facing placement recording information will also be a skill learners must develop; identifying what to include when writing up a research project, considering what is relevant to present to colleagues or selecting what to feed back to others are all good examples

# Considering its purpose, is able to appropriately select and use a wide range of approaches and formats to record information

Regardless of the format of patient notes it is essential that they give a clear and accurate account of any assessment and intervention. For example, some placements may have paper notes, some electronic, some use templates to capture information and some may recommend a SOAP format (subjective, objective, analysis, plan). Discuss this with your student so that they are clear of what is expected – how would you like them to structure information? Show some examples of your notes, this is a great way to learn.

On a non-clinical placement it is similar things that need to be considered. How are the students able to structure information in a way that is clear and understandable to achieve the impact it requires with an identified audience?



This domain can be broader than just record keeping., it may include letters to other health care professionals, referrals, audit data and so on.

### Ability to modify the approach and/or technique to record information

Being able to change how they record information dependent on the setting and subject is of key importance. This may include choosing to either type your notes during a virtual subjective assessment or waiting until the end to improve eye contact and engagement. It could also involve adapting to use an electronic template or changing the structure for a webinar presentation.

In many instances this will change as the student develops through the placement. For example, following feedback to make records more succinct, or modifying the style to match the intended audience.

### Feedback from others

To encourage whole team supervision, this free-text page within CPAF enables feedback from others who have been involved in the placement experience. This may include any members of the team or organisation irrespective of their role or profession. It can also include feed back from service users should this be appropriate in the setting.

This section is primarily the responsibility of the learner to lead in collating the feedback. However please do support them as necessary, linking with other members of the team as appropriate to ensure that feedback very much represents the whole placement.