

PRACTICE PLACEMENT OUTCOMES

(Required standard to pass each level – equates to pass level in descriptors)

SAFETY (HCPC Standards of Proficiency for Physiotherapists [SOPs] 1 and 2 – see appendix 1)

All levels

- Comply with all organisational policies, work within the limits of own practice and seek advice or refer to other professional/agencies where appropriate.

PROFESSIONALISM (HCPC SOP 2, 3, 5, 6 and 7)

All levels

- Maintain standards of personal and professional conduct and practise within the legal and ethical boundaries of the profession in a non-discriminatory manner. To be aware of the physical, psychological, social and cultural needs of individuals.

COMMUNICATION (HCPC SOPs 8 and 10)

Level 1

- Demonstrate appropriate verbal, non-verbal and written communication skills in a limited range of non-complex situations.

CLINICAL REASONING (HCPC SOPs 4, 11, 12, 13 and 14)

Level 1

- Demonstrate basic knowledge and understanding of relevant anatomy, biomechanics, physiology and pathology.
- Be able to formulate an appropriate simple problem list from basic assessment findings, show some ability to clinically reason with prompting, and identify some ideas for appropriate physiotherapy intervention with guidance.
- Begin to evaluate interventions with guidance by engaging in reflection.

PRACTICAL SKILLS (HCPC SOPs 14 and 15)

Level 1

- Deliver safe and appropriate assessment and treatment techniques in a limited range of non-complex situations.

ORGANISATION and LEARNING BEHAVIOUR (HCPC SOPs 1, 9 and 11)

Level 1

- Be able to manage placement workload and resources with guidance and use a portfolio effectively with prompting.

DEFINITION OF TERMS (to aid clarity and provide the intended meanings for UWE students on placement)

Level of performance	Fail	Not met required standard for level.
	Pass	Met required standard for level.
	Good	Above required standard for level.
	Very good	Significantly above required standard for level.
	Excellent	Achieves a level over and above that of a student at their level in some situations.
	Outstanding	Achieves a level over and above that of a student at their level in most situations.
	Exceptional	Achieves a level over and above that of a student at their level in all situations.
Independence	Prompting/ Guidance	A situation where the practice educator provides support/input to enable the student to complete the task effectively.
	Independent	No prompting or guidance required by practice educator for the student to complete the task effectively.
Frequency	Almost all/ Consistently	Used to describe a situation that occurs >90% of the time.
	Most/Mostly/ Often	Used to describe a situation that occurs >60% but <90% of the time.
	Some/Sometimes	Used to describe a situation that occurs >30% but <60% of the time.
	Occasional/ Occasionally	Used to describe a situation that occurs <30% of the time.
Situation	Non-complex or predictable	Events/presentations which follow an expected/predictable pattern and should not be unusually challenging for a student at their level.
	Complex or unpredictable	Events/presentations which would provide particular challenge to a student at their level due to the complexity and unpredictable pattern.
Ability	Appropriate/basic	Suitable or proper in the circumstances but may not be effective.
	Effective	Successful in producing a desired or intended result.
	Proactive	Uses initiative to identify or respond to a situation rather than just responding to it or being prompted/directed.
	Creative/ Innovative	Use of independent and imaginative thinking to identify new ideas and approaches.

ADDITIONAL GUIDANCE

Complexity (for communication and practical skills)

- If the majority of your caseload is non-complex, please challenge the student further, i.e. paper patients, hypothetical scenarios, what ifs or pre-prime patients to be challenging where possible. This will enable the student to demonstrate their skills further and potentially achieve better results.
- If the majority of your caseload is complex or unpredictable, please consider ways to allow the student to complete only appropriate parts rather than the whole intervention. If the student is able to manage to achieve a certain level even in a complex situation then you should consider a higher mark than you would give for a non-complex situation.

Calculating the marks for the four components in section B

- To achieve 40%, the student should normally achieve all bullet points within the 40s section to pass that component. There may be occasions where a student is not able to demonstrate a specific bullet point in practice due to lack of opportunity, ie prioritising workload. In this instance, the student should still demonstrate theoretical understanding of the process.
- For 50s or above, there is no a specific way to calculate the mark for each component, as students may achieve bullet points in more than one band. They do not necessarily need to achieve all bullet points at one level before being able to reach a higher level. It usually depends on the number of bullet points achieved out of the total available at each level, as well as whether they have achieved any in the band(s) above. It can also be influenced by how close the student is to achieving the bullet point.

Examples for guidance only, not prescriptive

- If a student achieves 1 of the 4 bullet points in the 50s, all the 40s but none in the 60s, low 50s may be most appropriate.
- If a student achieves 2 of the 4 bullet points in the 50s, all in the 40s and 1 in the 60s, mid to high 50s may be most appropriate.
- If a student achieves 3 out of 4 bullet points in the 50s but also 1 in the 60s, high 50s may be most appropriate.

MARKING DESCRIPTORS

SECTION A

SAFETY – all levels

(Health and Care Professions Council [HCPC] Standards of Proficiency [SOPs] 1 and 2)

FAIL	Insufficient evidence of ability to comply with all organisational policies, work within the limits of own practice, seek advice or refer to other professionals/agencies where appropriate.
PASS	Complies with relevant department health and safety policies, e.g. infection control, confidentiality/data protection, moving and handling, informed consent. Demonstrates safe practice and works within the limits of their own practice. Applies interventions in a way that minimises the risk to service users, self or others, through effective risk assessment. Seeks help when appropriate and informs the educator about adverse findings and/or service user complaints.

SECTION A

PROFESSIONALISM – all levels

(HCPC Guidance on Conduct and Ethics for Students 2012; HCPC SOPs 2, 3, 5, 6 and 7)

FAIL	Insufficient evidence of ability to maintain standards of personal and professional conduct and practise within the legal and ethical boundaries of the profession in a non-discriminatory manner. Not aware of the impact of culture, equality and diversity on practice.
PASS	Complies with relevant codes of practice including the 'Code of Professional Values and Behaviours' (CSP, 2011) and 'Guidance on Conduct and Ethics for Students' (HCPC, 2012). Demonstrates the core values of the NHS Constitution including putting service users first, honesty, compassion, respect and dignity of service users, carers or colleagues. Practises in a non-discriminatory manner and has awareness of the different cultural needs of individuals. Is punctual and manages time effectively to avoid delay or inconvenience to others. Appropriate standards of dress and hygiene maintained following UWE and departmental guidance/policy. Implements arrangements and agreed procedures when instructed. Responds to verbal instructions and/or warnings professionally and proactively resulting in an improvement in performance.

LEVEL 1

SECTION B

COMMUNICATION (HCPC SOPs 8 and 10)

FAIL (below 40)	Minimal/Insufficient evidence of meeting practice placement outcomes for level 1.
PASS (40s/3rd)	<p>In a limited range of non-complex situations:</p> <ul style="list-style-type: none"> • Verbal (volume, tone, pace, language) and non-verbal (eye contact, body language, facial expressions, listening) communication skills are appropriate on most occasions but often needs guidance/prompting to modify. • Chooses appropriate communication strategies (types of questions, level) with service users on most occasions with occasional prompting/guidance. • Complies with legal and organisation standards for most service user records (legible, dated, signed, errors amended correctly and use of agreed abbreviations) with only occasional guidance/prompting.
GOOD (50s/2:2)	<p>In a range of non-complex situations:</p> <ul style="list-style-type: none"> • Verbal and non-verbal communication skills are appropriate and <u>effective</u> with <u>some ability to modify</u> with <u>occasional</u> guidance/prompting. • Chooses appropriate communication strategies with <u>most</u> service users and gains an <u>effective rapport</u> showing some empathy, sensitivity and compassion with most service users. • Written records <u>always</u> meet legal/organisational standards and are <u>accurate</u>, <u>relevant</u> and completed within an <u>agreed timeframe</u> most of the time.
VERY GOOD (60s/2:1)	<p>In a range of situations including some complexity:</p> <ul style="list-style-type: none"> • Verbal and non-verbal communication skills are appropriate and effective, <u>modifying appropriately</u> in most cases with <u>no prompting/guidance</u>. • Shows empathy, sensitivity and compassion with <u>all</u> service users <u>and some staff</u> but needs guidance/prompting to respond effectively in more complex/unpredictable situations. • Written records always meet legal/organisational standards, are accurate, relevant and <u>timely</u>; they are <u>mostly logical and concise</u> with <u>some guidance/prompting</u>. • Provides <u>appropriate</u> written information/instructions for service users with some guidance/prompting.
EXCELLENT (70s/1 st)	<p>In a wide range of situations including complexity:</p> <ul style="list-style-type: none"> • Verbal and non-verbal communication skills are effective, <u>fluent</u> and <u>modified</u> effectively. • Responds effectively even in some <u>complex/unpredictable situations</u> with service users, <u>most staff and relatives</u> with <u>some</u> guidance/prompting. • Written records always meet legal/organisational standards, are accurate, timely, <u>logical</u> and <u>concise</u> with <u>no guidance/prompting</u>. • Provides <u>appropriate</u> written information/instructions for service users with <u>only occasional</u> guidance/prompting.
OUTSTANDING (80s/1 st)	<p>In all situations:</p> <ul style="list-style-type: none"> • Verbal and non-verbal communication skills are effective, <u>confident</u>, fluent and <u>individualised</u> for all service users, occasionally using <u>new approaches and techniques</u>. • Responds effectively in <u>all situations</u> with service users, staff and relatives, showing <u>some ability to overcome</u> barriers without guidance/prompting. • Written records – as for excellent. • Provides <u>appropriate</u> written information/instructions for service users <u>without</u> guidance/prompting.
EXCEPTIONAL (90s/1 st)	<p>In all situations:</p> <ul style="list-style-type: none"> • Verbal and non-verbal communication skills are effective, confident, fluent and individualised for all service users, <u>sometimes</u> using <u>creative</u> approaches and techniques. • Responds effectively in all and <u>eloquently</u> in almost all situations with service users, staff and relatives, and is <u>able to</u> overcome barriers, often showing <u>mature</u> consideration of their own <u>level of ability, responsibility and accountability</u>. • Written records – as for outstanding. • Provides <u>individualised</u> written information/instructions for service users <u>without</u> guidance/prompting.

SECTION B

CLINICAL REASONING (HCPC SOPs 4,11,12,13 and 14)

FAIL (below 40)	<ul style="list-style-type: none"> Minimal/Insufficient evidence of meeting practice placement outcomes for level 1.
PASS (40s/3rd)	<ul style="list-style-type: none"> Theoretical knowledge and understanding is acceptable/basic but often needs guidance/prompting to demonstrate effectively. Some ability to select appropriate assessment strategies (subjective and objective) but often needs guidance/prompting. Some ability to identify some problems and identify simple problem lists with some basic clinical reasoning evident but requires frequent guidance/prompting. Some ability to set appropriate SMART goals for service users and select an appropriate treatment plan but often needs guidance/prompting. Some awareness of need to evaluate the effectiveness of interventions but needs frequent guidance/prompting.
GOOD (50s/2:2)	<ul style="list-style-type: none"> Theoretical knowledge and understanding is mostly <u>sound</u> and <u>relevant</u> requiring <u>some</u> guidance/prompting to demonstrate effectively. <u>Able to</u> select appropriate assessment strategies on <u>most occasions</u> with <u>some</u> guidance/prompting. Able to identify <u>most</u> problems and identify simple problem lists supported by <u>some sound</u> clinical reasoning but requires <u>some</u> guidance/prompting. Able to set appropriate SMART goals for service users and select appropriate treatment plans with some guidance/prompting. Some ability to evaluate the effectiveness of interventions showing <u>awareness of the relevance of evidence</u> with some guidance/prompting.
VERY GOOD (60s/2:1)	<ul style="list-style-type: none"> Theoretical knowledge and understanding is <u>always</u> sound and relevant requiring <u>only occasional</u> guidance/prompting. Able to select appropriate assessment strategies on <u>almost all</u> occasions with <u>only occasional</u> guidance/prompting. Able to identify <u>almost all</u> problems, identify <u>appropriate</u> problem lists supported by <u>sound</u> clinical reasoning and <u>effective problem-solving</u> techniques with <u>only occasional</u> guidance/prompting. Able to <u>independently</u> set appropriate SMART goals for service users, select and prioritise appropriate treatment plans. Able to evaluate the effectiveness of interventions with some use of <u>appropriate evidence</u> and <u>outcome measures</u> with occasional guidance/prompting. Some ability to recognise when to <u>progress, regress or discontinue treatment/discharge the service user</u> but requires guidance/prompting.
EXCELLENT (70s/1 st)	<ul style="list-style-type: none"> Theoretical knowledge and understanding is always sound, relevant, <u>detailed</u> and demonstrated <u>without</u> guidance/prompting. Able to <u>independently</u> select appropriate assessment strategies on almost all occasions. Able to <u>independently</u> identify problems and identify appropriate problem lists, <u>justifying</u> choices with sound clinical reasoning and effective problem-solving; requires some guidance/prompting to <u>show consideration of the social context, religious and cultural beliefs of the service user</u>. Able to independently set appropriate SMART goals for service users, select and prioritise appropriate treatment plans. Able to independently evaluate the effectiveness of interventions using evidence-based practice and appropriate outcome measures. Able to recognise when to <u>progress, regress or discontinue treatment/discharge the service user</u> with some guidance/prompting.
OUTSTANDING (80s/1 st)	<ul style="list-style-type: none"> Theoretical knowledge and understanding is always sound, relevant, detailed, <u>extensive</u> and demonstrated <u>proactively</u>. Able to independently and <u>confidently</u> select appropriate assessment strategies on all occasions. Able to independently identify problems, identify <u>individualised</u> problem lists justifying choices with sound clinical reasoning, effective problem-solving and some consideration social context, cultural and religious beliefs of the service user on most occasions.. Able to independently set appropriate SMART goals for service users, select and prioritise <u>individualised</u> treatment plans and critically evaluate the effectiveness of interventions using evidence-based practice and appropriate outcome measures with occasional guidance/prompting. Able to recognise when to <u>progress, regress or discontinue treatment/discharge the service user</u> with only occasional guidance/prompting.
EXCEPTIONAL (90s/1 st)	<ul style="list-style-type: none"> Theoretical knowledge and understanding is always sound, relevant, detailed, <u>comprehensive</u> and demonstrated <u>confidently</u> and proactively. Able to independently and confidently select appropriate assessment strategies and, on <u>almost all</u> occasions. Able to identify problems, identify individualised problem lists justifying choices with sound clinical reasoning and effective problem-solving showing <u>due</u> consideration of social context, cultural and religious beliefs on most occasions. Able to independently and <u>confidently</u> set individualised SMART goals for service users, select and prioritise individualised treatment plans and <u>independently</u> critically evaluate the effectiveness of interventions using evidence-based practice and appropriate outcome measures. Able to <u>independently</u> recognise when to <u>progress, regress or discontinue treatment/discharge the service user</u> on most occasions.

SECTION B

PRACTICAL SKILLS (HCPC SOPs 14 and 15)

FAIL (below 40)	<ul style="list-style-type: none"> Minimal/Insufficient evidence of meeting practice placement outcomes for level 1.
PASS (40s/3rd)	<p>In a limited range of non-complex situations:</p> <ul style="list-style-type: none"> Delivers safe (aware of contraindications/precautions and potential adverse effects) and appropriate assessments/interventions with some guidance/prompting but not often within an appropriate timeframe.
GOOD (50s/2:2)	<p>In a range of non-complex situations:</p> <ul style="list-style-type: none"> Delivers safe and appropriate assessments/interventions with occasional guidance/prompting and mostly within an <u>appropriate timeframe</u>. Starting to monitor and review response to interventions to ensure ongoing effectiveness with guidance/prompting. Aware of the need to <u>facilitate the service user to manage their own health and wellbeing</u> but often needs guidance/prompting to attempt.
VERY GOOD (60s/2:1)	<p>In a range of situations including some complexity:</p> <ul style="list-style-type: none"> Delivers safe, appropriate and <u>logical</u> assessments/interventions in an appropriate timeframe with <u>some consideration of the service user's needs</u>. Monitors and reviews response to most interventions and is able to modify in some cases to meet service user's needs with occasional guidance/prompting. Some ability to facilitate the service user to manage their own health and wellbeing with <u>some</u> guidance/prompting.
EXCELLENT (70s/1 st)	<p>In a wide range of situations including complexity:</p> <ul style="list-style-type: none"> Delivers safe, appropriate, logical and <u>mostly effective</u> assessments/interventions in an appropriate timeframe with due consideration of the service user's needs. Monitors and reviews response to <u>almost all</u> interventions and is able to modify in <u>most</u> cases to meet service user's needs <u>without</u> guidance/prompting. <u>Mostly</u> able to facilitate the service user to manage their own health and wellbeing with <u>only occasional</u> guidance/prompting.
OUTSTANDING (80s/1 st)	<p>In all situations:</p> <ul style="list-style-type: none"> Delivers safe, appropriate, logical, effective and <u>mostly fluent</u> assessments/interventions in an appropriate timeframe with due consideration of the service user's needs. Monitors and reviews response to <u>all</u> interventions and is able to <u>modify</u> in <u>almost all</u> cases <u>at the time</u> in response to findings and the service user's needs. <u>Able to facilitate</u> service user to manage their own health and wellbeing <u>without</u> guidance/prompting.
EXCEPTIONAL (90s/1 st)	<p>In all situations:</p> <ul style="list-style-type: none"> Delivers safe, appropriate, effective, logical and <u>fluent</u> assessments/interventions in an appropriate timeframe with due consideration of the service user's needs. Monitors and reviews response to all interventions and is able to modify in <u>all</u> cases at the time and is starting to <u>take into account the availability of resources and the environment</u> with some guidance/prompting. <u>Confidently</u> facilitates the service user to manage their own health and wellbeing.

SECTION B

ORGANISATION AND LEARNING BEHAVIOUR (HCPC SOPs 1 and 11)

FAIL (below 40)	<ul style="list-style-type: none"> Minimal/Insufficient evidence of meeting practice placement outcomes for level 1.
PASS (40s/3rd)	<ul style="list-style-type: none"> Some ability to manage placement workload (caseload, learning opportunities and self-directed learning) but needs guidance/prompting. Shows some awareness of the roles of team members and, with frequent guidance/prompting, is able to contribute to some team discussions/events. Shows some insight into own strengths and learning needs but needs frequent guidance/prompting. Shows some ability to reflect on own practice but needs frequent guidance/prompting. Accepts constructive feedback and makes some relevant changes with regular guidance/prompting.
GOOD (50s/2:2)	<ul style="list-style-type: none"> Able to manage placement workload and is <u>starting to prioritise</u> with some guidance/prompting. Aware of the roles of team members and, with <u>some</u> guidance/prompting, <u>contributes effectively</u> to <u>most</u> team discussions/events. <u>Shows insight</u> into own strengths and learning needs with <u>some</u> guidance/prompting. <u>Mostly able</u> to reflect on own practice with <u>some ability to identify future learning needs</u> with <u>some</u> guidance/prompting. Accepts constructive feedback and makes <u>most</u> relevant changes with <u>some</u> guidance/prompting.
VERY GOOD (60s/2:1)	<ul style="list-style-type: none"> Manages and prioritises placement workload effectively with only occasional guidance/prompting. Aware of and starting to <u>respect and value</u> the roles of team members and, with <u>only occasional</u> guidance/prompting, contributes effectively to <u>almost all</u> team discussions/events. Shows insight into own strengths and learning needs with <u>only occasional</u> guidance/prompting. Able to reflect on own practice and <u>mostly able</u> to identify future learning needs with some guidance/prompting. Accepts and <u>responds positively</u> to constructive feedback and makes relevant changes <u>mostly in a timely fashion</u> with <u>only occasional</u> guidance/prompting.
EXCELLENT (70s/1 st)	<ul style="list-style-type: none"> <u>Independently</u> and effectively manages and prioritises placement workload; <u>responds flexibly to changing requirements/resources</u> on some occasions. <u>Understands</u>, respects and values the roles of team members and, contributes independently and effectively to <u>all</u> team discussions/events. Shows insight into own strengths and learning needs <u>without</u> guidance/prompting. Able to reflect on own practice and <u>able to</u> identify future learning needs with only occasional guidance/prompting. Accepts and responds positively to constructive feedback and makes <u>all</u> relevant changes, <u>almost always</u> in a timely fashion <u>without</u> guidance/prompting.
OUTSTANDING (80s/1 st)	<ul style="list-style-type: none"> Independently and effectively manages and prioritises placement workload; responds flexibly to changing requirements/resources on <u>most</u> occasions. Understands, respects and values the roles of team members and, contributes independently, effectively and <u>sometimes proactively</u> to team discussions/events. Shows <u>clear</u> insight into own strengths and learning needs and <u>proactively seeks out opportunities</u> to further develop on <u>some</u> occasions. Able to <u>independently</u> reflect on own practice and identify future learning needs. Accepts and responds positively to and <u>sometimes proactively seeks out</u> constructive feedback, independently making all relevant changes, <u>always</u> in a timely fashion.
EXCEPTIONAL (90s/1 st)	<ul style="list-style-type: none"> Independently, effectively and <u>confidently</u> manages and prioritises placement workload; responds flexibly to changing requirements/resources on <u>almost all</u> occasions. Understands, respects and values the roles of team members, contributes independently, effectively and <u>mostly</u> proactively to team discussions/events and <u>adapts approach in response to team dynamics/requirements</u> on some occasions. Shows clear insight into own strengths and learning needs and proactively seeks out opportunities to further develop on <u>most</u> occasions. Independently and <u>proactively</u> reflects on own practice, identifies and <u>seeks out appropriate opportunities</u> to address learning needs. Accepts and responds positively to and <u>almost always</u> proactively seeks out constructive feedback, independently making all relevant changes in a timely fashion.

Appendix 1 (for reference only)

HCPC Standards of Proficiency for Physiotherapists (SOPs), 2013

1. Be able to practise safely and effectively within their scope of practice.
2. Be able to practise within the legal and ethical boundaries of their profession.
3. Be able to maintain fitness to practise.
4. Be able to practise as an autonomous professional, exercising their own professional judgement.
5. Be aware of the impact of culture, equality, and diversity on practice.
6. Be able to practise in a non-discriminatory manner.
7. Understand the importance of and be able to maintain confidentiality.
8. Be able to communicate effectively.
9. Be able to work appropriately with others.
10. Be able to maintain records appropriately.
11. Be able to reflect on and review practice.
12. Be able to assure the quality of their practice.
13. Understand the key concepts of the knowledge base relevant to their profession.
14. Be able to draw on appropriate knowledge and skills to inform practice.
15. Understand the need to establish and maintain a safe practice environment.