

Practice Educator Handbook

BSc (Hons) Physiotherapy

Graduate Diploma Physiotherapy

2026 Validation (cohort 2026 only)

College of Health, Science and Society
School of Health and Social Wellbeing

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Introduction

Practice education is essential to the physiotherapy programme (accounting for one third of the course in terms of time) and the training of your future workforce. As an educator, you are central to this process.

This educator handbook has been compiled to provide you with the information and reference material necessary to equip you for this challenge. It is hoped that this handbook will be used as an ongoing resource during the process of facilitating practice placements.

Physiotherapy staff at UWE are dedicated to supporting you and the learners/students and can be contacted if you have any queries that this handbook does not address. All information required by educators is available on the physiotherapy page of the [UWE Physiotherapy Practice Support Net \(PSN\) website](#), and for physiotherapy apprenticeship learners on the [UWE Physiotherapy Apprenticeship Practice Support Net \(PSN\) website](#).

In addition, introduction and update sessions are scheduled on a rolling annual programme (dates and booking form available on the [PSN website](#) under Programme Information). These provide an opportunity for continued professional development through exploration of relevant topics whilst offering opportunities to meet and discuss matters of interest with other educators.

We would like to take this opportunity to thank you for the energy and enthusiasm you bring to this role and hope that it will be a positive and enjoyable experience for both you and your learners.

The Programme

The physiotherapy programme leads to both an academic qualification and a license to practice. The programme is validated by the Health Care and Professions Council (HCPC) and recognised by the Chartered Society of Physiotherapy (CSP), so successful completion of the programme entitles graduates to register with the HCPC and apply for full membership of the CSP. All learners are advised to join the CSP as learner members when they start their training, but this is not mandatory.

Development of the programme to meet these goals is through ongoing collaboration between university academic staff, physiotherapy leads, learner coordinators, educators, and learner representatives.

Aims of the Programme

The programme offers a dynamic and holistic journey into the physiotherapy profession, equipping learners with the foundational knowledge and practical skills needed to become collaborative, inclusive, and evidence-informed practitioners.

The programme also aims to:

- Fulfil the requirements to be eligible to apply for registration with the Health and Care Professions Council (HCPC) and membership of the Chartered Society of Physiotherapy (CSP).
- Demonstrate the key skills and knowledge to enable safe and effective, clinically reasoned assessments and interventions.
- Work collaboratively as part of an interprofessional team with a holistic, person-centred approach which respects and promotes equality and diversity.
- Critically appraise literature to inform an evidence-based approach to practice and take responsibility for lifelong learning and continual professional development.
- Be a reflective practitioner who is adaptable and takes responsibility for lifelong learning and continual professional development.
- Identify transferrable skills and leadership qualities to work in emerging areas and contribute to the expanding scope of practice of the profession.

Programme Structure

The structure reflects the primacy of physiotherapy as a discipline as well as the inter-professional nature of professional practice and seeks to acknowledge other disciplines that inform and enhance physiotherapy education. Emphasis is placed on integrating theory and practice, clinical reasoning and problem solving in order to provide the best possible education for the learner and healthcare for the individual.

The direct entry award route is a full-time course, divided into three levels that equate with three academic years. Level 4 (year 1) of the programme is almost entirely university based but concludes with a period of professional practice. Levels 5 and 6 (years 2 and 3) consist of alternate periods within the university and the practice environment.

Although the levels build upon one another, progress through each module of the award is perceived to be dynamic; the various components being inter-related and inter-dependent.

All modules are compulsory requirements for the award of BSc (Hons) Physiotherapy.

External examiners from other institutions are appointed to a suite of programmes to act independently and work with the faculty in the management of threshold academic standards, ensuring parity of approach to assessment across all awards available.

Communication Mechanisms

There are several ways in which the programme team communicates with practice colleagues that provide placements for UWE learners:

- Placement support meetings
- Annual physiotherapy coordinator forum
- Individual physiotherapy coordinator meetings annually
- Educator introduction and update sessions
- Practice Support Net website information (includes contact details)
- Invitations to stakeholder events when necessary.

Modules

All modules are compulsory requirements for attainment of a BSc (Hons) Physiotherapy.

Level 4

Level 4 considers the essentials of key concepts of the knowledge base and practical skills and fosters the identity of being a learner physiotherapist. At this stage, learners begin to explore the four pillars of practice: developing foundational clinical practice skills, understanding the role of education in learning and teaching, gaining an appreciation of self-leadership, and being introduced to research principles that underpin evidence-based practice. The modules undertaken are shown below.

Essentials of Neuroscience for Physiotherapy (15 credits)

Module Leader: Anna Gould (anna.gould@uwe.ac.uk)

This module has both theoretical and practical components and aims to provide the learner with a solid foundation in neuroanatomy and neurophysiology. The module provide learners with an appreciation of how the nervous system works, essential to understanding the control of normal posture and movement. This is fundamental to the practice of physiotherapy and will comprise the bulk of study in this Level 4 module. It also forms the basis of understanding of neuropathology and as such will provide a springboard to the study of neurological rehabilitation in Levels 5/6.

This module aims to:

- Introduce students to the foundational principles of neuroscience, with a focus on neuroanatomy and neurophysiology, as they relate to human posture and movement.
- Establish a scientific basis for understanding normal and pathological neurological function, forming a critical underpinning for physiotherapy practice.
- Prepare learners for future study in neurological rehabilitation by providing a conceptual framework for interpreting clinical features of common neurological conditions.
- Support the development of neuro-specific assessment skills through integration of theoretical knowledge and practical application in physiotherapy contexts.

This module has one assessment tasks:

- A Structured Oral Practical Examination (SOPE), covering theory and skills of neurological assessment.

Clinical Anatomy for Therapeutic Practice (30 credits)

Module Leader: Reynold Cruziah (reynold.cruziah@uwe.ac.uk)

This module develops learners' knowledge of human anatomy with a focus on structures and functions most relevant to therapeutic assessment in physiotherapy. It provides a detailed understanding of musculoskeletal and related anatomical systems, emphasising their clinical significance in movement and function. Learners apply their knowledge to develop practical assessment skills and handling. Learners also develop their skills in effective clinical communication.

This module aims to develop a comprehensive understanding of human anatomy and its role in normal movement and function, providing a foundation for applying anatomical knowledge in therapeutic practice. Learners will build the skills to integrate anatomical principles into safe and effective musculoskeletal assessment and clinical reasoning.

This module has two assessment tasks:

- A SOPE assessing the lower quadrant.
- A SOPE assessing the upper quadrant.

Essentials of Musculoskeletal and Exercise Therapy (30 credits)

Module Leader: Tom Cave tom.cave@uwe.ac.uk

This module explores the underlying mechanisms of disease and dysfunction within the neuromusculoskeletal (NMSK) system, providing a foundation for understanding clinical presentations and their implications for physiotherapy practice. Learners will be introduced to physiotherapy assessment and management skills for NMSK conditions, including structured assessment approaches, safe handling techniques, and the use of therapeutic exercise.

This module aims to introduce learners to physiotherapy assessment skills, including structure (Subjective, Objective, Analysis, Plan), handling and assessment of peripheral and spinal joints, and learn basic application of the clinical reasoning process with the use of specific NMSK case studies.

This module has two assessment tasks:

- A SOPE assessing the lower quadrant.
- A SOPE assessing the upper quadrant.

Physiotherapy Practice 1 (30 credits)

Module Leader: Fliss Smith (Fliss.smith@uwe.ac.uk)

This module consists of both university-based learning throughout the year, an observation placement (term 2) and practice placement 1 at the end of 1st year.

This module introduces the key foundations of physiotherapy across the four pillars of practice: clinical, education, research, and leadership. Learners begin to explore their emerging individual professional identity, supported by core themes including professionalism, mental health and wellbeing, teamwork, cultural awareness, equality, diversity and inclusion, reflective practice and research and academic skills.

This module aims to introduce learners to all four pillars of practice: Clinical, Leadership, Research, and Education, ensuring a comprehensive foundation for subsequent professional development. At level 4 the focus is on application of the pillars in relation to self.

It will emphasise transferable skills and the application of person-centred care, and provide a strong foundation for progression across the programme and readiness for the first practice placement.

This module has two assessment tasks:

- Practice placement 1 - is assessed by the educator using the level 4 Common Placement Assessment Form (CPAF) and is marked as pass/fail for the purposes of the degree classification plus formative feedback and a percentage mark for aspects of practice.

- Portfolio Assessment – it comprises a range of assessment methods, including written assignments, reflective tasks, and other relevant activities completed throughout the module.

The learner needs to pass both assessment tasks to pass the module.

Essentials of Cardiorespiratory Physiotherapy (15 credits)

Module Leader: Robyn Osborne robyn.osborne@uwe.ac.uk.

This module introduces learners to the speciality of cardiorespiratory physiotherapy. Learners will learn about the normal anatomy and physiology of the cardiorespiratory system. They will be introduced to several cardiorespiratory problems and will learn several clinical assessment skills that they may use when working with people with cardiorespiratory problems.

This module aims to develop learners' knowledge and understanding of the cardiorespiratory system. We will begin to develop their clinical reasoning skills by linking clinical signs and symptoms to underlying cardiorespiratory problems and pathophysiological changes. We will also develop the skills to apply appropriate assessment techniques for cardiorespiratory problems.

This module has one assessment tasks:

- A SOPE that will allow learners to demonstrate both theoretical understanding and practical competence in foundational cardiorespiratory physiotherapy.

Level 5

Level 5 uses the baseline knowledge and skills to develop a person-centred approach. At this level, learners deepen engagement with the pillars of practice, furthering clinical reasoning skills, contributing to patient and peer education, demonstrating emerging leadership behaviours in their interactions, and critically using research to inform decisions. The modules undertaken are shown below.

Clinical Reasoning in Musculoskeletal Physiotherapy (30 credits)

Module Leader: Stephen Hubbard stephen3.hubbard@uwe.ac.uk

This module builds on Level 4 to develop a learner's clinical reasoning in neuro-musculoskeletal (NMSK) physiotherapy, to include analysing, evaluating and selection of treatment or management plan. It will also develop learner's ability to perform safe and professional NMSK assessment and treatment skills for increasingly complex scenarios.

This module aims to build on the introductory NMSK assessment and management skills introduced in Level 4.

It aims to develop clinical reasoning within increasingly complex scenarios, and to enable learners to integrate assessment findings with theory and research to formulate suitable management plans. It also aims to expand the repertoire of treatment and management techniques. This module will develop the learner's knowledge of pain theories and mechanisms, and increasingly complex NMSK pathologies.

This module has one assessment tasks:

- An Objective Structured Clinical Exam (OSCE) devised to allow the learner to demonstrate both theoretical understanding and practical competence in the assessment and management of NMSK conditions appropriate to Level 5.

Clinical Reasoning for Cardiorespiratory Physiotherapy (15 credits)

Module Leader: Rowan Mitcham rowan.mticham@uwe.ac.uk

This module will build upon the anatomy and physiology, assessment skills and problem identification from the level 4 cardiorespiratory module.

Pathologies of the cardiorespiratory system will be examined to understand changes to the usual anatomy and physiology. Treatment skills used in cardiorespiratory physiotherapy will be linked to clinical decision making to aid with the selection of appropriate treatments.

This module aims to:

- Revisit cardiovascular and respiratory anatomy and physiology in an applied way, considering normal structure and function alongside the pathophysiological processes that occur in cardiovascular and respiratory conditions
- Explore a range of physiotherapy treatment options, this will include links to the problems caused by cardiorespiratory disease. Clinical reasoning will be developed to consider the choices for cardiorespiratory treatments and their application in practice.

The module has one assessment task:

- A SOPE enabling learners to demonstrate both theoretical understanding and practical competence in foundational skills relevant to cardiorespiratory physiotherapy.

Foundations for Dissertation (15 credits)

Module Leader: Kate Ford kate.ford@uwe.ac.uk and Kathryn Woodward kathryn4.woodward@uwe.ac.uk

This module provides learners with the skills needed to become evidence-based physiotherapists. Clinical decision-making is based on research and so it's essential that learners understand the process of research to be able to assess its quality. Using this skill, learners should be able to understand the value of research evidence and whether it should be applied to practice.

This module aims to:

- Develop learners' ability to understand, appraise, and critically evaluate a range of evidence sources, enabling them to identify how research can inform, enhance, and transform physiotherapy practice.
- Introduce learners to contemporary research methodologies and methods relevant to the physiotherapy profession and its underpinning scientific and theoretical foundations.
- Enhance learners' confidence and competence in selecting and justifying appropriate research designs in response to different types of research questions and professional contexts.
- Equip learners with the foundational knowledge and skills required to plan and conduct the dissertation research project.

This module is assessed by a written coursework essay. This assignment will assess knowledge and understanding of research and evidence-based practice, critical thinking and written communication of complex ideas and argument.

Physiotherapy Practice 2 (30 credits)

Module Leader: Amy Belisario amy2.belisario@uwe.ac.uk

This module is made up of two six-week practice placements and explores physiotherapy practice in relation to patient-centred care.

This module aims to develop knowledge, skills, and confidence across the four pillars of practice, Clinical Practice, Leadership, Research, and Education with a Level 5 focus on applying these pillars to service users. Learners will enhance their physiotherapy competence through practice placements and critical engagement with key theories and evidence to deliver high-quality, patient-centred care.

This module has three assessment tasks:

- Practice placement 2a is assessed by the educator using the level 5 CSP CPAF
- Practice placement 2b is assessed by the educator using the level 5 CSP CPAF

- A presentation and professional discussion identifying individuals' needs, and the strategies to support person-centred care.

Clinical Reasoning in Neurological and Longterm Conditions (30 credits)

Module Leader: Sarah Sessa sarah.sessa@uwe.ac.uk

This module explores clinical reasoning, assessment and current evidence-based physiotherapy management for the rehabilitation for people with neurological and long-term conditions.

This module aims to develop physiotherapy assessment and holistic management /rehabilitation skills for people with long-term conditions. It will encourage the learner to synthesise previously acquired knowledge, theory, clinical reasoning and management skills, and develop and apply these to long-term conditions and their management, with an emphasis on rehabilitation.

This module has one assessment task:

- An OSCE learners will be assessed on theoretical knowledge and practical skills, which are core for rehabilitation practice. Real case scenarios are used, which allows learners to plan and demonstrate practical and clinical reasoning skills.

Level 6

Level 6 is the third and final level of the award is a culmination of all levels and seeks to ensure that, on qualification, the learner can meet the CSP Learning and Development principles, HCPC Standards of Proficiency for Physiotherapy and QAA benchmark statements for Physiotherapy. Level 6 is assessed by a variety of methods. The learner is expected to demonstrate the higher levels of learning i.e., analysis and evaluation in relation to physiotherapy theory and practice. The modules undertaken are shown below.

Physiotherapy Practice 3 (30 credits)

Module Leader: Kate Stancombe catherine.stancombe@uwe.ac.uk and Dave Matthews david3.matthews@live.uwe.ac.uk

This level 6 module made up of two six-week practice placements and taught content that explores physiotherapy practice at organisation level, service provision, roles and working practices, both now and in the future.

This module aims to develop learners' understanding of key aspects of the delivery and management of physiotherapy services through practice placements and the exploration of key policies, frameworks, new and future opportunities and developments.

This module has three assessment tasks:

- Practice placement 3a is assessed by the educator using the level 6 CSP CPAF
- Practice placement 3b is assessed by the educator using the level 6 CSP CPAF

- An interview-style oral assessment enables learners to demonstrate their depth of understanding of the contemporary issues within healthcare and related to physiotherapy. It allows assessors to clarify the learner's understanding of the issues at an organisational/service level, demonstrate insight into the complexities of healthcare provision, and how this may be relevant to and applied in a clinical context.

Dissertation project in Physiotherapy (30 credits)

Module Leader: Leah Morris leah.morris@uwe.ac.uk

This module provides learners with an opportunity to work within a team to develop a research proposal and then undertake the research project. Learners will also undertake independent study that will allow them to experience the process of academic inquiry, all the way through to dissemination. It will contribute to their development as an evidence-based practitioner and their appreciation of the use of inquiry to support innovation and creativity within their profession.

They will build on research skills developed at Level 5, enabling learners to design, plan, and conduct a research project with increased independence and critical insight. With the support of a supervisor and the module leader, learners will develop the skills and knowledge to communicate their research. The module aims to prepare learners to be an evidenced-based physiotherapist who can contribute to the development of the profession.

The assessment of this module consists of a written report (4000 word) and viva. The viva questioning and responses will be informed by a dissertation, presented in an established and agreed-upon project report format.

Complex Clinical Reasoning: Management of the Critically Unwell Patient (15 credits)

Module Leader: Robyn Osborne robyn.osborne@uwe.ac.uk

This module introduces the role of the physiotherapist in the management of the critically unwell patient. This module aims to:

- Develop learners' knowledge and understanding of the assessment and management of acutely deteriorating and critically unwell patients.
- Introduce the theoretical foundations and clinical application of physiotherapeutic interventions commonly used in acute and critical care settings.
- Advance learners' clinical reasoning skills in the management of patients experiencing acute deterioration or critical illness.
- Introduce the principles and practice of respiratory care for children and young people

The assessment is a case study presentation followed by critical questioning. This will allow students to demonstrate in depth knowledge and understanding and complex reasoning related to the management of a critically unwell patient.

Complex Clinical Reasoning for Musculoskeletal and Neurological Physiotherapy (30 credits)

Module Leader: Richard Smith richard22.smith@uwe.ac.uk and Paul Cunningham paul6.cunningham@uwe.ac.uk

The focus of this module is the development of clinical reasoning skills in the management of patients with complex musculoskeletal and neurological presentations. As a combined musculoskeletal and neurological module, management of patients presenting with a combination of musculoskeletal and neurological conditions will be considered, and skills used across the two areas of practice will be explored.

This module aims to develop advanced physiotherapy assessment and management skills that are relevant to patients with complex musculoskeletal and neurological conditions.

This module has one assessment task:

- A poster presentation and critical questioning. This assessment will encourage learners to develop their knowledge and understanding of both complex neurological and musculoskeletal conditions. It will require learners to synthesise and critically summarise information about the assessment and management of a complex patient presenting with a combination of musculoskeletal and neurological conditions.

Complex Clinical Reasoning: Exercise in Physiotherapy

Module Leader: Rowan Mitcham rowan.mitcham@uwe.ac.uk

This module will examine exercise physiology and how this is critical for exercise prescription. These concepts will then be applied to critically appraise how physiotherapists might use exercise to aid those with long term health conditions. This module aims to:

- Develop understanding of exercise physiology and how normal physiological processes are altered by prevalent long-term health conditions.
- Enable learners to analyse the impact of long-term conditions on an individual's physiology and functional ability.
- Equip learners to apply principles of exercise prescription and testing to design safe and effective exercise programmes for individuals with long-term conditions.
- Foster clinical reasoning skills by requiring learners to justify exercise prescription choices based on underlying physiological principles.
- Promote evidence-based practice through critical appraisal and application of current research on exercise prescription and training in long-term conditions.

This module has one assessment task:

- A presentation, this will allow learners to demonstrate in depth knowledge and understanding, complex reasoning and evidence-based critique.

Practice Education

Practice education is an indispensable and integral part of the programme. There is increasing diversity of physiotherapists' practice within health and social care, in terms of its setting (primary, intermediate or acute care), sector (NHS, social services, independent and private practice, industry or the voluntary sector) and patterns of teamwork (with individuals increasingly working with members of other professions and relatively dispersed from other physiotherapists). This means that a flexible approach as to how learners' learning in the practice environment is organised, delivered and recognised is required. It is therefore essential that the professional practice placements and their associated outcomes reflect this trend while providing the 1000 practice-based learning hours recommended for qualification by the CSP (CSP Learning and Development Principles - Principle 6 Practice Placements).

Learners will be guided by the practice placement and module learning outcomes to search for and capitalise on practice learning resources as they arise. The ability to transfer skills from one setting to another is seen as vital in health care today as is the need to place professional skills in the broader psychosociological context. Each professional practice module facilitates integration of theory into practice. It is anticipated that learners will develop new knowledge and skills in the practice environment, rather than merely consolidating what has previously been learnt in the University setting.

The practice placement outcomes have been aligned to the [HCPC Standards of Proficiency \(2023\)](#) and the [CSP Physiotherapy Framework: putting physiotherapy behaviours, values, knowledge & skills into practice \[updated May 2020\]](#). They build at each level to ensure progression to higher levels of learning by the end of level 6. The learning process is seen as a spiral continuum with the transfer of professional skills from one level to the next reinforcing and enhancing previous learning whilst learners add further skills as they travel from one practice area to another.

There are five professional practice placements of either five-weeks (placement 1 - 187.5 hours anticipated/maximum) or six-weeks (all others - 225 hours anticipated/maximum). The spread of these hours is at the discretion of the educator and their manager with due consideration given for the needs of the service users, workplace and service provision. If the placement includes late shifts or weekend work, this needs to be made clear on the Placement Environment Profile (PEP) made available to learners prior to the start of the placement (see [PSN website - Quality Assurance](#)).

If there is a bank holiday during the placement, the learner is not expected to attend on these dates, and the total anticipated placement hours are adjusted accordingly.

The learner must complete at least 75% of the anticipated hours to have done sufficient practice to be assessed. Unless there are unusual circumstances, eg a resit exam, there should be no requirement for learners to attend the university during practice placement periods. It is the learner's responsibility to agree any other anticipated absence (eg medical appointment, interview or wedding) with their educator before making any appointments.

Learners must pass all their placements to pass the relevant module and successfully complete the course. All placements are marked against the appropriate level practice placement outcomes using the relevant marking descriptors (within CPAF). However, only the marks for placements 2a, 2b, 3a and 3b count towards the degree classification. The marks for placements 1 are formative only.

All learners should gain experience in a range of settings and specialties including acute/hospital, MSK outpatients, rehabilitation/community and students are also likely to have a non-traditional placement. Models of supervision vary between placements and include 1:1, 2:1 and 2:2 or variations of these eg three learners with two educators. To provide the best possible work-based education for learners and healthcare for individuals, the integration of theory and practice through clinical reasoning and problem solving is fundamental and continuous throughout the programme.

On successful completion of all the practice placements, learners will be able to demonstrate the ability to:

- practice in line with the values and behaviours outlined in the [NHS constitution](#), [HCPC Guidance on Conduct & Ethics for students \(2024\)](#) and [CSP Physiotherapy Framework: putting physiotherapy behaviours, values, knowledge & skills into practice \[updated May 2020\]](#).
- adapt clinical and social skills to different practice environments.
- make independent decisions with appropriate justification.
- manage themselves and a caseload.
- work as part of a team recognising the roles of other health care professions.
- recognise the scope and limitations of their skills.
- take responsibility for continuing professional development.
- identify areas of service improvement and recognise the implications of change.
- be aware of current policy drivers and recognise the changing, potentially diverse roles within physiotherapy.

Placement Allocation

Most placements are in Avon, Gloucestershire, Wiltshire and Somerset and can be in a variety of settings, locations and specialities which may include acute NHS trusts, primary care settings and independent, voluntary providers as well as virtual/hybrid non-clinical opportunities to work in leadership, research and education.

The CSP encourages an emphasis on the overall profile of practice experience gained by individual learners, rather than the completion of specific practice placements demarcated along traditional lines ([CSP Practice based learning](#)). Key experiences may be acquired in different settings rather than the increasingly unworkable and inappropriate notion of core placements. Attention should be paid to patient pathways allowing learners to have exposure to richer learning experiences that cross boundaries in the way that patient journeys do.

Placement allocation is a complex process influenced by several variables including range of placements offered by practice, learners' previous placement experiences and any identified access or carer needs that we need to accommodate.

The provision of detailed and accurate information regarding the experiences available on the placement (PEP – Placement Environment Profile) can help this process. This should be provided and updated by the practice staff and is made available to the learner on the ARC system for placement allocation. Please discuss with your learner coordinator about getting access to ARCPEP to update this yourself.

The Role of the Educator

A lead educator is required if more than one member of staff is involved with the learner. This person is responsible for the organisation of the placement and to gain feedback from other staff to include in the halfway and final appraisals. It is suggested that it can be advantageous for the learner to be involved with several staff, but it is helpful to the learner if it is clear who the lead educator is.

What	How
Organise placement to allow optimum learning experience.	Learners appreciate an overall plan/timetable for their placements offering some protected time for teaching, discussion and feedback. An induction session at the start familiarises learners with local policies, expectations (eg punctuality, dress guidelines, communication) and protocols, eg how consent is gained to be seen by a physiotherapy learner, reporting absence process.

Facilitate setting of personal goals	Learners are encouraged to consider their own personal goals/aims for development for each placement on the CPAF. However, educator's experience and specialist knowledge are valued especially in ensuring the goals are Specific, Measurable, Achievable, Realistic and Timed (SMART).
Provide opportunities to meet the practice placement outcomes of the module	Identify the learner's learning needs/preferences and agree strategies to support these. The placement outcomes for each level are identified within the CPAF and opportunities need to be provided for the learner to meet these. Each placement environment/speciality will offer different learning opportunities, so forward planning is recommended prior to the placement to identify suitable opportunities for the learner and allow the educator to share their role with others.
Facilitate learning of professional skills, knowledge, attitudes, values	Some educators choose to protect time specifically for teaching sessions, where others prefer to use a variety of teaching/learning methods, eg workshops, demonstration during practice, setting tasks or assignments, question and answer sessions, shadowing etc. The programme team recommends a variety of techniques recognising the different preferences in teaching/learning styles of both educators and learners.
Continuously assess learners	To maximise learner performance/development it is vital to assess learners throughout the placement using the CPAF marking descriptors available on the PSN website. Observation, appropriate level questioning and open discussion early in the placement will help identify learners' previous experience, knowledge and skills as well as a baseline of abilities. Sharing of self-directed work and previous placement feedback by the learner is encouraged to optimise learning so agree the process for this at the start.
Provide constructive feedback to learners	To advance the professional development of learners it is vital to provide them with regular, constructive and supportive feedback. It is advised that you label sessions as 'feedback' so that this is obvious to them, eg end of each day or whenever suitable. A planned weekly feedback session on overall performance is recommended. Where several educators are involved with learner supervision, a file (electronic/hard copy) or email trail to note evidence for feedback from all those involved may be useful, plus an individual notebook for evidencing positive aspects and areas for practice development kept. Learners are encouraged to reflect on their own practice and self-assess throughout.
Liaise with UWE programme staff regarding learner progress and performance	Link tutors will contact educators prior to placement and arrange to meet (likely virtual) learners and educators for the placement support meeting, usually in week 3. If problems/difficulties arise at any point in the placement they may be contacted via email. Contact numbers for key staff are available on the PSN website if needed. If there are concerns at any stage that the learner's performance may not meet the practice

	placement outcomes within the placement time, please contact the link tutor for support and guidance as soon as possible.
Act as professional role model	The educator is a key person and a significant role model for learners. They should therefore model the values and behaviours outlined by the HCPC Standards of Conduct Performance and Ethics (2024) and the CSP Code of Professional Values and Behaviours (2019)
Formally assess learners at halfway and the end of the placement	As well as the ongoing continuous assessment, educators are asked to formally assess the learner at halfway and at the end of the placement by completing and discussing the relevant sections on the CPAF. The halfway assessment is an opportunity to outline areas of good practice, identify any areas for development and agree actions to address these during the remainder of the placement. All placements are marked and must be passed but only marks for placements 2b (level 5), 3a and 3b (level 6) contribute to the degree classification.
Recognise and address personal if appropriate	Educators may become aware of learners' personal problems. There are no expectations that educators manage these problems unless they have the appropriate skills and time. Your link tutor can support and advise on services available for learners at UWE or there are contact details for support services on the PSN website.

Educator Support

Key individuals within the programme team support the development, maintenance and improvement of an appropriate learning environment for learners on practice placements.

To ensure that the placement meets the CSP and UWE Quality Assurance standards an audit of placements takes place in a regular cycle. Through audit, the learning experiences available are recorded so that recommendations for future developments can be made. The lead educator must be registered with the HCPC.

Placement Support

A Link Tutor (LT) (a member of UWE programme team) is allocated to support learners on each placement. They provide the essential link between the placement and UWE. The LT is also the first point of contact for educators and learners on placement should queries or problems arise related to the learning process.

The LT will usually contact educators before the start of the placement. This is to agree date/time for the placement support meeting and set up communication channels for future contact if needed.

If you urgently need to contact the university regarding a learner and the link tutor is not known or available, you can find contact details for key staff on the [PSN website](#).

The LT will usually meet with the educator and learner once for each placement. Exceptions to this are where:

- either the learner or the educator requires further support, and the LT agrees that this is necessary.
- the LT feels that a further support meeting is required to support either the learner or the educator in the learning and/or assessment process.

The LT will normally:

- liaise with each educator independently from the learner/s.
- liaise with each learner individually.
- ensure that the placement outcomes (see CPAF) can be met.
- check that the learner is engaging in self-directed work effectively to support their learning and development and sharing this with their educator in a timely manner.
- address any concerns the learner and/or educator may have about the placement.
- facilitate feedback between the educator(s) and learner if necessary.
- support and advise educators throughout the assessment/marking process with reference to rigorous use of the marking descriptors.
- complete a record of the meeting.
- feedback to APT and/or physio placements team if necessary.
- address personal issues whilst on placement where able and/or direct learner to appropriate support.

Please contact the link tutor at any time during the placement if problems arise and advice or earlier/further support is required.

Placement planning guidelines

These suggestions are for educators to provide structure to the planning process. Learner feedback highlights how much they value and appreciate the structure and security of a timetable and clear guidelines on even the most obvious things (eg how to answer the department phone, and what details to take down for a message) as this varies considerably

between placements. Planning certainly pays dividends when it comes to placement success and achievement of the learning outcomes.

NB. Where learners have disclosed a disability, reasonable adjustments to the placement need to be accommodated. This information/report will be shared by the learners themselves following an access to placement planning meeting at UWE. If you would like more assistance, please contact one of the programme team (key contact details on [PSN Website](#)).

When planning for a placement, identify:

- staff who may be involved with the learners and liaise in advance.
- essential or desirable learning opportunities (eg clinics, surgery, case conferences/meetings), and Interprofessional working opportunities.
- any in-service training appropriate for the learner to attend, participate in, deliver.
- resources available, eg videos, articles/books, samples of patient notes.
- potential times for tutorials, observation of practice, feedback, and teaching and plan these in advance where possible.
- a selection of 'paper patients', questions or tasks for learners at an appropriate level that can be carried out with minimal supervision as contingencies. These may be useful if further evidence for assessment is required.

Plan how to:

- integrate the above, considering all supporting staff, clinics, travel times (where appropriate) and opportunities for reflective practice.

Pre-placement information

Below is an outline of the information that learners should receive prior to commencing their placement. This information should be included on the Placement Environment Profile (PEP) completed by team leads/educators, that the learners can access when placements allocated.

All learners are encouraged to contact their educator as soon as they know their placement allocation.

- Please check if the learners have any access needs or reasonable adjustments for placement. This is included on a report written by UWE Disability Advisor in agreement with the learner. The learner is advised that it is their responsibility to share this report with relevant academic and practice staff.
- Confirm with the learner where to report to on the first day, at what time and to whom.
- If not already known, confirm the name of the educator(s) responsible for the learner and their assessment. A lead educator should be named if there is a team.

- Confirm the learner's working times eg 8.30-16.30 Mon-Fri or any shift work.
- Clarify the anticipated type and amount of caseload during the placement including conditions commonly seen.
- Share any essential and desirable reading – please specify this clearly.
- Clarify the structure of the department and team within which they will be working including staff that they can access for advice/support if necessary.
- Confirm how to report sickness/absence during placement as well as informing UWE (see information on the PSN website).
- Confirm uniform requirements, eg if trainers are acceptable, will swimwear be needed, should they wear tunics, polo shirts or own clothes etc.
- Confirm what facilities are available – eg lockers, changing area, shower, canteen, shop, staff room.
- Share details of car parking and bicycle rack provision.
- Share details of education facilities eg library access, computer access, study area.

Induction and placement process

Induction Guidelines

These are designed to offer ideas to aid the smooth running of the practice placements and are not intended to be a prescriptive or definitive list of things to do. You may have your own ideas to enhance the settling in process. Remember, whatever it is you require of the learners be explicit from the outset to avoid misunderstandings.

Week 1

- **Orientation**
 - Orientate learners to department/hospital, eg lockers, canteen and library.
 - Introduce staff. Learners' value knowing the staff hierarchy and to whom they should report in your absence.
 - Orientate to department policies/documentation, eg Health and Safety, infection control, lone working.
 - Emergency procedures, eg fire escapes/alarms, emergency buttons.
 - Housekeeping, eg hours, breaks.
- **Getting to know them**
 - Ascertain previous academic, healthcare work and practice experience.
 - Explore their knowledge and skills base and learning style.
 - Discuss strengths/needs. For additional guidance/information on supporting Neurodiversity/Specific Learning Difficulties please see [PSN website](#).
 - Discuss perceptions and expectations of this placement; are they feasible?

- **Getting to know you**
 - Define your expectations, eg punctuality, professionalism, communication, time management, as this can vary significantly between placements.
 - Give clear guidelines about what to do should a problem arise.
 - Outline your 'style' and how you carry out your role as an educator, eg informal/formal, teaching sessions, observing practice, learner assessment and plan discussion, feedback times.
- **Placement information**
 - Discuss learning opportunities to meet placement outcomes.
 - Discuss conditions/pathologies to be encountered.
 - Familiarise with equipment.
 - Give guidance on appropriate reading material/revision guidelines.
 - Highlight opportunities for inter-professional working.
 - Provide a timetable, eg in-service training, board rounds, meetings.
 - Introduce routine paperwork.
- **Encourage learners to share the Learning Agreement section of their CPAF.**
 - Factors that might impact their learning, SWOC, some personal goals/aims ideas for discussion.
- **Discuss and finalise personal goals/aims.**

Personal goals are different from the learning outcomes of the placement but may be linked. The learner should identify the goals/aims, based on previous placement feedback and opportunities available, and draft them in a SMART format. The educator should ensure they are SMART and appropriate for that placement area.
- **Observe learners in practice regularly.**

This will help you to ascertain their current level of ability, development areas, support needed and the appropriate level of independence to allow.
- Set a date and time for the **halfway and final appraisals** (see below).

Week 2

- Continue to observe the learner(s) and supportively question their clinical reasoning to get a clear picture of strengths and areas for development. **Consistent and regular observation** of learners in practice is vital to the credibility of the assessment process and your feedback.

Reference to '**Bloom's Taxonomy of Learning**' may help you to evaluate the learner's level of ability and assist in the marking process (Appendix 2).

Week 3

- **Halfway appraisal (ideally this week but may be slightly earlier or later if necessary)**
 - This should be a formal, documented discussion with feedback that relates to the appropriate level learning outcomes.
 - It provides an opportunity for educators to reflect upon their own performance as well as the learner's.
 - Learners also need clear and constructive ongoing feedback throughout the placement.
 - Learners should also fill in their self-evaluation sections on the CPAF and bring it to the appraisal to facilitate discussion.
 - If significant weaknesses are identified and there is a risk of the learner failing the placement if performance does not significantly improve, this should be clearly documented on the relevant section (learning domain and/or professional behaviours) of the CPAF. Action points must be written to highlight the changes required to meet the learning outcomes of the placement and the link tutor should be informed.

Final Week

The completed CPAF and learner self-evaluation is discussed formally at the final appraisal, ideally on the final or penultimate day of the placement.

Practice Assessment

Continuous Practice Assessment combines both formative and summative methods of assessment. While only the summative method is used to decide the outcome of the placement, the formative feedback component helps learners reflect on their own progress and enables link tutors and academic tutors to facilitate this process.

All placements are assessed using the CSP CPAF. Please see information and guidance on the CPAF on the [CSP Website](#) (link on the [PSN website](#)).

This assessment reflects the *entire* period of the placement and is undertaken by the educator(s). It is also directly linked to the learner's self-assessment described below. The educator undertakes assessment and provides feedback in an ongoing formative manner and by the formal marking process using the marking and performance descriptors available on the PSN. The outcome and feedback are documented on the CPAF.

A formal halfway appraisal should be done with the learner to discuss their progress, provide constructive, formative feedback/bandings, and identify clear actions for development during the rest of the placement. This information should be recorded on the CPAF so that the learners are clear and can refer to it if necessary. The final appraisal should be done at the end of the placement and provide further written formative feedback including areas for future development.

The educator must sign/print name when prompted as verification of the placement result and hours completed. A random sample of educators for each placement may be emailed by the physio placements team to confirm marks/hours as an additional verification process; learners are made aware of this.

It is the learners' responsibility to submit the completed CPAF (whether passed, failed or a stopped early due to health) by the submission deadline as stated in the relevant module handbook and on Blackboard (learner intranet) under Practice Placement. Learners are advised to save a copy of their completed CPAF for their future reference.

Learners are expected to complete their sections on the CPAF and share it with their educator either before or at both the halfway and the final appraisals. It serves both as a reflective tool for learners and helps facilitate discussions with educators and/or the link tutor.

Learners are also expected to regularly complete self-directed work including reflections (See CPAF appendices) and clinical patterns sheets (see [PSN website](#)). They should share these with their educator for feedback and use them to reflect on and develop their practice.

Significant Safety or Professional Issues

The placement provider can stop the learner seeing patients or send them home that day if there are significant concerns for the safety of the learner, staff or patients if they remain on placement. This should be communicated to the university through direct contact with the link tutor, physio placements team or through the Practice Support Line. There is also an out of hours serious concerns line – see PSN website.

The University also reserves the right to withdraw a learner from placement; this must be approved by the Pro-Vice Chancellor and Dean of the College.

If there are significant safety and/or professionalism issues that are not resolving despite regular, clear and constructive feedback from the educator, including completion of the Record of Cause for Concern section of the CPAF and support from the link tutor, then stopping the placement may be necessary. It is more likely that adjustments to the learner's learning opportunities and supervision will need to be made until improvements are seen.

Practice Educator Development

Recommended Pathway for Physiotherapy Practice Educator Development

Educator Training Sessions

Dates and booking details available on the [PSN website](#).

For new educators prior to or new to leading with a learner on placement:

- Introduction - Provides essential information for staff new to being an educator prior to taking the lead with learners on placement.
- Assessment - Provides information related to assessment during practice placements, as well as the opportunity to review your own current practice.

For educators who have some experience leading on practice placements:

- Delivering Feedback - This session helps to developing skills in delivering feedback to learners, and covers the importance of feedback, opportunities for feedback, and best practice strategies for giving and receiving feedback.
- Overcoming Challenges on Placement - Provides participants with information and guidance on what makes a successful placement, how to recognise early indicators of problems and implement appropriate intervention strategies, and the impact of failing a placement on progression.

In addition to the physiotherapy specific educator training, UWE also offers several modules that educators may wish to undertake to complement their learning and knowledge.

- The [Supporting Students in Practice](#) (SSIP) module aims to provide an understanding of the principles of supporting learners in practice. The module is delivered as a self-directed, online, asynchronous module, allowing participants to engage with the learning at a time convenient for them. There are no timetabled teaching sessions, and it is expected that learners will take between 30 and 150 hours to complete the learning activities. This module is non-credit bearing.
- [Practice Learning and Student Support](#) (PL+SS) module is for learners who have completed the SSIP module and is designed to enable a range of healthcare professionals to enhance their knowledge and skills in supporting learners in practice. The module is an online, self-directed module, and can be studied at level 6 or Master's level (level 7), with learners awarded 15-credits on successful completion of the module assessment.

Practice Placement Evaluation

Practice placements are evaluated via a range of sources and mechanisms.

- **Learners**
 - After each practice placement, learners must complete an online placement evaluation via the Arc system. Any significant issues raised are discussed by the relevant programme staff and either discussed with the educator/student coordinator or noted for future reference if further concerns arise.
- **Educators**
 - Educators are asked to complete an evaluation after each placement. Your feedback is welcomed.
- **Physiotherapy programme team**
 - Relevant members of the programme team feedback via email or at programme meetings throughout the year. Feedback/evaluations are discussed by the physio placements team at meetings throughout the year, and actions/recommendations are included in module review meetings for all placements.
- **External examiner**
 - A sample of CPAFs from each level are sent to the external examiner to review and provide feedback to the programme team.

Other processes

Valuable feedback on the practice aspects of the programme is gained during the educator training sessions and from the evaluation of these sessions as well as in discussions at the annual coordinator forum.

Placement Administration

Occupational Health check and Enhanced DBS clearance

Learners all have an occupational health check on commencement of the programme and must have enhanced DBS clearance. They cannot go out on placement until this is in place.

Professional indemnity

It is the responsibility of each Trust to ensure that the necessary public liability insurance is in place which covers learners on placement from the university providing they are

supervised by appropriately qualified persons on placement. It is not mandatory for learners to join the CSP although this gives them greater professional and personal liability indemnity cover. It is not essential unless they need cover outside their scope of working as a physiotherapy learner. The programme team at UWE encourages learners to join the CSP but cannot insist.

Professional Code of Conduct

Learners are required to adhere to the rules of professional conduct of the CSP and HCPC.

Travelling

Whilst travelling, it is strongly recommended that learners, for professional reasons as well as health and safety, travel in their own clothes and change into uniform when they arrive. If this is not possible, uniform should be completely covered and worn for the minimum amount of time outside their placement.

Where students are using their own vehicle for placement, they are informed that they must make sure that they have appropriate insurance cover. This may include commuting insurance if they are driving to and from placement, and business cover if they are driving to multiple placement sites in one day.

Accidents on placement

If a learner is involved in an accident whilst on placement, they should complete an accident report form in line with the organisation policies, forward this to the practice area manager and send a copy to the relevant UWE Health and Safety representative.

Dress Code Guidelines

Most but not all placements will require learners to wear a uniform. Standard uniform consists of student grey smart scrubs as issued in level 4. They are advised to check the uniform requirements for each placement before they start. Learners can purchase white polo shirts with a physiotherapy logo from the Student Union. Whether they are required to wear uniform or not, learners should be aware that they will be meeting patients/clients, therefore their dress should reflect their professional position.

Appearance should be safe and hygienic and portray a professional image. See guidance below.

- Hair - should be of a tidy appearance and, if you have long hair, it should be securely tied back and off your face.

- Jewellery - should be kept to a minimum. Necklaces and bracelets should not be worn. If you have pierced ears, stud earrings should be worn. Any other visible piercings should be discrete and not compromise patient care.
- Watches - should be removed during patient contact. A watch pinned to your tunic may be preferable, but policies may vary so check local guidance.
- General appearance - all clothes should be well laundered and fit.
- Footwear - navy or black shoes should be worn with plain dark socks. Trainers may be appropriate in some areas but check first. Footwear should be kept clean and in good repair.

General Trust Policies

All learners must adhere to all relevant local policies whilst on placement including Health and Safety, Infection Control, Equal Opportunities, Safeguarding and Confidentiality/Data Protection. Learners should be made aware of these policies as part of an induction programme at the commencement of the placement.

Absence from placement

Any absence must be reported via the Practice Absence Reporting line (0117 32 83283) as well as directly to the placement.

If it is unplanned leave (e.g. sickness), the learner should inform the educator ASAP (as agreed in induction) and a message left on the UWE absence reporting line. If a meeting is planned for that day with the link tutor, they should be informed. If learners are off sick for more than 5 working days, we would recommend discussing the effect on their placement hours with the educator and Link Tutor.

If the learner is taking any priority planned leave (eg compassionate, interviews, special events), the expectation would be that this is discussed with the practice educator at the earliest opportunity to minimise inconvenience and disruption for the team/service.

Frequently Asked Questions

Before the placement starts:

I am due to support a learner on a placement. What information should I be giving to them when they contact me before the placement starts?

You shouldn't need to send learners individual information when they contact you other than where to meet on their first day and a contact number in case of any problems on day

one, as a profile of your placement (known as a Placement Environment Profile or PEP) should have been created by your team lead/learner coordinator. The PEP should include all the information that a learner needs to know in accordance with HCPC standards, such as uniform policy, shift hours and travel information, and is made available to learners when the placement allocation is released.

As a practice educator, it is useful to be aware of what is contained in your PEP (link with team lead/learner coordinator), and it should be regularly updated and checked at least 8 weeks prior to the next learner starting. We recommend asking you're a student in their last week of their placement to suggest changes and update the PEP then. If you need access to the PEP, please speak to your team lead/learner coordinator in the first instance.

Where can I get information about what the learners have been taught?

An overview of each module and an email for the module leader can be found earlier in this booklet.

What information can the university give me about the learner? Can they tell me how their previous placements have gone, or if they have a disability?

We will not give you any details of the learner's previous performance at university or on placement as this can introduce bias (both positively and negatively). You can ask the learner when they arrive, and we do encourage them to share openly with their educators, but they do not have to share this information with you.

Details of any disability are confidential, and we can only inform a placement with the learner's permission. We encourage our learners to disclose disabilities and share any helpful strategies either by themselves or via a UWE staff member. Any learner with significant access needs due to a disability or because they are the carer for someone with a disability will have an Access to Placement Plan (APP) which they are expected to share with relevant academic/practice staff.

How many placement hours does a learner need to complete?

It is expected that learners will be working 37.5 hours per week, completing 187.5 hours for a 5-week placement and 225 for a 6-week placement. The CSP currently recommends learners complete 1000-hours of practice-based learning as part of their programme, and UWE learners complete sufficient hours available over 5 placement blocks and observation placement.

Can learners have any time off for non-UWE related events during placement?

There are usually no official reasons for learners to have time off placement to attend UWE Bristol during placements, and any absence from placement is discouraged. Holidays are not acceptable reasons for missing placement. Occasionally learners will want time off for important events such as weddings, funerals, interviews, and unavoidable health appointments, and there can be times where some learners have resit assessments and require time away from placement to prepare for/attend these. It is up to the learner to decide if it is sufficiently important to miss valuable placement hours, and they should then inform their educator about this at the earliest possibility. If there are any doubts, please discuss them with the link tutor.

I'm planning my learner's timetable. What activities can contribute to practice-based learning (placement) hours?

Any activity that aids a learner's development and attainment of the placement learning outcomes can contribute to their practice-based learning (placement) hours. This may include face-to-face and remote patient contact but is not limited to patient facing activities. Practice-based learning (placement) hours may also be non-patient-facing activities, including self-directed study, simulation, project work, presentation preparation and delivery, peer reviews, observation, and other learning experiences. These non-patient-facing activities can contribute to practice-based learning hours where sufficient, appropriate evidence is provided of the activity/learning.

Self-Directed Work During Placement

The CSP do not provide guidance on the amount of time students should be given for self-directed work whilst on placement. Therefore, UWE in line with other HEIs, recommend that students are given up to the equivalent of a half day per week for self-directed learning (SDL) whilst on placement. This may be given as one half-day or spread throughout the week as suits the student, educator and service.

The SDL could include the following (not an exhaustive list):

- looking up and providing evidence of knowledge/understanding of conditions, interventions
- reflective practice: learning agreement (SWOCs, personal development plan), reflective pieces (see two templates appendix 3 of CPAF)
- completing the CPAF Learner sections for halfway and final appraisals
- presentation or project work
- evidence-based practice review: relevant standards, guidelines, journal articles
- participating in networking opportunities: email discussion groups (eg iCSP), social media professional networking groups (e.g., @weAHPs on Twitter)

The amount, timing and frequency of SDL will vary between placements and students and should be discussed and agreed between the student and educator at the start of placement based on the following considerations:

- Placement learning opportunities and caseload: some placements naturally have downtime within the day for students to do SDL.
- Learning needs of the student: most students benefit from SDL time for prep or consolidation throughout the day.
- If an Access to Placement Plan is in place that specifies any reasonable adjustments.
- Opportunities to complete SDL outside placement: some students have no other commitments outside placement (e.g. caring, financial, commute) and can complete SDL in the evenings or weekends so may opt not to use placement time for this.

Students are required to provide suitable and sufficient evidence of their agreed SDL in an agreed timeframe to enable up to half a day per week to count towards placement hours.

SDL hours cannot be completed during any period of absence (planned or sickness) or used to make up hours missed due to absence.

Please note placements that are fully or partly non-clinical (eg research, leadership, project) may have significantly more SDL as part of the normal placement expectations.

Is it a problem if I have leave booked during the placement?

This is not a problem although we would not recommend it if avoidable. It is also easier to manage if leave is not taken in the first, third or final weeks. It is preferable if the main educator is available for the Link Tutor support meeting to ensure that appropriate guidance and support can be given. It is also essential that there is an alternative qualified physiotherapist supervising/supporting the learner during the educator's leave and that clear lines of support/communication are agreed with the learner.

What lone working policy should the student follow when on placement?

When on placement, the expectation is that the learner would follow the lone working policy of the placement organisation/Trust.

Are there any guidelines for learners working in the community?

It is usual that learners accompany their educator/other staff for visits. Before learners undertake a community visit on their own, the educator and learner should discuss and agree necessary organisation requirements for the learner to meet – see suggestions below:

- The geographical location is deemed safe, the learner is certain of location and travel route, and the visit is during normal working hours.
- The records are checked by the educator to assess potential or actual risk from patients/families/environment in which they live.
- The learner has had the opportunity to gain as much information about the patient/client as possible prior to the visit and to discuss it with the educator.
- The learner is deemed competent within their scope of practice and is aware of organisation safety procedures/policies.
- The learner has shared with their educator the details of the visit, i.e. name, address, phone number, time, location and expected duration of visit.
- The learner has contact numbers and means of contact/backup, if needed, someone is identified to check in with them if their return is overdue, and they have a named person to phone to clarify that the visit has been safely completed, if the visit is undertaken without returning to the department.
- The learner knows what to do in case of emergency, personal safety and safety of personal property, behaviour in property and escape route.
- The learner has clarified the arrangements for the visit with the patient/client, stating reason for the visit, appointment time and exact location.
- The learner must wear an identity badge, where appropriate, and have access to a charged, functioning phone and a planned route.
- The learner has collected and checked suitable equipment.
- The learner has appropriate car insurance (business use) if using own car and should park their vehicle, if practicable, facing the return journey.
- The learner must assess risks beyond the patient/client, eg unsafe building, animals, other members of the public. If any of these give cause for concern, the learner should leave immediately.
- The learner should only enter premises when invited to do so, never allow doors to be locked, assess their exit from the premises, keeping their possessions nearby, and placing themselves with a clear line to the exit if possible. If at any time they feel threatened or unsafe, they should leave immediately.
- The learner, if an incident occurs, must complete the necessary procedures for their work area and inform the University.
- The learner is able to complete patient records in line with organisation/CSP standards and knows how to keep records safe in line with organisation policy.
- The learner is aware of the importance of not divulging personal contacts.

During the Placement:

How will the learner and educator be supported by UWE during a placement?

The week before each placement, there is a virtual drop in Q&A session run by one of the physio placement team that you can attend (no booking needed) if you have any questions or need to clarify any information. Details on how to access these sessions can be found on the [PSN website](#).

Both you and the learner will have access to a named link tutor from the physiotherapy programme during the placement. The link tutor will contact you in the weeks before the placement starts to arrange the placement support meeting with you and the learner, usually in week 3 of the placement.

When should I contact the link tutor?

The link tutor should contact you before the placement begins but please contact them if:

- you would like help with planning, advice, or support prior to the placement.
- you have concerns regarding the learner.

If the link tutor has not contacted you the week before the placement starts, or you are not able to reach them during the placement, please contact one of the physio placements team (see contact details under programme Support on the [PSN website](#)).

What usually happens in the link tutor placement support meeting?

UWE programme staff have different approaches to the halfway meeting, but usually the link tutor will usually want to talk to the educator responsible for the learner first. This is to find out how the learner is progressing, ensure sufficient support/feedback/learning opportunities are being provided, that your expectations and marking are appropriate, and to establish if any problems have been encountered. This is an opportunity for you to get clarification about any issues you may have relating to the learner or the course. The link tutor will then talk to the learner independently and will need to go through their goals for the placement and other self-directed work they should be completing, such as reflections and clinical pattern sheets. If any issues are raised by either the educator or learner, it may be necessary to meet to discuss and make an action plan.

Who should I inform if a learner is unable to attend placement and how do I record this?

It is the learner's responsibility to notify you of their absence from placement in the manner you have asked, and it is a good idea to establish the mechanism for reporting absence during their induction. As well as letting you know, they need to leave a message on the UWE Practice Absence Reporting Line (01173283283). Any absence should be recorded on the CPAF, checked and verified at the end of the placement. Completed placement hours are collated by UWE to monitor learner's total placement hours during their enrolment on the physiotherapy programme.

Do I need to let the link tutor know about absences?

You do not need to let the link tutor know about all absences, but if this is for an extended period, or there are issues with the reporting of absence, please contact the link tutor. There is a minimum number of hours that learners need to complete during each placement to be assessed (see earlier information), and where there is a concern that this may not be met, the link tutor can help you to manage the situation. If the link tutor has arranged the halfway meeting on a day that the learner is absent, please let them know.

Can the learner do additional hours if they want to, or extend their placement?

Learners cannot do more than the expected hours (187.5 hours for a 5-week placement, and 225 for a 6-week placement). This would unfairly advantage them compared to their peers as they will have longer to demonstrate their skills and learning.

Where learners have had absences and where this can be supported by the placement, they may make up the hours they missed. This might be done through extended days, weekend work, and occasionally through extending the placement dates. This is not expected of placement providers, and it is not possible where learners have timetabled teaching or would mean they are not able to submit their CPAF in time for the submission deadline. If this is being considered and/or you are concerned about a learner achieving the minimum required hours, please contact your link tutor for assistance in managing the situation.

What paperwork do I need to complete during the placement?

The Common Placement Assessment Form (CPAF) is used for all placements and can be accessed via the [PSN website](#). These should be completed electronically and signed/dated by the educator. A signature is preferred, where possible, to verify the hours and marks awarded for the placement and, where relevant, for learners to claim expenses back. A copy of the CPAF should be shared with the learner for them to submit to the university.

Do we need to give a percentage mark for each placement?

All placements are marked out of 100 using the marking descriptors within the CPAF for each placement (access via [PSN website](#)). Only placements 2a, 2b, 3a and 3b contribute to a learner's degree classification, so the others are formative only.

- Part 1 of the CPAF - Professional Behaviours and Responsibilities is pass/fail only.
- Part 2 of the CPAF – 10 Learning Domains each marked out of 100 at the end of placement and averaged to get overall placement mark.

Please refer to the CSP website resources available on the [PSN website](#) and [CSP Website](#) for guidance on the marking process. If there are significant or repeated concerns regarding safety or professionalism despite feedback, you should complete a Record of Cause for

Concerns form (appendix 1 of CPAF) and discuss this with your Link Tutor, so that they are aware and can advise and support you as necessary.

Appendices

Glossary

Award	A university qualification granted to a learner for successful completion of prescribed and assessed learning at a specified level confirming with the relevant provisions of the Regulations.
Award Board	The body of approved examiners constituted in accordance with the assessment regulations and solely responsible for making decisions on learner's performance for the award of credit or for recommendations for awards of the university.
Field Board	The body of approved examiners constituted in accordance with the assessment regulations and solely responsible for the award of credit.
Field	A group of related modules within the University Modular Scheme. A field may represent a subject or disciplinary area, or group of disciplinary or professionally related modules, within which learning, teaching and assessment are organized. All modules are assigned to named fields.
Formative	Pertains to ongoing assessment/feedback which supports learner development throughout the placement. Does not form part of the formal module assessment.
Level	Equates to the level of the programme, eg Level 4 = 1 st year, Level 5 = 2 nd year, Level 6 = 3 rd year.
Module	The smallest sub-division of teaching and assessment within the University's Modular Scheme for which credit is awarded.
Programme	Previously: award or course. The programme constitutes all modules and levels that contribute to the award.
Summative	Final marked assessment and feedback on completion of the placement – formal assessment of a module.

Bloom's Taxonomy of Learning

Psychomotor Domain (Practical Skills)

- Cognitive Phase – The skill is perceived and intellectualised.
- Fixation Phase – The skill is performed slowly and deliberately.
- Autonomous Phase – A more co-ordinated, natural and automatic performance.
- Mastery Phase – 'Slick', dextrous, highly skilled.

Cognitive Domain (Knowledge)

- Knowledge = recall of facts.
- Comprehension = understanding of principles.
- Application = applying acquired knowledge and principles.
- Analysis = organisation of ideas.
- Synthesis = formulation of ideas using applied and analysed knowledge.
- Evaluation = judgement of ideas.

Affective Domain (Attitude/values)

Values and Attitudes eg areas such as:

- Care and compassion; Dedication; Dress and hygiene; Politeness; Personal integrity; and Professionalism

Knowledge of Bloom's Taxonomy of Learning may assist you to:

- Identify entry behaviour of the learner.
- Set suitable level objectives.
- Analyse learner performance more objectively.
- Formulate constructive feedback.
- Improve validity and reliability of assessments.
- Provide a suitable and flexible clinical environment to maximise learning and professional development.

Relevance to Educators:

- Certain judgements must be made regarding practical abilities, background knowledge and attitudes.
- Judgements are most valid if awareness exists of depth of learning and necessary stages of learning.
- Expectations are adjusted according to level of training, previous experience and opportunities to practice.

(Bloom, 1956)