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**School of Health Sciences**

**Physiotherapy**

**Practice-based Learning Handbook**

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# Introduction

Welcome to practice-based learning. The term **Practice-based Learning** is used to describe the placement-based aspect of physiotherapy pre-registration student learning. This handbook is designed to be used by students studying any of the pre-registration physiotherapy programmes in QMU

The purpose of this handbook is to bring together the following information:

* An overview of practice-based learning
* An overview of roles and responsibilities of the student and supporting staff while on placement
* Information on content and structure for each programme
* An insight into the expectations of practice-based learning.

In the same way as university-based modules, the Hub@QMU plays a crucial role in the support of students’ learning and in the storage of relevant information. There is one generic practice-based learning Hub site which will have information common to all students, as well as programme and level specific areas. This must be read in conjunction with this handbook.

Information on geographical locale of specific placements is not included in this handbook, but can be accessed via the Hub alongside copies of the relevant placement assessment forms and details of any additional assessment or university based activities.

Whilst perhaps not reading it all at once, students are required to read the content of this document and should be able to access it throughout their practice based learning placements.

The PBL team wish all students well in their studies, and hope they find practice-based learning both stimulating and challenging.

# Introduction to practice-based learning

Placements are full-time blocks of study in a variety of speciality and geographical areas. Across the board the placements will be varied, each with their own unique challenges and flavours. Through each placement students will be supported by one or more Practice Educators - an experienced member of staff who will act as mentor, facilitator, and assessor. Historically these individuals have been termed “supervisors” but this term wholly underestimates the complexity of the role they will have in students’ learning and professional development and they are now known as Practice Educators (PE).

Your first experience starts with a two-week foundation placement which allows students to view the professional and clinical world, giving some exposure to key professional issues. You will then complete four 5 or 6 week placements and an elective placement

The typical placement pattern is shown below – but this can be subject to change depending on placement availability.

|  |  |
| --- | --- |
| MPhys or BSc programme | Year 1: Foundation placementYear 2: Placement 1Year 3: Placement 2 and 3Year 4: Placement 4 and elective  |
| MSc pre-reg programme | Year 1: Foundation placement and placement 1 and 2Year 2: Placement 3, 4 and elective  |

The practice-based Learning (PBL) programme is designed to allow the student to work towards independent practice and learning as the course develops. The learning outcomes for the 4 longer placements are completed with set ‘Attributes of performance’. For MPhys and BSc students these levels increase as the progress through their course. For MSc pre-reg students these placements are all at the same level – equivalent to that of the level 4 learning outcomes within the BSc Honours or MPhys Physiotherapy Programme. It would be impossible for a student in the early stages of their professional development and learning to be able to demonstrate professional “mastery”.

# Learning on placement

The practice-based learning programme will require the student to develop and demonstrate a range of professional physiotherapy skills, which will be assessed by a qualified physiotherapist. Students are also assessed on their professional behaviour in line with the standards of conduct, performance and ethics (HCPC, 2016). In addition, there may be other activities, dependent on the programme and stage, which will be used to deepen learning and professional development.

# Practice Based Learning Team (PBL)

The QMU PBL team comprises of a Module Coordinator, **Janet Thomas** **(**and **a vacant post),** Placement Administrator, **Monika Czudowska,** and the **Physiotherapy Programme Team** as Personal Academic Tutors.

The module coordinators are responsible for the day to day running of placements and have considerable clinical, educational, and practice-based learning experience.

If students have any concerns or points of discussion that they feel they cannot discuss with their practice educator, then they should contact QMU. The first line of contact will be either through Monika Czudowska, the placement administrator, who will pass the student to the required person or alternatively, contact your Personal Academic Tutor.

**Contact Methods**

**The preferred method of contact is by email – however, if a more urgent response is required, telephone contact can be considered.**

If students cannot reach Monika Czudowska they should contact either their Personal Academic Tutor or the placement coordinator **Janet Thomas**

# Placement models

Placement models relates to the structure of supervision provided at the placement site by one or more practice educators. Different models of supervision may be used providing flexible, supportive, innovative and varied learning/teaching experiences for both Practice Educators and students.

These include:

* **1:1 model** – one practice educator to one student
* **Peer assisted learning (PAL) model** - when one practice educator supervises two or more students.
* **Two practice educators supervising one student** - one practice educator may take the leading role.
* ‘**Split’ placement** – this may be either over the working week or the placement site/ service changes half way through a full time placement.
* **Part time practice educators**- this would be similar to two practice educators, as students will require access to someone in a supervisory capacity in the practice educator’s absence.
* **Long arm supervision**: Some of our emerging practice placements have an element of long arm supervision, whereby you will be remote from your educator for one or more days of the placement but in contact via phone / Email or similar

# Module Descriptors & Staged Learning Outcomes

The Attribute of Performance and Marking Criteria change dependent on the Year and Level of Placement. Full module descriptors are available on the Hub

**It is the student’s responsibility to be familiar with the module content**, **particularly with regard to the aims and learning outcomes for each placement.**

Students are asked to complete pre-placement planning activities to identify strengths and areas for development, preferred ways of learning and SMART goals. This allows for scaffolding of learning for each placement and provides a basis for structure of your learning in agreement with the practice educator.

# QMU based learning

Practice-based learning does not stand alone but is integral to, and supported by, the university-based studies. Throughout the programme there are times when the student begins their practice based learning within set preparation classes and also returns to the class room bringing with them learning and experiences from the practice setting.

# The Practice-based module team

At present, the QMU practice-based team who will have involvement with students during practice-based learning, consists of Janet Thomas and Monika Czudowska. A basic outline of the teams duties are provided below, with more detail provided later in the handbook under “roles and responsibilities”

**Monika Czudowska is** the Placement administrator for Physiotherapy

Contact: **PhysiotherapyPlacements@qmu.ac.uk** **in the first instance**

Her personal email is MCzudowska@qmu.ac.uk

**Janet Thomas** is the academic placement co-ordinator for all **physiotherapy placements** and works at QMU on Tuesday and Friday.

Contact: jthomas@qmu.ac.uk

The School Office deals with pre-placement issues such as Health Clearance checks, uniform and mandatory preplacement requirements such as professional body membership for professional liability insurance.

# Student responsibilities in relation to Practice-based Learning

**Students must at all times pay cognisance to their responsibilities within practice-based learning. Failure to do so will adversely affect their placement experience and learning and could lead to failure and, ultimately, termination of placement.**

**The student is responsible for:-**

* Ensuring adequate funding is in place to support attendance at placement
* Adhering to the HCPC Code of Conduct, Performance, and Ethics (2016)
* Adhering to all relevant placement site policies and procedures
* Ensuring they have professional indemnity insurance in place via student CSP membership
* Ensuring the patient has consented to participate in their learning
* Ensuring the Practice Educator has countersigned their records of the patients’ assessment and treatment.
* Notifying the placement site of any absence due to illness at the earliest possible time
* **Informing** **PhysiotherapyPlacements@qmu.ac.uk** **immediately of any absences from placement AND on return to placement**
* Informing PhysiotherapyPlacements@qmu.ac.uk of any update required on placement information held on the Hub.
* Obtaining medical certification for all sick leave of more than 5 days or self-certifying shorter periods of sick leave via the student portal.
* Informing their Personal Academic Tutor [PAT] of any issue that may be impeding development and learning on placement.
* Attending the placement during the appointed time and date.
* Respecting the other demands placed upon the Practice Educator and working co-operatively with them.
* Discussing any possible anticipated absences from placement with the Practice Educator, Module Co-ordinator and Programme Leader/s (planned absence may be permitted only in exceptional circumstances).
* Discussing any issues regarding the format and content of the placement with the Practice Educator

# Placement Specific Responsibilities

**Prior to placement**

* Complete your Placement Passport
* Arranging accommodation as required
* Contacting the placement site at least three weeks before the placement is due to start (Minimum of 4 weeks if an ILP is in place)
* Accessing placement information held on the Hub
* Undertaking all required placement preparation
* Ensuring appropriate uniform/equipment is available for placement
* Arranging IT access and training as applicable following information for your location on the Hub
* Ensure you have thought about your goals for the placement and how you can best achieve these.

**During placement**

* Advising personal academic tutor **by the end of week 1** of placement of contact details for placement telephone tutorial (Practice educator’s name, email address, telephone number, date and time for contact to be made).
* Advising Practice Educator as to contact details for personal academic tutor.
* Informing personal academic tutor of any issue that may be affecting learning on placement
* Taking part in any relevant Hub- based activity.
* Collecting evidence for any associated placement assignment.

**At the end of and after placement**

* Ensure the assessment form is fully completed and that your available and completed clinical hours have been signed off by your practice educator. Note your lunch break is not included in your clinical hours. A standard 37.5 hour week equates to 225 hours over six weeks, not 240.
* Ensure your form is clearly marked with your name and Matriculation number.
* Returning any borrowed learning materials to placement site.
* Completing the online placement evaluation – linked from the Hub.
* Submitting Placement Assessment form to correct Atlas area on Pebblepad by the detailed deadline (5 working days following placement)

# Other roles and responsibilities

**The Practice educator is responsible for:**

1. Orientation of the student to the placement;
2. Facilitating and managing the students learning by considering the context in which the learning takes place (learning environment);
3. Selection of appropriate patient case load with attention to relevance of range and taking account of the staged learning outcomes and student competence;
4. Provision of feedback throughout the placement;
5. Student performance evaluation at mid-placement and end of placement with explicit guidance and support given to aid future development;
6. Complete the Practice-based learning assessment form, with a view to the appropriate learning outcomes for the stage;
7. Maintaining contact as appropriate with the QMU Lecturer or placement co-ordinators;
8. Participating in meetings between clinical sites and QMU as relevant;
9. Review mid-placement review report as detailed by student;
10. If the students is felt to be failing or there are issues which could indicate a possible fail at mid-way, a written statement should be undertaken to ensure the student is aware of the issues- this should be included in the assessment documentation;
11. Communicating with the liaising QMU Lecturer (PAT) where a student is identified as failing to achieve a satisfactory standard at the mid-placement assessment;
12. Providing students with up to date knowledge of practice;
* Countersigning student records.

**The Site Manager is responsible for:**

* Facilitating placements within area under their management including ensuring the responsibility of staff to act as practice educators in all senior job descriptions;
* Actively seeking new placement opportunities alongside new care delivery developments;
* Fostering a culture whereby placements are seen as a positive activity contributing to staff CPD and recruitment within the department;
* Ensuring staff acting in capacity as practice educators have adequate training and updates;
* Responding to placement requests and placement confirmations, where possible, within the timescale identified. If not possible, to inform Co-ordinator and decide appropriate deadlines;
* Distributing the results of the student feedback evaluations to staff concerned;
* Appropriately responding to issues raised within the Student feedback evaluation;
* Offering alternative placement arrangements in the event of a placement cancellation when reasonably practicable;
* Bringing to the attention of the Co-ordinator as soon as possible potential difficulties which may result in the cancellation of a placement;
* Offering pastoral support as required to students and practice educators;
* Bringing to the attention of the contact PAT any issues creating difficulty on placement which may not be reported by the practice educator or student;
* Ensuring the student completes an induction of the clinical department/unit within the first week of placement (including health & safety);
* Ensuring the student has access to Trust/Site policies and procedures.

# QMU placement coordinators

**Janet Thomas –** Placement coordinator for placements for all programmes

**QMU Placement Coordinators are responsible for:**

* Development of practice-based placements with a view to ensuring sufficient range, quantity and quality to support the pre-registration programmes offered by the subject area
* Communicating with site managers and placement co-ordinators as required in the support and development of placements
* In collaboration with the sites, securing sufficient placements to supply the student number for the forthcoming range of placements
* To allocate the placements to the students ensuring as rounded and fair allocation as possible
* Ensuring Practice Educators are kept up to date with any proposed changes;
* Ensuring the annual review of practice based learning takes account of the issues raised through feedback from Personal academic tutors students and clinical sites
* To communicate allocation of placements to students and to clinical sites
* To respond to issues raised by students through their feedback survey
* To raise issues causing concern from student feedback to the sites as appropriate
* To collaborate with other partners e.g. NES in the development of practice-based learning
* To support Personal Academic tutors as they act as first point of contact for both students and practice educators on placement.
* As placement module co-ordinators to validate and supply assessment data for examination boards
* To update all placement related materials within the various media utilised

***Personal Academic tutors are responsible for:***

* Contacting the practice educator approximately half way through a placement to initiate a conversation about the student’s progress.
* Responding in an appropriate manner to any concerns raised
* Liaising with the PBL coordinators as necessary to follow up any concerns.
* Arranging a follow up call or visit in response to any concerns during the placement.

***The placement administrator is responsible for:***

* Distributing and then collating the placement offer forms from all placement sites
* Liaising with the local coordinators with regard to collation of placement offers and any ongoing changes
* Fielding any enquiries around the administrative aspects of practice based learning
* Being a point of contact for students on placement to report absences from placement
* Collating the placement checklists and placement information from each placement site

***The School Office is responsible for:***

* Checking and countersigning Protection of Vulnerable Groups scheme record membership applications (ensuring that all have been received prior to placement.
* Organising and coordinating Health Clearance Appointments prior to students commencing placement
* Ensuring that students have appropriate Professional Indemnity Insurance prior to placement – this is most usually obtained via a Chartered Society of Physiotherapy Student membership.
* Organising provision of name badges and NHS Scotland student uniforms to students
* Providing secretarial support to the Health Sciences Practice placement Committee

# Health and personal issues

Students may present with a range of health issues. Below are examples of the consequences of such issues that may warrant a referral to a medical practitioner for an assessment.

* The student is regularly unable to work a 37 ½ hour week whilst on placement
* The student is unable to engage in all/some manual handling activities
* The student’s potential performance on placement is significantly compromised
* The student’s health issue poses a potential risk either to patients, service delivery, to colleagues/staff members, or the student themselves, whilst on placement

Any student experiencing health and/or personal issues prior to commencing a placement should make an appointment to meet with their Personal Academic Tutor. The Personal Academic Tutor and student may collaborate to develop a course of action in order that appropriate support measures and/or reasonable adjustments are in place for the duration of the placement. This may involve the Programme Leader, the Physiotherapy subject area learning plan co-ordinator, the Student Councillor, and the actual placement site as required.

Following a discussion with the student, the Programme Leader may recommend the student consults a medical practitioner in order to obtain a full medical assessment on whether the student is able to commence the placement. A supporting medical certificate must be obtained by the student and forwarded to the Programme Leader.

If the student is unable to commence a placement, it will be deferred and the student will undertake another placement once they are in sound health. This may be subject to confirmation of fitness to practice by a medical practitioner

If sickness or other circumstances are affecting the grading of the placement this must be discussed with the student’s Personal Academic Tutor and documented. If the student is on placement, and chooses to remain on the placement, then the grading criteria must be adhered to and no allowances can be made which result in the required standards being unmet.

Students developing a health issue during placements that impacts on their performance are advised to discuss their situation with the Practice educator and their personal academic tutor. The Practice educator and personal academic tutor may recommend that the student consults a medical practitioner to obtain a supporting medical certificate providing confirmation of the student’s current health status and forward this to the Programme Leader. This may result in the placement being deferred, with the student commencing another placement when they are in sound health, as a first attempt.

# Voided or deferred placement

Where a placement is voided or deferred due to ECs or similar then the next placement undertaken will be the replacement for the voided or deferred placement and marked at the level of the original placement. It will be the **student’s responsibility** to explain to the practice educator that they had avoided or deferred placement (although there is no expectation that they should disclose any reasons for this) and are now ‘catching up’ on their placements.

# Absence from placement

There is a programme specific regulation that states

***To be eligible to be assessed for a practice-Based Learning placement, a student must normally complete 100% of the stated available placement hours***

In general you are expected to attend for all the available hours on placement and your attendance hours will be monitored. However it is recognised that there will be occasions when attendance at placement would be not advisable due to ill health. In this case you should NOT attend placement until fit to do so and supply either a self-certification form (on the Portal) if absent for 5 days or fewer or a medical certificate if you are absent for over 5 days. You may still be permitted to be assessed for placement if your absence has not significantly impacted on your placement learning experience and outcomes (usually seen as sickness absences totalling 6 days or fewer on a 6 week placement). If you have 3 absences for sickness (either within a single placement or cumulatively over the course of all of your placements) you will be asked to attend a meeting with relevant university staff (Your PAT, the programme lead and / or module coordinator as appropriate) to discuss these absences and make relevant plans as appropriate.

If you are aware of an expected absence on placement (examples in the past have included attendance at a funeral or an international sporting commitment) this MUST be discussed with the module coordinator AND programme lead as soon as possible prior to the absence. If your absence is agreed, then the hours not at placement will not be counted as available placement hours. Such absence requests will be assessed on an individual case by case basis by the University staff and you must abide by the decisions made regarding attendance at placement. Failure to do so will be seen as unprofessional behaviour and result in a Fail in that component of your placement assessment. Should a student’s absence on placement bring them below this 100% target, discussion will be held between the practice educator, the personal academic tutor and the module co-ordinator to decide the course of action.

**It is the students responsibility** to ensure that any absence that is agreed with QMU is also discussed with your educator to ensure that it doesn’t place additional demands on your placement (such as rescheduling patients) prior to the absence. If you become aware your absence would cause issues at the placement site you must discuss your absence further with your PAT, programme lead or module coordinator.

Absences due to required meetings, examinations or attendance at assessments within the University will not be counted as available placement hours. For examinations etc. this will be for the day of the exam only and further absence MUST be discussed with QMU.

Students are reminded that in all instances you may wish to consider whether extenuating circumstances regulations are applicable and would be more appropriate for your circumstances regarding placement absence.

# Professional conduct and behaviour

All students on placement are assessed on their professional conduct. The assessment of this is based on the HCPC Code of Conduct, Performance and Ethics (2016). A document produced by the Health and Care Professions Council helps to place this document more clearly into the context of the role of the student and how this may take force within practice-based learning – HCPC Guidance on Conduct and Ethic for Students (2016).

It is the student’s responsibility to be aware of this code of conduct and to adhere to it. On placement this section will be marked on pass / fail in accordance with the aspects of the code. If a student is deemed to fail this part of the assessment the overall mark for the placement will be a fail. Prior to a decision being made with regard to failing a student in this area, it must be discussed with a member of QMU staff before completion of the placement.

Students should observe and recognise the limits of their level of competence, as they have a legal duty to be clear regarding competence if asked to do tasks beyond current ability.

The nature of the work undertaken by students and the conditions to be met for registration with the Health and Care Professions Council on graduation, require specific standards of conduct and behaviour associated with professional status and practice.

During practice-based learning, students are required to abide by the principles of and the procedures adopted by the particular authority. Students must comply with arrangements specified and/or negotiated with their practice educator and other relevant personnel. They should conduct themselves, and undertake agreed work, in a manner commensurate with their student status, respecting the rights of patients/clients and their carers. Students are also expected to co-operate with practice educators, physiotherapy staff, members of the multi-disciplinary team and university staff.

Examples of professional unsuitability include:-

* Conduct that could bring into disrepute the profession of physiotherapy and its allied professions and/or is prejudicial to the best interests of patients
* Breaches of confidentiality, misuse of confidential material relating to a service user
* Inappropriate emotional involvement with patients
* Serious negligence, which causes unacceptable loss, damage or puts the health and safety of patients, staff or visitors at risk
* Theft, deliberate misuse or damage to equipment or materials
* Incapacity for work due to the influence of alcohol or use or possession of illegal drugs
* Inadequate application due to poor motivation and/or to ill health.

Students will be referred to the Code of Conduct, Performance and Ethics (Health and Care Professions Council 2016) and reference made to the appropriate sections

# Points of Guidance for failure and/or early termination of placement.

Due to unprofessional behaviour or unsafe practice.

**Informal stage**

The student’s practice educator should discuss areas causing concern and requiring improvement with the student, setting an improvement action plan and a date for follow up discussion. Contact should be made at the earliest opportunity with the students Personal Academic Tutor (PAT) and the process within the ‘record of warnings’ section of the assessment form followed. It is vital that an action plan is developed and discussed with the student and PAT. This must be shared in a written format with the student who countersigns the record of warnings alongside the educator and PAT.

If this does not remove the concerns about professional suitability or patient safety, the practice educator will discuss the matter further with the student and the personal academic tutor, indicating the nature of the concerns and specifying an improvement period. This discussion may also involve the module co-ordinator and programme leader. In some circumstances specific action may be required, for example, production of a medical certificate. This will be recorded on the student’s placement assessment form and will be signed by the practice educator as well as the student. It is imperative that the University is notified as soon as concerns are identified.

In order that students are given reasonable opportunity for improvement, the improvement period should be determined, taking into account:-

* the time by which the student can reasonably effect an improvement
* the practice educator’s need to make a suitable assessment of the improvement
* the likelihood of any reoccurrence
* Any other factors relevant to the individual situation.

**Formal stage**

This stage is for those behaviours that have not been resolved by the actions taken in the Informal stage. The module co-ordinator and the Personal Academic Tutor will refer the issues that have arisen to the Programme Leader, if this has not already occurred. At this point the student may be required to take time out from the clinical placement, or the placement terminated, if deemed irretrievable.

During the final stages of the placement, if the behaviour is deemed sufficiently significant, or remains unresolved, the student will have deemed to have failed the sections within the placement assessment form relating to Professional behaviour. As such this overrides all other assessment and the placement is recorded as a fail.

However, if there are concerns regarding professional unsuitability remaining, then further action may be considered, including reference to the Queen Margaret University Fitness to Practice Policy.

# Fitness to practice policy

The Fitness to Practice Policy was approved by University Senate in 2009. More information can be obtained on the QMU Quality Website

##

## Discontinuation of placement

It is hoped that termination of a placement, once started, is a rare event. However it can occur and the Practice Educator may be unable to facilitate a placement for a variety of reasons such as:-

* The placement becomes untenable and a pass unachievable because of either repeated unsafe practice by the student within the placement area, or repeated breaches by the student of the HCPC Code of Conduct Performance and Ethics (2016);
* Staffing shortages;
* Outbreak of infectious disease;
* Other hazards that pose a risk to the safety of the student and others;
* Student performance causing concern
* Demands within placement site that result in placement support being untenable

Where this is the case, placement providers should immediately notify the University and highlight their concerns at the earliest opportunity to either the students’ Personal Academic Tutor or a member of the PBL team. An appropriate action plan will be developed taking account of the reasons for termination of the placement e.g. either support the continuation of the placement, or, if appropriate, find an alternative placement for the student.

Possible actions taken to support the current placement might be:-

* The placement continues with extra support from the placement provider and the University;
* Another practice educator is able to facilitate the placement for the student in the same practice area;
* Another practice educator is able to facilitate the placement for the student in a different placement area;
* The placement is terminated to be undertaken at another time dependant on decisions made by the relevant Examination Board.

In the instance of a pass standard being unachievable, resulting in a placement failure, consultation between the student, the Personal Academic Tutor, the module co-ordinator and the programme leader will take place to identify the most appropriate way forward.

# Failing a placement

When a placement has been failed then the next available placement will become the Diet 2 placement and be marked at the same level of attributes as for the failed placement. Due to the demands of the timetable and placement availability then the next available placement may either be an extra summer placement or the next scheduled placement. The Diet 2 placement will not necessarily be in the same clinical area as the failed placement.

# Complaints procedure

The University has implemented a new Complaints Handling Procedure which can be found here: <http://www.qmu.ac.uk/quality/gr/default.htm>.

The Procedure has three stages: frontline resolution, investigation and external review.  If a student has a complaint, they should discuss this with someone in the area which the student wishes to complain about (for example, for a complaint relating to Physiotherapy, this should be discussed with the Programme Leader or Module Coordinator for the module concerned).  The complaint will be considered under frontline resolution (unless complex) and a response will usually be given within 5 working days.  If the complaint is complicated, it is the student’s choice to take it to investigation stage immediately or it may be referred to the investigation stage by the person the student determined to discuss the complaint with at frontline resolution.  Should the complaint be considered under the investigation stage, a response will normally be received within 20 working days.

Any queries about the complaints procedure or any complaints written on the Complaints Form may be emailed to complaints@qmu.ac.uk

# Patient’s consent to treatment

Gaining a patient’s consent to treatment is a fundamental aspect of practice. The HCPC Standards (2016) states ‘You must make sure that you have consent from service users or other appropriate authority before you provide care, treatment or other services’

The HCPC Guidance on Conduct and Ethics for Students (2016) expands by indicating that this is a 2 stage process-

*You should make sure that before you carry out any intervention that the service user is aware that you are a student*

*You should make sure that the service user has given their permission for the intervention to be carried out by a student*

# Countersigning of patient records by Practice Educator

As a student on placement all patient records that you document must be countersigned by the supervising therapist

**It is the students’ responsibility to ensure that the Practice Educator signs the patient records.**

Accurate record keeping is an essential part of providing care and you must keep records for everyone you care for, treat, or for whom you provide care or services to. You must complete all records promptly and as soon as possible after providing care, treatment or other services. If you are using paper-based records, they must be clearly written and easy to read, and you should write, sign and date all entries

# IT access during placement

Most NHS Boards now have electronic health records and students are given IT access by the Board in order to access these records.

You must check if this is required for your placement and follow the information on the Hub regarding any forms to be completed and sent back or training to be undertaken. If you have to return forms in most cases these need to be **completed up to 6-8 weeks** prior to your placement start date. If you do not complete these in sufficient time then your placement experience may be compromised by your inability to access health records or electronic notes on placement.

Most NHS Boards operate a system call ‘Fairwarning’ which monitors your IT usage and will determine if you have accessed records which you have no clinical need to access. These may include your own health record or those of friends, family members or neighbours. The penalties for accessing these records and breaching the Fairwarning system can be severe and may include removal from placement amongst other disciplinary procedures. You will be referred to the QMU Fitness to Practice panel.

# Placement expectations

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# Insurance requirements

Due to professional requirements, students on Nursing, Allied Health Profession and Healthcare Science qualifying programmes are required to hold professional indemnity insurance as a pre-condition of progressing to placement. This is most easily gained through the joining of the appropriate professional body, and information on this will be provided during the induction process into your programme.

This insurance is part of your student membership of the Chartered Society of Physiotherapy and this **must** be in place prior to any placements commencing.

Students using their own car to travel during placements must ensure they hold the correct level of car insurance, **usually business cover**. Using your car during the working day on placement rather than only commuting to and from the placement site will require an enhanced level of insurance and you must check with your insurer that you have the correct level of cover.

# Placement locations

Due to the large number of placements required each year students undertake placements in locations in all regions of Scotland. Placements cover as wide a range of learning opportunities as possible. **All students are expected to undertake placements involving significant travel across Scotland and/or moving into temporary accommodation.**

# Attendance records during placements

In order to meet standards established and monitored by professional bodies it should be noted that by the end of the programmes students must have successfully met the learning outcomes of each of the placement modules and have accrued approximately 1050 hours of practice-based learning education.

**In both programmes students must attend the placement for 100% of the available hours of that placement to be eligible for assessment.**

If difficulties arise with placement hours there should be timely discussion with the practice-based learning Team. Students must keep detailed records of their placement hours and are responsible for ensuring this is recorded on the front of the assessment form come the end of the placement. This is then agreed and countersigned by your educator. Placements are full time usually mirroring your educator’s hours. Full time in the NHS is usually a 37.5 hour working week, although some placements can have slightly shorter hours.

**Students must not book holidays during practice-based learning modules.**

Students are required to adhere to the normal working hours in operation at the placement site and this may increasingly involve some evening/ weekend work. They must recognise that flexibility on the part of the placement provider is **not** to be expected and is only at the discretion of the practice educator.

# Withdrawal from placement

If a student withdraws from placement without prior discussion with the practice educator and approval of the University, normally a fail grade will be given. However if extenuating circumstances occur which preclude prior discussion (such as serious illness or a sudden family bereavement) the course of action will be mutually agreed.

When a student withdraws from placement the practice educator is asked to complete the relevant placement assessment report form which addresses the student’s level of competence to the date of withdrawal and should indicate the clinical hours accrued. This form should be uploaded to Pebblepad within **5 working days of withdrawal.**

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## Absence during Placement

 A medical certificate must be forwarded to the Programme Leader following five working days of sickness or a self-certification form completed for less than 5 days sickness.

**Failure by the student to inform the practice educator that they are not attending placement will be regarded as unprofessional behaviour.**

Prolonged absence from placement can have implications on the assessment of that placement. Any decision regarding the assessment of a shortened placement will only be taken following consultation with Queen Margaret University, Physiotherapy Subject Area.

# Disclosure Scotland/Protection of Vulnerable groups

Since students will work with vulnerable adults and or children during clinical placements, they must arrange for an enhanced criminal record check, carried out through Disclosure Scotland. This is now called a **PVG certificate**. All students are required to have an **enhanced** background check (or equivalent) in their first year of entry into the programme prior to going on their foundation placement. It is a condition of the course to hold a PVG certificate and continuation on the course is dependent on having a PVG. It is the responsibility of each student to supply the information and necessary documentation and to pay for this to be carried out. Some placement providers will require **additional** background checks and make this known to the University when making placement offers.

If the student has not got a PVG certificate prior to their foundation placement then they will not be allowed to go onto the placement and it will be deemed a non-submission of that section of the assessment, requiring a Diet 2 assessment for that section of the module.

Students should not be required to present their PVGcertificate to the practice educator on the first day of placement. It is a confidential document and only authorized staff members within QMU and the NHS trusts are allowed to view a PVG certificate.

# Meeting religious and cultural practices of students

Organisations facilitating placement for students have policies which address diversity and inclusion and these apply to students accepted on placement. These policies include a commitment to:

* Promoting equal opportunity and diversity during employment
* Ensuring all employees are treated fairly and valued equally
* Ensuring that religious and cultural needs are valued and met

Where students have particular religious or cultural needs in terms of requests ( e.g. time for prayers, national holidays, cultural dress) which may conflict with the working practices of the placement provider (e.g. health and safety issues in relation to dress code) consideration will be given, where reasonably practicable to varying or adapting practices to enable such needs to be met. However students have a responsibility to adhere to the local policies and procedures of the placement sites.

# Individual learning plans

Students who have a disability, a learning difficulty or who have physical or mental health issues may have an **‘Individual Learning plan’ (**ILP) in place. This is an assessed statement of any additional learning needs you may have. Practice education sites have a legal responsibility to make ‘reasonable adjustments’ to allow a student with difficulties to participate fully in education and practice based learning without substantial disadvantage.

If you have an ILP then you should ensure that:

**You have met with your PAT prior to placement.** Students who have an ILP (and who have agreed to disclose this to their Practice Educator) are asked to make contact with their placement site at least **4 weeks** prior to placement in order to pass on details of their educator on to their Personal Academic Tutor (PAT). Your PAT will send an e-mail communication to the educator prior to placement with information about the specific difficulty you may have; examples of how this may impact on placement and the recommendations about adjustments that the placement site may make to support the student. An example may be a student with dyslexia who needs extra time to process written information and who would benefit from tutorial materials given in advance.

A member of QMU staff, usually your PAT, will be in contact with your Practice educator the first week of placement.

# The student and Practice Educator

On placement, students are required to work very closely with their practice educator. Communication is paramount in establishing a good working relationship and it is important that students be open with the practice educator in discussion about their hopes for the placement and how the placement is progressing. Practice educators appreciate feedback on the progress of the placement as much as students and it will assist students in achieving their goals and objectives from the learning experience.

**Remember that although practice educators may have many skills and attributes, mind reading is not among them!** Students are requested to express theirthought processes when discussing patients or planning their day. This will help the practice educator to understand the student’s learning needs and enable a more tailored placement. It will also allow students to demonstrate their clinical thinking and reasoning and also further their learning. It is also important to understand that the practice educator’s first responsibility is to their patients and that in addition to facilitating the student’s learning, they have many other responsibilities to deal with on a day-to-day basis. Giving consideration and thought to their needs and responsibilities will go a long way in establishing a good level of communication.

**A student must have realistic expectations about their level of clinical performance in each placement. The A grade indicates “Outstanding” performance and therefore is not the norm.**

Asking for clarification of feedback is appropriate if students are unsure of the reasons for the allocation of a specific grade. However, any disputed assessment grades should be discussed with the relevant Personal academic tutor in the first instance and ultimately with the module co-ordinator. Any dispute has to be based on fact and evidence, that either the assessment tool was not used appropriately or that the placement was managed in such a way that the student’s learning was hampered.

Each module should be viewed as an opportunity to build on the previous modules. Reflecting on the strengths and weaknesses of previous placements should enable the student to learn from these experiences and plan how to address these limitations, or build on the strengths during the next placement. As placements progress students should be increasingly able to set themselves learning goals from each placement, and should discuss these at the beginning of each placement with the practice educator/s.

# Uniforms and Name Badges

Whilst on placement, students are expected to demonstrate appropriate standards of dress, which, in the majority of placements, involves wearing the uniform provided; student tunic, navy blue trousers, black or blue shoes, or in some clinical centres, clean trainers. For student’s own comfort and safety, they are advised to wear comfortable soft-soled shoes. In most situations cardigans or sweatshirts are not worn in the patient contact environment.

All students are required to wear a name badge, and in many clinical centres you may be asked to wear a hospital security pass. If students lose their name badge the address for replacements can be obtained from the school office. Please also ensure that all hospital passes (and locker keys) are returned to the site before leaving the site at the end of the placement – some sites may charge a deposit for these at the start of the placement, redeemable on return of key and/or pass.

Most hospitals will have a strict policy regarding the wearing of jewellery. This again is for students’ own safety as well as that of the patient. This policy usually involves no rings other than a plain wedding band, **no earrings other than small "studs", and no necklaces or bracelets. Watches must be removed when treating patients** so avoid wearing a prized or expensive watch. **Hair has to be worn off the collar.** Hair falling over the face during practical work is not acceptable and would require appropriate action. As in many instances students will be working in close personal proximity to patients, personal hygiene is also an important consideration.

**In Sept 2013 the Scottish Government Health Directorates produced guidance on the NHS Scotland Dress Code based on Evidence-based Principles to inform local policies for Staff. The key points are summarised below.**

The way staff dress sends messages to the patients they care for, and to the public about their professionalism and standards of care.

These guidelines reflect evidence-based good practice and aim to set out core principles that should inform the development of local policy. The following principles are by no means exhaustive, but are intended to give some examples of the issues which NHS sites should consider.

* Staff should dress in a manner which is likely to inspire public confidence; for example: in clean uniform (where uniform is a requirement), with hair tied back off the collar, with nails kept short and clean.
* Wear clear identifiers, (e.g. badges etc.)
* Where changing facilities are available, staff should change into and out of uniform at work. In any case, staff should avoid undertaking activities in public, such as shopping, whilst wearing their uniform, except where such activities form an integral part of their duties.
* Appropriate steps should be taken to minimise the risks of infections and cross contamination for patients and the public; for example: staff should wear short-sleeved shirts/blouses and avoid wearing white coats or neck ties when providing patient care;
* Staff should not wear false nails and nail jewellery or nail art is not permissible. Wrist watches can be worn but should be removed prior to any hands on patient care or moving and handling. (Rings must be small enough to allow the use of gloves with no risk of tearing gloves when providing patient care.
* All appropriate health and safety requirements for staff should be met for example: Staff should not wear excessive jewellery, such as necklaces, visible piercings and multiple earrings.
* Inappropriate tattoos must be covered at all times. What is inappropriate will be determined by the manager.
* Where a headscarf or veil is worn you must ensure that the flow of the garment not interfere with work practice.
* Staff should not carry pens or scissors in outside breast pockets.

# Uniform laundering

Some NHS sites offer a laundering service for uniforms. However many sites feel it is appropriate, having conducted a risk assessment, that home laundering of staff uniform is acceptable.

In these circumstances, uniforms should be:

* Washed at the hottest temperature suitable for the fabric;
* Cleaned in washing machines/tumble driers which are well-maintained and used according to the manufacturer’s instructions;
* Washed separated from other clothes;

A clean uniform should be worn at the start of each shift.

# Vaccinations

**Hepatitis B vaccination**

At this point physiotherapists are generally seen as a low risk category with this particular viral infection, except in the cases of those working in Mental Health and Infectious diseases.

If students wish to receive immunisation protection for Hep B or any other inoculations e.g. Hep C, HIV testing etc. they should contact the programme leader who will advise on the Occupational Health arrangements which the School has put in place for all current students. The immunisation is in the form of 3 injections, the second one month following the first and the third five months later than the first.

# Hand hygiene

All students are required to complete relevant modules from the Scottish Infection Prevention and Control Education Pathway, which includes hand hygiene information. Preventing the spread of infection is everyone’s responsibility within the NHS and students will be expected to adhere to local policies and procedures within this area.

# Accommodation and travelling expenses

Some students will be eligible for support with placement expenses – each student must check their individual eligibility with their funding body. For students funded by SAAS the relevant information is on the SAAS website along the claim form

<https://www.saas.gov.uk/forms/pnmsb-and-ahp>

**The completed forms should be submitted** **to the School office**

# Accommodation for out of area placements.

Students will usually undertake two placements which will involve travel and sometimes may require you to stay near the clinical site. It is your responsibility to organise and pay for your own accommodation. There may be accommodation available in some of the big teaching hospitals. You are advised to check the placement information carefully. Students are advised to contact the site directly to confirm the request prior to the start of the placement. It is advisable to do this well in advance of requiring the accommodation.

The University Student Finance Service administers two discretionary funds provided by the Scottish Government. The Childcare Fund is aimed at students who incur childcare costs whilst studying and the Discretionary Fund when students find themselves facing exceptional financial problems. In addition the International Fund is provided by the University and students from outwith the UK must apply to this fund. An application form is completed and submitted with supporting evidence and is then considered at a confidential monthly meeting of the Hardship Committee. It is useful to make an appointment to see the Student Finance Adviser before submitting an application. Further information is available from: studentfunding@qmu.ac.uk

# Counselling Service

Counselling offers students the opportunity to talk in private about anything that’s troubling them. It is a completely confidential process and is available to all students whether studying within university or on placement.

Counselling is completely confidential and sessions can be arranged to suit the student’s timetable. All students are welcome to use the service, which can also provide information on other sources of help that may be more appropriate.

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# PAT phone calls

During most placements (all except the elective and Foundation placements) contact between the placement site and QMU takes the form of phone contact from the PAT to the practice educator at the midway point of placement to discuss progress. The phone discussion will follow a set format to identify the student’s progress and discuss steps to facilitate their development through the placement. The discussion will also offer support to the practice educator as required.

The student is responsible for forwarding contact details of their Practice Educator (Day, time, telephone number and, or email) to their Personal Academic Tutor by the end of the first week of placement.

This is extremely important and failure to do so will compromise assessment of your progress throughout placement.

# Preparation information for self-study

In addition to site information, there are useful resources within the Hub@QMU that have been provided for students to utilise as a guide for self-study.

# Assessment

# Assessment of Professional Practice

This is via the Common Placement Assessment Form and all students are asked to read all of the information about the CPAF on the CSP website before using the form. There is a Q and A document giving practical information about using the CPAF on the Hub that each student must give to their educator at the start of the placement.

# Mid-placement review

Throughout the course of the placement, the practice educator will be giving the student feedback on their professional performance. Approximately halfway through the placement, students should normally receive a comprehensive feedback session taking the form of the mid-way review

**Students should request this review if it is not forthcoming.**

The nature of this may vary from placement to placement but should allow the student to have an understanding of their performance so far. The purpose of this is for the student to be aware of their strengths and areas requiring attention in the second half of the placement.

**The student** is required to complete their midway comments before giving the assessment form to the educator for their sections to be completed.

The **educator** should return the form to the student following the midway assessment to allow the student to read and understand the feedback given.

**End of placement review**

**The student** is required to complete their final comments before giving the assessment form to the educator for their sections to be completed.

At the end of each placement students will receive a documented assessment of their performance on that placement. This is completed by the practice educator/s

The QMU based PBL team support practice educators through the assessment process, as required. This support can range from formal induction to informal discussion. Practice Educators often may contact the PBL team for advice or support through the assessment process. These approaches are welcomed by the PBL team and should be viewed positively by students.

This assessment grades the student’s performance relative to the objectives and attributes stated in the assessment form. An overall mark will then be obtained. The practice educator/s will provide feedback as part of the assessment process. Written comments will also be supplied on the form as another means of feedback.

#### Submission of assessment of professional practice Forms

The form documenting the Assessment of Professional Practice is submitted to the appropriate assessment area on Atlas within 5 working days following placement end. The students are responsible for the submission of their own forms. The original forms must be kept safely by the student in case of any queries.

# Late Submission of Assessment forms:

This form is subject to the same regulations as stated in the course handbook for the late submission of assignments.

# Student record of techniques used

A separate section has been provided for students to record the techniques they have used on placement. This is not a mandatory part of the assessment form. It has come to the attention of the Practice-based Learning team that graduates planning to register in some countries have been required to provide a record of techniques used on placement. Students are therefore advised to complete this section if they are considering work overseas. The practice educators sign the sheet, authorising the record. This should then also be uploaded to the Atlas area so that this information can be detailed on any future registration application form.

# Student’s evaluation of placement experience

For each placement students will be asked to complete an online evaluation form. The aim of this evaluation is to allow students to comment on the quality of their placement experience, and to feedback to the practice educators and their managers, as well as QMU staff. It adds to the quality control of the placement, in addition to the comments documented on the Assessment of Professional Practice form and feedback from QMU.

It is therefore imperative that students submit an evaluation for every placement

Once all evaluations have been submitted, the results are analysed and a report is sent to the clinical site. Every effort is made in this process to protect student identity. QMU staff will take action upon consistently poor reports.

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