

Allied Health and Human Performance Physiotherapy Clinical Education Manual

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1 Welcome from The Program Director of Physiotherapy at UniSA

Clinical Educators play a vital role in the teaching team at UniSA. There is only so much we can do in the classroom to prepare our students for working in the real world. The sharing of your clinical expertise and skills helps students to learn in work integrated environments. Clinical Educators are central to facilitating the transition from student therapists into autonomous practitioners. Your contribution is crucial to the development of student learning and to the future of our profession.

We thank you for your hard work and look forward to continuing to work with you in training the next generation of physiotherapy professionals.

Kind regards,

Dr Julie Walters

Please note that this manual provides a broad overview of issues pertaining to physiotherapy clinical placement supervision. It should be used in conjunction with the specific information provided by the coordinators of the clinical courses. Descriptions of each course can be found at the following websites:

Bachelor of Physiotherapy (Honours)

Master of Physiotherapy (Graduate Entry)

The course coordinators can also provide you with detailed course information

2 Clinical Placement Dates 2023

Block 1: March 1 – April 3

Block 2: April 5 – May 7

Block 3: May 10 – June 11

Block 4: July 19 – August 20

Block 5: August 23 – September 24

Block 6: September 27 – October 29

Block 7: November 1 – December 4

3 Clinical Educator Credentialing Requirements (UniSA- employed educators only)

If you are employed by the service provider (i.e., the placement venue), you do not need to apply to be credentialled. If you will be attending a SA Health Facility as a UniSA employed Clinical Educator, you are required to apply for <u>credentialling</u> prior to being able to commence supervising students. As part of this, you are required to provide information about:

- Your registration status
- Your Criminal history checks as described below
- Your Curriculum Vitae (CV) must include dates of employment, positions held and outline of responsibilities (within the past 5 years of practice) and minimum of 3 professional referees.
- Professional Indemnity Insurance (including a copy of the certificate see course coordinator)
- You need to sign 1 declaration
- Each facility or LHN will require individual paperwork so if you work across multiple sites, you
 may need to prepare multiple credentialling applications.

Applications are processed by each Local Health Network and not the university, however, <u>please</u> <u>provide a copy of your credentialing approval to your course coordinator</u>. They will certify the required documents and forward to the facility.

This is an accreditation requirement for the University.

3.1 Evidence requirements/ record keeping

In addition to the above evidence of credentialing requirements, a current CPR, and any mandatory training as specified by the facility must be emailed to the course coordinator and also the physiotherapy administration officer (Email: mailto:ALH-TeachingLearning@unisa.edu.au).

3.2 Criminal History Clearance

The required criminal history clearances for each SA Health LHNs are listed below.

Table 1. Credentialling requirements for Clinical Educators employed by UniSA

	CAHLN	NALHN	SALHN (Acute)	SALHN (Rehab)	Catholic Education
Application for Access Appointment form	✓	✓	✓	✓	
Curriculum vitae	✓	✓	✓	✓	✓
DCSI child-related check (valid 3 years) OR Working with Children Check (valid 5 years)	✓	✓	√	✓	~
National Police Clearance (valid 3 year) * Must select "unsupervised contact with vulnerable groups"	√	√	√	1	✓
Immunisation Screening Form and Certificate of Compliance	✓	✓	√	✓	✓
Evidence of UniSA Provided Professional Indemnity coverage	✓	✓	√	✓	✓
Hand Hygiene Australia Allied Health training module Certificate (valid 1 year)	✓	✓	√	✓	

Health care worker immunisation and screening requirements

<u>Screening and verification authority – Catholic Archdiocese of Adelaide</u>

Table 2. 2023 Local Health Network Credentialling Responsible Officers

CALHN	Julia.simmonds@sa.gov.au
NALHN	Anna.Brennan@sa.gov.au
SALHN (Acute)	Briony.Francis@sa.gov.au
SALHN (Rehab)	Peter.Diestel-Feddersen@sa.gov.au

Working with Children Check

All UniSA employed staff are required to obtain and maintain a Working with Children Check (WWCC) for child-related employment via the Department of Human Services (DHS). Please note that this is a mandatory requirement prior to being issued with a casual contract to undertake clinical education duties at any of our sites. You can use your current, valid DHS/DCSI child-related employment screening until it expires. When it is time to renew, you will be required to apply for a Working with Children Check (up to six months before your current screening expires). All applications are to be submitted using the DHS Screening Online application system which is initiated by the University.

The WWCC application information (Appendix 1) must be submitted to People Talent and Culture (PTC in ALH (PTCinALH@unisa.edu.au) and upon receipt, an online application will be initiated

Once initiated, the applicant will receive an email from DHS prompting them to activate their account, following which DHS will send a subsequent email with details of the applicant's username and password. The applicant must then log on to the DHS screening website and verify their identity. This process can be done online with either a current passport, travel document, birth certificate or Australian Citizenship papers AND a current Australian Driver's license.

Please refer to https://screening.sa.gov.au/home for further information where you will find the information kit for WWCC. Please note as per page 11 there is no letter, card or certificate associated with a WWCC. You will be required to provide a unique identification number

National Police Clearance

UniSA employed staff are also required to have a National Police Clearance. Please apply via https://www.police.sa.gov.au/. Please note the University does not accept NPC obtained through online 3rd party providers.

4 Clinical Educator Certification Requirements (UniSA-employed educators only)

4.1 Work Health and Safety Induction

All University employed Clinical Educators (continuing, fixed term contract or casual contract) are required to work through the <u>WHS23 Induction Checklist</u> within the first week of employment with their line manager/supervisor.

All new continuing and fixed term contract staff must complete the online training module – Work Health & Safety Fundamentals within the first week of employment.

In addition to credentialing and criminal history checks, there are various certificates are required by UniSA-employed Clinical Educators as listed below. If educators have completed similar training as part of previous employment, that will be considered as equivalent. Staff are encouraged to complete the COVID-19 training from Sa health https://covid-19training.gov.au/login

4.2 Work Health and Safety & Manual Handling (one-off completion)

This can be done online by logging on to the website below with your UniSA login. Complete Manual Handling Online Module at: Manual Handling Print certificate on completion

4.3 Hand-Hygiene

This should be done annually via **Hand Hygiene Australia**.

4.4 CPR and First Aid

Most sites are happy with an annual CPR update. Courses are available with the following organisations:

ANFAS http://anfas.com.au/

Red Cross http://www.redcross.org.au/ourservices_acrossaustralia_firstaid_courses.htm

St Johns Ambulance http://stjohn.org.au/

5 Clinical Educator Workshops and Training

5.1 Undertaking a Safe Student Placement

All Educators should familiarize themselves with the module that students are required to complete – <u>Undertaking a Safe Student Placement</u>. This is largely related to occupational health and safety in the workplace.

5.2 Assessment of Physiotherapy Practice Instrument

All Educators working in courses that use the <u>Assessment of Physiotherapy Practice Instrument</u> (Appendix 2) must complete training to ensure consistency of application across Australia. There are regular training sessions held by Universities, however if Educators are unable to attend in person, they should complete training using the resources provided at <u>APP Education</u>. Anyone unsure of how to apply the APP Tool, should speak to their relevant course coordinator for clarification.

5.3 Professional Certificate in Practice Education (OPTIONAL)

The Professional Certificate in Practice Education is a fully online part-time program, available to health professionals who supervise either students, and/or staff within their work roles. The purpose of this program is to increase practice educators' understanding, skills and expertise in supervising learners in the workplace through applying teaching and learning principles and approaches within the work setting. Participants in the program explore different practice education models, analyse their own role in practice education and gain insight into key responsibilities and tasks, explore various supervision strategies of learners in the workplace, and improve their skills in managing difficult supervision strategies. Completion of the program can lead to credit for further postgraduate study.

For more information, please visit <u>Professional Certificate in Practice Education</u>

5.4 Clinical Supervisor Support Program (OPTIONAL)

Professional, clinical, and field placements in metropolitan and rural areas are a core and essential element of nursing, midwifery, and allied health programs offered by the University of South Australia. The Clinical Supervisor Support Program is designed to support Clinical Educators who frequently and regularly supervise UniSA students. Participants in the program receive access to the

UniSA library and databases, access to discipline specific placement induction programs, and a fee reduction for the Professional Certificate in Practice Education.

Clinical Educators can apply for the Program at any time using the online application form. For more information please <u>Clinical Supervisor Support Program</u>

6 Roles and Responsibilities for Clinical Placements

6.1 University of South Australia/ Course Coordinator Responsibilities

The University of South Australia deeply values and respects the efforts of Clinical Educators and Placement Providers. Our responsibilities to you and our students include:

- Ensure a safe working/learning collaboration consistent with the University of South Australia policies and procedures
- To liaise with staff about placement expectations and evaluation
- To explain the programme as it relates to the placement
- To abide by University policies and procedures and the National Law
- To evaluate students' suitability for placement-based learning through regular academic assessment procedures
- Apply the University of South Australia's policies on work integrated learning in assessing students' suitability and fitness to placement
- To support Educators in continuing the education of University of South Australia's students while undertaking placement-based learning
- To select learning experiences for the student in cooperation with the placement providers
- To abide by the rules and regulations of the placement providers
- To provide public risk and professional indemnity for students and staff of the university
- To recognise contribution by placement providers to professional education
- To ensure all placement providers have a signed agreement with the University of South Australia

6.2 Student Responsibilities

It is the responsibility of the student to:

- Be familiar with and adhere to the <u>Physiotherapy Board of Australia Code of Conduct</u>
- Be familiar with and adhere to the Student Code of Conduct
- Arrange for and present proof of all <u>prerequisites</u> such as CPR, first aid and police clearance checks on request of the placement provider.
- Review notes and manuals from earlier years of study to prepare for the placement, as well as
 to participate in pre-clinical lectures, practical sessions, and workshops.
- Arrange and meet all travel, food and accommodation costs incurred (unless DRH/scholarship support available).
- Discuss individual learning needs and interests with the Clinical Educator.
- Request specific feedback on performance and actively participate in feedback discussions.
- Communicate their concerns to the Clinical Educator and/or clinical coordinator and/or the Course Coordinator.
- Participate in staff and student training programmes during the placement as required.
- Identify local service rules and protocols within which to work.
- Notify the Clinical Educator thirty minutes before commencement of placement on any day of absence and email the Allied Health and Human Performance Office (<u>ALH-</u> <u>Enquiries@unisa.edu.au</u> with their name, placement site and Course Coordinator)
- Write to thank staff for the assistance provided within 1 week of completion of the placement.
- Adhere to University and <u>Clinical Placement site policies</u> and guidelines procedures.
- Adhere to <u>Uniform regulations</u> and always maintain professional appearance (students may be requested to leave the placement if their professional appearance does not adhere to the UniSA and site-specific requirements for uniform, cleanliness, tidiness, hair care and jewellery).
- Be identifiable by name badge and regulation clinical uniform and to be introduced as students

Uniform and Personal Presentation Responsibilities

Students must always adhere to the Allied Health and Human Performance Clinical Uniform while on placement. Failure to do so is considered a breach of students' professional responsibility and incur a professional warning.

Acceptable jewelry

No jewelry is preferred however, the following is permitted:

Wedding ring

Plain, discreet stud earrings for pierced ears (no facial piercings / jewelry)

Discreet short neck chain

Medic-alert bracelet

Wristwatch (MSK environments ONLY at the discretion of the site)

/ headwear

Acceptable Hair Clean, tidy, off face, out of eyes, off collar, neatly tied back

Short beards neatly trimmed



Head wear must be tucked into the shirt and short enough so that the fabric stays close to the body and there is no chance that it will fall onto patients or be caught in any equipment.

Acceptable **Fingernails**

Clean and short (should not protrude beyond the finger pads)

Smoothly cut



Not acceptable Polished, artificial, or enhanced fingernails



Tailored trousers of colour other than navy blue.

Jeans, corduroy slacks, shorts, ¾ length pants, tight-fitting style that restricts movement etc.

Jogging shoes, sandals, desert boots, Doc Martin boots, canvas shoes, court shoes, crocs, platforms, open-toed shoes

Jewelry other than those listed

Preparation for Placement

Some courses require students to write a letter of introduction to their Clinical Educator. The Course Coordinator will tell you if that is a requirement of the course you are working in. All letters should arrive at least 2 weeks before the start of placement. The letter should include a small photograph (passport size), scanned or attached, that can assist with identification, and should be followed up with a telephone or zoom call (fourth years).

If required, students are encouraged to make accommodation arrangements early in the year. In addition, all students must discuss and finalise their arrival and accommodation arrangements with distant placements approximately 2 weeks before commencement date. Careful preparation can reduce the negative impact of financial, social isolation and work-related stresses that may arise.

Students should download and complete the <u>CPU checklist</u>, well in advance of your placements. There are several criteria that take time to complete.

Participation Responsibilities

Students are required to participate in all (100%) of the formally scheduled clinical sessions within their professional courses. A clinical session involves patient assessment and treatment as well as clinically based tutorials and preclinical sessions. These sessions may occur in the mornings and/or afternoons. Course coordinators will inform students of their participation requirements.

The only exception to the 100% attendance requirement is illness or exceptional/unexpected circumstances (as outlined by the University of South Australia's <u>Assessment policy</u>). Illness must be supported by documentation – the nature of which will be negotiated with the course coordinator (medical certificate, evidence of a positive covid-19 test, or a statutory declaration). In general, a statutory declaration is not sufficient for more than one day absence. Students must present their supporting documentation to both the Clinical Educator(s) and the Course Coordinator.

Exceptional or unexpected circumstances must be supported by appropriate documentary evidence and should be referred to the Course Coordinator. Any other circumstances for loss of clinical time must be negotiated with the Course Coordinator prior to the non-attendance.

If they are unable to attend a clinical session, students must inform the Clinical Educator at the placement site no later than 30 minutes before their scheduled start time. They must also email the university ALH-Enquiries@unisa.edu.au with their name, placement site and Course Coordinator) as soon as practicable on the absent day

Unexplained or unsupported non-attendance (including late arrival/early departure) at any clinical session is considered a breach of students' professional responsibility and incur a professional warning.

If students do not participate in more than 20% of the clinical sessions for any reason, they must negotiate with the Course Coordinator to be able to complete the clinical placement (and course). The Course Coordinator with work with the Clinical Educator(s) to determine whether it is possible for the student to achieve course competencies in the remaining time. This decision will be informed by Clinical Educator feedback, performance to that point in the placement, and engagement with LearnOnline resources to demonstrate readiness.

Students may be prevented from attending placement following preclinical if there are reasonable grounds to believe that a student presents a risk to themselves or others by virtue of their participation (Work Integrated Learning Policy). This includes concerns over fitness to practice, appropriate preparation to undertake placement (as demonstrated through participation during preclinical sessions and engagement with LearnOnline resources, performance in pre-placement assessments).

6.3 Clinical Educator / Placement Provider Responsibilities

It is the responsibility of the Clinical Educator to:

- Work with students in a manner consistent with University of South Australia <u>policies</u> on Antiracism, inclusivity and sexual harassment.
- Ensure they have undertaken the required training for the role of Clinical Educator
- Familiarise themselves with the course objectives
- Determine the specific format of the placement, in conjunction with the University and the student.
- Arrange orientation to the organisation and its policies and procedures including infection control and manual handling.
- Provide students with a safe and supportive learning environment that encourages them to achieve the course objectives.
- Select patients appropriate for level of student training and ensure the patient understands

their right to refuse to provide consent for treatment by a student before allocating to a student.

- Monitor student workload to comply with the educational focus of the placement.
- Provide adequate supervision of students to maximise the safety of patients, staff, and students.
- Assess student performance.
- Provide students with clearly identifiable constructive feedback on their performance throughout the placement, in a manner that encourages skill development.
- Model work practices from which students may learn.
- Work with under-performing students to help them identify ways to improve their performance prior to final assessment.
- Inform the Course Coordinator whenever there are insufficient patients in number or type to meet the educational objectives of the placement.
- Inform the Course Coordinator about student performance, especially where the Educator has any concerns about student skills or behaviour.
- Complete the interim feedback report(s).
- Complete Final Assessment Forms within one week of the end of the placement
- Advise the Clinical Placement Unit if there are special requirements for students undertaking placement at your organisation (i.e., valid driver's license, white card etc.)

7 Medico-legal Requirements

In addition to clinical responsibilities, there are medico-legal requirements when students attend placement-based learning environments.

- Students are responsible to their Clinical Educator during clinical duty.
- Student entries to case notes and letters must be counter-signed by a registered physiotherapist.
- A registered physiotherapist must check all electrical applications excluding ultrasound, before the equipment is turned on.
- The Motor Vehicles Registration Board must be notified (via Clinical Educator and doctor or other relevant case managers) when there are concerns regarding a client's ability to drive safely.
- Students and Educators both have responsibilities under the <u>Children's Protection Act</u>:
 Mandatory Notification.
- As registered physiotherapists, Academics and Educators have a responsibility to monitor students' fitness to practice, and where necessary, take steps to protect public safety.

7.1 Insurance cover for Students

The University of South Australia provides insurance cover for students engaged on clinical placements sponsored by the University.

7.2 Student Compliance

Prior to being allocated to placements, students are required to complete extensive compliance checking that is monitored by the <u>Clinical Placement Unit</u>. Physiotherapy students have a <u>checklist of requirements</u> to complete by pre-established deadlines (<u>Appendix</u> 3). Non-compliant students are withdrawn from placement eligibility and not allocated to a provider.

8 Clinical Placement Management

8.1 Orientation

Orientation is an important aspect of establishing a learning environment. It helps the student to feel welcomed, safe, and comfortable in an unfamiliar environment.

Students should be orientated to your organisation's procedures and culture and the way clinical placement operates in your setting. Orientation should be planned to maximise efficiency, avoid information overload, and make sure essential information is imparted first and in writing.

During orientation, please:

- Clarify the ground rules
- Establish expectations
- Clarify student and educator responsibilities
- Spend some time with students discussing their learning goals
- Complete the orientation checklist (Appendix 4)

It is useful to have clear guidelines on the use of your organisation's resources by students such as lunchrooms, library access and photocopying rules and allowances.

Students also need to be orientated regarding Work Health and Safety.

Failure or refusal to comply with organisation training or protocols will result in the removal of the student from the site.

8.2 Learning Opportunities and Routine

Placements provide varied learning opportunities for students. Avoid timetabling too rigidly that you cannot make use of spontaneous learning opportunities such as the unusual patient who has just been admitted or a technique that is about to be performed by a colleague who is happy to demonstrate.

Plan the placement to use resources other than solely your time i.e., observation of other team members, activities run by your organisation such as mult- D groups and self-directed activities. Students should be encouraged to seek out learning opportunities to discuss with you as well. Part of their future responsibilities will include managing their own continuing professional

development, so encouraging them to begin as students is beneficial.

Other self-directed activities appropriate for placement time include reviewing and discussing relevant journal articles that extend student thinking or reinforce a difficult concept can be a useful self-directed task. Previously prepared case studies to reinforce learning goals can also be useful.

Students are requested to consider their own learning goals for each placement which should include the type of experiences they are looking for and the specific skills they wish to focus on within the parameters of the course aims and objectives. These goals should be discussed as part of the orientation process and any unrealistic expectations or goals can be renegotiated.

8.3 Work Health and Safety: Reporting an injury/incident/hazard

Clinical Educators are asked to notify the Course Coordinator of the incident but in the first instance, students need to contact the Course Coordinator to report an injury/incident/ hazard.

Course coordinators must log injuries/incidents/hazards using the University of South Australia online Hazard & Incident Reporting System as soon as possible after the occurrence and within 12 hours. Access will be via the link under the Safety & Wellbeing section on the Staff Portal Home Page. The Course Coordinator will need to log details of an incident in the online reporting system on behalf of a student, contractor or others. It is also advisable to nominate the Course Coordinator / Program Director as the investigator in this process as they are responsible for the injured person. It would be helpful to obtain a copy of the placement providers' Incident Report, so it can be an attached to the online Hazard & Incident Report.

If students have any concerns about WHS, they should consult with their course or year coordinator. Alternatively, they may consult the WHS Representative: Dr Rose Boucaut on 8302 2068 or the WHS Coordinator Mr Ziggy Gniadek on 83022491.

8.4 Student Support

It is common for some students to find placements very challenging. In addition to the course coordinator and academic staff, the <u>Student Engagement Unit</u> provides a range of services to support student studies. These include assistance in learning advice, personal counselling, career preparation, disability support and support for international students. Our local support services are housed at:

Student Support Services

City East campus

Room P2-40

Level 2 Playford Building,

Telephone: (08) 8302 2330 or 1300 657 122

Fax: (08) 8302 2363

There is also an after-hours crisis line available to students from 5:00-9am on weekdays and 24 hours over weekends and public holidays.

Phone 1300 107 441

Text 0488 884 163

8.5 Student Evaluation of the Placement

Students are asked to complete an evaluation of their placement after completion. This is managed by the CPU. Regular evaluation helps with quality assurance and provides an opportunity for feedback for the placement provider, Educator and Course Coordinator. If needed, feedback may be provided directly

to an Educator or to their manager.

8.6 Course Coordinator Contact

Educators are encouraged to contact their course coordinator about any concerns they have during a placement and to advise them if a student is at risk of failure. Course coordinators are available for enquiries specific to the course that relates to the placement and advice can then be given about specific strategies and procedures.

Students may also initiate contact with the course coordinator, who will act as an advocate for students and staff as necessary. Student complaints will be managed via the University of South Australia complaints process.

9 Assessment of Performance on Clinical Placement

9.1 Assessment of Physiotherapy Practice Instrument

Students in third- and fourth-year physiotherapy courses at the University of South Australia are assessed using the "Assessment of Physiotherapy Practice" (APP) instrument. This is a validated form used by universities across Australia. Educators should familiarise themselves with the instrument and undertake appropriate training in its implementation (http://www.appeducation.com.au/).

A version of the APP instrument and examples of performance indicators are provided in Appendix 2, however you will be using the online version – APPLinkUp. The form and training can be found at https://www.applinkup.com/Default.aspx. Appendix 5 provides a checklist for Educators in working with APPLinkUP.

The APP tool uses a Likert-type scale of 0-5 for a series of 20 items. When using the APP tool, a score of '2' is adequate new graduate standard. Clinical Educators are asked to apply the tool in that way to ensure consistency across placement sites. Course coordinators are available to assist you if you have any concerns or questions.

Once APP forms are complete for all students over a semester, the course coordinator will review grades and moderate as appropriate to determine the final grade outcome. For this reason, Educators should focus on the feedback that goes with the instrument rather than the numerical scores for each criterion.

9.2 Underperforming Students

To pass a placement-based course students are required to consistently demonstrate the competencies described in the APP instrument as related to the area of practice. In addition, students must demonstrate capacity to practice safely and professionally at all times. Inconsistency or unsafe/unprofessional behaviour during placement are signs of underperformance.

"At Risk" Students

Clinical Educators should notify the Course Coordinator as soon as possible when they identify a student who is underperforming and at risk of not passing the placement. It is never too early or too late to consider a student 'at risk' of not passing a placement but remedial action as soon as underperformance is identified is most likely to be successful.

If you identify a student you think is at risk of failing, please:

- Inform Course Coordinators at the earliest convenient time and discuss remedial action;
- Arrange a meeting to discuss the mid roster assessment. The Clinical Educator and student should complete their assessments individually and then discuss discrepancies;
- Provide mid-roster feedback no later than week 3 to advise the student of the behaviours that need to be demonstrated before the student is deemed to pass the placement
- Continue to assess for risk of not passing through weeks 4 and 5 as some students can manage early supported simple cases and find the shift to greater autonomy later more difficult.

The Course Coordinator will:

- Check if the student has an <u>Access Plan</u> and work with Access and Inclusion Advisors, and/or other Student <u>Support services</u> (e.g., learning advisers, counsellors) to identify and instigate appropriate learning support
- Support the Educator throughout the process.
- Refer the student to the <u>Student Engagement Unit</u> if the student lacks the capacity to participate in developing effective Learning Plans

Remedial action

The key principle is to encourage the student to remain on placement in a safe learning environment. This means safe for the patients, but also physically and psychologically safe for the student. When planning remedial action for an underperforming student, Educator(s) working with that student will:

- Plan remedial actions with the course coordinator as soon as underperformance is identified
- Discuss the situation with the student and encourage active self-reflection on performance
- Provide written feedback and negotiate collaboratively with the student their strategies and learning behaviours to be documented in a Learning Plan (see Acute Care form example)
- As part of the normal feedback time, review the student's implementation of remedial actions and learning weekly.

When participating in remedial action during placement the student will:

 Reflect on their performance and discuss strengths/weaknesses etc. with their Educator constructively

- Contribute to the identification of strategies and collaborate in the development of a personal Learning Plan
- Make a commitment to the agreed learning strategies in their learning plan
- Review the effectiveness of their strategies individually and then with the clinical educator at least weekly
- Make an appointment with the course coordinator if additional support is required.
- Prepare a mid-roster self-assessment to compare and discuss with the clinical educator.

Key revision material determined by each course coordinator will be available on the <u>program page</u> as remedial information.

Where it is determined by the clinical educator and the course coordinator that it is not possible for the student to pass the placement (but the learning environment remains safe for the student), a student may stay on placement. This can only occur after census date when the student does not have the option to withdraw, and it is based on an agreement between the course coordinator, the Educator and the student. The agreement should specify in writing that the student may continue to attend the placement as a modified observation experience. This is to enable the student to have access to learning time that they have enrolled for.

Removing a student from placement

In rare circumstances where the safety of the student, the safety of the patients, or the capacity of the educator indicates, a student may be removed from their placement before the scheduled completion date. If this needs to occur, where possible, the Course Coordinator will check if the student has an <u>Access Plan</u> and work with <u>SEU</u> and clinical educator/supervisor on the appropriate process with advisor.

9.3 Advising a Student of a Fail Grade

Although assessment is moderated by the course coordinator who determines the final grade outcome, the clinical report is a mandatory component of each clinical placement. Students will therefore know if they have failed the course on the final day of placement rather than at grade release.

In advising students of a fail grade, Educators are asked to:

- Upload the APP form onto APPLinkUP
- Meet with the student to provide final summative qualitative feedback. This summarises the key strengths and weakness for the student to focus on for the next placement.
- Advise the course coordinator if they expect the student to have a significant adverse reaction the day before so that an emergency counselling appointment can be kept open

The course coordinator will:

- Offer the students counselling and <u>SEU</u> support and advise the student to make a time with the Program Director for a study plan;
- Advise the year-coordinator and Program Director.

10 Unsafe Behaviour or Practice

University of South Australia students are expected to practice under supervision in a safe manner. Clinical Educators are asked to use their judgement as to what constitutes unsafe practice in their field of work. The processes in place regarding unsafe practices on placement adhere to the University's policies on work integrated learning.

Examples of <u>unsafe practices include</u> (but are not limited to):

- Failure to follow the organisation procedures and policies including complying with OH&S requirements.
- Failure to consider possible contraindications to various therapeutic techniques.
- Failure to take responsibility for patient/client and personal safety in the work environment
- Failure to demonstrate awareness of manual handling principles or comply with workplace guidelines on patient/client handling
- Failure to comply with infection control practices.
- Leaving a patient/client alone in a position/ environment/ task that is not safe
- Asking patients/clients to perform a task that is beyond their, and/or the student's capability AND which threatens patient/client safety, or the safety of the students or others involved.
- Asking a patient/client to perform a task in an environment and/or with equipment that is beyond their or student's capacity and therefore unsafe.
- Transferring a patient/client in a way that is potentially unsafe (for either them or the student/assistant), for example failure to use brakes on bed/ wheelchair, or ensure adequate footwear/ removal of socks.
- Providing inadequate assistance during a patient/client task for example only one person to assist when two are required or providing distant supervision if close standby assistance is required.

Additional unsafe practices specific to an acute care environment (not exhaustive):

- Sitting a patient upright who is under spinal precautions
- Leaving oxygen off an oxygen-dependent desaturating patient during a transfer.
- Leaving bed rails down or restraints off an agitated disorientated patient
- Failure to pre-oxygenate a patient prior to suction

Additional unsafe practices specific to a musculoskeletal clinical environment (not exhaustive):

 Failure to conduct appropriate pre-intervention testing, for example sensation tests before thermal treatment or VBI tests before cervical manipulation

10.1 Safety Warnings

A pattern of unsafe behaviour on clinical placement may result in a fail-grade for the course, irrespective of performance in other components. In the case of unsafe behaviour, the student will receive:

- One verbal warning in the first instance;
- One written warning for a second infringement (even if the second incident involves a different skill or technique) (Appendix 6)
- Any subsequent infringement will result in a fail-grade.

In rare circumstances, where student conduct is egregiously unsafe, they may be removed from placement without having received prior warnings.

11 Unprofessional Behaviour

Students must demonstrate professional and ethical behaviour throughout a clinical placement. The processes in place regarding unprofessional practices on placement adhere to the University's policies on work integrated learning.

Examples of unprofessional behaviours include (but are not limited to):

- Removing patient/client records from the placement site or photocopying patient records
- Falsely stating treatments / non-treatment of a patient
- Falsifying placement site records
- Breaching patient/client confidentiality
- Removing material from the placement site which could be used to identify individual patients/clients
- Breaching specific placement site policies as provided by the clinical placement

- Plagiarism of published / referenced or peers written work, which will be dealt with under the provisions of the policy for Academic Misconduct in addition to receipt of a professional warning.
- Failure to respect patients'/clients' privacy and dignity
- Arriving unfit to work (for example sick or intoxicated)
- Arriving late and / or leaving early without prior agreement with the clinical educator
- Failure to call appropriate personnel to report intended absence
- Disrespectful, threatening or bullying behaviour

11.1 Unprofessional Behaviour Warning Process

A pattern of unprofessional behaviour on clinical placement may result in a fail-grade for the course, irrespective of performance in other components. In the case of unprofessional behaviour, the student will receive:

- One verbal warning in the first instance;
- One written warning for a second infringement (even if the second incident involves a different skill or technique) (Appendix 7)
- Any subsequent infringement will result in a fail-grade.

In rare circumstances, egregious conduct may result in an automatic failure for the placement and immediate removal of the student.

Appendix 1 Working with Children Application

The following information must be submitted to People Talent and Culture (PTC in ALH (PTCinALH@unisa.edu.au) and upon receipt, an online application will be initiated

First Name: Click or tap here to enter text.	
Family Name: Click or tap here to enter text.	
Email Address: Click or tap here to enter text.	
Date of Birth: Click or tap to enter a date.	
UniSA employee ID number (if available): Click or to	ap here to enter text.
Proposed commencement date (if unknown, appro	oximation):Click or tap to enter a date
Role position: Click or tap here to enter text.	
Employment Category:	
Casual Contract	
Current Employee	
Prospective Employee	
Volunteer	
Screening application(s) required:	
Aged Care Sector Employment	
Child-Related Employment	
Vulnarable Person Polated Employment	

Appendix 2 Assessment of Physiotherapy Practice Instrument

A high-resolution copy of the APP instrument is available here



Assessment of Physiotherapy Practice

Mid Unit Formative Feedback

Facility/Experience:.... Date:....

- 0 = Infrequently/rarely demonstrates performance indicators
- 1 = Demonstrates few performance indicators to an adequate standard
- 2 = Demonstrates most performance indicators to an adequate standard
- 3 = Demonstrates most performance indicators to a good standard
- 4 = Demonstrates most performance indicators to an excellent standard

not assessed = item was not assessed

Note. a rating of 0 or 1 indicates that minimum acceptable competency has not been achieved

Professional Behaviour		Circle one number only					
1. 2. 3.	Demonstrates an understanding of patient/client rights and consent Demonstrates commitment to learning Demonstrates ethical, legal & culturally sensitive practice	0 0 0	1 1 1	2 2 2	3 3 3	4 4 4	not assessed not assessed not assessed
4.	Demonstrates teamwork	0	1	2	3	4	not assessed
Com	nmunication						
5. 6.	Communicates effectively and appropriately - Verbal/non-verbal Demonstrates clear and accurate documentation	0	1	2	3	4	not assessed not assessed
Ass	essment						
7. 8. 9.	Conducts an appropriate patient/client interview Selects and measures relevant health indicators and outcomes Performs appropriate physical assessment procedures	0 0 0	1 1 1	2 2 2	3 3	4 4	not assessed not assessed not assessed
Ana	lysis & Planning						not assessed
10. 11.	Appropriately interprets assessment findings Identifies and prioritises patient's/client's problems	0	1	2	3	4	not assessed
12.	Sets realistic short and long term goals with the patient/client	0	1	2	3	4	not assessed
13.	Selects appropriate intervention in collaboration with patient/client	0	1	2	3	4	not assessed
Inter	rvention						
14. 15. 16.	Performs interventions appropriately Is an effective educator Monitors the effect of intervention Progresses intervention appropriately	0 0 0	1 1 1 1	2 2 2	3 3 3	4 4 4	not assessed not assessed not assessed
18.	Undertakes discharge planning	0	i	2	3	4	not assessed not assessed
	ence-based Practice						not assessed
19.	Applies evidence based practice in patient care	0	1	2	3	4	not assessed
Risk	Management						
20.	Identifies adverse events/near misses and minimises risk associated with assessment and interventions	0	1	2	3	4	not assessed

Scoring rules:

- Circle not assessed <u>only</u> if the student has not had an opportunity to demonstrate the behaviour
 If an item is not assessed it is not scored and the total APP score is adjusted for the missed item.
- Circle only one number for each item
- If a score falls between numbers on the scale the higher number will be used to calculate a total.
- Evaluate the student's performance against the minimum competency level expected for a beginning/entry level physiotherapist.

Examples of Performance Indicators

Professional Behaviour 1.Demonstrates an understanding of patient/client rights and consent

- · informed consent is obtained and recorded according to protocol
- · understands and respects patients'/clients' rights
- · allows sufficient time to discuss the risks and benefits of the proposed treatment with patients/clients and carers
- · refers patients/clients to a more senior staff member for consent when appropriate
- · advises supervisor or other appropriate person if a patient/client might be at risk
- · respects patients'/clients' privacy and dignity
- · maintains patient/client confidentiality
- applies ethical principles to the collection, maintenance, use and dissemination of data and information

2. Demonstrates commitment to learning

- responds in a positive manner to questions, suggestions &/or constructive feedback
- · reviews and prepares appropriate material before and during the placement
- · develops and implements a plan of action in response to feedback
- · seeks information/assistance as required
- · demonstrates self-evaluation, reflects on progress and implements appropriate changes based on reflection
- takes responsibility for learning and seeks opportunities to meet learning needs
- uses clinic time responsibly

3.Demonstrates ethical, legal & culturally sensitive practice

- · follows policies & procedures of the facility
- · advises appropriate staff of circumstances that may affect adequate work performance
- · observes infection control, and workplace health and safety policies
- · arrives fit to work
- · arrives punctually and leaves at agreed time
- · calls appropriate personnel to report intended
- · wears an identification badge and identifies self
- observes dress code

- · completes projects/tasks within designated time frame
- maintains appropriate professional boundaries with patients/clients and carers
- · demonstrates appropriate self-care strategies (eg stress management)
- · acts ethically and applies ethical reasoning in all health care activities
- · Practises sensitively in the cultural context
- · acts within bounds of personal competence. recognizing personal and professional strengths and limitations

4. Demonstrates teamwork

- · demonstrates understanding of team processes
- · contributes appropriately in team meetings
- · acknowledges expertise and role of other health care professionals and refers/liaises as appropriate to access relevant services
- · advocates for the patient/client when dealing with other services
- · collaborates with the health care team and patient/client and to achieve optimal outcomes
- · cooperates with other people who are treating and caring for patients/clients
- · works collaboratively and respectfully with support staff

Communication

5. Communicates effectively and appropriately - Verbal/non-verbal

- greets others appropriately
- · questions effectively to gain appropriate
- · listens carefully and is sensitive to patient/client and carer views
- · respects cultural and personal differences of
- · gives appropriate, positive reinforcement
- · provides clear instructions
- · uses suitable language & avoids jargon
- demonstrates an appropriate range of communication styles (eg patients/clients, carers, administrative and support staff, health professionals, care team)
- · recognises barriers to optimal communication · uses a range of communication strategies to
- optimize patient/client rapport and understanding (eg hearing impairment, non-

- English speaking, cognitive impairment, consideration of non-verbal communication)
- · appropriately uses accredited interpreters
- · maintains effective communication with clinical educators
- · actively explains to patients/clients and carers their role in care, decision-making and preventing adverse events
- · actively encourages patients/clients to provide complete information without embarrassment or
- · communication with patient/client is conducted in a manner and environment that demonstrates consideration of confidentiality, privacy and patient's/client's sensitivities
- · negotiates appropriately with other health professionals

6. Demonstrates clear and accurate documentation

- · writes legibly
- · completes relevant documentation to the required standard (eg., patient/client record, statistical information, referral letters)
- · maintains records compliant with legislative medico-legal requirements
- complies with organisational protocols and legislation for communication
- · adapts written material for a range of audiences (e.g. provides translated material for non-English speaking people, considers reading ability, age of patient/client)

Assessment

7. Conducts an appropriate patient/client interview

- · positions person safely and comfortably for
- · structures a systematic, purposeful interview seeking qualitative and quantitative details
- · asks relevant and comprehensive questions
- · politely controls the interview to obtain relevant information
- · responds appropriately to important patient/client cues
- · identifies patient's/client's goals and expectations

- · conducts appropriate assessment with consideration of biopsychosocial factors that influence health.
- · seeks appropriate supplementary information, accessing other information, records, test results as appropriate and with patient's/client's consent
- · generates diagnostic hypotheses, identifying the priorities and urgency of further assessment and intervention
- · completes assessment in acceptable time

Selects and measures relevant health indicators and outcomes

- · selects all appropriate variable/s to be measured at baseline from WHO ICF domains of impairment, activity limitation and participation restriction.
- identifies and justifies variables to be measured to monitor treatment response and outcome.
- · selects appropriate tests/outcome measures of each variable for the purpose of diagnosis, monitoring and outcome evaluation.
- · links outcome variables with treatment goals
- · communicates the treatment evaluation process and outcomes to the client
- · identifies, documents and acts on factors that may compromise treatment outcomes

9. Performs appropriate physical assessment procedures

- · considers patient/client comfort and safety
- · respects patient's/client's need for privacy and modesty (eg provides draping or gown)
- · structures systematic, safe and goal oriented assessment process accommodating any limitations imposed by patient's/client's health status
- plans assessment structure and reasoning process using information from patient/client history and supportive information
- · demonstrates sensitive and appropriate handling during the assessment process
- · applies all tests and measurements safely, accurately and consistently
- · sensibly modifies assessment in response to patient/client profile, feedback and relevant findings
- · appropriate tests are performed to refine diagnosis
- · assesses/appraises work, home or other relevant environments as required
- · completes assessment in acceptable time

Analysis & Planning

10. Appropriately interprets assessment findings

- · describes the implications of test results
- · describes the presentation and expected course of common clinical conditions
- · relates signs and symptoms to pathology
- · relates signs symptoms and pathology to environmental tasks and demands
- · interprets findings at each stage of the assessment to progressively negate or reinforce the hypothesis/es
- makes justifiable decisions regarding diagnoses based on knowledge and clinical reasoning
- · prioritises important assessment findings
- · compares findings to normal

11. Identifies and prioritises patient's/client's problems

- · generates a list of problems from the assessment • justifies prioritisation of problem list based on
- knowledge and clinical reasoning
- · collaborates with the patient/client to prioritise the problems
- · considers patient's/clients values, priorities and needs

12. Sets realistic short and long term goals with the patient/client

- · negotiates realistic short treatment goals in partnership with patient/client
- · negotiates realistic long treatment goals in partnership with patient/client
- · Formulates goals that are specific, measurable, achievable and relevant, with specified timeframe
- · considers physical, emotional and financial costs and relates them to likely gains of physiotherapy intervention

13. Selects appropriate intervention in collaboration with the patient/client

- · engages with patient/client to explain assessment findings, discuss intervention strategies and develop an acceptable plan
- · options for physiotherapy intervention are identified and justified, based on patient/client needs, on best evidence and available resources

Examples of Performance Indicators

- · considers whether physiotherapy treatment is indicated · demonstrates a suitable range of skills and
- approaches to intervention · describes acceptable rationale (eg likely effectiveness) for treatment choices
- · balances needs of patients/clients and care givers with the need for efficient and effective
- · demonstrates understanding of contraindications and precautions in selection of intervention strategies
- · advises patient/client about the effects of treatment or no treatment

Intervention

14. Performs interventions appropriately

- · considers the scheduling of treatment in relation to other procedures e.g. medication for pain, wound care.
- · demonstrates appropriate patient/client handling skills in performance of interventions
- · performs techniques at appropriate standard
- · minimizes risk of adverse events to patient/client and self in performance of intervention (including observance of infection control procedures and manual handling standards)
- · prepares environment for patient/client including necessary equipment for treatment
- · identifies when group activity might be an appropriate intervention
- · demonstrates skill in case management
- · recognises when to enlist assistance of others to complete workload
- · completes intervention in acceptable time
- · refers patient/client on to other professional/s when physiotherapy intervention is not appropriate, or requires a multi-disciplinary approach

15. Is an effective educator/health

 demonstrates skill in patient/client education eg modifies approach to suit patient/client age group, uses principles of adult learning

- · a realistic self-management program for prevention and management is developed with the patient/client
- · provides information using a range of strategies that demonstrate consideration of patient/client
- · confirms patient's/client's or caregivers understanding of given information
- · uses appropriate strategies to motivate the patient/client and caregiver to participate and to take responsibility for achieving defined goals
- · discusses expectations of physiotherapy intervention and its outcomes
- · provides feedback to patient/client regarding health status
- · educates the patient/client in self evaluation
- · encourages and acknowledges achievement of short and long term goals

16. Monitors the effects of intervention

- · incorporates relevant evaluation procedures/outcome measures within the physiotherapy plan
- · monitors patient/client throughout the intervention
- · makes modifications to intervention based on evaluation
- · records and communicates outcomes where appropriate

17. Progresses intervention appropriately

- · demonstrates &/or describes safe and sensible treatment progressions
- · modifications, continuation or cessation of intervention are made in consultation with the patient/client, based on best available evidence
- · discontinues treatment in the absence of measurable benefit

18. Undertakes discharge planning

· begins discharge planning in collaboration with the health care team at the time of the initial episode of care

- demonstrates skills in conducting group sessions
 describes strategies that may be useful for maintaining or improving health status following discharge
 - arranges appropriate follow-up health care to meet short and long term goals
 - · addresses patient/client and carer needs for ongoing care through the coordination of appropriate services

Evidence Based Practice

19. Applies evidence based practice in patient

- · considers the research evidence, patient/client preferences, clinical expertise and available resources in patient/client management
- · locates and applies relevant current evidence eg., clinical practice guidelines and systematic reviews
- · assists patients/clients and carers to identify reliable and accurate health information
- · shares new evidence with colleagues
- · participates in quality assessment procedures when

Risk Management

20. Identifies adverse events and near misses and minimises risk associated with assessment and interventions

- · monitors patient/client safety during assessment and
- · complies with workplace guidelines on patient/client handling
- · complies with organizational health and safety requirements
- · describes relevant contraindications and precautions associated with assessment and treatment
- · reports adverse events and near misses to appropriate members of the team
- · implements appropriate measures in case of emergency
- · reports inappropriate or unsafe behaviour of a coworker or situations that are unsafe

Appendix 3. Student Placement Checklist

A high-resolution checklist is available here.

Student Checklist Bachelor of Physiotherapy (Honours) & Master of Physiotherapy (Graduate Entry)



This Checklist has been developed to assist you with obtaining and safekeeping compulsory conditional evidence documentation and is to be used in combination with the Passport to Placement (PTP) folder. Conditional Evidence is required to be current for the duration of your placement unless otherwise notified. Students can view and submit their conditional evidence in the student placement system (InPlace).

You are required to:

- Review and then complete the checklist (Page 1-2) and place original documents in your PTP folder.
- Upload scanned original copies of conditional evidence items to InPlace: (https://unisa-prod.inplace.com.au/). All documents can be uploaded, only compulsory documents will be verified by the CPU office.
- · Present conditional evidence documents to venue staff on the first day and/or as requested
- Keep your conditional evidence documents current for the duration of your placement.

Compulsory Conditional Evidence Requirements

Item Required	Resource Information	Expiry Date	Completed 🗸
DHS Working with Children Check* (Valid for 5 years) *Formerly Department for Communities and Social Inclusion (DCSI) child-related employment check	Details and access to the online application are available at: www.unisa.edu.au/cpu/criminal history clearance Note: The DHS will not re-issue a clearance if there is more than 6 months validity remaining on clearance.	Renewal Reminder Set	☐ Upload to InPlace
DHS NDIS Screening (valid for 5 years) OR Disability Services Employment Screening* (Valid for 3 years)	Details and access to the online application are available at: www.unisa.edu.au/cpu/criminal history clearance Note: The DHS will not re-issue a clearance if there is more than 6 months validity remaining on clearance.	Renewal Reminder Set	☐ Upload to InPlace☐ PTP Folder
NCC Criminal History Check (CHC) Certificate (Valid for 3 years)	Application User Guide available here: NCC Background Check User Guide Application via National Crime Check portal link here: https://unisa.nationalcrimecheck.com.au/	Renewal Reminder Set	☐ Upload to InPlace ☐ PTP Folder
Professional Placement Student Declaration (Current for the duration of your Program)	An InPlace InSight Survey link will be sent to all students enrolled into a UniSA Allied Health and Human Performance and UniSA Clinical and Health Sciences placement course: www.unisa.edu/cpu/PPSD	N/A	N/A
Immunisation Requirements for Placement Package: Certificate of Compliance * (Valid on Program Entry) *please see matrix on page 1	Details available at: https://i.unisa.edu.au/students/health/cpu/responsibilities/immu nisation/ Complete the Health Care Worker Immunisation Screening Questionnaire	■ Reminder Set	□ PTP Folder
please see matrix on page 1	Complete the Certificate of Compliance – Page 7 to be completed and signed by a Medical Practitioner and Page 8 to be completed and signed by student. Upload to InPlace as one file.	N/A	☐ Upload to InPlace ☐ PTP Folder
Influenza Vaccination Certification (Yearly)	Details available at: https://i.unisa.edu.au/students/health/cpu/responsibilities/immu nisation/ Please ensure your certificate includes the details as listed on the CPU website.	Renewal Reminder Set	☐ Upload to InPlace ☐ PTP Folder
COVID-19 Vaccination Certification	Upload completed COVID-19 Digital Certificate Details available at: https://i.unisa.edu.au/students/health/cpu/responsibilities/immu nisation/	Renewal Reminder Set	☐ Upload to InPlace ☐ PTP Folder

Student Checklist Bachelor of Physiotherapy (Honours) & Master of Physiotherapy (Graduate Entry)



Compulsory Conditional Evidence Requirements Continued

COVID-19 Vaccination Certification (Annual)	Upload completed COVID-19 Digital Certificate Details available at: https://i.unisa.edu.au/students/health/cpu/responsibilities/immunisation/	Renewal Reminder Set	☐ Upload to InPlace
Provide First Aid Course (Valid for 3 years)	Details available at: http://i.unisa.edu.au/students/health/cpu/responsibilities/first- aid/	Renewal Reminder Set	□ Upload to InPlace □ PTP Folder
Cardiopulmonary Resuscitation (CPR) Annual Update (Valid for 12 months) *please see matrix on page 1	Details available at: http://i.unisa.edu.au/students/health/cpu/responsibilities/first- aid/	Renewal Reminder Set	☐ Upload to InPlace ☐ PTP Folder
Sunrise EMR (Electronic Medical Record) Training (Valid for 12 months) *please see matrix on page 1	Complete online Sunrise (SA Health) training module at: https://lo.unisa.edu.au/course/view.php?id=4344 Print certificate of completion.	Renewal Reminder Set	☐ Upload to InPlace ☐ PTP Folder
Responding to Risks of Harm, Abuse and Neglect – Education and Care (Fundamentals) (Valid for 3 years) formerly: UniSA Child Safe Environments (Valid for 4 years)	Complete the Fundamentals course: Responding to Risks of Harm, Abuse and Neglect – Education and Care online training at: https://www.education.sa.gov.au/working-us/rrhan-ec/rrhan-ec-mandatory-notification-training-list-courses Print certificate on completion.	Renewal Reminder Set	☐ Upload to InPlace ☐ PTP Folder
SA Health Deed Poll (Valid for Program Duration)	Deed Poll available at: https://study.unisa.edu.au/contentassets/bf331f8eacb94c06b56Z ebde03c067ba/clinical placement deed poll 2022 students and ep staff.pdf Print, read and sign the SA Health Deed Poll in front of a witness (must be 18 years of age or older).	N/A	☐ Upload to InPlace ☐ PTP Folder

Additional Conditional Evidence Requirements

Item Required	Resource Information	Expiry Date	Completed 🗸
Undertaking a Safe Student Placement Work Health and Safety (WHS) (Valid for Program Duration)	Complete the Undertaking a Safe Student Placement Work Health and Safety (WHS) Module at: https://lo.unisa.edu.au/course/view.php?id=5521. Print certificate of completion and add to PTP folder.	N/A	☐ Upload to InPlace☐ PTP Folder
Work Health and Safety (Each Placement)	Complete Work Health & Safety Checklist at: unisa.edu.au/cpu/WHS Checklist.pdf Note: Checklist is to be completed and signed by student and venue supervisor. One checklist required for each placement venue.	N/A	☐ PTP Folder
Manual Handling Certificate (Valid for Program Duration)	Details available at: https://lo.unisa.edu.au/course/view.php?id=2229 Print certificate of completion and add to PTP folder	N/A	☐ PTP Folder
Hand Hygiene (Valid for 12 months)	Complete learning package at: https://www.hha.org.au/online-learning/learning-module-information Registration process: 1. For "Who should see your records?" Select "Education Facility". 2. For "Organisation" type "UniSA".	Renewal Reminder Set	□ PTP Folder

Appendix 4 Example Orientation Checklist

Introduce students to key staff (incl. admi)
Describe the role of physiotherapy at the site
Hazard ID & risk assessment procedures
Accident and injury reporting procedures
Infection control procedures
MH policy
First aid – location & staff
OHS&W manual and procedures
Communication protocols (pager #, telephone #, meetings, diary etc.)
Computer usage and login details/passwords
Statistics requirements and procedures
Non-attendance protocol
EPA procedures
Storage cabinets and equipment
Department manuals
Team meetings
Client education procedures and handouts
Site tour – lunchroom, shops, toilets, desk location, treatment area, reception, parking,
Fire safety and evacuation procedures
Locker/ personal security
Attendance times
Confidentiality
Procedure manuals
Clinical procedure manuals
Patient consent forms
Equipment loans & returns
Client files procedures & tracking
Referral procedures
Assessment forms & outcome measures
Letters and faxes
Photocopying
ID badge

Appendix 5 Clinical Educator Checklist – AppLinkUp

BEF	FORE THE PLACEMENT BEGINS
	Access the APPLinkup website at www.applinkup.com
	Request access as a Clinical Educator (CE)
	Log in; go to CE home page and check students allocated to you
	If more than one CE is sharing student supervision with you on placement, check that all CEs can
	login and see the allocated students
	Watch video vignettes under Resources for best practice in teaching, learning and assessment.
	Review APP items and Performance Indicators
DU	RING THE PLACEMENT
	On placement Day 1, students log in to APPLinkup and visit their home page
	Make notes on each student's performance during the placement using the notes icon to record
	specific examples that support rating decisions
	Use items and performance indicators to provide regular feedback to the student on their
	performance
	Log in and complete the mid unit APP prior to the mid-unit student meeting
	Remind student to log in and complete their mid-unit self-evaluation APP
	Following the mid unit formative feedback discussion, log in and submit the mid unit APP
ΛТ.	THE END OF THE PLACEMENT
AI	THE END OF THE PLACEIMENT
	All CEs involved in student education meet to discuss final summative APP assessment
	Log in to CE home page and complete end of unit APP; provide specific examples to support
	rating decisions
	Remind student to log on and complete end of unit APP self-evaluation
	Following discussion, Log in and submit end of unit APP
	Complete and submit end of unit survey

Other questions? See click on **FAQ** on home page http://training.applinkup.com/

Appendix 6 Unsafe behaviour on Placement - Formal Notification and Written Record

Students must demonstrate safe behaviour throughout a clinical placement. Unsafe behaviours are those that directly contravene contraindications or have a high probability of resulting in a detrimental outcome for the patient/client, the student or others. A student demonstrating unsafe behaviour will be formally notified by their clinical educator. They will be counselled about the exact nature, mechanism, and likely outcome of the unsafe behaviour, and will discuss strategies to avoid the behaviour in the future with their clinical educator.

What was the unsafe practice?
Why is it unsafe?
What is the likely outcome of this practice?
What are alternative practices or strategies to avoid this unsafe practice?
understand that I have been formally warned about unsafe behaviour and understand that should I be involved in or demonstrate a further instance of unsafe behaviour, even if it involves a different situation / behaviour, it will result in a fail-grade for the course, and I may be requested to discontinue the clinical placement.
Student name & signature: Date:
Clinical Educator signature: Date: A photocopy of this form is to be provided to the student. The clinical educator keeps the original
scan and email a copy to the appropriate course coordinator as soon as possible following the incident).

A pattern of unsafe behaviour on clinical placement may result in a fail-grade for the course, irrespective of performance in other components. In the case of unsafe behaviour, the student will

receive verbal feedback in the first instance; a second infringement will result in a written warning (using this form), even if the second incident involves a different skill or technique; any subsequent infringement will result in a fail grade.

Examples of unsafe practices include (but are not limited to):

- Failure to follow the organisation procedures and policies including complying with OH&S requirements.
- Failure to consider possible contraindications to various therapeutic techniques.
- Failure to take responsibility for patient/client and personal safety in the work environment
- Failure to demonstrate awareness of manual handling principles or comply with workplace guidelines on patient handling
- Failure to comply with infection control practices.
- Leaving a patient/client alone in a position/ environment/ task that is not safe
- Asking patients/clients to perform a task that is beyond their, and/or the student's capability
 AND which threatens patient/client safety or the safety of the students or others involved.
- Asking a patient/client to perform a task in an environment and/or with equipment that is beyond their or student's capacity and therefore unsafe.
- Transferring a patient in a way that is potentially unsafe (for either them or the student/assistant), for example failure to use brakes on bed/ wheelchair, or ensure adequate footwear/ removal of socks etc.
- Providing inadequate assistance during a patient task for example only one person to assist when two are required or providing distant supervision if close standby assistance is required.

Additional unsafe practices specific to an acute care environment (not exhaustive):

- Sitting a patient upright who is under spinal precautions
- Leaving oxygen off an oxygen-dependent desaturating patient during a transfer.
- Leaving bed rails down or restraints off an agitated disorientated patient
- Failure to pre-oxygenate a patient prior to suction

Additional unsafe practices specific to a musculoskeletal clinical environment (not exhaustive):

- Failure to conduct appropriate pre-intervention testing, for example sensation tests before thermal treatment or VBI tests before cervical manipulation
- Failure to undertake neurological examination in the presence of symptoms which may indicate compromise of the neurological system.
- Failure to demonstrate the safe application of traction or electrical equipment, e.g., warnings, sensory testing, written recording where applicable.

Appendix 7 Unprofessional behaviour on Placement - Formal Notification & Written Record

Students must demonstrate professional and ethical behaviour throughout a clinical placement. A student demonstrating unprofessional behaviour will be formally advised by their clinical educator. The clinical educator will counsel the student about the exact nature of the behaviour and discuss strategies to prevent future infringements. Student responsibilities are addressed in University of South Australia Work Integrated Learning Procedure and Fitness for Work Integrated Learning Procedure. Professional behaviour is addressed in the AHPRA/Physiotherapy Board of Australia's Shared Code of Conduct.

What was the unprofessional behaviour?	
Why is it deemed unprofessional & what are the possible outcom	e of this practice?
What are alternative practices or strategies to avoid this unprofes	ssional behaviour?
What action has the student agreed to take in relation to this form	mal warning and counselling?
This form is the written record of the formal warning for unprofessional behaviour. I understand that I have been formally warned about unprofessional behaviour and understand that should I be involved in or demonstrate a further instance of unprofessional behaviour, even if it involves a different situation / behaviour, it will result in a fail-grade for the course, and I may be requested to discontinue the clinical placement.	
Student name & signature:	Date:
Clinical Educator signature:	Date:
A photocopy of this form is to be provided to the student. The clinical	al educator keeps the original
(scan and amail a conv. to the appropriate course coordinator as soon as nos	esible following the incident)

A pattern of unprofessional or unethical behaviour on clinical placement may result in a fail-grade for the course, irrespective of performance in other components. In the case of unprofessional behaviour, the student will receive verbal feedback in the first instance; a second infringement will result in a written warning (using this form), even if the second incident involves a different behaviour; any subsequent infringement will result in a fail grade.

Unprofessional behaviours, which breach medico legal requirements or health professional codes of conduct, will be managed according to the <u>Fitness for Work Integrated Learning Procedure</u> and immediately referred to the relevant Program Director/Course Coordinator.

Examples of unprofessional behaviours include (but are not limited to):

- Removing patient/client records from the placement site or photocopying patient records
- Falsely stating treatments / non-treatment of a patient
- Falsifying placement site records
- Breaching patient/client confidentiality
- Removing material from the placement site which could be used to identify individual patients/clients
- Breaching specific placement site policies as provided by the clinical placement
- Plagiarism of published / referenced or peers written work, which will be dealt with under the provisions of the policy for Academic Misconduct.
- Failure to respect patients'/clients' privacy and dignity
- Arriving unfit to work, which will be managed under the work integrated learning policy
- Arriving late and / or leaving early without prior agreement with the clinical educator
- Failure to follow absentee processes outlined by the course coordinator and/or clinical educator
- Rude, disrespectful, or threatening communication (including email)
- Disrespectful, threatening or bullying behaviour
- Breaching the student code of conduct
- Breaching the <u>code of conduct for physiotherapists</u>

