



Master in Physiotherapy

Clinical Education

Student Handbook

(2020-2021 Cohort)



MASTER IN PHYSIOTHERAPY
CODE: 51067

CLINICAL EDUCATION
STUDENT HANDBOOK
2020-2021 COHORT

11 April 2022:

The pre-requisite of RS5335 and RS5336 have been updated: One of the pre-requisite “RS5331-Clinical Education I” has been removed.

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This Clinical Education Manual is subject to review and changes which the Department of Rehabilitation Sciences can decide to make from time to time. Students will be informed of the changes as and when appropriate.

Clinical Education

Philosophy

"**Integration** between the Clinical Education component and the University-based Education is based on the rationale that education of health care professionals reflects 'theory in practice'.

"Theory is developed and validated by practitioners by reflecting critically in an informed way on what is happening in practice. And by then engaging in informed debate and dialogue with relevant others. Practice then is fundamental to theory. It is through reflecting analytically and critically with others as to what is happening in practice, that theory develops" (Carter et al., 1992).

Applying the principles of physiotherapy practice under the guidance of a clinical educator and within specifically designed clinical learning experience assists in the transition of the student therapist to an entry-level practitioner. By progressing through the series of clinical placements, the student acquires entry-level 'clinical experience'. This clinical experience is acquired through the progressive application and integration of professional skills to the assessment and management of a range of clients who reflect different ages (life span) and different levels of physical activity (e.g. sedentary to athletic).

Students are encouraged to adopt a problem-solving, holistic approach to professional practice in conjunction with developing strong, logical evaluative skills. As the student becomes increasingly competent in client management together with gaining a high level of evaluative, recording, communicative and organisational skills, the degree of guidance provided is gradually decreased.

To be considered eligible to practice, a graduate must successfully complete a minimum of 1000 contact hours in health care settings. The Master in Physiotherapy programme has **1050 hours** of clinical education placements. This is consistent with the requirement for international recognition of the programme which allows the graduate reciprocal registration or to apply for licensure examinations in other countries." ¹

1. The Hong Kong Polytechnic University, Department of Rehabilitation Sciences, Master in Physiotherapy, Programme Information and Syllabus (2018 Cohort).

Programme Structure

The clinical education component provides an environment for the application of skills in specific practice environments and further professional skill development. The clinical placement blocks are coordinated with the educational focus and are identified by body systems and/or practice settings:

| | |
|---|--|
| Clinical Education I (6 weeks) Year 1, semester 3 | Acute management & Rehabilitation:- (Musculoskeletal, Cardiopulmonary, Neurological System) (HA settings) |
| Clinical Education II (6 weeks) Year 2, semester 2 | Acute management & Rehabilitation:- (Musculoskeletal, Cardiopulmonary, Neurological System, Chronic Disease management, Mental health, Paediatric conditions, etc.) (HA settings) |
| Clinical Education III (5 weeks) Year 2, semester 3 | Hospital-based & Community-based management, and/or Primary Health Care:- (Musculoskeletal, Cardiopulmonary, Neurological System, Chronic Disease management, Mental health, Paediatric conditions, etc.) (HA settings) |
| Clinical Education IV (5 weeks) Year 2, semester 3 | |
| Clinical Education V (4 weeks) Year 2, semester 2 | Community-based and Primary Health Care:- Geriatric, Paediatric, Mental Health, Metabolic and Chronic Disease management, etc. (non-HA primary and community-based health care settings). |
| Clinical Education VI (4 weeks) Year 2, semester 2 | |

Clinical placements in successive years require progressively more integrated work by the students. At the beginning, the work by the students is heavily supervised by the clinical educator. As the placements progress to the second year, the patient caseload becomes more complex and more independent work is expected from the students.

Clinical Education I, II will take place in Hospital Authority (HA) acute and rehabilitation settings. Clinical Education III and IV will have a focus on integrative holistic care (i.e. multisystem dysfunctions) which extends to outpatient community, both in HA settings. Upon completion of the four placements, the students should be able to attain the fundamental skills required to provide physiotherapy service to patients with musculoskeletal, cardiopulmonary, neurological and multisystem pathology.

Clinical Education V and VI will take place in non-HA community-based and primary health care settings (e.g. home-based rehabilitation, community centres, homes for the elderly), where the caseload involved could be more diverse in nature. As aforementioned, the community-based rehabilitation and primary health care is quickly expanding in demand. This arrangement of clinical placement is intended to better prepare the students to work as a physiotherapist in these complex settings after graduation.

The student is made aware of the expected standards of clinical performance in accordance with the placement objectives. Both the clinical educator and the student should frequently evaluate together an individual student's learning schedule.

Feedback of the student's performance (in oral and written format) forms an integral and important part of the continuing assessment method, which in turn is within the context of the teaching-learning process. Both the clinical educator and lecturer collaborate to maximise the specific nature of the feedback.

At the end of each placement, **students are required to complete an online feedback questionnaire** (links and details are available in the LEARN@POLYU-Clinical Education) **before** they receive the **final evaluation** from their clinical educators. The feedback provided by the students will be considered by the Clinical Coordinating Team for improvement of future clinical education arrangement.

Throughout the Clinical Education programme, students are encouraged to discuss any learning or other problems with the Clinical Educator and/or university faculty attached to that clinical centre. If the need for counselling or remedial teaching is identified, steps to provide help and advice can be taken with the advice of the Clinical Education Co-ordinator accordingly. If considered appropriate, the student is referred to the most appropriate professional to deal with the problem.

When a student has to redeem an unsuccessful placement, the Clinical Education Co-ordinator, the Clinical Educator and university faculty concerned, together with the student, will devise arrangements and design for a repeated placement. Pre-placement guided learning and assistance with the formulation of a 'specific' learning contract will be organised. This remedial placement will take place at a different clinical centre. The focus of the placement remains the same.

Components

The clinical education component provides an environment for the application of skills in specific practice environments and further professional skill development. The clinical placement blocks are coordinated with the educational focus and are identified by body systems and/or practice settings

- ❖ All components of Clinical Education are **COMPULSORY**
- ❖ The schedules of CE subjects may be revised, depending on availability of CE centres. All changes need to be approved by the Programme Committee first before implementation.

Table 1: CE subjects – durations and credit values

| <i>Components / Course code</i> | <i>Duration</i> | <i>Year</i> | <i>Credit value</i> |
|---------------------------------|-----------------|--------------------------------|---------------------|
| <i>CE I – RS5331</i> | 6 weeks | Year I (Nov 2021– Jan 2022) | 5 |
| <i>CE II – RS5332</i> | 6 weeks | Year II (Aug – Sep 2022) | 5 |
| <i>CE III – RS5333</i> | 5 weeks | Year II (Sep – Oct 2022) | 4 |
| <i>CE IV – RS5334</i> | 5 weeks | Year II (Oct – Nov 2022) | 4 |
| <i>CE V – RS5335</i> | 4 weeks | Year II (May – Jun 2022) | 3 |
| <i>CE VI – RS5336</i> | 4 weeks | Year II (Jun – Jul 2022) | 3 |

Table 2: MPT (2021-2022) Clinical Education Schedule

| Year 1 (2021) | | | Year 2 (2022) | | |
|---------------|----------------------|--------------------|---------------|----------|--|
| Month | Semester | Content | Month | Semester | Content |
| 18/1/2021 | 1 | University Classes | 3/1/2022 | 1 | University Classes Clinical Education V Clinical Education VI Clinical Education II |
| 25/1/2021 | | | | | |
| 1/2/2021 | | | | | |
| 8/2/2021 | | | | | |
| 15/2/2021 | | | | | |
| 22/2/2021 | | | | | |
| 1/3/2021 | | | | | |
| 8/3/2021 | | | | | |
| 15/3/2021 | | | | | |
| 22/3/2021 | | | | | |
| 29/3/2021 | | | | | |
| 5/4/2021 | | | | | |
| 12/4/2021 | | | | | |
| 19/4/2021 | | | | | |
| 26/4/2021 | | | | | |
| 3/5/2021 | | | | | |
| 10/5/2021 | | | | | |
| 17/5/2021 | 2 | University Classes | 2/5/2022 | 2 | Clinical Education V Clinical Education VI Clinical Education II |
| 24/5/2021 | | | | | |
| 31/5/2021 | | | | | |
| 7/6/2021 | | | | | |
| 14/6/2021 | | | | | |
| 21/6/2021 | | | | | |
| 28/6/2021 | | | | | |
| 5/7/2021 | | | | | |
| 12/7/2021 | | | | | |
| 19/7/2021 | | | | | |
| 26/7/2021 | | | | | |
| 2/8/2021 | | | | | |
| 9/8/2021 | | | | | |
| 16/8/2021 | 3 | University Classes | 1/8/2022 | 3 | Clinical Education III Clinical Education IV Research Project Presentation |
| 23/8/2021 | | | | | |
| 30/8/2021 | | | | | |
| 6/9/2021 | | | | | |
| 13/9/2021 | | | | | |
| 20/9/2021 | | | | | |
| 27/9/2021 | | | | | |
| 4/10/2021 | | | | | |
| 11/10/2021 | | | | | |
| 18/10/2021 | | | | | |
| 25/10/2021 | | | | | |
| 1/11/2021 | | | | | |
| 8/11/2021 | | | | | |
| 15/11/2021 | Clinical Education I | | 7/11/2022 | | |
| 22/11/2021 | | | | | |
| 29/11/2021 | | | | | |
| 6/12/2021 | | | | | |
| 13/12/2021 | | | | | |
| 20/12/2021 | | | | | |
| 27/12/2021 | | | | | |
| | | | 14/11/2022 | | |
| | | | 21/11/2022 | | |
| | | | 28/11/2022 | | |
| | | | 5/12/2022 | | |
| | | | 12/12/2022 | | |
| | | | 19/12/2022 | | |
| | | | 26/12/2022 | | |

Practice expectations for the physiotherapist graduate²

Relating to the delivery of physiotherapy services

- Identify and assess the health needs of individuals, groups, and communities including screening, prevention, and wellness programmes appropriate to physiotherapy.
- Demonstrate an awareness of the economic, psychological, cultural and sociological factors, which may influence the context of a physiotherapy practice.
- Select and critically evaluate published studies and information on techniques / technology in order to apply relevant findings to physiotherapy practice, research and education.
- Evaluate the outcome(s) of all levels of physiotherapy service: individual treatment, plan of care and/or intervention programme.
- Demonstrate professional behaviour and effective written, verbal, and non-verbal communication with clients, caregivers, colleagues and the public.
- Provide consultation and education to others on physiotherapy services using methods that meet the needs of the group.

Relating to patient/client care

- Demonstrate a holistic approach to client care (i.e., ‘patient/client-centred care’).
- Demonstrate a questioning and/or investigative approach to professional and clinical problems.
- Demonstrate clinical decision-making skills including clinical reasoning, clinical judgement, and reflective practice.
- Assess the physical, mental and environmental factors influencing the client and propose a physiotherapy diagnosis.
- Synthesise knowledge and assessment findings to establish functional goals with the patient/client that are achievable within a specified time period and within resource constraints.
- Collaborate with clients, family members, and other professionals to determine a plan of care that is realistic and acceptable to the patient/client, family and therapist.
- Implement a physiotherapy plan of care that is safe, efficient and cost-effective.
- Monitor and adjust the plan of care in response to client status.
- Supervise and manage support personnel to whom tasks have been delegated.
- Interact with clients, family members, other health care providers and community-based organisations for the purpose of coordinating activities for optimal client care.

Relating to the profession

- Formulate and implement a plan for personal and professional career development based upon self-assessment, reflection and feedback from others.
- Participate in clinical education.
- Recognise his/her responsibility to maintain and promote the highest professional and ethical standard and to contribute to the development of the profession.

2. The Hong Kong Polytechnic University, Department of Rehabilitation Sciences, Master in Physiotherapy, Programme Information and Syllabus (2018 Cohort).

Staff responsible for clinical education

- Clinical Educators (Hospital Authority / Non-Governmental Organisations (NGO) /local community centres, Special Centres including The Hong Kong Polytechnic University Physiotherapy Clinic)
- Experienced Physiotherapists (Hospital Authority, Non-Governmental Organisations / Department of Health)
- Faculty members of Physiotherapy programme of The Hong Kong Polytechnic University

Student's roles & responsibilities

At **ALL** times during the Clinical Studies, students are expected to:

- Display acceptable standards of safety.
- Demonstrate care and compassion for the client.
- Maintain all records and conform to the administrative procedures and duties specified at the beginning of the placement by the clinical supervisor.
- Maintain a professional standard of dress and behaviours (e.g. wear appropriate uniform, tidy and neat hairstyle, no excess jewellery).
- Be able to communicate with patients in Cantonese.
- Maintain an accurate record of the conditions observed and managed in each clinical placement by using the clinical logbook provided.

The role of Visiting Lecturer / University Representative

To ensure that students are placed in an environment which facilitates their clinical learning, the Clinical Coordinating team allocates a representative (either a visiting lecturer or a departmental staff member) to visit each clinical centre, 2 to 4 times per placement (taking into account the duration of the placement as well as the student needs during the placement). The role of the University Representative is to enhance students' clinical learning through

- meetings and discussions with the students as well as the clinical educator;
- clarification of 'perceived' differences in concepts, theories or techniques taught at the University and at the clinical setting;
- identification of problems / obstacles which may hinder student learning in a particular setting;
- liaise with University Clinical Coordinating Team or Student Affairs Office should further help for the students be deemed necessary.

While the University Representative may have acquired some understanding of the performance of each student in a particular placement, he/she will NOT participate in the grading of the student's performance.

Checklist for student preparation of clinical placement

Students should have completed the followings before attending their first clinical placement:

1. First aid training organized by the locally accredited organizations in Hong Kong (e.g. St John Ambulance in Hong Kong / Hong Kong Red Cross)
2. Infectious control trainings organized by the clinical team with the relevant organizations (e.g. Department of Health / Hospital Authority in Hong Kong)
3. Mask fitting test organized by the clinical team
4. Immunity and vaccination screening including chicken pox and measles*
5. Professional Enhancement Programme and psychological test offered by the PolyU
6. Pre-clinical preparation workshops organized by the clinical team

Items 1 to 4 are pre-requisites for clinical placements. For item 4*, it is the departmental policy that all year 1 physiotherapy students should have immunity against chicken pox and measles as a measure for the protection of patients and the benefit of students' learning opportunity in clinical settings. Students should provide written evidence of immunity against chicken pox and measles to the RS administration office for clinical education (Tel: 2766 5398) 2 months before your first clinical placement.

Evidence of immunity includes:

- Record of Chicken Pox and Measles vaccination
- Doctor's record/certificate of your history of previous chickenpox disease
- Documentation of positive chicken pox antibody
- Other immunization record / vaccination required by the PolyU

If a student is unable to provide any of the above evidence, he/she must take vaccination at least 2 months before the first clinical placement and submit the record to the RS administration office for clinical education. Should any students fail to do so, it would result in postponing the clinical placement.

Students must have passed the pre-requisite subjects before they are allowed to take the corresponding clinical placement. The pre-requisites for each placement are listed in the subject description forms in this handbook.

Attendance requirement to clinical education

FULL attendance at every component of the Clinical Education Series is **compulsory**. If for any reason the student cannot attend his/her placement, the student must inform by phone **BOTH the Clinical Educator (CE) and the RS administration office** for clinical education (Tel: 2766 5398) before 8:30 am of that day. Students who are absent due to illness for **half day or more** will be required to produce a doctor's certificate. The doctor's certificate should clearly state that sick leave is granted and the specific date(s) or period(s) of the sick leave.

Students must contact **BOTH the CE and the RS administration office** for any kind of absence to the placement. If you must be absent from your placement for any other legitimate reason, you must submit a prior written request with reason stated, well in advance, to your CE and the Clinical Coordinating team for permission of absence from the placement. If a student is absent for more than 20% of any one placement due to medical reason, he/she will be awarded a grade 'I' (Incomplete) and will have to make up for the missed hours or retake

the whole placement (or equivalent as endorsed by the Subject Assessment Review Panel) at a later date. After completion of the make-up hours, the respective grade based on the student's performance will replace the initial grade 'I'. A student, who does not complete a clinical placement without a legitimate reason, he/she will be awarded a grade 'F' to the placement. He/she will need to retake the whole placement when it is offered at a later time.

Regulations governing clinical education³

1. Students must satisfactorily complete the stipulated 6 clinical placements (Clinical Education I to Clinical Education VI).
2. The Clinical Education component comprises an induction unit and 6 clinical placements. The induction unit is assessed by an online exercise and attendance. Full attendance is required.
3. Several subjects are pre-requisites for some clinical placements, and it is compulsory for student to pass all the pre-requisite subject(s) before attending the corresponding clinical placement. If not, there would be a delay in his/her study progress.
4. Full attendance is a pre-requisite for progression to any subsequent clinical placements. If a student is absent, with legitimate reasons, for more than 20% of any one placement, he/she will be required to make up for missed hours (or equivalent as endorsed by the Subject Assessment Review Panel) when it is offered at a later time.
5. The Clinical Educators will assess the clinical placements. A grade is awarded to the student as a result of continuous assessment of the student's performance during the placement.
6. For passing any clinical education placement, the student must reach a 'SATISFACTORY' level of performance (grade 'C' or above).
7. If under the stated level of guidance for a clinical placement, the student's clinical performance is unsatisfactory, the student will be awarded a grade 'F' (Failed) and is required to retake a placement of similar focus of practice and must perform at or above a SATISFACTORY level.
8. If under the stated level of guidance for a clinical placement, a student fails to 1) practice in a safe manner that minimises risk to clients, self, and others, or 2) adhere to ethical and/or legal practice standards, or 3) complete any one placement without legitimate reasons, or 4) achieve a satisfactory level of performance, the student will be awarded a grade 'F' (Failed). If allowed to remain in the programme, the student will be required to retake a clinical placement of same focus of practice and must perform at or above a 'SATISFACTORY' level.
9. In accordance with The Hong Kong Polytechnic University academic regulations and procedures, only the grade obtained in the final attempt of retaking the subject will be included in the calculation of Grade Point Average (GPA). The grades obtained in

³ This should be read in association with *The Hong Kong Polytechnic University, Department of Rehabilitation Sciences, Master in Physiotherapy, Programme Requirement Document (2020 Cohort)*.

previous attempts will only be reflected in transcript of studies.

10. If a student fails in a clinical placement, he/she needs to retake the placement at another clinical block to be offered in the following semester or year. This may delay the study progress of the student and may postpone the graduation of the student. In the event a student is awarded an 'F' grade in two consecutive placements, he/she is required to withdraw from the programme.
11. In Year II, if a student's clinical performance is unsatisfactory, the degree will not be awarded until all clinical placements have been satisfactorily completed.

Clinical Education Units (Physiotherapy Section)

For detailed information regarding the HA and NGO clinical education units, please refer to postings on LEARN@PolyU - Clinical Education I to VI.

Guidelines for student physiotherapists handling patients' data in clinical placement

1) Patient data

1.1 All patient data are confidential.

1.2 Clinical data tagged with name and / or HKID, address, phone number are sensitive. In preparing reports or case discussion, no identifiable particulars, including ward and bed number should be taken away from hospital.

2) Data access

2.1 Students should access the data for the patients under their care and organizational need-to-know basis.

2.2 Log off electronic data after use.

3) Data retrieval and export

If students take patients' information in their own notes and may bring home for revision or preparation for the next day, appropriate measures must be taken to

3.1 protect the security of the retrieved content – blind patients' identifiable using patients' initial (TMC for Tai Man CHAN) or substitutes (patient X).

3.2 protect the security of the notes and learning points in a safe and secured environment. Do not allow unauthorized person to view and protect the case file documents during transport. Destroy the record in a confidential manner if it is no longer required.

3.3 protect the security of the electronic self created case files by encryption and password.

4) Electronic patient images

4.1 All clinical photos or videos without patients' face masking should be securely stored with no identifiable personal particulars.

4.2 Any pieces of e-files or folders should not be written with patients' names, HKID and protected with encryption and password.

5) Students should not take any physiotherapy record away from the hospital, no matter written by the student or not.

6) For any loss of patient data, the student must report to the clinical educator immediately. The clinical educator, through the department head should consider reporting the case to the police as appropriate.

7) Students should follow the respective departmental guideline on patient data security during clinical placement.

Reference:

1. Clinical Data Policy Manual (version May 08)

***Safety guidelines for physiotherapy students during
Clinical placement in Hospital Authority Centres***

Communication with Clinical Educator (CE) (apply to all settings)

1. Always seek advice/clarification from CE whenever there exists anything doubtful.
2. Seek CE's guidance in any case that you do not feel too competent, e.g. the patient type that you are going to handle for the first time.
3. Report to CE immediately in case of any unexpected events.
4. Students should consult CE and obtain approval prior to giving any treatment to any patient, despite even the teaching staff from PolyU is present.

Part I. In-patient setting

A. General

1. Students should have passed the specialty focused subjects in the PolyU before they have hands-on care on patients in the clinical placement. Every student should notify his/her CE if he/she has failed in the prerequisite subjects at the very beginning of the placement without delay.
2. Students must go through the basic infection control training before they have any hands-on treatment to patients. There may be different infection control standards of individual placement requirement, which students should comply strictly.
3. Read bed notes and vital signs to get the most updated information concerning the patient under care before proceeding to assessment or treatment.
4. Under the following conditions, you should seek advice from CE *before* performing any assessment or treatment to the patient.

| | | |
|-------------------------------------|--|---------------------------|
| Laboratory results | K ⁺ level | < 3.0 or > 5.0 |
| | Platelet count | < 50 x 10 ⁹ /L |
| | Haemoglobin | < 10 g/dL |
| | INR | > 2 |
| | pH | < 7.25 |
| | Abnormal cardiac enzymes | E.g. Troponin I > 1 |
| Vital signs | Body temperature | ≥ 37.5 °C |
| | Systolic blood pressure | > 160 or < 90 mmHg |
| | Diastolic blood pressure | > 90 or < 50 mmHg |
| | Resting H.R. | > 120 or < 60 bpm |
| | Resting SpO ₂ | < 90% |
| | CVP | < 5cm H ₂ O |
| Other investigations/ monitoring | Blood glucose | <4 mmol/L |
| | Recent/current application of continuous ECG monitoring; abnormal ECG, e.g. ST changes in ECG | |
| Subjective complaint | Resting chest pain | |
| | Palpitation | |
| | Coffee ground vomitus | |

| | | |
|----------------------|---|--|
| | Haematemesis | |
| | Haemoptysis | |
| Conscious status | GCS | < 8 |
| General observations | Abnormal bruising of patient | |
| | Respiratory distress | Paradoxical breathing, nasal flaring, gasping, RR>30 breaths/min |
| | Seizure | |
| | Marked change in general condition of patient | |
| | Signs of deep vein thrombosis | |

*Any other signs or symptoms that may indicate deterioration of patients' condition or threaten their health.

5. Students should inform CE when there are new laboratory test results, new XR, new investigations results like U.S. Doppler, Echo cardiogram, OGD etc.
6. Students must inform CE before carrying out the following procedures:
 - a. Performing suction to patient
 - b. Head down postural drainage
 - c. Change of level of oxygen supplement to patients
 - d. Before applying any electrotherapy modalities, e.g. hot & cold treatment, traction, SWD, laser etc.
 - e. Change of treatment protocol
7. Students must stop and report to CE at once if any of the following occurs *during* or *after* assessment / treatment
 - a. Patient falls
 - b. Resting SpO₂ < 90%
 - c. Undue redness of skin or pain after treatment
 - d. Change in mental status e.g. increased dullness, aggressive behaviours, suicidal thoughts etc.
 - e. Severe SOB
 - f. Deterioration in motor control
 - g. Abnormal bony alignment
 - h. Un-documented abrasion, swelling or bruising
 - i. Increase in pain or discomfort
 - j. Increase in dizziness, palpitation, cold sweating, pallor
 - k. A change in systolic blood pressure >20 mmHg
 - l. Any other changes that may indicate deterioration of patients' condition or threaten their health
8. Make sure that every patient under care is safe, comfortable and properly positioned before, during and after assessment and treatment. The height of bed, bed-side rail, restrainer and urinary bags etc... should always be considered. Any patient, who is put on the restrainer, must be properly secured after finishing physiotherapy intervention, or between treatment sessions for patients to rest.
9. For applying electrotherapeutic therapy, exercise and manual therapy, please refer to the safety guidelines in part II.

B. Mobilizing a patient

1. Students must inform CE before carrying out the following procedures:
 - a. First time mobilizing a patient.
 - b. All patients' transfer, standing, level ground walking and stair walking.
2. Do not leave unstable, elderly or mentally deficient patients unattended during unsupported sitting, standing, walking, or attempting any other unstable positions.
3. The student needs to be aware of the patient's clothing and shoe wear being properly fitted before starting any weight-bearing exercise or walking training.
4. Whenever a patient stands or walks, the responsible student should have properly evaluated the patient's performance beforehand. He should understand the patient's ability and limitation. Then select the most appropriate walking aids and estimate the level of assistance to the patient.
5. Stay close to the patient (beware of the safe distance between therapist and patient, handhold and safe working posture) and be ready to give support as needed, or when the patient is practicing exercise with the risk of fall.

Part II. Out-patient setting

A. Electrophysical Therapy Application

1. Practice the electrophysical modalities to up to standard before applying onto patients.
2. Discuss with and get the approval from CE for the choice and parameters of the electrophysical modality for the first time and in any case of progression of the treatment.
3. Check all contraindications and precautions specific to the individual electrophysical modality.
4. Seek verbal consent from patients.
5. Explain the application procedures to the patient.
6. Carry out the appropriate skin sensation and pre-treatment tests as well as recheck whenever indicated.
7. Check the machine every time before use.
8. Give proper instructions and warnings to patients during and after treatment. Make sure the patient fully understands.
9. Ensure the accurate application of the machine and the optimal comfort of the patient.
10. Safety cords should be given to patients wherever they are available in the equipment.
- 11. Wait for CE to check the set up before start.**

12. Review the patient regularly during treatment session. Stop immediately when patient feels discomfort and monitor the patient. Get a helper to report to CE.
13. Reassess the patient during and after treatment and check asterisks if applicable

B. Exercise Therapy Application

1. Discuss with and get the approval from CE for the choice and parameters of the exercises for the first time and in any case of progression of exercises.
2. Check all contraindications and precautions for the exercise to patient.
3. Check the vital signs for high risk group patients before doing exercises, and whenever indicated.
4. Explain to patient the aims and procedures of the exercise.
5. Demonstrate the exercise first and highlight the important points.
6. Give proper instructions and warnings. Make sure the patient fully understands.
7. Make sure the exercises to be performed accurately.
8. Review the patient regularly during exercise session. Stop immediately when patient feels discomfort and monitor the patient. Get a helper to report to CE
9. Reassess the patient after exercise and check asterisks if applicable.
10. Stay close to the patient and be ready to give support whenever the patient is losing stability.
11. Ensure the safe transfer in and out of the hydrotherapy pool. Stay close to the patient throughout the treatment session

C. Manual Therapy Application

1. Discuss with and get the approval from CE for the choice and parameters of the manual therapy for the first time and in any case of progression of manual techniques.
2. Check all contraindications and precautions for the manual therapy to patient.
3. Check the vital signs for high risk group patients before doing manual techniques, and whenever indicated.
4. Explain to patient the aims and procedures of the manual techniques.
5. Give proper instructions and warnings (possible post treatment soreness). Make sure the patient fully understands.
6. Make sure the manual techniques to be performed are accurate

7. Review the patient regularly during treatment session. Stop immediately when patient feels discomfort and monitor the patient. Get a helper to report to CE.
8. Reassess the patient after the manual techniques and check asterisks if applicable
9. Stay close to the patient and be ready to give support whenever the patient is losing stability

Subject Description Forms

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| Subject Code | RS5331 |
| Subject Title | CLINICAL EDUCATION I |
| Credit Value | 5 |
| Level | 5 |
| Pre-requisite | RS5304 Human Development across Lifespan RS5307 Exercise Science RS5310 Principles of Physiotherapy Practice RS5312 Musculoskeletal Physiotherapy II RS5315 Electrophysical Therapy II RS5316 Cardiorespiratory Physiotherapy RS5319 Neurological Physiotherapy II RS5322 Professional Ethics and Legal Issues |
| Objectives | To develop skills in assessment and client care management with a focus on the musculoskeletal, cardiorespiratory and/or neurological systems in acute and/or rehabilitation settings of the Hospital Authority, and the ability to apply treatment techniques integrating theory and science into physiotherapy practice. |
| Intended Learning Outcomes | <p><i>Upon completion of the subject, students will be able to:</i></p> <p><u>Professional/academic knowledge and skills</u></p> <ol style="list-style-type: none"> a. Demonstrate a knowledge base and a level of competence in musculoskeletal, cardiorespiratory and/or neurological physiotherapy practice. b. Obtain and analyse the pertinent history including current condition, relevant medical, social and family history from the client's/patient's medical record. c. Undertake a comprehensive examination, assessment and evaluation of the clients/patients by performing system reviews. d. Formulate a prioritised list of clinical problems, diagnosis, prognosis and a comprehensive management plan with measurable objectives and goals through clinical reasoning procedures e. Implement interventions with the best evidence-based physiotherapy practice for holistic care f. Address the required functions of the clients/patients, and suggest appropriate accommodations or modifications to environmental, home and work barriers g. Establish and maintain accurate, clear and current records of relevant information within the legal and ethical framework h. Evaluate the effectiveness of treatment in achieving the planned |

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| | <p>outcome</p> <ul style="list-style-type: none"> i. Modify the plan of care as appropriate and plan for admission, discharge and follow-up care j. Engage in self-directed learning to enhance the outcomes of client/patient care k. Collaborate and communicate effectively with clients/patients, family members, health care professionals and other individuals in interdisciplinary team in written, verbal and non-verbal modes l. Exhibit professional and caring interpersonal relationships with clients/patients, relatives/caregivers, and other health care professionals m. Refer clients/patients to other health care professionals when appropriate n. Reflect on personal performance through self, peer and/or clinical educator reviews on clinical judgments o. Understand the roles of other health care professionals and the concepts of multi-professional practice in holistic client/patient care, and assure safety and organization of the unit. <p><u>Attributes for all-roundedness</u></p> <ul style="list-style-type: none"> p. Show awareness and ability to develop values and attitudes appropriate to the profession q. Practise effective interpersonal communication (written, oral and nonverbal) with patients, relatives, carers, colleagues and other medical or allied health professionals. r. Develop problem-solving strategies in clinical settings s. Recognise the socio-economical implications of disease and health care. |
| <p>Subject Synopsis/ Indicative Syllabus</p> | <ul style="list-style-type: none"> 1. Patient/ client care/ management with focus on musculoskeletal, cardiorespiratory and/or neurological system 2. History analysis (current condition, medical/social/family history) through system reviews 3. Use of relevant clinical tests and outcome measures and their recording 4. Identification of clinical problems according to the ICF model 5. Identification of clients' functional needs and bio-psychosocial barriers 6. Determination of client/patient prognosis 7. Formulation of plan of care with measurable goals underpinned by clinical reasoning 8. Identification of evidence-based intervention strategies for patient/client care/management (including appropriate accommodations, assistive technology and environmental modifications) 9. Effective communication and collaboration with clients, family |

| | <p>members, health care professionals and other individuals to determine a plan of care</p> <p>10. Best evidence-based physiotherapy treatments for musculoskeletal, cardiorespiratory and/or neurological conditions</p> <p>11. Monitoring and adjustment of the plan of care</p> <p>12. Evaluation of the effectiveness of treatment and/or plan of care</p> <p>13. Plan for admission, discharge and follow-up care</p> <p>14. Maintenance of clear and accurate documentation</p> <p>15. Provision of referral to other healthcare professionals when appropriate</p> <p>16. Use of clinical judgment and reflection</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <p>Teaching/ Learning Methodology</p> | <p>Clinical placement provides the opportunity for students to experience placements in a range of different facilities for acute and rehabilitation management in HA settings. Students will learn to assess, evaluate and treat clients under the supervision of a Clinical Educator (CE) on a daily basis. Students will have case discussions with the CE during tutorials in order to enhance the integration of foundation knowledge acquired at the University into physiotherapy practice.</p> <p>Self-directed learning encourages students to identify their learning objectives and continue to seek up-to-date information from reference materials. Students may work alone or in a group in the learning activities and must develop a written or verbal presentation under the supervision of a CE.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>Assessment Methods in Alignment with Intended Learning Outcomes</p> | <table border="1"> <thead> <tr> <th rowspan="2">Specific assessment methods/tasks</th> <th rowspan="2">% weighting</th> <th colspan="19">Intended subject learning outcomes to be assessed</th> </tr> <tr> <th>a</th><th>b</th><th>c</th><th>d</th><th>e</th><th>f</th><th>g</th><th>h</th><th>i</th><th>j</th><th>k</th><th>l</th><th>m</th><th>n</th><th>o</th><th>p</th><th>q</th><th>r</th><th>s</th> </tr> </thead> <tbody> <tr> <td>Clinical placement (continuous assessment)</td> <td>100</td> <td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td> </tr> <tr> <td>Self-directed learning</td> <td>-</td> <td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td></td><td>√</td><td>√</td><td>√</td><td>√</td><td></td><td></td><td>√</td><td></td><td>√</td><td>√</td><td>√</td><td>√</td> </tr> <tr> <td>Total</td> <td>100</td> <td colspan="19"></td> </tr> </tbody> </table> | Specific assessment methods/tasks | % weighting | Intended subject learning outcomes to be assessed | | | | | | | | | | | | | | | | | | | a | b | c | d | e | f | g | h | i | j | k | l | m | n | o | p | q | r | s | Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | Self-directed learning | - | √ | √ | √ | √ | √ | √ | | √ | √ | √ | √ | | | √ | | √ | √ | √ | √ | Total | 100 | | | | | | | | | | | | | | | | | | | |
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| | | a | b | c | d | e | f | g | h | i | j | k | l | m | n | o | p | q | r | s | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Self-directed learning | - | √ | √ | √ | √ | √ | √ | | √ | √ | √ | √ | | | √ | | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total | 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| | <p>Clinical placement: The nature of physiotherapy practice requires a range of complex skills which is more appropriately assessed on a continuous basis. Students are provided with on-going feedback on their performance during clinical placement which enables the students to monitor their own learning process. Continuous assessment also encourages students to have regular and systematic study.</p> <p>Self-directed learning: Students are required to reflect critically on their clinical experiences through written reports or case presentations. Students are also required to engage in appropriate self-directed learning that allows them to keep abreast of current knowledge.</p> | |
| Student Study Effort Expected | <i>Class contact:</i> | <i>(210 Hrs.)</i> |
| | <ul style="list-style-type: none"> • Clinical placement (210 hours within a specified period) | 210 Hrs. |
| | <i>Other student study effort:</i> | <i>(25 Hrs.)</i> |
| | <ul style="list-style-type: none"> • Self-directed learning | 25 Hrs. |
| Reading List and References | <p>Students are required to integrate knowledge obtained from all previous subjects.</p> <p>For specific information, policies and procedures for clinical education, please refer to the following documents:</p> <ol style="list-style-type: none"> 1. Department of Rehabilitation Sciences (current year). <i>Master in Physiotherapy Programme Clinical Education Handbook</i>. The Hong Kong Polytechnic University. 2. Clinical Education Information on LEARN@PolyU | |
| | Total student study effort | <u>235 Hrs.</u> |

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| Subject Code | RS5332 |
| Subject Title | CLINICAL EDUCATION II |
| Credit Value | 5 |
| Level | 5 |
| Pre-requisite | RS5331 Clinical Education I |
| Objectives | To develop skills in assessment and client care management with a focus on the musculoskeletal, cardiorespiratory and/or neurological systems in acute and/or rehabilitation settings of the Hospital Authority, and the ability to apply treatment techniques integrating theory and science into physiotherapy practice. |
| Intended Learning Outcomes | <p><i>Upon completion of the subject, students will be able to:</i></p> <p><u>Professional/academic knowledge and skills</u></p> <ol style="list-style-type: none"> a. Demonstrate a knowledge base and a level of competence in musculoskeletal, cardiorespiratory and/or neurological physiotherapy practice. b. Obtain and analyse the pertinent history including current condition, relevant medical, social and family history from the client's/patient's medical record. c. Undertake a comprehensive examination, assessment and evaluation of the clients/patients by performing system reviews. d. Formulate a prioritised list of clinical problems, diagnosis, prognosis and a comprehensive management plan with measurable objectives and goals through clinical reasoning procedures e. Implement interventions with the best evidence-based physiotherapy practice for holistic care f. Address the required functions of the clients/patients, and suggest appropriate accommodations or modifications to environmental, home and work barriers g. Establish and maintain accurate, clear and current records of relevant information within the legal and ethical framework h. Evaluate the effectiveness of treatment in achieving the planned outcome i. Modify the plan of care as appropriate and plan for admission, discharge and follow-up care j. Engage in self-directed learning to enhance the outcomes of client/patient care k. Collaborate and communicate effectively with clients/patients, family members, health care professionals and other individuals in interdisciplinary team in written, verbal and non-verbal modes l. Exhibit professional and caring interpersonal relationships with clients/patients, relatives/caregivers, and other health care professionals |

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| | <p>m. Refer clients/patients to other health care professionals when appropriate</p> <p>n. Reflect on personal performance through self, peer and/or clinical educator reviews on clinical judgments</p> <p>o. Understand the roles of other health care professionals and the concepts of multi-professional practice in holistic client/patient care, and assure safety and organization of the unit.</p> <p><u>Attributes for all-roundedness</u></p> <p>p. Show awareness and ability to develop values and attitudes appropriate to the profession</p> <p>q. Practise effective interpersonal communication (written, oral and nonverbal) with patients, relatives, carers, colleagues and other medical or allied health professionals.</p> <p>r. Develop problem-solving strategies in clinical settings</p> <p>s. Recognise the socio-economical implications of disease and health care.</p> |
| <p>Subject Synopsis/ Indicative Syllabus</p> | <ol style="list-style-type: none"> 1. Patient/ client care/ management with focus on musculoskeletal, cardiorespiratory and/or neurological system 2. History analysis (current condition, medical/social/family history) through system reviews 3. Use of relevant clinical tests and outcome measures and their recording 4. Identification of clinical problems according to the ICF model 5. Identification of clients' functional needs and bio-psychosocial barriers 6. Determination of client/patient prognosis 7. Formulation of plan of care with measurable goals underpinned by clinical reasoning 8. Identification of evidence-based intervention strategies for patient/client care/management (including appropriate accommodations, assistive technology and environmental modifications) 9. Effective communication and collaboration with clients, family members, health care professionals and other individuals to determine a plan of care 10. Best evidence-based physiotherapy treatments for musculoskeletal, cardiorespiratory and/or neurological conditions 11. Monitoring and adjustment of the plan of care 12. Evaluation of the effectiveness of treatment and/or plan of care 13. Plan for admission, discharge and follow-up care 14. Maintenance of clear and accurate documentation |

| | <p>15. Provision of referral to other healthcare professionals when appropriate</p> <p>16. Use of clinical judgment and reflection</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <p>Teaching/ Learning Methodology</p> | <p>Clinical placement provides the opportunity for students to experience placements in a range of different facilities for acute and rehabilitation management in HA settings. Students will learn to assess, evaluate and treat clients under the supervision of a Clinical Educator (CE) on a daily basis. Students will have case discussions with the CE during tutorials in order to enhance the integration of foundation knowledge acquired at the University into physiotherapy practice.</p> <p>Self-directed learning encourages students to identify their learning objectives and continue to seek up-to-date information from reference materials. Students may work alone or in a group in the learning activities and must develop a written or verbal presentation under the supervision of a CE.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>Assessment Methods in Alignment with Intended Learning Outcomes</p> | <table border="1" data-bbox="443 943 1431 1615"> <thead> <tr> <th rowspan="2">Specific assessment methods/ tasks</th> <th rowspan="2">% weight -ing</th> <th colspan="19">Intended subject learning outcomes to be assessed</th> </tr> <tr> <th>a</th><th>b</th><th>c</th><th>d</th><th>e</th><th>f</th><th>g</th><th>h</th><th>i</th><th>j</th><th>k</th><th>l</th><th>m</th><th>n</th><th>o</th><th>p</th><th>q</th><th>r</th><th>s</th> </tr> </thead> <tbody> <tr> <td>Clinical placement (continuous assessment)</td> <td>100</td> <td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td> </tr> <tr> <td>Self-directed learning</td> <td>-</td> <td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td>√</td><td></td><td>√</td><td>√</td><td>√</td><td>√</td><td></td><td></td><td>√</td><td></td><td>√</td><td>√</td><td>√</td><td>√</td> </tr> <tr> <td>Total</td> <td>100</td> <td colspan="19"></td> </tr> </tbody> </table> <p>Clinical placement: The nature of physiotherapy practice requires a range of complex skills which is more appropriately assessed on a continuous basis. Students are provided with on-going feedback on their performance during clinical placement which enables the students to monitor their own learning process. Continuous assessment also encourages students to have regular and systematic study.</p> <p>Self-directed learning: Students are required to reflect critically on their clinical experiences through written reports or case presentations. Students</p> | Specific assessment methods/ tasks | % weight -ing | Intended subject learning outcomes to be assessed | | | | | | | | | | | | | | | | | | | a | b | c | d | e | f | g | h | i | j | k | l | m | n | o | p | q | r | s | Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | Self-directed learning | - | √ | √ | √ | √ | √ | √ | | √ | √ | √ | √ | | | √ | | √ | √ | √ | √ | Total | 100 | | | | | | | | | | | | | | | | | | | |
| Specific assessment methods/ tasks | % weight -ing | | | Intended subject learning outcomes to be assessed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | a | b | c | d | e | f | g | h | i | j | k | l | m | n | o | p | q | r | s | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Self-directed learning | - | √ | √ | √ | √ | √ | √ | | √ | √ | √ | √ | | | √ | | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | are also required to engage in appropriate self-directed learning that allows them to keep abreast of current knowledge. | |
| Student Study Effort Expected | <i>Class contact:</i> | <i>(210 Hrs.)</i> |
| | ▪ Clinical placement (210 hours within a specified period) | 210 Hrs. |
| | <i>Other student study effort:</i> | <i>(25 Hrs.)</i> |
| | ▪ Self-directed learning | 25 Hrs. |
| | Total student study effort | <u>235 Hrs.</u> |
| Reading List and References | <p>Students are required to integrate knowledge obtained from all previous subjects.</p> <p>For specific information, policies and procedures for clinical education, please refer to the following documents:</p> <ol style="list-style-type: none"> 1. Department of Rehabilitation Sciences (current year). <i>Master in Physiotherapy Programme Clinical Education Handbook</i>. The Hong Kong Polytechnic University. 2. Clinical Education Information on Blackboard | |

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| Subject Code | RS5333 |
| Subject Title | CLINICAL EDUCATION III |
| Credit Value | 4 |
| Level | 5 |
| Pre-requisite | RS5331 Clinical Education I RS5313 Manipulative Physiotherapy RS5317 Paediatric Neurology and Developmental Disabilities RS5320 Primary Health and Community Care |
| Objectives | This placement is conducted in either hospital-based or community-based rehabilitation setting under Hospital Authority (HA). It aims to develop skills in assessment and integrative holistic physiotherapy management of a variety of conditions (injuries, communicable or non-communicable diseases) across the lifespan. |
| Intended Learning Outcomes | <p><i>Upon completion of the subject, students will be able to:</i></p> <p><u>Professional/academic knowledge and skills</u></p> <ol style="list-style-type: none"> Demonstrate a knowledge base and a level of competence in integrative holistic physiotherapy management of the bio-psychosocial effects of injuries and diseases. Obtain and analyse the pertinent history including current condition, relevant medical, social and family history from the client's/patient's medical record. Undertake a comprehensive examination, assessment and evaluation of the clients/patients by performing system reviews. Formulate a prioritised list of clinical problems according to the ICF model, establish diagnosis, prognosis and a comprehensive management plan with measurable objectives and goals through clinical reasoning procedures Implement interventions with the best evidence-based physiotherapy practice for holistic care in hospital and community settings Address the required functions of the clients/patients, and suggest appropriate accommodations or modifications to environmental, home and work barriers Establish and maintain accurate, clear and current records of relevant information within the legal and ethical framework Evaluate the effectiveness of treatment in achieving the planned outcome Modify the plan of care as appropriate and plan for admission, discharge and follow-up care Engage in self-directed learning to enhance the outcomes of client/patient care |

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| | <p>k. Collaborate and communicate effectively with clients/patients, family members, health care professionals and other individuals in interdisciplinary team in written, verbal and non-verbal modes</p> <p>l. Exhibit professional and caring interpersonal relationships with clients/patients, relatives/caregivers, and other health care professionals</p> <p>m. Refer clients/patients to other health care professionals when appropriate</p> <p>n. Reflect on personal performance through self, peer and/or clinical educator reviews on clinical judgments</p> <p>o. Understand the roles of other health care professionals and the concepts of multi-professional practice in holistic client/patient care, and assure safety and organization of the unit.</p> <p><u>Attributes for all-roundedness</u></p> <p>p. Show awareness and ability to develop values and attitudes appropriate to the profession</p> <p>q. Practise effective interpersonal communication (written, oral and nonverbal) with patients, relatives, carers, colleagues and other medical or allied health professionals.</p> <p>r. Develop problem-solving strategies in clinical settings</p> <p>s. Recognise the socio-economical implications of diseases and various level of health care.</p> |
| <p>Subject Synopsis/ Indicative Syllabus</p> | <ol style="list-style-type: none"> 1. Patient/ client care/ management with focus on integrative holistic care for the bio-psychosocial effects of physical injuries, communicable and non-communicable diseases 2. History analysis (current condition, medical/social/family history) through system reviews 3. Use of relevant clinical tests and outcome measures and their recording 4. Identification of clinical problems according to the ICF model 5. Identification of clients' functional needs and bio-psychosocial barriers 6. Determination of client/patient prognosis 7. Formulation of holistic care plan with measurable goals underpinned by clinical reasoning 8. Identification of evidence-based intervention strategies for patient/client care/management (including appropriate accommodations, assistive technology and environmental modifications) 9. Effective communication and collaboration with clients, family members, health care professionals and other individuals to determine a plan of care 10. Best evidence-based physiotherapy treatments for musculoskeletal, |

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| | <p>cardiorespiratory, neurological and/or multiple system dysfunctions</p> <p>11. Monitoring and adjustment of the plan of care</p> <p>12. Evaluation of the effectiveness of treatment and/or plan of care</p> <p>13. Plan for admission, discharge and follow-up care</p> <p>14. Maintenance of clear and accurate documentation</p> <p>15. Provision of referral to other healthcare professionals when appropriate</p> <p>16. Use of clinical judgment and reflection</p> |
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| Teaching/ Learning Methodology | <p>Clinical placement provides the opportunity for students to experience placements in a range of different facilities for primary, secondary and tertiary health care in HA settings. Students will learn to assess, evaluate and treat clients under the supervision of a Clinical Educator (CE) on a daily basis. Students will have case discussions with the CE during tutorials in order to enhance the integration of foundation knowledge acquired at the University into physiotherapy practice.</p> <p>Self-directed learning encourages students to identify their learning objectives and continue to seek current knowledge through the use of reference materials. Students will work alone or in a group in the learning activities and to develop a written and verbal presentation under the supervision of the CE.</p> |
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| Assessment Methods in Alignment with Intended Learning Outcomes | Specific assess | % weight -ing | Intended subject learning outcomes to be assessed | | | | | | | | | | | | | | | | | | |
| | -ment methods/ tasks | | a | b | c | d | e | f | g | h | i | j | k | l | m | n | o | p | q | r | s |
| | Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| | Self-directed learning | - | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| | Total | 100 | | | | | | | | | | | | | | | | | | | |

Clinical placement: The nature of physiotherapy practice requires a range of complex skills which is more appropriately assessed on a continuous

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| | <p>basis. Students are provided with on-going feedback on their performance during clinical placement which enables the students to monitor their own learning process. Continuous assessment also encourages students to have regular and systematic study.</p> <p>Self-directed learning: Students are required to reflect critically on their clinical experiences through written reports or case presentations. Students are also required to engage in appropriate self-directed learning that allows them to keep abreast of current knowledge.</p> | |
| Student Study Effort Expected | <i>Class contact:</i> | <i>(175 Hrs.)</i> |
| | <ul style="list-style-type: none"> ▪ Clinical placement (175 hours within a specified period) | 175 Hrs. |
| | <i>Other student study effort:</i> | <i>(25 Hrs)</i> |
| | <ul style="list-style-type: none"> ▪ Self-directed learning | 25 Hrs. |
| | Total student study effort | <u>200 Hrs.</u> |
| Reading List and References | <p>Students are required to integrate knowledge obtained from all previous subjects.</p> <p>For specific information, policies and procedures for clinical education, please refer to the following documents:</p> <ol style="list-style-type: none"> 1. Department of Rehabilitation Sciences (current year). <i>Master in Physiotherapy Programme Clinical Education Handbook</i>. The Hong Kong Polytechnic University. 2. Clinical Education Information on Blackboard. | |

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| Subject Code | RS5334 |
| Subject Title | CLINICAL EDUCATION IV |
| Credit Value | 4 |
| Level | 5 |
| Pre-requisite | RS5331 Clinical Education I RS5313 Manipulative Physiotherapy RS5317 Paediatric Neurology and Developmental Disabilities RS5320 Primary Health and Community Care |
| Objectives | This placement is conducted in a health care/rehabilitation setting of HA, preferably with a focus on primary healthcare. It aims to develop skills in assessment and integrative holistic physiotherapy management of a variety of conditions (injuries, communicable or non-communicable diseases) across the lifespan. |
| Intended Learning Outcomes | <p><i>Upon completion of the subject, students will be able to:</i></p> <p><u>Professional/academic knowledge and skills</u></p> <ol style="list-style-type: none"> a. Undertake a comprehensive examination, assessment and evaluation of clients with different conditions and for determination of health risks b. Formulate a diagnosis, prognosis and management plan that is within the scope of physiotherapy practice c. Implement physiotherapy practice by applying clinical reasoning and best evidence-based interventions d. Evaluate the effectiveness of treatment/intervention and adjust the plan of care as appropriate e. Reflect on personal performance through self, peer and/or clinical educator reviews on clinical judgments f. Engage in self-directed learning to enhance the outcomes of client care g. Communicate effectively with clients, family members, health care professionals and other individuals in interdisciplinary team in written, verbal and non-verbal modes h. Demonstrate cultural competence, professional integrity and ethical behaviours in physiotherapy practice <p><u>Attributes for all-roundedness</u></p> <ol style="list-style-type: none"> i. Show awareness and ability to develop values and attitudes appropriate to the profession j. Practise effective interpersonal communication (written, oral and |

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| | <p>nonverbal) with patients, relatives, carers, colleagues and other medical or allied health professionals.</p> <p>k. Develop problem-solving strategies in clinical and community settings</p> <p>1. Recognise the socio-economical implications of health and illnesses on health care services in the community</p> |
| <p>Subject Synopsis/ Indicative Syllabus</p> | <ol style="list-style-type: none"> 1. Patient/ client care/ management across lifespan (paediatrics to geriatrics) 2. History analysis (current condition, medical/social/family history) by performing system reviews 3. Use of relevant clinical tests and outcome measures 4. Identification of intervention strategies for patient/client care or management with measurable goals and outcomes 5. Determination of client/patient prognosis 6. Formulation of plan of care underpinned by clinical reasoning 7. Understanding clients' bio-psychosocial barriers and functional needs 8. Effective communication and collaboration with clients, family members, health care professionals and other individuals to determine a plan of care 9. Best evidence-based physiotherapy treatments and integrative intervention strategies 10. Adjustment to and monitoring of the plan of care 11. Evaluation of the effectiveness of treatment and recording of outcomes 12. Plan for admission, discharge and follow-up care 13. Provision of clear and accurate documentation 14. Provision of referral to other healthcare professionals when appropriate 15. Clinical judgment and reflection 16. Interdisciplinary or transdisciplinary teamwork 17. Integration of cultural competence, professional integrity and ethical behaviours into physiotherapy practice with guidance 18. Practice in multiple settings for primary health and community-based rehabilitation 19. Development of community-based rehabilitation, health promotion and education, function training programmes and/or instrumental activities of daily living training in community, school and work settings 20. Facilitation of injury prevention or reduction (injury prevention education and safety awareness) and independent living (ADL training, home management and self-care) |

| | 21. Promotion of fitness, wellness and mental health to improve quality of life for clients/patients. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Teaching/Learning Methodology | <p>Clinical placement provides the opportunity for students to experience placements in a range of different facilities, including public, community and private organizations. Students will learn to assess, evaluate and treat clients, plan and implement health care and rehabilitation programmes under the supervision of a Clinical Educator (CE) on a daily basis. Students will have case discussions with the CE during tutorials in order to enhance the integration of foundation knowledge acquired at the University into physiotherapy practice.</p> <p>Self-directed learning encourages students to identify their learning objectives and continue to seek current knowledge through the use of reference materials. Students may work alone or in a group in the learning activities and to develop a written or verbal presentation under the supervision of CE.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Assessment Methods in Alignment with Intended Learning Outcomes | <table border="1" data-bbox="469 1093 1414 1581"> <thead> <tr> <th rowspan="2">Specific assessment methods/ tasks</th> <th rowspan="2">% weight -ing</th> <th colspan="12">Intended subject learning outcomes to be assessed</th> </tr> <tr> <th>a</th> <th>b</th> <th>c</th> <th>d</th> <th>e</th> <th>f</th> <th>g</th> <th>h</th> <th>i</th> <th>j</th> <th>k</th> <th>l</th> </tr> </thead> <tbody> <tr> <td>Clinical placement (continuous assessment)</td> <td>100</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>Self-directed learning</td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Total</td> <td>100</td> <td colspan="12"></td> </tr> </tbody> </table> <p>Clinical placement: The nature of physiotherapy practice requires a range of complex skills which is more appropriately assessed on a continuous basis. Students are provided with on-going feedback on their performance during clinical placement which enables the students to monitor their own learning process. Continuous assessment also encourages students to undertake regular and systematic study.</p> <p>Self-directed learning: Students are required to reflect critically on their clinical experiences through written report or case presentation. Students are also required to engage in appropriate self-directed learning that allows them to keep abreast of current knowledge.</p> | Specific assessment methods/ tasks | % weight -ing | Intended subject learning outcomes to be assessed | | | | | | | | | | | | a | b | c | d | e | f | g | h | i | j | k | l | Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | Self-directed learning | - | | | | | √ | √ | √ | √ | | | | | Total | 100 | | | | | | | | | | | | |
| Specific assessment methods/ tasks | % weight -ing | | | Intended subject learning outcomes to be assessed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | a | b | c | d | e | f | g | h | i | j | k | l | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Self-directed learning | - | | | | | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total | 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| Student Study Effort Expected | <i>Class contact:</i> | <i>(175 Hrs.)</i> |
| | ▪ Clinical placement (175 hours within a specified period) | 175 Hrs. |
| | <i>Other student study effort:</i> | <i>(25 Hrs.)</i> |
| | ▪ Self-directed learning | 25 Hrs. |
| | Total student study effort | <u>200 Hrs.</u> |
| Reading List and References | <p>Students are required to integrate knowledge obtained from all previous subjects.</p> <p>For specific information, policies and procedures for clinical education, please refer to the following documents:</p> <ol style="list-style-type: none"> 1. Department of Rehabilitation Sciences (current year). <i>B.Sc.(Honours) Physiotherapy Programme Clinical Education Handbook</i>. The Hong Kong Polytechnic University. 2. Clinical Education Information on Blackboard. | |

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| Subject Code | RS5335 |
| Subject Title | CLINICAL EDUCATION V |
| Credit Value | 3 |
| Level | 5 |
| Pre-requisite | RS5313 Manipulative Physiotherapy RS5317 Paediatric Neurology and Developmental Disabilities RS5320 Primary Health and Community Care |
| Objectives | This placement is conducted in either a local primary health or community-based rehabilitation setting of non-HA settings, or in a non-local clinical centre overseas. It aims to develop skills in assessment and integrative holistic physiotherapy management of a variety of conditions (injuries, communicable or non-communicable diseases) across the lifespan. |
| Intended Learning Outcomes | <p><i>Upon completion of the subject, students will be able to:</i></p> <p><u>Professional/academic knowledge and skills</u></p> <ol style="list-style-type: none"> a. Undertake a comprehensive examination, assessment and evaluation of clients with different conditions and for determination of health risks b. Formulate a diagnosis, prognosis and management plan that is within the scope of physiotherapy practice c. Implement physiotherapy practice by applying clinical reasoning and best evidence-based interventions d. Evaluate the effectiveness of treatment/intervention and adjust the plan of care as appropriate e. Reflect on personal performance through self, peer and/or clinical educator reviews on clinical judgments f. Engage in self-directed learning to enhance the outcomes of client care g. Communicate effectively with clients, family members, health care professionals and other individuals in interdisciplinary team in written, verbal and non-verbal modes h. Demonstrate cultural competence, professional integrity and ethical behaviours in physiotherapy practice <p><u>Attributes for all-roundedness</u></p> <ol style="list-style-type: none"> i. Show awareness and ability to develop values and attitudes appropriate to the profession j. Practise effective interpersonal communication (written, oral and nonverbal) with patients, relatives, carers, colleagues and other medical or allied health professionals. |

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| | <ul style="list-style-type: none"> k. Develop problem-solving strategies in clinical and community settings 1. Recognise the socio-economical implications of health and illnesses on health care services in the community |
| <p>Subject Synopsis/ Indicative Syllabus</p> | <ul style="list-style-type: none"> 1. Patient/ client care/ management across lifespan (paediatrics to geriatrics)History analysis (current condition, medical/social/family history) by performing system reviews 2. Use of relevant clinical tests and outcome measures in determining health risks, and in evaluating body dysfunctions according to the ICF model 3. Identification of intervention strategies for patient/client care/management with measurable goals and outcomes 4. Determination of clients’/patients’ prognosis 5. Formulation of plan of care underpinned by clinical reasoning 6. Understanding clients’ bio-psychosocial barriers and functional needs 7. Effective communication and collaboration with clients, family members, health care professionals and other individuals to determine a plan of care 8. Best evidence-based physiotherapy treatments and integrative intervention strategies 9. Adjustment to and monitoring of the plan of care 10. Evaluation of the effectiveness of interventions and recording of outcomes 11. Plan for discharge and follow-up care 12. Provision of clear and accurate documentation 13. Provision of referral to other healthcare professionals when appropriate 14. Clinical judgment and reflection 15. Interdisciplinary or transdisciplinary teamwork 16. Integration of cultural competence, professional integrity and ethical behaviours into physiotherapy practice with guidance 17. Practice in multiple settings for primary health and community-based rehabilitation 18. Development of community-based rehabilitation, health promotion and education, function training programmes and/or instrumental activities of daily living training in community, school and work settings 19. Facilitation of injury prevention or reduction (injury prevention education and safety awareness) and independent living (ADL training, home management and self-care) 20. Promotion of fitness, wellness and mental health to improve quality of |

| | life for clients/patients | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Teaching/Learning Methodology | <p>Clinical placement provides the opportunity for students to experience placements in a range of different facilities, including public, community and private organizations. Students will learn to assess, evaluate and treat clients, plan and implement primary health care programmes under the supervision of a Clinical Educator (CE) on a daily basis. Students will have case discussions with the CE during tutorials in order to enhance the integration of foundation knowledge acquired at the University into physiotherapy practice.</p> <p>Self-directed learning encourages students to identify their learning objectives and continue to seek current knowledge through the use of reference materials. Students may work alone or in a group in the learning activities and to develop a written or verbal presentation under the supervision of CE.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Assessment Methods in Alignment with Intended Learning Outcomes | <table border="1"> <thead> <tr> <th rowspan="2">Specific assessment methods/ tasks</th> <th rowspan="2">% weight -ing</th> <th colspan="11">Intended subject learning outcomes to be assessed</th> </tr> <tr> <th>a</th> <th>b</th> <th>c</th> <th>d</th> <th>e</th> <th>f</th> <th>g</th> <th>h</th> <th>i</th> <th>j</th> <th>k</th> <th>l</th> </tr> </thead> <tbody> <tr> <td>Clinical placement (continuous assessment)</td> <td>100</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>Self-directed learning</td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Total</td> <td>100</td> <td colspan="11"></td> </tr> </tbody> </table> <p>Clinical placement: The nature of physiotherapy practice requires a range of complex skills which is more appropriately assessed on a continuous basis. Students are provided with on-going feedback on their performance during clinical placement which enables the students to monitor their own learning process. Continuous assessment also encourages students to undertake regular and systematic study.</p> <p>Self-directed learning: Students are required to reflect critically on their clinical experiences through written reports or case presentations. Students are also required to engage in appropriate self-directed learning that allows them to keep abreast of current knowledge.</p> | | | | | | | | | | | | | Specific assessment methods/ tasks | % weight -ing | Intended subject learning outcomes to be assessed | | | | | | | | | | | a | b | c | d | e | f | g | h | i | j | k | l | Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | Self-directed learning | - | | | | | √ | √ | √ | √ | | | | | Total | 100 | | | | | | | | | | | |
| Specific assessment methods/ tasks | % weight -ing | Intended subject learning outcomes to be assessed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | a | b | c | d | e | f | g | h | i | j | k | l | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Self-directed learning | - | | | | | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total | 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Student Study | Class contact: | | | | | | | | | | | (140 Hrs.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| Effort Expected | <ul style="list-style-type: none"> ▪ Clinical placement (140 hours within a specified period) | 140 Hrs. |
| | <i>Other student study effort:</i> | <i>(25 Hrs.)</i> |
| | <ul style="list-style-type: none"> ▪ Self-directed learning | 25 Hrs. |
| | Total student study effort | <u>165 Hrs.</u> |
| Reading List and References | <p>Students are required to integrate knowledge obtained from all previous subjects.</p> <p>For specific information, policies and procedures for clinical education, please refer to the following documents:</p> <ol style="list-style-type: none"> 1. Department of Rehabilitation Sciences (current year). <i>Master in Physiotherapy Programme Clinical Education Handbook</i>. The Hong Kong Polytechnic University. 2. Clinical Education Information on Blackboard. | |

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| Subject Code | RS5336 |
| Subject Title | CLINICAL EDUCATION VI |
| Credit Value | 3 |
| Level | 5 |
| Pre-requisite | RS5313 Manipulative Physiotherapy RS5317 Paediatric Neurology and Developmental Disabilities RS5320 Primary Health and Community Care |
| Objectives | This placement is conducted in either a local primary health or community-based rehabilitation setting of non-HA settings, or in a non-local clinical centre overseas. It aims to develop skills in assessment and integrative holistic physiotherapy management of a variety of conditions (injuries, communicable or non-communicable diseases) across the lifespan. |
| Intended Learning Outcomes | <p><i>Upon completion of the subject, students will be able to:</i></p> <p><u>Professional/academic knowledge and skills</u></p> <ol style="list-style-type: none"> Undertake a comprehensive examination, assessment and evaluation of clients with different conditions and for determination of health risks Formulate a diagnosis, prognosis and management plan that is within the scope of physiotherapy practice Implement physiotherapy practice by applying clinical reasoning and best evidence-based interventions Evaluate the effectiveness of treatment/intervention and adjust the plan of care as appropriate Reflect on personal performance through self, peer and/or clinical educator reviews on clinical judgments Engage in self-directed learning to enhance the outcomes of client care Communicate effectively with clients, family members, health care professionals and other individuals in interdisciplinary team in written, verbal and non-verbal modes Demonstrate cultural competence, professional integrity and ethical behaviours in physiotherapy practice <p><u>Attributes for all-roundedness</u></p> <ol style="list-style-type: none"> Show awareness and ability to develop values and attitudes appropriate to the profession Practise effective interpersonal communication (written, oral and nonverbal) with patients, relatives, carers, colleagues and other |

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| | <p>medical or allied health professionals</p> <p>k. Develop problem-solving strategies in clinical and community settings</p> <p>1. Recognise the socio-economical implications of health and illnesses on health care services in the community</p> |
| <p>Subject Synopsis/ Indicative Syllabus</p> | <ol style="list-style-type: none"> 1. Patient/ client care/ management across lifespan (paediatrics to geriatrics) 2. History analysis (current condition, medical/social/family history) by performing system reviews 3. Use of relevant clinical tests and outcome measures in determining health risks, and in evaluating body dysfunctions according to the ICF model 4. Identification of intervention strategies for patient/client care/management with measurable goals and outcomes 5. Determination of client/patient prognosis 6. Formulation of plan of care underpinned by clinical reasoning 7. Understanding clients' bio-psychosocial barriers and functional needs 8. Effective communication and collaboration with clients, family members, health care professionals and other individuals to determine a plan of care 9. Best evidence-based physiotherapy treatments and integrative intervention strategies 10. Adjustment to and monitoring of the plan of care 11. Evaluation of the effectiveness of treatment and recording of outcomes 12. Plan for discharge and follow-up care 13. Provision of clear and accurate documentation 14. Provision of referral to other healthcare professionals when appropriate 15. Clinical judgment and reflection 16. Interdisciplinary or transdisciplinary teamwork 17. Integration of cultural competence, professional integrity and ethical behaviours into physiotherapy practice with guidance 18. Practice in multiple settings for primary health and community-based rehabilitation 19. Development of community-based rehabilitation, health promotion and education, function training programmes and/or instrumental activities of daily living training in community, school and work settings 20. Facilitation of injury prevention or reduction, safety awareness and independent living (ADL training, home management and self-care) |

| | 21. Promotion of fitness, wellness and mental health to improve quality of life for clients/patients | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Teaching/ Learning Methodology | <p>Clinical placement provides the opportunity for students to experience placements in a range of different facilities, including public, community and private organizations. Students will learn to assess, evaluate and treat clients, plan and implement primary health programmes under the supervision of a Clinical Educator (CE) on a daily basis. Students will have case discussions with the CE during tutorials in order to enhance the integration of foundation knowledge acquired at the University into physiotherapy practice.</p> <p>Self-directed learning encourages students to identify their learning objectives and continue to seek current knowledge through the use of reference materials. Students may work alone or in a group in the learning activities and to develop a written or verbal presentation under the supervision of CE.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Assessment Methods in Alignment with Intended Learning Outcomes | <table border="1"> <thead> <tr> <th rowspan="2">Specific assessment methods/ tasks</th> <th rowspan="2">% weight -ing</th> <th colspan="11">Intended subject learning outcomes to be assessed</th> </tr> <tr> <th>a</th> <th>b</th> <th>c</th> <th>d</th> <th>e</th> <th>f</th> <th>g</th> <th>h</th> <th>i</th> <th>j</th> <th>k</th> <th>l</th> </tr> </thead> <tbody> <tr> <td>Clinical placement (continuous assessment)</td> <td>100</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>Self-directed learning</td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Total</td> <td>100</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>Clinical placement: The nature of physiotherapy practice requires a range of complex skills which is more appropriately assessed on a continuous basis. Students are provided with on-going feedback on their performance during clinical placement which enables the students to monitor their own learning process. Continuous assessment also encourages students to undertake regular and systematic study.</p> <p>Self-directed learning: Students are required to reflect critically on their clinical experiences through written report or case presentation. Students are also required to engage in appropriate self-directed learning that allows them to keep abreast of current knowledge.</p> | | | | | | | | | | | | | Specific assessment methods/ tasks | % weight -ing | Intended subject learning outcomes to be assessed | | | | | | | | | | | a | b | c | d | e | f | g | h | i | j | k | l | Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | Self-directed learning | - | | | | | √ | √ | √ | √ | | | | | Total | 100 | | | | | | | | | | | | |
| Specific assessment methods/ tasks | % weight -ing | Intended subject learning outcomes to be assessed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | a | b | c | d | e | f | g | h | i | j | k | l | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Clinical placement (continuous assessment) | 100 | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Self-directed learning | - | | | | | √ | √ | √ | √ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total | 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Student Study | Class contact: | | | | | | | | (140 Hrs.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|------------------------------------|---|-------------------------|
| Effort Expected | <ul style="list-style-type: none"> ▪ Clinical placement (140 hours within a specified period) | 140 Hrs. |
| | <i>Other student study effort:</i> | <i>(25 Hrs.)</i> |
| | <ul style="list-style-type: none"> ▪ Self-directed learning | 25 Hrs. |
| | Total student study effort | <u>165 Hrs.</u> |
| Reading List and References | <p>Students are required to integrate knowledge obtained from all previous subjects.</p> <p>For specific information, policies and procedures for clinical education, please refer to the following documents:</p> <ol style="list-style-type: none"> 1. Department of Rehabilitation Sciences (current year). <i>Master in Physiotherapy Programme Clinical Education Handbook</i>. The Hong Kong Polytechnic University. 2. Clinical Education Information on Blackboard. | |



The Hong Kong Polytechnic University
Department of Rehabilitation Sciences
Master in Physiotherapy
Graduating class _____ - _____

*Clinical Performance Assessment
Clinical Education I/II/III/IV/V/VI
(RS5331, RS5332, RS5333, RS5334, RS5335, RS5336)*

Six / Five-week / Four-week clinical placement from _____ to _____

Clinical Education Unit: _____ Leave of absence: _____ days

Mr./Ms _____ Student no. _____
(Name of student)

The following performance criteria (👉,👌) are considered basic elements of clinical practice. Unsatisfactory performance in either one of these areas may result in a RETAKE clinical placement and/or DISMISSAL from the programme. When concerns in these aspects are raised and the student is at risk of failing the placement, immediate attention and a telephone call to Academic Clinical Coordinator of The Hong Kong Polytechnic University are required.

👉 ***Practices in a safe manner that minimises risk to clients, self, and others.***

To be SATISFACTORY, the student should:

1. Demonstrate a clear understanding of all safety requirements.
2. Not have to be constantly reminded of safety issues.

Examples of unsafe behaviour

- Not verifying contraindications prior to applying physiotherapy techniques that may put the client at risk.
- Not taking adequate precautions or improper handling of a client that may cause a potential or actual hazard to the client.

👌 ***Adheres to ethical and/or legal practice standards.***

To be SATISFACTORY, the student should adhere to the professional code of ethics, as well as to institutional policies and procedures.

Examples of misconduct

- Breach of client confidentiality.
- False documentation or false report.

UNDER GUIDANCE AS NECESSARY, THIS STUDENT:

- ☞ Practices in a safe manner that minimises risk to clients, self, and others.
- ☞ Adheres to ethical and/or legal practice standards.

| YES | NO |
|------------|-----------|
| | |
| | |

CRITERIA

| | <i>Behaviour not observed</i> | <i>CLINICAL EDUCATION I/II/III/IV/V/VI</i> | | <i>Behaviour consistently observed</i> |
|---|---------------------------------------|--|--|--|
| <i>Entry-level performance level</i> | | | | |
| <u>APPLICATION OF KNOWLEDGE:</u> | | | | |
| 1. Demonstrates adequate understanding of client's clinical condition reflecting knowledge of basic, applied and behavioural sciences. | ◆ | | | ◆ |
| 2. Analyses and interprets clinical findings to establish physiotherapy diagnoses, problem list, and outcomes of care. | ◆ | | | ◆ |
| 3. Designs a physiotherapy plan of care that integrates goals, treatments (including progression and modifications), outcomes and discharge plan. | ◆ | | | ◆ |
| 4. Applies the principles of critical inquiry to the practice of physiotherapy. | ◆ | | | ◆ |
| <u>PHYSIOTHERAPY SKILLS:</u> | | | | |
| 5. Performs a physiotherapy client examination in a logical, organised and accurate fashion. | ◆ | | | ◆ |
| 6. Performs physiotherapy interventions efficiently and effectively. | ◆ | | | ◆ |
| 7. Produces legible, concise and accurate documentation to support the delivery of physiotherapy services, in accordance with guidelines and format required by the centre. | ◆ | | | ◆ |
| 8. Reports cases in an organised and clear manner. | ◆ | | | ◆ |
| 9. Communicates effectively and develops good rapport with clients, family or other caregivers. | ◆ | | | ◆ |
| 10. Educates others (client, family, caregivers, staff, students, and other healthcare providers) using relevant and effective teaching methods. | ◆ | | | ◆ |
| <u>PROFESSIONAL BEHAVIOURS:</u> | | | | |
| 11. Demonstrates initiative to seek advice, clarify doubts, and maximise own learning. | ◆ | | | ◆ |
| 12. Demonstrates professional behaviours during interactions with clients, colleagues, educators and other healthcare team members. | ◆ | | | ◆ |
| 13. Adapts delivery of physiotherapy care to reflect respect for and sensitivity to individual differences. | ◆ | | | ◆ |
| 14. Organises work in a cost effective and timely manner (i.e. efficiently). | ◆ | | | ◆ |

❖ **The dotted vertical line indicates the level of 'SATISFACTORY' performance at the final feedback.**
M: Mid-term F: Final NA: Not Applicable or Not Assessed

Mid-term Evaluation

Areas of strength:

Areas needing improvement:

Recommendations:

(Clinical Educator's name)

(Signature)

"This mid-term report has been discussed with me."

Student's name and signature: _____

Date: _____

Final Evaluation

Recommendations / Comments

Final grade awarded for this placement is: _____

(Clinical Educator's name)

(Signature)

"This final report has been discussed with me." _____(Date)

(Student's name and class number)

(Signature)



Description of Various Grades

| Grading | Competency Level | Clinical Placement Performance |
|---------|---------------------------|---|
| A+ | Exceptionally Outstanding | The student has met the EXPECTED level of clinical performance <u>consistently</u> in the assessed areas, and he/she performs INDEPENDENTLY WITH CONSULTATION (minimal monitoring) even for COMPLEX* tasks/environment. |
| A | Outstanding | The student has met the EXPECTED level of clinical performance <u>consistently</u> in the assessed areas, and monitoring is <u>infrequently</u> required for COMPLEX tasks/environment. |
| A- | Very Good | The student has met the EXPECTED level of clinical performance <u>consistently</u> in the assessed areas, and monitoring is <u>seldomly</u> required for COMPLEX tasks/environment. |
| B+ | Good | The student has met the EXPECTED level of clinical performance <u>consistently</u> in the assessed areas, and monitoring is <u>occasionally</u> required for COMPLEX tasks/environment. |
| B | Fairly Good | The student has met the EXPECTED level of clinical performance <u>consistently</u> in the assessed areas, and monitoring is required for COMPLEX tasks/environment. |
| B- | Wholly Satisfactory | The student has met the EXPECTED level of clinical performance <u>consistently</u> in the assessed areas, though <u>intensive</u> monitoring is <u>occasionally</u> required for COMPLEX tasks/environment. |
| C+ | Fairly Satisfactory | The student has met the EXPECTED level of clinical performance in the assessed areas, though <u>intensive</u> monitoring is required for COMPLEX tasks/environment. |
| C | Satisfactory | Under the stated level of guidance for this clinical placement, the student has met the EXPECTED level of clinical performance in the assessed areas, though <u>intensive</u> monitoring is <u>consistently</u> required for COMPLEX tasks/environment. |
| I | Incomplete | The student has been absent, with legitimate reasons, for more than 20% of the placement and has to make up for the missed hours (or equivalent as endorsed by the Subject Assessment Review Panel) at a later date. |
| F | Inadequate (Failed) | The student has failed to practice in a <u>safe</u> manner that minimizes risk to clients, self, and others. OR The student has failed to adhere to <u>ethical</u> and/or <u>legal</u> practice standards. OR Under the stated level of guidance for this clinical placement, the student has not met the accepted level of clinical performance in the assessed areas, despite <u>intensive</u> monitoring has been routinely provided. OR The student has been <u>absent for more than 20%</u> of the placement without legitimate reasons. |

* “COMPLEX tasks/environment ” are defined according to the stage of learning of the student.

Visiting Lecturer

The Visiting Lecturer represented the Hong Kong Polytechnic University during this clinical placement was _____ who visited this Clinical Education Centre on _____ (date). Specific learning issues, if any, which were discussed with the student, are noted below:

(Signature of University representative)

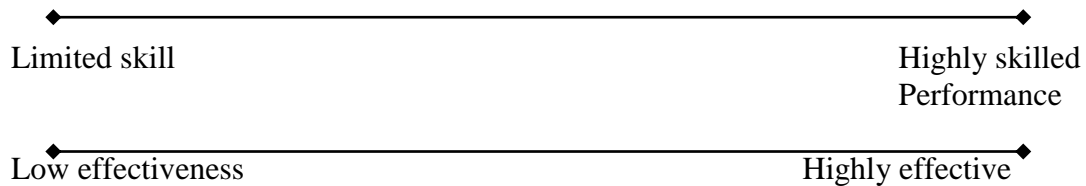


The Hong Kong Polytechnic University
Appendix I

DEFINITIONS OF TERMS

From Physical Therapy Clinical Performance Instrument, APTA, 2006.

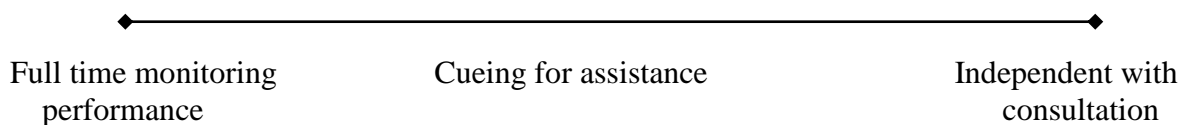
QUALITY: "degree of knowledge and skill proficiency demonstrated"
APTA Clinical Performance Instrument 2006, p. 10



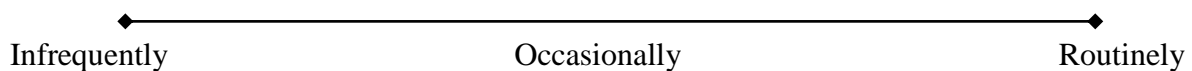
EFFICIENCY: "the ability to perform in a cost-effective and timely manner" *APTA Clinical Performance Instrument 2006, p. 11*



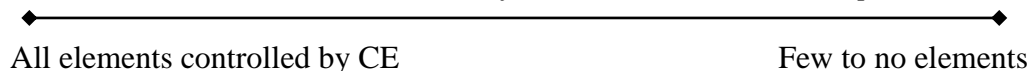
SUPERVISION/GUIDANCE: "the level and extent of assistance required by the student to achieve entry-level performance" *APTA Clinical Performance Instrument 2006, p. 10*



CONSISTENCY: "the frequency of occurrences of desired behaviours related to the performance criterion" *APTA Clinical Performance Instrument 2006, p. 11*



COMPLEXITY: "the number of elements that must be considered relative to the patient, task, and/or environment" *APTA Clinical Performance Instrument 2006, p. 11*



CRITICAL INQUIRY: "process of applying the principles of scientific methods to read and interpret professional literature, participate in research activities, and analyse client care outcomes, new concepts, and findings." *APTA Clinical Performance Instrument 1997, p. 28.*

Appendix II

EXAMPLES OF BEHAVIOUR FOR EACH OF THE CLINICAL PERFORMANCE CRITERIA

Practices in a safe manner that minimise risk to clients, self, and others.

- Demonstrates a clear understanding of all safety requirements.
- Should not have to be constantly reminded of safety issues.
- Observes health and safety regulations.
- Maintains safe working environments.
- Recognises physiological and psychological changes in clients and adjusts treatment accordingly.
- Demonstrates awareness of contraindications and precautions during physiotherapy management.
- Requests assistance when necessary.
- Uses acceptable techniques for safe handling.
- Protects welfare of self, client and others in emergency situations.
- Reports accidents or adverse events to CEs

Adheres to ethical and legal practice standards.

- Abides by relevant ethical codes and standards of practice guidelines.
- Adheres to institutional policy and procedures.
- Identifies situations in which ethical questions are present.
- Reports violations of ethical practice.
- Abides by pertinent laws and regulations, including those applying to physiotherapy registration.
- Identifies situations in which legal questions are present.
- Follows rules and regulations to maintain client confidentiality.

Application of knowledge

Demonstrate adequate understanding of client's clinical condition reflecting knowledge of basic, applied and behavioural sciences.

- Demonstrates understanding of aetiology, pathology, clinical course and prognosis of the condition.
- Retrieves and interprets relevant information from multiple data sources when making a sound clinical decision.
- Understands the significance of signs and symptoms and traces their source.
- Demonstrates knowledge of abbreviations commonly used in the clinical setting.
- Applies knowledge of basic, applied, and behavioural sciences in physiotherapy management and understands their implications on the client's clinical picture

Analyses and interprets clinical findings to establish physiotherapy diagnoses, problem list, and outcomes of care.

- Synthesises examination data to complete the physiotherapy evaluation.
- Interprets clinical findings and hypothesises/identifies possible underlying causes to establish a physiotherapy diagnosis within the practitioner's knowledge base.
- Identifies differential diagnoses that must be ruled out to establish a diagnosis and refers to other medical professions as indicated
- Explains the influence of pathological, pathophysiological, and pharmacological

processes on the client's signs and symptoms.

- Identifies other medical, social, or psychological problems influencing physiotherapy and not identified through diagnosis of a client's problem.
- Utilizes research evidence, clinical findings and other contributing factors to determine treatment outcomes and physiotherapy prognosis within the practitioner's knowledge base.
- Performs regular re-examination of client status to reconfirm or refute original hypothesis/es of underlying problems.
- Performs regular evaluations of treatment effectiveness and appropriately modifies treatment according to re-examination findings.
- Identifies and evaluates changes in client status.
- Prioritizes and justifies relevant information from assessment based on sound clinical reasoning and client's preference.

Designs a comprehensive physiotherapy plan of care that integrates goals, treatments (progression and modification), outcomes and discharge plan.

- Establishes realistic and measurable short- and long-term goals of treatment and desired functional outcomes that specify expected time duration.
- Establishes a physiotherapy plan of care in collaboration with the client, the family, caregiver, and others involved in the delivery of health care services.
- Recognises the role and contribution of other allied disciplines to the clients' total management.
- Establishes a plan of care consistent with the examination and evaluation.
- Establishes a plan of care that minimises risks to the clients and those involved with the delivery of the client's care.
- Designs a plan of care using best evidence and available resources to maximize client outcomes.
- Justifies the rationales behind a treatment plan using research evidence while balances needs and preferences of clients
- Adjusts the plan of care in response to changes in client status.
- Selects intervention strategies to achieve the desired outcomes.
- Establishes a plan for a safe and timely client discharge.
- Identifies and establishes appropriate post-discharge follow-up or support groups involvement

Applies the principles of critical inquiry to the practice of physiotherapy.

- Presents pertinent and precise arguments or rationale for clinical decisions.
- Makes a clinical decision within the context of ethical practice and informed consent.
- Utilises information from multiple data sources to make clinical decisions.
- Seeks disconfirming evidence in the process of making clinical decisions.
- Critically evaluates published research articles relevant to physiotherapy and applies to clinical practice.
- Participates in clinical research and quality assurance processes when possible.
- Describes sources of error in the collection of clinical data.
- Demonstrates an ability to make clinical decisions in ambiguous situations.
- Distinguishes practices based on traditional beliefs from practices that are scientifically based.
- Uses appropriate outcome measures in the delivery and assessment of ongoing client care.

- Shows the capability to apply theoretical knowledge (i.e. anatomy, physiology, pathology, biomechanics etc.) for assessment.

Physiotherapy skills

Performs a physiotherapy client examination in a logical, organised and accurate fashion.

- Selects reliable and valid physiotherapy examination methods and outcome measures relevant to the chief complaint, results of screening, and history of the client.
- Obtains accurate information by performing selected examination methods.
- Adjusts examination choices and procedures according to client's response, age, sex, culture, disease severity, behaviour, etc
- Performs physiotherapy examination in a safe manner and adheres to contraindications/precautions of the client's conditions.
- Performs physiotherapy examination procedures logically, consistently and efficiently.

Performs physiotherapy interventions efficiently and effectively.

- Demonstrates intervention skills and techniques in a safe, effective, and correct manner.
- Performs intervention consistent with the plan of care.
- Provides intervention in a manner that minimizes risk to self, the client, and others involving the delivery of the client's care.
- Provides appropriate feedback to the client during and after intervention.
- Uses intervention time efficiently and effectively.
- Uses the environment and/or equipment effectively during an intervention.
- Adapts intervention to meet individual needs and responses of the client.

Produces legible, concise and accurate documentation to support the delivery of physiotherapy services, in accordance with guidelines and format required by the centre.

- Selects relevant information to document the delivery of physiotherapy client care.
- Documents all respects of physiotherapy care, including screening, examination, evaluation, plan of care, treatment, response to treatment, discharge planning, family conferences, and communication with others involved in delivery of client care.
- Produces documentation that follows guidelines and format required by the practice setting.
- Documents client care consistent with guidelines and requirements of regulatory agencies and third-party payer.
- Produces documentation that is accurate, concise, timely, legible and clinically sound.
- Demonstrates professionally and technically correct written communication skills.

Reports cases in an organised and clear manner.

- Demonstrates professionally and technically correct verbal communication skills.
- Reports client's condition timely and routinely without referring to case notes.
- Organises the report content systematically to reflect adequate understanding of client's condition and the associated implications.
- Understands the difference between a brief and full report of client's condition.

Communicates effectively and develop good rapport with clients.

- Communicates, verbally and non-verbally, in a polite, respectful, non-defensive and timely manner.
- Initiates communication in difficult situations.
- Selects the most appropriate person(s) with whom to communicate.
- Communicates with respect for the roles and contributions of all participants in client care.
- Listens actively and attentively to understand what is being communicated by others.
- Demonstrates professionally and technically correct verbal communication.
- Communicates using non-verbal messages that are consistent with intended messages.
- Interprets and responds to the non-verbal communication of others.
- Evaluates effectiveness of his/her own communication and modifies communication accordingly.

Educates others (client, family, caregivers, staff, students, other healthcare providers) using relevant and effective teaching methods.

- Identifies and establishes priorities for educational needs in collaboration with the learner.
- Identifies learning style and learning barriers of clients.
- Designs educational activities to address identified needs.
- Conducts educational activities using a variety of instructional strategies as needed.
- Evaluates effectiveness of educational activities.
- Modifies educational activities and strategies considering different learner's needs, characteristics, and capabilities.
- Ensures that the client is able to carry out home exercise/advice and self-assessment of own conditions.

Professional behaviours

Demonstrates initiative to seek advice, clarify doubts, and maximize own learning.

- Always seeks clarification first whenever in doubts.
- Understands when to reports immediately to the CE.
- Approaches the CE for supervision whenever required.
- Refrains from performing uncertain procedure.
- Shows initiative in searching for and studying reference materials to supplement own knowledge.
- Participates actively in additional learning opportunities during placements.

Demonstrates professional behaviours during interactions with others, and present self in a professional manner to clients, colleagues, educators and other healthcare team members.

- Maintains productive working relationships with clients, families, CE, and others.
- Behaves in respectful and responsible manner to colleagues, educators and other health care team members.
- Treats others with positive regard, dignity, respect, and compassion.
- Demonstrates behaviours that contribute to a positive work environment.

- Accepts criticism without defensiveness.
- Manages conflict in constructive ways.
- Makes a choice after considering the consequences to self and others.
- Assumes responsibility for choices made in situations presenting legal or ethical dilemmas.
- Maintains client privacy and modesty (draping, confidentiality).
- Demonstrates concern for the comfort, safety, welfare, needs and dignity of the client.
- Reports violations of laws governing practice of physiotherapy.
- Recognises limitation of knowledge and skills, and seeks assistance in an appropriate manner.
- Respects the rights of the individual.
- Respects the client's feelings and well-being.
- Accepts responsibility for own actions.
- Is punctual and dependable.
- Completes scheduled assignments in a timely manner.
- Wears attire (including name badge) consistent with expectations of the practice setting.
- Demonstrates initiative.
- Abides by the policies and procedures of the practice settings.
- Adapts to change.

Organises work in a cost effective and timely manner (i.e. efficiently).

- Sets priorities for the use of resources to maximise outcomes.
- Functions within the organisational structure of the practice setting.
- Uses time effectively.
- Coordinates physiotherapy with other services to facilitate efficient and effective client care.
- Schedules clients, equipment, and space.
- Maximises utilisation of equipment and manpower in the practice setting.

Adapts delivery of physiotherapy care to reflect respect for and sensitivity to individual differences.

- Exhibits sensitivity to differences in race, creed, colour, gender, age, national or ethnic origin, sexual orientation, and disability or health status in communicating with others, developing and implementing plans of care.
- Demonstrates a nonjudgmental physiotherapy care when dealing with differences in opinions and beliefs.

Appendix III



Department of Rehabilitation Sciences Master in Physiotherapy

Student Evaluation of Learning Experience in Institutions for Clinical Education

Placement _____ (Yr ____ to _____) Date: _____

NOTE: This student evaluation will be conducted online via the Clinical Education Blackboard site near the end of each clinical placement. The questions are included in this manual for your reference only. Please complete the mandatory online version when it becomes available.

To review and improve learning during clinical placements, the Clinical Education Team of The Hong Kong Polytechnic University would appreciate your opinion of the clinical placement that you have just completed. Your responses to the items will be captured and analysed by the Educational Development Centre of this university, not by the department. Your individual feedback and comments will be treated confidentially. Please give your honest feedback on your experience of this clinical placement by answering all of the items below.

For the purpose of this questionnaire, clinical educator (CE) refers to either the clinical educator or the supporting physiotherapy staff in the clinical education unit.

Background information

1. Clinical placement completed: CE (_____) [Period: –]
2. Name of Centre
3. Name of clinical educator (please type)
4. Name of Visiting Lecturer

About the University preparation

| | Strongly agree | Agree | Disagree | Strongly disagree |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 5. The theoretical knowledge taught at the University sufficiently prepared me for its application in the clinical setting. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 6. The University prepared me to address most of the pathological conditions I encountered in the clinical placement. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 7. The skills taught at the University sufficiently prepared me for its application in the clinical setting. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. In what way can the University preparation be improved? | | | | |

About your preparation and participation

| | Strongly agree | Agree | Disagree | Strongly disagree |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 9. I spent a lot of my preparatory time revising notes given by the lecturers. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 10. I spent a lot of my preparatory time practising skills taught at the University. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 11. I spent a lot of time reading about the conditions I encountered during the clinical placement. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 12. I spent a lot of time reading references recommended by the clinical educator (CE). | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 13. I actively took part in tutorial discussions. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 14. I attempted to seek help from the CE when I encountered difficulties. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

About the clinical placement with respect to the development of your clinical practice

| | Strongly agree | Agree | Disagree | Strongly disagree |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| 15. The Clinical Educator (CE) was accessible when needed. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 16. Intervention principles taught between CE and supporting CE were consistent. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 17. The clinical programme was well structured. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 18. The clinical programme was well conducted. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

| | | | | |
|--|-----------------------|-----------------------|-----------------------|--|
| 19. Please indicate the average number of patients/cases that you managed per day during this placement: | | | | |
| | Too light | Appropriate | Too heavy | |
| 20. In my opinion, the patient load in this placement was | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | |

| | Strongly agree | Agree | Disagree | Strongly disagree |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 21. The learning environment was open and conducive to learning. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 22. There were sufficient opportunities for me to improve my skills. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 23. I was very 'stressed' during this placement. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 24. If you felt excessively stressed during this placement, please state reasons: | | | | |

About the supervising staff (CE) with respect to my clinical practice

| | Strongly agree | Agree | Disagree | Strongly disagree |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 25. Instructions given by the CE were clear. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 26. The CE guided me to learn to apply theoretical knowledge to the clinical situation. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 27. The CE guided me to improve my assessment techniques. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 28. The CE guided me to improve my treatment techniques. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 29. The CE guided me to understand the principles underpinning the clinical practices. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 30. The CE gave me useful feedback/suggestions for improving my clinical practice. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 31. The CE gave me positive feedback when I had done something well. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 32. I was encouraged to express ideas. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

About the visiting University lecturer with respect to the lecturer who visited me during this clinical placement

| | Strongly agree | Agree | Disagree | Strongly disagree |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| 33. The visiting lecturer was able to assist in the clarification of differences between University and clinical teaching. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 34. The visiting lecturer was able to reinforce the application of theoretical knowledge to the clinical situation. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 35. The discussion sessions with the visiting lecturer were useful. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Perceived outcome of this placement

| | Strongly agree | Agree | Disagree | Strongly disagree |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 36. The clinical experience of this placement was rewarding. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 37. My assessment techniques have improved in this placement. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 38. My treatment techniques have improved in this placement. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 39. My clinical reasoning skills have improved in this placement. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 40. My problem solving ability has improved in this placement. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 41. My ability to communicate with patients has improved in this placement. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 42. My confidence in dealing with patients has increased in this placement. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

General Comments

43. Aspects of this placement that I found most useful/rewarding with respect to my learning:

44. Suggest how this placement can be further improved:

45. Student number [For EDC reference only. This information will NOT be passed either to the Department or the Institution of the Clinical Educator concerned]

Thank you very much for your comments.

Please click the button below once to send your response to us via the Web.

Appendix IV

**Department of Rehabilitation Sciences – Master in Physiotherapy
Travelling Allowance Reimbursement Form for Clinical Placement**

Name of the student: _____ Student No: _____

Clinical Placement site: _____ Block: CE IV/ V/ VI

Period: _____ to _____

Eligibility: (1) Travel from the clinical setting to client’s home/community settings for 3 or more days per week was required;
(2) Expense on public transportation, e.g. bus, mini-bus, LRT, MTR was incurred.

Please submit the reimbursement form within 3 weeks after completion of the clinical placement block.

| Date | Time | Brief description of activity involved: | From | To | Means of Transport | Travelling Fee |
|------|------|---|------|----|--------------------|----------------|
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Signature of applicant: _____

Acknowledgement of the Clinical Educator: _____

Signature of MPT Faculty in-charge of the placement arrangement: _____

Payment will be made directly into the Student’s bank account. Please complete the bank details at <https://www40.polyu.edu.hk/fosae/>.

PLEASE FORWARD TO General Office QT512 (RS) FOR PROCESSING.