

Unit Specification

1. Unit details

Unit Code	PHY7005	
Unit Title	Developing Physiotherapy Practice Skills 1	
Version number	1	
Credit	Credits/ECTS:	
	20 CATS 10 ECTS	
FHEQ Level	7	
Semester taught in	Autumn Semester	
HeCOS/JACS codes	100252 Physiotherapy 101289 Rehabilitation Science	
Course (s) for which unit is delivered	MSc Physiotherapy (Pre-registration)	
For multiple courses, please asterisk (*) the course which owns this unit		
Pre-requisites	None	
Co-requisites		
Where will the unit be taught?	AECC University College	
Unit Leader name(s) and contact details	Caroline Belchamber <u>Cbelchamber@aecc.ac.uk</u>	

2. Unit aims and outline

This unit seeks to develop an evidence-based approach to understanding how clinical sciences influence the management of problems commonly encountered by physiotherapists in clinical practice. Building upon the 'Concepts of Practice' unit you will be introduced to the assessment process and treatment of commonly occurring cardiorespiratory, neurology, and musculoskeletal conditions. Learning in the unit will be facilitated by service user case studies. The unit will also explore treatment options, advice to patients, participation and the use of physical activity and exercise to manage a range of conditions.

3. Intended Learning outcomes

Having completed this unit you will be able to:

- (a) Critically analyse, evaluate and synthesise evidence to inform the physiotherapy management of simple case studies.
- (b) Demonstrate safe, and effective physiotherapy management techniques including patient handling, positioning and immobilisation, for simple musculoskeletal, neurological and cardiorespiratory conditions.
- (c) Recognise the ethical and moral dimensions of physiotherapy including issues related to informed consent including: explanation of assessment options, confirming patient understanding and patient choice.
- (d) Develop a range of evidence-informed assessment, treatment and manual therapy skills that

3. Intended Learning outcomes

underpin the delivery of rehabilitation services.

(e) Apply problem-solving and clinical reasoning skills to design, evaluate and modify appropriate assessments, treatments, and management plans for specific service-user groups.

4. Indicative content

- Development and refinement of assessment procedures to progressively more complex and varied case studies
- Development of awareness of the needs of cardiovascular, neurological, respiratory, musculoskeletal, and special population groups (e.g., Covid-19).
- Development of clinical reasoning skills and the exercise of informed clinical judgement
- Use and application of a range of physiotherapeutic treatment and rehabilitation modalities and strategies.
- · Practice writing clinical records
- Gaining consent from patients and service users
- Exploration of a range of psychosocial factors that influence the management of the patient.
- Reflect on prior learning to develop self-awareness
- Manual therapy and manipulation skills soft tissue massage, mobilisation techniques, promoting normal function and movement
- Concepts of physical activity, fitness and health and how they underpin rehabilitation in contemporary physiotherapy practice
- Physical activity and exercise prescription including application for the following: musculoskeletal; neuro-rehabilitation; cardio-pulmonary and vascular; acutely unwell patient/critical care; dementia/mental health; health and wellbeing.

5. Indicative summary of teaching and learning methods and activities including contact hours

The unit will be delivered through a combination of lectures, tutorials, seminars and practical workshops/laboratory sessions. Learning will be encouraged through student centred activities including online materials, directed learning and experiential reflections

The following information gives an indication of how much time you are likely to spend in different types of activities during this unit.

Indicative contact hours	60
Indicative guided non-contact hours	96
Indicative self-directed learning hours	44

Contact hours are scheduled learning sessions and may include: lectures, tutorials, seminars, and practical sessions.

Guided non-contact hours may include directed reading, working through specific material on the virtual learning environment (VLE) in preparation for in-class discussions.

Non-contact hours may include reading and researching, revision, preparing for and writing up coursework, practicing practical techniques (where applicable), and reflective e-portfolio development.

6. Summary of assessment methods and activities

Formative assessment

Formative feedback will be provided both verbally and virtually by peers as part of group discussions both in the classroom and in virtual discussion groups, as well as in practical skills sessions.

Summative assessment

ILO (s) Assessed	Form of assessment	Percentage of overall assessment (total must be 100%)
A, B, C, D and E	Practical: Practical Skills Assessment	100%

Indicative assessment

In this assessment you will undertake a 45-minute practical skills assessment that will be composed of a number of skill-focused stations. All of these subcomponents of the assessment must be passed in order to achieve an overall pass for the unit.

Indicative feedback methods

For formative tasks you will receive verbal feedback from peers as part of a 'peer review' process. Feedback on the final summative tasks will be written and returned electronically to you.

7. Indicative learning resources

Books

- Ainslie, T. (2012). *The Concise Guide to Physiotherapy* 2-Volume Set: Assessment and Treatment. London: Elsevier Health Sciences.
- Edwards, S. (2002). *Neurological Physiotherapy: A Problem-Solving Approach*, 2nd ed, London: Churchill Livingstone.
- Frownfelter, D., & Dean, E. (2012). *Cardiovascular and Pulmonary Physical Therapy, Evidence to Practice*, 5th ed, St Louis, MO: Mosby.
- Higgs, J, Jensen, G, Loftus, Stephen, Christensen, N (2018.) Clinical Reasoning in the health Professions. 4th ed:Elsevier
- Hough, A. (2018). *Cardiorespiratory Care: An evidence-based, problem-solving approach.* 5th ed, New York, NY: Elsevier.
- Jones, M, Rivett, D. (2019). Clinical reasoning in musculoskeletal practice. 2nd ed. Elsevier Jull, G. (2015). *Grieve's Modern Musculoskeletal Physiotherapy*, 4th ed. Oxford: Elsevier Sciences.
- Kauffman, L., Scott, R., Barr, J, & Moran, M. (2014). *A Comprehensive Guide to Geriatric Rehabilitation*. Oxford: Elsevier Health Science.
- Kisner, C. & Colby, L. A., (2012). *Therapeutic Exercise: Foundations and Techniques*, (6th Ed.), Philadelphia, F.A. Davies Co.
- Mead, G., van Wijck, F (2013). Exercise and Fitness Training After Stroke: A handbook for evidence-based practice. London: Churchill Livingstone.
- Porter S (2017) Embedding Psychosocial Perspectives Within Clinical Management. Oxford. Elsevier Health Sciences UK.
- Reynolds F (2005) *Communication and Clinical Effectiveness in Rehabilitation*. Edinburgh: Elsevier Butterworth-Heinemann.
- Stokes., M., Stack, E,. (Ed.) (2013). *Physical Management for Neurological Conditions: [Formerly Physical management in Neurological Rehabilitation]. Churchill Livingstone.*

Journals

Clinical Rehabilitation
European Journal of Physiotherapy
International Journal of Physiotherapy
International Journal of Therapy and Rehabilitation
Journal of Applied Physiology
Journal of Physical Activity and Health
Journal of Physiotherapy
Musculoskeletal Science and Practice
Musculoskeletal Physiotherapy

7. Indicative learning resources

Physiotherapy Physiotherapy Journal

Web-based sources and access to electronic journals is available through the Institution's library. You will have access to library staff to support literature searches and access to electronic resources. The library provides links to all relevant databases, gateways and on-line journals.

The Institution's virtual learning environment provides you with electronic resources that support the delivery of each unit with regularly updated learning materials and interactive learning aids such as quizzes, videos, e-cases, e- lessons and other suitable tools.