

Booklet for the assessment of competence for Band 3 Physiotherapy Assistants

Name

.....

Role

.....

Date Competencies Commenced

Date Competencies Completed

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Assessment of competence for Band 3 Physiotherapy Assistants

The competencies set out in this workbook have been put together to ensure that best practice is being carried out by Physiotherapy Assistants working within Adult Rehabilitation Services in Gloucestershire Health and Care NHS Foundation Trust. This includes Integrated Community Teams, Bed Based Reablement, Community Hospitals and Musculoskeletal services.

The workbook should be used to train and assess you as a Physiotherapy Assistant and provides a comprehensive outline of the skill set you require. It is your responsibility to demonstrate competence in all areas, and to seek support where required.

Alongside the core competencies set out in this booklet, you will also be required to complete the care certificate and all mandatory training deemed appropriate for your role.

There are also a number of role specific Physiotherapy Assistant competencies. Your line manager will inform you as to which of these you will need to complete to fulfil your role and highlight them on the table below.

Competency	Essential	Role Specific
Non-Complex Initial Assessment	x	
Gait re-education, Mobility Aids and Stairs	x	
Teach, supervise and progress an exercise programme	x	
Outcome measures, goal setting and treatment planning	x	
Active Balance Classes		
Amputees		
Ward Based Competencies		
Community Visits		

The documentation for the role specific competencies are located on the M: Drive and should be added to this workbook for completion as appropriate.

The assessment process

As a Physiotherapy Assistant, you will be supported by a registered therapist(s) who will work through the sections of each competency and act as your assessor. Once sufficient evidence has been gathered for each section, and you and the assessor agree, the competency can be signed off.

The assessor and you will agree the most appropriate method to achieve and assess each competency. Self-directed learning and reflective practice are essential components of learning and there is space in the back of this booklet to record this as part of your evidence. Other methods of assessing may include: observation of practice; joint working; supervision; patient feedback; production of a written piece; development of a resource; delivering a presentation/training session.

It is expected that the essential competencies are completed within 4-6 months of starting employment with the trust, however it is recognised that some may take less time than this. Your line manager should put one copy of this booklet in your personal file and you should keep one copy for your CPD folder.

Responsibility and Accountability

As a Band 3 Physiotherapy Assistant your work will be delegated to you by a registered practitioner. A registered practitioner will therefore retain overall responsibility for the care and treatment of patients on your caseload.

You are accountable for accepting a delegated task and once accepted, you are accountable for your actions and decisions. Therefore you must be competent and confident in what you are being asked to do and be sure that it is appropriate for your role, level of practice and personal capability.

Ensuring the maintenance of competence and ongoing safe practice

In line with trust policy, every employee should have an annual PDR and these competencies must be reviewed as part of this. However, the PDR process is continuous and progress and performance should be reviewed throughout the year. For Physiotherapy Assistants the following regular supervision sessions are recommended:

- A PDR **annually** with your line manager(s)
- A PDR halfway review **at 6 months** with your line manager(s)
- Clinical supervisions **every 4-6 weeks** with your line manager or other identified registered health professional (to include at least 3 observed practices and 1 record keeping audit per year)
- Brief caseload discussions **once a week** with your line manager or other identified registered health professional (**Appendix 1**). Within inpatient settings this should be completed via handovers and MDT meetings.

What is expected whilst working towards completion of competencies?

You may be expected to carry out some unaccompanied tasks if you are deemed capable – this will be discussed prior to and post visit with a registered therapist. Alongside these tasks you will be undertaking joint working, observed practice, shadowing or peer-to-peer work until the competency has been signed off.

Assessment of competence for Band 3 Physiotherapy Assistant

Clinical Skill: Non-Complex Initial Assessment

Name:
Base:

Team:

Aim:	<p>To carry out an initial assessment of a patient with non-complex needs following a pre-determined pathway (as below). This will include the gathering of history and physical examination in order to plan and deliver an effective physiotherapy intervention.</p> <p>Non-complex to include:</p> <ul style="list-style-type: none"> • Hospital discharge from acute or community for progression of exercises / mobility (including outdoor mobility and stairs) e.g. fractured hip, total hip / knee replacements • Assessment of mobility aid / activities of daily living equipment – if no recent therapy input (> 3 months) will need completion of screening tool by registered physiotherapist • Equipment replacement if faulty / like for like • Pre Active Balance Class (ABC) review – completion of outcome measures (N.B. interpretation of appropriateness for ABC to be determined by Band 4 or registered physiotherapist) • Inpatient subjective history • Inpatient objective chair / bed assessment; range of movement, muscle power and bed mobility 		
Objectives:	<p>The assistant will be able to:</p> <ul style="list-style-type: none"> • Demonstrate an understanding of the knowledge and skills necessary to gather information on the patient's medical and social status in order to contribute to the assessment process and the patient's healthcare record. • Describe the knowledge and skills necessary to identify a patient's physical and functional ability, contributing to the assessment process. 		
Additional resources:	<p>NHS Lanarkshire workbooks available to complete to support learning: \\Glos-care.nhs.uk\gcs\GCS-CS2\Adult Services\Adult Rehabilitation Physiotherapy\Training\PTA Training\Physio assistant workbooks:</p> <ul style="list-style-type: none"> - Skeletal anatomy - Articular system - Musculoskeletal system - Pain control awareness - Cardiovascular system - Respiratory system - Ageing process 		
Underpinning Knowledge		Date	Signed by

The assistant will be able to:		assessor
Discuss own professional accountability, to include: <ul style="list-style-type: none"> - Duty of care - Gloucestershire Health and Care Services competencies - Trust values - All initial patient assessments to be discussed with a physiotherapist at weekly supervision or earlier if needed - When to refer back to physiotherapist 		
Discuss the sources available for gathering information e.g. medical records, patient, family / carers, Multidisciplinary Team (MDT).		
Describe a range of relevant common medical conditions.		
Describe the main bones, joints and muscle groups in the body and how they relate to normal movement.		
Demonstrate a basic knowledge of the function of major muscle groups and normal joint ranges.		
Describe common causes and pathologies which limit muscle function / joint range of movement. To include: <ul style="list-style-type: none"> - Arthritic conditions - Fracture - Frailty - Contractures - Muscle tone 		
Describe common respiratory and cardiovascular conditions and how these relate to patient presentation and wellbeing.		
Explain the relevance of normal observational values relevant to the clinical area.		
Discuss the potential causes of reduced mobility e.g. falls, fracture, weakness, poor balance.		
Discuss the potential causes of falls and risks of falling.		
Discuss potential complications / limitations to rehabilitation e.g. cognition, psychological barriers, environment		
Explain the contraindications and precautions to therapy assessment and treatment relevant to the clinical area, e.g. red flags		
Demonstrate a knowledge of appropriate actions should an emergency or problem arise e.g. fall, breathlessness or panic.		
Describe the trusts record keeping standard and the legal implications of record keeping.		

Performance criteria: The assistant will be able to:	Date observed by PT	Date observed by PT	Date / assessor initial when completed
Undertake the planning and preparation required prior to completing an initial assessment; ensuring the screening tool has been applied as appropriate.			
Demonstrate gaining and documenting informed consent of the patient, including considerations to capacity.			
Demonstrate the ability to gain a detailed subjective history from the patient and / or other sources as required (e.g. family, carers, MDT) to ensure it is safe to proceed with assessment.			
Demonstrate good communication skills with the patient, carers and other health professionals.			
Prepare the patient and area for objective assessment including completion of a moving and handling risk assessment.			
Undertake safe and effective objective assessment of the patient to establish their physical / functional abilities and limitations. To include: <ul style="list-style-type: none"> - Muscle power using oxford grading scale - Joint range of movement including active and passive - Gross sensation - Gait pattern - Balance 			
Select an appropriate outcome measure and record the findings.			
Interpret the assessment through completion of a problem list, analysis, SMART goals and treatment plan.			
Record the assessment accurately in the appropriate part of the patient's healthcare record.			
<p>I confirm that the Physiotherapy Assistant has completed the above competency.</p> <p>Signed:..... Date:.....</p> <p>Print Name:.....Job title.....</p> <p>Declaration: By signing below, I confirm that I have received the appropriate training to complete the underpinning knowledge and practical skills for the below competencies, which will enable me to safely treat patients under my care. I acknowledge that it is my responsibility to maintain and update my knowledge and skills relating to these competencies. I agree to comply with the policies and procedures of the Trust.</p> <p>Signed:..... Date:.....</p> <p>Print Name:.....</p>			

Assessment of competence for Band 3 Physiotherapy Assistants

Clinical Skill: Gait re-education, Mobility Aids and Stairs

Name:
Base:

Team:

Aim:	To be able to assess gait patterns, issue mobility aids and assess / instruct safe negotiation of stairs and steps.
Objectives:	<p>The assistant will be able to:</p> <ul style="list-style-type: none"> • Demonstrate an understanding of the knowledge and skills necessary to assess gait patterns and select appropriate mobility aids. • Describe the skills and knowledge necessary to assess and teach safe negotiation of steps and stairs following discussion with registered physiotherapist. • Demonstrate competency in completing the above skills.
Additional resources:	<p>NHS Lanarkshire workbooks available to complete to support learning: \\Glos-care.nhs.uk\gcs\GCS-CS2\Adult Services\Adult Rehabilitation Physiotherapy\Training\PTA Training\Physio assistant workbooks:</p> <ul style="list-style-type: none"> - Transfers - Gait re-education - Taking a patient on stairs

Underpinning Knowledge	Date	Signed by assessor
The assistant will be able to:		
<p>Discuss own professional accountability, to include:</p> <ul style="list-style-type: none"> - Duty of care - Gloucestershire Health and Care Services competencies - Trust values - All patients to be discussed with registered physiotherapist at weekly supervision or earlier if needed - When to refer back to physiotherapist 		
<p>Explain the contraindications and precautions to therapy assessment and treatment relevant to the clinical area.</p>		
<p>Describe a normal gait pattern and the variations seen from common conditions / pathologies e.g. arthritis, joint replacement, stroke.</p>		
<p>Explain when it is appropriate to assess a patient on steps/ stairs.</p>		
<p>Describe the basic muscle / joint actions needed to mobilise</p>		

and negotiate stairs and the different patterns used.		
Describe common medical conditions and factors which may affect the patient's ability to negotiate stairs e.g. cardiovascular/respiratory conditions, osteoarthritis, neurological conditions.		
	Date	Signed by assessor
Discuss the meaning and implications of weight bearing status and how to accommodate this in practice, including when on stairs e.g. non / touch / partial / full / as tolerated.		
Discuss the range of mobility aids available and the principles / precautions related to selection, including the use on stairs. To include: <ul style="list-style-type: none"> - Walking frames - narrow, static, wheeled, gutter, pulpit, atlas - Sticks – anatomical, fischer, tripod, quad - Elbow crutches - Bariatric aids - Four wheeled walker / three wheeled walker - Kitchen trolley 		
Describe the process involved to order, request collection and report faulty equipment via the cequip system.		
Discuss the adaptations which can be made to a patient's steps /stairs at home.		
Describe when a patient may be appropriate to progress gait pattern and mobility aids.		
Demonstrate a knowledge of appropriate actions should an emergency or problem arise e.g. fall, breathlessness or panic.		
Describe the trusts record keeping standard and the legal implications of record keeping.		

Performance criteria:	Date observed by PT	Date observed by PT	Date / assessor initial when completed
The assistant will be able to:			
Undertake the planning and preparation required prior to completing mobility or stairs assessment / practice.			
Demonstrate gaining and documenting informed consent of the patient, including considerations to capacity.			
Demonstrate the ability to obtain relevant information about the patient's home environment, previous mobility and equipment at home and how this relates to the assessment.			

Demonstrate good communication skills with the patient, carers and other health professionals.			
Prepare the patient and area for the assessment / treatment, including awareness of any moving and handling risks.			
	Date observed by PT	Date observed by PT	Date / assessor initial when completed
Demonstrate how to select, assess and issue the below mobility aids, including consideration of weight bearing status and technique: <ul style="list-style-type: none"> - Walking frames - narrow, static, wheeled, gutter, pulpit, atlas - Sticks – anatomical, fischer, tripod, quad - Elbow crutches - Bariatric aids - Four wheeled walker / three wheeled walker - Kitchen trolley 			
Demonstrate the ability to assess and interpret gait. To provide advice and education regarding technique and progress as indicated.			
Demonstrate how to negotiate steps / stairs using an appropriate method and consideration of weight bearing status +/- mobility aid.			
Interpret the outcome of the assessment and provide feedback to the patient and the registered therapist.			
Record the assessment accurately in the appropriate part of the patient’s healthcare record.			
<p>I confirm that the Physiotherapy Assistant has completed the above competency.</p> <p>Signed:..... Date:.....</p> <p>Print Name:.....Job title.....</p> <p>Declaration: By signing below, I confirm that I have received the appropriate training to complete the underpinning knowledge and practical skills for the below competencies, which will enable me to safely treat patients under my care. I acknowledge that it is my responsibility to maintain and update my knowledge and skills relating to these competencies. I agree to comply with the policies and procedures of the Trust.</p> <p>Signed:..... Date:.....</p> <p>Print Name:.....</p>			

Assessment of competence for Band 3 Physiotherapy Assistants

Clinical Skill: Teach, supervise and progress an exercise programme

Name:
Base:

Team:

Aim:	To be able to teach and supervise a patient performing an exercise programme and to progress in a safe and timely manner.
Objectives:	The assistant will be able to: <ul style="list-style-type: none"> • Describe the knowledge and skills necessary to teach and supervise an exercise programme. • Demonstrate the ability to complete the task and identify when physiotherapy treatment can be progressed / regressed in discussion with a registered physiotherapist.
Additional resources:	NHS Lanarkshire workbooks available to complete to support learning: \\Glos-care.nhs.uk\gcs\GCS-CS2\Adult Services\Adult Rehabilitation Physiotherapy\Training\PTA Training\Physio assistant workbooks: <ul style="list-style-type: none"> - Passive exercise - Supervision of active exercise - Balance re-education

Underpinning Knowledge	Date	Signed by assessor
The assistant will be able to:		
Discuss own professional accountability, to include: <ul style="list-style-type: none"> - Duty of care - Gloucestershire Health and Care Services competencies - Trust values - All changes to treatment plan to be discussed with registered physiotherapist at weekly supervision or earlier if needed - When to refer back to physiotherapist 		
Explain the contraindications and precautions to therapy assessment and treatment relevant to the clinical area.		
Describe the different purposes of exercises e.g. strengthening, stretching, balance, health.		
Describe the effects of exercise e.g. increased heart rate, fatigue, pain and mood.		
Describe pre-existing conditions that may have an impact on the ability to complete an exercise programme e.g. respiratory or heart condition, joint disease, neurological condition.		
Discuss precautions /contraindications to exercise e.g.		

breathlessness, fatigue, fracture, blood clot, myocardial infarct, new pain.		
Describe the different types of exercise e.g. active / passive, open/closed chain, aerobic.		
	Date	Signed by assessor
Demonstrate a knowledge of exercises for: <ul style="list-style-type: none"> - Lower limb weakness - Balance 		
Discuss what factors would indicate the need for progression, regression or modification of an exercise programme.		
Explain how exercises can be modified, progressed or regressed e.g. Frequency, Intensity, Time, Type (F.I.T.T) principles.		
Describe how to tailor an exercise programme to improve patient compliance and motivation.		
Demonstrate a knowledge of appropriate actions should an emergency or problem arise e.g. fall, breathlessness or panic.		
Describe the trusts record keeping standard and the legal implications of record keeping.		

Performance criteria:	Date observed by PT	Date observed by PT	Date / assessor initial when completed
The assistant will be able to:			
Undertake the planning and preparation required prior to teaching an exercise programme.			
Demonstrate gaining and documenting informed consent of the patient, including considerations to capacity.			
Demonstrate the ability to obtain relevant clinical information and decide whether it is safe to proceed.			
Demonstrate good communication skills with the patient, carers and other health professionals. To include explanation of the potential benefits and risks of exercise.			
Prepare the patient and environment for exercise.			
Demonstrate and teach an exercise programme and provide feedback to patients throughout to ensure that the correct technique is used.			

Monitor the patient whilst undertaking the exercise programme and take appropriate action if there are any changes in health or wellbeing.			
	Date observed by PT	Date observed by PT	Date / assessor initial when completed
Modify the exercise programme as required if patients are unable to perform the full programme and identify if patients are using compensation techniques.			
Provide the patient with guidance regarding frequency, repetition, safety in an appropriate format.			
Interpret the effectiveness of the exercise programme and provide feedback to the patient and the registered therapist.			
Demonstrate progression or regression of an exercise programme.			
Record the assessment accurately in the appropriate part of the patient's healthcare record.			

I confirm that the Physiotherapy Assistant has completed the above competency.

Signed:..... Date:.....

Print Name:.....Job title.....

Declaration: By signing below, I confirm that I have received the appropriate training to complete the underpinning knowledge and practical skills for the below competencies, which will enable me to safely treat patients under my care. I acknowledge that it is my responsibility to maintain and update my knowledge and skills relating to these competencies. I agree to comply with the policies and procedures of the Trust.

Signed:..... Date:.....

Print Name:.....

Assessment of competence for Band 3 Physiotherapy Assistants

Clinical Skill: Outcome measures, goal setting and treatment planning

Name:
Base:

Team:

Aim:	To be able complete a range of outcome measures, set patient-centred SMART goals and devise a treatment plan.
Objectives:	The assistant will be able to: <ul style="list-style-type: none"> - Describe the benefit of using outcome measures. - Describe the benefit of setting patient-centred SMART goals. - Demonstrate the ability to complete an outcome measure and relate this to patient SMART goals and treatment plan, in discussion with a registered physiotherapist

Underpinning Knowledge	Date	Signed by assessor
The assistant will be able to:		
Discuss own professional accountability, to include: <ul style="list-style-type: none"> - Duty of care - Gloucestershire Health and Care Services competencies - Trust values - All patients to be discussed with a registered physiotherapist at weekly supervision or earlier if needed - When to refer back to physiotherapist 		
Discuss the sources available for gathering information e.g. medical records, patient, family / carers, Multidisciplinary Team (MDT).		
Describe the importance of outcome measures, including patient reported and objective and why reassessment is required.		
Explain the importance of following the protocol for each outcome measure.		
	Date	Signed by assessor
Discuss what types of patients you might use the following		

outcome measures for: <ul style="list-style-type: none"> - Patient Specific Functional Scale (PSFS) - Short Falls Efficacy Scale (FES-1) - Barthel - 30 second chair stand test - Elderly Mobility Scale (EMS) - Timed walk tests - Berg balance - Four stage balance test 		
Discuss the process to be taken following the assessment to include: <ul style="list-style-type: none"> - Completion of problem list - Identification of patient goals - Evaluation and interpretation - Agreed SMART goals - Treatment plan 		
Discuss how to formulate SMART goals and relate these to the treatment plan.		
Discuss the principles and importance of patient centred goals and treatment planning		
Discuss when is appropriate to review patient goals and outcome measures.		
Discuss the factors which must be considered in treatment planning and designing appropriate activities for the patient.		
Demonstrate a knowledge of appropriate actions should an emergency or problem arise e.g. fall, breathlessness or panic.		
Describe the trusts record keeping standard and the legal implications of record keeping.		

Performance criteria:	Date observed by PT	Date observed by PT	Date / assessor initial when completed
The assistant will be able to:			
Undertake the planning and preparation required prior to completing an assessment.			
Demonstrate gaining and documenting informed consent of the patient, including considerations to capacity.			
Demonstrate the ability to gain a detailed subjective history from the patient and / or other sources as required e.g. family, carers, MDT.			
Demonstrate good communication skills with the patient, carers and other health professionals.			
	Date observed by PT	Date observed by PT	Date / assessor initial

			when completed
Prepare the patient and area for objective assessment including completion of a moving and handling risk assessment.			
Demonstrate the ability to complete the following outcome measures (to include visual demonstration, clear instructions and reference to protocol): <ul style="list-style-type: none"> - Patient Specific Functional Scale (PSFS) - Short Falls Efficacy Scale (FES-1) - Barthel - 30 second chair stand test - Elderly Mobility Scale (EMS) - Timed walk tests - Berg balance - Four stage balance test 			
Interpret the assessment, through completion of a problem list, analysis, SMART goals and treatment plan.			
Demonstrate good communication skills to involve patient / family / carers in joint goal setting and treatment planning.			
Record the assessment accurately in the appropriate part of the patient's healthcare record.			

I confirm that the Physiotherapy Assistant has completed the above competency.

Signed:..... Date:.....

Print Name:.....Job title.....

Declaration: By signing below, I confirm that I have received the appropriate training to complete the underpinning knowledge and practical skills for the below competencies, which will enable me to safely treat patients under my care. I acknowledge that it is my responsibility to maintain and update my knowledge and skills relating to these competencies. I agree to comply with the policies and procedures of the Trust.

Signed:..... Date:.....

Print Name:.....

Evidence of Achievement / Learning Log

Use this log to record specific learning you have completed and your reflections e.g. training session, joint visit, reflection, peer review, background reading.

Learning type & competencies it relates to	Comments / reflections	Date

Appendix 1

Weekly caseload discussion – Physiotherapy Assistant

Supervisee:.....

Supervisor:.....

Caseload discussions to be completed weekly (30-60 minutes), to include:

- New patient assessments
- Proposed discharges
- Cases that have been on caseload > 4 contacts
- Any patients who aren't progressing

Supervisee to prepare paperwork each week before discussion. Paperwork to be updated electronically during discussion (agree who will complete and where stored) and PTA to record any specific actions on patient record e.g. Subjective on next appointment or MDT questionnaire.

Cases Discussed:					
Date	NHS Number	No. of contacts	Worklist updated	Assessment / Clinical Reasoning / Treatment / PSFS / Outcome measure / SMART goals	Plan / Agreed Actions