

THERAPY PROJECT OFFICE

Practice Educator Competencies

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Feidhmeannacht na Seirbhíse Sláinte
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Therapy Project Office

The Therapy Project Office was established in January 2007 to progress and initiate project activities on behalf of the National Implementation Group (NIG) for Clinical Placement Provision for Occupational Therapy, Physiotherapy and Speech & Language Therapy. The projects related to a number of key actions identified by the 'The Report of the National Planning Group on Clinical Placement Provision for Occupational Therapy, Physiotherapy and Speech and Language Therapy' (2004), under the three broad areas of:

- Practice Education
- Continuing Professional Development
- Quality Information for the Public

The Therapy Project Office was funded by the HSE and staffed by three project managers, representing the professional bodies of the Association of Occupational Therapists of Ireland (AOTI), the Irish Society of Chartered Physiotherapists (ISCP) and the Irish Association of Speech & Language Therapists (IASLT). A collaborative, project management model was applied throughout the process. The Project Managers also worked in partnership with the Higher Education Institutes, Therapy Services, the Department of Health & Children and the Health Service Executive to build on existing work and to drive the projects forward.

Practice Educator Competencies

The Practice Educator competencies were developed on a multidisciplinary basis across the three professions of Occupational Therapy, Physiotherapy and Speech and Language Therapy as part of the work of the Therapy Project Office. A detailed methodology is provided in Appendix 1.

Purpose

The Practice Educator competencies:

- Can be applied to all Practice Educators regardless of area of work or speciality.
- Identify the knowledge, skills and attitudes which are required of Practice Educators to promote and develop a standard of excellence in practice education within an Irish context across the three professions.
- Provide a structure to guide Practice Educators in assessing their own skills and identifying their own CPD needs in their professional role as educators (Evidence of the achievement of competence can be recorded within a personal portfolio and built on as part of each Practice Educator's commitment to lifelong learning.)
- These Practice Educators competencies include good practice guidelines which may facilitate Practice Educators in recognizing achievement of the individual competencies. However, this framework was not devised as an audit or performance appraisal tool.

Navigation

The Practice Educator competency framework is presented under five key headings:

- Education
- Supervision
- Assessment/Evaluation
- Professional Practice
- Management/Administration

Practice Educator Competencies

1. Education Competencies

The Practice Educator demonstrates the ability to:

Competencies	Guidelines for Good Practice
Understand learning styles	<ul style="list-style-type: none"> ● Understand individual differences in learning styles ● Apply knowledge of learning styles to student practice education processes ● Demonstrate familiarity with learning styles and an understanding of how ones own learning style interacts with other learning styles
Understand models of practice education	<ul style="list-style-type: none"> ● Understand a range of models of practice education. e.g. 1:1 model, 1:2 peer learning model, group etc. ● Show an understanding of teaching styles, such as reflective learning, problem based learning etc.
Create a positive learning environment for students	<ul style="list-style-type: none"> ● Structure the placements to optimise student learning while maintaining a quality service to clients ● Use all available resources to promote the student's professional development

2. Supervision Competencies

The Practice Educator demonstrates the ability to:

Competencies	Guidelines for Good Practice
<p>Educate, monitor and mentor students</p>	<ul style="list-style-type: none"> ● Establish and maintain an effective working relationship with the student ● Present clear performance expectations initially and throughout the placement appropriate to level of practice ● Organise initial planned learning, goal setting and be able to re-evaluate in collaboration with the student
<p>Identify student's competency level, learning goals and supervision needs</p>	<ul style="list-style-type: none"> ● Prepare the student as appropriate for clinical practice ● Assess and identify each individual student's supervision needs ● Anticipate and prepare student for challenging situations as appropriate ● Match student competency levels to direct and indirect clinical demands

3. Assessment/Evaluation Competencies

The Practice Educator demonstrates the ability to:

Competencies	Guidelines for Good Practice
Assess the student fairly	<ul style="list-style-type: none">● Use the student assessment tool accurately to measure student's performance based on objective information (e.g. direct observation, discussion with student, review of students' documentation etc.)
Encourage student development and learning	<ul style="list-style-type: none">● Involve and encourage the student in self reflection and self assessment using formal and informal evaluation sessions● Use evaluation processes to counsel students on strengths and opportunities for development

4. Professional Practice Competencies

The Practice Educator demonstrates the ability to:

Competencies	Guidelines for Good Practice
Develop clinical practice skills of the student	<ul style="list-style-type: none"> ● Establish and maintain an effective working relationship with the student ● Present clear performance expectations initially and throughout the placement appropriate to level of practice ● Organise initial planned learning, goal setting and be able to re-evaluate in collaboration with the student
Facilitate the development of clinical reasoning	<ul style="list-style-type: none"> ● Demonstrate strong clinical reasoning ● Facilitate effective clinical reasoning in students ● Guide students integration of theory and practice ● Guide students integration of therapeutic concepts and skills, and encourage reflective practice
Facilitate documentation skills	<ul style="list-style-type: none"> ● Use documentation format and requirements in accordance with local and professional guidelines ● Demonstrate an ability to train students in the use of clinical recording processes
Incorporate legal, ethical and professional issues that influence practice	<ul style="list-style-type: none"> ● Implement legal and professional guidelines that influence practice (e.g. confidentiality, role delineation etc.) ● Implement the philosophies, policies, protocols and clinical guidelines of the service provider
Adhere to professional practice standards and the code of ethics of the professional association	<ul style="list-style-type: none"> ● Deliver service in line with professional standards of practice and in keeping with professional code of ethics
Maintain own CPD in the area of practice education	<ul style="list-style-type: none"> ● Assume responsibility for, and pursue professional development to expand knowledge and skills
Be a model of professional conduct and behaviour	<ul style="list-style-type: none"> ● Demonstrate appropriate professional conduct and behaviour at all time

5. Management/Administration Competencies

The Practice Educator demonstrates the ability to:

Competencies	Guidelines for Good Practice
Communicate and collaborate with practice education team	<ul style="list-style-type: none"> ● Establish effective communication links with the practice education team when appropriate
Induct student effectively	<ul style="list-style-type: none"> ● Provide pre-placement information to facilitate advance student preparation ● Provide complete orientation of student to placement site ● Inform student of mission, goals, philosophy and standards of organisation/ service ● Set out an organised and systematic placement programme
Manage time effectively	<ul style="list-style-type: none"> ● Effectively balance own caseload and the students' learning needs ● Manage own time efficiently and encourage student in developing time management skills ● Complete and distribute in a timely manner all student evaluations, including but not limited to the mid/final assessments
Develop student clinical management and prioritization skills	<ul style="list-style-type: none"> ● Assist the student in developing and refining clinical management and prioritization skills
Implement quality improvements	<ul style="list-style-type: none"> ● Encourage ongoing evaluations of the students' placement/education along with the practice education team ● Modify placements based on feedback/ evaluation

Appendices

Appendix 1: Methodology

Research:

The process of identifying Practice Educator competencies in the Irish context began by identifying and analysing the following resources:

- American Speech-Language Hearing Association (1985 June). "Clinical supervision in speech-language pathology and audiology." Position statement. ASHA 27,57-60
- An Bord Altranais (2005) "Requirements for nurse registration education programmes"
- Boyatzis, R.E (1982), "The Competent Manager; A model for effective performance". New York; John Wiley & Sons in Management Competency User Pack for managers of health and social care professions on www.hseland.ie
- The American Journal of Occupational Therapy (2006) "Role competencies for a fieldwork educator". November / December, Vol. 60, No. 6.
- The American Occupational Therapy Association,(1997) INC "Self assessment tool for practice education competency" on www.aota.org/nonmembers/area13/docs/tool.pdf

Working Group:

The next stage in the process involved the establishment of collaborative working groups for each of the three professions comprising of Practice Education Coordinators or another nominated representative (from each HEI course of Occupational Therapy, Physiotherapy and Speech and Language Therapy). The multidisciplinary Practice Educator competencies were devised and ratified by these working groups.

Consultation:

The competencies were then circulated to a representative group of Therapy Managers and Practice Educators for consultation and feedback. The document was amended on the basis of this feedback.

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