

Physiotherapy Career Pathway



Competence Framework

Version 6.0



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Table of contents

ABBREVIATIONS	IV
THE PHYSIOTHERAPY CAREER PATHWAY	1
THE PHYSIOTHERAPY COMPETENCE FRAMEWORK	3
OVERVIEW	3
PERFORMANCE LEVELS	5
USER GUIDE	7
ROLE 1: PHYSIOTHERAPY PRACTITIONER	8
ROLE 2: COMMUNICATOR	19
ROLE 3: COLLABORATOR	29
ROLE 4: LEADER	34
ROLE 5: HEALTH ADVOCATE.....	38
ROLE 6: SCHOLAR.....	43
ROLE 7: PROFESSIONAL	52
GLOSSARY	60
BIBLIOGRAPHY	62

Abbreviations

ACSQHC Australian Commission on Safety and Quality in Health Care

APA Australian Physiotherapy Association

CanMEDS Canadian Medical Education Directives

The Physiotherapy Career Pathway

The Australian Physiotherapy Association (APA) seeks to promote quality health care in the community by taking an active part in supporting its members' various roles through contemporary and accountable professional development.

The Physiotherapy Career Pathway is a framework of quality-assured coursework, mentoring and research with clearly defined optional assessment points. This framework joins the universities, the APA and commercial professional development companies to share standards, competencies and learning outcomes at each step of a physiotherapists' career.

The Career Pathway is transparent, flexible and agile to accommodate member needs, whilst being demonstrable in the level of achievement. Employers and external agencies can recognise the competencies developed by completion of continuing professional development at a prescribed milestone or level of performance, and competencies attained where assessment has been successfully completed. The Career Pathway enables recognition of progressive competence development along a learning continuum. Acknowledging the learning outcomes of higher education courses of study, the APA will facilitate targeted education to meet the needs of the profession across areas of practice and individuals' career stages.

The principles of the Career Pathway are:

- industry recognised standards
- transparent and rigorous quality processes
- competencies that take into account the requirements of the Australian Qualifications Framework
- learning outcomes aligned with Physiotherapy competence standards
- flexible and inclusive learning processes

The aims of the Career Pathway are to:

- support individuals' career goals
- accommodate the diversity of educational needs of physiotherapists
- support the workforce mobility of physiotherapists nationally and internationally
- support life-long learning
- respond to changes in physiotherapy practice
- develop and retain experienced and specialised physiotherapists in the workforce
- facilitate advocacy for physiotherapists

The Career Pathway has two major components: a Competence Framework and an Education Framework that will ensure the quality of offerings and the achievement of explicit learning outcomes (see Fig 1).

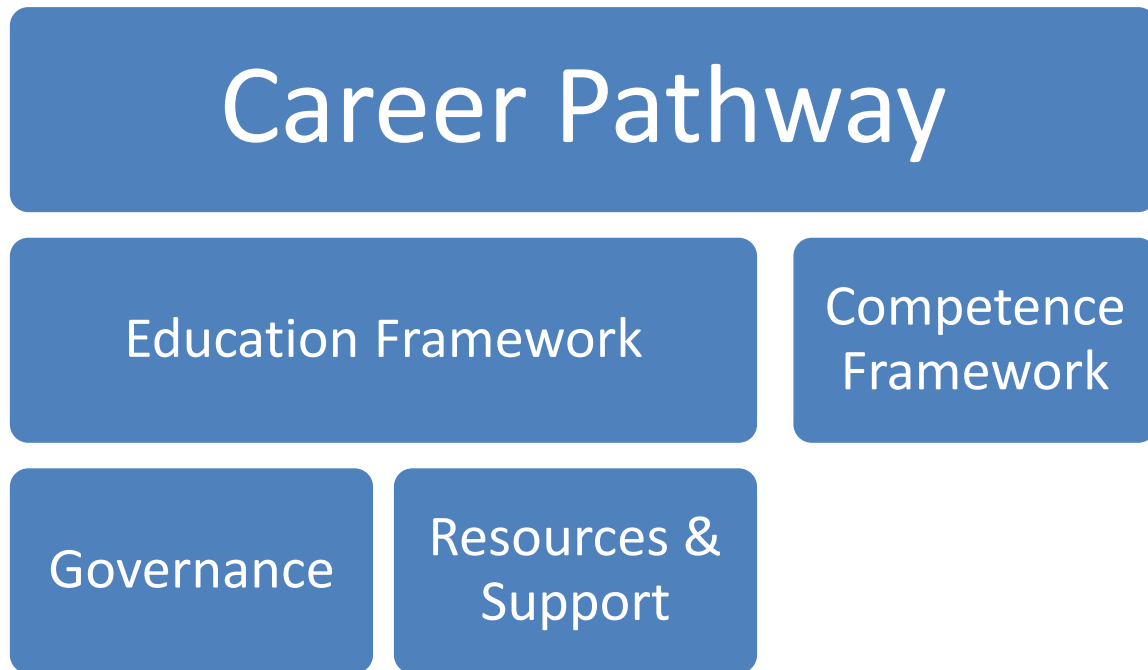


Figure 1: The Physiotherapy Career Pathway

A vital component of the Career Pathway is rigorous governance, with a key role in ensuring quality of professional development and consistency of standards. Access will be available to extensive resources and support including curriculum design templates peer-review and mentoring.

The Physiotherapy Competence Framework

Overview

The APA Physiotherapy Competence Framework is based, with permission of the Royal College of Physicians and Surgeons of Canada, on the [Canadian Medical Education Directions \(CanMEDS\) Physician Competency framework](#)¹ (Frank, Snell & Sherbino, 2015). Competency is defined in CanMEDS as “an observable ability of a health professional that develops through stages of expertise from novice to master clinician” (Frank, Snell & Sherbino, 2014, p.7).

The Competence Framework structure is:

1. Role
2. Definition of role
3. Key competencies
4. Enabling competencies

The CanMEDS seven roles are Medical Expert, Communicator, Collaborator, Leader, Health Advocate, Scholar and Professional. The Medical Expert role has been changed to Physiotherapy Practitioner in the Physiotherapy Competence Framework. Key and Enabling competencies have required adaptation to some practice aspects that require emphasis for physiotherapy and to ensure fit with Australian practice settings.

The Competence Framework principally reflects the roles undertaken by physiotherapists interacting with clients. Physiotherapists may also work entirely in non-client contact roles, such as management/ administration, policy and planning, teaching and research. Based on need and feedback, modules or versions of the Competence Framework may be devised to reflect these non-client contact career pathways. Some of these roles already have established pathways (e.g. academic pathways for researchers and tertiary teachers).

Roles are intimately integrated in practice (Figure 2). However, for clarity and assessment purposes there is minimal overlap in the competencies between Roles, and the abilities described have been isolated, as far as possible, to a particular Role. Communication is split across two roles: Communication with clients appears in the Communicator role, whereas communication with colleagues and other stakeholders is part of the Collaborator role.

¹ Developed by the Royal College of Physicians and Surgeons of Canada in the 1990's and revised in 2015.
<http://canmeds.royalcollege.ca/en/about/history>

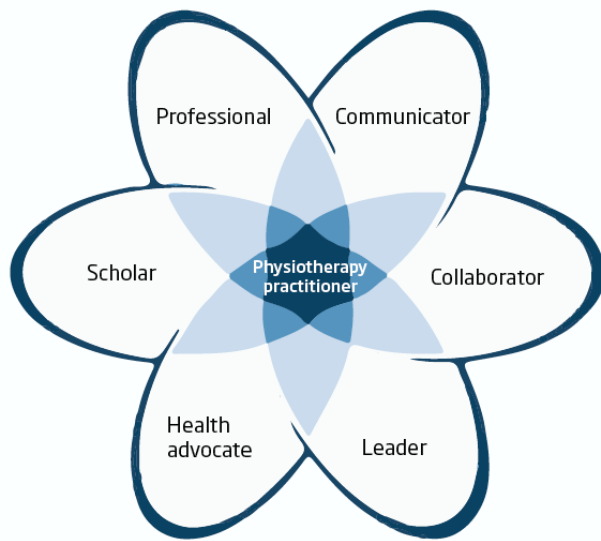


Figure 2. Roles in Competence Framework

Adapted with permission by the Royal College of Physicians and Surgeons of Canada, 2015.

Performance Levels

The Competency Framework describes four stages along a continuum of performance from Foundation (Milestone 1) to Expert (Milestone 4) in an area of physiotherapy practice (see Box 1). This approach is analogous to the CanMEDS Milestones (Frank, et al., 2014) in which a level of performance is described across six points in Physician/Surgeon training from Entry to Residency to post specialist certification.

Box 1: Description of performance levels

Milestone 1: A Physiotherapy practitioner at this level can independently manage a range of clients with uncomplicated presentations in a particular area of practice. They can establish the client's goals and deliver safe and effective management. The practitioner is aware of their limitations and seeks assistance when appropriate. They may have a role in supervision of students.

Foundation

Physiotherapists commencing post entry-level development in a particular area of practice, physiotherapists seeking to re-enter the workforce and practising physiotherapists moving into the area of practice are expected to perform at this level.

Milestone 2: A Physiotherapy practitioner at this level can independently manage clients with more complex presentations and would be expected to be involved in supervision of students and mentoring less experienced staff.

Intermediate

Performance at this level is expected of practitioners with some years of experience in a particular area of physiotherapy practice and who have undertaken relevant further learning or qualifications in their area of practice.

Milestone 3: A Physiotherapy practitioner at this level delivers safe and effective management in all but the most complex or critical client presentations in their area of practice and will be expected to be involved in mentoring/supervision, teaching, and/or research.

Highly developed

Performance at this level is expected for a physiotherapy practitioner who has achieved at least a post entry-level qualification Masters-level degree in their area of practice, or has demonstrated competence equivalence. Performance at this level is expected of an APA Titled Physiotherapist.

Milestone 4: A Physiotherapy practitioner at this level can manage the most complex, difficult or critical client presentations in their area of practice, often as a point of expert clinical review, opinion or referral. The physiotherapist demonstrates initiative and provides direction in the practice area. The physiotherapist is involved in mentoring/ supervision, teaching and/or research and is recognised by their peers as a leading practitioner in the field of practice.

Expert

Performance at this level is expected of a physiotherapist who has completed Fellowship by Specialisation of the Australian College of Physiotherapists. Performance at this level is expected for a physiotherapy practitioner who has achieved at least a post-qualification Doctoral-level degree in their area of practice, or has demonstrated competence equivalence.

The APA Competence Framework extends physiotherapy competencies beyond those of the Physiotherapy practice thresholds in Australia and Aotearoa New Zealand (2015) to the progressive practice stages of a physiotherapist's career.

There is broad alignment of the four performance levels with those established under the Fair Work Australia [Health Professionals and Support Services Award \(2010\)](#), Section B2 Health Professionals employee definitions, and also broad alignment with the four levels articulated in the *National Common Health Capability Resource* (Health Workforce Australia, 2012):

- Level 1 Work within a known and stable context, consulting when anomalies arise before taking action.
- Level 2 Act independently on routine tasks within scope, and in response to knowable dilemmas
- Level 3 Act independently in complex situations within scope, and in response to unknowable dilemmas
- Level 4 Provide vision and direction, and shape and implement strategies and initiatives that enable others to perform as required

Each of the seven Roles has Key Competencies, with components described by Enabling Competencies. When reading an Enabling Competence with the corresponding descriptions of performance, it should be noted each performance statement builds on the previous level, with accumulation of the abilities. Only when there is an addition of a higher order performance statement will it be recorded in the next level. Hence, in some instances the space under a performance level may be blank. This reflects that the prior level statements are carried forward as the performance level.

It is expected that there will be individual variability in level of performance across the key and enabling competencies. Nationally, positions such as Advanced Practice, have different and specific requirements according to the area of practice, and have not been aligned to a particular milestone. However, on completion of a program of training, such as specialisation, a physiotherapist is expected to be able to consistently perform at or beyond the relevant level.

While the competence standards apply to all areas of practice, they provide only general descriptions of performance. The specific knowledge and skills relevant to each area of practice that would be required to meet the expected performance at each level will be determined by an appropriately qualified and professionally diverse group under the Education Framework. For some areas of practice these area-specific competencies are well documented. Two international examples are Sports (Bulley et al, 2005) and Orthopaedic Manipulative Therapy (IFOMPT, 2016).

National Groups should over time develop competency documents aligned with the Competency Framework that detail the area-specific competencies. Some groups may also develop what in the CanMEDs are called "Entrustable Professional Activities" (EPAs). The activities are 'entrustable' in that the person has demonstrated an ability to perform the activity without direct supervision. EPAs therefore direct the design of formative feedback and summative assessment (assessment that is judged or graded). EPAs are standardised

education targets that translate the competence standards into observable clinical activities (ten Cate, 2013a, 2013b).

User Guide

The overarching purpose of the Physiotherapy Competence Framework is to support and enhance the practice of qualified physiotherapists by providing explicit statements to guide professional development. The performance statements reference Australian standards in safety and quality in healthcare and promote contemporary practice across the diversity of areas in which physiotherapists work. It is an evolving document that provides broad competencies that are applicable across different practice areas, environments and settings.

It is envisaged that the Physiotherapy Competence Framework will have a number of users and purposes:

1. Individual members
2. APA course developers and educators
3. External course developers and educators
4. Employers
5. Insurers
6. Governance bodies

Individual members will use the Competence Framework to reflect on their practice and career goals, identify areas for development and to evaluate their continuing education needs. A physiotherapist may choose to utilise the framework purely as a professional development guide, or may elect to undertake assessment to verify acquisition of knowledge and skill to support their career progression.

Course developers will use the Competence Framework to determine the intended learning outcomes of their educational offerings and ensure that the content is consistent with the competencies and the intended level of performance. This will ensure transparency and consistency between offerings at the same level, and provide a common framework to which any professional development or formal course of higher education can be mapped.

Organisations such as employer groups, insurance and governance bodies, will have access to a transparent framework, that will describe expected performance outcomes of a practitioner on a continuum of competence development with clarity and distinction on progression of the level of performance.

Where a physiotherapist has successfully completed assessment, or there is recognition of prior learning, the APA will record the attainment of the specific competence(s) and level. Assessment of skill acquisition in professional development has previously, for the greater part, gone unassessed. The introduction of assessed learning will provide all stakeholders with evidence of competence attainment.

Third party providers and government will be better informed to detail description of the level and type of capabilities they expect when designing eligibility for service provision or rebates.

ROLE 1: PHYSIOTHERAPY PRACTITIONER

Definition

In this Role, the physiotherapist integrates all of the other Roles, applying knowledge, skills, and professional values in the promotion of health and provision of culturally responsive, high-quality and safe client-centred management.

Description

As a practitioner who promotes health and provides high-quality, safe, client-centred management, the physiotherapist draws upon an evolving body of knowledge, their skills, and their professional values. They collect and interpret relevant information, make decisions, and carry out diagnostic, preventative and therapeutic interventions. They do so within their scope of practice and with an understanding of the limits of their expertise. Their decision-making is informed by best practice and research evidence, and take into account the [client](#)'s culture, circumstances and preferences as well as the availability of resources. Their practice is up-to-date, ethical, and resource-efficient, and is conducted in collaboration with clients, other health care professionals, and the community. The Physiotherapy Practitioner Role is central to the function of a physiotherapist and draws on the competencies included in the other roles (Communicator, Collaborator, Leader, Health Advocate, Scholar, and Professional).

KEY AND ENABLING COMPETENCE	Level 1 Foundation	Level 2 Intermediate	Level 3 Highly developed	Level 4 Expert
1.1 Practise physiotherapy within their defined scope of practice and expertise				
1.1.1 Demonstrate a commitment to excellence, high quality care and culturally responsive management of their clients	Demonstrate culturally responsive and high-quality care and management of their clients			Role-model excellence in culturally responsive high-quality client care and management
1.1.2 Apply knowledge of biological, psychological social and other sciences relevant to the area of practice	Apply biological, psychological, social and other sciences to identify and manage common client conditions	Apply biological, psychological, social and other sciences to identify and manage diverse client presentations in their area of practice Provide advice on aspects of their area of practice to other clinicians	Apply biological, psychological, social and other sciences to identify and manage a broad spectrum of complex client conditions in their area of practice Provide advice on aspects of their area of practice to management and other relevant parties.	Apply a broad base and depth of knowledge in biological, psychological, social and other sciences to identify and demonstrate knowledge adaptability to manage the breadth of client presentations in their area of practice Provide expert opinion to advise government or other organisations or to provide expert legal testimony
1.1.3 Carry out professional duties in the face of multiple, competing demands	Recognise competing demands in professional duties and when required, seek assistance in determining priorities Demonstrate a duty of care and client safety	Maintain a duty of care and client safety while balancing multiple competing tasks Teach others how to prioritise professional duties	Carry out professional duties in the face of multiple, competing demands Maintain a duty of care and client safety while balancing multiple responsibilities Role-model how to efficiently prioritise professional duties	

1.1.4 Recognise and respond to the complexity, uncertainty, and ambiguity inherent in clinical practice	Identify and take appropriate action in clinical situations where complexity, uncertainty, and ambiguity may play a role in decision-making	Adapt management, informed by knowledge and experience, as the complexity, uncertainty, and ambiguity of the client's clinical situation evolves	Contribute to the development of protocols or guidelines that reflect the complexity, uncertainty, and ambiguity of a clinical situation	Contribute , at organisational or systems level, to the development of protocols or guidelines that recognise and respond to the complexity, uncertainty, and ambiguity inherent in clinical practice
1.2 Perform a client-centred assessment				
1.2.1 Identify and prioritise issues to be addressed in a client consultation	Identify the concerns and goals of clients during the consultation. Select appropriate tools to assist development of priority issues. Identify which issues need to be addressed during future visits or with other health care practitioners	Consider urgency, feasibility, availability of resources, and comorbidities in determining priorities for the client interaction Prioritise which issues need to be addressed during future visits or with other health care practitioners	Iteratively establish priorities, considering the perspective of the client (including values and preferences) as the client's situation changes and evolves Demonstrate reasoning and experience in prioritising management of client goals	Demonstrate skill in efficient identification of client goals, and effective prioritisation of issues, across progressive interactions for complex client presentations. Develop policy for assisting other practitioners to prioritise client issues

<p>1.2.2 Plan and perform an appropriate assessment</p>	<p>Plan and conduct a client interview and physical examination safely and effectively with common presentations in routine practice situations.</p> <p>Seek guidance and feedback for more complex presentations</p> <p>Identify and manage risk(s)</p> <p>Select commonly used diagnostic tests</p> <p>Select and administer appropriate outcome measures across relevant domains of the International Classification of Functioning, Disability and Health (ICF) or as applicable to the client's presentation</p> <p>Outcome measure selection is matched to treatment goals</p> <p>Recognise uncertainty and the need for assistance or referral in situations that are complex or unusual to the physiotherapist</p>	<p>Plan and conduct a client interview and physical examination for safely and effectively for a range of presentations in practice area</p> <p>Focus the client encounter, performing it in a time-effective manner, without excluding key elements</p> <p>Efficiently modify assessment plan efficiently informed by findings</p> <p>Describe test reliability and validity, and for diagnostic tests sensitivity, specificity and likelihood ratios, as rationale for test selection</p>	<p>Efficiently conduct an interview and physical examination for a diverse range of clients in their area of practice</p> <p>Conduct an assessment when a second opinion is requested or when a high degree of diagnostic uncertainty has already been established</p> <p>Select and apply relevant tests for the purposes of diagnosis and outcome assessment on the basis of essential test characteristics</p> <p>Order or recommend necessary and appropriate pathology and medical imaging investigations relevant to their area of practice</p>	<p>Skilfully conduct an interview and physical examination and select appropriate investigations, adapting to unanticipated findings for any client in the practice area</p> <p>Plan and implement an appropriate assessment in challenging or unusual situations in their area of practice.</p> <p>Conduct an assessment to inform an opinion as a legal expert in the area of practice</p> <p>Perform or recommend tests that expand on routine practice in the area of practice, in a manner that peers identify as highly skilled</p> <p>Teach selection of assessment techniques and application of tests utilised in challenging and/or complex client situations, that require experience and developed skill for delivery</p>
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<p>1.2.3 Analyse and interpret assessment results for the purpose of understanding the client, the clients' contexts, and problems to inform diagnosis, management, prognosis and prevention, and health promotion</p>	<p>Demonstrate clinical reasoning ability in identifying main problems and developing hypotheses for determining a differential diagnosis for common presentations</p> <p>Identify targets for disease prevention and health promotion</p>	<p>Generate and prioritise hypotheses demonstrating knowledge and experience in the area of practice</p> <p>Apply a hypothesis testing approach to differential diagnosis and/or explain causes of presenting problems</p>	<p>Demonstrate clinical reasoning and the ability to draw from a range of diagnostic and investigative tests to inform differential diagnosis and management</p> <p>Apply pattern recognition, where appropriate, to the process of differential diagnosis</p>	<p>Demonstrate precision in clinical reasoning</p> <p>Demonstrate ability to draw from and efficiently analyse, a range of diagnostic and investigative tests and information to accurately facilitate prioritised problem list or differential diagnosis for challenging and complex clients</p>
<p>1.2.4 Establish health management goals in collaboration with clients, which may include slowing illness progression, achieving resolution of injuries or problems, treating symptoms, optimising function and palliation, illness and injury prevention and health promotion</p>	<p>Initiate discussions with client about goals of care</p> <p>Work with the client to understand relevant options for care</p> <p>Address the client's ideas about the nature and cause of the health problem, their fears and concerns, and their expectations of health care professionals</p> <p>Share concerns, in a constructive and respectful manner, with the client, about their goals of care when they are not felt to be</p>	<p>Assist the client to identify important goals that reflect realistic expectations</p>	<p>Address the impact of the condition on the client's ability to pursue life goals and purposes</p>	<p>Establish optimally planned goals of care in collaboration with the client addressing the clients' needs and expectations and considering challenging and complex requirements and resource availability</p>

	<p>achievable</p> <p>Agree goals of physiotherapy with clients that are (where practicable) specific, measureable, achievable, relevant and timed (SMART).</p> <p>Agreed goals are sequenced from short to medium/long term as appropriate</p>			
1.3 Plan and implement a client-centred management plan				
1.3.1 Establish and implement a client – centred management plan that includes plans for ongoing management, referral and discharge	<p>Develop and implement a management plan for common client presentations</p> <p>Consider the client’s main health problems and context, in collaboration with the client and, when appropriate, other health professionals, in plan development</p> <p>Integrate the client’s perspective and context into the collaborative management plan</p>	<p>Discuss with clients the degree of uncertainty inherent in all clinical situations</p> <p>Reach agreement with the client and relevant others on priorities for each consultation at the outset</p> <p>Plan increments in function at each consultation with the client as part of management, with consideration to socio-economic, cultural and other circumstances that have impact.</p>	<p>Develop and implement tailored management plans that consider the client’s health problems and context in collaboration with clients and the interdisciplinary team</p>	<p>Utilise knowledge and experience to efficiently establish a client–centred management plan</p> <p>Implement a client-centred management plan that supports ongoing care, including follow-up on investigations, response to treatment, further consultation, referral and discharge</p> <p>Demonstrate expert reasoning, drawing on experience in the area of practice, in efficiently preparing discharge plans</p>

	<p>Discuss with the client referral to another physiotherapist or health practitioner when indicated</p> <p>Determine the necessity and appropriate timing of consultations</p> <p>Review client responses to treatment and modify the management plan over time accordingly</p> <p>Establish plans for ongoing care for the client, taking into consideration the client presentation, circumstances, preferences, and actions, as well as available resources, best practices, and research evidence</p>			
<p>1.3.2 Determine the most appropriate interventions</p>	<p>Describe to clients common interventions for the management of a given problem</p> <p>Describe the indications, contraindications, risks, and alternatives for a given intervention.</p>	<p>Ensure that clients, where appropriate, are informed about the risks and benefits of each treatment option in the context of best evidence and guidelines in the area of practice</p>	<p>Integrate all sources of information to select optimal interventions that are safe and client-centred, to address client priorities, and considers the risks and benefits of all methods</p>	<p>Determine the most appropriate interventions, efficiently using reasoning, breadth of knowledge and experience in the area of practice</p>

	<p>Utilise relevant sources of information to identify interventions that are client centred, and consider the risks and benefits of the approach</p> <p>Promote client self-management strategies when appropriate</p>			
<p>1.3.3 Perform interventions in a skilful and safe manner, adapting to changing clinical circumstances</p>	<p>Perform interventions safely and effectively for an individual or a group of clients</p> <p>Monitor the effect of interventions, and modify appropriately for their area of practice</p> <p>Seek advice when unexpected responses are encountered</p> <p>Implement a prevention or health promotion strategy relevant to the clients' presentation</p>	<p>Competently and efficiently conduct a range of interventions for an individual or a group in their area of practice</p> <p>Monitor the effect of interventions, demonstrating timely modifications</p> <p>Recognise uncertainty and the need for assistance or referral in situations that are complex or unusual to the physiotherapist.</p>	<p>Utilise experiential knowledge and skills and consider clinical acuity, and potential for exacerbation or deterioration when tailoring the sequencing and execution of interventions for the client</p> <p>Perform interventions that extend beyond routine practice in the area of practice, in a manner that peers identify as requiring skill.</p>	<p>Perform procedures skilfully and safely, accurately adapting to unanticipated findings or changing clinical circumstances</p> <p>Perform interventions that extend beyond routine practice in the area of practice, demonstrating significant skill in delivery and modifications, in a manner that peers identify as highly skilled</p>

1.4 Actively contribute, as an individual and as a member of a team providing care, to the continuous improvement of safety and quality in health care

<p>1.4.1 Adopt strategies that promote practitioner and client safety</p>	<p>Describe the individual factors that can affect human performance</p> <p>Engage clients and relevant others in the continuous improvement of practitioner and client safety</p> <p>Use cognitive aids such as checklists, structured communication tools, or care paths, to enhance client safety</p> <p>Analyse and appraise processes in ones' own practice and initiate quality improvement activity with guidance or assistance</p> <p>Respond to feedback on their own practice and client outcomes</p>	<p>Use strategies to mitigate risk of adverse events or critical incidents</p> <p>Demonstrate situational awareness informed by experience in the area of practice</p>	<p>Design processes that contribute to safety improvements in their area of practice</p> <p>Mentor others in developing situational awareness in the area of practice</p> <p>Engage members of the team in promoting safety</p>	<p>Design and initiate strategies to monitor and improve client and practitioner safety and promote quality health care</p> <p>Utilise health forecasting skill to enhance preventative strategies and minimise risk in client encounters</p>
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<p>1.4.2 Work to improve safety and quality in healthcare and management by addressing human factors</p>	<p>Comply with work health and safety obligations under the Work Health and Safety Act and Code of Practice</p> <p>Describe human factors that can affect practitioner and client safety</p> <p>Describe the ethical, professional, and legal obligations, and policies for reporting and disclosure of near misses and adverse events</p> <p>Describe the elements of the health care system that facilitate or protect against near misses or adverse events</p> <p>Recognise and report safety hazards, near misses, adverse events or critical incident according to protocol</p> <p>Recognise near-misses in real time and respond to correct them, preventing them from reaching the</p>	<p>Analyse processes and client interactions to identify safety vulnerabilities</p> <p>Identify potential improvement opportunities arising from near misses, adverse events or critical incidents</p> <p>Engage clients and relevant others in the continuous improvement of client safety</p> <p>Contribute to initiatives to monitor and improve safety and quality in health care.</p> <p>Identify available supports for clients and health care professionals when near misses and adverse events occur</p>	<p>Analyse a given near miss or adverse event to generate recommendations to reduce risk and promote safer care</p> <p>Actively engage and encourage all involved in healthcare, regardless of their role, to report and respond to unsafe situations</p> <p>Mentor others to identify and respond to emerging risks</p> <p>Engage others to develop a culture of continuous practice improvement</p>	<p>Implement strategies that promote client safety and mitigate negative human factors</p> <p>Model a blame-free culture to promote openness and increased reporting</p> <p>Apply initiative in testing change in processes to improve the impact of human factors on client care and/or staff</p> <p>Compare and research quality improvement methods and processes from different domains and fields</p> <p>Foster a health care culture that enhances quality healthcare and client safety</p>
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<p>1.4.3 Apply quality improvement processes to contribute to improving systems of health promotion and client care</p>	<p>Describe the domains of health care quality (safe, effective, evidence informed, client-centred, timely, efficient, equitable)</p> <p>Describe system factors that can affect practitioner and client safety, including resource availability and physical and environmental factors</p>	<p>Seek data to inform practice and engage in an iterative process of improvement</p> <p>Analyse and appraise processes impacted by systems in ones' own teams' practice and initiate quality improvement activity</p> <p>Engage in projects to minimise risk in their area of practice</p>	<p>Analyse and appraise system processes in practice area in one's own organisation and initiate quality improvement activity</p> <p>Compare and contrast systems thinking with traditional approaches to quality improvement</p> <p>Apply design thinking to control hazards and manage foreseeable risks in the health or other sector processes</p>	<p>Implement strategies that promote client safety and mitigate negative system factors</p> <p>Apply initiative in testing change in processes to improve systems impacting client care and/or staff and teams at organisational/ interagency level</p> <p>Promote, lead and disseminate quality improvement programs at organisational/ interagency level</p> <p>Engage with health professionals and relevant stakeholders to collaborate in improving systems of client care</p> <p>Implement systems level improvements in processes for identification of and response to client safety hazards, near misses and adverse events</p>
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ROLE 2: COMMUNICATOR

Definition

As Communicators, physiotherapists form [therapeutic alliances](#) with clients that facilitate the gathering and sharing of essential information for effective health care and health promotion to optimise management and outcomes.

Description

Physiotherapists enable client-centred communication by actively listening to the client's experience of his or her health-related issues and goals. Physiotherapists explore the client's perspective, including his or her fears, ideas about goals, feelings about the impact of a condition, expectations of health care, and their management. The physiotherapist integrates this knowledge with an understanding of the client's context, including socio-economic status, medical history, family history, stage of life, living situation, work or school setting, and other relevant psychological and social issues. Central to a client-centred approach is shared decision-making: finding common ground with the client in developing a plan to address his or her health goals in a manner that reflects the client's needs, values, preferences and lifestyle. This plan should be informed by evidence and guidelines.

Physiotherapists must also be able to communicate effectively with everyone involved in their clients' management.

KEY AND ENABLING COMPETENCE	Level 1 Foundation	Level 2 Intermediate	Level 3 Highly developed	Level 4 Expert
2.1 Establish professional alliances with clients and relevant others				
2.1.1 Communicate using a client-centred approach that encourages client trust and autonomy and is characterised by empathy, respect, and compassion	<p>Demonstrate the key components of a client-centred and collaborative approach in physiotherapy management.</p> <p>Adopt a universal precautions approach to health literacy (ACSQHC, 2014)</p>	<p>Communicate using a client-centred approach that encourages client trust and autonomy and is characterised by empathy, respect, and compassion.</p>	<p>Participate in improvement projects aimed at reducing barriers to health literacy</p>	<p>Demonstrate leadership and work with their organisation, with consumers and state and/or national systems to make sure that the information and services they provide are easy to understand, use and act on.</p>
2.1.2 Optimise the physical environment for client comfort, dignity, privacy, engagement and safety	<p>Demonstrate preparation of the physical environment that affects client comfort, privacy, engagement, and safety</p>	<p>Mitigate physical barriers to communication to optimise client comfort, privacy, engagement and optimal risk management</p>	<p>Optimise the physical environment for client comfort, privacy, engagement, and risk management in both individual and group interactions</p>	
2.1.3 Recognise when the values, culture, biases, or perspectives of clients, physiotherapists, or relevant others may have an impact on the quality of management, and modify the approach to the client accordingly	<p>Recognise when the values, culture, biases, or perspectives of clients, physiotherapists, or relevant others may have an impact on the quality of management and modify the approach accordingly.</p>	<p>Teach others to recognise when client and physiotherapist values, culture, biases, or perspectives threaten the quality of care, and modify the approach to client management.</p>	<p>Demonstrate recognition of situations in which client and physiotherapist values, culture, biases, or preferences may threaten the quality of care and management, and effective modification of the approach to client management</p>	<p>Demonstrate exemplary practice in adapting management to respect the values and culture of clients to optimise outcomes for the client</p>

<p>2.1.4 Respond to client's non-verbal behaviour to enhance communication</p>	<p>Identify non-verbal communication on the part of clients and its impact on physiotherapist– client communication</p> <p>Use appropriate non- verbal communication to demonstrate attentiveness, interest, and responsiveness to clients and relevant others</p> <p>Respond to clients' non-verbal communication and use appropriate non- verbal behaviours to effectively enhance communication with clients and relevant others</p>		<p>Demonstrate effective use of non-verbal communication skills in difficult situations</p>	<p>Demonstrate expertise in recognising and responding to non-verbal cues delivering optimal communication</p>
<p>2.1.5 Manage disagreements and emotionally charged conversations</p>	<p>Recognise potential risk for conflict, and take action to minimise that risk</p> <p>Critically reflect upon emotional interactions and identify how different approaches may have affected the interaction</p>	<p>Recognise when personal feelings in an encounter are valuable clues to the client's emotional state and respond appropriately</p> <p>Establish boundaries as needed in emotional situations</p> <p>Demonstrates effective strategies when managing disagreements</p>	<p>Recognise when strong emotions (such as, anger, fear, anxiety, or sadness) are affecting an interaction and respond appropriately</p> <p>Counsel others impacted by disagreements and emotionally charged conversations.</p>	<p>Manage challenging disagreements and emotionally charged conversations</p> <p>Coach others how to manage disagreements and emotionally charged conversations.</p>

<p>2.1.6 Adapt to the unique needs, preferences and circumstances of each client and to his or her management and requirements</p>	<p>Identify factors, including cultural, that impact the clients' decision-making capacity</p> <p>Assess and implement clients' preferred involvement in decisions about care</p> <p>Recognise when assistive communication devices may be indicated, and liaise with appropriate others to meet client requirements</p>	<p>Appropriately tailors approaches to decision-making to client capacity, values, and preferences</p>	<p>Adapt to the unique needs and preferences of each client presentation and circumstances</p>	<p>Demonstrate awareness and take appropriate action, anticipating client needs and preferences in difficult and complex client consultations</p>
<p>2.2 Elicit and synthesise accurate and relevant information, incorporating the perspectives of clients and, where appropriate, relevant others</p>				
<p>2.2.1 Use client-centred interviewing skills to effectively gather relevant biomedical and psychosocial information</p>	<p>Conduct a structured client-centred interview, gathering relevant biomedical and psychosocial information in the context of common presentations in routine practice situations</p> <p>Actively listen and respond to client cues, clarifying client responses as required</p> <p>Explain the purpose of the physiotherapy assessment, relevant risks and options, and ensure client understanding</p>	<p>Conduct a client-centred interview, demonstrating flexibility in gathering all relevant biomedical and psychosocial information for any clinical presentation in the area of practice</p> <p>Integrate and synthesise information about the client's beliefs, values, preferences, context and expectations with biomedical and psychosocial information</p>	<p>Integrate, summarise, and be able to present the biomedical and biopsychosocial information obtained from a client-centred interview</p> <p>Teach learners variations in approaches to the client-centred interview in their area of practice</p>	<p>Demonstrate knowledge and skill in effectively gathering relevant biomedical and psychosocial information across the breadth of clients in their area of practice</p> <p>Role-model for learners' various approaches to the client-centred interview in their area of practice</p>

<p>2.2.2 Provide a clear sequence for and manage the flow of the entire client encounter</p>	<p>Use a framework to structure the client interaction</p>	<p>Manage the flow of the interaction while being attentive to the client's cues and responses.</p>	<p>Manage the flow of challenging client interactions, including those with angry, distressed, or excessively talkative individuals and those with cognitive or intellectual disability</p>	<p>Role model efficient structuring and effective management of flow, for the entire client interaction</p>
<p>2.2.3 Obtain and document informed consent, explaining the risks and benefits of, and the rationale for, a proposed test or intervention</p>	<p>Obtain informed consent for assessment and interventions explaining the indications, risks, benefits, and alternatives for the proposed options</p> <p>Document informed consent accurately</p>		<p>Use shared decision making in the consent process, taking into account risk and uncertainty, and utilise practitioner experience to inform the considerations.</p>	<p>Demonstrate ability to manage complex ethical consent processes, where the client is unable to provide informed consent</p>
<p>2.2.4 Seek and synthesise relevant information from other sources, including the client's family, with the client's consent</p>	<p>Seek out potential sources of information that may assist in a client's management.</p>		<p>Seek out and synthesise relevant information from other sources, including the client's family and relevant others, with the client's consent</p>	
<p>2.3 Share health care information and plans with clients and, where appropriate, relevant others</p>				

<p>2.3.1 Share health care information and plans with clients and, where appropriate, relevant others, checking for client understanding</p>	<p>Communicate findings and the plan of care clearly and accurately to clients and relevant others</p> <p>Use strategies to verify and validate the client's and relevant other's understanding of the problem, management plan and likely outcomes</p> <p>Recognise when to seek help in providing clear explanations to clients and relevant others</p> <p>Respect the client's right to share, or not to share, information or not to involve others in decision making</p>	<p>Provide information on the condition or problem and predicted outcomes in a compassionate, respectful, and objective manner to the client and relevant others</p> <p>Convey information related to the client's health status, care, and needs in a timely, honest, and transparent fashion</p>		<p>Communicate clearly with clients and relevant others in challenging encounters with complex ethical issues.</p>
<p>2.3.2 Disclose adverse events to clients and, where appropriate, relevant others accurately and appropriately</p>	<p>Follow the Australian Open Disclosure Framework in disclosing near misses and adverse events to clients (ACSQHC, 2013)</p> <p>Seek assistance as necessary when dealing with adverse events</p>		<p>Conduct peer review and practice assessments related to adverse events</p>	<p>Contribute to the improvement of the system of disclosure of adverse events and lead change in risk minimisation to the development of a safe and just culture</p> <p>Provide support to clients and staff through the open disclosure process</p>
<p>2.4 Engage clients and, when appropriate, relevant others in developing and delivering plans that reflect the client's health care needs</p>				

and goals				
<p>2.4.1 Use communication skills and strategies that are respectful, non-judgmental, and culturally safe to facilitate discussions with clients and relevant others.</p>	<p>Use relevant questions to elicit an understanding of health care goals and needs from clients and, where appropriate, relevant others</p> <p>Include the perspectives of clients and relevant others when developing care plans</p> <p>Demonstrate cultural sensitivity and safety in interviewing</p> <p>Demonstrate interviewing techniques for encouraging discussion, questions, and interaction</p> <p>Conduct interviews with an interpreter</p>	<p>Use communication skills confidently and effectively to help the client make informed decisions regarding their health</p>	<p>Use efficient and skilful communication and strategies to facilitate discussions with clients in a way that is responsive, respectful, non-judgmental, and culturally safe</p> <p>Demonstrate depth in strategies, effectively responding to diversity in client backgrounds, to enable client understanding and informed decision making</p>	<p>Demonstrate cultural safety in all aspects of their communication.</p> <p>Provide leadership in establishing culturally safe communication in their practice/organisation</p>

<p>2.4.2 Assist clients and relevant others to identify, access, and make use of information and communication technologies to support their care and manage their health</p>	<p>Identify the various technologies available to enhance clients' understanding and management of their health care</p> <p>Utilise communication technology to enable client management</p>	<p>Assist clients and relevant others to identify, access, and make use of information and communication technologies to support their care and manage their health</p>	<p>Contribute to innovation in information and communication technology to improve client access to information</p> <p>Teach others to utilise communication technology enabling access to physiotherapy management</p>	<p>Lead the development of information and communication technologies to enhance management in their area of practice</p>
<p>2.4.3 Communicate effectively with client to optimise management</p>	<p>Demonstrate ability to modify communication style with client or a group of clients and relevant others to facilitate management</p>	<p>Modify effectively education strategies to the client needs and responses, to facilitate engagement in their management</p>	<p>Demonstrate a range of communication styles to facilitate client or group understanding and execution of management strategies in the area of practice</p>	<p>Tailor communication effectively to an individual client or group, demonstrating optimal client engagement in management</p> <p>Contribute to the development of policy in effective communication in their practice/organisation</p>
<p>2.5 Document and share written and electronic information about the physiotherapy encounter to optimise decision-making, client safety, confidentiality, and privacy</p>				
<p>2.5.1 Document client interactions in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements</p>	<p>Comply with regulatory and legal requirements, including privacy legislation, for record keeping and sharing health information</p> <p>Document clearly within an electronic or written health record, the essential elements of the client interaction using a structured</p>	<p>Document information about clients and their conditions in a manner that enhances intra- and interprofessional care</p> <p>Identify and correct vague or ambiguous documentation through process of self-audit</p> <p>Adapt record keeping to the specific guidelines of the area</p>	<p>Mentor others in accurate and complete documentation that complies with regulatory and legal requirements</p> <p>Prepare documentation for medico legal purposes</p> <p>Conduct peer review and practice assessment regarding record keeping</p>	<p>Role model preparation of documentation for complex reports or medico-legal purposes</p>

	<p>approach</p> <p>Convey in the health record clinical reasoning and the rationale for decisions</p> <p>Include as appropriate in the record the client's narrative of his or her health experience</p> <p>Maintain accurate and up-to-date problem lists and management plans</p>	<p>of practice and the client clinical context</p>	<p>practices</p>	
<p>2.5.2 Communicate effectively using a written health record, electronic health record, or other digital technology</p>	<p>Demonstrate reflective listening, open-ended inquiry, empathy, and effective eye contact while using a written or electronic health record</p> <p>Use electronic tools appropriately to communicate with clients, protecting their confidentiality</p>	<p>Share information in his or her health record with the client to enhance collaboration and joint decision-making</p>	<p>Adapt use of the health record to the client's health literacy and the clinical context</p> <p>Build reminders and clinical practice guidelines into the health record to enhance care</p>	<p>Coach others in effective communication using a written health record, electronic medical record, or other digital technology</p>
<p>2.5.3 Share information with clients and, where appropriate, with authorised others in a manner that respects client privacy and confidentiality and enhances understanding</p>	<p>Comply with the legal requirements for privacy and confidentiality, and organisational protocols of written and electronic communication</p> <p>Describe the different levels of written and electronic health literacy of clients and their implications for client</p>	<p>Demonstrate proficiency in assessing the client's needs and the preferred method of information sharing</p> <p>Demonstrate proficiency in using the methods available for information sharing in the practitioner setting and area of practice</p>	<p>Adapt written and electronic communication to the specificity of the area of practice and to the expectations of clients</p>	<p>Demonstrate deftness and judgement in sharing of information with clients and others in complex or difficult situations, exemplary in respect for client privacy and confidentiality and enhancing understanding</p>

	care communication Share information with clients and, where appropriate, with authorised others in a manner that respects client privacy and confidentiality and enhances understanding			
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ROLE 3: COLLABORATOR

Definition

As Collaborators, physiotherapists work effectively with health care and other professionals to provide safe, high-quality, client-centred management.

Description

Physiotherapists engage in collaborative practice that is essential for safe, high-quality, client-centred management, and involves clients and their families, carers, physiotherapists and other colleagues in the health care professions, community partners, health system stakeholders, agencies and other organisations.

Physiotherapists promote, through collaboration, relationships based in trust, respect, and shared decision-making among a variety of individuals with complementary skills in multiple settings across the continuum of care. It involves sharing knowledge, perspectives and responsibilities, and a willingness to learn together. This requires understanding the roles of others, pursuing common goals and outcomes, and managing differences, including resolution of conflict.

Collaboration skills are broadly applicable to activities beyond clinical care, such as work safety, environmental safety, administration, education, advocacy, and scholarship.

KEY AND ENABLING COMPETENCE	Level 1 Foundation	Level 2 Intermediate	Level 3 Highly developed	Level 4 Expert
3.1 Work effectively with colleagues in the health care and other professions to provide safe, high-quality, client-centred management				
3.1.1 Establish and maintain positive relationships with colleagues in the health care and other professions to support collaborative care	<p>Establish positive relationships with colleagues in the health care professions to support collaborative care</p> <p>Respect established operational roles of their team</p> <p>Receive and appropriately respond to input from other healthcare professionals</p> <p>Participate in opportunities for collaboration among health care professionals along the continuum of care</p> <p>Describe the roles and scopes of practice of other health professionals related to the area of practice</p>	<p>Establish and maintain positive relationships with colleagues in the health care professions to support collaborative care</p> <p>Actively contribute to collaborative practice</p> <p>Differentiate between task and relationship issues among health care professionals</p>	<p>Anticipate, identify, and respond to client management issues related to the function of a team</p> <p>Facilitate strategies to promote collaborative practice in their area of practice</p> <p>Demonstrate knowledge of expertise of other professionals across the diversity of the area of practice, to facilitate optimal collaborations</p>	<p>Lead the analysis of interactions among healthcare professionals to optimise the performance of the team</p> <p>Analyse interactions among health care professionals to provide feedback to optimise the performance of a team for the benefit of clients</p> <p>Demonstrate exemplary interprofessional collaboration for better health outcomes</p>

<p>3.1.2 Negotiate overlapping and shared responsibilities with colleagues in health care and other professions in episodic and ongoing care.</p>	<p>Recognise the importance of professional role diversity and integration in high-quality and safe client management</p>	<p>Negotiate overlapping and shared responsibilities with medical and other colleagues involved in client management</p>	<p>Negotiate disagreements regarding shared responsibilities with medical and other colleagues involved in client management</p>	
<p>3.1.3 Engage in respectful shared decision-making with colleagues involved in client management</p>	<p>Discuss with clients any plan for involving other health care professionals or relevant others, including other physiotherapists, in their management</p> <p>Engage in respectful shared decision-making with clients and relevant others and with other colleagues in the health care professions</p> <p>Provide timely and necessary written information to colleagues to enable effective client management</p> <p>Communicate effectively with other colleagues in the health care professions</p>	<p>Identify referral and consultation as opportunities to improve quality of care and client safety by sharing expertise</p> <p>Integrate the client's perspective and context into the collaborative management plan</p>		<p>Role model respectful shared decision-making with clients and relevant others and with other colleagues in the health care professions</p> <p>Use referral and consultation as opportunities to improve quality of care and client safety by sharing expertise</p>

3.2 Work with physiotherapists and other colleagues in health care and other professions to prevent misunderstandings, manage differences, and resolve conflicts				
3.2.1 Demonstrate respect toward collaborators	<p>Respect the diversity of perspectives and expertise among health care professionals</p> <p>Convey information considerately</p>	<p>Actively listen to and engage in interactions with collaborators</p>	<p>Delegate tasks and responsibilities in an appropriate and respectful manner</p> <p>Maintain positive relationships in all professional contexts</p>	<p>Lead the active development of positive collaborative working relationships</p>
3.2.2 Implement strategies to promote understanding, manage differences and resolve conflicts in a manner that supports a collaborative culture	<p>Identify factors that contribute to misunderstandings, differences and conflicts in the practice setting</p> <p>Describe different approaches to preventing misunderstanding and managing differences</p> <p>Communicate clearly and directly to resolve conflicts</p> <p>Respond to requests and feedback in a respectful and timely manner</p>	<p>Identify communication barriers in the client management team</p> <p>Listen to, understand and find common ground with collaborators</p>	<p>Mentor others in effective collaboration strategies</p> <p>Gather the information and resources needed to resolve conflicts among collaborators</p> <p>Analyse problems with team dynamics</p> <p>Gain consensus among colleagues in resolving conflicts</p>	<p>Develop and implement effective strategies to resolve conflicts in a manner that supports a collaborative culture</p> <p>Effectively facilitate conflict resolution</p>

3.3 Effectively and safely delegate or transfer management to another professional				
<p>3.3.1 Determine when management should be transferred to another physiotherapist, healthcare or other professional or allied health assistant</p>	<p>Describe how scope of practice can trigger delegation or transfer of management</p> <p>Describe common transitions in management and the process of safe delegation</p> <p>Demonstrate effective supervision in delegated tasks</p> <p>Recognise and act on client safety issues in the delegation or transfer of management to an allied health assistant</p>	<p>Judiciously recognises when management should be transferred or delegated to another health care or other professional</p>	<p>Manage the effective transfer of complex clients to the appropriate health care or other professional(s)</p>	
<p>3.3.2 Demonstrate safe transfer of management, using both verbal and written communication, during a client transition to a different professional, setting, or stage of management</p>	<p>Identify specific information required for safe handover during transitions in management</p> <p>Summarise the clients' issues in the transfer summary, including plans to deal with ongoing issues</p> <p>Communicate with health professionals during transitions in management, clarifying issues after delegation or transfer as needed</p> <p>Recognise and act on client safety issues in the transfer of management</p>	<p>Demonstrate safe handover of management, both verbal and written, during a client transition to a different health care professional, setting, or stage of care</p> <p>Organise the delegation or transfer of management to the most appropriate health care professional</p>	<p>Mentor others in the safe handover of management, both verbal and written, during a client transition to a different health care professional, setting, or stage of care</p> <p>Analyse gaps in communication between health care professionals during transitions in care</p>	<p>Model effective handover, teaching learners structured communication techniques to facilitate safe and effective delegation or transfer of management</p>

ROLE 4: LEADER

Definition

As Leaders, physiotherapists engage with others to contribute to a vision of quality services in the health and other sectors and take responsibility for the delivery of excellent client care through their activities as practitioners, administrators, scholars, or teachers.

Description

The Leader Role describes the engagement of all physiotherapists in shared decision-making for the operation and ongoing evolution of systems in the health and other sectors. Physiotherapists demonstrate collaborative leadership and management within the health and other sectors.

At a system level, physiotherapists contribute to the development and delivery of continuously improving health promotion, health care and preventative services, and engage with others in working toward this goal. They function as individual care providers, as members of teams, and as participants and leaders in the health and other sectors.

KEY AND ENABLING COMPETENCE	Level 1 Foundation	Level 2 Intermediate	Level 3 Highly developed	Level 4 Expert
4.1 Contribute to the improvement of health promotion and health care delivery in teams, organisations, and systems				
4.1.1 Use health informatics and technology to improve health promotion and the safety and quality of care	Analyse the data available from health information systems in their practice to optimise client care	Audit practice against indicators of Safety and Quality appropriate to the practice setting	Map information and process flow in the care of clients in their team or organisation and suggest process changes for quality improvement and client safety	Use health informatics to improve the systems of quality of client care and optimise client safety Compare service delivery data to accepted targets and goals and plan improvements
4.2 Engage in the responsible utilisation and management of available resources				
4.2.1 Allocate and utilise health care and other resources for optimal client service delivery	Identify the differences between efficacy, effectiveness and efficiency with respect to health care delivery Analyse a case to show how practice-related decisions affect service utilisation and health-system sustainability	Describe the costs of common diagnostic and therapeutic interventions as well as factors affecting these costs Use clinical judgment to minimise wasteful practices Describe the ethical debate related to resource stewardship in health care	Describe models for resource stewardship in health care used at the institutional level Consider costs when choosing tests and care options Provide advice on evaluating service care strategies in order to minimise waste Seek information on current and emerging innovation/ technology to improve service delivery	Allocate health care resources for optimal client care Optimise practice patterns for cost- effectiveness and cost control Design and evaluate care delivery models that may improve aspects of service delivery

<p>4.2.2 Apply evidence and management processes to achieve cost-appropriate service delivery</p>	<p>Discuss strategies to overcome the personal, client, and organisational factors that lead to waste of health care resources</p> <p>Describe how evidence-informed physiotherapy can be applied to optimise health care resource allocation</p>	<p>Apply evidence or guidelines with respect to resource utilisation in common clinical scenarios.</p>	<p>Determine cost discrepancies between best practice and their current practice</p> <p>Optimise practice patterns for cost-effectiveness and cost control</p>	<p>Apply evidence and management processes to achieve cost- appropriate care</p> <p>Compare utilisation data within and outside their institution/practice to revise processes that are inefficient or unnecessary</p>
<p>4.3 Demonstrate leadership in professional practice</p>				
<p>4.3.1 Demonstrate leadership skills to enhance quality practice</p>	<p>Describe leadership styles as they relate to the health care or other sectors</p> <p>Demonstrate self- awareness, self-reflection, and self-management in developing leadership skills</p>	<p>Contribute to leading project components in their area of practice, that enhance quality practice</p> <p>Analyse their own leadership style including strengths, weaknesses, and biases.</p>	<p>Lead healthcare change and redesign initiatives in projects in their area of practice</p> <p>Create opportunities for others to develop leadership skills</p>	<p>Demonstrate leadership skills to enhance healthcare in complex organisation/system level change</p> <p>Mentor others in their teams to develop leadership skills</p> <p>Reflect on the impact of their own leadership style on their professional performance and the performance of others</p>

<p>4.3.2 Facilitate change in service delivery to improve services and outcomes</p>	<p>Compare and contrast local health and human services systems with other models around the world</p> <p>Identify the key issues regarding the need to improve health care delivery and the role of physiotherapist leadership in this improvement</p> <p>Actively engage in change initiatives led by others</p>	<p>Analyse and evaluate data available on their own practice outcomes to initiate improvements in service delivery and outcomes</p>	<p>Describe key health policy and organisational issues in their area of practice or setting of care</p> <p>Develop strategies with clear objectives collaboratively with clients, managers and other stakeholders to improve client experiences and outcomes</p> <p>Support others in managing change of behaviour or practice to improve services</p>	<p>Share a clear vision and lead change at organisational/practice level to enhance services and outcomes</p> <p>Use data to inform planning and implement a change strategy to improve services and outcomes in their area of practice</p> <p>Disseminate processes and outcome changes as part of continuous improvement</p>
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ROLE 5: HEALTH ADVOCATE

Definition

As Health Advocates, physiotherapists contribute their expertise and influence as they work with groups, communities, client populations, government and other agencies and organisations to improve health. They work with those they serve to determine and understand needs, speak on behalf of others when required, and support the mobilisation of resources to effect change.

Description

Physiotherapists contribute to efforts to improve the health and well-being of their clients, their communities, and the broader populations they serve.

Improving health is not limited to mitigating illness or trauma, but also involves illness and injury prevention and health promotion. Improving health also includes promoting health equity, whereby individuals and populations reach their full health potential without being disadvantaged by, for example, race, ethnicity, religion, gender, sexual orientation, age, disability, social class, economic status, or level of education.

Physiotherapists leverage their position to support clients in navigating the health care system and to advocate with and for them to access appropriate resources in a timely manner. Physiotherapists seek to improve the quality and outcomes of health promotion and health care by addressing the health needs of the clients, communities, or populations they serve. Physiotherapists promote healthy communities and populations by influencing the system (or by supporting others who influence the system), both within and outside of their work environments.

Physiotherapist advocacy occurs within complex systems and thus requires the development of partnerships with clients, support networks, relevant others or community agencies and organisations to influence health determinants. Advocacy often requires engaging with other health care professionals, community agencies, administrators, and policy-makers.

KEY AND ENABLING COMPETENCE	Level 1 Foundation	Level 2 Intermediate	Level 3 Highly developed	Level 4 Expert
5.1 Respond to the individual client's health needs by advocating with the client within and beyond the practice setting				
5.1.1 Work with clients to identify and address the determinants of health that affect them, and their access to necessary health services or resources	<p>Describe the role of health care professionals in client advocacy</p> <p>Define individual and social determinants of health and explain their implications</p> <p>Identify the barriers clients and families encounter in accessing an appropriate care plan and support needs</p> <p>Identify a given client's need for health services or resources related to the scope of their practice</p> <p>Facilitate timely client access to address need outside the physiotherapist's scope</p>	<p>Identify a given client's needs for health services or resources outside of their scope of practice, and facilitate timely client access</p>	<p>Demonstrate an approach to working with clients to advocate for beneficial services or resources</p>	<p>Lead others in how to work effectively and efficiently with complex clients to address the determinants of health that affect them and their timely access to needed health services or resources</p> <p>Lead advocacy to administrative or governing bodies on behalf of clients in their area of practice</p>

<p>5.1.2 Work with clients and relevant others to increase opportunities to adopt healthy behaviours</p>	<p>Describe the value of promoting healthy behaviours and the barriers to behaviour change</p> <p>Describe principles of behaviour change and apply limited strategies in client encounters to facilitate behaviour change</p> <p>Identify resources or agencies that address the health needs of clients</p>	<p>Educate the client and relevant others about information and resources, including communication technologies, to improve health</p> <p>Apply the principles of behaviour change during conversations with clients about adopting healthy behaviours</p> <p>Connect clients with programs and support services to facilitate change to healthier behaviours</p>		<p>Work with clients with challenging and complex needs to increase opportunities to adopt healthy behaviours</p> <p>Prepare and lead strategies to influence organisations to support client adoption of healthy behaviours</p>
<p>5.1.3 Incorporate illness and injury prevention, health promotion, and health surveillance activities into individual client encounters</p>	<p>Describe the processes of illness and injury prevention, health promotion, and health surveillance</p> <p>Work with the client and relevant others to identify opportunities for illness and injury prevention and health promotion.</p>	<p>Incorporate illness and injury prevention, health promotion, and health surveillance activities into interactions with individual clients</p>	<p>Demonstrate effective application of a range of strategies for illness and injury prevention, health promotion and health surveillance activities in management of clients in their area of practice.</p>	<p>Lead and demonstrate initiative in illness and injury prevention, health promotion, and health surveillance activities in the management of clients in the area of practice</p>

5.2 Respond to the needs of the groups, communities or populations they serve by advocating with them for organisational or system-level change to achieve improved health outcomes				
<p>5.2.1 Work with a group, community or population to identify and address the social, economic and environmental factors that influence health status</p>	<p>Identify groups, communities or populations they serve who are experiencing health inequities and identify opportunities to contribute to local efforts to address contributing factors</p>		<p>Analyse current policy or policy developments that affect the communities or populations they serve</p> <p>Work with groups, communities or populations to identify and address, at an organisational level, the social, economic and environmental factors that affect them</p>	<p>Work with groups, communities or populations to identify and address, at a policy or governmental level, the social, economic and environmental factors that affect them.</p> <p>Facilitate system changes to impact determinants of health through appropriate service design</p>
<p>5.2.2 Improve practice by applying a process of continuous quality improvement to illness and injury prevention, health promotion, and health surveillance activities</p>	<p>Participate in continuous quality improvement processes related to health promotion and illness and injury prevention programs</p>		<p>Identify clients or populations that are not being served optimally in their clinical practice and seek out methods for improvements</p> <p>Report clusters of unusual cases seen in practice to the appropriate authority or team leader, balancing client confidentiality with the duty to protect public health</p>	<p>Improve clinical practice by leading a process of continuous quality improvement in illness and injury prevention, health promotion, and health surveillance activities in their area of practice</p>

5.2.3 Contribute to improvement of health in the community or population the practitioner serves	Evaluate and promote available resources to support the health needs of communities or populations they serve	Partner with relevant others to identify the health needs of a community or population they serve	Distinguish between competing health interests of the individuals, communities, and populations they serve	Lead organisational or governmental processes to improve health in the communities or populations they serve
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ROLE 6: SCHOLAR

Definition

As Scholars, physiotherapists demonstrate a commitment to maintaining and enhancing their professional competence. This is achieved by engaging in critical reflection, continuous learning, teaching others and contributing to scholarship throughout their career.

Description

Physiotherapists develop scholarly abilities to enhance and advance health and health care. Physiotherapists enhance safety and quality by continually evaluating the processes and outcomes of their daily work, sharing and comparing their work with that of others, and actively seeking feedback. They strive to meet the needs of individual clients and their families and of the health care and other sectors by continuous professional development.

Physiotherapists strive to master their domains of expertise and to share their knowledge. They implement a planned approach to lifelong learning. They recognise the need to continually learn and to model the practice of lifelong learning for others. Through their engagement in evidence-informed and shared decision-making, they recognise uncertainty in practice and formulate questions to address knowledge gaps. Physiotherapists are able to identify relevant evidence, critically evaluate it and apply it in their practice and scholarly activities. They utilise the best available research evidence to arrive at decisions, while taking client values and preferences into account.

As teachers physiotherapists facilitate, individually and through teams, the education of students, colleagues, co-workers, clients, the public and others. Finally, physiotherapists' scholarly abilities allow them to contribute to the application, dissemination, translation, and creation of knowledge and practices applicable to the health and other sectors.

KEY AND ENABLING COMPETENCE	Level 1 Foundation	Level 2 Intermediate	Level 3 Highly developed	Level 4 Expert
6.1 Engage in ongoing learning to enhance their professional activities.				
6.1.1 Develop, implement, monitor, and revise a personal learning plan to enhance professional practice	<p>Describe the obligations and benefit of lifelong learning and ongoing enhancement of competence</p> <p>Discuss and create a learning plan and strategy for ongoing self-monitoring with a mentor, advisor or learning coach</p> <p>Use technology to develop, record, monitor, revise, and report on personal learning in the area of practice</p> <p>Comply with Physiotherapy Board of Australia requirements for continuing professional development.</p>	Demonstrate a structured approach to monitoring progress of personal learning in their professional practice	Mentor others in development and revisions of learning plans in their area of practice	Maintain a plan to enhance expert competence across all roles for practice and update it regularly

<p>6.1.2 Identify opportunities for learning and improvement by regularly reflecting on and assessing their performance using various internal and external sources of information</p>	<p>Identify, record, and answer questions arising in daily work</p> <p>Seek help or pursue learning opportunities, as appropriate, when limits of current expertise are reached</p> <p>Describe the implications for learning of reflection during action and after action</p> <p>Use critical self-reflection and seek peer review to improve their own practice</p> <p>Maintain a continuing professional development portfolio and reflect on learning</p>	<p>Regularly engage in personal learning by drawing upon various sources (daily work, literature, formal or informal education sessions) to identify and prioritise learning needs</p> <p>Revise and monitor a performance improvement plan based on changes to scope of practice</p>	<p>Seek and interpret multiple sources of performance data and feedback, with guidance, to continuously improve performance</p>	<p>Access and summarise sources of performance data applicable to a scope of practice, and utilise to design improvement strategies in their practice</p>
<p>6.1.3 Engage in collaborative learning to continuously improve personal practice and contribute to collective improvements in practice</p>	<p>Participate effectively in collaborative group learning</p>		<p>Identify the learning needs of a health care team</p>	<p>Lead and mentor collaborative learning to continuously improve personal practice and contribute to collective improvements in practice</p>
<p>6.2 Facilitate the learning of students, clients, the public, and other health care professionals</p>				

6.2.1 Recognise the influence of role-modelling and the impact of the formal, informal, and hidden curriculum on learners	Describe the concepts of formal, informal, and hidden curricula	Identify behaviours associated with positive and negative role-modelling Describe the link between role-modelling and the hidden curriculum	Use strategies for deliberate, positive role-modelling	Apply strategies to mitigate the tensions between formal, informal, and hidden curricula
6.2.2 Promote a safe learning environment	Describe factors that can positively or negatively affect the learning environment Describe strategies for reporting and managing witnessed or experienced mistreatment	Explain how power differentials between learners and teachers can affect the learning environment	Ensure a safe learning environment for all members of the team.	Lead change to promote a safe learning environment Facilitate a safe and positive learning organisation culture
6.2.3 Ensure client safety is maintained when learners are involved	Speak up in situations in the clinical training environment where client safety may be at risk	Recognise unsafe clinical situations involving learners and manage them appropriately	Balance clinical supervision and graduated responsibility, ensuring the safety of clients and learners	

<p>6.2.4 Plan and deliver education activities</p>	<p>Demonstrate basic skills in educating others, including clients and their families, students and peers</p> <p>Plan and deliver education activities within their scope of practice to assistants, students and peers</p>	<p>Apply a model of clinical education relevant to their practice setting</p> <p>Define specific learning objectives for a teaching activity</p> <p>Demonstrate effective education and supervision as a clinical educator</p> <p>Demonstrate effective mentoring of junior staff</p>	<p>Choose appropriate content, teaching format, and strategies tailored to a specific educational context.</p> <p>Teach the public and other health care or industry stakeholders</p> <p>Teach aspects within their practice scope to other clinicians</p>	<p>Use relevant learning theories to enhance the learning of others</p> <p>Teach at national and/or international levels relevant aspects of their area of practice</p>
<p>6.2.5 Provide contextually appropriate feedback to enhance learning and performance</p>	<p>Describe the features of effective feedback and its importance for teaching and learning</p>	<p>Provide effective feedback to enhance learning and performance of others</p> <p>Provide written or verbal feedback to students and other members of the team</p>	<p>Role-model regular self-assessment and feedback-seeking behaviour</p>	<p>Help learners and teachers manage the emotional impact of giving and receiving feedback</p> <p>Work with those who give and receive feedback to develop plans for improvement</p>
<p>6.2.6 Implement continuous improvement of education based on evaluation</p>	<p>Contribute to the evaluation of teachers and programs in an honest, fair, and constructive manner</p>	<p>Demonstrate appropriate assessment of other learners</p> <p>Contribute to the assessment of other learners</p>		<p>Apply systematic approaches to assessment of learners or evaluation of programs</p>

6.3 Integrate best available evidence into practice				
6.3.1 Recognise practice uncertainty and knowledge gaps and generate focused questions that address them	Formulate structured clinical questions related to identified knowledge gaps		Design and implement processes in the workplace for recording and prioritising questions of importance to the area of practice.	Develop questions that address the efficacy and/or cost-effectiveness of interventions or management strategies Coach other health professionals to formulate clinical or scholarly questions.
6.3.2 Identify and select relevant pre-appraised resources and original research	Identify the research designs most suited to the type of question (e.g. therapy, prevention, diagnosis, prognosis, meaning and experience) Search databases such as the Cochrane Library, Physiotherapy Evidence Database (PEDro) and other sources and retrieve relevant pre-appraised and original evidence.	Demonstrate proficiency in identifying, selecting, and navigating clinical information sources.	Coach others to find and select sources of evidence for a given practice-related question	Lead the identification and promulgation of current sources of pre-appraised and original research in their area of practice
6.3.3 Critically evaluate the integrity, reliability, and applicability of health-related research and literature	Demonstrate the use of critical appraisal frameworks to evaluate common study designs. Describe the generalisability of a study or synthesis of studies. Describe the influence of cognitive biases on the	Determine the risk of bias in a wide range of scholarly sources. Discuss the barriers to and facilitators of applying study findings to professional practice.	Interpret study findings in the context of uncertainty, including a discussion and critique of their relevance to professional practice. Critically evaluate the integrity, reliability, and applicability of health-related	Participate in the development of an evidence synthesis.

	appraisal process		research and literature Coach other health professionals to use critical appraisal frameworks to evaluate common study designs.	
6.3.4 Integrate evidence into decision-making in their practice	Demonstrate use of best available evidence along with available resources, clinical expertise and client's preferences when making clinical decisions.		Demonstrate the use of an integrated model of decision-making that combines best evidence, available resources, and clinical expertise in the context of clients' specific situation, experience, expectations, values and preferences.	Coach other health professionals to integrate evidence effectively into decision-making in their practice Use implementation science to facilitate evidence informed practice change
6.4 Contribute to the dissemination and/or creation of knowledge and practices applicable to health				
6.4.1 Demonstrate an understanding of the scientific principles of research and scholarly inquiry and the role of research evidence in health care	Describe the basic scientific principles of research and scholarly inquiry Describe the role of research and scholarly inquiry in contemporary health care		Apply the principles of research and scholarly inquiry to contribute to a scholarly investigation or the dissemination of research findings in their area of practice	Engage in scholarly inquiry or research
6.4.2 Identify ethical principles for research and incorporate them into obtaining informed consent, considering potential harms and benefits,	Describe the ethical principles applicable to research and scholarly inquiry	Discuss and provide examples of the ethical principles applicable to research and scholarly inquiry relevant to their area of practice	Identify ethical principles for research and incorporate them into obtaining informed consent, considering harm and benefit, and considering vulnerable populations	Apply ethical principles relevant to research and scholarly inquiry Teach others the application of ethical principles in research

and considering vulnerable populations				
6.4.3 Contribute to the work of research programs	Describe the roles and responsibilities of principal investigators and collaborators in a research project	Seek opportunities to participate in scholarly inquiry in addressing questions in their area of practice Compare and contrast the roles and responsibilities of members of a research team and describe how they differ from clinical and other practice roles and responsibilities	Participate in the work of a research program.	Actively participate as a research team member, balancing the roles and responsibilities of a researcher with the clinical roles and responsibilities of a physiotherapist
6.4.4 Pose questions amenable to scholarly inquiry and select appropriate methods to address them	Describe the characteristics of a well-constructed research question Describe common methodologies used for scholarly inquiry in physiotherapy	Discuss and critique the possible methods of addressing a given scholarly question	Pose clinically relevant and appropriately constructed questions amenable to scholarly investigation Select appropriate methods of addressing a given scholarly question in their area of practice	Coach others to pose relevant, appropriately constructed questions that are amenable to scholarly investigation Engage in the application and implementation of appropriate methods in a scholarly investigation Develop resources and capacity for evidence informed decision making

<p>6.4.5 Summarise and communicate to professional and lay audiences, including clients, the findings of relevant research and scholarly inquiry</p>	<p>Summarise and communicate to peers the findings of applicable research and scholarship</p>	<p>Summarise and communicate to professional and lay audiences, including clients, the findings of relevant research and scholarly inquiry</p>	<p>Take responsibility for summarising and communicating study findings to stakeholders</p> <p>Prepare a manuscript suitable for publication in a peer-reviewed journal</p>	<p>Present scholarly work at seminars and conferences</p> <p>Inform and promote communication to organisations and health providers regarding</p> <p>Engage stakeholders in collaboration to enhance knowledge translation</p> <p>research outcomes impacting clinical practice</p>
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ROLE 7: PROFESSIONAL

Definition

As professionals, physiotherapists are committed to safety and quality in health care through ethical practice, high standards of personal behaviour, accountability and management of their physical and mental health.

Description

The professional role reflects the legal obligations and social expectations of physiotherapists, which include practice competence, commitment to ongoing professional development, promotion of the public good and adherence to ethical standards. The values expected of physiotherapists are integrity, honesty, altruism, humility, transparency and respect for culture and diversity. To provide optimal client care, physiotherapists must take responsibility for their own health and well-being and that of their colleagues.

KEY AND ENABLING COMPETENCE	Level 1 Foundation	Level 2 Intermediate	Level 3 Highly developed	Level 4 Expert
7.1 Demonstrate a commitment to clients by applying best practices and adhering to high ethical standards				
7.1.1 Exhibit professional behaviour in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality	<p>Interact with clients, Australian Charter of Healthcare rights colleagues and other health professionals with honesty and integrity</p> <p>Demonstrate caring and compassion.</p> <p>Recognise and respect personal and professional boundaries</p> <p>Demonstrate sensitivity to issues concerning diversity with respect to peers, colleagues and clients</p> <p>Exhibit appropriate professional behaviours in all aspects of practice</p> <p>Consistently maintain confidentiality in the practice setting, while recognising the legal and ethical limitations of confidentiality</p>	<p>Consistently prioritise the needs of clients and others to ensure a client's legitimate needs are met</p> <p>Independently manage issues of confidentiality, intervening when confidentiality is breached</p>	<p>Intervene when behaviours toward colleagues and learners undermine a respectful environment</p> <p>Mentor other physiotherapists in appropriate professional behaviours</p>	<p>Role-model exemplary professional behaviours and relationships</p> <p>Lead and advise on professionalism and professional behaviour.</p>

<p>7.1.2 Recognise and respond to ethical issues encountered in practice</p>	<p>Recognise and respond to ethical issues encountered in practice</p> <p>Identify and observe protocols for reporting inappropriate or unethical practice and circumstances requiring mandatory reporting</p>	<p>Describe principles and theories of core ethical concepts.</p> <p>Identify appropriate ethical concepts to address ethical issues encountered during clinical and academic activities.</p>	<p>Manage ethical issues encountered in the practice setting</p> <p>Mentor other physiotherapists in resolving ethical issues</p>	<p>Lead and advise on the resolution of ethical issues in their practice</p>
<p>7.1.3 Recognise and manage conflicts of interest</p>	<p>Describe the implications of potential personal, financial, and institutional conflicts of interest, including conflicts of interest with industry.</p> <p>Recognise personal conflicts of interest and demonstrate an approach to managing them.</p> <p>Seek assistance, as appropriate, to mitigate risk of conflict and to resolve conflict</p>		<p>Proactively recognise, manage and resolve real, potential or perceived conflicts of interest transparently and in accordance with ethical, legal and moral obligations.</p>	<p>Effectively manage conflict of interest resolution.</p>

<p>7.1.4 Exhibit professional behaviour in the use of technology-enabled communication</p>	<p>Comply with AHPRA Social Media Policy</p> <p>Use technology-enabled communication, including their online profile, in a professional, ethical, and respectful manner.</p> <p>Follow relevant policies regarding the appropriate use of electronic medical records.</p>	<p>Intervene when aware of breaches of professionalism involving technology-enabled communication</p>	<p>Lead and advise on professional behaviours in the use of technology-enabled communication</p>	
<p>7.2 Demonstrate a commitment to the community by recognising and responding to community expectations in health care</p>				
<p>7.2.1 Demonstrate accountability to clients, the community, and the profession</p>	<p>Describe the tension between the physiotherapist's role as advocate for individual clients and the need to manage scarce resources</p> <p>Demonstrate prudent use of available resources in achieving client goals aligned with community expectations</p> <p>Describe the social contract between the profession of physiotherapy and society</p>	<p>Demonstrate a commitment to the promotion of the public good in health care, including stewardship of resources</p>	<p>Demonstrate accountability to clients, society, and the profession by recognising and responding to societal expectations of the profession</p> <p>Advise on distribution of resources within their practice area</p> <p>Create awareness of community expectations of physiotherapy practice and promote professional accountability amongst colleagues</p>	<p>Influence the profession's response to issues of societal accountability</p> <p>Demonstrate exemplary professional accountability to clients, the community and the profession</p>

7.3 Demonstrate a commitment to the profession by adhering to regulation and standards				
<p>7.3.1 Fulfil and adhere to the professional and ethical codes, standards of practice, and legal and industrial requirements governing practice</p>	<p>Describe and comply with the relevant codes, policies, standards, and laws governing physiotherapists and the profession</p> <p>Recognise the client's health care rights</p>	<p>Describe how to respond to a complaint or legal action</p>	<p>Monitor institutional and clinical environments and respond to issues that can harm clients or the delivery of health care.</p>	<p>Lead the development of advancement in policy pertaining to practice governance</p> <p>Lead the implementation of changes to improve standards of practice and compliance with legal and industrial requirements</p>
<p>7.3.2 Recognise and respond to unprofessional and unethical conduct in physiotherapists and other colleagues</p>	<p>Describe and recognise key behaviours that are unprofessional or unethical.</p> <p>Describe and adhere to regulatory mandatory reporting requirements in a case of serious unprofessional conduct or practice.</p> <p>Describe and adhere to regulatory mandatory reporting requirements in a practitioner not being fit for practice</p>	<p>Personally respond to peer group lapses in professional conduct.</p>	<p>Recognise and respond to unprofessional and unethical conduct in colleagues in the health care professions</p> <p>Mentor team members in responding to unprofessional or unethical conduct in colleagues</p>	<p>Actively contribute to reviews of ethical standards and practice standards that impact physiotherapy and the health outcomes of clients</p>

7.4 Demonstrate a commitment to personal health, self-care and well-being to foster optimal professional practice				
<p>7.4.1 Exhibit self-awareness and manage influences on personal well-being and professional performance</p>	<p>Describe the connection between self-care and client safety</p> <p>Identify and implement strategies to support personal well-being, a healthy lifestyle and appropriate self-care</p>	<p>Balance the impact of physical, mental, personal and environmental factors on performance</p> <p>Demonstrate an ability to regulate attention, emotions, thoughts, and behaviours while maintaining capacity to perform professional tasks</p>	<p>Mentor others in strategies to promote self-care and its influence on professional performance</p>	
<p>7.4.2 Manage personal and professional demands for a sustainable practice throughout the career life cycle</p>	<p>Develop realistic goals for professional and personal life</p> <p>Seek appropriate health care relevant to needs</p>	<p>Consider career options that will promote personal strengths and enhance well-being, and prevent burnout</p> <p>Manage competing personal and professional priorities</p>	<p>Manage personal and professional demands for a sustainable practice throughout the career life cycle</p> <p>Advocate for learning and work environments that provide opportunities for a healthy lifestyle</p>	<p>Role-model the efficient management of competing personal and professional priorities</p>

<p>7.4.3 Promote a culture that recognises, supports, and responds effectively to colleagues in need</p>	<p>Describe the multiple ways in which poor physiotherapist health can present, including disruptive behaviour, and offer support to peers when needed</p> <p>Practise positive behaviours and deal with negative behaviours to promote a collegial work environment</p>	<p>Describe the importance of early intervention for colleagues in need of assistance</p> <p>Identify available resources, and describe professional and ethical obligations and options for intervention.</p>	<p>Provide mentorship to colleagues</p> <p>Support others in their professional transitions.</p> <p>Promote a culture that recognises, supports, and responds effectively to colleagues in need</p>	<p>Role-model and teach learners and colleagues about personal and professional choices to effectively manage their practice</p>
<p>7.5 Manage their practice and career</p>				
<p>7.5.1 Set priorities and manage time to balance professional and personal life</p>	<p>Reflect on and set personal, educational and professional goals</p> <p>Build relationships with mentors</p> <p>Demonstrate time management skills</p> <p>Manage a personal schedule using tools and technology</p>	<p>Align priorities with expectations for education and practice</p> <p>Organise work using strategies that address strengths and areas to improve in personal effectiveness and efficiency</p> <p>Develop time management skills in specific contexts, such as for delegation to support workers, in meetings, and for teamwork</p>	<p>Implement priorities effectively, and manage time to balance practice and personal life</p>	<p>Balance personal life with responsibilities in education, research, administration, and practice</p> <p>Demonstrate efficiency and skill in time management in specific contexts, such as for delegation, in meetings, and for teamwork</p>

<p>7.5.2 Manage career planning, finances, and health and human resources in practice setting</p>	<p>Identify career pathway opportunities based on personal strengths and goals</p> <p>Undertake educational experiences to gain competencies necessary for career path</p>	<p>Identify career pathway opportunities based on the needs of society and current and projected workforce needs</p> <p>Review opportunities available for further training and cost implications</p> <p>Undertake educational qualifications to gain competencies necessary for career path</p> <p>Contribute to practice/department finance and resource processes</p>	<p>Reconcile expectations for practice with job opportunities and workforce needs</p> <p>Plan practice/physiotherapy team finances, considering short and long term goals.</p>	<p>Describe remuneration models and career progressions as they pertain to area of practice</p> <p>Demonstrate efficacy of practice and use as a tool to advocate for appropriate remuneration models</p> <p>Demonstrate effective management of health and human resources in practice setting</p>
<p>7.5.3 Implement processes to ensure personal practice management improvement</p>	<p>Describe how practice standardisation can improve quality of health care</p>	<p>Improve personal practice by evaluating a problem, setting priorities, executing a plan, and analysing the results</p>		<p>Role model the implementation of effective processes that ensure personal practice management improvement</p>

GLOSSARY

Adverse event	“An incident in which harm resulted to a person receiving health care.” (ACSQHC, 2012, p.7)
Best available evidence	This refers to research evidence that is relevant to the practice situation, with a low risk of bias. Recent, high quality pre-appraised evidence, such as systematic reviews (where available), provide the best evidence synthesis.
Client	Throughout the Competence Framework, <i>client</i> is inclusive of all those who are personally significant to the client and are concerned with their management, and client permission has been given for their involvement. <i>Client</i> can include, according to the client’s circumstances, family members, partner, caregivers, legal guardian, and substitute decision-makers, an agency, organisation, third party provider or employer.
Clinical	Where there is observation or interaction with a client
Critical incident	Any sudden or unexpected event or situation that could have led, or did lead to unintended, threatened, perceived or unnecessary harm or trauma to an individual.
Culturally safe care	Culturally safe care is perceived by the health service user as respectful and sensitive to their culture, beliefs and identity, free from discrimination and empowering them in decision-making. An important aspect of cultural safety is that the health professional has insight into the ways in which their own culture and cultural values may impact on their clients.
Cultural responsiveness	“Describes the capacity to respond to the healthcare issues of diverse communities”. (Cultural Responsiveness Framework Guidelines for Victorian health services , 2009, p.4)”
Emotionally charged	There is strong and open display of emotion. Examples of emotion include very upset/sad, significant anxiety, anger, aggression
Health forecasting	“Health forecasting is predicting health situations or disease episodes and forewarning future events. It is also a form of preventive medicine or preventive care that engages public health planning and is aimed at facilitating health care service provision in populations” (Soyiri & Reidpath, 2013, p.2).
Hidden curriculum	The hidden curriculum is not part of the formal curriculum of a program of learning. It refers to aspects of the learning environment (structures, practices and culture) that facilitate adoption of attitudes, values and behaviours that reflect organisational and professional expectations.
Open disclosure	An open discussion with a patient about an incident(s) that resulted in harm to that patient while they were receiving health care. The elements of open disclosure are an apology or expression of regret (including the word ‘sorry’), a factual explanation of what happened, an opportunity for the patient to relate their experience, and an explanation of the steps being taken to manage the event and prevent recurrence. Open disclosure is a

	discussion and an exchange of information that may take place over several meetings. (Australian Open Disclosure Framework , 2013, p.5)
Near miss	“An incident that did not cause harm, but had the potential to do so” (ACSQHC, 2012, p.11).
Implementation science	The scientific study of methods to promote the systematic uptake of research findings and other evidence-based practices into routine practice, and, hence, to improve the quality and effectiveness of health services. (Eccles MP and Mittman BS 2006)
Physical barriers	Includes noise, distractions, interruptions, environment design, appropriate choice of media, technological problems.
Practice	Encompasses the breadth of work that may be undertaken by a physiotherapist, in any environment or setting.
Professional duties	Refers to the requirements and responsibilities of the practitioners’ position.
Safe learning environment	<p>“A safe environment is one where the risk of harm is minimised and students feel secure. Harm relates not only to dangers in the built environment, involving such matters as architecture and construction, lighting, space, facilities and safety plans, but also refers to violence, physical threats, verbal abuse, threatening gestures, sexual harassment and racial vilification.” http://rego.bostes.nsw.edu.au/go/fag/safe-env</p> <p>“A safe learning environment allows learners to acknowledge their attitudes and beliefs, knowledge gaps, uncertainty, and mistakes.” (Bannister et al., 2015)</p>
Therapeutic alliance	A therapeutic alliance is the relationship between the physiotherapy and client that reflects collaboration and support. The three components are 1. Therapist-client agreed goals 2. Therapist-client agreed interventions and 3. An affective bond (Ferreira et al., 2013)
Universal precautions approach	This approach “assumes that your patients may not understand the information you provide and the advice you give about navigating their way through the health system.” (ACSQHC, 2015)

BIBLIOGRAPHY

- Australian Commission on Safety and Quality in Health Care (2008). *Australian Charter of healthcare Rights*. Retrieved from the ACSQH website
<https://www.safetyandquality.gov.au/national-priorities/charter-of-healthcare-rights/>
- Australian Commission on Safety and Quality in Health Care (2012). *National safety and quality health service standards*. Sydney, ACSQHC.
- Australian Commission on Safety and Quality in Health Care (2013), *Australian open disclosure framework*. ACSQHC, Sydney. Retrieved from
<https://www.safetyandquality.gov.au/our-work/open-disclosure/>
- Australian Commission on Safety and Quality in Health Care. (2014) *Health literacy national statement*. Retrieved from the ACSQH website
https://www.safetyandquality.gov.au/acsqhc_program/health-literacy/
- Australian Commission on Safety and Quality in Healthcare. (2015). *Health literacy: A summary for clinicians*. Retrieved from the ACSQH website
<https://www.safetyandquality.gov.au/search/Health+Literacy>
- Australian Commission on Safety and Quality in Healthcare. (2012). *Practice-level indicators of safety and quality for primary health care*. Retrieved from the ACSQH website
<https://www.safetyandquality.gov.au/our-work/information-strategy/indicators/practice-level-indicators-of-safety-and-quality-for-primary-health-care/>
- Australian Qualifications Framework Council. (2013). *Australian qualifications framework Second Edition January 2013*. Retrieved from <http://www.aqf.edu.au/>
- Bannister, S.L., Hanson, J.L., Maloney, C.G. & Dudas, R.D. (2015). Practical framework for fostering a positive learning environment. *Paediatrics*, 136(1):6-9
- Boursicot, K., Etheridge, L., Setna, Z., Sturrock, A., Ker, J., Smee, S. & Sambandam, E. (2011). Performance in assessment: Consensus statement and recommendations from the Ottawa conference. *Medical Teacher*, 33:370-383
- Bulley, C., Donaghy, M., Coppoolse, R., Bizzini, M., van Cingel, R., DeCarlo, M., ... & Risberg, M. (2005) *Sports Physiotherapy competencies and standards*. Sports Physiotherapy For All Project. Retrieved from <http://ifspt.org/competencies/>
- Council of Australian Governments. (2011). National health reform performance and accountability framework. Retrieved from <http://www.aihw.gov.au/health-performance/performance-and-accountability-framework/>
- Eccles, M.P. and Mittman, B.S. (2006). Welcome to Implementation Science. *Implementation Science* 1.1 (2006): 1. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1436009/>

Fair Work Commission. (2016). *Health Professionals and Support Services Award 2010* (pp.51-52). Canberra, ACT. Retrieved from <http://awardviewer.fwo.gov.au/award/show/MA000027>

Ferriera, P.H., Ferriera, M.L., Maher, C.G., Refshauge, K.M., Latimer, J. & Adams, R.A. (2013). The therapeutic alliance between clinicians and patients predicts outcome in chronic low back pain. *Physical Therapy*, 93:470-478.

Frank, J.R., Snell, L. & Sherbino, J. (eds.) (2014). *The draft CanMEDS 2015 milestones guide*. Royal College of Physicians and Surgeons of Canada.

Frank, J.R., Snell, L. & Sherbino, J. (eds.) (2015). *CanMEDS 2015 physical competency framework*. Ottawa: Royal College of Physicians and Surgeons of Canada. Retrieved from <http://canmeds.royalcollege.ca/en/framework>

Health Workforce Australia. (2012). *National common health capability resource: Shared activities and behaviours in the Australian health workforce*.

IFOMPT Standards Committee (2016). *Educational standards in orthopaedic Manipulative therapy*. International Federation of Orthopaedic Manipulative Physical Therapists (IFOMPT) Inc.

Khan, K. & Ramachandran, S. (2012). Conceptual framework for performance assessment: Competency, competence and performance in the context of assessments in healthcare – Deciphering the terminology. *Medical Teacher*, 34:920-928.

Lester, S. (2014). Professional competence standards and frameworks in the United Kingdom. *Assessment & Evaluation in Higher Education*, 39(1): 38-52.

Makeham, M., Pon, L., Prgomet, M., Carson-Stevens, A., Lake, R., Purdy, H. & Westbrook, J. (2015). *Patient safety in primary healthcare: An evidence check review brokered by the Sax Institute (www.saxinstitute.org.au) for the Australian Commission on Safety and Quality in Health Care*.

Moran, K.M., Harris, I.B. & Valenta, A.L. (2016). Competencies for patient safety and quality improvement: A synthesis of recommendations in influential position papers. *Health Professions Education*, 42(4): 162-169.

National Physiotherapy Advisory Group. (2009). *Essential competency profile for Physiotherapists in Canada*. Retrieved from <https://physiotherapy.ca/essential-competency-profile>

O'Keefe, M., Henderson, A. & Chick, R.(2015). *Developing sustainable and embedded interprofessional education: threshold learning outcomes as a potential pathway*. Office for Learning and Teaching.

Physiotherapy Board of Australia. (2014). *Code of conduct for registered health practitioners*. Retrieved from: <http://www.physiotherapyboard.gov.au/Codes-Guidelines.aspx>

Physiotherapy Board of Australia and Physiotherapy Board of New Zealand. (2015). *Physiotherapy practice thresholds in Australia and Aotearoa New Zealand*. Retrieved from <https://physiocouncil.com.au/for-education-providers/accreditation-resources/>

Soyiri, I.N. & Reidpath, D.D. (2013). An overview of health forecasting. *Environ Health Prev Med* 18:1-9.

ten Cate, O. (2013a). Editorial: Competency-based education, entrustable professional activities, and the power of language. *Journal of Graduate Medical Education*, March: 6-7.

ten Cate, O. (2013b). Nuts and bolts of entrustable professional activities. *Journal of Graduate Medical Education*, March: 157-158.

Victorian Government, Department of Health (2009). *Cultural responsiveness framework*. Melbourne. Retrieved from

<https://www2.health.vic.gov.au/about/publications/policiesandguidelines/Cultural%20responsiveness%20framework%20-%20Guidelines%20for%20Victorian%20health%20services>