

Titling Credential—Milestone 3 Evidence Portfolio Pathway Information Handbook

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Introduction

The Milestone 3 Titling credential is awarded to a physiotherapist who has met all the requirements of a formalised assessment process to demonstrate their highly developed physiotherapy experience and knowledge in a field of practice.

The Milestone 3 Titling credential is the first step towards advancing your career before embarking on Specialisation.

Career Pathway

The College Career Pathway has been designed to enable individuals' career goals and to support a national workforce. It aims to accommodate the evolving and diverse professional development needs of physiotherapists while fostering a commitment to lifelong learning. The pathway is intended to respond to changes in physiotherapy practice and to facilitate advocacy for physiotherapists within the profession and externally.



Description of Performance Level-Titling Credential 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.

Performance at this level is expected of an ACP Titled Physiotherapist.





Evidence Portfolio Pathway-Assessment

The Evidence Portfolio-based assessment includes:

- a) An electronic 'Show Portfolio' which demonstrates the applicant's competency against the <u>Physiotherapy Competence Framework at Milestone 3 level</u>
- b) Two (2) Reflection pieces:
 - i. a Reflection which demonstrates the applicant's understanding and/or implementation of Cultural Capability
 - ii. a General Reflection which demonstrates the applicant's insight against the Physiotherapy Career Attributes (Appendix 4)
- c) Clinical examination

The clinical assessment requires providing two (2) video recordings accompanied by the relevant documentation.

Pre-requisites for Titling-Evidence Portfolio Pathway Applications

At the time of applying for the Titling Credential, candidates must:

- have current AHPRA registration without restrictions
- have current Australian Physiotherapy Association (APA) membership
- be a current member of the National Group to which you are applying for Titling
- meet continuous practice area experience requirements
- meet recency of practice requirements
- demonstrate 30 CPD hours within the past three years in your selected practice area
- Overseas qualified members:
 - Must have a minimum three (3) years continuous practice area experience from the date certified by the Australian Physiotherapy Council
 - Alternatively, provide us a copy of the email received from AHPRA confirming your full registration. (Continuous practice area experience will be calculated from the date you received your full registration to work as a Physiotherapist in Australia).
- have completed the pre-requisite course(s) for the title you are applying for (or demonstrate attainment of an equivalent).





Table 1: Pre-requisite APA cours	es for Evidence Portfolio pathway to Titling	
Cardiorespiratory	 One of the Cardiorespiratory Physiotherapy Level 2 courses: Pulmonary Rehabilitation Level 2 ICU Level 2 Virtual Cardio ICU Physio 	
Women's and Men's Pelvic Health	 Introductory Women's Health Physiotherapy Level 1 (online) - all Women's Health Through the Life Stages Physiotherapy Level 1 (online and face-to-face) OR Women's Pelvic Health Physiotherapy Level 2 (online and face-to-face) 	
Gerontology	Gerontology Physiotherapy Level 2	
Neurology	Neurological Physiotherapy Level 2	
Occupational Health	Occupational Health Physiotherapy Level 1	
Paediatric	Paediatric Physiotherapy Level 2	
Pain	Pain Physiotherapy Level 1	
Sports and Exercise	Sports Physiotherapy Level 2	

Evidence Portfolio Pathway Titling Milestone 3: Process

The Evidence Portfolio Pathway Titling Milestone 3 Credential is a three-stage process:

Stage 1: Application

All candidates must complete and submit the Titling Application and payment form.

Stage 2: Portfolio Submission

Once the application has been approved, candidates must complete the portfolio submission. The portfolio has three components:

Component I. Assemble a portfolio of evidence. This is where you 'show' how you meet the requirements to be credentialed at Milestone 3. You must include a brief reflective statement focussed on your performance against each of the seven (7) Roles of the <u>Physiotherapy Competency Framework (v7.1)</u>

Also refer to Appendix 1: "List of Requirements", Appendix 2: "Learning Outcomes" and Appendix 3: "Examples of Evidence".

Component II. Write an overall Reflection (approx. 2000 – 2500 word limit) on your career to date: This Reflection is a statement of personal and professional learning and development across your career to date and the personal and/or professional changes that have occurred to demonstrate insight that you are practicing at Milestone 3, Highly Developed level. The Reflection should address the "Physiotherapy Career Attributes" (Appendix 4)





Component III. Write a critical Reflection and/or submit an audio-visual Reflection on your Aboriginal and Torres Strait Island cultural capability development (Does not exceed word limit 2000 (+10%) and/or approx. 5-minutes audio-visual) addressing the Cultural Capability requirements (Appendix 5), including:

- How has your cultural development impacted your practice?
- How have the cultural and social determinants of health contributed to your clinical practice?
- How will your journey continue/change in the future?

Candidates have 12 weeks to submit their Portfolio (Components I, II and III). Once all requirements of the Portfolio have been successfully met, the candidate is eligible to progress to Stage 3, the Clinical Examination.

Stage 3: Clinical Examination

The Clinical Examination requires the submission of two (2) video recordings, along with the corresponding documentation.

Candidates have 12 weeks to submit their completed Clinical Exam.

The video recordings consist of:

- An initial assessment
- A follow up assessment

The video recordings need to demonstrate and address the assessment of a patient/client and include a treatment and management plan that is specific to the candidate's area of practice. The chosen clients/patients should enable the candidate to demonstrate clinical competence across a diversity of contexts, including acuity and/or impairments, and/or stages across the lifespan, and biopsychosocial considerations.

The written documentation must relate to the recordings and demonstrate the candidate's capacity to critically reflect and highlight their strengths and limitations, in relation to the patient/client information and consultation.

The final step of the Clinical Examination is a post-clinical exam discussion between the candidate and assessors. The post-clinical exam discussion takes up to 45 minutes approximately, via a videoconferencing (Zoom) platform at a mutually agreed time. (The ACP supplies the Zoom platform link. All post-clinical exam discussions are recorded, however these recordings are deleted once the assessment decision is finalised).

The post clinical exam discussion provides an opportunity for assessors to seek clarification on what they have observed in the video submission, explore the candidate's clinical reasoning skills, treatment and management plans as well as discuss clinical progression expectations, and the use of evidence based practice in relation to the cases presented.

Note: Preparing for the Clinical Examination: As it may be the first time that a candidate's clinical skills have been formally assessed after a number of years, it is recommended that they undertake several practice sessions as part of their preparation. Candidates are encouraged to seek feedback from colleagues/mentors with respect to their skills, techniques, clinical reasoning and the use of evidence-based clinical practice. It is highly recommended that candidates practice under time constraints with the video recordings to personally review, reflect and critique performance under assessment conditions.





Fees

The fee schedule for applicants is:

- Application Fee \$300
- Portfolio Submission Fee \$1400
- Re-submission Fee \$500
- Clinical Examination Fee \$1400

Appeals, complaints and grievances

The information and forms are available under the 'Australian College of Physiotherapists Policies and Procedures' section of the APA website: https://australian.physio/aboutus/governance

FAQs

1. Who can become a Titled Physiotherapist?

Any APA member who is serious about a professional career in the relevant area of physiotherapy and meets the eligibility criteria is eligible to apply. The Titling Credential is the first stage of the Career Pathway to Specialisation.

2. What Titles can I currently apply for through the Evidence Portfolio Pathway (March 2024 intake)?

- ✓ ACP Cardiorespiratory Physiotherapist
- ✓ ACP Gerontological Physiotherapist
- ✓ ACP Neurological Physiotherapist
- ACP Occupational Health Physiotherapist
 ACP Paediatric Physiotherapist
- ✓ ACP Pain Physiotherapist
- ✓ ACP Sports and Exercise Physiotherapist
- ✓ ACP Women's Men's Pelvic Health Physiotherapist

3. What counts as CPD?

AHPRA-Physiotherapy Board of Australia's Continuing Professional Development registration standard requires all physiotherapists practising in Australia to maintain a portfolio that documents their participation in Continuing Professional Development (CPD) and is a record of learning aims and reflection of impact on practice.

4. Can my master's degree count towards my CPD hours?

Yes. Formal tertiary courses can count towards your annual CPD hours and the evidence you upload towards your Portfolio submission.

5. What can be included as practice-area CPD?

The CPD activity must contribute to both maintaining and improving your competence in your chosen scope of practice.

6. What do you mean by Recency of Practice & Continuous Practice Experience?

The ACP has consistent standards in place to guide the profession across the Career Pathway milestone levels. Titling aligns to the Career Pathway Milestone Level 3 – Highly Developed level. For ease, the Recency of Practice and Continuous Practice Experience information and standards are contained in a single document which is available on our website.





7. How long will it take my Evidence Portfolio Pathway application to be processed?

Evidence Portfolio pathway applications are normally processed within 15 business days, however, there may be times when processing can take longer.

8. What are the required writing standards?

The portfolio submission must be written to a professional standard expected by a tertiary institution. This includes attention to grammar, phrasing, punctuation and referencing where relevant. Citation and referencing is preferred in the style used by the Journal of Physiotherapy – JAMA. Professional, consistent, academically accepted referencing will be accepted. See 'References' within https://www.elsevier.com/journals/journal-of-physiotherapy/1836-9553/guide-for-authors

9. How to use abbreviations in your writing?

As Physiotherapists, we all use abbreviations. Some abbreviations are very well known. However, some are not universally used. We commonly develop our own abbreviations which we individually understand but other physiotherapists may not be so familiar with. When using an abbreviation write the word that you are going to abbreviate in full and then write the abbreviation in brackets immediately after the full word or words. From then on you can use the abbreviation.

10. What is the word limit rule when writing?

The word count is normally acceptable to be 10% above or below this word limit. The tables and figures are outside the word count, but in saying that, it is not okay to use a table/figure to put in whole paragraphs that should be in the body of your response.

11. What are portfolio submission requirements?

All pieces of evidence (documents, files, hyperlinks) must be provided in a standard, widely accepted format. Examples include, but are not limited to: Word, Excel, PPT, PDF, audio MP3, video MP4, image jpg, jpeg, png, hyperlink/URL etc. Our preference is for all documents to be PDF format. The portfolio of evidence must be provided via a link to a shared folder. Any standard platform will be accepted, including but not limited to: Google Docs, Dropbox, OneDrive, etc. Attachments of evidence will NOT be accepted via email.

Privacy and confidentiality requirements need to be considered – please ensure any submitted evidence does not include any identifiable patient/client details.

12. Australian Physiotherapy Council's (ACP's) Cultural Safety Training for Physiotherapists?

Cultural Safety Training for Physiotherapists' is available online, with a monthly intake, and takes approximately five hours to complete. It is recommended that you enrol in it prior to the 20th of the month in order to gain access to the training in the following month. Click <u>here</u> for more information and to register.

13. Scholar role- Pedro course- Do I need to complete the assessments?

PEDro, the Physiotherapy Evidence Database, has designed the Evidence-Based Physiotherapy Practice Level 3 (EBP Level 3) course to meet the Milestone 3 Highly Developed Evidence-Based Practice (EBP) sections of the Scholar role. On completion of course content in Modules 1 - 4 you will receive a Certificate of Attendance. You are not required to complete the assessments for this training. Click <u>here</u> to access the course.





14. What happens if I don't successfully progress through Stage 2 (Portfolio Submission)?

The College will provide support and feedback to ensure you have all the necessary information to resubmit in areas where you have "Not Met" the requirements. You will then be able to re-submit within a reasonable timeframe.

15. Who can I ask if I have any queries regarding Titling?

The Titling Officer at the APA: Phone: (03) 9092 0814; Email: ng.title@australian.physio

Other relevant links

- Physiotherapy Career pathway
- Physiotherapy Competence Framework v7.1
- <u>APA Standards Recency of Practice & Continuous Practice Experience</u>
- <u>Australian Health Practitioner Regulation Agency</u>





Appendix 1: Evidence Portfolio Milestone 3 - Learning Outcomes

(Aligned to Competence Framework and Mapped to Assessment)

This reference document is intended to be used in conjunction with the Milestone 3 Requirements document (Appendix 2)

	Evidence in Portfolio			Exam
Learning Outcomes	Case Studies	Vignettes	Course	
PRACTITIONER		·		
Practise physiotherapy within their defined sco	pe of pract	ice and expe	ertise	
Apply a comprehensive knowledge of biological, psychological and social sciences relevant to physiotherapy practice.	\checkmark			~
Demonstrate a client-centred assessment				
Establishes health management goals in collaboration with the patient/client.				\checkmark
Demonstrate an individualised, culturally appropriate and effective patient/client interview for common conditions/presentations.	~			\checkmark
Identify and administer appropriate screening tools / outcome measures that will form the basis for examination, management and reassessment.	~			✓
Demonstrate the use of a targeted physical examination of a patient/client presenting with pain, injury and/or illness, as directed by the client interview.	~			\checkmark
Selects and applies assessment skills relevant to the presenting case for the purposes of diagnosis, treatment planning and outcome assessment based on essential test characteristics.	~			~
Modify assessments as appropriate, and according to patient/client factors, in order to gain targeted information on which to proceed.	\checkmark			\checkmark
Select and order relevant radiological imaging, demonstrating knowledge of radiation safety and clinical use of various imaging modalities.	~			~

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Interpret imaging relevant to the area of practice accurately and consistently and seek expert opinion when uncertain, or in cases where results may be inconclusive.		✓
Analyse and interpret results from screening tools, tests and other investigations.		\checkmark
Integrate information derived from the assessment of the patient/client and apply clinical reasoning to develop a preliminary hypothesis and differential diagnosis of a client's presenting issue.	✓	✓
Refer a client for further investigations or additional specialist assessment.	✓	\checkmark
Seek or refer on for a medical opinion when		
serious underlying pathology is suspected	\checkmark	\checkmark
 signs of worsening systemic features are present and warrant escalation. 		
Plan and implement a client-centred manageme	nt plan	
Develop a collaborative, targeted and comprehensive management plan that is evidence-based and specific to the client's needs and achievement of goals.	\checkmark	\checkmark
Modify a management plan in recognition of a patient/client's co-morbidities relevant to the practice context.	✓	\checkmark
Demonstrates execution of the selected intervention interventions in a skilful and safe manner, as appropriate.		\checkmark
Progress, modify or adapt intervention/s based on patient/client's response.		\checkmark
Predict expected changes and progress toward realistic outcomes and evaluate a patient/client's management plan and amend if necessary in response to monitoring data and/or changing circumstances.	\checkmark	
Utilise relevant strategies to support and optimise the care of clients from specific populations.	✓	
Recognise when a client requires management beyond the knowledge, skills, and/or scope or level of clinical practice of the physiotherapist and recommend referral to relevant expert.	✓	✓





COMMUNICATOR

elevant otl	ners, such a	s family or	carers
			~
	V		~
			\checkmark
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			ectives of
		\checkmark	\checkmark
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			\checkmark
	<pre>✓</pre>	Image: second	Image: state of the





Engage clients and, when appropriate, relevant others in developing and delivering plans that reflect the client's health care needs and goals (e.g. family/carers)				
Use communication skills and strategies that are respectful, non-judgmental, and culturally safe to facilitate discussions with clients and relevant others.		√		~
Assist clients and relevant others to identify, access, and make use of information and communication technologies to support their care and manage their health.		√		V
Communicate effectively with client to optimise management.				\checkmark
Document and share written and electronic info encounter to optimise decision-making, client s				
Document client interactions in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (written health record, electronic health record, or other digital technology).			~	~
Ensure letters and/or discharge plans are concise, accurate and contain all required information to accepted practice standards and are appropriate to the audience.			~	\checkmark
COLLABORATOR			-	
Work effectively with colleagues in the health c high-quality, client-centred management	are and oth	er professi	ons to prov	vide safe,
Negotiate overlapping and shared responsibilities with colleagues in health care and other professions in episodic and ongoing care.		✓		
Work with physiotherapists and other colleagues to prevent misunderstandings, manage differences, and resolve conflicts				
Demonstrate strategies to promote understanding, manage differences and resolve conflicts in a manner that supports a collaborative culture.		\checkmark		
Effectively and safely delegate or transfer management to another professional				
Determine when management should be transferred to another physiotherapist, healthcare or other professional or allied health assistant.	✓			~





Demonstrate safe transfer of management, using both verbal and written communication, during a client transition to a different professional, setting, or stage of management.		\checkmark		
LEADER				
Engage in the responsible utilisation and man	agement of	available r	resources	
Allocate and utilise health care and other resources for optimal client service delivery.	\checkmark			
Apply evidence and management processes to achieve cost-appropriate service delivery.	\checkmark			
Demonstrate leadership in professional practi	ce			
Demonstrate leadership skills to enhance quality practice.			\checkmark	
HEALTH ADVOCATE				
Respond to the individual client's health need beyond the practice setting	s by advoca	ating with t	he client wit	hin and
Work with clients to identify and address the determinants of health that affect them, and their access to necessary health services or resources.		~		
Work with clients and relevant others to increase opportunities to adopt healthy behaviours.	\checkmark			
Incorporate illness and injury prevention, health promotion, and health surveillance activities into practice.		✓		
Respond to the needs of the groups, commun health outcomes	ities or pop	ulations ar	nd achieve in	nproved
Contribute to improvement of health in the community or population the practitioner serves.		\checkmark		
SCHOLAR				
Integrate best available evidence into practice				
Recognise practice uncertainty and knowledge gaps and generate focused questions that address them.			~	
Identify and select relevant pre-appraised resources and original research.			\checkmark	





Critically evaluate the integrity, reliability, and applicability of health-related research and literature.			\checkmark	
Integrate evidence into decision-making in their practice.	~			\checkmark
PROFESSIONAL				
Demonstrate a commitment to the profession	by adhering	g to regulat	tion and stan	Idards
Fulfil and adhere to the professional and ethical codes, standards of practice, and legal and industrial requirements governing practice.	~			
Promotes cultural competence and demonstra	ates cultura	l safety	·	
Acknowledge and address individual racism, their own biases, assumptions, stereotypes and prejudices and provide care that is holistic, free of bias and racism.	~		~	
Recognise the importance of self-determined decision-making, partnership and collaboration in healthcare which is driven by the individual, family and community.			~	
Foster a safe working environment through leadership to support the rights and dignity of Aboriginal and Torres Strait Islander people and colleagues.			~	





Appendix 2: Evidence Portfolio Milestone 3 - List of Requirements

Check box indicates requirement must be completed in Portfolio.

PRACTITIONER/INTEGRATION OF ROLES *mandatory requirem	ent		
3 Case Studies *			
 Select patient presentations relevant to discipline Specify 1-2 cases on specific presentations and then the remainder can be any patient presentations relevant to area of practice 			
For the case studies:			
 A minimum of three (3) cases are to be submitted A case is suitable for a case study if it meets requirements by subspecialty (determined above) and if the majority of items/fields on the case study template can be completed Additional cases may be submitted so that, when combined, the cases comprehensively cover all the items/fields on the template Both the individual cases and the combination of cases will be considered when determining if the participant has demonstrated competence for the case study component. Assessment also incorporates the integration of all roles 			
Clinical Examination (once candidate meets the Portfolio requirements, they proceed 3-clinical examination)	ed to stage		
 Focuses on demonstrating competence for practitioner role Submission of videos of a patient for the initial assessment and follow up assessment components Submission of written summary about the case (check if this should be completed on the case study template, a reduced version of that or a less structured reflection on assessment / care provided). Examination assessment also incorporates the following roles Communicator Professional Collaborator 			
COMMUNICATOR			
Attendance at appropriate Communication Course			
Provide examples of referral letters / letters to referring practitioner			
Provide examples of patient/client records			





Submission of reflections:	
 Recognising when values, culture, biases or perspectives have an impact on the management of a patient and modifying the approach to ensure quality patient/client centred care Using communication skills and strategies to facilitate culturally safe discussions with patients/clients and their families and/or carers Assisting patients/clients to use information and communication technologies to support their health 	
Vignettes (Reflection) template may be utilised if appropriate and or can be linked to a case study	
COLLABORATOR	
Submission of evidence and reflections:	
 Negotiating overlapping and shared responsibilities with other health professionals in patient care Strategies to promote understanding, managing differences and/or resolving conflict Safe transfer of care to another health professional, setting or stage of care. Vignettes (Reflection) template may be utilised if appropriate and or can be linked to a case study 	
LEADER	
Attendance at a Leadership Course/workshops relevant to practice	
Reflection on learning during course and application to practice	
HEALTH ADVOCATE	
Submission of evidence and reflections:	
 Working with patients/clients to help identify and address determinants of health that affect them Incorporating illness and injury prevention, health promotion and/or health surveillance activities into practice Contribution to improvement of health in the community. Vignettes (Reflection) template may be utilised if appropriate and or can be linked to 	
a case study	





SCHOLAR	
Submission of evidence to include:	
Scholar Course – Pedro*	
Provide evidence of Education to Colleagues and Others Evidence of Montoring and Coaching	
 Evidence of Mentoring and Coaching Evidence of Professional Development 	
Evidence based practice in the treatment and management plans	
Reflection on learning during course and application to practice	
PROFESSIONAL	
Cultural Safety Course – APA*	
Cultural reflection evidenced in 1 Case Study*	
 Cultural Reflection* Demonstrate a commitment to patient/client safety 	
 Demonstrate a commitment to patient/client safety Demonstrate a commitment to patients/clients by applying best practice and high ethical standards 	
 Demonstrate commitment to the profession by adhering to relevant legislation, regulations and standards 	
Reflection on learning during course and application to practice	

Available Templates: (provided in stage two)

- Case Study*
- Portfolio submission
- General Reflection
- Vignette (Reflection)





Appendix 3: Evidence Portfolio Milestone 3 - Examples of evidence

The portfolio is a collection of your work, which demonstrates your skills, knowledge and expertise that you have developed over a period of 3 years.

Please find below a list of examples, which you may use as evidence to collate your portfolio. *Note this is not an exhaustive nor prioritised list.*

Please refer to the "Milestone 3, Requirements and Learning Outcomes" for details of what is required and expected at this level. Noting that one item of evidence can be submitted across a number of roles.

Competence Framework Role	Acceptable evidence
Physiotherapy Practitioner	 3 x Case studies which includes a reflection (mandatory requirement - to be submitted on templates provided) De-identified case notes, detailing management plans, referral letters, referral to other Specialists etc Logbook: cases (3 years) supervised practice where applicable Membership of relevant professional or industry bodies
Communicator	 Communication vignettes (3), focus on Cultural, Values and technology De-identified case notes, detailing management of complex cases De identified referral letters (3) Media releases, links to media, social media posts, blogs Presentations, teaching examples, Learning outcomes/evaluation and feedback from students Attendance appropriate communication course, patient centred interviewing
Collaborator	 Vignettes (3), 500-800 words, transfer of care, negotiate sharing of care responsibilities, managing differences and resolving conflict De-identified case notes, detailing management of complex cases Membership of relevant professional or industry bodies Evidence of service on relevant Boards and committees Media releases, links to media, social media posts
Leader	 Membership of relevant professional or industry bodies Evidence of service on relevant Boards and committees Evidence of mentoring, supporting a student or junior clinician APA Course: "The art of communication in leadership to create an inspiring culture" with reflection, or any other appropriate leadership course Media releases, links to media, social media posts





Health Advocate	 Vignettes (3) clients adopting healthy behaviours, health prevention, Community prevention De-identified case notes, detailing management of complex cases Evidence of service on relevant Boards and committees Media releases, links to media, social media posts, blogs, Vlogs
Scholar	 Audits, systematic review undertaken Education to Colleagues, junior staff Mentoring and support to Colleagues/junior staff PEDro Course Evidence can be incorporated into Case studies in Practitioner Role
Professional	 APC's Cultural Safety Training for Physiotherapists (via cpd4physios) including a reflection on how this new learning may impact/has impacted your practice De-identified case notes, detailing management of complex cases Membership of relevant professional or industry bodies Evidence of service on relevant Boards and committees

Examples of additional accepted evidence

Further to the above examples of accepted evidence, the following may also be submitted however the candidate must demonstrate how the evidence meets at least one of the physiotherapy competence framework roles, in the area of practice for which the candidate has applied for Titling:

- Relevant Physiotherapy Qualification must include:
 - Transcript with intended learning outcomes or course description
 - Details of units/subjects cited as evidence
 - Intended learning and assessments outcomes
 - A short reflection on how attaining the qualification has impacted/changed your practice
- Relevant Physiotherapy non-award/short-course certificates/micro credentials must include:
 - Certificate/Micro credential transcript with intended learning outcomes or course description
 - Details of units/subjects cited as evidence
 - Intended learning and assessments outcomes
 - A short reflection on how attaining this certificate/micro credential has impacted/changed your practice
- Honorary/adjunct appointments including a short reflection on how this/these appointment(s) has/have impacted/changed your practice or its contribution to the Physiotherapy profession
- First author or contributor to, peer reviewed publications in a relevant area of clinical practice.
- Journal article peer reviewer must include title of paper, journal which the journal article is published, year of publication and evidence that the review was undertaken by the candidate.





May include scored submissions to PEDro. Information can be submitted as a logbook if multiple papers have been reviewed

- Oral or Poster presentation delivered at a relevant conference, in the area of practice for which the candidate has applied for Titling – must submit certificate of attendance and copy of conference program abstract
- Involvement in research activities, such as member of a research team, supporting/facilitating a
 research clinician to gather data (identify, screen, obtain consent, assess clients) and/or
 supported an honours student in the workplace with their project. Information can be submitted
 as a logbook if multiple activities undertaken. Must include a brief description and outcome of
 each activity and a short reflection on how the work has impacted/changed/contributed to your
 practice
- Mentoring activities (within the last 3 years) must provide a log stating the mentees name and contact details, date of meetings, method of meeting (face to face/phone/videoconference), brief description of discussion
- Relevant project/consultancy reports, business case/service development, audits and/or quality improvement projects, policies/procedures/guideline development, undertaken in the area of practice for which the candidate has applied for Titling. Must include:
 - An executive summary or overview of the report/project/business case/audit/policy/procedures/guidelines,
 - institution/organisation, year undertaken percentage to which the candidate has contributed to the report/project
 - a short reflection on how this work has impacted/changed your practice or the practice of other physiotherapists

Evidence of workplace responsibilities/tasks undertaken for which the candidate has applied for Titling. Must include:

- Position Description(s) for current and past roles
- Performance appraisals, 360° reviews, evaluations, commendations
- Promotions, 'acting-up' periods, amended delegations
- A short reflection on how attaining this additional responsibility/tasks has impacted/changed your practice
- Physiotherapy awards and prizes received must include a short reflection on how these awards/prizes have impacted/changed your practice and/or the importance of this recognition for the candidate and the physiotherapy profession
- Development of advocacy/client education/health literacy/health promotion material, in the area for which the candidate has applied for Titling. Must include:
 - a copy of the material/publication,
 - institution/organisation, year undertaken and percentage to which the candidate has contributed,
 - a short reflection on how these material/publications have impacted/changed your practice or the practice of other physiotherapists





- Clinical supervision, teaching responsibilities or research supervisor in physiotherapy, including any peer and/or student feedback and evaluations. Must include:
 - Role description & responsibilities, institution/organisation, year undertaken. Information can be provided as a logbook
 - Performance appraisals, feedback evaluations, commendations
 - A short reflection on how these roles have impacted/changed your clinical practice

Appendix 4: Evidence Portfolio Milestone 3 - Physiotherapy Career Attributes

What are they?

Attributes in clinical practice encompass epistemological values, critical thinking, moral and ethical practice, powerful knowledge, and an interdisciplinary perspective. They go beyond employability and demonstrate your depth of understanding, higher-level skills, and commitment to ethical and effective clinical practice as a physiotherapist at different stages of your career.

The intended purpose is to apply the theory of knowledge together with clinical reasoning skills, the moral and ethical values required of the clinician and allow you to demonstrate these in your clinical practice. They do not represent curricular learnt or competencies gained, but how you reflect on your clinical practice and career against a set of attributes of clinical practice.

Remember there's no one-size-fits-all approach to this. It's essential to consider your unique interpretation of the attributes, your preferences, and aspirations when evaluating your career and clinical practice against these attributes.

Physiotherapists are:

in Health:

Leader

Clinically

Advanced:

An Educator:

Constructive

team:

nember of an

interdisciplinary

A physiotherapist that advocates for high-quality patient and clientcentred outcomes for all members of their communities, and that reflects the evidence and current best practice.

A physiotherapist who through expert clinical reasoning can assess and design treatments or management plans for complex clinical presentations to achieve quality outcomes that are patient centred and compliant with medico- legal requirements.

Researchinformed: A physiotherapist who informs clinical practice through involvement in, or integration and critical use of, research evidence, clinical expertise, patient values, and patient circumstance to provide best care and health outcomes for clients and families.

> A physiotherapist with a high-level of communication skills to effectively inform, teach, and consult with clients and their support network, colleagues, health professionals, and other stakeholders to optimize the health care of others.



A physiotherapist who supports patient and client outcomes across many health care settings and can identify when input from other professionals is required to optimise care.









A physiotherapist who sees the patient-as-person, considering each person as a whole, adopting person-centred and family focused (where relevant) management that prioritises cultural safety, respect and inclusiveness.

A physiotherapist with the ability to explore the population health questions, make critical evaluations of clinical decisions, be able to develop ethical and long-term solutions to current and future health and wellbeing of the community.

