

MODULE DESCRIPTOR

Module Title

Physiotherapy Practice 1

Reference	HSM152	Version	4
Created	May 2021	SCQF Level	SCQF 11
Approved	May 2015	SCQF Points	30
Amended	September 2021	ECTS Points	15

Aims of Module

To further develop a justified holistic, interdisciplinary approach to the assessment, management and rehabilitation of the individual.

Learning Outcomes for Module

On completion of this module, students are expected to be able to:

- 1 Critically discuss the impact of common pathologies or dysfunctions on human movement and function in relation to individuals.
- 2 Critically evaluate the role of a whole person approach in physiotherapy assessment, management and rehabilitation.
- 3 Safely, effectively and professionally apply selected physiotherapy techniques.
- 4 Critically justify core physiotherapy treatment, management and rehabilitation approaches.
- 5 Critically analyse a range of research methodologies and methods, and integrate these in relation to physiotherapy practice.

Indicative Module Content

PROFESSIONAL - Care and compassion. Clinical leadership and autonomous practice. Continuing professional development, including personal and academic development. The delegation of physiotherapy related services to appropriate members of staff. Safe moving and handling procedures related to different conditions and situations. Equality and diversity. Transferable skills for different sectors. RESEARCH - Applied research methods and methodologies, including qualitative and quantitative data collection, inferential statistics and thematic analysis, sustainability. Evidence hierarchy. Primary and secondary research/systematic review. Quantitative and qualitative methodologies. Applied proposal development. Research questions/hypotheses. Outcome measurement. Critical review of scientific literature. Presentation skills. NEURO Ax/THEORY/PRACTICE - Neurological outcome measures. Cognition, insight and communication deficits. The relationship between neuro-anatomy and neuro-physiology in the integrated nervous system. Analysis of neurological signs and symptoms. Neuroplasticity. Assessment of: upper limb, lower limb, trunk, including - Balance; Postural control; Muscle tone; Pathological gait analysis; Ax of tonal changes, ataxia and co-ordination problems; Aetiology, pathology, signs, symptoms, prognosis and physiotherapy problems of neurovascular and neurodegenerative disorders; Analysis of pathological gait; Biomechanics; Assessment for adaptive devices. Effects of neurological and musculoskeletal conditions on the cardiorespiratory system and the management of these problems. MANAGEMENT/TREATMENT (MSK/NEURO) - Management of long-term conditions across populations. Prevention and management of complications; a whole person approach. Psycho-social issues. Health improvement in selected client groups. Equality and diversity. Psychology and sociology. Enablement. Self-management. Health promotion. Theory of electro-physical modalities related to management of conditions to include pulsed short-wave diathermy, IF, TENS and ultrasound. Practical application of ultrasound and TENS. Principles and practice of low and medium frequency currents for relief of pain and re-education of function (TENS, NMES and biofeedback). Principles, physiological and therapeutic effects and application of manual therapy for peripheral and spinal joint problems including Maitland mobilisations, Mulligan and the McKenzie concept. The indications and contraindications, precautions, progression and modification of these techniques. Disc herniation. Neurodynamics; testing and treatment. Proprioceptive neuromuscular facilitation. Strapping/Taping; Muscle balance. Transferrable skills. Historical perspective of neurological rehabilitation and current motor control theory. Functional assessment and rehabilitation of neurological population - muscle performance (strength, tone), motor impairments (spasticity, weakness, loss of dexterity). Treatment of: upper limb, lower limb, trunk, including - balance; postural control; muscle tone; Pathological gait re-education; Management of tonal changes, ataxia and co-ordination problems; Exercise prescription and cardiorespiratory fitness for long-term conditions. Splinting and functional bracing where appropriate. Adaptive seating; Wheelchair prescription and provision to patients. Provision of adaptive devices. Orthotics and mobility aids for different conditions.

Module Delivery

Case-based learning, tutorials, practicals, workshops and student led seminars.

Indicative Student Workload

	Full Time	Part Time
Contact Hours	100	N/A
Non-Contact Hours	200	N/A
Placement/Work-Based Learning Experience [Notional] Hours	N/A	N/A
TOTAL	300	N/A
<i>Actual Placement hours for professional, statutory or regulatory body</i>		

ASSESSMENT PLAN

If a major/minor model is used and box is ticked, % weightings below are indicative only.

Component 1

Type: Practical Exam Weighting: 80% Outcomes Assessed: 1, 2, 3, 4
 Description: Justified OSPE - graded

Component 2

Type: Practical Exam Weighting: 20% Outcomes Assessed: 5
 Description: Group presentation - Pass/Fail (unsuccessful)

Component 3

Type: Coursework Weighting: 0% Outcomes Assessed: 3
 Description: This relates to a minimum of 80% mandatory attendance of all scheduled module delivery. Attendance will be assessed on a pass/fail basis.

MODULE PERFORMANCE DESCRIPTOR**Explanatory Text**

Component 1 (OSPE) is weighted at 80% of the grade and is assessed on an A-F basis. Component 2 (Group Presentation) is weighted at 20% and is assessed on a pass/fail (unsuccessful) basis. To achieve a pass, a grade D or above is required + a pass in components 2 + 3.

Module Grade	Minimum Requirements to achieve Module Grade:
A	A + Pass+ Pass
B	B + Pass + Pass
C	C + Pass + Pass
D	D + Pass + Pass
E	E/Fail + Pass , A/Fail + Pass , B/Fail + Pass , C/Fail + Pass , D/Fail + Pass
F	F/Fail +/- Fail (unsuccessful)
NS	Non-submission of work by published deadline or non-attendance for examination

Module Requirements

Prerequisites for Module	Completion of: HSM150 Foundations of Physiotherapy Practice HSM151 Exercise and Health or equivalent.
Corequisites for module	None.
Precluded Modules	None.

ADDITIONAL NOTES

This module has an 80% attendance requirement. This is essential in order to develop the professionalism required of a Physiotherapist and to ensure that students are competent for clinical placement.

INDICATIVE BIBLIOGRAPHY

- 1 LENNON, A., RAMDHARRY, G and VERHEYDEN, G., eds., 2018. Physical management for neurological conditions. London: Elsevier
- 2 CARR, J.H. and SHEPHERD, RB., 2010. Neurological rehabilitation: optimizing motor performance. 2nd Ed. Edinburgh: Churchill Livingstone
- 3 RAINE, S., MEADOWS, L. and LYNCH-ELLERINGTON, M., eds., 2009. Bobath concept: theory and clinical practice in neurological rehabilitation. Chichester: Wiley Blackwell.
- 4 SHUMWAY-COOK, A. and WOOLACOTT, M., 2017. Motor Control: translating research into clinical practice. Philadelphia: Wolters Kluwer.
- 5 Bowling, A. (2014) Research methods in health investigating health and health services . 4th. Ed. Maidenhead, Berkshire, England, Open University Press
- 6 HENGVELD E. & BANKS K., 2013. Maitland's peripheral manipulation, 5th Ed. Churchill Livingstone
- 7 HENGVELD E., BANKS K., NEWTON M. & MAITLAND G. D., 2014. Maitland's vertebral manipulation, 8th Ed. Churchill Livingstone