



Faculty of Health and Social Sciences

BSc (Hons) Occupational Therapy

STUDENT HANDBOOK

Level 4 Guide

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Faculty of Health and Social Sciences  
Bournemouth University  
Poole  
Dorset  
BH12 5BB

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# 1. Welcome to the BSc (Hons) Occupational Therapy handbook!

Welcome to this BSc (Hons) Occupational Therapy handbook. This handbook is designed to provide an overview of the programme and signpost you to other resources and facilities that are available to you during your studies here at BU. The handbook:

- Outlines the context in which the programme is delivered;
- Describes the underpinning occupational therapy and educational philosophy;
- Describes the programme structure and content;
- Describes the educational experiences provided within the programme;
- Signposts sources of support throughout your time at BU;
- Explains the assessment processes and procedures;
- Describes the programme management processes.

It should be read in conjunction with the generic BU handbook and the information for each unit (available on Brightspace, which is the university's virtual learning environment). It also contains some information about the regulations for the programme and programme outcomes.

This programme is designed to enable you to meet the Health and Care Professions Council (HCPC) Standards of Proficiency for Occupational Therapists and thus upon successfully completing all elements of the programme you will be eligible to apply for registration with HCPC as an Occupational Therapist. The programme also is guided by the Royal College of Occupational Therapists (RCOT) Education Standards. It is expected that you become familiar with the codes of ethics and conduct of both HCPC and RCOT and abide by them throughout your training.

We work hard to ensure that all information is clear and accurate. All information is subject to change. Where a change occurs, this will be clearly explained and notification will be placed on Brightspace.

## **2. BSc (Hons) Occupational Therapy Programme Context**

### **2.1 Programme Aims**

The overall aim of the programme is to produce graduates with the necessary knowledge, skills and attributes to work safely, ethically and effectively as Occupational Therapists in a wide variety of settings, and through continuing professional development (CPD) to become leaders within the profession. Through successful completion of all assessments, students demonstrate that they meet the Standards of Proficiency for Occupational Therapists set out by the HCPC. The programme reflects the philosophy, core values, skills and knowledge base of occupational therapy, as articulated by the Royal College of Occupational Therapists and the World Federation of Occupational Therapists.

Bournemouth University's Occupational Therapy graduates will be competent and confident professionals, who are reflective and critical in their thinking and approach to practice. They embrace diversity, respect clients and client choices and engage in open, compassionate communication. Graduates value both working collaboratively with colleagues, clients and their significant others and also working independently. Their strong professional identity and focus on the centrality of occupation enables them to adapt to a variety of health, social care and third sector settings, as well as seize new opportunities in emerging areas of practice.

More specifically the programme aims to develop Occupational Therapists who are:

- Excellent communicators who work well in teams;
- Knowledgeable: understanding is underpinned with a strong basis of scientific and theoretical knowledge, resulting in flexible problem-solving skills;
- Focused on meeting the occupational performance and engagement needs of service users, with a strong grounding in occupational science, and clear, nuanced understanding of the influence of occupation on health and well-being;
- Confident in their professional identity and able to comprehensively articulate the core values and skills of Occupational Therapy to clients, stakeholders and the wider public;

- Skilled, reliable, highly motivated and practical therapists who are able to apply practice skills in a range of organisational settings;
- Consumers and potential producers of research;
- Reflective practitioners with a robust foundation in clinical reasoning skills who are committed to lifelong learning;
- Able to respond to development opportunities arising through changing service, community, business and social enterprise needs;
- Equipped with the core and transferable skills to develop Occupational Therapy within new areas of practice and enterprise;
- Able to manage their own learning, facilitate that of others and maximise opportunities for continuing professional development.

## **2.2 Professional context**

Registration with the Health and Care Professions Council is required in order to practise as an Occupational Therapist in the UK. This programme enables students to demonstrate each of the required standards of proficiency and thus be eligible to apply for registration with HCPC. Students' awareness of and adherence to HCPC and RCOT standards of ethics and professional behaviour are an integral part of the programme delivery. The provision of the education experience and assessment of performance is designed to clearly meet the HCPC Standards of Education and Training.

Links to key Information about professional suitability including the codes of ethics and professional standards is available on Brightspace. All students are required to read these documents and maintain professional behaviour. There are also policies and procedures relating to discipline and academic offences outlined on Brightspace and in the practice assessment document.

The programme also meets the Royal College of Occupational Therapists' Pre-registration Education Standards. Students are encouraged to become members of the British Association of Occupational Therapists and to become aware of the work of the professional body. Regular contact is maintained with RCOT and the Council of Occupational Therapy Education Directors in order to ensure that the programme reflects contemporary Occupational Therapy policy within the UK and internationally.

A key component of the programme is that students develop their skill in life-long learning and continuing professional development. This focus not only enables graduates to meet the HCPC standards for continuing professional development but also aims to support them to become future leaders in the profession.

Links with local Occupational Therapy practitioners and service managers is considered a priority, not only to ensure high-quality placement provision, but also to reflect contemporary practice within the programme. These links also enable students to learn from a wider range of Occupational Therapists with relevant specialist expertise and knowledge.

As the BSc (Hons) is a professional programme, students are provided with and required to abide by the professional conduct and ethics standards of both HCPC and RCOT. Mechanisms are in place to identify issues and support students to develop professional behaviour, both through their academic advisor and on practice placement. There are also the university fitness to practice & study policies managed by student support services and the academic offences system, managed by the university academic quality team.

### **2.2.1 Occupational Therapy in Dorset, Somerset, Salisbury (Wiltshire) and Southampton (Hampshire).**

There are several NHS Trusts and Local Authorities with whom the Occupational Therapy team at BU liaise for practice placements, research, employment opportunities and practice development.

These Trusts and Local Authorities cover a broad range of services, including:

- Learning disabilities – community teams, intensive home treatment
- Mental health – in-patient, community, adults, older persons, child and adolescent services
- Paediatrics - school, home and clinic based (NHS)
- Acute hospital services such as medicine and surgical wards, orthopaedics, A&E, medicine for the elderly



- Community hospitals
- Community rehabilitation teams
- Independent Living Teams (combined health and social care)
- Specialist teams – Acquired Brain Injury, Hand Therapy, Burns and Plastics, Duke of Cornwall Spinal Injuries Centre, Wessex Rehabilitation, Vocational Rehabilitation, Eating Disorders, Adult Asperger’s Service, Behavioural Outreach Service, Wheelchair Services, MS Service, Pain Management Team, Housing Teams, Forensic Team
- Re-ablement Teams
- Adult Social Care
- Disabled Children’s Teams (Social care)

In addition to these public sector providers, Occupational Therapy services are also provided from third sector services including charities and private sector providers.

The strong links between the Occupational Therapy team and the practice settings ensure that changes and developments in services are known and reflected in Occupational Therapy education at BU.

### **2.2.2 The University Environment**

This Occupational Therapy programme sits within BU’s Faculty of Health and Social Sciences (HSS), which is the largest Faculty in the University. BU has a strong professional orientation with a focus on academic excellence and graduate employability. This ethos is strengthened further by the University’s strategic plan, the core values of which are ‘Inspiring education, advancing knowledge and enriching society’ and the fusion of ‘research, education and professional practice’.

Within Occupational Therapy education, BU’s values are reflected through the range of teaching, learning and assessment methods, our developing research profile and the ever strengthening links with practice partners throughout placement areas.

The programme is also influenced by the Faculty of Health and Social Science’s values, particularly a significant strength in humanising, a focus on making people’s

lives better and the use of research to underpin practice. All staff are engaged in research communities, drawing on these to influence teaching and learning.

## 3. Programme Philosophy

### 3.1 Occupational Therapy philosophy

The programme team draw on the Royal College of Occupational Therapists' and World Federation of Occupational Therapists' definitions of Occupational Therapy:

“Occupational Therapy empowers people to reach their full potential, achieve their goals, and enjoy life to the full... “Occupation” refers to practical and purposeful activities that allow us to live independently and give us a sense of identity. This could be anything from essential day-to-day tasks, such as dressing or cooking, to the things that make us who we are—our job, interests, hobbies and relationships. Occupational Therapy provides practical support to enable people to overcome any barriers that prevent them from doing the activities that matter to them, and helps to increase people's independence and satisfaction in all aspects of life.” (COT 2011).

“Occupational Therapy is a client-centred health profession concerned with promoting health and wellbeing through occupation. The primary goal of Occupational Therapy is to enable people to participate in the activities of everyday life. Occupational Therapists achieve this outcome by working with people and communities to enhance their ability to engage in the occupations they want to, need to, or are expected to do, or by modifying the occupation or the environment to better support their occupational engagement.” (WFOT 2012).

The College of Occupational Therapists (COT), in its 2004 curriculum framework document explains that, ‘Occupational Therapists work with people whose ability to undertake their desired activities is impaired. For this reason the study of, and belief in, occupation as an agent for the maintenance and restoration of human health and well-being is at the heart of pre-registration Occupational Therapy education’.

Increasingly it is acknowledged that Occupational Therapists may work with communities or organisations rather than individuals (Townsend and Polatajko 2007; 2007; WFOT 2012). Whether working with individuals or groups, the expertise of the

client about their life are emphasised (Townsend and Polatajko 2007; Sumsion 2006; WFOT 2012).

Occupational Therapy is underpinned by the recognition that people are “occupational beings,” valuing occupation: the tasks, and activities that people do in their everyday lives (Hagedorn 1996). Occupations include things people need to, want to and are expected to do within their day-to-day life (Townsend et al 1997; Townsend and Polatajko 2007; WFOT 2012). Occupational Therapy focuses on enabling occupational performance and engagement, which is characterised by the interaction between the person, the environment and the occupation (AOTA 1995; Townsend et al 1997; Townsend and Polatajko 2007). In Occupational Therapy, occupations refer to all everyday activities that people do as individuals, in families and with communities to occupy time and bring meaning and purpose to life (WFOT 2012). Engagement in a variety of occupations is thought to be health-promoting and health-sustaining (Whiteford, 1999); complementing the view of health held by the World Health Organisation (WHO 2001).

The way in which individuals perform tasks and occupations, within roles related to their daily lives, requires learning, adaptation and response to external stimuli (Kielhofner, 2002).

Participation in a range of activities can indicate health status (WHO 2002). Health is defined in the constitution of the World Health Organisation as a “state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (WHO 1946). A healthy person is seen as one who can perform daily occupations effectively and respond to change by adapting activities to meet the changes. Health can be promoted by occupational balance, that is, the performance of a variety of occupations or undermined by occupational imbalance (Whiteford, 2000). Health can also be identified as the way in which the individual adapts to a changing environment as opposed to being free from disease.

## 3.2 Educational Philosophy

The programme team's educational values centre on valuing you, the students as our future colleagues. A collegiate atmosphere, respect and approachability are paramount. The team work towards the shared goal of the best quality Occupational Therapy education possible. Therefore, an open and collaborative environment where students' views are respected, your input is sought and feedback seriously considered. We consistently work to produce very high quality education and student experience.

You are viewed as adult learners and it is expected that you will take responsibility for your own learning. If you require initial assistance to develop the attitudes and skills associated with adult learning, you should seek advice from your academic advisor and other services, such as the library and learning service to gain the support you need. As part of a student-centred approach to learning, students are allowed to make mistakes within the "safe" University environment and learn from the experiential process. You will have opportunities to develop your own learning style, as well as the attitudes and skills required for life-long learning. The programme team adapt teaching and learning methods to meet the identified needs of student groups.

Throughout the programme, you will be encouraged to develop critical thinking and reasoning skills to enable you to deconstruct and reconstruct arguments, justify actions; use the best evidence to guide practice and make autonomous, informed professional judgements. This can sometimes be challenging! A coherent, structured backbone of theory and knowledge is provided and immediately applied practically through skills sessions and with case scenarios. The application of knowledge is more highly valued than the knowledge itself; therefore it is the application of knowledge that is the focus of assessment. This means that, for example, you will learn about an Occupational Therapy theory and be expected in an assignment not only to describe the theory (the knowledge) but also give examples of how it could be used in a given case-study example (application of knowledge).

Collaborative group work in scheduled learning opportunities is expected as well as self-managed learning as an important part of the educational journey. Peer support and education is encouraged to contribute to students developing their own thinking and sense of belonging to a community of students and future occupational therapists. We highly recommend that you form study groups and work with peers to resolve the issues presented in seminars and on-line, that you discuss theory and application of knowledge with peers and develop your sense of identity as part of an Occupational Therapy community of learners.

Practice placement education is highly valued. Collaboration and close communication between the University and practice partners is a priority, which not only enhances the quality of practice placement education but also enables the programme to remain contemporaneous and relevant to practice. You are expected to uphold all professional values on placement and be pro-active in working with your practice placement educator to ensure that you get the most out of your placement experience.

## **4. Structure of the BSc Occupational Therapy programme**

### **4.1 Overview of the programme structure**

The focus of the first year of the BSc (Hons) Occupational Therapy programme is to enable you to develop a good understanding of occupational performance and engagement in the individual. You will be introduced to Occupational Therapy and occupational science theory, the social and medical sciences applied to occupation and the occupational therapy process with individuals with a range of conditions and circumstances. You will undertake a unit in skills for occupational therapy practice, which includes communication, and will begin your continuing professional development (CPD) journey. There is one orientation practice placement and one assessed 6-week placement with local service providers.

In the second year, you will move on to deeper consideration of Occupational Therapy theory and understanding the importance of underpinning practice with appropriate evidence. The focus will move from the individual to Occupational Therapy in the community, and new and emerging areas of practice will be explored through an inter-professional promoting health and well-being or community engagement unit. HSS's strength in humanising healthcare informs the entire year. There is one 10-week assessed placement.

The final year begins with a research unit, enabling you to enhance your skills as consumers and interpreters of research and evidence to underpin practice. You will select the specific areas of interest to study and will choose the focus for your assignments in this third year. At the beginning of semester two, there is a 12 week placement which will enable you to consolidate your practice skills. There may be the opportunity to complete this placement in a role emerging area of practice. Following the placement,, there is an inter-professional service improvement project, and the culmination of the programme is a unit on innovation in Occupational Therapy.

The units to be undertaken are detailed in the table below: Please also refer to the programme specification, unit directory and programme diagram.

<i>Table 1: Units in the BSc (Hons) occupational therapy programme</i>	
<i>Level</i>	<i>Units of Study (Credits)</i>
4 – First year	Becoming an OT (20) Skills for Occupational Therapy Practice (20) Occupational Therapy in Action 1 (20) Analysing Occupation (20)  Foundations for Professional Practice and Research (20) Placement (20)
5 – Second Year	Exploring Evidence to Guide practice (20) IPE Occupational Therapy in Action 2 (20) Reasoning in Occupational Therapy Practice (20) Promoting Health and Well-Being (20) IPE <b>or</b> Community Engagement in Occupational Therapy (20)  Placement (40)
6 – Third Year	Research for Occupational Therapy Practice (40) Service Improvement Project (20) Innovation in Occupational Therapy (20)  Preparation for Occupational Therapy Practice & Placement BU3 (40)



## **4.2 Programme Outcomes**

### **4.2.1 Programme Outcomes**

#### **A Subject Knowledge and Understanding**

This programme provides opportunities for students to develop and demonstrate knowledge and understanding of:

- A1: Theories of human occupation and occupational science, the use of occupation in therapy practice and the interaction between occupation, health and well-being.
- A2: Occupational Therapy philosophy, theory, models of practice and frames of reference and how these may be used throughout the Occupational Therapy process to select and evidence an appropriate course of action.
- A3: The application of underpinning disciplines (including biological sciences, social sciences, disability theory and pathology) to Occupational Therapy, in order to understand the range of biological, psychological, sociocultural and environmental factors that can influence occupational performance and engagement.
- A4: Legal, ethical and professional standards / frameworks that influence the context and scope of occupational therapy practice and the structure of service delivery in the UK.
- A5: The importance of respecting the rights, dignity, culture and individuality of service users and carers and the importance of client/person-centred practice with people from diverse backgrounds.
- A6: Components of safe practice, including maintaining one's own fitness to practice, managing risk, acting as an autonomous, responsible professional and being able to exercise a professional duty of care.
- A7: Characteristics of good communication, including the ability to adapt communication to different situations and to work effectively in a range of group situations.
- A8: Leadership and management principles, innovation and adaptation to change.

## **B Intellectual Skills**

This programme provides opportunities for students to:

- B1: Analyse, critically appraise and apply evidence from literature and a variety of other sources to develop best practice and understand the principles of audit and evidence-based practice.
- B2: Understand methods commonly used in health and social care research, including ethical issues, the collection, interpretation and analysis of data and dissemination of findings.
- B3: Critically evaluate new concepts, theories and research in order to determine their relevance to Occupational Therapy and to creatively resolve problems, recognising the need for innovation in practice.
- B4: Distinguish Occupational Therapy's domain of concern, identifying the Occupational Therapist's responsibilities and professional limitations, interpreting ethical and legal frameworks.
- B5: Demonstrate clinical reasoning and professional judgement in evaluating and monitoring the effectiveness of specific practice.
- B6: Demonstrate critical reflection on and evaluation of clinical applications and a critique of own performance.

## **C Practical Skills**

This programme provides opportunities for students to:

- C1: Demonstrate skill in the selection, analysis, adaptation and use of a wide variety of occupations to promote individual and group occupational performance and engagement.
- C2: Assess and evaluate individual and environmental barriers to occupational performance, using a variety of appropriate formal, informal, standardised and non-standardised assessment methods and techniques.
- C3: Develop, implement and evaluate intervention plans collaboratively with service users, demonstrating application of best evidence, effective use of resources and client-centred practice.
- C4: Communicate professional judgements and findings using a variety of methods (including accurate and safe maintenance of clinical notes/records),

demonstrating the ability to adapt communication styles to meet diverse needs.

C5: Work in group contexts, including in uni- and multi-professional teams in a range of situations, maintaining professional integrity and judgement

C6: Demonstrate safe practice, including managing one's own fitness to practice, using appropriate moving and handling procedures, following relevant health, safety and security guidelines and know when a situation is beyond the scope of one's own practice.

## **D Transferable Skills**

This programme provides opportunities for students to:

D1: Practice in a non-discriminatory manner, respecting the rights, dignity, culture and individuality of clients, working in a client-centred manner with people from diverse backgrounds.

D2: Build professional relationships, underpinned by partnership and trust and respecting consent, confidentiality and dignity of service users.

D3: Demonstrate verbal and non-verbal communication skills that support effective and professional interaction with people from diverse backgrounds, ages and stages of development.

D4: Communicate effectively in formal and informal situations through a range of media, including oral presentation, reports, case presentation and use of on-line communication methods.

D5: Show skill in self-management, time management, prioritisation, resource management, personal development planning and continual professional development.

D6: Resolve problems systematically, logically and creatively, drawing on a range of knowledge and information sources.

D7: Demonstrate computer literacy and skill in using appropriate information and communication technologies.

## **4.2.2 Level I Outcomes**

### **A Subject Knowledge and Understanding**

This level provides opportunities for students to develop and demonstrate knowledge and understanding of:

- A1: Theories of human occupation and occupational science, the use of occupation in therapy practice and the interaction between occupation, health and well-being.
- A2: Occupational Therapy philosophy, theory, models of practice and frames of reference and how these may be used throughout the Occupational Therapy process.
- A3: The application of underpinning disciplines (including biological sciences, social sciences, disability theory and pathology) to occupational therapy, in order to understand factors that can influence occupational performance and engagement.
- A4: Legal, ethical and professional standards / frameworks that influence the context and scope of occupational therapy practice.
- A5: The importance of respecting the rights, dignity, culture and individuality of service users and carers and the importance of client/person-centred practice.
- A6: Components of safe practice, including maintaining one's own fitness to practice, managing risk, acting as a responsible professional.
- A7: Characteristics of good communication, including the ability to adapt communication to different situations and to work effectively in a range of group situations.

### **B Intellectual Skills**

This level provides opportunities for students to:

- B1: Appraise and apply evidence from literature and a variety of other sources to develop best practice and understand the principles of audit and evidence-based practice.
- B2: Understand the use of health and social care research to inform practice.

- B3: Integrate new concepts, theories and research in order to determine their relevance to occupational therapy and to resolve problems.
- B4: Distinguish occupational therapy's domain of concern, identifying the occupational therapist's responsibilities and professional limitations, interpreting ethical and legal frameworks.
- B5: Demonstrate clinical reasoning in evaluating the effectiveness of practice.
- B6: Demonstrate reflection on and evaluation of own performance.

## **C Practical Skills**

This level provides opportunities for students to:

- C1: Demonstrate skill in the selection, analysis, adaptation and use of a wide variety of occupations to promote individual and group occupational performance and engagement.
- C2: Assess individual and environmental barriers to occupational performance, using a variety of appropriate assessment and evaluation techniques.
- C3: Develop, implement and evaluate intervention plans collaboratively with service users.
- C4: Communicate clinical reasoning using a variety of methods.
- C5: Work in group contexts maintaining awareness of professional integrity and judgement
- C6: Demonstrate safe practice, including managing one's own fitness to practice, using appropriate moving and handling procedures, following relevant health, safety and security guidelines and seek guidance when a situation is beyond the scope of one's own practice.

## **D Transferable Skills**

This level provides opportunities for students to:

- D1: Practice in a non-discriminatory manner, respecting the rights, dignity, culture and individuality of clients, working in a client-centred manner with people from diverse backgrounds.
- D2: Build professional relationships, underpinned by partnership and trust and respecting consent, confidentiality and dignity of service users.

- D3: Demonstrate verbal and non-verbal communication skills that support effective and professional interaction.
- D4: Communicate effectively in formal and informal situations through a range of media, including oral presentation, reports, case presentation and use of on-line communication methods.
- D5: Show skill in self-management, time management, prioritisation, personal development planning and continual professional development.
- D6: Resolve problems, drawing on a range of knowledge and information sources.
- D7: Demonstrate computer literacy and skill in using appropriate information and communication technologies.

### **4.2.3 Level C Outcomes**

#### **A Subject Knowledge and Understanding**

This level provides opportunities for students to develop and demonstrate knowledge and understanding of:

- A1: Theories of human occupation and occupational science, the use of occupation in therapy practice and the interaction between occupation, health and well-being.
- A2: Occupational therapy philosophy, theory, models of practice and frames of reference and how these may be used throughout the occupational therapy process.
- A3: Underpinning disciplines (including biological sciences, social sciences, disability theory and pathology) in order to understand factors that can influence occupational performance.
- A4: Legal, ethical and professional standards / frameworks that influence occupational therapy practice.
- A5: The importance of respecting the rights, dignity, culture and individuality of service users and carers and the importance of client/person-centred practice.
- A6: Components of safe practice, including maintaining one's own fitness to practice, managing risk and demonstrating professional behaviour.

A7: Characteristics of good communication and how to adapt communication and the theory of group dynamics.

## **B Intellectual Skills**

This level provides opportunities for students to:

- B1: Consider evidence from a variety of sources to inform practice.
- B2: Apply concepts, theories and research to occupational therapy.
- B3: Distinguish the role of the occupational therapist from that of other team members and how therapy practice is guided by policy and legislation.
- B4: Reflect on own performance, highlighting strengths, weaknesses and future actions.

## **C Practical Skills**

This level provides opportunities for students to:

- C1: Select, analyse, adapt and use a variety of occupations to promote occupational performance.
- C2: Assess individual and environmental barriers to occupational performance, using selected formal, informal, standardised and non-standardised assessment methods and techniques.
- C3: Communicate assessment findings using a variety of methods.
- C4: Work in group contexts maintaining awareness of professional identity.
- C5: Demonstrate safe practice, including managing one's own fitness to practice, using appropriate moving and handling procedures, following relevant health, safety and security guidelines and seek support if a situation is beyond the scope of one's own practice.

## **D Transferable Skills**

This level provides opportunities for students to:

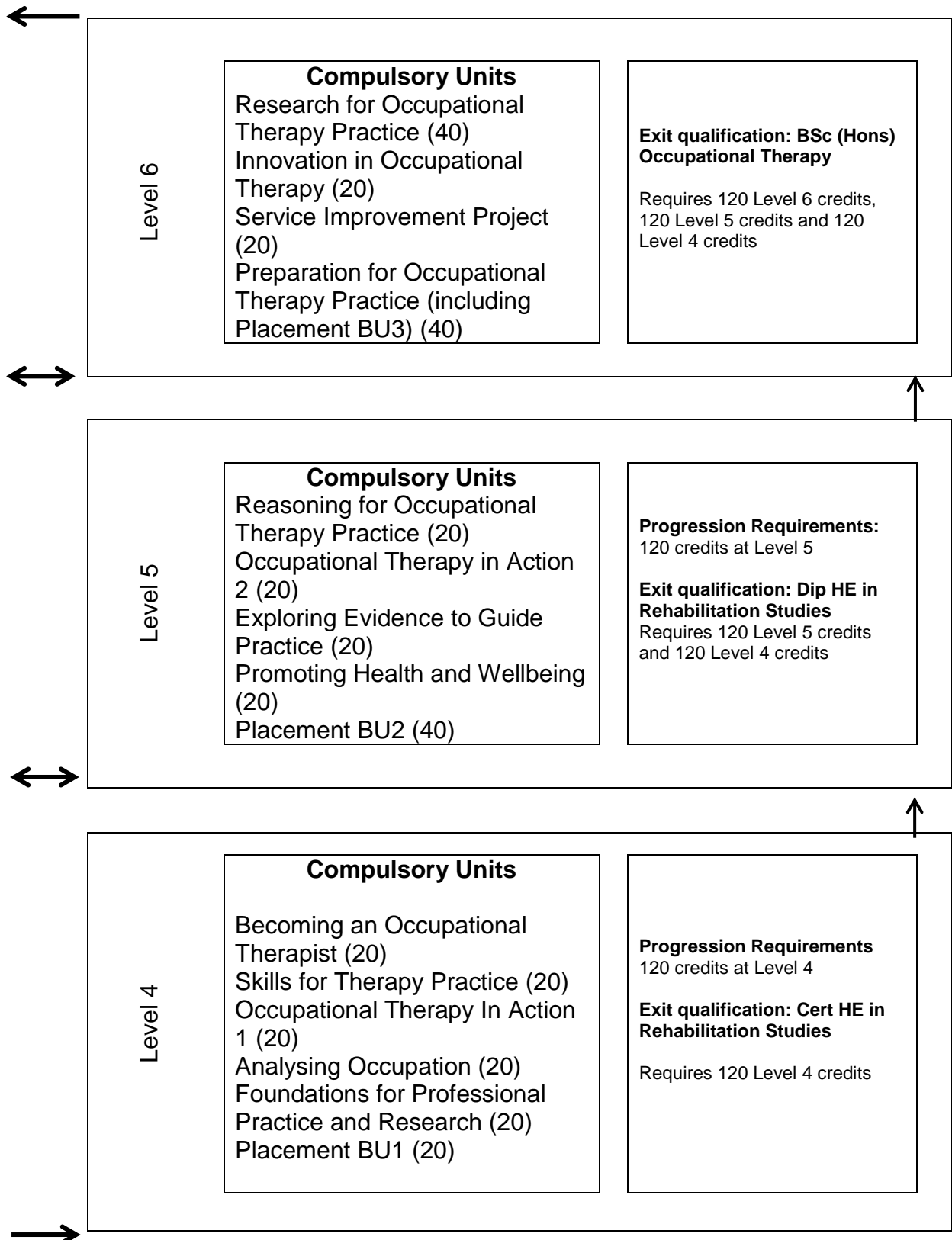
- D1: Practice in a non-discriminatory, client-centred manner.
- D2: Respect consent, confidentiality and dignity of service users.

- D3: Demonstrate verbal and non-verbal communication skills that support effective and professional interaction.
- D4: Communicate effectively in formal and informal situations.
- D5: Manage one's own time and workload and engage in continual professional development.



### 4.3 Programme Diagram

## BSc (Hons) Occupational Therapy



## **4.4. Level 4 Unit Specifications**

### **BSc (Hons) Occupational Therapy**

#### **Becoming an Occupational Therapist**

**Version Number:** 2

**Level:** 4

**Credit Value:** 20 (10 ECTS equivalent credit value)

**Effective from:** September 2019

#### **PRE-REQUISITES AND CO-REQUISITES**

None

#### **AIMS**

This unit, which forms part of the core components of the first weeks at university, will aim to establish an appreciation and understanding of the fundamental core of Occupational Therapy – that of Human Occupation. The Unit will focus on the nature, meaning, purpose and evolution of human occupations; factors influencing occupational choice and engagement, and the relationship between occupation and health. It will introduce the basic principles of Occupational Therapy and the professions' philosophy.

#### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Describe occupational science concepts and the theory of humans as occupational beings.
2. Describe the development and changes in occupation throughout the life course.
3. Describe factors contributing to and influencing individual, community and society's occupational engagement.
4. Identify and describe evidence relevant to the understanding of occupation and occupational engagement.

#### **LEARNING AND TEACHING METHODS**

The unit will be delivered through a combination of lectures, seminars, tutorials and workshops that will feature student centred activities including computer-aided materials and

workbooks. Students will also be introduced to academic journal articles and other media to begin the process of application of a range of different types of information and evidence to case-study information.

E-learning will be used through a combination of intranet and internet supported activities including tutorials, group discussion forums and individual learning activities.

## **ASSESSMENT**

### **Summative Assessment**

ILOs 1-4 will be assessed by 100% coursework.

### **Indicative Assessment Information**

The assessment will be a case-study essay in which students will apply theory to the specific chosen case study (ILOs 1, 2, 3,). Students will be asked to consider the occupational concepts underpinned by appropriate theory and referring to evidence to support thinking and reasoning (ILOs 2, 3, 4).

## **INDICATIVE CONTENT**

- Occupational Science – exploring the relationship between occupation, health and wellbeing, including the concept of occupational risks to individuals and communities, such as occupational deprivation
- Occupational development throughout the life course
- Introduction to evidence-based practice and its application to Occupational Therapy
- Origins and history of Occupational Therapy, including changing perspectives on health, well-being
- An introduction to and overview of Occupational Therapy generic models of practice such as; Person-Environment-Occupation (PEO) Model, Model of Human Occupation (MOHO), Canadian Model of Occupational Performance and Engagement (CMOP-E)
- An introduction to the structure and configuration of Occupational Therapy philosophy, theory, models of practice and frames of reference.
- Occupational narratives

## **INDICATIVE KEY LEARNING RESOURCES**

Christiansen, C.H. and Townsend, E.A., eds., 2010. *Introduction to occupation: The art and science of living* [online]. 2<sup>nd</sup> edition. Harlow: Pearson Education.

Copp, T. and Fox, J., 2015. *Ballroom dance that breaks gender roles* [video, online]. TED Talk. Available from:

[https://www.ted.com/talks/trevor\\_copp\\_jeff\\_fox\\_ballroom\\_dance\\_that\\_breaks\\_gender\\_roles#/t-442924](https://www.ted.com/talks/trevor_copp_jeff_fox_ballroom_dance_that_breaks_gender_roles#/t-442924) [Accessed 29 January 2018].

Ikiugu, M.N. and Pollard, N., 2015. *Meaningful living across the lifespan: Occupation-based intervention strategies for occupational therapists and scientists*. London: Whiting and Birch.

Pierce, D., 2009. Co-occupation: The challenges of defining concepts original to occupational science. *Journal of Occupational Science* [online], 16 (3), 203-207.

Pollard, N. and Carver, N., 2016. Building model trains and planes: An autoethnographic investigation of a human occupation. *Journal of Occupational Science* [online], 23 (2), 168-180.

Pyatak, E. and Muccitelli, L., 2011. Rap music as resistive occupation: Constructions of Black American identity and culture for performers and their audiences. *Journal of Occupational Science* [online], 18 (1), 48-61.

Riley, J., Corkhill, B. and Morris, C., 2013. The benefits of knitting for personal and social wellbeing in adulthood: Findings from an international survey. *British Journal of Occupational Therapy* [online], 76 (2), 50-57.

Rowles, G.D., 2008. Place in occupational science: A life course perspective on the role of environmental context in the quest for meaning. *Journal of Occupational Science* [online], 15 (3), 127-135.

Stewart, K.E., Fischer, T.M., Hirji, R. and Davis, J.A., 2016. Toward the reconceptualization of the relationship between occupation and health and well-being. *Canadian Journal of Occupational Therapy* [online], 83 (4), 249-259.

Turpin, M. and Iwama, M.K., 2011. *Using occupational therapy models in practice* [online]. Edinburgh: Churchill Livingstone/Elsevier.

Twinley, R., 2013. The dark side of occupation: A concept for consideration. *Australian Occupational Therapy Journal* [online], 60 (4), 301-303.

**Unit Title: Skills for Occupational Therapy Practice**

**Level: 4**

**Credit value: 20 credits (10 ECTS equivalent credit value)**

**Effective From: September 2019**

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### **PRE-REQUISITES AND CO-REQUISITES**

None

### **AIMS**

This skills based unit prepares students for their first exposure to professional practice. Communication is integral to professional practice for occupational therapists. Good personal and interpersonal communications are central to collaboration, the efficiency of group working and the resulting quality of occupational therapy provision. The aim of this unit is to facilitate the development of effective and transferable, communication skills that promote and value diversity. To develop compassionate, robust, resilient and responsible occupational therapists with excellent communication skills. This unit will provide the student with a firm foundation for practice and future academic development.

### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Demonstrate the key components of good, effective, collaborative communication as an occupational therapy student
2. Identify and comply with core professional and regulatory standards applicable to occupational therapy practice
3. Develop professional and academic behaviour and skills as an individual and in groups
4. Identify the effect of diversity, individual differences, cultural beliefs and customs and their influence on communication

### **LEARNING AND TEACHING METHODS**

In this unit students will engage in a blended learning and teaching approach consisting of practice simulation activities, lectures, seminars, on-line learning, case based learning and peer-review sessions. Students will also be introduced to academic journal articles and other media.

Students will be expected to develop knowledge and skills by identifying their own learning needs and participate in a culture of autonomous, life-long learners and collaborative group work.

Practice simulation sessions will be in the practice simulation rooms and students will be expected to dress appropriately and expected to act professionally at all times in these sessions. Sessions may be recorded for formative learning.

## **ASSESSMENT**

### **Summative Assessment**

ILOs 1 – 4 will be assessed by 100% Coursework

### **Indicative Assessment**

The coursework consists of a practical assessment.

In the practical assessment the student is required to demonstrate effective and professional communication skills and application of underpinning knowledge (ILOs 1-4)

### **Formative Assessment**

Peer and academic feedback will be given to the students during practical skills sessions.

## **INDICATIVE CONTENT**

### **Effective Communication**

Effective verbal and non-verbal communication skills including, face-to-face, written and on-line communications

Note taking/record keeping

Applied communication skills appropriate to inter-professional care including interacting with clients eg subjective history taking

Consent

### **Self-Awareness and Management**

Self-efficacy

Reflection on personal communication styles

Barriers to communication

### **Social and Emotional Awareness**

Empathy

Active listening skills

Self-disclosure

### **Diversity and anti-oppressive practice**

Humanizing care

Culture and diversity

Interprofessional classifications of health, illness, disability and function

Models of Disability

### **Understanding the guiding policy, regulatory framework and legislation of the profession.**

HCPC, RCOT, WFOT, CSP, WCPT

National standards e.g. NICE.

Quality frameworks.

Clinical Governance.

## INDICATIVE KEY LEARNING RESOURCES

### Books

Boyt Schell, B.A., Gillen, G., Scaffa, M.E. and Cohn, E.S., eds., 2013. *Willard & Spackman's Occupational therapy*. 12<sup>th</sup> edition. Philadelphia, PA.: Wolters Kluwer/Lippincott, Williams & Wilkins.

Burnard, P., 1997. *Effective communication skills for health professionals*. 2<sup>nd</sup> edition. London: Stanley Thornes.

College of Occupational Therapists, 2015. *Code of ethics and professional conduct* [online]. Revised edition. London: College of Occupational Therapists.

Chartered Society of Physiotherapy, 2011. *Code of members' professional values and behaviour* [online]. London: Chartered Society of Physiotherapy.

DeVito, J. A., 2016. *Essentials of human communication*. 9<sup>th</sup> edition. Upper Saddle River, NJ.: Pearson.

Francis, R., 2013. *Final Report of the Mid Staffordshire Foundation Trust Public Enquiry* [online]. London: The Stationery Office.

Goleman, D., 1996. *Emotional intelligence*. London: Bloomsbury.

Goleman, D., 1999. *Working with emotional intelligence*. London: Bloomsbury.

Government Equalities Office, 2012. *The equality strategy: Building a fairer Britain: Progress report* [online]. London: Government Equalities Office.

Health and Care Professions Council, 2013. *Standards of proficiency - Occupational therapists* [online]. London: Health and Care Professions Council.

Health and Care Professions Council, 2013. *Standards of proficiency – Physiotherapists* [online]. London: Health and Care Professions Council.

Higgs, J., Smith, M., Webb, G., Skinner, M. and Croker, A., 2009. *Contexts of physiotherapy practice*. Sydney, NSW.: Churchill Livingstone.

Mayer, J. D. and Salovey, P., 1990. Emotional intelligence. *Imagination, cognition and personality*, 9 (3), 185-211.

Middleton, J., 2000. *The team guide to communication*. Oxford: Radcliff Medical Press.

Moss, B., 2015. *Communication skills in health and social care*. 3<sup>rd</sup> edition. London: Sage Publications.

O'Toole, G., 2016. *Communication: Core interpersonal skills for health professionals*. 3<sup>rd</sup> edition. Chatswood, NSW.: Elsevier.

Pavord, E. and Donnelly, E., 2008. *Communication and interpersonal skills* [online]. 2<sup>nd</sup> edition. Banbury: Lantern.

Porter, S.B., 2013. *Tidy's Physiotherapy* [online]. 15<sup>th</sup> edition. Edinburgh: Elsevier.

Purtilo, R., Haddad, A. and Doherty, R., 2014. *Health professional and patient interaction* [online]. 8<sup>th</sup> edition. St Louis, Mo.: Elsevier Saunders.

Thompson, N., 2011. *Effective communication: A guide for the people professions* [online]. 2<sup>nd</sup> edition. Basingstoke: Palgrave Macmillan.

### **Web-based sources**

Health Talk - <http://www.healthtalkonline.org>

Mind - <http://www.mind.org.uk/information-support/legal-rights/rights-consent-to-treatment/>

### **Journals**

British Journal of Occupational Therapy

International Journal of Communication

Journal of Communication

Journal of Health Communication

Journal of Interprofessional Care



## **BSc (Hons) Occupational Therapy**

### **Occupational Therapy in Action 1**

<b>Version Number:</b>	<b>2</b>
<b>Level:</b>	<b>4</b>
<b>Credit Value:</b>	<b>20 (10 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2019</b>

#### **PRE-REQUISITES AND CO-REQUISITES**

None

#### **AIMS**

This unit is a mix of theory and skills activity and will challenge students to learn about assessment and interventions in occupational therapy. It will introduce students to implementing occupational therapy practice with diverse clients in a variety of settings. Students will learn how to: gather appropriate information through assessment; collaboratively plan and set goals and identify appropriate occupation-focused approaches and adaptations to intervention. They will also develop skills of basic analysis and clinical reasoning. Students will apply knowledge of occupational therapy models of practice to guide the selection of assessment and interventions relating to a variety of case studies.

#### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Identify, select, appraise and apply assessment methods in relation to person, environment, occupation and occupational performance and communicate assessment findings to service users.
2. Apply professional reasoning to the selection of purposeful occupations and occupational therapy interventions appropriate to a range of conditions and to the service user's unique needs.
3. Discuss physical, psychological, sociological, cultural, spiritual and environmental factors that impact on occupational performance.
4. Discuss enablers and barriers to successful assessment, goal setting and interventions.

#### **LEARNING AND TEACHING METHODS**

The unit will be delivered by blended learning through a combination of lectures, seminars, tutorials and skills workshops. These will feature student centred activities including online learning materials and workbooks. Students will also be introduced to academic journal articles and other media to begin the process of application of material to case-study information.

## **ASSESSMENT**

### **Summative Assessment**

*ILOs 1-4 will be assessed by 100% coursework.*

### **Indicative Assessment**

Presentation followed by questions. The presentation will apply the OT process to a case study with a focus on assessment, intervention planning and goal setting, and treatment and interventions.

## **INDICATIVE CONTENT**

- OT Process in action
- Core OT assessment methods and tools
- Interview skills
- Information gathering, interpreting and 'sifting'
- Collaborative and occupation centred goal setting
- Basic intervention planning
- Individual
- Groups
- Enabling and empowering occupations
- Models of change
- Inter-professional working – 'referring on'
- Core frames of reference and approaches
- Learning theory
- Application of OT models with diverse settings / service users
- Models of health, wellbeing and disability
- ICF
- Fundamental principles of client centred practice
- Diversity and individuality of service users
- Health inequalities and poverty
- Social science links
- Cultural competence and cultural safety
- Introduction to pathology
- Functional impact of different pathologies
- Introduction to clinical reasoning
- Professional judgment and autonomy
- Application of evidence to interventions
- Advancing clinical reasoning

## INDICATIVE KEY LEARNING RESOURCES

On-line resources include Anatomy TV, Anatomy and Physiology online and Box of Broadcasts.

Atchison, B. J., and Dirette, K. B., (eds) 2012. *Conditions in Occupational Therapy: Effects on Occupational Performance*. 4th edition. Philadelphia: Wolters Kluwer/Lippincott, Williams & Wilkins.

Boyt Schell, B.A., and Schell, J.W. (eds). 2008. *Clinical and Professional Reasoning in Occupational Therapy*. Maryland, USA: Wolters Kluwer/ Lippincott Williams & Wilkins.

Case-Smith, J. and O'Brian, J.C. (eds). 2010. *Occupational Therapy for Children*, 6th ed. Missouri, USA: Mosby/ Elsevier.

Creek, J. And Lougher, L. (eds). 2008. *Occupational Therapy and Mental Health*, 4th ed. Edinburgh: Churchill Livingstone/Elsevier.

Crepeau, E.B., Cohn, E.S. and Boyt Schell, B.A. (eds). 2009. *Willard & Spackman's Occupational Therapy*, 11th ed. Philadelphia, USA: Wolters Kluwer/Lippincott, Williams & Wilkins.

Curtin, M., Molineux, M. and Supyk-Mellson, J. (eds) 2010. *Occupational Therapy and Physical Dysfunction: enabling occupation*. Edinburgh: Churchill Livingstone/Elsevier.

Duncan, E.A.S. (ed). 2011. *Foundations for Practice in Occupational Therapy*, 5th ed. Edinburgh: Churchill Livingstone/Elsevier.

Duncan, E.A.S. (ed). 2009. *Skills for Practice in Occupational Therapy*. Edinburgh: Churchill Livingstone/Elsevier.

Goodman, J., Hurst, J. and Locke, C. (eds) 2009. *Occupational Therapy for People with Learning Disabilities*. Edinburgh: Churchill Livingstone/Elsevier.

Hemphill-Pearson, B.J. 2008. *Assessments in Occupational Therapy Mental Health: an integrative approach*. NJ, USA: SLACK.

Kielhofner, G. (ed). 2008. *Model of Human Occupation: theory and application*, 4th ed. MD, USA: Wolters Kluwer/ Lippincott Williams & Wilkins.

Laver Fawcett, A. (ed) 2007. *Principles of Assessment and Outcome Measurement for Occupational Therapists and Physiotherapists*. Chichester. John Wiley Ltd.

Mooney, M. and Ireson, C. 2009. *Occupational Therapy in Orthopaedics and Trauma*. West Sussex, UK: Wiley- Blackwell.

Wilby, H. J. 2007. The Importance of Maintaining a Focus on Performance Components in Occupational Therapy Practice . *The British Journal of Occupational Therapy* , 70(3), pp. 129-132(4).

## **BSc (Hons) Occupational Therapy**

### **Analysing Occupation**

<b>Version Number:</b>	<b>2</b>
<b>Level:</b>	<b>4</b>
<b>Credit Value:</b>	<b>20 (10 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2019</b>

### **PRE-REQUISITES AND CO-REQUISITES**

None

### **AIMS**

This unit is a mix of theory and skills activity and will challenge students to learn about and apply, the informing science and practice of occupational therapy. Through analysing a range of occupations, students will develop their understanding of human anatomy, physiology, psychology, sociology and functioning. Students will also apply bio-psycho-social principles to their understanding of humans as occupational beings. Building on the “Becoming an Occupational Therapist” unit, they will continue to explore the interaction between occupation, health and well-being and the nature of humans as occupational beings.

### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Describe the structures and functions of the human body in relation to occupations and activities.
2. Discuss physical, psychological, sociological, cultural and environmental factors in relation to occupational performance.
3. Undertake occupation, activity and task analysis.
4. Identify possible implications of an individual’s inability to engage in occupations and suggest simple methods to grade and adapt activities.

### **LEARNING AND TEACHING METHODS**

The unit will be delivered through a range of practical occupation, activity and task situations linked to case studies which students will analyse in detail. The analysis will be supported by a range of lectures, seminars and tutorials as well as on-line learning resources. Analysis of specific occupations will develop knowledge of the medical and social sciences.

Small group work, including use of on-line learning materials will enable students to deepen their knowledge base and learn from peer and tutor feedback.

This unit will run alongside the “Occupational Therapy in Action 1” unit; students will be encouraged to relate their learning from each unit to the other.

## **ASSESSMENT**

### **Summative Assessment**

Intended Learning Outcomes 1 – 4 will be assessed by coursework (100%).

### **Indicative Assessment Information**

Students will carry out a structured activity analysis report for a selected video case study. The activity analysis structure will be provided along with a range of case studies from which the students will choose.

## **INDICATIVE CONTENT**

Observational skills

The purpose of occupation, activity and task analysis and different approaches to analysis.

Occupational, activity and task analysis.

Applied to typical development

Introduction to anatomy and physiology concepts

Applied anatomy and physiology

Typical development

Upper limb anatomy

Lower limb and spine anatomy

CNS anatomy

Nerve physiology

Cardio-vascular and metabolic physiology

Muscle work analysis and kinesiology

Applied social science.

Approaches to psychology, including behaviourism, Developmental, social cognitive, cognitive neuropsychology and humanistic approaches.

Motivation

Learning

Social psychology

Culture

Family structure

Social structures and groups

Disability theory and policy

Roles

Occupation as means and / or ends.

Grading activity.

## **INDICATIVE KEY LEARNING RESOURCES**

A full list of resources will be available at the start of the unit.

On-line resources including Anatomy TV

### **Anatomy and Physiology:**

Anatomical Chart Company (ed) 2010. *Rapid Review - Anatomy reference guide: A guide for self-testing and memorization*. 3<sup>rd</sup> edition. USA: Lippincott Williams & Wilkins.

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Everett, T and Kell, C., *Human Movement: An Introductory Text*. 6<sup>th</sup> ed. Edinburgh: Churchill Livingstone.

- Gosling, J.A. et al, 2008. *Human Anatomy: color atlas and textbook*. 5<sup>th</sup> edition. Edinburgh: Mosby.
- Jacob, S., 2007. *Human Anatomy: a clinically oriented approach*. Edinburgh: Churchill Livingstone.
- Kerr, A., 2010. *Introductory biomechanics*. Edinburgh: Churchill Livingstone.
- Lumley, J.S.P., 2008. *Surface Anatomy: the anatomical basis of clinical examination*. 4<sup>th</sup> edition. New York: Churchill Livingstone.
- McMillan, I.R., Carin-Levy, G., 2011. *Tyldesley & Grieve's Muscles, Nerves and Movement in Human Occupation* 4<sup>th</sup> edition. Oxford: Wiley-Blackwell.
- Palastanga, N. And Soames, R. 2012. *Anatomy and Human Movement: structure and function*, 6th ed. Edinburgh: Churchill Livingstone.
- Pocock, G., Richards, C.D., 2013. *Human physiology: the basis of medicine*. 4<sup>th</sup> edition. Oxford: Oxford University Press.
- Seeley, R., Stephens, T.D., Tate, P., 2013. *Anatomy & Physiology*. 10<sup>th</sup> edition. New York: McGraw Hill.
- Silverthorn, D., 2013. *Human Physiology: an integrated approach*. 6<sup>th</sup> edition. Boston: Pearson Education.
- Watkins, J., 2010. *Structure and Function of the Musculoskeletal System*. 2nd ed. Leeds: Human Kinetics.

### **Social Sciences:**

- Giddens, A., 2013. *Sociology*. 7<sup>th</sup> edition. Cambridge: Polity Press
- Giddens, A., Sutton, P.W., 2010. *Sociology: introductory readings*. 3<sup>rd</sup> edition. Cambridge: Polity Press.
- Gross, R., 2010. *Psychology : the science of mind and behaviour*. 6<sup>th</sup> edition. London: Hodder Education
- Jones, D., Blair, S. et al, 1998. *Sociology and occupational therapy: an integrated approach*. Edinburgh: Churchill Livingstone
- Martin, G.N., Carlson, N.R., Buskist, W., 2010. *Psychology*. 4<sup>th</sup> edition. New York: Allyn and Bacon
- Newman, D.M., O'Brien, J., eds., 2012. *Sociology: exploring the architecture of everyday life London*: 9<sup>th</sup> edition. Pine Forge
- Santrock, J.W. 2013. *Life-Span Development*, 14th ed. Boston, USA: McGraw-Hill.

### **Occupational Science/Occupational Therapy**

- Christiansen, C.H. and Townsend, E.A. (eds). 2010. *Introduction to Occupation: the art and science of living*, 2nd ed. NJ, USA: Pearson.
- Kramer, P., Hinojosa, J. and Brasic Royeen, C. (eds). 2003. *Perspectives in Human Occupation: participation in life*. Philadelphia, USA: Lippincott Williams & Wilkins.
- MacKenzie, L. and O'Toole, G. 2011. *Occupation Analysis in Practice*. West Sussex, UK: Wiley-Blackwell.
- Molineux, M., ed., 2004. *Occupation for Occupational Therapists*. Oxford: Blackwell.
- Thomas, H., 2011. *Occupation based activity analysis*. NJ: Slack
- Wilcock, A., 2006. *An occupational perspective of health*. Second edition. N.J.: Slack
- Whiteford, G., Hocking, C., 2012. *Occupational Science: Society, Inclusion, Participation*. Chichester: Wiley-Blackwell

Zemke, R., Clark, F., eds., 2003. *Occupational Science: the evolving discipline*. Philadelphia: FA Davis Co.

## **BSc (Hons) Occupational Therapy**

### **Occupational Therapy Placement BU1**

<b>Version Number:</b>	<b>2</b>
<b>Level:</b>	<b>4</b>
<b>Credit Value:</b>	<b>40 (20 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2019</b>

#### **PRE-REQUISITES AND CO-REQUISITES**

Mandatory training undertaken via e-learning (with some practical elements) before attendance on placement. These would include: Principles of health & safety; safeguarding children & vulnerable adults, manual handling, basic life support and infection control.

#### **AIMS**

The aim of this six-week unit is to introduce students to current professional practice and to the foundation skills, knowledge and professional values and expectations required in occupational therapy.

The unit will provide an opportunity to expose students to the occupational therapy culture including the profession's occupational vision, ethos and methods.

This particular period of study has a focus on observing professional practice and undertaking simple assessment or information gathering activity. Students may also take part in intervention activity under supervision but they will not carry their own case load.

Students are supernumerary to the staff on the units in which they are placed.

#### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Demonstrate basic knowledge of underpinning theories, knowledge, legislation, and professional standards for occupational therapy e.g. Standards of Proficiency for OT (Health and Care Professions Council, 2013)
2. Practise safely and effectively within the scope of practice as a student occupational therapist in the placement setting.
3. Practise and communicate in a professional, non-judgemental and ethical manner: respecting and acknowledging people as individuals.



4. Identify strengths and areas for improvement using a range of resources to inform their personal and professional development planning. Develop skills of reflection using personal and professional experiences of practice to inform future learning and development.

## **LEARNING AND TEACHING METHODS**

The delivery of this fieldwork unit will take place in a variety of locations across Dorset, Somerset and Wiltshire. Providers of placement will be based in health or social care settings with some additional placements in schools, private and voluntary organisations. Each student will be attached to an experienced occupational therapist who will act as practice placement educator (PPE) for the entire period of study. Academic advisors will provide a link to the academic programme and will contact the student during the placement. Learning will be facilitated by placement educators.

A variety of learning and facilitation methods may include the following:

- Demonstration by the PPE and colleagues in the placement facility
- Supervised patient/client contact
- Staff and learner-led presentations
- Case presentations
- Ward rounds
- Attendance at clinics and opportunities to observe specialist treatments such as surgical interventions
- Departmental in-service programmes
- Support from placement educators and academic advisors.
- eLearning resources: 'Brightspace' VLE site.
- Learning resources in the practice area.
- Practice placement handbook.

## **ASSESSMENT**

### **Summative Assessment**

ILOs 1-4 will be assessed by by 100% coursework using BU Occupational Therapy practice assessment template

## **INDICATIVE CONTENT**

Practice placement in clinical or social settings include the study of

- People and their narratives
- Occupations that are important in maintaining health and well-being
- Informing sciences that impact on service users' lives including bio-psycho-social and patho-physiological sciences
- Occupational therapy theories applied to the practice setting
- Assessment options (standardised and non-standardised) that may be applied to the practice setting
- Intervention strategies that can enhance service user & carers' lives in the practice setting
- The legislative and social policy context pertaining to the area of practice
- The (clinical) governance arrangements relevant to the practice location
- The evidence base – or current best practice – which is relevant to the service user group and practice area

## **INDICATIVE KEY LEARNING RESOURCES**

Alsop, A. and Ryan, S., 2003. *Making the most of fieldwork education: A practical approach*. Cheltenham: Stanley Thornes.

Andrews, J., 2000. The value of reflective practice: A student case study. *British Journal of Occupational Therapy* [online], 63 (8), 396-398.

Bryant, W., Fieldhouse, J. and Brannigan, K., eds., 2014. *Creek's Occupational therapy and mental health* [online]. 5<sup>th</sup> edition. Edinburgh: Churchill Livingstone/Elsevier.

College of Occupational Therapists, 2015. *Code of ethics and professional conduct* [online]. London: College of Occupational Therapists.

Cottrell, S., 2011. *Critical thinking skills: Developing effective analysis and argument* [online]. 2nd edition. Basingstoke: Palgrave Macmillan.

Cottrell, S. 2013. *The study skills handbook*, 4th ed. Basingstoke: Palgrave Macmillan.

Creek, J., 2003. *Occupational therapy defined as a complex intervention*. London: College of Occupational Therapists.

Curtin, M., Molineux, M. and Supyk-Mellson, J., eds., 2010. *Occupational therapy and physical dysfunction: Enabling occupation* [online]. 6<sup>th</sup> edition. Edinburgh: Churchill Livingstone.

Duncan, E.A.S., 2009. *Skills for practice in occupational therapy* [online]. Edinburgh: Churchill Livingstone.

Duncan, E., 2012. *Foundations for practice in occupational therapy* [online]. 5<sup>th</sup> edition. Edinburgh: Churchill Livingstone.

Health and Care Professions Council, 2012. Your guide to our standards for continuing professional development [online]. London: Health and Care Professions Council.

Health and Care Professions Council, 2013. *Standards of proficiency - Occupational therapists* [online]. London: Health and Care Professions Council.

Health and Care Professions Council, 2016. *Guidance on conduct and ethics for students* [online]. London: Health and Care Professions Council.

Health and Care Professions Council, 2016. *Standards of conduct, performance and ethics* [online]. London: Health and Care Professions Council.

Healey, J. and Spencer, M., 2008. *Surviving your placement in health and social care: A student handbook* [online]. Maidenhead: Open University Press.

Higgs, J. and Jones, M., 2008. *Clinical reasoning in the health professions* [online]. 3<sup>rd</sup> edition. Oxford: Butterworth Heinemann.

Hong C.S., Harrison, D., 2012. *Tools for continuing professional development*. 2nd edition. London: Quay Books.

Polglase, T. and Treseder, R., 2012. *The occupational therapy handbook: Practice education* [online]. Keswick: M&K Publishing.

## **BSc (Hons) Occupational Therapy**

### **Foundations for Professional Practice and Research**

**Version Number:** 1

**Level:** 4

**Credit Value:** 20 (10 ECTS equivalent credit value)

**Effective from:** September 2019

#### **Pre-requisites**

None

#### **Aims**

At the heart of this interprofessional unit is the belief that all health, social care and social work students should not only share the same core values and skills that underpin their professional practice, but they should also have learning opportunities that enable them to learn with, and about, each other (CAIPE 2016).

This unit is intended to provide a foundation on which the different programmes leading to professional registration can be built. It seeks to contextualise health and social work by exploring their history and priorities. Social determinants of health and the promotion of well-being will be explored as a way of understanding modern health and social work practice. Its' importance will be emphasised by the use of assessment which prioritises well-being initiatives.

Health, social care and social work professions have had a continued focus on person-centred practice for some years but, nonetheless, concerns remain about the extent to which service users & carers may not always have been treated with dignity and respect. The unit will also, therefore, seek to explore ethical dimensions of care to reinforce and instil humanised or person-centred professional practice – a core value for our Faculty. Professional ethics will also be considered along with their role in protecting the public.

The use of evidence is crucial for effective practice and so students will be introduced to the reasons why it is so important to base our practice on research evidence & best practice rather than custom & practice. The skills involved in being an able recipient of research evidence will be explored as a precursor to formal exposure to research methods later in the programmes.

Finally, the unit will provide a set of skills to prepare students for their first exposure to practice placement by encouraging them to think about respectful, reflective and resilient practice. They will be expected to demonstrate an ability to manifest these attitudes on practice placement at the time when these are scheduled into their individual programmes. For some programmes, an opportunity to attend initial or orientation placement will occur during the period of delivery of this unit.

## **Intended Learning Outcomes (ILOs)**

Having completed this unit the student is expected to demonstrate:

1. Academic and enquiry skills for learning in order to access and utilise evidence from a range of sources including published research, professional practice, professional journals and associated literature.
2. An understanding of the need for the promotion of health & well-being, social determinants of health and broader influences on health and wellbeing, including the role of occupation.
3. The importance of respectful, dignified person-centred care in modern provision of services including recognising the importance of evidence-based practice.
4. A knowledge of their own professional codes of conduct and an ability to reflect on the core values of health and social work professions. This includes the importance of working as part of a team, reflecting on their own behaviour, emotional health, time-keeping and self-management strategies.

## **Learning and Teaching Methods**

Blended learning, for example:

- Lectures (live and on-line) and seminars
- Practical workshops including team-based learning
- Guided resources / reading for 'flipped classroom' learning
- Web based resources (including 'Brightspace' virtual learning environment [VLE])
- Orientation placements (depending on programme)

## **ASSESSMENT**

### **Summative assessment**

ILO's 1-4 assessed via coursework 100%

### **Indicative assessment**

Students will prepare a public health or well-being education package for a specific client group in a caring or community setting. They will utilise their emerging research skills to underpin their work with theory and information.

Their choice of topic will be negotiated within the interprofessional group following debate and discussion. These topics will link to current social and/or health imperatives. Examples of topics might include:

- smoking cessation;

- recognising the signs of domestic abuse;
- reduced use of antibiotics;
- protecting against modern slavery;
- infection control;
- preventing loneliness or isolation;
- obesity reduction.

The education package will address the identified need and be respectfully targeted at the chosen clients or communities.

Students will be required to produce a short group presentation to introduce and support this package. The students will form small groups and will work on the package throughout the unit. Their ability to work within a team will involve the professional behaviours identified in ILO4.

The project work will not differentiate between group outcomes and individual outcomes. This is to avoid complexity at this stage of the programme and is influenced by the fact that first year grades do not count towards degree classification.

### **Indicative content**

Unit content will include at an **introductory** level (although this is not an exhaustive list):

- History and funding of health & social services
- The NHS constitution
- Wider influences on, and issues for, health & social services
- Imperatives for healthy, fulfilled lives and for the promotion of health /well-being
- Service user & carer involvement in design of services and evaluating their effectiveness
- Effective verbal and non-verbal communication skills and the need for active, empathic listening
- Team-working and peer support
- Ethics of practice
- Self-management and emotional health
- Reflective practice
- Academic study skills and the need for continuous, life-long learning
- Basic research skills including how to access and read professional literature, and appreciate basic research methodologies and outcomes

### **Indicative learning resources**

The unit has a 'Brightspace' VLE site containing unit information, additional relevant material, lecture notes, discussion boards and an extensive reference list.

### **Department of Health & Social Care publications**

*N.B. Prior to January 2018, this Government Department was known as the Department of Health. Hence, the referencing convention below which acknowledges the title at the time of publication*

Department of Health (2012) *Healthy Lives, Healthy People*. London: The Stationery Office (TSO)

Department of Health (2013) *NHS Constitution*. London: The Stationery Office (TSO)

Department of Health (2012) *Final Report of the Mid Staffordshire Foundation Trust Public Enquiry. (Francis Report)* London: The Stationery Office (TSO)

Department of Health (2012) *Health & Social Care Act*. London: The Stationery Office (TSO)

Department of Health (2010) *Equity & Excellence: Liberating the NHS (White Paper)* London: The Stationery Office (TSO)

### **Professional texts and professional standards documents:**

Bolton G, 2010, *Reflective Practice*. London: Sage Publications

Dimond B. (2006) *Legal Aspects of Midwifery* (3<sup>rd</sup> Edition). London: Elsevier

Dimond B. (1999) *Legal Aspects of Occupational Therapy*. Oxford: Blackwell Science.

Dimond B. (1999) *Legal Aspects of Physiotherapy*. Oxford: Blackwell Science.

Health & Care Professions Council, (HCPC), 2008, *Standards for Conduct, Performance and Ethics*. London: HCPC

Lugon, M. and Secker-Walker, J. (1999), *Clinical Governance: Making it Happen*. London: Royal Society of Medicine Press

Martin, V. and Henderson, E. (2001), *Managing in Health & Social Care*. London: Routledge.

Montgomery, J. (2012) *Health Care Law*. 3<sup>rd</sup> Edition. Oxford: Oxford University Press.

Murray E & Simpson J. (2000) *Professional Development and Management for Therapists: An Introduction*. Oxford: Blackwell Science

### **Continuous Professional Development:**

NMC/HCPC/RCCP/Professional Bodies. Codes of professional conduct

Bolton G, 2010, *Reflective Practice*. London: Sage Publications

HCPC guidance on Continuing Professional Development and Lifelong Learning.  
<http://www.hpc-uk.org>

### **General Information Sources**

Department of Health & Social Care (DHSC)

<https://www.gov.uk/government/organisations/department-of-health-and-social-care>

Health Commission

<http://www.chi.nhs.uk>

National Institute for Health and Clinical Excellence (NICE)

<http://www.nice.org.uk>

Institute of Health Care Management

<http://www.ihm.org.uk/>

NHS Modernisation Agency

[http://www.modernnhs.nhs.uk/home/default.asp?site\\_id=58](http://www.modernnhs.nhs.uk/home/default.asp?site_id=58)

Service improvement documents

[http://www.modern.nhs.uk/scripts/default.asp?site\\_id=17&id=2085](http://www.modern.nhs.uk/scripts/default.asp?site_id=17&id=2085)

[http://www.modern.nhs.uk/scripts/default.asp?site\\_id=17&id=2084](http://www.modern.nhs.uk/scripts/default.asp?site_id=17&id=2084)

DHSC Planning framework: service redesign

[http://www.dh.gov.uk/PolicyAndGuidance/HumanResourcesAndTraining/WorkingDifferently/EuropeanWorkingTimeDirective/EWTDGuidanceLinksArticle/fs/en?CONTENT\\_ID=4075502&chk=MhG8Nu](http://www.dh.gov.uk/PolicyAndGuidance/HumanResourcesAndTraining/WorkingDifferently/EuropeanWorkingTimeDirective/EWTDGuidanceLinksArticle/fs/en?CONTENT_ID=4075502&chk=MhG8Nu)



## **BSc (Hons) Occupational Therapy**

### **Occupational Therapy in Action 2**

<b>Version Number:</b>	<b>2</b>
<b>Level:</b>	<b>5</b>
<b>Credit Value:</b>	<b>20 (10 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2020</b>

#### **PRE-REQUISITES AND CO-REQUISITES**

None

#### **AIMS**

This unit is a mix of theory and skills activity and will challenge students to consolidate their learning about assessment and interventions in occupational therapy. It will task students with identifying evidence-based occupational therapy practice which can be implemented with diverse clients in a variety of settings. Students will learn how to critique information gained through assessment; collaboratively plan and set goals and identify appropriate occupation-focused approaches and adaptations in intervention. They will further develop skills of analysis and clinical reasoning. Students will apply their established knowledge of occupational therapy models of practice to guide the selection of assessment and interventions relating to a variety of complex case studies and will critique and evaluate current practice. They will also begin to develop skills of synthesis and advancing application of clinical reasoning.

#### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Select, apply and critique a broad range of theoretical approaches to case study situations, including frames of reference and specific approaches, exploring the evidence supporting these approaches.
2. Discuss and apply clinical reasoning skills to determine an appropriate occupational therapy course of action.
3. Discuss appropriate strategies to evaluate the effectiveness of occupational therapy intervention from the perspective of the client, therapist and service.
4. Discuss the importance of evidence and clinical reasoning in the selection and use of assessment, intervention and evaluation strategies.
5. Demonstrate awareness of socio-political and funding influences on occupational therapy practice and the increasing need to demonstrate cost-effectiveness.

## **LEARNING AND TEACHING METHODS**

The unit will be delivered through a range of lectures, small group work, skills sessions and on-line learning opportunities. These will be designed so that students have the opportunity to practice their clinical reasoning skills and problem-solve, using coherent, logical thought processes and the best available evidence. A range of clinical situations and conditions will be used as triggers. During the unit, students will present case study examples, highlighting their clinical reasoning skills to experts in the field.

## **ASSESSMENT**

### **Summative Assessment**

ILOs 1 – 5 will be assessed by coursework (100%)

### **Indicative Assessment**

Presentation of a case study within a viva voce. This comprises a 15 minute presentation (followed by a maximum of 5 minutes questions). The presentation will apply the OT process to a case study with a focus on assessment, intervention planning and goal setting, and treatment and interventions.

## **INDICATIVE CONTENT**

Assessment of individual performance components  
Reviewing and defining occupational therapy service provision.  
Advancing Intervention planning  
Specialist frames of references  
Contemporary models of practice e.g.: Kawa, Model of Creative Ability  
Advancing goal setting  
Complex case scenarios  
Issues of vulnerability and risk  
Outcome measures  
Evaluation at 3 levels: service user, practitioner and service  
Service user engagement  
Self-evaluation, use of supervision and reflective practice.  
Standards, policy and guidelines.  
Governance, quality control, service aims & strategies, audit  
Activity analysis of occupations in the context of pathology  
Advancing clinical reasoning

## **INDICATIVE KEY LEARNING RESOURCES**

A full list of resources will be available at the start of the unit within the VLE.  
On-line resources include Anatomy TV, Anatomy and Physiology online and Box of Broadcasts/

Beighton, C., 2014. Clinical governance and clinical audit. *In: Bryant, W., Fieldhouse, J. and Brannigan, K, eds. Creek's Occupational therapy and mental health* [online]. 5<sup>th</sup> edition. Edinburgh: Churchill Livingstone Elsevier.

College of Occupational Therapists, 2006. *COT/BAOT Quality Briefing 42: Assessments and outcome measures*. London: College of Occupational Therapists.

Finlay, I., 2004. Evaluation. *In: Finlay, I., The practice of psychosocial occupational therapy.* 3rd edition. Nelson Thornes.

Laver Fawcett, A., ed., 2007. *Principles of assessment and outcome measurement for occupational therapists and physiotherapists* [online]. Chichester: John Wiley & Sons.

Laver Fawcett, A., 2007. Introduction. *In: Laver Fawcett, A., ed. Principles of assessment and outcome measurement for occupational therapists and physiotherapists* [online]. Chichester: John Wiley & Sons.

Laver Fawcett, A., 2007. The importance of accurate assessment and outcome measurement. *In: Laver Fawcett, A., ed. Principles of assessment and outcome measurement for occupational therapists and physiotherapists* [online]. Chichester: John Wiley & Sons.

Neistadt, M.E., 2000. *Occupational therapy evaluation for adults.* Philadelphia, PA.: Lippincott Williams & Wilkins.

## **BSc (Hons) Occupational Therapy**

### **Professional Reasoning for Occupational Therapy Practice**

<b>Version Number:</b>	<b>2</b>
<b>Level:</b>	<b>5</b>
<b>Credit Value:</b>	<b>20 (10 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2020</b>

#### **PRE-REQUISITES AND CO-REQUISITES**

None

#### **AIMS**

To enable students to critically analyse theories and research from occupational science and other relevant bodies of knowledge to form the foundation of reasoned professional practice by appraisal of the complexities of theories and research and apply evidence-informed understanding of occupation to a changing society.

#### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Discuss the process of and relevant models for professional and ethical reasoning.
2. Appraise the nature and application of research in the context of evidence-informed and ethical occupational therapy
3. Demonstrate an appreciation of the different forms of evidence used to support evaluation in practice.
4. Engage in cogent and reasoned debate in relation to occupation and occupational therapy theory in order to articulate clinical reasoning

#### **LEARNING AND TEACHING METHODS**

Learning and teaching will use a blended approach based around given evidence from a breadth of therapy practice and occupational science and relevant research from other disciplines.

Students will be encouraged to discuss, analyse and evaluate the relevant evidence through fixed resource sessions, seminars, discussion groups, a journal club and on-line activities.

Sessions will cover the concepts of evidence-informed practice, occupational formulation and professional reasoning and their application.

Students will be encouraged to continuously appraise, evaluate, and apply the relevant literature to their discussions and activities throughout the unit.

Sessions will be designed to develop learning from peers and reflective practice. An on-line learning environment will be used to communicate information and to give access to teaching and learning materials.

Students will also be encouraged to reflect on their own practice in placement experiences to date, and develop strategies to promote their own professional and ethical reasoning in the future.

## **ASSESSMENT**

### **Summative Assessment**

ILOs 1-4 will be assessed by coursework – **100%**

### **Indicative Assessment Information**

Students will be required to investigate the reasoning and evidence to support the therapeutic use of a particular occupation or area of occupational therapy practice and present their findings in written format.

## **INDICATIVE CONTENT**

Appraise the complexities of theories and research and apply evidence-informed understanding of occupation to a changing society

Engage in reasoned debate in relation to occupation and occupational therapy in order to begin to evaluate the impact of intervention

Understand a range of clinical terms and language used in evidence supporting practice, synthesise theories from occupational science and other relevant bodies of knowledge to form the foundation of reasoned professional practice.

Models of professional reasoning and their application to practice

Understanding the concepts of clinical research, evidence based/informed practice, practice based evidence and professional reasoning.

Methods of sourcing evidence to inform occupational therapy practice and to support the review of literature.

Exploration of the range of evidence specifically applicable to occupational therapy and understanding what constitutes 'best' evidence in context..

Skills to evaluate the quality of a range of clinical evidence, discipline specific research and a critical understanding of the hierarchy of evidence and its applicability to service provision.

Learn how to create questions to guide investigation of the evidence for specific areas of practice.

The processes involved in evaluating practice using measures including audits, outcome measures and client service satisfaction questionnaires.

Role of professional reasoning in practice

Introduction to journal clubs to promote critical thinking discussion and debate skills on salient topics.

Experiential learning to discuss and debate clinical evidence and decision making in practice  
Reflect on the Level 4 placement and highlight areas for review of own practice in order to further develop clinical reasoning skills and promote working in partnership with individuals, groups and communities using occupation to promote participation, health and wellbeing.

The role of research in professional practice and need for research and professional reasoning in ethical practice.

Develop awareness of areas with limited evidence and under-researched areas of intervention.

Accepting the profession's ethical responsibilities towards clients and society and of being accountable to service users and employers.

Reflecting on and monitoring one's own performance and recognising the value of continuing professional development.

Recognising the need for quality service delivery, the importance of objectivity in the workplace and the value of practising in an evidenced-informed manner.

The use of evaluative practice methods including Critically Appraised Papers & Topics (CAPs & CATs).

#### **INDICATIVE KEY LEARNING RESOURCES**

Critical Appraisal Skills Programme (CASP): <http://www.phru.nhs.uk/pages/phd/casp.htm>

Dougherty, Deborah A.; Toth-Cohen, Susan E.; Tomlin, George S. (2016) Beyond research literature: Occupational therapists' perspectives on and uses of "evidence" in everyday practice. *Canadian Journal of Occupational Therapy* 83(5)

Greenhalgh, T. (2014) How to Read a Paper: the Basics of Evidence Based Medicine (5<sup>th</sup> edition). Oxford: Blackwell Publishing.

Higgs, J., Jones, M.A., Loftus, S., & Christensen, N. (eds). (2008). *Clinical Reasoning in the Health Professions* (3<sup>rd</sup> edn). London: Elsevier Butterworth Heinemann.

Higgs, J., Richardson, B., & Dahlgren, M.A. (eds) (2004). *Developing Practice Knowledge for Health Professionals*. Edinburgh: Butterworth-Heinemann.

Kristensen, Hanne Kaae; Petersen, Kirsten Schultz (2016) Occupational science: An important contributor to occupational therapists' clinical reasoning. *Scandinavian Journal of Occupational Therapy* 23(3)

Mattingly, C., & Fleming, M. (1994). *Clinical Reasoning: Forms of Inquiry in a Therapeutics Practice*. Philadelphia: F.A. Davis.

Mendez, L., & Neufeld, J. (2003). *Clinical Reasoning – what is it and why should I care*. CAOT Publications: Ottawa. [[http://umanitoba.ca/rehabsciences/media/Mendez-Neufeld-2003\\_-Clinical-Reasoning-what-is-it-and-why-should-I-care\\_\\_\\_\\_.pdf](http://umanitoba.ca/rehabsciences/media/Mendez-Neufeld-2003_-Clinical-Reasoning-what-is-it-and-why-should-I-care____.pdf)]

OTSeeker: <http://www.otseeker.com>

Robertson, L. (ed) (2012). *Clinical Reasoning in Occupational Therapy: Controversies in Practice*. Chichester: Wiley-Blackwell.

Schell, B.A.B., & Schell, J.W. (2008). *Clinical & Professional Reasoning in Occupational Therapy*. Baltimore: Lippincott, Williams & Wilkins.

Taylor, M.C. (2007). *Evidence-based Practice for Occupational Therapists (2<sup>nd</sup> edn)*. Oxford: Blackwell Publishing.

**Unit title: Research for professional practice**  
**Version: 3.1**

**Level: 5**

**Credit value: 20 (ECTS equivalent credit value 10)**

**Effective from September 2020**

**PRE AND CO-REQUISITES**

None

**AIMS:**

This Unit will build on the foundation studies undertaken in year one of the programmes in order to advance students' research and problem-solving skills to enable them to engage critically with evidence based practice.

Working in an interprofessional group, it will encourage students to

- explore the skills of designing research studies which can address real-life practice scenarios
- develop students' knowledge and critical awareness of a variety of research methods
- develop students' knowledge and understanding of appropriate methods of data collection and analysis

This is intended to reinforce their ability to appraise professional research literature and appreciate its' significance for practice.

**INTENDED LEARNING OUTCOMES:**

Having completed this unit the student is expected to:

1. Discuss the concepts underlying various methodological approaches to research in health and social work
2. Evaluate the research designs that may be used to answer specific research questions and discuss governance, ethics and service-user involvement in applied health and social research
3. Appraise the data collection and analysis methods employed within different approaches to research
4. Understand how to conduct and interpret qualitative and quantitative analyses by practising some simple data collection & analysis activity and reporting on it.

**LEARNING AND TEACHING METHODS:**

Blended learning to include:

- Lectures (live and on-line) and seminars
- Practical workshops including team-based learning
- Guided resources / reading for 'flipped classroom' learning
- Web based resources (including 'Brightspace' virtual learning environment [VLE])
- Journal Club



**ASSESSMENT:**  
**Summative Assessment**

Intended learning outcomes 1-4 will be assessed by an unseen examination (100%)

**Indicative Assessment**

The examination will comprise of an unseen paper requiring students to answer questions on research concepts underpinning professional research. In addition, students will bring the results of their qualitative and quantitative data analysis to the examination and will be required to answer specific questions on those data sets.

*To prepare for this examination, students will be given a simple qualitative data-set. The data-set will be analysed and interpreted individually by each student. In addition, each student will be provided with access to a quantitative data-set which will be analysed and interpreted using SPSS (or similar).*

**INDICATIVE CONTENT:**

Research concerns appropriate to both quantitative and qualitative methodologies, including:

- Philosophical underpinnings of research methodology
- Ethical issues in research and research governance including consideration of issues of power for service-users and research subjects/participants
- Sampling / piloting / power calculations
- Recruitment issues
- Validity, reliability, credibility, authenticity and allied concepts
- Generalisability, transferability and allied concepts

Quantitative methods, including:

- Surveys and longitudinal studies
- Questionnaire design
- Experimental and quasi-experimental designs
- Quantitative analysis, including statistical analysis and using SPSS

Qualitative methods, including:

- In-depth interviews
- Focus groups
- Observation
- Q-methodologies
- Qualitative analysis, including thematic, content, discourse and interpretivist approaches

## INDICATIVE KEY LEARNING RESOURCES:

In addition to the unit teaching, the unit has a 'Brightspace' VLE site containing unit information, additional relevant material, lecture notes, discussion boards and an extensive reference list. BU has sophisticated online research resources, including e-learning modules of study and these are also available through the VLE. The library staff actively contribute to the students' learning by running workshops on all aspects of literature searching and appraisal.

### Reading List:

Aveyard H (2007) *Doing a literature review in health and social care*, Maidenhead: Open University

Bowling A Ebrahim S (2005) *Handbook of health research methods*, Maidenhead: Open University Press

Denzin N Lincoln Y (Eds) (2005) *The SAGE handbook of qualitative research*, Thousand Oaks: Sage

Fox M, Martin P, Green G (2007) *Doing Practitioner Research*, London: Sage

Morse JM (1994) *Critical issues in qualitative research methods* Thousand Oaks: Sage Publications

Polgar S Thomas S (2004) *Introduction to research in the health sciences*, London: Elsevier

Pope C Mays N Popay J (2007) *Synthesizing qualitative and quantitative health research: a guide to methods*, Maidenhead: Open University Press

Robson C (2002) *Real world research*, Oxford: Blackwell

Saks M Allsop J (2007) *Researching health: qualitative, quantitative and mixed methods* London: Sage

Silverman D (Ed) (2004) *Qualitative research: theory, method and practice*, London: Sage

Sim J Wright C (2000) *Research in healthcare: concepts, designs and methods*, Cheltenham: Stanley Thornes

## **Promoting Health and Wellbeing**

**Version Number:** 2

**Level:** 5

**Credit Value:** 20 (10 ECTS equivalent credit value)

**Effective from:** September 2020

### **PRE AND CO-REQUISITES**

None

### **AIMS**

The aim of the unit is to make students aware of the skills and competences required to promote the holistic health and wellbeing of individuals, groups and communities within the UK and internationally. The focus will be on encouraging the development and delivery of non-judgemental, sensitive, health promotion and evidence based practice which aims to empower and support the rights and dignity of people throughout life and to develop the skills and knowledge required to work in partnership with other organisations and agencies.

### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Discuss the underpinning ideology and core principles of health promotion: participation, partnership working, collaboration, empowerment and equity.
2. Review the skills necessary to assess health needs and support people in identifying their own health needs, and recognise the importance of planning, implementation and evaluation to health promotion in the UK and internationally.
3. Appraise a range of current health promotion approaches and models from the psychosocial and sociocultural perspectives that may enable change for a person and/or community.
4. Demonstrate skills and knowledge required to seek out opportunities which promote and support client centred health choice

### **LEARNING AND TEACHING METHODS:**

A range of teaching and learning methods will be used within this unit including: Keynote lectures, interactive seminars, case study discussion, online material, podcasts, relevant reading, YouTube clips, DVDs.

## **ASSESSMENT:**

### **Summative assessment**

ILOs 1-4 will be assessed by 100% coursework.

### **Indicative Assessment Information**

It is expected that the coursework will comprise a written evaluation of the delivery of a strategy to improve health involving partnership working. Students will be required to critically discuss the role of partnership working in health promotion within their area of specialist practice; this will involve demonstrating an understanding of the theoretical and practical aspects of health promotion and of partnership working (3000 word equivalent).

### **Indicative Content**

Health promotion theory and promoting evidenced based health promotion.

Health promotion through the lifespan

Recognising the social determinants of health and health inequalities and reaching 'socially excluded groups'.

Principles of an empowering consultation

Emotional intelligence

Principles and practice of partnership working

Social and psychological factors in health promotion communication

Strategies and evaluation of communication in health promotion

A critical review of theoretical models and their use.

Using different environments settings to deliver health promotion: such as leisure centres, universities, day care and residential settings and healthcare establishments.

Critical review of information, health literacy, the use of IT and mass media.

Teaching and learning strategies, self-help, participatory learning methods, facilitating group work and group discussions.

Values within health promotion.

## **INDICATIVE KEY LEARNING RESOURCES**

### **Texts**

Corcoran, N. ed 2007 *Communicating Health* London: Sage.

Hubley, J and Copeman, J. 2008 *Practical Health Promotion*. Cambridge: Polity

Naidoo, J. and Wills, J. 2009 *Foundations of Health Promotion* London: Bailliere Tindall.  
Elsevier

Seedhouse, D. 2002 *Total Health Promotion. Mental health, Rational Fields and the Quest for Autonomy*. London: Wiley

### **Journals**

Health Promotion Practice

Critical Public Health

Journal of Public Health

### **Websites**

[www.publichealth.hscni.net](http://www.publichealth.hscni.net)

[www.who](http://www.who)

[www.nice](http://www.nice)

[www.gov.uk/government/organisations/public-health-england](http://www.gov.uk/government/organisations/public-health-england)

## **Occupational Therapy Placement BU2**

<b>Version Number:</b>	<b>2</b>
<b>Level:</b>	<b>5</b>
<b>Credit Value:</b>	<b>40 (20 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2020</b>

### **PRE-REQUISITES AND CO-REQUISITES**

Mandatory training undertaken via e-learning and with some practical skill elements, before attendance on placement. These would include: principles of health & safety; safeguarding children & vulnerable adults, manual handling, basic life support and infection control. Additional skills might include condition-specific techniques e.g. handling children with cerebral palsy or motivational interviewing for occupational engagement.

### **AIMS**

The aim of this ten-week unit is to provide a further opportunity for students to explore current professional practice and to demonstrate the skills, knowledge, professional values and expectations required in occupational therapy.

The unit will provide an opportunity to expose students to the occupational therapy culture including the profession's occupational vision, ethos and methods.

This particular period of study has a focus on practising as an occupational therapist under the guidance of an experienced educator. This will involve undertaking assessment or information gathering activity; intervention planning activity and implementation activity.

Students are supernumerary to the staff on the units in which they are placed.

### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Demonstrate considered application of underpinning theories, knowledge, legislation, professional standards for occupational therapy and clinical governance in occupational therapy practice.
2. Practise safely and effectively within the scope of practice as a student occupational therapist in the placement setting.
3. Practise and communicate in a professional, non-judgemental and ethical manner: respecting and acknowledging people as individuals.

4. Identify strengths and areas for improvement using a range of resources to inform their personal and professional development planning. Develop skills of reflection using personal and professional experiences of practice to inform future learning and development

## **LEARNING AND TEACHING METHODS**

The delivery of this fieldwork unit will take place in a variety of locations across Dorset, Somerset and Wiltshire. Providers of placement will be based in health or social care settings with some additional placements in schools, private and voluntary organisations. Each student will be attached to an experienced occupational therapist who will act as practice placement educator (PPE) for the entire period of study. Academic advisors will provide a link to the academic programme and will contact the student during the placement. Learning will be facilitated by placement educators.

A variety of learning and facilitation methods may include the following:

- Demonstration by the PPE and colleagues in the placement facility
- Supervised patient/client contact
- Staff and learner-led presentations
- Case presentations
- Ward rounds
- Attendance at clinics and opportunities to observe specialist treatments such as surgical interventions
- Departmental in-service programmes
- Support from placement educators and academic advisors.
- eLearning resources: 'Brightspace' VLE site.
- Learning resources in the practice area.
- Practice placement handbook.

## **ASSESSMENT**

### **Summative Assessment (10,000 word equivalent)**

ILOs 1-4 will be assessed by Practice Placement (100%)

### **Indicative Assessment Information**

Assessment of placement using University assessment template

## INDICATIVE CONTENT

Practice placement in clinical or social settings include the study of

- People and their narratives
- Occupations that are important in maintaining health and well-being
- Informing sciences that impact on service users' lives including bio-psycho-social and patho-physiological sciences
- Occupational therapy theories applied to the practice setting
- Assessment options (standardised and non-standardised) that may be applied to the practice setting
- Intervention strategies that can enhance service user & carers' lives in the practice setting
- The legislative and social policy context pertaining to the area of practice
- The (clinical) governance arrangements relevant to the practice location
- The evidence base – or current best practice – which is relevant to the service user group and practice area

## INDICATIVE KEY LEARNING RESOURCES

Alsop, A. and Ryan, S., 2003. *Making the most of fieldwork education: A practical approach*. Cheltenham: Stanley Thornes.

Andrews, J., 2000. The value of reflective practice: A student case study. *British Journal of Occupational Therapy* [online], 63 (8), 396-398.

Bryant, W., Fieldhouse, J. and Brannigan, K., eds., 2014. *Creek's Occupational therapy and mental health* [online]. 5<sup>th</sup> edition. Edinburgh: Churchill Livingstone/Elsevier.

College of Occupational Therapists, 2015. *Code of ethics and professional conduct* [online]. London: College of Occupational Therapists.

Cottrell, S., 2011. *Critical thinking skills: Developing effective analysis and argument* [online]. 2nd edition. Basingstoke: Palgrave Macmillan.

Cottrell, S. 2013. *The study skills handbook* [online]. 4th edition. Basingstoke: Palgrave Macmillan.

Creek, J., 2003. *Occupational therapy defined as a complex intervention*. London: College of Occupational Therapists.

Curtin, M., Molineux, M. and Supyk-Mellson, J., eds., 2010. *Occupational therapy and physical dysfunction: Enabling occupation* [online]. 6<sup>th</sup> edition. Edinburgh: Churchill Livingstone.

Duncan, E.A.S., 2009. *Skills for practice in occupational therapy* [online]. Edinburgh: Churchill Livingstone.

Duncan, E., 2012. *Foundations for practice in occupational therapy* [online]. 5<sup>th</sup> edition. Edinburgh: Churchill Livingstone.

Health and Care Professions Council, 2012. *Your guide to our standards for continuing professional development* [online]. London: Health and Care Professions Council.

Health and Care Professions Council, 2013. *Standards of proficiency - Occupational therapists* [online]. London: Health and Care Professions Council.

Health and Care Professions Council, 2016. *Guidance on conduct and ethics for students* [online]. London: Health and Care Professions Council.

Health and Care Professions Council, 2016. *Standards of conduct, performance and ethics* [online]. London: Health and Care Professions Council.

Healey, J. and Spencer, M., 2008. *Surviving your placement in health and social care: A student handbook* [online]. Maidenhead: Open University Press.

Higgs, J., Jones, M., Loftus, S. and Christensen, N., eds. 2008. *Clinical reasoning in the health professions* [online]. 3<sup>rd</sup> edition. Oxford: Butterworth Heinemann.

Hong C.S., Harrison, D., 2012. *Tools for continuing professional development*. 2nd edition. London: Quay Books.

Polglase, T. and Treseder, R., 2012. *The occupational therapy handbook: Practice education* [online]. Keswick: M&K Publishing.



## **BSc(Hons) Occupational Therapy**

### **Community Engagement in Occupational Therapy**

**Version number 1**

**Level 5**

**Credit value 20 (10 ECTS equivalent credit value)**

**Effective from September 2020**

#### **PRE-REQUISITES AND CO-REQUISITES**

None

#### **AIMS**

This unit further develops an appreciation of the relationship between occupation, health and well-being and the impact of occupational disruption in relation to the value of introducing or restoring opportunities for communities to participate in occupation. Identify the occupational needs of individuals, groups and communities and make informed judgements to identify opportunities to work in partnership with groups and communities using occupation to promote participation, health and wellbeing. It will combine academic study with an occupational and experiential approach.

Students will identify communities and their occupational needs, including the Student and University community; apply theory, research and understanding of socio-economic and political factors to identify appropriate activities for the facilitation of occupational engagement, respecting the relevant rights, needs and preferences of those involved. Identify a range of resources, organisations and potential funding to support community occupational engagement. This may include voluntary providers, charities and social enterprises.

Students will begin to formalise their personal and professional development through an emphasis on personal reflection as a key approach to learning.

#### **Intended learning outcomes (ILOs)**

Having completed this unit the student is expected to:

1. Critically analyse theoretical aspects and the practical application of relevant occupations to promote engagement and enhance the wellbeing of a chosen community.
2. Recognise the importance of collaborating with individuals, groups and communities to promote and develop the health and wellbeing of their members through participation in occupation
3. Identify and discuss the range of socio-cultural, political and economic factors that influence communities and occupational opportunities and engagement.

## **Learning and teaching methods**

Lectures and facilitated small group work will be used to develop understanding of key aspects of professional practice and to develop and debate ideas for community engagement. Students will be expected to engage with relevant and professional literature to further develop their understanding of concepts explored.

These formal approaches to learning will be supplemented by practical experiences which the students will undertake in small groups for example local volunteer agencies/charities/social enterprises, other non -government organisations.

Student learning will be supported by university resources and online learning via the 'Brightspace' VLE platform.

## **ASSESSMENT**

### **Summative assessment**

ILO's 1-3 will be assessed by 100% coursework

### **Indicative assessment**

An individual report on:

- The nature of the chosen community and rationale for engagement
- Information about the chosen community & the occupational engagement issues relevant to this group of people
- Cogent justification for the proposed occupation / activity-based project, including supporting evidence
- Critical appraisal of challenges potentially encountered including sustainability or ending of the project

### **Indicative unit content**

Students will consider theoretical aspects which underpin the relationship between occupation, health and wellbeing from a community perspective and the factors that facilitate or challenge participation in occupations. This will include:

- Theoretical concepts of occupational risks; such as occupational deprivation, marginalisation
- The influence/impact of socio-political factors on occupational opportunities
- Occupational analysis and influence of place
- Appreciation and respect of diversity, individual differences, cultural beliefs and customs and their influence on occupation and participation
- Creative and innovative approaches to practice to address occupational need(s).
- Considering the skills and attributes needed to advocate for the right of individuals, groups and communities to have their occupational needs met.

## **Indicative learning resources – see e-reading list for comprehensive list**

Cipriani, J., Haley, R., Moravec, E. and Young, H., 2010. Experience and meaning of group altruistic activities among long-term care residents. *British Journal of Occupational Therapy* [online], 73 (6), 269-276.

Cottrell, S., 2011. *Critical thinking skills: Developing effective analysis and argument* [online]. 2<sup>nd</sup> edition. Basingstoke: Palgrave Macmillan.

Cottrell, S., 2013. *The study skills handbook* [online]. 4th ed. Basingstoke: Palgrave Macmillan.

Creek, J., 2003. *Occupational therapy defined as a complex intervention*. London: College of Occupational Therapists.

Fieldhouse, J., 2003. The impact of an allotment group on mental health clients' health, wellbeing and social networking. *British Journal Of Occupational Therapy* [online], 66 (7), 286 – 296.

Glassman, U., 2009. *Group work: A humanistic and skills building approach* [online]. 2<sup>nd</sup> edition. Thousand Oaks, CA.: Sage.

Health and Care Professions Council, 2011. *Your guide to our standards for continuing professional development* [online]. London: Health and Care Professions Council.

Hong C.S. and Harrison, D., 2012. *Tools for continuing professional development*. 2nd edition. London: Quay Books.

Kottler, J.A. and Englar-Carlson, M., 2015. *Learning group leadership: An experiential approach*. 3<sup>rd</sup> edition. Thousand Oaks, CA.: Sage.

Pyatak, E. and Muccitelli, L. (2011) Rap Music as Resistive Occupation: Constructions of Black American Identity and Culture for Performers and their Audiences *Journal of Occupational Science*. 18(1)

Tokolahi, E., Em-Chhour, C., Barkwill, L. and Stanley, S., 2013. An occupation-based group for children with anxiety. *British Journal of Occupational Therapy* [online], 76 (1), 31-36.

Wensley, R. and Slade, A., 2012. Walking as a meaningful leisure occupation: the implications for occupational therapy. *British Journal of Occupational Therapy* [online], 75 (2), 85 – 92.

York, M. and Wiseman, M., 2012. Gardening as an occupation: a critical review. *British Journal of Occupational Therapy* [online], 75 (2), 76 – 84.

## **Research for Occupational Therapy Practice**

<b>Version Number:</b>	<b>2</b>
<b>Level:</b>	<b>6</b>
<b>Credit Value:</b>	<b>40 (20 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2021</b>

### **PRE-REQUISITES AND CO-REQUISITES**

None

### **AIMS**

This unit is largely self-directed and builds on knowledge and experience from previous units. Students will identify a specific area of research in practice and explore research approaches and outcomes in the published literature. They will debate the role of research and evidence in assuring quality and informing professional judgements.

Students will then have the opportunity to develop a detailed understanding of the research pertinent to this identified area of practice which is relevant to occupational therapy. They will relate research findings and propose a research study which will enhance the knowledge base for the profession.

### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Discuss the value of research to the critical evaluation of practice.
2. Create appropriate questions to underpin a thorough and critical review of the literature applied to a specific area of practice.
3. Undertake a thorough search for and critical evaluation of research literature pertinent to a chosen topic of relevance to occupational therapy.
4. Based on the evaluation of the research evidence, propose, design and justify an appropriate research study.

5. Discuss methodologies, approaches and methods commonly used in health and social care research, including ethical issues, the collection, interpretation and analysis of data and dissemination of findings.

## **LEARNING AND TEACHING METHODS**

Facilitated sessions will further explore core research and evidence-based topics. These sessions will be supported by a combination of action learning sets and self-managed learning, and will include access to on-line learning resources.

At this stage in the programme, it is appropriate for students to be self-managing their learning in order to showcase their burgeoning research skills and independent thinking.

## **ASSESSMENT**

### **Summative Assessment**

Intended Learning Outcomes 1 – 5 will be assessed by coursework (100%).

### **Indicative Assessment**

The assessment will take the form of a literature review, and research proposal, with appropriate appendices

## **INDICATIVE CONTENT**

- Critical reflection on the role and use of research in practice both in an ideal world and as experienced on practice placement.
- Creating appropriate questions to focus literature review.
- Critical appraisal of evidence and discussion of the appropriateness of different appraisal tools / methods.
- Integrating evidence findings, the concepts of meta-analysis, meta-ethnography and synthesis of research findings.
- Using research findings to influence practice, including how to make professional judgement when there may be insufficient evidence.
- The research process
- Research ethics principles and application to occupational therapy practice
- Research epistemology and “world views” that inform selection of research approach and methodology
- Data collection methods
- Data analysis, including statistical analysis and interpretation of qualitative findings.
- Dissemination strategies including communicating findings to end users.
- Critical discussion of research methods as used in health and social care research

## **INDICATIVE KEY LEARNING RESOURCES**

Aveyard, H., 2014. *Doing a literature review in health and social care: A practical guide* [online]. Maidenhead: Open University Press

Carpenter, C. and Suto, M., 2008. *Qualitative research for occupational and physical therapists: A practical guide*. Oxford: Blackwell.

Creswell, J.W., 2013. *Research design: Qualitative, quantitative, and mixed method approaches*. 4th edition. Thousand Oaks, CA.: Sage.

DePoy, E., & Gitlin, L.N., 2015. *Introduction to Research: Understanding and applying multiple strategies*. 5th edition. St Louis, MO.: Elsevier.

Greenhalgh, T., 2014. *How to read a paper: The basics of evidence-based medicine* [online]. 5th edition. Chichester: Wiley-Blackwell.

Hickson, M., 2008. *Research handbook for health care professionals* [online]. Oxford: Wiley-Blackwell

Kielhofner, G., 2006. *Research in occupational therapy: Methods of inquiry for enhancing practice* [online]. Philadelphia PA.: FA Davis.

Petticrew, M. and Roberts, H., 2006. *Systematic reviews in the social sciences* [online]. Oxford: Blackwell Publishing.

Robson, C. and McCartan, K., 2015. *Real world research*. 4th edition. Chichester: John Wiley.

Taylor, M.C., 2007. *Evidence-based practice for occupational therapists*. 2nd edition. Oxford: Blackwell.

## **Team Working for Service Improvement**

<b>Version Number:</b>	<b>2</b>
<b>Level:</b>	<b>6</b>
<b>Credit Value:</b>	<b>20 (10 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2021</b>

### **PRE-REQUISITES AND CO-REQUISITES**

None

### **AIMS**

The aim of the Team Working for Service Improvement Unit is to enable students to develop the skills of working in small inter-professional teams to design and develop a service improvement or product to enhance the experiences of people who use services and / or their carers. It is designed to give students 'exit-velocity' for team working as they embark on their first employment roles.

### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Analyse the need for changes that aim to improve a service or services offered to people and/or communities
2. Synthesise solutions to challenges that address the need for change and improvement
3. Participate effectively in teams in undertaking an innovation or improvement project
4. Critically reflect on the skills, values, attributes and knowledge required to undertake a service improvement project

### **LEARNING AND TEACHING METHODS**

In this unit students will work experientially in small, inter-professional, project groups (typically 6-7 students) to reflect on areas of professional practice or service delivery that need development. They will also analyse their own strengths and development needs in relation to working together. The unit uses tutor-facilitated small group discussions, web-based materials and guided reading, as well as lecture based sessions and web-based learning.

In doing this students will, in collaboration with stakeholders, identify an area that requires development. The chosen topic will be critically examined with reference to published literature and should, where appropriate, consider local, national and global perspectives on

the issue concerned. The product of each group's project will aim, directly or indirectly, to promote improvement in services or the well-being of individuals, groups or communities. The group will then present and defend the product to an invited audience. They will also be required to reflect on their learning throughout the process. A proportion of the marks may be peer allocated.

## **ASSESSMENT**

### **Summative Assessment (5,000 word equivalent)**

ILOs 1-4 will be assessed by coursework (100%)

### **Indicative Assessment Information**

Outcomes 1-4 will be assessed through a group presentation and defence of the project and its product (100%) including presenting a verbal self-reflection on their performance in the group

## **INDICATIVE CONTENT**

This is a student-led unit. The specific content/subject matter related to the area of investigation will be justified by the students in negotiation with their tutor/facilitator. Further, subject-specific content, related to the ILOs will be offered via appropriate electronic resources. The students will be directed to national policy documents which impact on service delivery and to learning resources linked to leadership and the management of change.

## **INDICATIVE KEY LEARNING RESOURCES**

1000 Lives Improvement, 2014. *The Quality Improvement Guide: The Improving Quality Together Edition*. Cardiff: 1000 Lives Improvement. Available from: <http://www.1000livesplus.wales.nhs.uk/sitesplus/documents/1011/Quality%20Improvement%20Guide%20-%203rd%20edition%20%28IQT%29%20WEB.pdf> [Accessed 27 July 2016].

Bach, S. and Ellis, P., 2015. *Leadership, Management and Team Working in Nursing*. 2<sup>nd</sup> edition. Exeter: Learning Matters/Sage.

Gopee, N. and Galloway, J., 2014. *Leadership and Management in Healthcare*. 2nd edition. London: Sage.

Hewitt-Taylor, J., 2013. *Understanding and Managing Change in Healthcare: a step by step guide*. Basingstoke, Palgrave Macmillan.

Huczynski, A. and Buchanan, D., 2013. *Organizational behaviour*. 8<sup>th</sup> edition. Harlow: Pearson.

le May, A., ed. 2009. *Communities of Practice in Health and Social Care*. Oxford: Blackwell.

Lucas, B. with Nacer, H., 2015. *The habits of an improver. Thinking about learning for improvement in health care*. London: Health Foundation. Available from:



<http://www.health.org.uk/sites/health/files/TheHabitsOfAnImprover.pdf> [Accessed 27 July 2016].

Martin, V., 2002. *Managing projects in health and social care*. London: Routledge.

McSherry, R. and Warr, J., eds. 2010. *Implementing Excellence in Your Healthcare Organization: managing, leading and collaborating*. Maidenhead: OUP.

### **Recommended Journals**

BMJ Quality Improvement Reports (<http://qir.bmj.com/>)

BMJ Quality and Safety (<http://qualitysafety.bmj.com/>)

Health Service Journal (<http://www.hsj.co.uk/>)

International Journal for Quality in Healthcare (<http://intqhc.oxfordjournals.org/>)

Journal for Healthcare Quality (<http://journals.lww.com/jhqonline/pages/default.aspx>)

Journal of Interprofessional Care (<http://www.tandfonline.com/toc/ijic20/current>)

Patient Experience Journal (<http://pxjournal.org/journal/>)

### **Useful Bournemouth House Library References**

Change management 658.406

Leadership and management 658.4

Organisational behaviour 302.35

Practice Development 610.73

### **Recommended Websites**

*1000 Lives Plus*: <http://www.1000livesplus.wales.nhs.uk/qi-guide> [Accessed 27 July 2016].

1000 Lives Improvement is the national improvement service for NHS Wales delivered by Public Health Wales. It is an excellent website and includes the following publication for students:

<http://www.1000livesplus.wales.nhs.uk/sitesplus/documents/1011/Student%20QI%20Guide%20WEB%20Second%20Edition.pdf>

## **Innovation in Occupational Therapy**

<b>Version Number:</b>	<b>2</b>
<b>Level:</b>	<b>6</b>
<b>Credit Value:</b>	<b>20 (10 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2021</b>

### **PRE-REQUISITES AND CO-REQUISITES**

None

### **AIMS:**

Students will explore innovations in occupational therapy practice and the future of occupational therapy. They will draw on and consolidate their understanding of the unique contribution of occupational therapy to individuals and communities. Students will develop their understanding of working across different sectors and appreciate wider economic and socio-political issues that impinge on the context of practice. Students will show leadership and initiative in proposing an innovation in service provision that is cognisant of change and is well argued and justified.

### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Critically evaluate the core philosophy, skills and unique contribution that Occupational Therapists may bring to a range of social and health settings.
2. Analyse the social policy and other socio-political influences that affect service delivery in a range of settings.
3. Demonstrate an appreciation of leadership theory, service planning and management and its importance in occupational therapy practice.
4. Propose and critically evaluate an innovation in occupational therapy practice.

### **LEARNING AND TEACHING METHODS**

The students will participate in facilitated Action Learning Sets, self-managed learning, on-line learning and fixed resource sessions. These fixed resource, face-to-face sessions will include exposure to clinicians and researchers to inspire and support their personal learning interests. There will be a range of on-line learning materials available to support their development of an innovation in practice. The Action Learning Sets will be used to allow students, with the support of a facilitator, to critically evaluate their own and their peers' work

to integrate core occupational therapy knowledge with deeper understandings of the socio-political and business contexts in which services function.

## **ASSESSMENT**

### **Summative Assessment**

Intended learning outcomes 1-4 will be assessed by coursework – **100%**

### **Indicative Assessment**

Students will present their innovation in OT practice in a power-point presentation at an end-of-year student conference. The presentation will be supported by a poster and an abstract will be published in a conference booklet.

## **INDICATIVE CONTENT**

Uniqueness of occupational therapy philosophy, values and core skills.  
Critical application of occupational therapy theory in new and novel areas of practice.  
Emerging and developing settings in which occupational therapists may work.  
Development of services in international health care arenas.  
Identification of the need for occupational therapy interventions in new client groups to promote health, wellbeing and occupational balance  
Working with families/carers/educators  
Management and leadership in occupational therapy  
Management theory, managerial skills, service planning, legislation and government policy.  
International and National Frameworks.  
Business planning skills and understanding how services are funded.  
Social and health policy and legislation that influences practice in the UK and internationally.  
Innovation theory and how innovation and entrepreneurship is important in contemporary occupational therapy.

## **KEY LEARNING RESOURCES**

Key Occupational Therapy texts as specified in handbook and texts from the previous units studied.

A range of materials will be available on Brightspace to support blended on-line learning, including resources on leadership, management, coaching and contemporary social policy.

As this unit focuses on new and developing areas of practice the list of learning resources will vary.

Creek, J. and Lawson-Porter, A. (eds). 2007. *Contemporary Issues in Occupational Therapy: reasoning and reflection*. West Sussex, UK: Wiley.

Department of Health, 2001. *Working together – learning together; a framework for lifelong learning for the NHS*. London: Department of Health.

Department of Health, 2002. *Shifting the balance of power*. London: HMSO.

Iwama, M., 2006. *The Kawa Model: Culturally Relevant Occupational Therapy*. Edinburgh: Churchill Livingstone.

Kronenberg, F., Simó Algado, S., and Pollard, N. (eds). 2005. *Occupational Therapy Without Borders: learning from the spirit of survivors*. Edinburgh: Churchill Livingstone/Elsevier.

Kronenberg, F., Pollard, N., and Sakellariou, D. (eds). 2011. *Occupational Therapy Without Borders: Volume 2: towards an ecology of occupation-based practice*. Edinburgh: Churchill Livingstone/Elsevier.

Martin, J., 2001. *Organizational behaviour*. 2<sup>nd</sup> Edition. London: Thompson Learning.

Molineux, M. (ed) 2004. *Occupation for Occupational Therapists*. Oxford, UK: Blackwell Publishing.

Pollard, N., Sakellariou, D., and Kronenberg, F. (eds) 2008. *A Political Practice of Occupational Therapy*. Edinburgh: Churchill Livingstone/Elsevier.

Thew, M., Edwards, M., Baptise, S., and Molineux, M. (eds) 2011. *Role emerging Occupational Therapy: maximising occupation-focused practice*. West Sussex, UK: Wiley-Blackwell.

Watson, R. and Swartz, L. 2004. *Transformation through Occupation*. London: Whurr.

Whiteford, G.E. and Hocking, C. (eds) *Occupational Science: society, inclusion, participation*. Oxford, Wiley-Blackwell.

## **Occupational Therapy Practice Placement BU3**

<b>Version Number:</b>	<b>1</b>
<b>Level:</b>	<b>6</b>
<b>Credit Value:</b>	<b>40 (20 ECTS equivalent credit value)</b>
<b>Effective from:</b>	<b>September 2021</b>

### **PRE-REQUISITES AND CO-REQUISITES**

Mandatory training undertaken via e-learning and with some practical skill elements, before attendance on placement. These would include: principles of health & safety; safeguarding children & vulnerable adults, manual handling, basic life support and infection control. Additional skills might include condition-specific techniques e.g. handling children with cerebral palsy or motivational interviewing for occupational engagement.

### **AIMS**

This unit shares 40 credits with Preparation for Professional Practice

The aim of this ten-week unit is to provide a further opportunity for students to consolidate their appreciation of current professional practice and to demonstrate the skills, knowledge, professional values and expectations required in occupational therapy at a level commensurate with the expectations of third year students.

The unit will provide an opportunity for students to fully immerse themselves in the occupational therapy culture including the profession's occupational vision, ethos and methods.

This particular period of study has a focus on practising as a proto-professional occupational therapist under the minimal guidance of an experienced educator. This will involve undertaking assessment or information gathering activity; intervention planning activity; implementation and evaluation activity. Additionally, students will be expected to fully understand the socio-political and legal context for their practice and to demonstrate their understanding of leadership and management in the practice context.

Students are supernumerary to the staff on the units in which they are placed.

### **INTENDED LEARNING OUTCOMES**

Having completed this unit the student is expected to:

1. Demonstrate consistent application of underpinning theories, knowledge, legislation professional standards for occupational therapy and clinical governance in occupational therapy practice.
2. Practise safely and effectively within the scope of practice as a student occupational therapist in the placement setting.
3. Practise and communicate in a professional, non-judgemental and ethical manner: respecting and acknowledging people as individuals.
4. Identify strengths and areas for improvement using a range of resources to inform their personal and professional development planning. Utilise skills of reflection using personal and professional experiences of practice to inform future learning and development.

## **LEARNING AND TEACHING METHODS**

The delivery of this fieldwork unit will take place in a variety of locations across Dorset, Somerset and Wiltshire. Providers of placement will be based in health or social care settings with some additional placements in schools, private and voluntary organisations. Each student will be attached to an experienced occupational therapist who will act as practice placement educator (PPE) for the entire period of study. Academic advisors will provide a link to the academic programme and will contact the student during the placement. Learning will be facilitated by placement educators.

A variety of learning and facilitation methods may include the following:

- Demonstration by the PPE and colleagues in the placement facility
- Supervised patient/client contact
- Staff and learner-led presentations
- Case presentations
- Ward rounds
- Attendance at clinics and opportunities to observe specialist treatments such as surgical interventions
- Departmental in-service programmes
- Support from placement educators and academic advisors.
- eLearning resources: 'Brightspace' VLE site.
- Learning resources in the practice area.
- Practice placement handbook.

## **ASSESSMENT**

### **Summative assessment**

ILO 1-4 will be assessed by 100% coursework

### **Indicative assessment**

Assessment of placement using University assessment template

### **Indicative unit content**

Practice placement in clinical or social settings include the study of

- People and their narratives
- Occupations that are important in maintaining health and well-being
- Informing sciences that impact on service users' lives including bio-psycho-social and patho-physiological sciences
- Occupational therapy theories applied to the practice setting
- Assessment options (standardised and non-standardised) that may be applied to the practice setting
- Intervention strategies that can enhance service user & carers' lives in the practice setting
- The evidence base – or current best practice – which is relevant to the service user group and practice area
- The legislative and social policy context pertaining to the area of practice
- The (clinical) governance arrangements relevant to the practice location
- The importance of sound management and strong leadership in providing safe, efficient and effective occupational therapy services

### **Indicative learning resources**

- Alsop, A. and Ryan, S., 2003. *Making the most of fieldwork education: A practical approach*. Cheltenham: Stanley Thornes.
- Andrews, J., 2000. The value of reflective practice: a student case study. *British Journal of Occupational Therapy* [online], 63 (8), 396-398
- Bryant, W., Fieldhouse, J. and Brannigan, K., eds., 2014. *Creek's Occupational therapy and mental health* [online]. 5<sup>th</sup> edition. Edinburgh: Churchill Livingstone/Elsevier.
- College of Occupational Therapists, 2015. *Code of ethics and professional conduct* [online]. London: College of Occupational Therapists.
- Cottrell, S., 2011. *Critical thinking skills: Developing effective analysis and argument* [online]. 2nd edition. Basingstoke: Palgrave Macmillan.

- Cottrell, S. 2013. *The study skills handbook* [online]. 4th edition. Basingstoke: Palgrave Macmillan.
- Creek, J., 2003. *Occupational therapy defined as a complex intervention*. London: College of Occupational Therapists.
- Curtin, M., Molineux, M. and Supyk-Mellson, J., eds., 2010. *Occupational therapy and physical dysfunction: Enabling occupation* [online]. 6<sup>th</sup> edition. Edinburgh: Churchill Livingstone.
- Duncan, E., 2012. *Foundations for practice in occupational therapy* [online]. 5<sup>th</sup> edition. Edinburgh: Churchill Livingstone.
- Duncan, E.A.S., 2009. *Skills for practice in occupational therapy* [online]. Edinburgh: Churchill Livingstone.
- Health and Care Professions Council, 2012. Your guide to our standards for continuing professional development [online]. London: Health and Care Professions Council.
- Health and Care Professions Council, 2013. *Standards of proficiency - Occupational therapists* [online]. London: Health and Care Professions Council.
- Health and Care Professions Council, 2016. *Guidance on conduct and ethics for students* [online]. London: Health and Care Professions Council.
- Health and Care Professions Council, 2016. *Standards of conduct, performance and ethics* [online]. London: Health and Care Professions Council.
- Healey, J. and Spencer, M., 2008. *Surviving your placement in Health and Social Care: A student handbook* [online]. Maidenhead: Open University Press.
- Higgs, J., Jones, M., Loftus, S. and Christensen, N., eds. 2008. *Clinical reasoning in the health professions* [online]. 3<sup>rd</sup> edition. Oxford: Butterworth Heinemann.
- Hong C.S., Harrison, D., 2012. *Tools for continuing professional development*. 2nd edition. London: Quay Books
- Polglase, T. and Treseder, R., 2012. *The occupational therapy handbook: Practice education* [online]. Keswick: M&K Publishing.



## **BSc(Hons) Occupational Therapy**

### **Preparation for Occupational Therapy Practice**

**Version Number:** 1

**Level:** 6

**Credit Value:** 40 (20 ECTS equivalent credit value)

**Effective from:** September 2021

### **PRE-REQUISITES AND CO-REQUISITES**

BU3 Practice Placement (shared credit)

### **AIMS**

The aim of this unit is to consolidate students' understanding of the expectations of a newly qualified Occupational Therapist, thus enabling students to make a smooth transition into professional practice. Students will be encouraged to explore and engage in strategies to support their continuing professional development, facilitating their progression towards becoming confident and proficient autonomous practitioners.

### **Intended Learning Outcomes (ILOs)**

Having completed this unit the student is expected to:

1. Demonstrate commitment to ongoing professional and practice development and respond to new developments and changing contexts
2. Critically reflect upon learning and development throughout the course
3. Critically evaluate and apply appropriate strategies for leadership and management of self, others, resources and services within the current context of Occupational Therapy practice
4. Demonstrate adherence to the HCPC Standards for Continuing Professional Development

### **Learning and teaching methods**

Learning and teaching on this unit will be supported by seminars, workshops, online resources and guided self-managed learning.

### **Assessment**

#### **Summative assessment**

ILOs 1-4 will be assessed by 100% coursework

### **Indicative assessment**

The indicative assessment for this unit is a reflective essay, CPD activity summary and Personal Development Plan

### **Indicative unit content**

- Critical reflection
- Personal and professional development
- CPD and lifelong learning
- Employment preparation
- Management of self and others
- Supervision
- Leadership

### **Indicative learning resources**

- Alsop, A., 2013. *Continuing professional development in health and social care: Strategies for lifelong learning* [online]. 2nd edition. Chichester: Wiley-Blackwell.
- Boniface, G. and Seymour, A., eds., 2012. *Using occupational therapy theory in practice* [online]. West Sussex, UK: Wiley-Blackwell.
- College of Occupational Therapists, 2010. *Code of continuing professional development* [online]. London: College of Occupational Therapists.
- College of Occupational Therapists, 2015. *Code of ethics and professional conduct* [online]. London: College of Occupational Therapists.
- College of Occupational Therapists, 2017. *Professional standards for occupational therapy practice* [online]. London: College of Occupational Therapists.
- Fook, J. And Gardner, F. 2007. *Practising critical reflection: A resource handbook* [online]. Maidenhead: McGraw-Hill/Open University Press.
- Ghaye, T. and Lillyman, S., 2010. *Reflection: Principles and practices for healthcare professionals*. 2<sup>nd</sup> edition. London: Quay Books.
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- Health and Care Professions Council, 2012. *Your guide to our standards for continuing professional development* [online]. London: Health and Care Professions Council.
- Health and Care Professions Council, 2013. *Standards of proficiency - Occupational therapists* [online]. London: Health and Care Professions Council.
- Health and Care Professions Council, 2016. *Standards of conduct, performance and ethics* [online]. London: Health and Care Professions Council.

- White, S., Fook, J. and Gardner, F., eds., 2006. *Critical reflection in health and social care* [online]. Maidenhead: Open University Press.

## 5. The student educational experience

This section describes the learning experiences available to you while studying Occupational Therapy at BU. Attendance is monitored at all sessions and it is expected that you attend timetabled sessions and meet with your group for group work as required. Some sessions are **mandatory**, typically these are skills sessions that you must complete. All mandatory sessions will be clearly marked as such on Brightspace.

Please see the guidance on Brightspace about reporting sickness or absence and report any absences promptly. Please also refer to the practice assessment document for reporting absence when on placement.

If you miss several sessions without notifying the University, you will be informed that your attendance is unsatisfactory and this may have implications for your studies. If you are struggling with attendance or think you may miss some sessions, please contact your academic advisor for support.

### 5.1 Lecture-based learning

Traditional lecture-based education is used in the programme. While this sometimes involves delivery of core information, more frequently lectures are used to discuss the application of material to practice, following specific self-managed learning tasks. It is envisaged that lectures are interactive, involving students actively to promote understanding and application of the material in question.

- Come prepared to lectures: read the information about the session on Brightspace and if there is suggested or required pre-reading or self-managed learning, be sure to do it. You will get a lot more out of the sessions if you are well prepared.
- Come to sessions with questions, having done your preparatory work, think about how you can apply the material to practice or case-studies and feel free to ask questions.

- If you don't understand something, ask! If there are things that you don't understand, make a note of them so that in your self-managed learning time after the session you can look the information up.
- Write a few points as a summary of the information and how you can apply it to practice to help with your note-keeping.

## 5.2 On-line learning

The virtual learning environment used at Bournemouth is called Brightspace. All units in the occupational therapy programme have a dedicated unit space on Brightspace. Unit leaders use this area in a variety of ways including: use of interactive learning resources such as blogs, wikis and discussion boards; as an online repository for learning resources and session materials and to engage students with formative quizzes.

Additional on-line learning resources are also utilised or in development, for example videos of the utilisation of assessment tools and additional materials to guide CPD and reflective practice.

- Become familiar with Brightspace, both your units and the communities, such as the Occupational Therapy community. There are a lot of resources available on Brightspace so it is well worth spending time getting used to navigating around it. If you need more support, ask the library and learning support staff.
- Find the library resources on Brightspace, see how the reading resources in each unit on Brightspace link to the library so you can often get an e-book directly through the unit.
- Do review the resources available and take part in the formative quizzes and other tools to support your learning.
- Find and use the discussion board for each assignment.
- Whenever you have difficulties accessing on-line resources or submitting assignments on-line, contact the IT service desk first as they will log your problem and are most likely to be able to help you quickly.
- Review the social media guidelines in the Occupational Therapy community so that you can be sure that you are upholding the HCPC and RCOT standards of ethics and professional behaviour when on-line.

### **5.3. Skills based experiences**

The BSc programme will retain the current skills development through the three years of the course. This includes developing professional skills and competencies linked to the Knowledge and Skills Framework while in placement. Each placement unit develops work covered in the previous year, both in terms of practice placement education and skills elements.

Whilst students learn clinical and interpersonal skills in placement you will also be introduced to many aspects of these in a safe environment through simulated activities. Such simulation activities are included in units of study where they are linked to theory and practice content or to mandatory training. Simulation offers the opportunity for rehearsal and can incorporate reflective learning of techniques to develop student awareness, competence and person centred approaches.

Many such activities will take place in a practice simulation suite where resources are available and where the environment can simulate a variety of settings for scenario based exercises. Others may offer the opportunity to role-play processes such as interview, using assessment tools and setting goals with individuals. On-line resources are also available through web-based packages.

By these two methods student skills learning is supported both at the clinical placement level and at the in-course occupational therapy theory and practice level.

## **Mandatory Training**

Mandatory training will form a part of the portfolio unit for each year where each element will be overseen by either by the course or placement educator, as appropriate. Timings of the training will ensure that students have received the appropriate training or updates to cover placement for each year in line with the UK Core Skills Framework (UKCSF) (Skills for health 2018).

Training will cover the following areas:

Conflict resolution is addressed as the primary step in breakaway training which will continue to be offered to occupational therapy students on an annual basis.

Breakaway training also equips the students for working with challenging individuals and for lone working in the community (HCPC SETS 3.11). Training is organised by the Faculty of Health and Social Science (HSS) and is provided by a local NHS Trust.

Health and Safety training forms part of the student induction, manual handling training and infection control training. (Health and Safety at Work Act 1974).

Resuscitation forms part of basic life support training which will be given on an annual basis as part of a mandatory training day early in the academic year based on online resources and a practical session.

Equality, Diversity and Human Rights is addressed primarily via online training and thereafter re-enforced as an aspect of all areas of study (Equality Act 2010).

Infection Prevention and Control forms part of the mandatory training for all three years via online resources.

Safeguarding training for both children and adults is addressed in the first semester of study as part of an inter-professional education (IPE) study day and thereafter reintroduced as an aspect of all areas of study with children and vulnerable groups within the curriculum.

Fire safety is the responsibility of the placement educator as part of the student induction appropriate to the setting and also forms part of the online mandatory training.

Moving and Handling forms part of the manual handling training given within the first year of study as a practical session designed to cover safety issues, techniques and basic assessment (Health and Safety Act 1974). All three year groups are required to complete online moving and handling training.

Attendance at training days is mandatory and monitored through the use of the sign in systems and reviewed by the academic advisors.

### **Legislation and guidance:**

Children's Act 2004

Health & Social Care Act 2012:

Health and Safety at Work Act 1974

Mental Capacity Act 2005

The Safeguarding Vulnerable Groups Act 2006.

Department of Health 2000. No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse.

Health and Safety Executive 1995. Reporting Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR).

NHS Security Management Services. 2004 Conflict Resolution training;

Implementing the National Syllabus.

UK Core Skills Framework 2018

## **5.4 Problem based learning**

*"To be educated is not to arrive at a destination; it is to travel with a different view."*

(R.S. Peters 1981)

As part of the diverse learning approaches used throughout the course, problem-based learning (PBL) and enquiry-based learning (EBL) have continued to



accommodate the diverse learning needs and learning preferences of our equally diverse undergraduate students. Current and past students have provided positive feedback emphasising the usefulness of these learning approaches to develop the skills required to be a life-long learner and for solving the complex issues and challenges experienced by their service users. Students in all the health and social care professions must acquire skills and attitudes that will enable them to respond positively and adaptively to the opportunities and challenges of continual change. These OT students acknowledged the ever changing knowledge base of their profession and the changing health and social care setting in the UK and beyond and because of this, the self-discovered and self-appropriate learning through PBL/ EBL was highly valued.

Traditional problem-based learning (PBL) is process – oriented, utilising a seven step/ jump approach which facilitates students to use and develop the problem solving skills required to address a set problem situation. This will be used in some in the first and second year units, OT in Action 1 and OT in Action 2. The use of a case study EBL approach aims at facilitating the development of basic analytical and critical thought skills, as well as laying the foundation for the cooperative and self-directed learning which is not only part of adult learning at University but also of life-long learning for competent Occupational Therapy practice.

These approaches are essentially self-managed by the students using both group and individual study and discussion time and require only direction and monitoring from staff once students are practised in the approach.

- Prepare well for PBL sessions: the better prepared you are, the more you will learn from the approach.
- Familiarise yourself with the steps in the PBL process (available in Brightspace). In PBL, the process is as important as the end product, so make sure you have completed each step really thoroughly before moving on to the next.
- Aim for depth of your discussion and make your learning objectives specific enough and relevant to your own learning needs.
- PBL is a group process: use the time to develop your group skills, listen to others and give feedback in a supportive, tactful way.

## **5.5 Action learning sets and small group learning**

Action learning sets and other forms of small group work are used throughout the programme. Action learning sets are particularly used in the third year of the BSc, where students work together to apply information from self-managed learning and lecture sessions to their own individual areas of work. Students are required to prepare for these sessions, share their work and critique others work. A supportive environment is created for students to develop their reasoning skills, guided by a member of the academic team.

## **5.6 Appeals and complaints**

The programme team welcome constructive criticism and there are many ways that you can work with us to improve the quality of the programme, such as:

- Providing mid-unit feedback when asked, highlighting the parts you like, things you want to change and new ideas. This is called the MUSE survey.
- Completing the end of unit evaluation form.
- Responding to your class representatives' call for feedback for the team.
- Meeting with individual lecturers to discuss your specific concerns.

Alongside these general feedback processes, there are appeals and complaints procedures within the University. You have the right to appeal decisions if you feel that due process was not followed, and should seek support to appeal or complain. You may speak to a member of the programme team or askBU, who will support you with appeals or complaints.

## **6. Practice Placement Education**

Placements are an integral part of the OT course at BU. All students must successfully undertake in excess of the 1,000 hours of placement hours as required by the World Federation of Occupational Therapists (WFOT 2002) and have experience across a range of services, including in-patient and community-based

services in a variety of clinical areas. If a placement is failed, the hours completed in that placement do not contribute to the total number of placement hours. Students are only allowed one resit attempt at a failed placement.

## **6.1 Placement opportunities in Dorset, Somerset, Salisbury (Wiltshire) and Southampton (Hampshire).**

Placements are organised in a broad range of settings mainly within the rural counties of Dorset and Somerset. Salisbury NHS Foundation Trust in Wiltshire also provides placement experiences including the Duke of Cornwall Spinal Injuries Unit, the Burns and plastics unit and Wessex Rehabilitation unit, unique facilities within the South West. Southampton General Hospital provided acute setting placements.

In addition to the more 'standard' placements within NHS and Social Care settings, placements are also available within charitable organisations and privately run services.

Role Emerging Placements may be facilitated in the third year and provide a breadth of experience working in settings where there is no current OT provision (e.g. Age UK – charity) or where it is a very new or unusual area of OT practice (e.g. peri-natal mental health).

The combination of placement opportunities available to students with the length of time spent in placement gives a robust range of experiences enabling them to develop and consolidate their skills.

## **6.2 Structure of practice placements**

*Table 2: Structure of practice placements*

Year	Placement	Assessment
Level 4 (Year 1)	1-week orientation placement	Not assessed, formative feedback
	6-week placement	Assessed
Level 5 (Year 2)	10-week placement	Assessed
Level 6 (Year 3)	12-week placement	Assessed

If a placement is failed, there will be an opportunity to re-do (resit) the placement in a similar area of practice. This normally takes place over the summer months if a placement is available. Any hours accrued during a placement which is then failed will not be counted towards the 1000 hours. The 1000 hours must be from assessed, passed placement hours. There is only one opportunity to resit a failed placement.

If you experience any difficulties on placement, it is really important that you contact your academic advisor as early as possible, so that strategies to support your learning can be put in place. There is further guidance about this in the practice assessment document.

### **6.3 Allocation of placements**

At the very start of the programme, you will be asked to complete an information sheet describing your circumstances and preferences for practice placement. For example, you will be asked if you drive a car, have access to a car to use on placement, whether you have child-care or other commitments close to home. Please make sure you complete this as fully as you can and make sure the practice education tutor and your academic advisor are updated of any changes to your circumstances. Being a car driver is a very big advantage given that many of our placement sites are rural and there is inadequate public transport.

A placement allocation plan is created each year for the following academic year. We then aim to confirm the individual placements with the PPEs approximately several weeks before each placement starts allowing time to seek additional placements where necessary.

Placements are then allocated to students in a meeting involving the students' academic advisors and the placement education tutor. This ensures to the best of our ability that students' individual needs are taken into account and matched with the placement requirements (e.g. if a car driver is required). The allocation meeting may need to take place more than once in order to finalise placement provision changes and student requirements.

We aim to inform students of their placement allocation information approximately three to four weeks prior to a placement commencing. You will have access to an online system which provides essential information about the placement. The online placement information system also provides a record of completed placements, hours accrued and placement evaluation forms at the end of each placement.

You will have a placement briefing session before each placement and a de-briefing session afterwards. These are essential for placement preparation and also being able to learn from each other's experiences.

## **6.4 Role emerging placements**

Students need to have expressed an interest in having a placement in this setting and additional work prior to the placement commencing is sometimes required in order to give you time to identify areas of project work during the placement.

Students may be sent in pairs or as individuals depending on the nature of the placement and the degree of support they will receive. Students can be given Occupational Therapy supervision either from within the university teaching team or from an Occupational Therapist in practice who has experience related to the setting.

## **6.5 Marking Guidelines**

Placements are assessed using criteria laid out in the Practice Assessment Document which has to some extent been based on the Knowledge and Skills Framework (KSF) from the NHS. There are eight competency areas each with their own intended learning outcomes. The expectations of how a student meets these

ILOs changes each academic year. Students are given written formative feedback at halfway and are given summative feedback at the end of the placement which consists of written feedback and a classification for each of the eight areas. The placement educator then gives an overall percentage for the placement based on the spread of classifications.

The benefits of the placements being marked is that BSc students graduating from Bournemouth University have a degree classification that consists of both academic marks as well as marks from practice.

## **7. Student journey and support**

This section describes a range of supports and resources available to you while at BU. Please do contact askBU, your academic advisor or seek further information on the student portal or Brightspace.

You will be allocated an academic advisor from the occupational therapy team. Ordinarily, you will retain the same academic advisor throughout your studies. Your academic advisor is often the first point of contact for you; they will monitor your academic progress and provide pastoral support. It is strongly advised that you make time to meet with your academic advisor in the first term and at least once a year thereafter. Many students meet their academic advisor once per term.

Students are also able to access a wide range of support provided by the university.

- Student support and engagement is an approach to developing student resilience and independence, helping learners to reach their full potential. This is achieved by incorporating a wide range of developmental opportunities and mechanisms from across the university into a coherent whole and by underpinning our interactions with students with coaching behaviours. You can meet up with the student support and engagement co-ordinator for HSS if you would like further information or support.

- Additionally students in the first and second years of the BSc programme are supported by second and third year Peer Assisted Learning (PAL) Leaders. The aims of this university wide scheme are to help students adjust to university life and course expectations, to develop independent learning and study skills and to enhance their subject knowledge through discussion.
- Alongside this, the course team are committed to incorporating Peer Education into the curriculum where practical. This is where students from later years support their fellow students or peers on other programmes with aspects of their learning.
- askBU is a one-stop-shop drop in and telephone service to deal with students enquiries.
- HSS has a dedicated student educational development tutor who provides workshops and one-on-one sessions on aspects of academic skills. Library and Learning Support additionally provide similar opportunities for developing skills around accessing and analysing information, developing information technology skills and presentation skills.
- The Students' Union (SUBU) support students through the provision of a wide range of social, volunteering and personal development opportunities.
- Students also have access to an on-site GP, counselling (student wellbeing) and chaplaincy services as required.
- Specific support for students with additional learning needs is available through the additional learning support service (ALS).

## 8. Assessment

### 8.1 Assessment Requirements

Each unit has a formal assessment and, in order to progress and eventually graduate, all units must be passed. A range of assessment methods and types are used in the programme, including case-study essays, reports, oral presentations, group tasks, skill demonstrations and practice placement.

Each assessment must be completed and submitted, as per the guidance in each unit. The assignment brief and a discussion board are in the assessment tab of each unit on Brightspace.

Non-submission or late submission (without an agreed extension) results in a mark of 0% being awarded, as per the assessment regulations (see *6L - Assessment Board Decision-Making, including the implementation of assessment regulations: procedure*).

Each assignment requires reference to a range of academic sources of information. These should be referenced accurately in all cases. Information on [citing references](#) including the BU Guide to Citation in the Harvard style are available on Brightspace as is information on [avoiding academic offences](#). See also policy *6H - Academic Offences: Policy and Procedure for Taught Awards*.

Each unit will be marked using both the generic grade descriptors for the appropriate level and the intended learning outcomes for the unit. In each assignment, you need to demonstrate that you have met the intended learning outcomes, which can be found in the unit specifications and within the unit information tab on Brightspace. At each level, there are descriptors of the characteristics of a 1<sup>st</sup>, 2.i, 2.ii and so on. These are also available in the Assessment tab for each unit on Brightspace.



## 8.2 Assessment Schedule

This schedule is subject to change, so should be used as an indication only of the types and times of the assessments in the programme. Exact submission types and dates are available on Brightspace.

Level	Unit	Assessment type	Submission type	Submission time
4	Becoming an Occupational Therapist	Case-study essay	On-line submission	End semester 1
	Foundations for Professional Practice and Research	Group project	Group presentation	End semester 1
	Skills for Occupational Therapy Practice	Practical	Practical	End semester 1
	Occupational Therapy in Action 1	Case-study presentation	Oral presentation	End semester 2
	Analysing Occupation	Activity analysis report	On-line submission	End semester 2
	Occupational Therapy Placement BU1	Practice placement	Placement OPAL	End of year
5	Occupational Therapy in Action 2	Case-study presentation	Oral Presentation	End semester1
	Reasoning for Occupational Therapy Practice	Written assignment	On-line submission	End semester 1
	Exploring Evidence to Guide Professional Practice (IPE)	One online test	Computer-based exam	Semester 2
	Promoting Health and Well-Being (IPE)	Group report	On-line submission	Semester 2
	Community Engagement in Occupational Therapy	Individual report	On-line submission	Semester 2

	Occupational Therapy Portfolio 2	Practice Placement (60%)	Placement (PAD)	End of placement
		CPD Portfolio (40%)	On-line submission	End of year
6	Research for Occupational Therapy	Literature review and research proposal	On-line submission	End semester 1
	Service Improvement Project (IPE)	Group presentation	Group presentation	Semester 2
		Reflective log	On-line submission	Semester 2
	Innovation in Occupational Therapy	Poster presentation at conference	Oral presentation	End semester 2
	Preparation for Professional Practice	Reflective essay	On-line submission	End semester 2
	Occupational Therapy Practice Placement BU3	Practice placement (100%)	placement OPAL	End of placement

### 8.3 Extensions and Mitigating circumstances

If there are personal or health issues that are impacting your ability to complete assessment work, contact your academic advisor in the first instance. S/he will be able to guide you to the range of supports available.

If the issue is temporary or if there is a longer-term issue affecting your performance, it may be possible to get an **extension** following provision of evidence for a duration agreed by the unit lead and academic advisor. In some exceptional circumstances you can submit **mitigation** for consideration by the Board of Examiners. This may mean that you can submit work as a first attempt, i.e. it would not be capped.

Please see policy *6J - Mitigating Circumstances including Extensions: Policy and Procedure* which outlines how to request an extension or exam postponement, or Assessment Board consideration of circumstances (This policy is currently under review for the academic year 2018/19).

It is strongly advised that you keep regular contact with your academic advisor and notify them of any circumstances that may affect your performance. For extensions, please contact the unit leader as soon as possible. **Extensions cannot be granted on the day of submission.**

## 8.4 Assessment Regulations

The regulations for this programme are the University's Standard Undergraduate Assessment Regulations (Scroll down the page to the heading 'Assessments' and you will find the regulations are the first document that appears when you click on the link)

<http://studentportal.bournemouth.ac.uk/help/rules-regulations/index.html>

with the following approved exceptions which align the programme with the requirements of the Health and Care Professions Council and the Royal College of Occupational Therapists.

### **Pass Mark:**

Where a unit contains an assessment element defined as practice, a pass will be awarded where the overall unit mark is at least 40% and the mark in each separate element of the unit assessment is not less than 40%. Where a practice element has separate components, a fail in any one component will result in a mark of 0% being awarded for that element.

For the Exploring Evidence to Guide Professional Practice (EE2GPP), a pass will be awarded where the overall unit mark is at least 40%.

For the Service Improvement Project, a pass will be awarded where the overall unit mark is at least 40% and the mark in each separate element of the unit assessment is not less than 40%.

**Compensation:**

Compensation does not apply to any units.

**Provision for failed candidates:**

The Assessment Board will permit a student who fails each placement unit at the first attempt, to be reassessed on one occasion only. Further repeat attempts for each placement unit are not permitted.

**Awards:**

To be eligible for the award of BSc (Hons) Occupational Therapy, students must have achieved 360 credits and have successfully completed a minimum of 1,000 hours of practice.

The award of BSc (Hons) Occupational Therapy leads to eligibility to apply for registration with the Health and Care Professions Council and to apply for professional membership of the College of Occupational Therapists.

CertHE, DipHE, BSc and Aegrotat awards including BSc (Hons), will not confer eligibility to register and will be titled 'Rehabilitation Studies'.

**Complaints and Appeals:**

The Bournemouth University Academic Regulations, Policies and Procedures (ARPP) Section 11 includes clear guidance on the student complaints and appeals policies and procedures.

## **8.5 External examiners**

The BSc (Hons) Occupational Therapy programme has one external examiner who supports the team to ensure that the assessments are being marked fairly, that the standards in BU are equivalent to those in other programmes and that the information provided to you about assessment is appropriate.

The external examiner for occupational therapy can be found in the community page on Brightspace. This information is for transparency only, you should not contact the external examiner directly. If you have a complaint or comment about the assessment process, please use the complaints procedure or contact the programme team directly.

## **9. Programme management**

The programme is managed and delivered by a team that includes several registered occupational therapists, supported by the Faculty and University administrative structures. There is a named professional lead who is an HCPC-registered occupational therapist. Staff have a range of clinical and academic expertise to effectively deliver the course. Close links with practice partners also enables expertise in specific areas of practice to contribute to the student educational experience. All lecturers are fellows of the Higher Education Academy and work to the HEA Professional Standards Framework (2011), thus engage in continuing academic development. Registered occupational therapy staff are involved in continuing professional development, some of which relates to their academic role and some to occupational therapy practice.

On-going management of resources and quality assurance methods are undertaken, in line with BU's standard regulations and in order to meet the HCPC Standards of Education and Training and RCOT's pre-registration education standards. Internal quality monitoring includes internal annual monitoring, unit monitoring, student feedback and maintenance of an on-going action plan.

The occupational therapy programme team are:

Dr Bernadette Waters	Principal Lecturer, Programme Lead
Dr Saffron Scott	Senior Lecturer, Professional Lead
Dr Juliette Truman	Senior Lecturer, Practice Placement co-ordinator
Helen Ribchester	Lecturer in Occupational Therapy, Admissions co-ordinator
Andrea Hasselbusch	Senior Practice Fellow in Occupational Therapy
Marta Glowacka	Lecturer
Dr Tongai Chichaya	Lecturer in Occupational Therapy

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