October 2014

Physiotherapy Pain Association in collaboration with the Chartered Society of Physiotherapy

Physiotherapy framework – entry level graduate to expert

Describing the values, behaviours, knowledge & skills of physiotherapists working with people in pain

A resource to promote and develop physiotherapy practice

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Declarations

Emma Bartlett is a co-facilitator for Pain Training and Education on the Cognitive Behavioural Approach for Physiotherapists

Zara Hansen provides training courses on the Cognitive Behavioural Approach to health professionals.

No other declarations made

PPA October 2014

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Glossary

- **Acceptance and Commitment Therapy (ACT)** *is a cognitive behavioural therapy. A key component of ACT is that pain and suffering are a normal and unavoidable part of most human experience and that it is the attempt to control and avoid such experiences that leads to more long-term suffering. It differs from traditional cognitive behavioural therapy in that instead of teaching people to control their thoughts, feelings and actions, ACT encourages nurtures more flexible patterns of behavior in the presence of physical and emotional distress.*

- **Cognitive Behavioural Approach (CBA)** *CBT interventions for specific problem areas (e.g. concordance training; relapse prevention work in people with a diagnosis of Schizophrenia; identification of symptoms and specific CBT intervention in postpartum depression; anger management groups, anxiety management groups, pain management etc.). This is not a form of psychotherapy as the health workers are implementing a technical intervention, they are not required to formulate and adapt the treatment. [The health workers will have received training in specified CBT interventions for particular problem areas, and should be receiving supervision from a CBT psychotherapist.] (see appendix 1 for case studies differentiation CBA and CBT)*

- **Cognitive Behavioural Therapy (CBT)** *is a talking therapy that can help an individual manage their problems by changing the way they think and behave. CBT cannot remove the underlying problems, but can assist in managing them in a more positive way. It encourages individuals to examine how actions can affect thoughts and feelings. (see appendix 1 for case studies differentiation CBA and CBT)*

- **Compassion-Focused Therapy (CFT)** *can teach individuals how to feel compassionate to themselves and others. Compassion involves empathy - being able to understand one's own and other people's feelings - and being caring, accepting and kindly tolerant of distress in self and others. Clients are helped to explore how early negative experiences may relate to ongoing fears, safety strategies, and unintended consequences. Clients are helped to practice exercises to detect self-criticism and then refocus compassionately by creating and practicing feelings and thoughts that are kind, supportive and encouraging, and noticing mindfully how this helps them.*

- **Clinical Therapeutic Self** - *the ability to use theory, experiential knowledge, and self-awareness, and to explore one's impact on others within a clinical setting*.

- **Cognitive behavioural approach** - *The cognitive approach is an area of psychology that focuses on mental processes, perception, and language as a way of explaining and understanding human behavior and encompasses a number of specific techniques*

- **Descriptors** - *words or phrases used within a record to identify the core components of an area or sub-topic*

- **Domains** - *the scope of a subjects sphere of influence*

- **Fear avoidance** - *People who suffer from chronic pain are typically found to be more anxious and fearful of pain than those who do not. A fear of further pain can lead to avoidance behavior, which over time, leads to deconditioning (e.g. decreased mobility, weight gain). This in turn leads to further pain experiences, negative expectancies, and strengthened avoidance. It is the reciprocal relationship between fear and avoidance that is thought to be responsible for maintaining pain behavior and disability.*

- **Framework** - *underlying set of ideas, principles, agreements, or rules that provides the basis or outline for something intended to be more fully developed at a later stage*

- **Interdisciplinary team** - *a group of health care professionals from diverse fields who work in a coordinated fashion toward a common goal for the patient.*

- **Mindfulness** - *refers to a psychological quality that involves a non-elaborative, nonjudgmental, present-centered awareness in which each thought, feeling, or sensation that arises in the attentional field is acknowledged and accepted as it is.*

- **Motivational interviewing** – *focuses on exploring and resolving ambivalence and centers on motivational processes within the individual that facilitate change. The method differs from more "coercive" or externally-driven methods for motivating change as it does not impose change (that may be inconsistent with the person's own values, beliefs or wishes); but rather supports change in a manner congruent with the person's own values and concerns.*

- **Multidisciplinary team -** *a team of professionals including representatives of different disciplines who coordinate the contributions of each profession, which are not considered to overlap, in order to improve patient care.*

- **Neuropathic** - *Neuropathic pain is defined by the International Association for the Study of Pain (IASP) as pain arising as a direct consequence of a lesion or disease affecting the somatosensory system.*

- **Pacing** - *the act or process of regulating or changing the timing or intensity of activity, in this context to maximise productive functional ability without exacerbating unnecessary levels of uncontrollable pain*

- **Self-disclosure** - *the process by which one person lets his or her inner being, thoughts, and emotions be known to another*.

- **Stay with distress** – *the willingness or otherwise to remain directly engaged with a patient and their distress within a therapeutic contact*

- **Values-based decision-making** - *starts with identifying the values that are most important to an individual, at work and at home, and understanding the beliefs that support these values, as well as identifying the behaviours that demonstrate that one is living these values.*
- **Vocational rehabilitation -** *the process which enables persons with functional, psychological, developmental, cognitive and emotional impairments or health conditions to overcome barriers to accessing, maintaining or returning to employment or other useful occupation*

Section 1 - Introduction

1.1 Introduction
This document was developed in collaboration between the Physiotherapy Pain Association and the Chartered Society of Physiotherapy. This work has taken the CSP's Physiotherapy Framework and focused on the qualified practice levels, applying them to describe the values, behaviours, knowledge & skills used by physiotherapists working with people in pain.

This document is a resource that will be used, in the future, to develop descriptors of competence. These descriptors will function to appraise performance and ability. It was felt by the working group that this document should be completed first in order to help ensure that all future work in the development of competencies is robust.

This document describes levels of expertise in areas of practice; these are not intended to be equated to Agenda for Change bandings or job titles. It is not intended that any clinician should aim for the expert level of practice across all domains, as this would be unrealistic and unnecessary. Therefore, an individual will practice at different levels in different domains, depending on a number of variables, for example, their role, their patient population, their experiences and training and their access to appropriate support.

This document is divided into three sections:
1. Definition of physiotherapy & physiotherapy practice with people in pain

2. Structure of the framework:
This section explains how the domains & descriptors within the framework work together to describe physiotherapy practice

3. Physiotherapy values, behaviours, knowledge & skills for physiotherapists working with people in pain
Tables that describe the behaviours, knowledge & skills used by the physiotherapy workforce at four different levels of practice

The condensed version of the CSP's physiotherapy framework is available to download from CSP website at http://www.csp.org.uk/professional-union/careers-development/career-development/professional-frameworks

An ePortfolio workbook to help members self-evaluate their practice against the framework descriptors is now available for members to use in the CPD Resources workspace of the CSP's ePortfolio system (http://www.csp.org.uk/professional-union/careers-development/cpd/csp-eportfolio/my-eportfolio/cpd-resources).

1.2 Definition of physiotherapy

This definition is based on sources[1,2] that present a picture of contemporary physiotherapy practice. This definition presents a picture of what the behaviours, knowledge and skills described by the framework look like in practice.

Physiotherapy is a healthcare profession that works with people to identify and maximise their ability to move and function. Functional movement is a key part of what it means to be healthy. This means that physiotherapy plays a key role in enabling people to improve their health, wellbeing and quality of life.

Physiotherapists use their professional knowledge and practical skills, together with thinking skills and skills for interaction in their day-to-day practice. This combination of knowledge and skills means that practitioners can work in partnership with the individual and other people involved with that person. Physiotherapists recognise that physical, psychological, social and environmental factors can impact on movement, function and quality of life. They use their knowledge and skills to identify what is limiting an individual's movement and performance, and to help individuals decide how to address their needs.

Physiotherapy's values means that practice is person-centred, ethical and effective. The evidence-base underpinning physiotherapy is constantly evolving as practitioners develop new knowledge and understanding through critical reflection, evaluation and research. This evolving evidence base supports the use and development of physiotherapy's scope of practice. The Royal Charter gives physiotherapy a broad scope of practice that includes manual therapy, exercise and movement, electrotherapy and other physical approaches.

Physiotherapy is an autonomous profession. This means that physiotherapists can accept referrals for assessment from a range of sources: from an individual themselves (self-referral) or from other appropriate people involved with that individual. Physiotherapy can offer a range of interventions, services and advice to improve individuals' health and wellbeing. Physiotherapy works to maximise an individual's movement capability at three different levels. It can help maintain and improve the body's movement and function by offering treatment when someone is acutely ill in hospital. It can also improve someone's function and independence (at home, at work) by offering rehabilitation and advice. It can also enhance their performance and participation (in their community and wider society) by offering advice and by challenging the environmental or social barriers that limit participation.

Physiotherapy's strong clinical leadership and adaptable workforce means that it can deliver high quality innovative services that are accessible, effective and efficient. Physiotherapy maintains strong links between clinical and academic settings. This means that the profession responds to developments in practice, education or research, and actively ensures its workforce continues to be fit for purpose.

1.3 Physiotherapy for people in pain

Pain is frequently associated with substantial emotional distress, disruption in physical and social functioning, and reduction in quality of life [3, 4, 5]. It is also associated with tremendous costs in terms of healthcare utilization and lost productivity and poses substantial challenges for clinical management[4]. The International Association for the Study of Pain [6] define pain as ''an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage.'' The causes and consequences of pain are complex and multifactorial. Pain remains difficult to assess, investigate, treat and manage. However, our understanding and clinical practice have improved dramatically over the last 30 years in which innovative models, theories, tools and techniques for assessing , investigating and treating pain and pain related disability have been developed and existing ones refined . Evidence and best practice continue to evolve and as they do, the knowledge and skills required by physiotherapists treating adults with pain continue to develop in both breadth and depth.

This is an ambitious document, seeking to encompass the work done by physiotherapists working in varied clinical roles, in different settings and medical specialties, some of which might require them to: request investigations; inject; prescribe; conduct complex assessments including questions regarding suicidal ideation and intent and interpretation of questionnaire and other data; to clinically reason and make sense of complex information from a variety of sources; to plan, monitor, modify and skillfully carry out a range of treatment techniques; to effectively engage with complex and very distressed and disabled patients who have pain despite having tried reasonable treatments; to support patients to come to terms with the chronicity of their symptoms, to respond in more helpful ways to their pain and to lessen the impact that pain and its related suffering is having on their lives. These clinicians will utilise knowledge of and expertise in applying a cognitive behavioural approach either as a uniprofessional or as part of a multi or interdisciplinary team. Therefore current clinical practice of physiotherapists working with people in pain frequently goes beyond that which was traditionally felt to be a physiotherapist role. It is essential for the safety of patients and the protection of the clinician that physiotherapists working with people in pain receive the appropriate training, support and clinical supervision to ensure that they are practicing within their individual professional and personal competence.

In addition to clinical practice, physiotherapist are engaged at various levels in pain related policy and practice development, in curriculum development and delivery, in setting research agendas and conducting research and in service development and delivery.

2.1 Structure of the framework

Physiotherapy is made up of many different elements (or sets of behaviours, knowledge & skills) - all essential to practice. No one element can be defined as *the* 'active ingredient' that makes practice effective. The individual elements that make up practice ultimately influence one another - a real example of the whole being greater than the sum of its component parts. This idea has informed the structure & content of the physiotherapy framework.

Figure 1: structure of physiotherapy framework showing how individual elements work together to produce physiotherapy practice

A review of the literature and reflection on contemporary physiotherapy practice suggests that physiotherapy practice is made up of four different elements:

i. Physiotherapy values
At the heart of physiotherapy practice is a set of values that are shared by all CSP members - regardless of their occupational role, practice setting, or level of practice. These values inform the behaviour of CSP members, & the knowledge (theoretical & applied) & skills that the physiotherapy workforce uses & develops.

ii. Physiotherapy knowledge
The theoretical knowledge required for physiotherapy practice. Physiotherapy knowledge shapes, & is shaped by the profession's constantly evolving scope of practice. Although an individual's knowledge base will be shaped by the demands & context of their practice, physiotherapists must demonstrate how their knowledge & understanding relates to physiotherapy & their individual scope of practice.

iii. Physiotherapy practice skills
The practical (psychomotor) skills used by the physiotherapy workforce. In order to apply physiotherapy-specific practice skills, physiotherapy values & knowledge are required. Without physiotherapy values & knowledge, physiotherapy-specific practice skills of exercise & movement, manual therapy, electro-physical modalities & other physical approaches become nothing more than a physical technique. The physiotherapy workforce also uses practical skills/techniques such as First Aid or Manual Handling that are shared with other groups of staff that work in the health & wellbeing economy. As with physiotherapy knowledge, an individual's skill-base will evolve according to their experiences & context of practice, but practitioners must demonstrate how their skills relate to physiotherapy & their personal scope of practice.

iv. Generic behaviours, knowledge & skills
As well as its physiotherapy values, knowledge & practice skills, the physiotherapy workforce also requires generic knowledge & skills. These are behaviours, knowledge & skills used by all practitioners working in the health & wellbeing economy. The physiotherapy workforce uses these sets of generic behaviours, knowledge & skills to apply its physiotherapy values, knowledge & practice skills to maximise individuals' potential – through its clinical, educational, leadership & research practice. This element is subdivided: behaviours, knowledge & skills for interaction; & behaviours, knowledge & skills for problem solving & decision-making.

2.2 Describing roles in practice
The structure of the Physiotherapy Framework is designed to help individuals recognise/describe the behaviours/knowledge/skills they use as part of their day-to-day physiotherapy practice. Although the behaviours/knowledge/skills presented in the framework are shared across the physiotherapy workforce, how they are used in practice will vary depending on what an individual's practice is at any given time.

Table 1 shows how 3 different roles that are part of physiotherapy practice draw on different sets of behaviours/knowledge/skills. Mapping practice in this way is useful to show how different aspects of an individual's role draw on specific sets of behaviours/knowledge/skills.

Framework domain	Conducting a physiotherapy assessment	Supporting someone else's development as a mentor	Leading a team to evaluate & redesign a service
Physiotherapy values	✓	✓	✓
Knowledge & understanding of physiotherapy	✓	✓	✓
Political awareness		✓	✓
Self-awareness	✓	✓	✓
Physiotherapy practice skills	✓		
Communicating	✓	✓	✓
Helping others learn & develop		✓	
Managing self & others	✓	✓	✓
Promoting integration & teamwork			✓
Putting the person at the centre of practice	✓	✓	✓
Respecting & promoting diversity	✓	✓	✓
Ensuring quality	✓	✓	✓
Improving & developing services			✓
Lifelong learning	✓	✓	✓
Practice decision making	✓	✓	✓
Researching & evaluating practice			✓
Using evidence to lead practice	✓		✓

Table 1: using the Physiotherapy Framework domains to describe roles in practice

As these examples illustrate, the Physiotherapy Framework can be used to highlight how a particular set of behaviours, knowledge & skills transfer from one role to another, & what elements make one role distinct from another. This function of the framework enables it to move beyond the task-based focus of existing competency frameworks.

The Physiotherapy Framework can therefore be used to:
- deconstruct practice to recognise & celebrate personal strengths & highlight potential learning/development needs.
- recognise how specific sets of behaviours, knowledge & skills transfer from one area of practice to another.
- build a picture of individual/departmental/organisational profile of the physiotherapy workforce.

2.3 Levels of practice
Although all the elements/domains within the framework are shared by the physiotherapy workforce, across all levels of practice, in different occupational roles & practice settings, some domains are more highly developed in some contexts of practice than in others. A review of the literature & descriptors used to design programmes of education suggests that progression from one level of practice to the next reflects a change in 3 different dimensions: complexity; predictability; sphere of influence; which together inform the extent of an individual's personal autonomy. The relationship between these dimensions is presented in Figure 2.
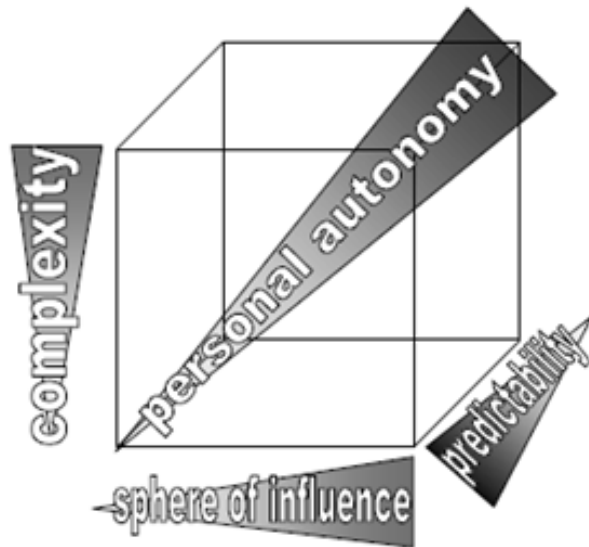

Figure 2: relationship between practice dimensions

For this version of the framework, domains are described at four levels on a continuum from graduate entry level (newly qualified physiotherapist) to expert. An individual's progression through & across the levels will depend on their access to & engagement with personalised learning & development opportunities.

Graduate level practice is sub-divided into two levels to show how a newly qualified physiotherapist's practice evolves during the early years of their career. The early experiences of new graduates will have a lasting effect on their future professional practice & commitment to physiotherapy. Evidence also highlights the emotional rollercoaster ride experienced by new entrants as they work to consolidate their existing behaviours/knowledge/skills & develop a deeper understanding of physiotherapy's ways of working. The key factors differentiating the 'entry-level' & 'experienced' graduate is a growth in the individual's confidence & competencies, which is gained from applying their knowledge & skills in a supported clinical environment. The divisions within graduate level demonstrate the added value of providing a supportive working environment, processes & resources to support an individual's transition from student to qualified staff.

Expert level practice works within complex, unpredictable & normally specialised contexts that demand innovative work that may involve extending the current limits of knowledge. Practice at this level therefore provides opportunities to have a broader sphere of influence (e.g. through professional leadership or consultancy roles), & the complex/unpredictable nature of the practice carries high levels of personal autonomy.

The level descriptors within the physiotherapy framework were developed using descriptors used to design programmes of education. 'Entry-level graduate' practice reflects the descriptors associated with a Bachelor degree, while 'advanced' & 'expert' practice reflect the descriptors associated with Masters & Doctoral level study respectively.

2.4 Presentation of the definitions and descriptors

Each of the seventeen domains, except for the values domain, is presented as a set of tables. The main table is structured and colour-coded to make it easier to follow. The left hand column defines the domain, with the rest of the table describing what the domain looks like at the four different levels of practice.

FRAMEWORK ELEMENT				
DOMAIN TITLE				
Domain descriptors	entry-level graduate	experienced graduate	advanced	expert
Definition of the domain Description of the specific behaviours, knowledge & skills	Individual level descriptors that describe what the behaviours, knowledge & skills look like at a particular level of practice			

The domains have been mapped to a set of six other competency frameworks relevant to the practices of the physiotherapy workforce:

- Department of Health (2004) Knowledge & Skills Framework
- Skills for Health (2008) Career Framework
- NHS Leadership Academy (2011) Leadership Framework
- Public Health Resource Unit/Skills for Health (2008) Public Health Skills & Career Framework
- Joint Negotiating Committee for Higher Education Staff (2004 – amended Jan 2005) Academic role profiles
- VITAE (2011) Researcher Development Framework

2.5 Mapping physiotherapy framework domains against other competency frameworks relevant to physiotherapy practice (summary).

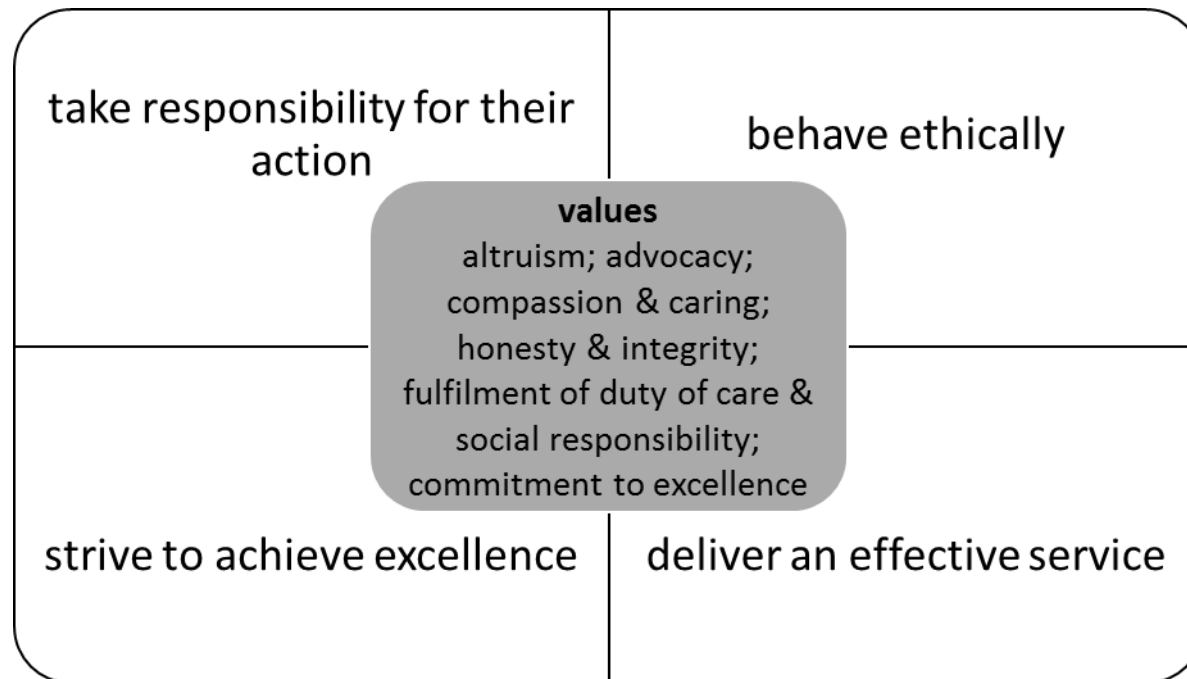|	DoH (2004) NHS KSF	Healthcare careers (SfH 2008)	Clinical Leadership (NHSLA 2011)	Public health (PHRU, 2008)	JNCHES (academic)	VITAE (research)
Knowledge & understanding of physiotherapy		✓		✓	✓	✓
Political awareness	✓	✓	✓	✓	✓	✓
Self-awareness			✓	✓	✓	✓
Physiotherapy practice skills	✓	✓				
Communicating	✓	✓	✓	✓	✓	✓
Helping others learn & develop	✓	✓	✓	✓	✓	
Managing self & others	✓	✓	✓	✓	✓	✓
Promoting integration & teamwork	✓	✓	✓	✓	✓	✓
Putting the person at the centre of practice	✓	✓	✓	✓	✓	
Respecting & promoting diversity	✓	✓	✓	✓	✓	✓
Ensuring quality	✓	✓	✓	✓	✓	✓
Improving & developing services	✓	✓	✓	✓	✓	✓
Lifelong learning	✓	✓	✓	✓	✓	✓
Practice decision making	✓	✓	✓	✓	✓	✓
Researching & evaluating practice	✓	✓	✓	✓	✓	✓
Using evidence to lead practice	✓	✓	✓	✓	✓	✓

SECTION THREE

This section presents the domain and level descriptors of Physiotherapy behaviours, knowledge and skill for physiotherapists working with people in pain

3.1 Values

Values are defined as a set of ideals that motivates & informs an individual's behaviour & actions. The nature of values means that, unlike the other domains in the framework, they cannot be described at different levels.

The values at the heart of the Physiotherapy Framework are shared by all CSP members; regardless of their occupational role, practice setting or level of practice. They are fundamental to the CSP's expectation of members' professionalism (www.csp.org.uk/code).

take responsibility for their action

behave ethically

values
altruism; advocacy;
compassion & caring;
honesty & integrity;
fulfilment of duty of care &
social responsibility;
commitment to excellence

strive to achieve excellence

deliver an effective service

Altruism is included within the core values of physiotherapy with a definition as described in the glossary. Altruism however has a number of definitions as ascribed to professional histories. It is important to note that where psychological approaches are being used that longevity of career depends of the ability of the professional to sustain practice in the face of high levels of distress and exposure to trauma histories and suicidality. It should be noted that appropriate use of supervision and clinician self-care are important to ensure these features do not become unmanageable.

As the figure shows, these values underpin the behaviours, knowledge & skills used by the physiotherapy workforce in their day-to-day professional practice.

3.2 PHYSIOTHERAPY KNOWLEDGE				
Knowledge and understanding of physiotherapy	entry-level graduate	experienced graduate	advanced	expert
Demonstrate knowledge and understanding of acute and chronic pain and its management. Including : • neurophysiology of pain including peripheral and central nervous system mechanisms • biopsychosocial assessment methods • diagnostic skills including differential diagnosis and awareness of red flags • knowledge of and referral for appropriate diagnostic tests including imaging • the structure and function of the human body • health, disease, disorder and dysfunction, • the role of other professions in health and social care • the application of epidemiological science to physiotherapy practice including risk factors for the development of pain and prognostic indicators for the development and maintenance of chronicity and pain related disability • understanding the pain impact on an individual relevant to their cognitions, emotions and behavioural responses and how this influences assessment and management at an individual level • the application of behavioural science to physiotherapy practice including psychological, social & cultural factors and their influence upon health, health status and response to health interventions. This may include victims of torture and abuse • the obstacles to behaviour change	practise within complex & generally predictable contexts which requires the application of current physiotherapy knowledge working to consolidate the knowledge gained from qualifying physiotherapy programme demonstrate a knowledge and understanding of pain mechanisms an awareness that experiences of pain are influenced by psychosocial factors	practise within complex & unpredictable contexts which require the application of current physiotherapy knowledge continuing to consolidate the knowledge gained from qualifying physiotherapy programme, and post-graduate training & learning how that knowledge transfers from one area of practice to another demonstrate a knowledge and understanding of pain mechanisms and how they function in a range of pain conditions demonstrate an understanding of the ways in which psychosocial factors can function in the perception of pain	practise within complex & unpredictable contexts which demands innovative work which may involve exploring current limits of knowledge a systematic understanding of knowledge, much of which is at, or informed by, the forefront of professional practice demonstrate an in depth understanding of pain mechanisms and the responses of people to pain demonstrate an understanding of the complex and overlapping influences of thoughts, emotions and body sensations and how they influence behaviour	practise within complex, unpredictable & normally specialised contexts demanding innovative work which may involve extending the current limits of knowledge a systematic acquisition & understanding of a substantial body of knowledge which is at the forefront of professional practice demonstrate an in depth understanding of pain mechanisms and the responses of people to pain demonstrate a comprehensive understanding of the complex and overlapping influences of thoughts, emotions and body sensations and how their influence on behaviour is contextually controlled

• theories of communication relevant to effective interaction with service users, carers, colleagues, managers and other health and social care professionals • understanding of development and ageing and the reciprocal impact of pain • theories of team working and team dynamics an understanding of the relationship between health and work/ worklessness including the obstacles associated with remaining in/ returning to work for those experiencing pain	an awareness of the role of physiotherapists in pain management and how this role links to other healthcare professionals	an awareness of the clinicians involved in the management of acute and chronic pain	an awareness of the role of primary, secondary and tertiary care services, the team members within these	an awareness of the role of primary, secondary and tertiary care services, the team members within these and the patents most suited to each of these resources
	seek out and observe/ receive training and/or appropriate support from psychologists and/or experienced colleagues and pain clinicians, in keeping with the needs of the patient population	seek out and observe/ receive training and/or appropriate support and supervision from psychologists and/or experienced colleagues and pain clinicians in keeping with the needs of the patient population	seek out and observe/ receive training and/or supervision from psychologists and/or experienced pain clinicians	seek out and observe/ receive training and/or supervision from psychologists and/or experienced pain clinicians
	demonstrate an awareness of the roles and responsibilities of other professionals	demonstrate an awareness and an integrated pattern of working with other professionals	demonstrate a heightened awareness of professional and inter-professional boundaries	practicing beyond the usual scope of physiotherapeutic practice
	demonstrate awareness of current clinical developments and best practice	demonstrate critical awareness of current clinical developments and best practice	demonstrate a critical awareness of current problems, and/or new insights through application of research or advanced scholarship techniques relevant to their area of practice	create & interpret new knowledge, through original research or other advanced scholarship, of a quality to satisfy peer review, extend the forefront of the discipline, & merit publication
	demonstrate clinical reasoning based on assessment findings	demonstrate clinical reasoning based on assessment findings including biopsychosocial	demonstrate clinical reasoning based on assessment findings including nuances of	demonstrate clinical reasoning based on assessment findings and nuances of complex

		issues	biopsychosocial issues	biopsychosocial issues
	entry-level graduate	experienced graduate	advanced	expert
Self-awareness A conscious knowledge and understanding of one's self, which is developed through reflective practice. *Self-awareness* describes the behaviour, knowledge and skills required to: • identify personal values, preferences and ways of working (e.g. likes and dislikes; strengths and weaknesses; emotions and prejudices; personal scope of practice), and understand how these can affect the clinician behaviours, judgements, and practice • recognise and manage personal stress / distress, especially in the context of working with a caseload complex patients (e.g. distressed and disabled) • seek training, practical and emotional advice and support and clinical supervision, as appropriate	demonstrate self-awareness by using reflection on personal practice & feedback from others to identify & articulate their personal values, preferences & ways of working, & with guidance, analyse how these may influence behaviour, judgement & practice	demonstrate self-awareness by using reflection on personal practice & feedback from others to identify & articulate their personal values, preferences & ways of working, & with guidance, evaluate how these may influence behaviour, judgement & practice	demonstrate strong self-awareness by using critical reflection on personal practice & feedback from others to identify & articulate their personal values, preferences & ways of working, & critically evaluate how these may influence behaviour, judgement & practice	demonstrate strong self-awareness by using critical reflection on personal practice & feedback from others to identify & articulate their personal values, preferences & ways of working, & critically evaluate how these may influence behaviour, judgement & practice

	entry-level graduate	experienced graduate	advanced	expert
Political awareness Knowledge and understanding of the political, social, economic and institutional factors shaping the health and wellbeing economy and how they inform the design/ delivery of physiotherapy. *Political awareness* describes the behaviour, knowledge and skills required to: • identify the political, social, economic and institutional factors influencing the delivery and organisation of health and social care and the design, delivery and development of physiotherapy	knowledge of the political, social, economic & institutional factors shaping the health & wellbeing economy & how they inform the delivery of physiotherapy across the UK	knowledge & understanding of the political, social, economic & institutional factors shaping the health & wellbeing economy & how they inform the design & delivery of physiotherapy across the UK	critical awareness of the political, social, economic & institutional factors shaping the health & wellbeing economy & how they inform the current & future design, delivery & professional development of physiotherapy at a local & regional level	critical awareness of the political, social, economic & institutional factors shaping the health & wellbeing economy & how they inform the design, delivery & professional development of physiotherapy across the UK
• engage with the implementation and development of policy affecting practice with people in pain • Specific awareness of the interplay between employment status, benefits dependency, litigation/compensation, housing issues etc. and the model of recovery	participate in professional networks & relevant discussions to inform the implementation & development of policies specific to physiotherapy practice with people in pain	contribute to the work of professional or policy networks, relevant discussions & provide feedback to inform the implementation & development of policies relevant to professional practice with people in pain	play an active role in a variety of professional & policy networks that inform the implementation & development of policies relevant to professional practice with people in pain	play an active role in a wide variety of professional & policy networks that inform the development of policies that influence the shape the future of professional practice with people in pain

3.3 PHYSIOTHERAPY PRACTICE SKILLS

	entry-level graduate	experienced graduate	advanced	expert
Profession-specific practice skills These relate to physiotherapy's scope of practice and primary aim of maximising individuals' movement potential and functioning.	working to consolidate & refine the performance of complex skills gained from qualifying physiotherapy programme	perform complex skills consistently with confidence & a degree of co-ordination & fluidity, learning how those skills transfer from one area of practice to another	demonstrate technical mastery of complex skills within unpredictable contexts	demonstrate technical mastery of complex skills within unpredictable & normally specialised contexts
Clinical Therapeutic Self: • active listening, empathy, mirroring skills, motivational interviewing and behaviour change techniques • patient group work	modify a technique in response to feedback (e.g. from a patient, peer, supervisor)	becoming increasingly self-aware of when/how to modify a technique & less dependent on feedback from others	modify a technique in-action	subconsciously modify a technique in-action
Psychological and Behaviour approaches: • a broad range of psychological models and interventions and their role in the management of persistent pain problems and facilitating behaviour change (e.g. CBT; ACT; motivational interviewing)	evaluate own performance	evaluate own & others' performance	evaluate own & others' performance in unpredictable contexts	evaluate own & others' performance in unpredictable & normally specialised contexts
	demonstrate use of biopsychosocial assessment skills	demonstrate biopsychosocial assessment skills, modifying according to patient presentation	demonstrate biopsychosocial assessment skills for complex presentations, modifying according to patient presentation including risk assessment of deliberate self-harm under supervision	demonstrate biopsychosocial assessment skills for complex presentations, modifying according to patient presentation and including risk assessment of deliberate self-harm seeking supervision where appropriate
• practice should be consistent with the model adopted at any given time and with colleagues from own and other profession (e.g. the methodology, purpose, progression and outcome of common pain rehabilitation techniques such as pacing or graded exposure may be different depending on the model adopted) • integration of biological and psychological approaches in physiotherapy practice	demonstrate assessment to exclude serious pathology	demonstrate assessment to exclude serious pathology	demonstrate assessment to exclude serious pathology	demonstrate assessment to exclude serious pathology
	demonstrate awareness of psychological models as applied in pain management	demonstrate understanding of psychological models as applied in pain management	demonstrate the delivery of physiotherapy treatments that are consistent with psychological models	deliver physiotherapy approaches that are consistent with psychological models in a skilled and responsive manner

• facilitation of patients' understanding of pain mechanisms • goal setting • sleep strategies • activity management • flare-up management • identification of obstacles for successful behaviour change including strategies to overcome modifiable obstacles and prevention of relapses • health promotion • vocational rehabilitation • contextual understanding of fear avoidance, values-based decision-making • the conceptual shift of moving from strategies of pain control to strategies facilitating increased meaningful living, with pain. • shared decision making and expectation management **Physical Strategies:** • selection and application of appropriate manual therapies e.g. mobilisation, manipulation • exercise and movement including the application of exercise physiology and progression management • kindred approaches (e.g. acupuncture, injection therapy, pharmacology • medication prescribing *Generic practical and technical skills*:	ability to explain basic pain mechanisms to a patient	ability to explain pain mechanisms to a patient, challenging their beliefs about the relationship between pain and damage	ability to explain pain mechanisms to a patient, challenging their beliefs about the relationship between pain and damage, conveying the complex multifactorial influences and consequences of pain	ability to explain pain mechanisms to a patient, challenging their beliefs about the relationship between pain and damage, conveying the complex multifactorial influences and consequences of pain
	demonstrate ability to assist patients to set goals	demonstrate ability to assist patients to set values linked goals	demonstrate ability to assist patients to set values linked goals with attention to barriers	demonstrate ability to assist patients to set values linked goals with attention to barriers, working with them to develop flexibility in response
	demonstrate awareness of sleep hygiene and factors which influence quality of sleep	demonstrate awareness of sleep hygiene and physical and psychological factors which influence quality of sleep	demonstrate awareness of and ability to assist patients to modify sleep related behaviours in the presence of physical and psychological factors	demonstrate awareness of and ability to assist patients to modify sleep related behaviours in the presence of complex physical and psychological factors
	demonstrate an awareness of the impact of activity patterns on pain experience	demonstrate an awareness of the complex impact of activity patterns on pain experience	demonstrate an awareness of the complex impact of activity patterns on pain experience and influences on patient's activity related habits	demonstrate an awareness of the complex impact of activity patterns on pain experience and influences on patient's activity related habits, working to generate flexible responses
	demonstrate an awareness of the factors which may result in a pain flare-up	demonstrate an awareness of the physical, psychological and social factors which may result in a pain flare-up and strategies that could be employed to minimise the impact of the flare-up	demonstrate an awareness of the complex physical, psychological and social factors which may result in a pain flare up and strategies that could be employed to minimise the impact of the	demonstrate an awareness of the complex physical, psychological and social factors which may result in a pain flare-up and the strategies that could be employed to minimise the

			flare-up, assisting the patient in identifying their own flare-up risk factors and management strategies	impact of the flare-up working to generate flexible responses in assisting the patient to identify their own flare-up risk factors and management strategies
These practical and technical skills are shared with other workers in health, social care and education. This may include the choice and use of outcome measures, audit of service provision and monitoring and evaluation of patient experience and referrer/ stakeholder satisfaction	demonstrate an awareness of the factors that will influence a patient to engage with and continue a pain self-management approach	demonstrate an awareness of the psychological, social and cultural factors that will influence a patient to engage with and continue a pain self-management approach	demonstrate an awareness of the complex psychological, social and cultural factors that will influence a patient to engage with and continue a pain self-management approach and assist the patient in identifying strategies to overcome modifiable obstacles	demonstrate an awareness of the complex psychological, social and cultural factors that will influence a patient to engage with and continue a pain self-management approach working to generate flexible responses in assist the patient in identifying strategies to overcome modifiable obstacles
	demonstrate an awareness of the importance of use of outcome measurement, service audit and stakeholder satisfaction evaluation. Able to administer chosen tools consistently and appropriately	demonstrate an awareness of the importance of use of outcome measurement, service audit and stakeholder satisfaction evaluation. Able to administer chosen tools consistently and appropriately. Contributes to the system of service monitoring and improvement	demonstrate an awareness of the importance of use of outcome measurement, service audit and stakeholder satisfaction evaluation. Able to administer chosen tools consistently and appropriately. Contributes to the system of service monitoring and improvement and its critical analysis of need for change	demonstrate an awareness of the importance of use of outcome measurement, service audit and stakeholder satisfaction evaluation. Able to administer chosen tools consistently and appropriately. Contributes to the system of service monitoring and improvement and its critical analysis of need for change. Drives positive change, implements new approaches and conveys such changes effectively to all stakeholders

3.4 BEHAVIOURS, KNOWLEDGE AND SKILLS FOR INTERACTING				
	entry-level graduate	experienced graduate	advanced	expert
Communicating The interactive process of constructing and sharing information, ideas and meaning using of a common system of symbols, signs and behaviours. Includes skills such as empathy, validation, active listening, reflecting, rapport building and the use of silence.	use a wide range of routine & some advanced communication skills to share information, ideas, problems & solutions, with both specialist & non-specialist audiences	use a wide range of routine & advanced communication skills to share specialised information, ideas, problems & solutions with both specialist & non-specialist audiences	use a range of advanced & specialised communication skills to share specialised information & ideas/engage in critical dialogue with a range of audiences with different levels of knowledge & expertise	use a broad range of advanced & specialised communication skills to share complex information & ideas/engage in critical dialogue with a wide range of audiences with different levels of knowledge & expertise
Communicating describes the behaviour, knowledge and skills required to: ● facilitate the sharing of information, advice and ideas with a range of people, using a variety of media (including spoken, non-verbal, written and e-based) ● modify communication to meet individuals' preferences and needs ● engage with technology, particularly the effective and efficient use of Information and Communication Technology	modify communication in response to feedback (e.g. from a client, peer, supervisor) to meet the needs of different audiences & to enhance user involvement	becoming increasingly self-aware & able to modify communication to meet the needs of different audiences & to enhance user involvement & collaboration	modify communication to take account of the needs of different audiences & demonstrate a commitment to user involvement & collaboration	modify communication in-action to take account of the needs of different audiences & demonstrate a commitment to user involvement & collaboration
	with guidance able to interact with patients using a cognitive behavioural approach	able to interact with patients within a consistent cognitive behavioural approach	able to deliver complex treatment programmes within cognitive behavioural approach (for example extending metaphors and psychological content into practice) and at times using psychological techniques to facilitate behaviour change	able to deliver cognitive behavioural treatment with sensitivity to cognitive and emotional blocks, regularly using psychological techniques to facilitate behaviour change in the moment
	clinically demonstrate empathy, validation and	clinically demonstrate empathy, validation and	clinically demonstrate empathy, validation and	clinically demonstrate empathy, validation and

	active listening	active listening to elicit relevant information and engage patients	active listening to elicit relevant information and engage patients	active listening to elicit relevant information and engage patients
	with support able to stay with distress as appropriate	willing to stay with distress where appropriate	willing to stay with distress where appropriate and model openness	willing to stay with distress where appropriate and model openness whilst working therapeutically with this behaviour
	with guidance able to deliver complex information in relation to pain in a clear way	able to deliver complex information regarding pain in a clear way	able to deliver complex information in an interactive way with patients whilst addressing cognitive behavioural barriers to understanding	able to deliver complex information in an interactive way with patients whilst assessing and addressing cognitive behavioural barriers to understanding in the moment
	with guidance able to manage a group therapy environment	able to manage a group therapy environment optimising engagement with some awareness of individual challenges	able to manage a group therapy environment optimising engagement and working with individuals on specific challenges of engagement	able to manage a group therapy environment optimising engagement and using therapeutic skills to facilitate behaviour change in the moment in areas of individual challenge in engagement
	with support awareness of influences on own communication and able to modify approach where indicated	awareness of influences on own communication and able to modify approach where indicated	high level of awareness of influences on own communication and able to label these and model ability to work in a non-reactive way in their presence	high level of awareness of influences on own communication and able to label and model ability to work in a non-reactive way in their presence, appropriately selecting

				where self-disclosure is appropriate and using this in a therapeutic manner
	use a range of ICT to support & enhance practice	use a range of ICT to support & enhance the effectiveness of practice	use a wide range of ICT to support & enhance the effectiveness of practice	use a wide range of ICT to support & enhance the effectiveness of practice & specify software requirements to enhance work

	entry-level graduate	experienced graduate	advanced	expert
Helping others learn and develop The process of working with individuals and/or groups to create activities and opportunities to promote learning and development. *Helping others learn and develop* describes the behaviour, knowledge and skills required to: • assess the learner's needs and preferences • design materials/experiences that facilitate learning and development • deliver materials/experiences that facilitate learning • evaluate the effectiveness of the learning and development experience • reflect on the learning and development process	with guidance, use predetermined criteria to assess a learner's performance & progress & provide them with appropriate feedback	use predetermined criteria to assess a learner's performance & progress, & provide them with constructive feedback	select & apply appropriate assessment tools to evaluate a learner's performance & progress, & provide them with constructive feedback	develop & apply innovative approaches to assess a learner's performance & progress, & provide them with constructive feedback
	apply appropriate approaches to learning & teaching(techniques & material) to meet learners' needs	select & apply appropriate approaches to learning & teaching (techniques & material) to meet learners' needs	select & apply appropriate approaches to learning & teaching (techniques & material) to meet learners' needs & promote a change in practice	develop & apply innovative approaches to learning & teaching (techniques & material) to meet learners' needs & promote a change in practice
	with guidance, plan & deliver learning activities to a specified range of individuals/groups	with guidance, design, plan & deliver learning sessions of activities & opportunities to a range of audiences with similar levels of knowledge &	design, plan & deliver learning activities & opportunities to a range of audiences with different levels of knowledge & expertise	design, plan & deliver learning activities & opportunities to a wide range of audiences with different levels of knowledge & expertise

	expertise with guidance, reflect on learning & teaching performance & use this evaluation to inform future practice	reflect on learning & teaching performance & use this evaluation to inform future practice	critically reflect on learning & teaching performance & use this evaluation to inform future practice	critically reflect on learning & teaching performance & use this evaluation to inform future practice (self & others)

	entry-level graduate	experienced graduate	advanced	expert
Managing self and others The process of planning, prioritising, organising, directing/facilitating action and evaluating performance. This process may involve the organisation of financial, human, physical and technological resources. *Managing self and others* describes the behaviour, knowledge and skills required to: ● plan, prioritise and organise personal workload/activities and use of resources to fulfil work requirements and commitments ● adapt personal behaviour and actions in response to the demands of the situation ● evaluate the effectiveness of performance (own and others) ● lead and inspire others	exercise autonomy & initiative in accordance with current professional codes & practices seeking guidance where appropriate	exercise autonomy & initiative in accordance with current professional codes & practices	exercise substantial autonomy & initiative in complex & unpredictable situations at the limits of current professional codes & practices	exercise a high level of autonomy & initiative in complex & unpredictable situations not addressed by current professional codes & practice
	take some responsibility for the work of others (e.g. delegation of tasks to support workers) & for a range of resources	take significant responsibility for the work of others (e.g. support workers, students) & for a range of resources	take managerial responsibility for the work of others & for a significant range of resources	take significant managerial responsibility for the work of others &/or for a significant range of resources
	modify personal behaviour & actions in response to feedback to meet the demands of the situation & to enhance own performance	becoming increasingly self-aware & able to modify personal behaviour & actions to meet the demands of the situation & to enhance own performance	modify personal behaviour & actions to meet the demands of the situation & to enhance own & others' performance	modify personal behaviour & actions 'in-action' to meet the demands of the situation & to maximise the impact of own & others' performance
	with guidance, reflect on personal performance & use this evaluation to inform future practice	reflect on personal performance & use this evaluation to inform future practice	critically reflect on own & others' performance & use this evaluation to inform future practice	critically reflect on own & others' performance & use this evaluation to inform future practice

			(own & others)
take the lead in implementing agreed plans designed to bring about change, development and/or new thinking in complex but predictable contexts	exercise leadership and/or initiative to bring about change, development and/or new thinking in complex & increasingly unpredictable contexts	exercise leadership with responsibility for decision making designed to bring about change & development within complex & unpredictable contexts	exercise leadership with accountability for decision making & development across a range of contexts, including those within which there is a high degree of uncertainty & a need to take innovative approaches to service delivery & development

	entry-level graduate	experienced graduate	advanced	expert
Promoting integration and teamwork The process of working with others to achieve shared goals. *Promoting integration and teamwork* describes the behaviour, knowledge and skills required to: • build, maintain and promote effective interpersonal relationships • work collaboratively with others to achieve shared goals • work with others to maintain and develop the effective performance of teams/networks • may involve interdisciplinary working where the knowledge and skills of professionals may require definition within a team working in an integrated way or multidisciplinary team working where individual professions may need to adapt their approach to compliment the work of others • effectively ensure patient care is co-ordinated through good planning, strong communication, timely intervention, onward referral and supported discharge where and when appropriate, towards agreed shared goals / outcomes within and external to one`s own immediate service	participate in & develop professional networks to foster collaboration, share information & ideas to enhance practice work effectively with others to meet the responsibilities of professional practice reflect on experiences of collaborative working, & with guidance, use this information to identify solutions to maintain & develop the effective performance of teams/networks	support & develop professional/policy networks to foster collaboration, share information & ideas to enhance practice work effectively with others to meet the responsibilities of professional practice, & to identify situations where collaborative approaches could add value to practice reflect on experiences of collaborative working, & use this information to identify & implement solutions to maintain & develop the effective performance of teams/networks	support, lead & develop local/regional professional & policy networks to foster collaboration, share information & ideas to enhance practice work effectively with others to meet the responsibilities of professional practice, & to develop collaborative approaches that add value to practice critically reflect on experiences of collaborative working & use this information to identify & implement creative solutions to maintain & develop the effective & efficient performance of teams/networks	support, lead & develop regional/national professional & policy networks to foster collaboration, share information & ideas to enhance practice work effectively with others to meet the responsibilities of professional practice, & use innovative collaborative approaches that add value to & develop practice critically reflect on experiences of collaborative working & use this information to identify & implement innovative solutions to maintain & develop the effective & efficient performance of teams/networks

	entry-level graduate	experienced graduate	advanced	expert
Putting the person at the centre of practice The process of developing an understanding of an individual and their lived experience, and using that understanding to tailor practice to the needs of that person. *Putting the person at the centre of practice* describes the behaviour, knowledge and skills required to: • demonstrate respect for the individual • provide information and support that enables an individual to make informed choices • involve individuals in shaping the design and delivery of their service	demonstrate respect for the individual by acknowledging their unique needs, preferences & values, autonomy & independence in accordance with legislation, policies, procedures & best practice	demonstrate respect for the individual by acknowledging their unique needs, preferences & values, autonomy & independence in accordance with legislation, policies, & procedures, & by working to promote best practice	demonstrate respect for the individual by acknowledging their unique needs, preferences & values, autonomy & independence in accordance with legislation, policies, procedures, & by working to inform & promote legislation, policies, procedures & best practice	demonstrate respect for the individual by acknowledging their unique needs, preferences & values, autonomy & independence in accordance with legislation, policies, procedures, & by working to inform, develop & promote legislation, policies, procedures & best practice
	demonstrate an awareness of the motivational role of values and assist patient to clarify and move towards these	demonstrate an awareness of the motivational role of values and assist patient to clarify and move towards these with awareness of influence of own values on ability to do this	demonstrate an awareness of the motivational role of values and assist patient to clarify these in the presence of psychological distress and move towards them with awareness of influence of own values on ability to do this	demonstrate an awareness of the motivational role of values and assist patient to clarify these in the presence of psychological distress, working therapeutically with this and awareness of influence of own values on ability to do this in the moment facilitate behaviour change moving towards them
	provide information & support that empowers an individual to make an informed choice & to	provide information & support that empowers an individual to make an informed choice & to	provide information & support that empowers an individual to make an informed choice & to	provide information & support that empowers an individual to make an informed choice & to

	exercise their autonomy in accordance with legislation, policies, procedures & best practice	exercise their autonomy in accordance with legislation, policies & procedures, & work to promote best practice	exercise their autonomy in accordance with legislation, policies, procedures, & work to inform & promote legislation, policies, procedures & best practice	exercise their autonomy in accordance with legislation, policies, procedures, & work to inform, develop & promote legislation, policies, procedures & best practice
	involve individuals in shaping the design & delivery of their service by working in accordance with policies & processes that promote a culture of service user involvement	involve individuals in shaping the design & delivery of their service, & work with others to implement & support policies & processes that promote a culture of service user involvement	involve individuals in shaping the design & delivery of their service, & work with others to critically appraise user involvement, & to develop & implement policies, & processes that promote a culture of service user involvement	actively involve individuals in shaping the design & delivery of their service, & work with others to critically appraise user involvement, & to develop policies & processes that promote a culture of service user involvement that contribute to the development of best practice

	entry-level graduate	experienced graduate	advanced	expert
Respecting and promoting diversity The process of recognising, respecting and valuing people's differences (e.g. age, disability, gender, race, religion and belief, sexuality) and applying this to daily work and decision-making. *Respecting and promoting diversity* describes the behaviour, knowledge and skills required to: • respect and value diversity • examine own values and principles to avoid discriminatory behaviour and to minimise the potential negative effects of individual differences • work constructively with people of all backgrounds and orientations • promote a non-discriminatory culture that values diversity, and enables individuals to contribute and realise their full potential	respect & value diversity by working in accordance with legislation, policies, procedures & best practice	respect & value diversity by working in accordance with legislation, policies, procedures, & to promote best practice	respect & value diversity by working to inform & promote legislation, policies, procedures & best practice	respect & value diversity by working to inform, develop & promote legislation, policies, procedures & best practice
	identify & articulate their own values & principles, & with guidance, evaluate how these may differ from other individuals/groups, & use this understanding to maintain high standards of practice even in situations of personal incompatibility	identify & articulate their own values & principles, evaluate how these may differ from other individuals/groups, & use this understanding to maintain high standards of practice even in situations of personal incompatibility	identify & articulate their own values & principles, critically evaluate how these may differ from other individuals/groups, & use this understanding to maintain high standards of practice even in situations of personal incompatibility	identify & articulate their own values & principles, critically evaluate how these may differ from other individuals/groups, & use this understanding to maintain excellent standards of practice even in situations of personal incompatibility
	work constructively with people of all backgrounds & orientations by recognising & responding to individuals' expressed beliefs, preferences & choices	work constructively with people of all backgrounds & orientations by recognising & responding to individuals' expressed beliefs, preferences & choices, & with guidance, support individuals who need assistance in exercising their rights	work constructively with people of all backgrounds & orientations by recognising & responding to individuals' expressed beliefs, preferences & choices, & support individuals who need assistance in exercising their rights	work constructively with people of all backgrounds & orientations by recognising & responding to individuals' expressed beliefs, preferences & choices, & support individuals whose rights have been compromised
	identify discriminatory behaviour & take appropriate action to	identify & challenge discriminatory practices & work with others to	identify & challenge discriminatory practices & work with others to	identify & actively challenge discriminatory practices & work with

	challenge this behaviour	implement & promote policies & processes that promote a non-discriminatory culture	critically appraise current practice, & to develop & implement policies & processes that promote a non-discriminatory culture	others to critically appraise current practice, & to develop policies & processes that promote a non-discriminatory culture that contribute to the development of best practice
	identify age appropriate working methods for the patient and where indicated refer to specialist in this area of pain management	use a range of age appropriate methods of engaging the patient in treatment with awareness of own skills in working with developmental and age related issues referring the patient to a specialist in this area where appropriate	use a wide range of age appropriate methods of engaging the patient in treatment with awareness of own skills in working with developmental and age related issues referring the patient to a specialist in this area where appropriate	use a wide range of age appropriate methods of engaging the patient in treatment formulating areas of difficulty in age appropriate functioning with awareness of own skills in working with developmental and age related issues referring the patient to a specialist in this area where appropriate

3.5 BEHAVIOURS, KNOWLEDGE AND SKILLS FOR PROBLEM-SOLVING AND DECISION MAKING				
	entry-level graduate	experienced graduate	advanced	expert
Ensuring quality The process of maintaining the effectiveness, efficiency and quality of a service provided. *Ensuring quality* describes the behaviour, knowledge and skills required to: • fulfil the requirements of the legal and policy	fulfil the requirements of the legal & policy frameworks governing professional practice	fulfil the requirements of the legal & policy frameworks governing professional practice, & work to promote best practice	fulfil the requirements of the legal & policy frameworks governing professional practice, & work to inform & promote legislation, policies, procedures & best practice	fulfil the requirements of the legal & policy frameworks governing professional practice, & work to inform, develop & promote legislation, policies, procedures & best practice

frameworks governing practice • search for, interpret and seek to implement learning from the available evidence (e.g. research articles, clinical guidelines and best practice) • recognise situations where the effectiveness, efficiency and quality of a service are compromised, and take appropriate action • critically reflect on practice • develop, implement and evaluate policy and practice, to the benefit of people in pain	with guidance, recognise situations where the effectiveness, efficiency & quality of a service are compromised, & with support, take appropriate action to challenge the situation	recognise situations where the effectiveness, efficiency & quality of a service are compromised, & with guidance, take appropriate action to challenge the situation	recognise & critically appraise situations where the effectiveness, efficiency & quality of a service are compromised, & take appropriate action to resolve the situation	recognise & critically appraise situations where the effectiveness, efficiency & quality of a service are compromised, & take appropriate action to resolve the situation & contribute to best practice
	with guidance, reflect on personal performance & use this evaluation to enhance the effectiveness, efficiency & quality of future practice	reflect on personal performance & with guidance, use this evaluation to enhance the effectiveness, efficiency & quality of future practice	critically reflect on own & others' performance & use this evaluation to enhance the effectiveness, efficiency & quality of future practice	critically reflect on own & others' performance & use this evaluation to enhance the effectiveness, efficiency & quality of future practice (own & others)
	with guidance, contribute to the development and implementation of policy and practice at a local level	contribute to the development and implementation of policy and practice at a local level	contribute to the development and implementation of policy and practice at a local and regional level	lead or make a significant contribution to the development, implementation and evaluation of policy and practice at a local, regional and national level

	entry-level graduate	experienced graduate	advanced	expert
Improving and developing services The process of improving the effectiveness, efficiency and quality of the service provided. *Improving and developing services* describes the behaviour, knowledge and skills required to: • search for, interpret and seek to implement learning from the available evidence (e.g. research articles, clinical guidelines and best practice) • critically evaluate practice and use this appraisal to inform service improvement, development and redesign • develop innovative and sustainable recommendations to improve the quality of service • plan, facilitate and manage change • critically evaluate the process and outcome • be a professional member of relevant professional and patient organisations and promote good quality service development and clinical practice for the benefit of people in pain and the physiotherapy profession (e.g. The Physiotherapy Pain Association; The British Pain Society; The European Federation of IASP Chapters; Association for Contextual Behavioural Sciences)	with guidance, critically evaluate practice, & share the outcome of this appraisal with relevant personnel use a problem-solving approach to develop safe & effective recommendations for improving the quality of professional practice in predictable contexts contribute to change & development within the profession or service at a local level with guidance, reflect on the change process, & use this information to appraise the outcome & inform future practice	critically evaluate practice, & with guidance, use this appraisal in combination with knowledge of best practice & political awareness to inform service improvement use problem-solving approaches to develop safe, effective & efficient recommendations for improving the quality of professional practice in increasingly unpredictable contexts contribute to change & development within the profession or service at a local or regional level reflect on the change process, & use this information to appraise the outcome & inform future practice	critically evaluate practice & use this appraisal in combination with knowledge of best practice & political awareness to identify opportunities for service improvement & development use problem-solving approaches to develop original, safe, effective & efficient recommendations for improving the quality of professional practice in unpredictable contexts make an identifiable contribution to change & development within the profession or service at a regional or national level critically reflect on the change process, & use this information to appraise the outcome & inform future practice	critically evaluate practice & use this appraisal in combination with knowledge of best practice & political awareness to identify opportunities for service improvement, development & redesign use problem-solving approaches to develop original, effective & efficient recommendations that demonstrate evidence of positive risk taking, for improving the quality of professional practice in unpredictable & normally specialised contexts make an identifiable contribution to change & development within the profession or service & beyond – at a national or international level critically reflect on the change process, & use this information to appraise the outcome & inform future practice

	entry-level graduate	experienced graduate	advanced	expert
Lifelong learning The process of learning and development directed towards maintenance and enhancement of professional competence. *Lifelong learning* describes the behaviour, knowledge and skills required to: • be aware of the current and future desirable values, behaviours, knowledge and skills relevant to working with people in pain • assess personal learning and development needs and preferences • seek out and appraise learning and development resources and opportunities • develop and engage in a personalised plan designed to meet those needs • reflect on the learning process • document the process	demonstrate self-awareness of learning preferences, & with guidance can identify personal learning & development needs independently advance personal knowledge, understanding & skills in line with identified learning needs, & with guidance & support, can use a variety of learning & development resources & opportunities reflect on personal learning & development, & with guidance & support, use this information to inform the planning & management of future learning & development experiences with guidance & support, record the outcome of personal learning & development in a format that meets personal preferences & professional requirements	demonstrate increasing self-awareness of learning preferences, & with guidance can identify personal learning & development needs independently advance personal knowledge, understanding & skills in line with identified learning needs, & with guidance, can use a variety of learning & development resources & opportunities reflect on personal learning & development, & with guidance, use this information to inform the planning & management of future learning & development experiences with guidance, record the outcome of personal learning & development in a format that meets personal preferences & professional requirements	demonstrate strong self-awareness of learning preferences, & with minimal guidance can identify personal learning & development needs independently advance personal knowledge, understanding & skills in line with identified learning needs by making appropriate use of a variety of learning & development resources & opportunities critically reflect on personal learning & development, & with guidance, use this information to inform the planning & management of future learning & development experiences record the outcome of personal learning & development in a format that meets personal preferences & professional requirements	demonstrate strong self-awareness of learning preferences, & can independently identify personal learning & development needs independently advance personal knowledge, understanding & skills in line with identified learning needs by making appropriate use of a wide variety of learning & development resources & opportunities critically reflect on personal learning & development & use this information to inform the planning & management of future learning & development experiences record the outcome of personal learning & development in a format that meets personal preferences & professional requirements

	entry-level graduate	experienced graduate	advanced	expert
Practice decision making The context-dependent thinking and decision-making processes used in professional practice to guide practice actions. *Practice decision making* describes the behaviour, knowledge and skills required to: • collect information from a variety of sources relevant to the decision making situation • hold a working awareness of relevant and appropriate screening tools, validated process and outcome measures available, their strengths and weaknesses and overall utility for patient populations • process and analyse the information collected • collaborate with colleagues, other professionals , patients and carers where appropriate • facilitate patient choice • be mindful of the depth and breadth of your practice as a physiotherapist working with people in pain and know when to involve or refer onto other professionals • determine when there are potential risks from the patient towards themselves or others and take appropriate action • draw reasoned conclusions and make informed judgements to address issues/resolve problems in practice • agree and effectively communicate the clinical management plan • clinically reason and problem solve to modify treatment as required • critically evaluate the decision making process	efficient & effective use of a wide range of routine & some specialised approaches & techniques to systematically collect information from a variety of sources relevant to the situation process & critically analyse information in complex & predictable situations where data/information comes from a range of sources or is incomplete draw reasoned conclusions, supported by current policy & evidence-based thinking, & make informed judgements to address ethical & professional issues in complex & predictable situations with guidance, reflect on their decision making	efficient & effective use of a wide range of routine & advanced approaches & techniques to systematically collect information from a variety of sources relevant to the situation process & critically analyse information in complex & unpredictable situations where data/information comes from a range of sources or is incomplete draw reasoned conclusions, supported by current policy & evidence-based thinking, & make informed judgements to address ethical & professional issues in complex & unpredictable situations reflect on their decision making process & use	efficient & effective use of a range of advanced & specialised approaches & techniques to systematically collect information from a variety of sources relevant to the situation process & critically analyse information in complex & unpredictable situations where data/information is incomplete or consistent draw reasoned conclusions, supported by current policy & evidence-based thinking, & make informed judgements to address ethical & professional issues in complex & unpredictable situations at the limits of current professional codes & practices critically reflect on their decision making process	efficient & effective use of a broad range of advanced & specialised approaches & techniques to systematically collect information from a wide variety of sources relevant to the situation process & critically analyse information in complex, unpredictable & normally specialised situations where data/information is incomplete or inconsistent draw reasoned conclusions, supported by current policy & evidence-based thinking, & make informed judgements to address ethical & professional issues in complex & unpredictable situations not addressed by current professional codes & practice critically reflect on their decision making process & use this evaluation to appraise the outcome & to inform future practice

	process & use this evaluation to appraise the outcome & to inform future practice	this evaluation to appraise the outcome & to inform future practice	& use this evaluation to appraise the outcome & to inform future practice	

	entry-level graduate	experienced graduate	advanced	expert
Researching and evaluating practice Systematic processes of collecting, analysing, and synthesising information to evaluate current practice and generate new understandings about practice. *Researching and evaluating practice* describes the behaviour, knowledge and skills required to: • design, plan, conduct and manage the research/evaluation process • use methods of enquiry to collect and interpret data in order to address problems or issues arising from practice; • critically evaluate the research/evaluation process • communicate the outcome of the research/evaluation process • collaborate in order to influence research policy and practice (e.g. to determine research priorities, to conduct research, to submit or evaluate grant applications, to publish work or to peer review other people's work)	with guidance, plan, conduct & manage evaluation & research projects to address a specific issue arising from practice with guidance, apply a range of standard research methods/tools of enquiry showing an appreciation of related ethical considerations with guidance, reflect on the research process, & use this information to appraise the project & inform future practice identify, & with support, promote the practical & professional applications of completed work, & seek opportunities to	plan, conduct & manage evaluation & research projects to address specific issues arising from practice becoming increasingly confident to apply a range of standard research methods/tools of enquiry showing an appreciation of related ethical considerations reflect on the research process, & use this information to appraise the project & inform future practice identify & promote the practical & professional applications of completed work, & seek opportunities to share &	design, plan, conduct & manage evaluation & research projects to address problems & issues arising from practice apply a range of standard & specialised research methods/tools of enquiry showing a detailed understanding of related ethical considerations critically reflect on the research process, & use this information to appraise the project & inform future practice identify & promote the practical & professional applications of completed work, & actively seek opportunities to share &	design, plan, conduct & manage evaluation & research projects to address new problems & issues arising from practice apply a range of standard & specialised research methods/tools of enquiry, contributing to the development of new techniques or approaches, & showing a detailed understanding of related ethical considerations critically reflect on the research process, & use this information to appraise the project & inform future practice identify & promote the practical and professional applications of completed work, & actively create opportunities to share &

	share & disseminate findings to both specialist & non-specialist audiences	disseminate findings to both specialist & non-specialist audiences	disseminate findings to a range of audiences with different levels of knowledge & expertise	disseminate findings to a wide range of audiences with different levels of knowledge & expertise
		collaborate at a service level	collaborate at a service, local and national level	collaborate at a service, local, national and international level

	entry-level graduate	experienced graduate	advanced	expert
Using evidence to lead practice The process of analysing, synthesising and evaluating the best- available evidence, and integrating it with individual expertise and service users' needs and preferences to inform practice. *Using evidence to lead practice* describes the behaviour, knowledge and skills required to: • systematically search for evidence • critically appraise evidence and use the information to address problems and issues arising in practice	with guidance, use a range of approaches & techniques to systematically search for evidence from a variety of sources relevant to the situation critically evaluate current research & scholarship & with guidance, use the appraisal to address specific issues arising in professional practice	use a range of approaches & techniques to systematically search for evidence from a variety of sources relevant to the situation critically evaluate current research & scholarship & use the appraisal to address specific issues arising in professional practice	efficient & effective use of a range of approaches & techniques to systematically collect information from a variety of sources relevant to the situation critically evaluate current research & scholarship & use the appraisal to address issues which are at the forefront or informed by developments at the forefront of professional practice	efficient & effective use of a broad range of approaches & techniques to systematically search for information from a wide variety of sources relevant to the situation critically evaluate current research & scholarship & use the appraisal to address new problems & issues arising in professional practice

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Appendix 1 - Case examples to aid differentiation of Cognitive Behavioural Approach (CBA) and Cognitive Behavioural Therapy (CBT) in the management of pain

In this document, scenarios are presented to demonstrate the difference between two levels of CB intervention. The British Association of Behavioural and Cognitive Psychotherapies have defined the difference between Cognitive Behavioural Therapy and a Cognitive Behavioural Approach as[1];

Cognitive Behavioural Therapy
Formulation driven CBT (individual or group CBT for a range of people and
problem areas) – This is a form of psychotherapy, the clients are not able to help themselves and have sought help from a trained professional and require expert interventions from an appropriately trained and supervised CBT psychotherapist. The relationship between the therapist and the client is paramount and expert skills are required to engage the client in a therapeutic alliance. Once this is established, therapy can proceed collaboratively through assessment, formulation and intervention. The therapist using various cognitive and/or behavioural techniques as appropriate. They would evaluate the efficacy of any intervention and change tack if necessary.

Cognitive Behavioural Approaches
*CBT interventions for specific problem areas (e.g. concordance training; relapse prevention work in people with a diagnosis of Schizophrenia; identification of symptoms and specific CBT intervention in postpartum depression; anger management groups, anxiety management groups, pain management etc.). This is **not** a form of psychotherapy as the health workers are implementing a technical intervention, they are not required to formulate and adapt the treatment. [The health workers will have received training in specified CBT interventions for particular problem areas, and should be receiving supervision from a CBT psychotherapist.]*
Parenthesis added by author – see below

In the examples below, the physiotherapist is likely to be practising at expert levels of practice and it is assumed that the physiotherapist delivering the CBA has received at least minimal post-graduate training on a CB approach and is accessing supervision from a CBT psychotherapist or clinical psychologist. However, basic principles of a CBA may be adopted by entry level graduates and they are not expected to be supervised by a CBT Psychotherapist as musculoskeletal physiotherapists manage patients with predominately physical health problems. The level of training and supervision required will therefore depend on the individual physiotherapist's levels of practice and the complexity of the population they treat. At all levels of practice is it important that physiotherapists know the personal and professional limitations of their practice, seek appropriate advise and support and involve others or refer the patient as appropriate.

The below examples are not meant to be prescriptive and do not detail all of the interventions that could be carried out by the physiotherapist or CBT practitioner. The interventions listed are there for illustration purposes, as examples of practice. Practice will differ and will depend on the psychological model being utilised (e.g. CBT or Acceptance and Commitment Therapy [third wave CBT]). The example below is adopting a CBT approach.

[1]Grazebrook K, Garland A, Board of BABCP. What are cognitive and / or behavioural psychotherapies? Report. 2005.http://www.babcp.com/files/Public/what-is-cbt-web.pdf

Scenario	CBA delivered by appropriately trained physiotherapist	CBT delivered by a CBT psychotherapist or CBT trained psychologist
47 year old woman with persistent low back pain lasting 5 years. Works in a college in administration. Has been off work for the last 4 months and has been referred by her GP. She has tried 2 previous courses of physiotherapy utilising manual therapy and exercises. Helped at the time; has kept on with some of the exercises. She would like the physiotherapist to help get her get a better workstation and to advise her employers that she should not sit for long. She feels that she has a slipped disc that will always be a problem for her but does not think surgery is necessary.	The physiotherapist uses questioning techniques to identify thoughts, feelings, and behaviours. Thoughts: 'I have a slipped disc' 'Sitting is bad for my back; only the right chair is suitable'. Feelings: worry. Behaviour: avoiding sitting where possible. The physiotherapist then uses this information to draw out the CB vicious/maintenance cycle to illustrate how the behaviour is inadvertently leading to deconditioning/sensitisation of the neuro-musculoskeletal system, and further reinforcing the unhelpful thoughts. This is supported by education on the findings of her MRI, to normalise and decrease the threat value of the information. Education on pain, deconditioning, and desensitisation. Goal setting aimed at increasing sitting tolerance, utilising a graded exposure technique. Uses questioning techniques to identify and challenge thoughts about the 'right chair for her back' and sets homework related to using a 'try it and see' approach for different chairs. **Further skills:** behavioural experiment to challenge the belief of 'right chair'.	Uses questioning techniques to identify rules/assumptions 'watch your own back', 'trust your instincts' and core beliefs of 'I'm vulnerable'. Works with the client to identify the origin of these beliefs as part of a process to decrease intensity / global nature of belief. Uses guided discovery to explore how these beliefs have influenced relationship with health practitioners and employer. Uses a behavioural experiment to challenge belief 'only the right chair is suitable'. Uses role-play to address difficulties with asserting needs in relation to work environment.

28 year old hairdresser with chronic De Quervain syndrome. Wearing a wrist splint. Complaining of a variable pain pattern, several good days when she is able to work interspersed with flare-ups when she is unable to work. She has had several steroid injections without benefit. Has good understanding of what is going on. Is getting frustrated with the on-going pain and wants physiotherapy to get rid of the pain.	Physiotherapist uses questioning techniques to identify unhelpful thoughts; 'I must work when I'm up to it' and 'others think I'm putting it on'. Physiotherapist uses questioning techniques to identify a 'boom/bust' vicious cycle and shares with the patient. Teaches the principles of baseline setting, pacing and graded activity. Applies a questioning approach when faced with perceived barriers relating to decreasing activity on good days such as 'I must work when I'm up to it'. **Further skills**; explores belief of 'others think I'm putting it on' and helps client to identify alternative explanations for behaviours seen in others perceived as being critical.	Identifies through questioning techniques the client thinks of herself as lazy at heart. Uses formulation to show how hypervigilance for criticism from others has caused overcompensation in several areas of life. Draws on examples within psychotherapy session. Uses continua to re-evaluate beliefs about self as lazy. Also identifies over-inflated sense of responsibility for the smooth running of her workplace, which is addressed through responsibility pie charts.

52 year old man developed foot pain after shooting his foot when he tripped holding a gun. High scores on depression screening tool, is currently on anti-depressant prescribed by G.P. Had several surgeries so far to reconstruct his foot. Walking poorly on crutches with minimal weight bearing. Is unable to demonstrate or describe the exercises given to him post-operatively by the physiotherapists at the tertiary centre and is defensive when quizzed about this.	Physiotherapist identifies thoughts 'they should have just amputated; it's never going to get better'. Identifies through gentle questioning that he has engaged minimally with home treatment programme. Physiotherapist uses psycho-education on the role of low mood in the maintenance of pain and dysfunction. Is able to sensitively link how the lack of engagement in rehab has led to the reinforcement of the belief 'it's never going to get any better'. Uses knowledge of cognitive and mood effects of depression when setting small short-term goals and reinforces any information given in written form. Monitors low mood through re-administration of screening tools during treatment with feedback to GP as appropriate. **Further skills**: interventions to target low mood: activity scheduling, pleasure hierarchy.	Assesses current depressive episode with regard to previous treatment and requests medication review from GP. Uses behavioural activation methods to increase activity. Identifies that patient is prone to rumination about past events and is spending excessive amounts of time ruminating about the accident. Uses imagery work to re-frame the memory of accident.