

Allied Health Professions Council c/o Secretariat of healthcare Professional Boards (SPB) 81 Kim Keat Road #10-00 Singapore 328836

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AHPC-1304-SAR-01

FORM SF3 SUPERVISOR ASSESSMENT REPORT FOR REGISTERED PHYSIOTHERAPISTS

Name of Supervisee:		Registration No:	
Institution and Departme	ent:		
Type of Registration:	☐ Conditional		
	☐ Temporary (Training/Te	eaching/Research/Service)*	
Supervision Level:	Level One (L1) supervision (4 hours/ week)		
	Level One (L1) supervis	sion (4 hours/ fortnight)	
	Level Two (L2) supervision (4 hours/ month)		
	Level Three (L3) superv	vision (4 hours/ 2 months)	
Stage of Assessment:	t: End of 1 st / 5 th / 11 th / 23 rd month (delete as appropriate) Others (please specify):		
	Period of Supervision:	(DD/MM/YY) to (DD/MM/YY)	

*Delete as appropriate.

INSTRUCTIONS:

- 1. The completed report must be sent to the Secretariat staff in PDF format via email.
- 2. **Sections 1 through 16** of this report must be completed by the supervisor(s) identified in the initial application. If the report is completed by the secondary supervisor, the primary supervisor will be required to countersign.

- 3. The supervisor's duty is to provide an accurate and objective assessment of the supervised physiotherapist based on performance criteria listed in this assessment form. The supervisor will rate the performance of the supervisee according to the grade of **Developing, Competent and Exceeding**. An explanatory note has been provided for each grade. The reasons for the selection made should be stated in the space provided (including the reasons if **Not Observed** is indicated). If there is insufficient space, please attach details in a separate sheet of paper. It is the supervisor's responsibility to ensure that the final rating for Overall Clinical Competence and Recommendation cohere with the ratings for each section.
- 4. **Section 17** of this report must be acknowledged by the Head of Department or the relevant authority.
- 5. It is mandatory to highlight areas of concerns in the SF3 form.
- 6. A "competent" or "exceeding" rating would mean that your supervisee's performance in that area is satisfactory while a "developing" rating is considered not meeting the performance requirements and deemed as **unsatisfactory**.

End of Supervised Practice Period Reporting

- 7. This Supervisor Assessment Report must be submitted together with Form SF4 (End of Supervised Practice Evaluation Report) for
 - Registered therapists who have completed their full supervised practice period, or
 - ii. Therapists who are leaving their organisation during their supervised practice period.
- 8. For further clarification, please email the Council's secretariat at AHPC@spb.gov.sq.

1. PHYSIOTHERAPY KNOWLEDGE Physiotherapy knowledge refers to the ability to demonstrate theoretical knowledge in various disciplines of physiotherapy, e.g. cardiopulmonary, musculoskeletal and neurological science, which is necessary for effective practice. Developing Competent **Exceeding Not Observed** Demonstrates obvious gaps Demonstrates adequate Demonstrates good in knowledge of knowledge of physiotherapy knowledge of physiotherapy physiotherapy science. science. science. Shows minimal interest or Demonstrates effort to Constantly updates effort in bridging gaps in update and apply knowledge knowledge and applies current research evidence to knowledge identified in a with current research timely manner. evidence where appropriate. practice. Developing Competent **Exceeding Not Observed** State reason(s) for the selection:

2. HISTORY TAKING

History taking involves the ability to review medical case notes, take history from patients (or carers if it were not possible to obtain history from patients) and interpret relevant investigative results.

substantial amount of clinical information in the The outcome is sufficient information to guide physical comprehensive information to contribute to physical	Shows difficulty or deficiency in carrying out any of the following: Reviewing patients' case notes and clinical history. Interviewing patients or their carers about the current complaints. Interpreting correctly the findings of investigations. Perfor consist manner. In the consist manner.	rms the following stently in a timely er: Reviewing patients' case notes and relevant clinical history. Interviewing patients or heir carers about the current complaints. dentifying relevant nvestigations nterpreting these nvestigation findings	consistently, effectively and efficiently: • Thorough review of patients' case notes and relevant clinical history. • Interviewing patients or their carers about the current complaints. • Identifying relevant investigations • Interpreting these investigation findings	
case notes and clinical history. Interviewing patients or their carers about the current complaints. Interpreting correctly the findings of investigations. Interpreting these investigation findings correctly. The outcome is missing substantial amount of clinical information in the assessment of the patients. case notes and relevant clinical history. Interviewing patients or their carers about the current complaints. Interpreting pelevant investigations Identifying relevant investigations Interpreting these investigation findings correctly. The outcome is missing substantial amount of clinical information in the assessment of the patients. The outcome is sufficient information to guide physical examination and assessment of the patients.	case notes and clinical history. Interviewing patients or their carers about the current complaints. Interpreting correctly the findings of investigations.	case notes and relevant clinical history. Interviewing patients or heir carers about the current complaints. Identifying relevant investigations interpreting these investigation findings	patients case notes and relevant clinical history. Interviewing patients or their carers about the current complaints. Identifying relevant investigations Interpreting these investigation findings	
substantial amount of clinical information in the assessment of the patients. The outcome is sufficient information to guide physical examination and assessment of the patients. comprehensive information to contribute to physical examination and assessment of the patients.	The outcome is <i>missina</i>			
Developing Competent Exceeding Not Observed	substantial amount of clinical information in the assessment of the patients. The or inform exami	nation to guide physical ination and assessment	comprehensive information to contribute to physical examination and assessment	
	Developing	Competent	Exceeding	Not Observed

3. PHYSICAL EXAMINATION/ASSESSMENT OF PATIENT This involves the ability to select and conduct a relevant physical examination of patient, to interpret findings and to make an accurate diagnosis/assessment of the patient. Competent Exceeding Not Observed Developing Shows difficulty or deficiency Performs physical Performs physical examination and examination and in carrying out any part of the physical examination assessment of the patients assessment of the patients and assessment, as effectively: effectively and efficiently: described below: Selecting appropriate Selecting appropriate Selecting appropriate physical examination physical examination physical examination Performing these Performing these procedures accurately. Performing these procedures accurately. procedures accurately. Interpreting the findings Interpreting the findings Interpreting the findings of examination and of examination and of examination and history taking correctly. history taking correctly. history taking correctly. The outcomes are: The outcomes are: Poor performance of Higher than entry-level The outcomes are: physical examination. Acceptable level of quality of physical Inability to make physical examination examination (beyond novice). Ability to make accurate accurate diagnosis or (appropriate at the assessment of patients' entry-level novice). problems. Ability to arrive at an diagnosis or Missed important accurate diagnosis or assessment of patients' precautions or assessment of patients' problems. Ability to identify all contraindications. problems. Ability to identify all relevant precautions relevant precautions and contraindications. and contraindications. Not Observed **Developing** Competent **Exceeding** State reason(s) for the selection:

4. DEVELOPMENT OF THERAPY PLAN/THERAPY PLANNING

Therapy planning examines the ability to analyse, make decisions and plan an appropriate therapy program (including selecting appropriate therapy interventions) based on assessment findings and research evidence.

Developing	Competent	Exceeding	Not Observed
Shows difficulty or deficiency in: • Analyzing patients' problems, precautions and contraindications. • Identifying patients' therapy needs and goals. • Developing short- and long-term goals of therapy interventions. • Selecting appropriate therapy interventions based on these goals. The outcome is a lack of appropriate therapy goals and intervention plan.	Demonstrates logical clinical reasoning approach to the following: • Analyzing patients' problems, precautions and contraindications. • Identifying patients' goals. • Developing short- and long-term therapy goals. • Selecting appropriate therapy interventions based on these goals. The outcome is appropriate therapy goals and intervention plan based on assessment findings. Many of the interventions selected by the physiotherapists are supported by research evidence.	Demonstrates logical and evidence-based approach to the following: • Analyzing patients' problems, precautions and contraindications. • Identifying patients' goals. • Developing short- and long-term therapy goals. • Selecting appropriate therapy interventions based on these goals. The outcome is appropriate therapy goals and intervention plan consistently based on both assessment findings and research evidence.	
Developing	Competent	Exceeding	Not Observed
Otata ==================================			
State reason(s) for the	, 36160t1011.		

5. HANDLING SKILLS/IMPLEMENTATION OF THERAPY

Therapy implementation examines the ability to implement therapy in an effective and safe manner.

Developing	Competent	Exceeding	Not Observed
Shows poor or unsafe handling skills and implementation of therapy interventions.	Demonstrates effective and safe handling skills and therapy intervention.	Demonstrates effective and safe handling skills and therapy intervention.	
The outcome is frequent close supervision.	The outcome is occasional consultation with the supervisor or senior physiotherapist.	The outcome is effective interventions that are often an example to other junior colleagues or students.	
Developing	Competent	Exceeding	Not Observed
Ctata rassan(a) for th	a calcation:		

State reason(s) for the selection:

6. USE AND PRESCR	6. USE AND PRESCRIPTION OF AID/EQUIPMENT/ELECTROTHERAPY			
		g aid/equipment/electroth		
aspects associated wit	h the use of these aid/e	quipment/electrotherapy.		
Developing	Competent	Exceeding	Not Observed	
Fails to prescribe and implement the appropriate aid/equipment/ electrotherapy for patients.	Prescribes and implements appropriate aid/equipment/electrotherapy for patients.	Prescribes and implements appropriate aid/equipment/electrotherapy for patients.		
Demonstrates obvious safety lapses when implementing aid/equipment/electrotherapy.	Adopts safety measures consistently when implementing aid/equipment/electrotherapy.	Adopts safety measures consistently when implementing aid/equipment/electrotherapy.		
The outcome is frequent close supervision.	The outcome is occasional consultation with the supervisor or senior physiotherapist.	The outcome is effective interventions that are often an example to other junior colleagues or students.		
Developing	Competent	Exceeding	Not Observed	
State reason(s) for the se	election:			

7. EVALUATING EFFECTS OF TREATMENT				
This skill examines the ability to monitor and measure effects of therapy.				
Developing	Competent	Exceeding	Not Observed	
Shows difficulty or deficiency in selecting, monitoring and measuring appropriate variables to indicate effects and responses to therapy. The outcome is a lack of evaluation of therapy effectiveness and safety. Close supervision is needed.	Selects, monitors and measures appropriate variables to indicate effects and responses to therapy. Modifies goals and intervention accordingly based on evaluation. The outcome is appropriate selection and measurement of effects and response to therapy. Occasional consultation with supervisor may be necessary.	Selects, monitors and measures appropriate variables to indicate effects and responses to therapy. Modifies goals and intervention accordingly based on evaluation. The outcome is effective evaluation of response to therapy. The physiotherapist is a role model to novice colleagues and students.		
Developing	Competent	Exceeding	Not Observed	
State reason(s) for the selection:				

8. ETHICAL BEHAVIOUR	
Ethical behaviour includes practice in the best i	nterest of the patient, respect for patient privacy
and confidentiality, and professional integrity.	
Developing	Competent
Does not take into account patients' welfare, safety and interest in providing clinical services. Does not show respect for patients' privacy and confidentiality. Does not obtain informed consent from patients. Makes false/misleading claims, or is not truthful in delivering services or information to patients.	Takes into account patients' welfare, safety and interest in providing clinical services all of the time. Shows respect for patients' privacy and confidentiality all of the time. Obtains informed consent from patients or acts in the best interest of the patients. Is truthful and factual about services/therapy administered /information provided to patients all of the time.
Developing	Competent
State reason(s) for the selection:	

9. PROFESSIONAL BEHAVIOUR

Professional behaviour refers to general behavior expected of a healthcare professional, and includes practice within one's limits of competence, making appropriate referrals, and accurate record keeping.

Developing	Competent		
Is unaware of or disregards boundaries and standards expected of the local professional community	Practices within the boundaries and standards expected of the local professional community.		
Has poor/limited awareness of own level of professional knowledge and skill.	Is aware of the limits of own level of professional knowledge and skill.		
Does not refer to other healthcare professionals or senior professionals even where needed.	Makes appropriate referrals to other healthcare professionals or senior professionals where needed.		
Does not seek assistance from fellow professionals or seniors where needed.	Seeks assistance from fellow professionals or seniors where appropriate.		
Does not maintain accurate or complete patients' record.	Keeps accurate and complete patients' records.		
Is unable to manage pressure or work stress.	Is able to manage pressure or work stress.		
Developing	Competent		
State reason(s) for the selection:			

10. PROFESSIONAL DEVELOPMENT				
		to develop him / herself a	as a clinician and to be	
involved in continuing	involved in continuing education and learning from colleagues.			
Developing	Competent	Exceeding	Not Observed	
Is unable to identify personal strengths and weaknesses most of the time.	Identifies personal strengths and weaknesses accurately most of the time.	Identifies personal strengths and weaknesses accurately and seeks to improve oneself at all times.		
Is unable to analyse clinical performance critically and problem-solve during therapy sessions most of the time. Is reluctant to engage in continuing education and learning with/from colleagues.	Analyses clinical performance accurately and improves on performance most of the time. Problem-solves effectively during therapy sessions all the time. Engages in continuing education and learning with/from colleagues most of the time.	Analyses clinical performance accurately and proactively seeks to improve performance at all times. Engages in continuing education and learning with/from colleagues. Initiates case discussions / journal clubs within organisation.		
Developing	Competent	Exceeding	Not Observed	
State observations/rea	son(s) for the selection:			

11. PROFESSIONAL RELATIONSHIPS

Professional relationships examine the interpersonal skills and the ability to develop effective professional relationships within the team and with other professionals, students, support staff, and volunteers.

Developing	Competent	Exceeding	Not Observed
Does not adhere to professional boundaries most of the time.	Adheres to professional boundaries most of the time.	Adheres to professional boundaries at all times.	
Is unable to build and maintain a good working relationship within the team and with other professionals. Is unable to apply negotiation skills to achieve mutually satisfactory outcomes most of the time. Identifies role as a physiotherapist inconsistently and/or inappropriately. Is unable to build and maintain good working relationships with team members most of the time.	Builds and maintains a good working relationship within the team and with other professionals. Applies negotiation skills to achieve mutually satisfactory outcome during discussions at times. Identifies role as a physiotherapist consistently and appropriately most of the time. Builds and maintains good working relationships with team members most of the time.	Builds and maintains a good working relationship within the team and with other professionals. Initiates opportunities to further develop these relationships. Applies negotiation skills to achieve mutually satisfactory outcome during discussions most of the time. Identifies role as a physiotherapist consistently and appropriately all of the time. Advises peers, junior therapists and other healthcare team members in own professional area of expertise. Shows empathy or encouragement to team members. Builds and maintains good working relationships with team members at all times.	
Developing	Competent	Exceeding	Not Observed
State observations/rea	son(s) for the selection:		

12. COMMUNICATION SKILLS

Communication skills examine the ability to communicate effectively with patients/clients, carers, and other professional/non-professional staff encountered at work.

work.			
Developing	Competent	Exceeding	Not Observed
Demonstrates difficulty in communicating clearly assessment findings, therapy goals, therapy approaches and prognosis with patients, colleagues (ie.other physiotherapists) and other healthcare givers. Demonstrates ineffective liaison with assistants, clerical staff or administrative staff etc. Demonstrates poor rapport with patients and other healthcare givers. Has difficulty using effective counselling skills when needed. Is not sufficiently proficient in English for effective communications (written and verbal) with patients, and/or other healthcare professionals	Communicates effectively and clearly assessment findings, therapy goals, therapy approaches and prognosis with patients, colleagues (ie.other physiotherapists) and other healthcare givers in most instances. Demonstrates effective liaison with assistants, clerical staff or administrative staff. Achieves good rapport with patients and other healthcare givers in most instances. Uses basic counselling skills where appropriate. Is proficient in English for effective communications (written and verbal) with patients, and/or other healthcare professionals	Communicates effectively and clearly assessment findings, therapy goals, therapy approaches and prognosis with patients, colleagues (ie.other physiotherapists) and other healthcare givers in all instances. Demonstrates effective liaison with assistants, clerical staff or administrative staff. Achieves good rapport with patients and other healthcare givers at all times. Actively builds relationships and deals effectively with people. Uses effective counselling skills as appropriate. Is proficient in English for effective communications (written and verbal) with patients, and/or other healthcare professionals	
Developing	Competent	Exceeding	Not Observed
State reason(s) for the	e selection:		

13. CULTURAL COMPETENCE Cultural competence examines the ability to adapt one's practice to the local culture and health and social care system. Competent Exceeding **Not Observed** Developing Is insensitive to cultural Is sensitive to cultural Is sensitive to cultural background of patients, and background of patients and / background of patients, and or unable to make adjusts oneself accordingly adjusts oneself accordingly most of the time. at all times. necessary adjustments. Has difficulty working with Works effectively with Is able to work with people people from a range of from a range of different people from a range of different cultural cultural backgrounds. different cultural backgrounds at all times. backgrounds. Able to work with people Difficulty working with from a range of different Works effectively with people from a range of people from a range of cultural backgrounds. different cultural different cultural backgrounds. Makes the effort to backgrounds. understand local health Does not make sufficient care, social care and Understands local health effort to understand local educational systems, and care, social care and health care, social care and their implications on one's educational systems, and educational systems, and professional practice. their implications on one's professional practice. Is able their implications on one's professional practice. to respond effectively to patients' queries on matters relating to these. Exceeding **Not Observed** Developing Competent State reason(s) for the selection:

14. OVERALL CLINICAL COMPETENCE OVER THIS PERIOD				
Developing	Competent	Exceeding		
Is unable to meet requirements for safand autonomous practice as a physiotherapist at entry-level.	Demonstrates performance that is acceptable for meeting requirements for safe and autonomous practice as a physiotherapist at entry-level.	Demonstrates performance that clearly exceeds requirements for safe and autonomous practice as a physiotherapist at entry-level.		
Developing	Competent	Exceeding		
	<u> </u>			
State reason(s) for the selec	etion:			

15. RECOMMENDATION		
☐ To progress to L1 (4 hours/ fortnight) ☐ To progress to L2 (4 hours/ month) ☐ To progress to L3 (4 hours/ 2 month) ☐ To progress to Full Registration	☐ To extend supervision at current level■ Extension: month	Others (please specify):
Please provide reason(s):		



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16. FOLLOW-UP ACTIONS TO IMPROVE PERFORMANCE				
SIGNATURE OF SECONDARY SUPERVISOR (If applicable)				
NAME AND DESIGNATION	SIGNATURE	DATE		
SIGNATURE OF PRIMARY SUPERVISOR				
NAME AND DESIGNATION	SIGNATURE	DATE		
SIGNATURE OF SUPERVISEE				
NAME AND DESIGNATION	SIGNATURE	DATE		
17. ACKNOWLEDGEMENT BY HEAD OF DEPARTMENT OR RELEVANT AUTHORITY				
THE STATE OF THE S				
NAME AND DESIGNATION	SIGNATURE	DATE		