

MACP PORTFOLIO ROUTE PORTFOLIO GUIDANCE HANDBOOK

What to include and how to map your prior learning to the IFOMPT dimensions

WHAT IS A PORTFOLIO?

A portfolio is a private collection of evidence that illustrates your professional development and learning to date, as well as providing an overview of plans for future development. In addition, it facilitates analysis of current skills and knowledge through critical reflection and evaluation of learning and development. It is therefore more than a record of the CPD activity undertaken. Brown (1992) usefully defines a portfolio as:

'A private collection of evidence which demonstrates the continuing collection of skills, knowledge, attitudes, understanding and achievement. It is both retrospective and prospective, as well as reflecting the current stage of development of the individual'.

The Chartered Society of Physiotherapy (CSP) has produced a portfolio guide linked to an outcomes approach to CPD (CSP, 2016) which provides an overview of the different stages of the portfolio from a practical perspective as well as useful self-assessment tools and proformas, which may help you to identify and evaluate your learning.

[Recommended reading](#) on reflective practice is identified on page 12. Refer to the CSP webpage of the development of a portfolio of evidence:

<http://www.csp.org.uk/professional-union/careers-development/cpd/keeping-portfolio>

CRITICAL NARRATIVE

The portfolio required for your application to the MACP via this route will include a curriculum vitae [Appendix 1a (Standard Route) and 1b (Accelerated Route)], a critical narrative and authenticated supporting evidence. The evidence you submit can be authenticated by a clinical mentor or colleague who is a registered Advanced Musculoskeletal Practitioner or an MACP member. A critical narrative should be offered as part of your submission which provides an overview of your portfolio in terms of

your development, reflections, and learning (3,500 to 5,000 words). It should outline the critical features of your portfolio but should allow you to present your own critical reflection of your practice, rather than just a reiteration of the evidence itself. The critical narrative will provide context to the evidence you are submitting.

SUPPORT

The portfolio lead can assist you with queries regarding your portfolio. It is your responsibility to collate evidence and compile your portfolio.

Those applicants requiring formal and structured support can access our online mentorship scheme. Further information can be provided via the portfolio lead.

Practical tips for developing a portfolio

Find a structure for a portfolio that suits you (see [Step 1: Flow diagram - page 5](#))

Consider the requirements for MACP membership that you need to demonstrate
e.g. CV, supporting documentary evidence

Use a contents page for easy reference and to signpost the MACP appointed Assessor

USING THIS DOCUMENT

This document is separated into two sections. The information for the Standard Pathway is presented in [Section 1](#), the information for the Accelerated Pathway in [Section 2](#). Although there is some common ground between the Pathways, there are differences in process. Please refer to the section that is appropriate for you.

SECTION 1

MACP PORTFOLIO ROUTE

STANDARD PATHWAY

ASSESSMENT PROCESS FOR THE STANDARD PATHWAY

Portfolios must provide clear evidence of meeting the **required hours** as well as **meeting the stated dimensions and stated learning outcomes** linked to IFOMPT 2016 Standards document. It is essential that applicants discuss eligibility with Portfolio Route Leaders before registering their interest in order to be clear on the process, requirements and route eligibility (Standard or Accelerated Pathway). The criteria for the evaluation of the Portfolio content are provided below and in accordance with pathway registration. Applicants on the **Standard Pathway** who have not previously completed a period of mentored clinical practice (MCP) should contact the Standard Pathway Lead in order to organise this.

Following agreement between yourself and the Portfolio Route Lead and acceptance onto the appropriate pathway, all portfolios can be submitted to the MACP as advised by the Route Lead at the time of submission.

Once you have submitted your portfolio it will be assessed by one of our approved University partners. The submission of your portfolio needs to be in electronic format via the 14 fish portal on our website. Portfolio feedback will normally be provided within 8 weeks of submission; if this is not possible due to University partner delays, we will inform you. The University partners associated with the standard portfolio route are: University of Bradford; University of Central Lancashire and Sheffield Hallam University. The MACP has agreed for these Universities to provide an external assessment of the theoretical content of the submitted portfolio against the IFOMPT standards at level 7. **All communication with the university will be via the Pathway Lead - Applicants will not have direct contact with the nominated University Partner.**

M-LEVEL MARKING CRITERIA

Your portfolio submission will be assessed against the M-Level (Level 7) marking criteria (Table 1)– Submitted portfolios must reach a standard aligned with 50% or above.

Any portfolios requiring minor or major amendments will require a resubmission. You will have 6 months to resubmit your portfolio for minor amendments and 1 year to resubmit your portfolio for major amendments. If you are unable to meet these timeframes and require additional support please speak to the portfolio lead.

Assessment Criteria Level M

Study at masters level will have been at, or informed by, the forefront of an academic or professional discipline. Students will have shown originality in the application of knowledge and they will understand how the boundaries of knowledge are advanced through research. They will be able to deal with complex issues both systematically and creatively and they will show originality in tackling and solving problems. (QAA Framework for Higher Education Qualifications, 2001)

Masters Level*	Knowledge & Understanding (breadth, depth & currency)	Analysis & Argument	Reading & Research (breadth, depth & currency)	Communication & Presentation
85%+ Outstanding	Understanding of complex issues leading to creation of new knowledge	Original insight and depth of critical engagement throughout	No significant addition would improve the piece	Work is of a professional or publishable standard
70-84% Excellent	Addresses and integrates complex issues	Critical insight and depth of engagement	Integration of appropriate research material throughout the work	Work is approaching a professional or publishable standard
60-69% Good	In depth and critical understanding of a wide range of issues and knowledge appropriate to the task	Evidence of depth of critical engagement	Use of additional appropriate sources outside of those normally expected	Communication and presentation are accurate and clear
50-59% Sound	Clear knowledge and understanding of central and connected issues or tasks	Evidence of critical analysis and argument	Evidence of appropriate independent research and reading which are used to support the argument	Presentation and communication are appropriate to task and audience but may have minor errors
40-49% Adequate	Generally reliable and accurate understanding of the central issues or tasks	Evidence of appropriate analysis and argument	Evidence of sufficient reading and research	Generally sound but with errors in structure/referencing/language
20-39% Fail	Provides basic information with some accuracy and understanding.	Presents some elements of an appropriate argument but limited analysis	Limited range of relevant material	Adequate but lacks focus, precision and structure. Errors in referencing
0-20% Poor	Limited evidence of study	Minimal evidence of interpretation and analysis	Minimal evidence of engagement with relevant literature	Serious flaws in use of language, structure and referencing

Levels are inclusive of all criteria below that level and also assessed against module learning outcomes

Table 1. Master’s (M) Level Marking Criteria

Please note that evidence submitted must be at Masters (MSc) Level, post-registration – in line with the Quality Assurance Agency (2010) MSc Level 7 Descriptors (Table 2).

QAA (2010) MSc Level 7 descriptors

Graduates of specialised/advanced study master's degrees typically have:

Subject-specific attributes:

An in-depth knowledge and understanding of the discipline informed by current scholarship and research, including a critical awareness of current issues and developments in the subject

The ability to complete a research project in the subject, which may include a critical review of existing literature or other scholarly outputs.

Generic attributes (including skills relevant to an employment-setting)

A range of generic abilities and skills that include the ability to:

Use initiative and take responsibility

Solve problems in creative and innovative ways

Make decisions in challenging situations

Continue to learn independently and to develop professionally

Communicate effectively, with colleagues and a wider audience, in a variety of media.

TABLE 2. The Quality Assurance Agency (QAA) (2010) Level 7 (Master's Level) Descriptors.

FEEDBACK

You will be provided with written feedback from the nominated University Partner via the MACP Portfolio Pathway Lead. If the submission fails to meet the required standard, then we suggest that you take the opportunity to discuss this outcome with the Pathway Lead. You will be offered support and clinical mentorship at this stage in order to facilitate your resubmission. Costs for submission and re-submission are published at time of application.

Any appeals of examination outcomes will be governed by the MACP Committee for Education and Approval (CEA). Where appropriate the CEA will liaise with the nominated University Partner. All portfolio assessment will be undertaken by the University partners. As part of MACP governance, a selection of submitted portfolios will also be reviewed by an MACP External Examiner.

The above requirements comply with the IFOMPT Educational Standards Document (2016) that stipulates the range of learning outcomes and competencies required. The extract from the IFOMPT document on required learning outcomes is provided in the link to the Excel spreadsheet (page 7).

IFOMPT DIMENSIONS AND LEARNING OUTCOMES

Dimension 1: Demonstration of critical and evaluative evidence informed practice

Dimension 2: Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT

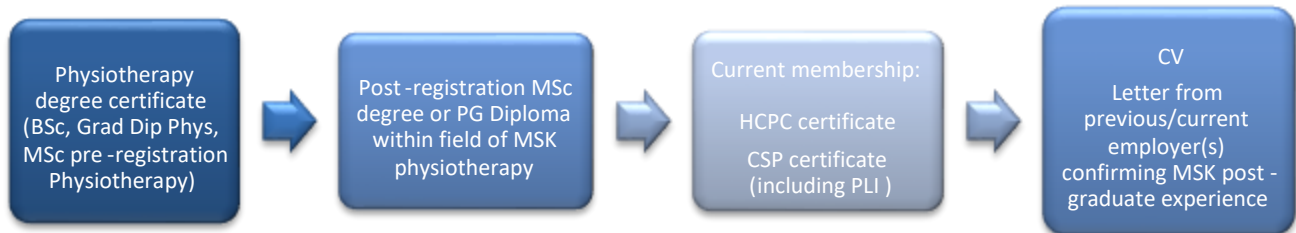
- Dimension 3:** Demonstration of critical use of a comprehensive knowledge base of the clinical sciences in the speciality of OMT
- Dimension 4:** Demonstration of critical use of a comprehensive knowledge base of the behavioural sciences in the speciality of OMT
- Dimension 5:** Demonstration of critical use of a comprehensive knowledge base of OMT
- Dimension 6:** Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders
- Dimension 7:** Demonstration of an advanced level of communication skills enabling effective assessment and management of patients with NMS disorders
- Dimension 8:** Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders
- Dimension 9:** Demonstration of a critical understanding and application of the process of research
- Dimension 10:** Demonstration of clinical expertise and continued professional commitment to the development of OMT practice

PUTTING YOUR PORTFOLIO TOGETHER

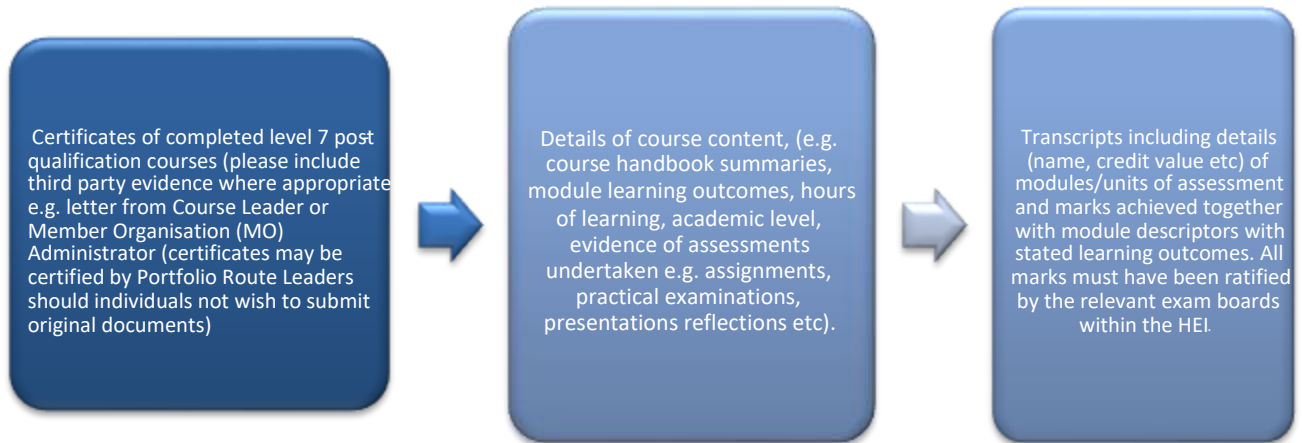
STEP 1 – COLLATE KEY DOCUMENTS TO INCLUDE IN YOUR PORTFOLIO

As an example, submission and evaluation of a completed Portfolio could take the following form:

(1) Qualifications and membership and (2) clinical experience



(3) Musculoskeletal education



STEP 2 - IFOMPT MAPPING DOCUMENT –COLLATING AND DOCUMENTING EVIDENCE OF PRIOR LEARNING



Portfolio - IFOMPT
mapping.xlsx

*Please click on this **Excel icon** to access the mapping document to assist with evidencing your prior learning within your portfolio submission. This spreadsheet will allow you to match this against each of the IFOMPT Dimensions and corresponding Learning Outcomes. Please provide page numbers/links so that the MACP Assessor clearly see where you have mapped your learning and fulfilled the requirements.*

YOUR FEEDBACK

We work hard to provide a high level of educational experience for all applicants.

We value your feedback to help us deliver the Portfolio Route as an effective and responsive experience. You are welcome to provide us with feedback at any point during your time preparing and completing your portfolio. This can be done via the pathway leads or the CEA Chair. There is also an evaluation form (appendix 7) so that you can offer your perspectives when you have completed your pathway. You may also be approached for your feedback by our External Assessor as part of our validation processes for the Portfolio Route

The portfolio route is periodically accredited by IFOMPT and scrutinised by an external examiner.

In summary you will need to provide the following documentation with your portfolio application:

These documents will be submitted directly to the Pathway Lead.

- A cover letter including a signed declaration that your work is original (see Appendix 5)
- Where appropriate, this should be accompanied by declaration from Advanced Practitioner

(Appendix 6)

- A CV (see Appendix 1a)
- Evidence of qualification in physiotherapy or certified proof of qualification in physiotherapy.
- A critical narrative which has been signed by a clinician who is an Advanced Practitioner/MACP member (see Appendix 6)
- Written confirmation from current/previous employer confirming number of years/months post qualification experience working in MSK Physiotherapy
- Evidence of 150 hours of mentored clinical practice (to be submitted to the Pathway Lead).
- Evidence of a successful examination by a MACP member of a new and returning patient
- **Your portfolio demonstrating clear mapping to the 10 IFOMPT dimensions and supporting evidence. This should include evidence of 200 hours of theory, and 150 hours on practical skills.**

The following documentation will be submitted separately to be assessed by the nominated Higher Education Institution (HEI)

		MSc Certificate & transcript	Clinic letter and onward referral	Spinal pain case study	Published research article	Outcome & reflection from watched Feedback and reflection	
Dimension 1:	Demonstration of critical and evaluative evidence informed practice	X	X	X	X	X	
Dimension 2:	Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT	X	X	X		X	
Dimension 3:	Demonstration of critical use of a comprehensive knowledge base of the clinical sciences in the speciality of OMT	X	X	X		X	
Dimension 4:	Demonstration of critical use of a comprehensive knowledge base of the behavioural sciences in the speciality of OMT	X	X	X		X	
Dimension 5:	Demonstration of critical use of a comprehensive knowledge base of OMT	X	X	X		X	X
Dimension 6:	Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders	X	X	X		X	X
Dimension 7:	Demonstration of an advanced level of communication skills enabling effective assessment and management of patients with NMS disorders	X	X			X	X

MACP Portfolio Routes – Portfolio Guidance Handbook (2024)

Dimension 8:	Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders	X				X	
Dimension 9:	Demonstration of a critical understanding and application of the process of research	X			X		
Dimension 10:	Demonstration of clinical expertise and continued professional commitment to the development of OMT practice			X	X		X

for teaching

EXAMPLE MAPPING OF EVIDENCE TO THE DIMENSIONS

FOR MACP ASSESSOR USE ONLY

MACP ASSESSOR: PORTFOLIO ASSESSMENT & FEEDBACK

IFOMPT Dimension (1 to 10)	Pass (Y/N)	Assessor feedback
Dimension 1: Demonstration of critical and evaluative evidence informed practice		
Learning outcome 1 Retrieve, integrate and critically apply knowledge from the clinical, biomedical and behavioural sciences in order to draw inferences for OMT practice, recognising the limitations of incorporating evidence into practice		
Learning outcome 2 Critically evaluate the results of treatment accurately, and modify and progress treatment and management as required using outcome measures to evaluate the effectiveness of OMT		
Learning outcome 3 Integrate and apply evidence informed approaches in the presentation of health promotion and preventative care programmes		
Learning outcome 4 Enhance and promote the rights of the patient to actively participate in the health care management taking into account the patient’s wishes, goals, attitudes, beliefs and circumstances		
Dimension 2: Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT		
Learning outcome 1 Critically apply knowledge of anatomy, physiology and biomechanics to enable evaluation of normal and abnormal function		

MACP Portfolio Routes – Portfolio Guidance Handbook (2024)

Learning outcome 2	Demonstrate appropriate selection of assessment techniques and tools through understanding of their diagnostic and evaluative qualities (including: reliability, validity, responsiveness and diagnostic accuracy)		
Learning outcome 3	Critically apply knowledge of effectiveness and risks to inform OMT interventions and accurately predict prognosis with realistic outcomes		
Learning outcome 4	Integrate and apply knowledge of prognostic, risk and predictive factors of relevant health problems to OMT management decisions to ensure the patient can make informed choices		
Dimension 4: Demonstration of critical use of a comprehensive knowledge base of the behavioural sciences in the speciality of OMT			
Learning outcome 1	Critically apply theory of behaviour and behaviour change to effective OMT assessment and management		
Learning outcome 2	Work effectively within a biopsychosocial model of OMT practice to inform assessment and management strategies		
Learning outcome 3	Critically evaluate, through sensitivity to behaviour, the influence of the OMT Physical Therapist's behaviour on a patient's behaviour and vice versa		
Learning outcome 4	Critically use data from outcome measures to evaluate the clinical behavioural aspects of a patient's presentation		
Dimension 5: Demonstration of critical use of a comprehensive knowledge base of OMT			
Learning outcome 1	Retrieve, integrate and critically apply current knowledge of the theoretical basis and evidence base of OMT to inform assessment of the NMS system		
Learning outcome 2	Critically evaluate evidence based diagnostic tests and outcome measures to enable a clinical diagnosis and effective evaluation of OMT management		
Learning outcome 3	Critically apply current evidence informed theory and knowledge of safe and effective practice of OMT in the assessment and patient-centred management of the NMS system		

MACP Portfolio Routes – Portfolio Guidance Handbook (2024)

<p>Learning outcome 4 Integrate, apply and evaluate principles of mobilisation, manipulation, motor-learning, exercise physiology, ergonomic strategies, and other modalities as components of multimodal evidence informed OMT Physical Therapy intervention, to optimise a patient’s functional ability</p>		
<p>Dimension 6: Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders</p>		
<p>Learning outcome 1 Use advanced clinical reasoning to integrate scientific evidence, clinical data and biopsychosocial factors related to the clinical context</p>		
<p>Learning outcome 2 Critically apply the hypothetico-deductive and pattern recognition <i>clinical reasoning</i> processes using the various categories of hypotheses used in OMT, related to diagnosis, treatment and prognosis</p>		
<p>Learning outcome 3 Critically evaluate and effectively prioritise clinical data collection to ensure reliability and validity of data and quality of clinical reasoning processes</p>		
<p>Learning outcome 4 Integrate evidence informed practice, reflective practice and metacognition into a collaborative reasoning/clinical decisionmaking process with the patient, carers and other health professionals to determine management goals, interventions and measurable outcomes</p>		
<p>Dimension 7: Demonstration of an advanced level of communication skills enabling effective assessment and management of patients with NMS disorders</p>		
<p>Learning outcome 1 Demonstrate empathetic, efficient and effective use of active listening skills, questioning strategies, interpersonal skills and other verbal/non-verbal communication skills to obtain reliable and valid data from the patient, avoiding errors of communication to enable effective OMT patient management</p>		
<p>Learning outcome 2 Demonstrate efficient and clear written communication, patient record keeping, evidence of informed consent for effective and safe OMT patient management that meets medico-legal requirements</p>		
<p>Learning outcome 3 Effectively explain the assessment findings and clinical diagnosis to the patient to enable a collaborative, patient-centred discussion of their management options</p>		

MACP Portfolio Routes – Portfolio Guidance Handbook (2024)


<p>Learning outcome 4 Proficiently using an advanced skill, implement effective management plans by educating patients in appropriate therapeutic rehabilitation exercise programmes, and the promotion of wellness and prevention through the education of patients, carers/care-givers, the public and healthcare professionals</p>		
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<p>Dimension 8: Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders</p>		
<p>Learning outcome 1 Critically select and use appropriate practical skills and outcome measures to enable collection of high-quality clinical data to inform effective clinical reasoning during patient assessment</p>		
<p>Learning outcome 2 Critically select and use as appropriate, a range of therapeutic OMT interventions including patient education, mobilisation, manipulation and exercise prescription with appropriate consideration of treatment timing, dosage parameters and progression of interventions</p>		
<p>Learning outcome 3 Apply all practical skills with precision, adapting them when required, to enable safe and effective practice</p>		
<p>Learning outcome 4 Critically apply a range of other interventions, as appropriate, to enhance patient rehabilitation (e.g. taping)</p>		
<p>Dimension 9: Demonstration of a critical understanding and application of the process of research</p>		
<p>Learning outcome 1 Recognise the need for the development of further evidence in OMT practice and the role of research in advancing the body of knowledge in OMT Physical Therapy</p>		
<p>Learning outcome 2 Critically evaluate common quantitative and qualitative research designs and methods</p>		
<p>Learning outcome 3 Generate an appropriate research question based on a critical evaluation of current research evidence relevant to OMT practice and NMS dysfunction</p>		
<p>Learning outcome 4 Systematically address all ethical considerations associated with research involving human subjects</p>		

MACP Portfolio Routes – Portfolio Guidance Handbook (2024)

Learning outcome 5	Effectively execute a research project* relevant to OMT practice and NMS dysfunction, selecting appropriate data analysis procedures and disseminating the conclusions of the study		
Dimension 10:	Demonstration of clinical expertise and continued professional commitment to the development of OMT practice		
Learning outcome 1	Utilise effective integration of in-depth knowledge, current best practice, patientcentred practice, cognitive and metacognitive proficiency within OMT clinical practice		
Learning outcome 2	Solve problems with accuracy, precision and lateral thinking within all aspects of clinical practice		
Learning outcome 3	Utilise sound clinical judgement, evaluating benefit and risk, when selecting OMT assessment and treatment techniques appropriate to the patient’s changing environment and presentation		
Learning outcome 4	Critically apply efficient, effective and safe OMT intervention in patients with complex presentations (e.g. multiple inter-related or separate dysfunctions and/or co-morbidities)		
Learning outcome 5	Produce scholarly contributions to the body of OMT knowledge, skills and measurement of outcomes		
	150 hours of practical skills		
	200 hours of theory		
OVERALL COMMENTS:			
ALL CRITERIA FULLFILLED		YES/NO	
IF AMMENDMENTS ARE REQUIRED ARE THESE:			
MAJOR AMMENDMENTS		YES/NO/NOT APPLICABLE	
MINOR AMMENDMENTS		YES/NO/NOT APPLICABLE	

MACP ASSESSOR: APPROVAL

	 M A C P TM	Musculoskeletal Association of Chartered Physiotherapists
	<p><i>I CERTIFY THAT THIS PORTFOLIO SUBMISSION SATISFIES ALL IFOMPT DIMENSIONS AND LEARNING OUTCOMES IN LINE WITH THE IFOMPT EDUCATION STANDARDS DOCUMENT (2016) AND MSc LEVEL 7 CRITERIA</i></p> <p>DATE APPROVED:</p>	

UNIVERSITY ASSESSOR ON BEHALF OF MACP: PRINTED NAME:

UNIVERSITY ASSESSOR ON BEHALF OF MACP: E-SIGNATURE:

RECOMMENDED READING

- Boud D, Keogh R, Walker D (1985). Reflection: Turning Experience into Learning, Kogan Page, London.
- Brown RA (1992). Portfolio Development and Profiling for Nurses, Quay Publishing Ltd, Lancaster.
- Honey P, Mumford A (1992). The Manual of Learning Styles, Peter Honey, Ardingly House, 10 Linden Avenue, Maidenhead, Berkshire.
- Girof, E.A., (2001) Reflective skills. In Maslin-Prothero, S. (ed). Balieres’s study skills for nurses. Second edition. Balliere Tindall/RCN. London.
- Jasper, M. A., (1999) Nurses' perceptions of the value of written reflection. Nurse Education Today. Vol. 19(6) p452-63.
- Jasper, M. (2003) Beginning Reflective Practice – Foundations in Nursing and Health Care Nelson Thornes. Cheltenham
- Jones, M.A. and Rivett, D.A., 2018. Clinical Reasoning in Musculoskeletal Practice-E-Book. Elsevier Health Sciences.
- Kolb D (1984). Experiential Learning: Experience as a Source of Learning and Development, Prentice Hall, New Jersey.
- Paterson, C., & Chapman, J. (2013). Enhancing skills of critical reflection to evidence learning in professional practice. Physical Therapy in Sport, 14(3), 133-138. doi:<https://doi.org/10.1016/j.ptsp.2013.03.004>
- Schon D (1983). The Reflective Practitioner, Basic Books Inc, New York.
- Wain, A. (2017). Learning through reflection. British Journal of Midwifery, 25(10), 662-666.

APPENDIX 1a (CV FOR STANDARD ROUTE)



STANDARD PATHWAY FORMAT FOR CURRICULUM VITAE

SECTION 2

MACP PORTFOLIO ROUTE

ACCELERATED PATHWAY

ASSESSMENT PROCESS FOR THE ACCELERATED PATHWAY

Portfolios must provide clear evidence of meeting the **required hours** as well as **meeting the stated dimensions and stated learning outcomes** linked to IFOMPT 2016 Standards document. After registering your initial interest, it is essential that you read the information sent to familiarise yourself with the process, requirements and route eligibility (Standard or Accelerated Pathway). You will then have the opportunity to discuss your potential eligibility with the Pathway Lead.

The criteria for the evaluation of the Portfolio content are provided below and in accordance to pathway registration. Applicants on the **Accelerated Pathway** are expected to be able to demonstrate fulfilment of theoretical learning hours via evidenced completion of an MSc (or equivalent) related to musculoskeletal practice. In lieu of a mentored clinical practice placement, applicants on the Accelerated Pathway should be able to demonstrate at least 10 years postqualification in musculoskeletal physiotherapy practice and be working at consultant level of musculoskeletal practice.

If you have any disabilities that you feel are of relevance to the submission and assessment process, please make your Pathway Lead aware of these during the application process.

STEP 1: WRITTEN SUBMISSION

Following agreement between yourself and the Pathway Lead and acceptance on to the Accelerated Pathway, all portfolios can be submitted to the MACP as advised by the Route Lead at the time of submission.

Once you have submitted your portfolio two assessors will be assigned by the MACP to review your submission. The assessors will independently review the submission and confer on their findings. When the Assessors have reviewed your submission and agreed on progression to the viva, the Pathway Lead will contact you via email and a suitable date for the viva will be negotiated between all parties. The expected timeframe for this process is 8 weeks or less. Should this process be delayed for any reason, you will be kept informed by the Pathway Lead. **It is important that you ensure we have your current contact details, particularly if should these change during the assessment process.**

STEP 2: VIVA

Prior to your viva the two appointed Assessors will jointly prepare a list of potential questions. These questions will focus on the depth and currency of the applicants underpinning knowledge, particularly in relation to musculoskeletal clinical practice.

The maximum duration for the viva will be one hour. All vivas will be undertaken via Zoom (Appendix 2), unless there are extenuating circumstances for alternative arrangements to be made. The two Assessors (at least one of whom will be an MACP member) and an MACP administrator will be present at the viva. The role of the administrator will be to set up and oversee the Zoom link. They will not be involved in the discussion during the viva, other than to monitor timing. For external monitoring of the pathway, the viva will be recorded to enable the MACP External Assessor to view the discussion retrospectively. This is a monitoring of MACP assessment processes to ensure that we maintain IFOMT standards and offer equality of assessment to all applicants undertaking the Portfolio Route. A consent form (Appendix 3) will need to be completed prior to undertaking the viva.

Following the viva, the appointed Assessors will discuss and meet agreement on the outcome and collate feedback for the applicant.

Following the viva there are 3 possible outcomes:

1. The applicant meets the criteria to fulfill demonstration of all IFOMT dimensions. The Pathway Lead will inform the applicant of their successful completion of the pathway and the applicant will be eligible to become a full member of the MACP
2. The Assessors identify criteria that have not been met but identify scope for the applicant to strengthen the evidence provided, given the applicant's current level of experience and expertise. In this circumstance, the Pathway Lead will inform the Applicant and the CEA. The applicant will be offered the opportunity to respond to the comments provided by the Assessors (Appendix 4), usually within an 8-week timeframe.
3. The Assessors identify criteria that have not been met and identify that further experiential learning is required. In this circumstance, the Pathway Lead will inform the Applicant and the CEA. The applicant will be invited to resubmit a strengthened application at a later date (which will be negotiated as appropriate for each applicant). This resubmission will carry a cost to cover reassessment of the written application and re-sit of the viva.

FEEDBACK

After the submission of your portfolio (STEP 1), if the Assessors feel that further written evidence is required before progressing to the viva, you will be informed by the Pathway Lead. You will be provided with feedback and offered the opportunity to respond to the comments within 8 weeks of this notification. You will be offered support and clinical mentorship at this stage in order to facilitate a successful response to the comments. Appendix 4 outlines how Assessor comments should be responded to.

Following the viva (STEP 2) you will receive feedback from the assessors, as outlined above. Your application (STEP 1 and STEP 2) will be assessed and commented on in accordance with M-Level criteria (as defined in the 'Assessment Criteria' section below) using an agreed level of 50% to define minimal fulfilment of criteria.

APPEALS

Any appeals of outcomes will be considered on an individual basis and governed by the MACP Committee for Education and Approval (CEA). Video of viva discussions may not be used in the appeals process. Portfolios and viva examinations will also be reviewed by an MACP External Examiner.

M-LEVEL MARKING CRITERIA

Assessment Criteria Level M

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The ability to complete a research project in the subject, which may include a critical review of existing literature or other scholarly outputs.

Generic attributes (including skills relevant to an employment-setting)

A range of generic abilities and skills that include the ability to:

- Use initiative and take responsibility
- Solve problems in creative and innovative ways
- Make decisions in challenging situations
- Continue to learn independently and to develop professionally
- Communicate effectively, with colleagues and a wider audience, in a variety of media.

TABLE 2. The Quality Assurance Agency (QAA) (2010) Level 7 (Master’s Level) Descriptors.

IFOMPT DIMENSIONS AND LEARNING OUTCOMES

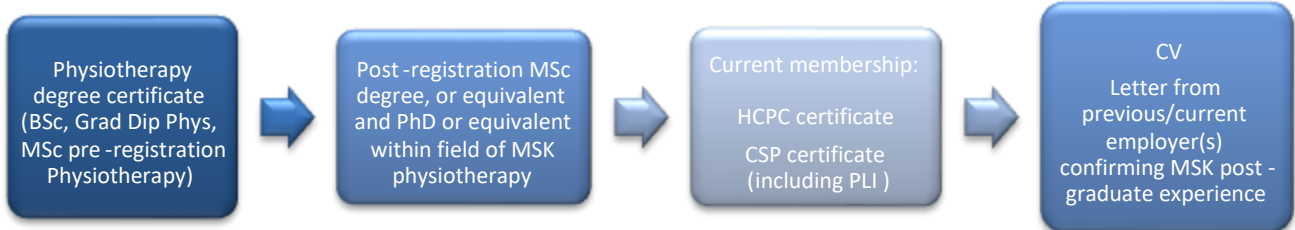
- Dimension 1:** Demonstration of critical and evaluative evidence informed practice
- Dimension 2:** Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT
- Dimension 3:** Demonstration of critical use of a comprehensive knowledge base of the clinical sciences in the speciality of OMT
- Dimension 4:** Demonstration of critical use of a comprehensive knowledge base of the behavioural sciences in the speciality of OMT
- Dimension 5:** Demonstration of critical use of a comprehensive knowledge base of OMT
- Dimension 6:** Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders
- Dimension 7:** Demonstration of an advanced level of communication skills enabling effective assessment and management of patients with NMS disorders
- Dimension 8:** Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders
- Dimension 9:** Demonstration of a critical understanding and application of the process of research
- Dimension 10:** Demonstration of clinical expertise and continued professional commitment to the development of OMT practice

BRINGING THE EVIDENCE TOGETHER

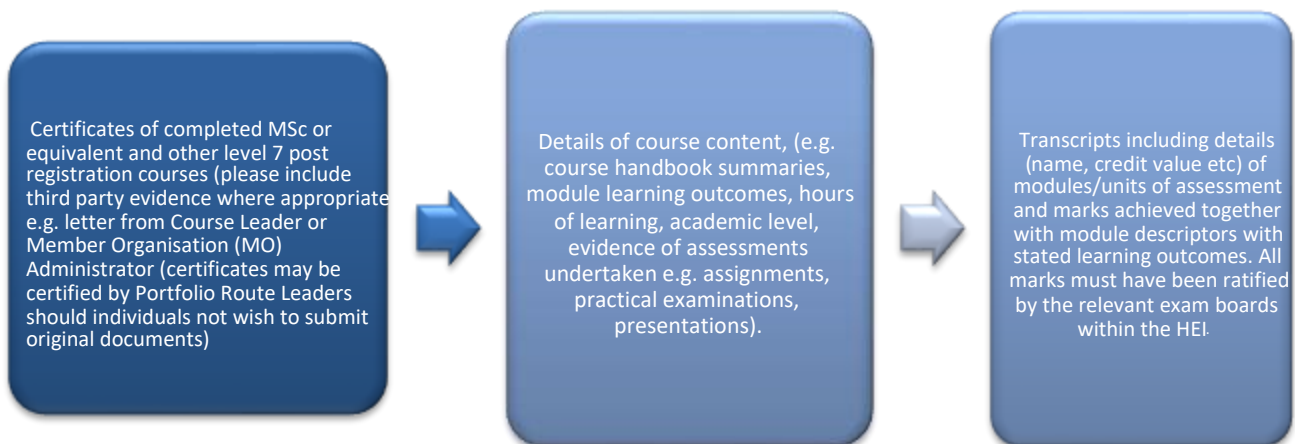
COLLATE KEY DOCUMENTS TO INCLUDE IN YOUR SUBMISSION

As an example, submission and evaluation of a completed Portfolio could take the following form:

(1) Authenticated evidence of qualifications and membership and (2) clinical experience



(3) Authenticated evidence of musculoskeletal education



Examples of additional evidence, such as conference presentations, evidence of mentorship, involvement in research and service development can be found in the tables below.

In summary you will need to provide the following documentation with your portfolio application:

- A cover letter including a signed declaration that your work is original (see Appendix 5).
- Where appropriate, this should be accompanied by declaration from Advanced Practitioner (Appendix 6)
- A CV (see Appendix 1b)
- Evidence of qualification in physiotherapy or certified proof of qualification in physiotherapy.
- A critical narrative which has been signed by a clinician who is an Advanced Practitioner/MACP member (see Appendix 6)
- Written confirmation from current/previous employer(s) confirming number of years/months post qualification experience working in MSK Physiotherapy
- Your portfolio demonstrating clearly how your knowledge and skills map to the 10 IFOMPT dimensions and including evidence of 200 hours of theory, and 150 hours on practical skills.

MAPPING TO IFOMT DIMENSIONS

EXAMPLE EVIDENCE TABLES FOR USE IN THE ACCELERATED PATHWAY

Dimension 1: Demonstration of critical and evaluative evidence informed practice	
<p>Example evidence: Relevant post-registration qualifications at Master’s level, case studies, lecture & seminar presentations, critical analysis, peer review, supervisor/mentor reports & reflections, critiques of journal articles, reports from supervision/ mentorship of colleagues/peers, audit & research reports, clinical documentation/ onward referral letters etc.</p>	
Learning outcomes	Evidence
<ol style="list-style-type: none"> 1. Retrieve, integrate and critically apply knowledge from the clinical, biomedical and behavioural sciences in order to draw inferences for OMT practice, recognising the limitations of incorporating evidence into practice 2. Critically evaluate the results of treatment accurately, and modify and progress treatment and management as required using outcome measures to evaluate the effectiveness of OMT 3. Integrate and apply evidence informed approaches in the presentation of health promotion and preventative care programmes 4. Enhance and promote the rights of the patient to actively participate in the health care management taking into account the patient’s wishes, goals, attitudes, beliefs and circumstances 	
<p>Assessor use:</p> <p>Evidence fulfils criteria at level 7- masters level: Signature</p>	

Dimension 2: Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT	
<p>Example evidence: Relevant post-registration qualifications at Master’s level, case studies, lecture & seminar presentations, critical analysis, peer review, supervisor/mentor reports & reflections, critiques of journal articles, reports from supervision/ mentorship of colleagues/peers, audit & research reports, clinical documentation/ onward referral letters etc.</p>	
Learning outcomes	Evidence

<ol style="list-style-type: none"> 1. Critically apply knowledge of anatomy, physiology and biomechanics to enable evaluation of normal and abnormal function 2. Critically evaluate knowledge informing pathology, pathogenesis and pain mechanisms underlying mechanical dysfunction of the NMS system 3. Integrate and apply knowledge of examination procedures and differential diagnosis in the assessment of NMS dysfunction 4. Critically apply knowledge and advanced clinical reasoning skills to differentiate dysfunction of the NMS system from non-mechanical dysfunction in other systems 5. Critically apply knowledge of indications, contraindications, precautions and effects to inform best practice in the management of NMS dysfunction 	
<p>Assessor use:</p> <p>Evidence fulfils criteria at level 7- masters level: Signature</p>	

<p>Dimension 3: Demonstration of critical use of a comprehensive knowledge base of the clinical sciences in the speciality of OMT</p>	
<p>Example evidence: Relevant post-registration qualifications at Master’s level, case studies, lecture & seminar presentations, critical analysis, peer review, supervisor/mentor reports & reflections, critiques of journal articles, reports from supervision/ mentorship of colleagues/peers, audit & research reports, clinical documentation/ onward referral letters etc.</p>	
<p>Learning outcomes</p>	<p>Evidence</p>

<ol style="list-style-type: none"> 1. Critically apply knowledge of the <u>clinical sciences</u> (clinical anatomy, physiology, biomechanics and epidemiology) to enable <u>effective assessment</u> of the nature and extent of patients’ functional abilities, <u>pain</u> and multidimensional needs in relation to the <u>ICF</u> classification 2. Demonstrate appropriate selection of <u>assessment</u> techniques and tools through understanding of their diagnostic and evaluative qualities (including: reliability, validity, responsiveness and diagnostic accuracy) 3. Critically apply knowledge of effectiveness and risks to inform OMT <u>interventions</u> and accurately predict <u>prognosis</u> with realistic outcomes 4. Integrate and apply knowledge of prognostic, risk and predictive factors of relevant health problems to OMT management decisions to ensure the patient can make informed choices 	
<p>Assessor use:</p> <p>Evidence fulfils criteria at level 7- masters level: Signature</p>	

<p>Dimension 4: Demonstration of critical use of a comprehensive knowledge base of the behavioural sciences in the speciality of OMT</p>	
<p>Example evidence: Relevant post-registration qualifications at Master’s level, case studies, lecture & seminar presentations, critical analysis, peer review, supervisor/mentor reports & reflections, reports from supervision/ mentorship of colleagues/peers, clinical documentation/ onward referral letters etc.</p>	
<p>Learning outcomes</p>	<p>Evidence</p>
<ol style="list-style-type: none"> 1. Critically apply theory of behaviour and behaviour change to effective OMT assessment and management 2. Work effectively within a biopsychosocial model of OMT practice to inform assessment and management strategies 3. Critically evaluate, through sensitivity to behaviour, the influence of the OMT Physical Therapist’s behaviour on a patient’s behaviour and vice versa 4. Critically use data from outcome measures to evaluate the clinical behavioural aspects of a patient’s presentation 	

Assessor use:

Evidence fulfils criteria at level 7- masters level: Signature

Dimension 5: Demonstration of critical use of a comprehensive knowledge base of OMT

Example evidence:

Relevant post-registration qualifications at Master’s level, case studies, lecture & seminar presentations, critical analysis, peer review, supervisor/mentor reports & reflections, critiques of journal articles, reports from supervision/ mentorship of colleagues/peers, published research articles & book chapters, clinical documentation/ onward referral letters etc.

Learning outcomes	Evidence
<ol style="list-style-type: none"> 1. Retrieve, integrate and critically apply current knowledge of the theoretical basis and evidence base of OMT to inform assessment of the NMS system 2. Critically evaluate evidence based diagnostic tests and outcome measures to enable a clinical diagnosis and effective evaluation of OMT management 3. Critically apply current evidence informed theory and knowledge of safe and effective practice of OMT in the assessment and patient-centred management of the NMS system 4. Integrate, apply and evaluate principles of mobilisation, manipulation, motor-learning, exercise physiology, ergonomic strategies, and other modalities as components of multimodal evidence informed OMT Physical Therapy intervention, to optimise a patient’s functional ability 	

Assessor use:

Evidence fulfils criteria at level 7- masters level: Signature

Dimension 6: Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders

Example evidence:

Relevant post-registration qualifications at Master’s level, case studies, seminar presentations, critical analysis, peer review, supervisor/mentor reports & reflections, reports from supervision/ mentorship of colleagues/peers, audit & research reports, clinical documentation/ onward referral letters etc.

Learning outcomes	Evidence
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<ol style="list-style-type: none"> 1. Use advanced clinical reasoning to integrate scientific evidence, clinical data and biopsychosocial factors related to the clinical context 2. Critically apply the hypothetico-deductive and pattern recognition <i>clinical reasoning</i> processes using the various categories of hypotheses used in OMT, related to diagnosis, treatment and prognosis 3. Critically evaluate and effectively prioritise clinical data collection to ensure reliability and validity of data and quality of clinical reasoning processes 4. Integrate evidence informed practice, reflective practice and metacognition into a collaborative reasoning/clinical decision-making process with the patient, carers and other health professionals to determine management goals, interventions and measurable outcomes 	
<p>Assessor use:</p> <p>Evidence fulfils criteria at level 7- masters level: Signature</p>	

<p>Dimension 7: Demonstration of an <u>advanced</u> level of communication skills enabling <u>effective assessment</u> and management of patients with NMS disorders</p>	
<p>Example evidence: Relevant post-registration qualifications at Master’s level, lecture/ seminar presentations, peer review, supervisor/mentor reports & reflections, reports from supervision/ mentorship of colleagues/peers, onward referral letters, published research, guidelines & policies etc.</p>	
<p>Learning outcomes</p>	<p>Evidence examples</p>

<ol style="list-style-type: none"> 1. Demonstrate empathetic, efficient and effective use of active listening skills, questioning strategies, interpersonal skills and other verbal/non-verbal communication skills to obtain reliable and valid data from the patient, avoiding errors of communication to enable effective OMT patient management 2. Demonstrate efficient and clear written communication, patient record keeping, evidence of informed consent for effective and safe OMT patient management that meets medico-legal requirements 3. Effectively explain the assessment findings and clinical diagnosis to the patient to enable a collaborative, patient-centred discussion of their management options 4. Proficiently using an advanced skill, implement effective management plans by educating patients in appropriate therapeutic rehabilitation exercise programmes, and the promotion of wellness and prevention through the education of patients, carers/care-givers, the public and healthcare professionals 	
<p>Assessor use:</p> <p>Evidence fulfils criteria at level 7- masters level: Signature</p>	

<p>Dimension 8: Demonstration of an <u>advanced</u> level of practical skills with <u>sensitivity</u> and <u>specificity</u> of handling, enabling <u>effective assessment</u> and management of patients with NMS disorders</p>	
<p>Example evidence: Relevant post-registration qualifications at Master’s level, critical analysis, peer review, supervisor/mentor reports & reflections, reports from supervision/ mentorship of colleagues/peers, audit & research reports, clinical documentation/ onward referral letters etc.</p>	
<p>Learning outcomes</p>	<p>Evidence examples</p>

<ol style="list-style-type: none"> 1. Critically select and use appropriate practical skills and outcome measures to enable collection of high-quality clinical data to inform effective clinical reasoning during patient assessment 2. Critically select and use as appropriate, a range of therapeutic OMT interventions including patient education, mobilisation, manipulation and exercise prescription with appropriate consideration of treatment timing, dosage parameters and progression of interventions 3. Apply all practical skills with precision, adapting them when required, to enable safe and effective practice 4. Critically apply a range of other interventions, as appropriate, to enhance patient rehabilitation (e.g. taping) 	
<p>Assessor use:</p> <p>Evidence fulfils criteria at level 7- masters level: Signature</p>	

<p>Dimension 9: Demonstration of a <u>critical</u> understanding and application of the process of research</p>	
<p>Example evidence: Relevant post-registration qualifications at Master’s level, audit & research reports, development of guidelines and policies etc.</p>	
<p>Learning outcomes</p>	<p>Evidence examples</p>

<ol style="list-style-type: none"> 1. Recognise the need for the development of further evidence in OMT practice and the role of research in advancing the body of knowledge in OMT Physical Therapy 2. Critically evaluate common quantitative and qualitative research designs and methods 3. Generate an appropriate research question based on a critical evaluation of current research evidence relevant to OMT practice and NMS dysfunction 4. Systematically address all ethical considerations associated with research involving human subjects 5. Effectively execute a research project* relevant to OMT practice and NMS dysfunction, selecting appropriate data analysis procedures and disseminating the conclusions of the study 	
<p>Assessor use:</p> <p>Evidence fulfils criteria at level 7- masters level: Signature</p>	

<p>Dimension 10: Demonstration of <u>clinical expertise</u> and continued professional commitment to the development of OMT practice</p>	
<p>Example evidence: Relevant post-registration qualifications at Master’s level, reports from supervision/ mentorship of colleagues/peers, audit & research reports, development of guidelines and policies etc.</p>	
<p>Learning outcomes</p>	<p>Evidence examples</p>

<ol style="list-style-type: none"> 1. Utilise effective integration of in-depth knowledge, current best practice, patient-centred practice, cognitive and meta-cognitive proficiency within OMT clinical practice 2. Solve problems with accuracy, precision and lateral thinking within all aspects of clinical practice 3. Utilise sound clinical judgement, evaluating benefit and risk, when selecting OMT assessment and treatment techniques appropriate to the patient’s changing environment and presentation 4. Critically apply efficient, effective and safe OMT intervention in patients with complex presentations (e.g. multiple inter-related or separate dysfunctions and/or co-morbidities) 5. Produce scholarly contributions to the body of OMT knowledge, skills and measurement of outcomes 	
<p>Assessor use:</p> <p>Evidence fulfils criteria at level 7- masters level: Signature</p>	

MAPPING USING AN EXCEL SPREADSHEET

The spread sheet below is a further example that you may find helpful as a way of collating supporting evidence for your extended curriculum vitae to demonstrate fulfilment of the IFOMPT dimensions. One piece of evidence, such as your MSc qualification, may be used to support more than one dimension.



Portfolio - IFOMPT
mapping.xlsx

*Please click on this **Excel icon** to access the mapping document to assist with evidencing your prior learning within your portfolio submission. This spreadsheet will allow you to match this against each of the IFOMPT Dimensions and corresponding Learning Outcomes. Please provide page numbers/links so that the MACP Assessor clearly see where you have mapped your learning and fulfilled the requirements.*

EXAMPLE MAPPING OF EVIDENCE TO THE DIMENSIONS

		MSc Certificate & transcript	Clinic letter and onward referral	Spinal pain case study	Published research article	Outcome & reflection from watched clinical peer review	Feedback and reflection for teaching at HEI-	complex
Dimension 1:	Demonstration of critical and evaluative evidence informed practice	X	X	X	X	X		
Dimension 2:	Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT	X	X	X		X		
Dimension 3:	Demonstration of critical use of a comprehensive knowledge base of the clinical sciences in the speciality of OMT	X	X	X		X		
Dimension 4:	Demonstration of critical use of a comprehensive knowledge base of the behavioural sciences in the speciality of OMT	X	X	X		X		
Dimension 5:	Demonstration of critical use of a comprehensive knowledge base of OMT	X	X	X		X	X	
Dimension 6:	Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders	X	X	X		X	X	
Dimension 7:	Demonstration of an advanced level of communication skills enabling effective assessment and management of patients with NMS disorders	X	X			X	X	
Dimension 8:	Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders	X				X		
Dimension 9:	Demonstration of a critical understanding and application of the process of research	X			X			
Dimension 10:	Demonstration of clinical expertise and continued professional commitment to the development of OMT practice			X	X		X	

RECOMMENDED READING

- Boud D, Keogh R, Walker D (1985). Reflection: Turning Experience into Learning, Kogan Page, London.
- Brown RA (1992). Portfolio Development and Profiling for Nurses, Quay Publishing Ltd, Lancaster.
- Honey P, Mumford A (1992). The Manual of Learning Styles, Peter Honey, Ardingly House, 10 Linden Avenue, Maidenhead, Berkshire.
- Girof, E.A., (2001) Reflective skills. In Maslin-Prothero, S. (ed). Baliere’s study skills for nurses. Second edition. Balliere Tindall/RCN. London.
- Jasper, M. A., (1999) Nurses' perceptions of the value of written reflection. Nurse Education Today. Vol. 19(6) p452-63.
- Jasper, M. (2003) Beginning Reflective Practice – Foundations in Nursing and Health Care Nelson Thornes. Cheltenham
- Jones, M.A. and Rivett, D.A., 2018. Clinical Reasoning in Musculoskeletal Practice-E-Book. Elsevier Health Sciences.
- Kolb D (1984). Experiential Learning: Experience as a Source of Learning and Development, Prentice Hall, New Jersey.
- Paterson, C., & Chapman, J. (2013). Enhancing skills of critical reflection to evidence learning in professional practice. Physical Therapy in Sport, 14(3), 133-138. doi:https://doi.org/10.1016/j.ptsp.2013.03.004
- Schon D (1983). The Reflective Practitioner, Basic Books Inc, New York.
- Wain, A. (2017). Learning through reflection. British Journal of Midwifery, 25(10), 662-666.

FOR MACP ASSESSOR USE ONLY

MACP ASSESSOR: ASSESSMENT & FEEDBACK – WRITTEN COMPONENT

IFOMPT Dimension	Evidenced (Y/N)	MACP assessor feedback/ Areas for discussion
Dimension 1: Demonstration of critical and evaluative evidence informed practice		
Dimension 2: Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT		
Dimension 3: Demonstration of critical use of a comprehensive knowledge base of the clinical sciences in the speciality of OMT		

MACP Portfolio Routes – Portfolio Guidance Handbook (2022)

Dimension 4: Demonstration of critical use of a comprehensive knowledge base of the behavioural sciences in the speciality of OMT		
Dimension 5: Demonstration of critical use of a comprehensive knowledge base of OMT		
Dimension 6: Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders		
Dimension 7: Demonstration of an advanced level of communication skills enabling effective assessment and management of patients with NMS disorders		
Dimension 8: Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders		
Dimension 9: Demonstration of a critical understanding and application of the process of research		
Dimension 10: Demonstration of clinical expertise and continued professional commitment to the development of OMT practice		
OVERALL COMMENT:		
APPROPRIATE TO PROGRESS TO VIVA?	Y/N	


MACP ASSESSOR: ASSESSMENT & FEEDBACK – VIVA

IFOMPT Dimension	Evidenced (Y/N)	MACP assessor feedback/ Areas for discussion
Dimension 1: Demonstration of critical and evaluative evidence informed practice		
Dimension 2: Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT		

MACP Portfolio Routes – Portfolio Guidance Handbook (2022)

<p>Dimension 3: Demonstration of critical use of a comprehensive knowledge base of the clinical sciences in the speciality of OMT</p>		
<p>Dimension 4: Demonstration of critical use of a comprehensive knowledge base of the behavioural sciences in the speciality of OMT</p>		
<p>Dimension 5: Demonstration of critical use of a comprehensive knowledge base of OMT</p>		
<p>Dimension 6: Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders</p>		
<p>Dimension 7: Demonstration of an advanced level of communication skills enabling effective assessment and management of patients with NMS disorders</p>		
<p>Dimension 8: Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders</p>		
<p>Dimension 9: Demonstration of a critical understanding and application of the process of research</p>		
<p>Dimension 10: Demonstration of clinical expertise and continued professional commitment to the development of OMT practice</p>		
<p>OVERALL COMMENT:</p>		

MACP ASSESSOR: APPROVAL

	 M A C P TM	Musculoskeletal Association of Chartered Physiotherapists
	<i>I CERTIFY THAT THIS PORTFOLIO SUBMISSION SATISFIES ALL IFOMPT DIMENSIONS AND LEARNING OUTCOMES IN LINE WITH THE IFOMPT EDUCATION STANDARDS DOCUMENT (2016) AND MSc LEVEL 7 CRITERIA</i>	
	DATE APPROVED:	
	MACP ASSESSOR 1: PRINTED NAME:	
MACP ASSESSOR 1: E-SIGNATURE:		
MACP ASSESSOR 2: PRINTED NAME:		
MACP ASSESSOR 2: E-SIGNATURE:		

APPENDIX 1b – CV (ACCELERATED ROUTE) AND EXAMPLE



ACCELERATED PATHWAY FORMAT FOR CURRICULUM VITAE

The following information is provided as a guide for the structure and information that you need to provide as part of your application to MACP to undertake the portfolio route to membership. You can format your CV as you wish, but the following headings should be included:

Personal Information (Including name, email address and contact phone number)

Qualifications Obtained (Tertiary Level - Include dates, facility, location and results)

Work / Practice History

- Current and Previous Positions
 - Details to include:
 - Dates (start and finish date month/year)
 - Title of the position(s) –
 - Facility (including name, address and contact details i.e. City, County/State, Country)
 - Responsibilities and roles (including whether position was full-time/part-time and if part-time include hours of work/week)

Registration History (including your current registration details for HCPC)

Professional Affiliations (including your current registration details for CSP)

Professional Service (such as membership of committees, research groups, mentorship)

Publications (such as journal articles, conference posters, platform presentations, research grants awarded, patient information documents)

Note: If provided this should be limited to 1-2 pages

Professional Training Courses attended (including name of course, course organiser, CPD hours and date) **IFOMPT Criteria**

Please include a brief summary (500 words max.) outlining your ability to fulfill the ten IFOMT dimensions outlined below.

- Dimension 1:** *Demonstration of critical and evaluative evidence informed practice*
- Dimension 2:** *Demonstration of critical use of a comprehensive knowledge base of the biomedical sciences in the speciality of OMT*
- Dimension 3:** *Demonstration of critical use of a comprehensive knowledge base of the clinical sciences in the speciality of OMT*
- Dimension 4:** *Demonstration of critical use of a comprehensive knowledge base of the behavioural sciences in the speciality of OMT*
- Dimension 5:** *Demonstration of critical use of a comprehensive knowledge base of OMT*
- Dimension 6:** *Demonstration of critical and an advanced level of clinical reasoning skills enabling effective assessment and management of patients with NMS disorders*
- Dimension 7:** *Demonstration of an advanced level of communication skills enabling effective assessment and management of patients with NMS disorders*
- Dimension 8:** *Demonstration of an advanced level of practical skills with sensitivity and specificity of handling, enabling effective assessment and management of patients with NMS disorders*
- Dimension 9:** *Demonstration of a critical understanding and application of the process of research*
- Dimension 10:** *Demonstration of clinical expertise and continued professional commitment to the development of OMT practice*

Other important information

- You must declare on your CV that the 'The Curriculum Vitae is true and correct as at (insert date)'.
- You must also attach copies of any results that have been stated in the CV.

An example CV is included in this Appendix.

EXAMPLE CV: PLEASE NOTE, THIS IS NOT INTENDED AS A TEMPLATE THAT YOU MUST FOLLOW. IT IS PROVIDED AS AN EXAMPLE

TO HELP YOU PREPARE A CV THAT CONTAINS THE INFORMATION WE REQUIRE, BUT IS **NOT** INTENDED TO DICTATE YOUR CHOICE OF FORMATTING OR CONTENT UNDER THE HEADINGS ETC.

FRED BLOGS

PHD, MAPPSc, BSc.

Phone: +12 12345478

Postal Address: 12 Anyroad; AnyTown; County;
Postcode

E (home): fred@hotmail.com

E (work): fred@work.edu.uk

EDUCATION

PhD. Mosby University, Mosby, Herts, UK 2016-2020 (Awarded 16.12.2020)

Dissertation: "Title "

MAppSc. University of Madeup
Manipulative physiotherapy 2000-2002

BSc Hon. University of Madeup
Physiotherapy (2:1) 1990-1993

EMPLOYMENT AND PRACTICE HISTORY

Madeup University, Mosby, Hertfordshire, HE6 4WN. UK Sept 2018-current

PhD candidate (Full Time)

- Independent development and completion of research programme investigating the impact of spinal manipulation on foot size
- Research included quantitative and qualitative research methods with clinically relevant outcomes

Madeup Hospital, Mosby, Hertfordshire, HE6 4WN. UK July 2016-May 2020

Project Officer (Part Time: 4.5hr/week)

- Development and implementation of multiagency panel to guide research planning for musculoskeletal care.
- Responsibility for.....

Madeup University, Mosby, Hertfordshire, HE6 4WN. UK Sept 2007-July 2018

Senior Lecturer, Physiotherapy (Full Time)

- Programme Lead MSc Advanced Clinical Practice (Manipulative Therapy)
- Teaching responsibilities on pre and post registration programmes • Dissertation/ research support for BSc and MSc students

Etc.....

PROFESSIONAL TRAINING COURSES ATTENDED

Primary training courses undertaken in the last 5 years are identified below. Please see additional attached document for full record.

Course Title	Training Provider	Duration	Year Obtained
Promoting Reflective Practice within Healthcare	Higher Education Training Group (online)	12 hours CPD	March 2021
Etc.	Etc.	Etc.	Etc.

REGISTRATION HISTORY

Current Registration: UK: Health and Care Professions Council (HCPC: PH12345)

Previous Registration: Another country: The Physiotherapists Board of Another Country (Registration number:1234)

PROFESSIONAL AFFILIATIONS

Chartered Society of Physiotherapy (CSP: 12345)
Fellow of the Higher Education Academy (recognition reference: 12345)
Society of Sports Medicine (12345)

PROFESSIONAL SERVICE

Expert group member: Development of clinical guidelines for xxx

- Working group for Health Education England, Jan 2020 - current

Peer-Reviewed Articles for:

- British Journal of Sports Medicine
- Journal of Orthopaedic & Sports Physical Therapy
- Physical Therapy in Sport

PUBLICATIONS

Peer reviewed publications

Blogs F. (2018) Title *The International Journal of Sports Physical Therapy*; 123(5), 860-870.
<https://doi.org/10.1234/ijspt20181234>

Conference abstracts

Blogs F., title, Venue, 4th-6th October 2018. *Poster*

Clinical Guidelines

Patient Information Leaflets

Invited Presentation

MEETING FOMT CRITERIA

As an experienced physiotherapist with advanced levels of competence in musculoskeletal physiotherapy, evidenced by my current role, I am able to plan and implement an efficient, effective, culturally responsive and client-centred care in a variety of settings. Through my consultative role and mentoring junior colleagues I am able to demonstrate my competence in dimensions.....and can evidence this with.....etc.....

DECLARATION

This Curriculum Vitae is true and correct as at the first day of March, 2021

Fred Blogs

Fred Blogs
01.03.2021

APPENDIX 2 – USING ZOOM



ZOOM

This short guide outlines how to use zoom for your viva.

BEFORE YOUR VIVA

BASIC ZOOM REQUIREMENTS

- You do not need a Zoom account to attend a session using Zoom.
- You will be sent a link to the Zoom session. Clicking on the link will prompt Zoom to start. *If you don't already have it installed on your computer, it will download and install on your device the first time. This process is quick and only takes a minute or two.*
- We recommended that you use a **desktop computer** or **laptop** to participate in your viva. You will also need:
 - An internet connection - broadband wired or wireless (3G or 4G/LTE)
 - Speakers and a microphone - these are built-in to your computer, or you can use a USB plug-in or wireless Bluetooth
 - A webcam or HD webcam - these are built-in to your computer, or you can use a USB plug-in

PREPARING FOR THE VIVA

- Ensure you can participate in the session with a **working webcam, speakers, and microphone**.
- **Think about where you are going to be for the viva.** It needs to be a quiet area that will have minimal distractions across the time you're in the session. A quiet, safe space allows you to focus on the viva AND means your colleagues/ family are not disrupted.
- **Have whatever you need within easy reach** (e.g. a drink of water).
- **If you are not familiar with using zoom**, arrange a practice session prior to your viva. If you do not have a friend or colleague who is able to help you with this, please contact your Pathway Lead who will arrange a trial session for you.

DURING THE VIVA

As with any meeting or face-to-face session, there are protocols that help with making everyone feel included, comfortable, and at their best for engaging in the space. These are our expectations and general behaviour guidelines:

- You should **log into the Zoom session 5 minutes early**.
- **Check your microphone** and that you know where the mute/ unmute button is (bottom left of the screen). Remember that mics will pick up things like your typing, humming, conversations of others in your office/home, and even your breathing!

- **Check your visual display.** Identify where your camera is and that it is positioned so that your face can be seen.
- **All those attending the viva will introduce themselves.** The assessors will outline the process for the viva.
- **The viva will take the form of a question and answer session.** Where necessary, allow pauses to accommodate for audio-visual delays.
- **We are aware that technical failures can occur.** If you start to experience any difficulties during the session, please make your assessors aware of this.

OTHER TIPS

- **Make sure your preferred name is in your profile.** It can default to only showing your email address. Having your name there makes it easy for the facilitator and your colleagues to know what you'd like to be called >> [Customising your profile](#)
- **Check that people can see you clearly on the screen.** General tips: Sit back a bit, be central, and have enough light on you. Zoom allows you to preview what your video is showing so make use of that feature! >> [Test my video](#)
- **Think about what others are seeing behind you.** You don't have to have a perfectly neat home or office in the background, but just be aware of what others are seeing when you are using Zoom.

Other resources:

- If you'd like a longer, chattier guide to using Zoom, try Jennifer Polk's [Zoom Basics](#).
- For great step-by-step instructions on all technical aspects of the platform, visit the [Zoom Help Centre](#).

Further questions? Please contact your Pathway Lead (link here)

APPENDIX 3 - CONSENT



Consent Agreement and Release

I CONSENT TO THE RECORDING OF THE ACCELERATED PATHWAY VIVA UNDERTAKEN ON:

.....(DAY/MONTH/YEAR)

I UNDERSTAND THAT THIS RECORDING WILL BE SECURELY STORED AND USED ONLY FOR THE PURPOSES OF EXTERNAL ASSESSMENT / MODERATION PROCESSES.

APPLICANT	DATE:
e-Signature	

Print Name	
Email	

ASSESOR 1	DATE:
e-Signature	
Print Name	
Email	

ASSESOR 2	DATE:
e-Signature	
Print Name	
Email	

ADMINISTRATOR	DATE
e-Signature	
Print Name	
Contact No	
Email	

APPENDIX 4 – GUIDE FOR RESPONDING TO FEEDBACK

RESPONDING TO FEEDBACK.

All resubmitted material must be accompanied by a cover letter. This cover letter must include a list of all revisions made in response to the comments from the Assessors. The areas in which changes have been made should be clearly indexed in your cover letter and highlighted in the written material.

Tabulating this information is an effective way to make your amendments clear and easy to identify in your resubmitted material. Please remember that we need to be able to identify your amendments easily in order to know that comments and concerns have been addressed.

e.g.

COMMENT	RESPONSE	MAPPING/INDEX
---------	----------	---------------

<p>1. Although communication skills were discussed (e.g. Section 2, dimension 7) it was not clear how advanced communication skills are used to enable effective management of patients with musculoskeletal disorders.</p>	<p>have to clarify the in ion of my</p> <ol style="list-style-type: none"> 1. nication skills I cluded: A record of mentoring a junior colleague in the management of a complex case, including a discussion on the appropriateness of diagnostic labelling and the influence of the choice of words/language on patients understanding. 2. An infographic I developed to translate research findings for clinicians on the management of lateral ankle sprain and an overview of how this was used in the practice setting 	<p>Section 2, dimension 7, page 5 (inserted text highlighted)</p> <p>Section 2, dimension 7, page 2 (inserted text highlighted)</p>
<p>3. etc</p>	<p>etc</p>	<p>etc</p>

APPENDIX 5 COVER LETTER AND DECLARATION



Dear Portfolio Route Lead,
Please find attached my application for the standard/accelerated (*delete as appropriate) portfolio route to membership.

I hereby declare that all of the work submitted as evidence in this portfolio is my own original work. I have composed the portfolio documents myself and I have not plagiarised the work of any other individuals.

SIGNED.....
FULL NAME.....
DATE.....

APPENDIX 6 DECLARATION OF ADVANCED PRACTITIONER



Dear Portfolio Route Lead,

I hereby declare that I am a registered Advanced Practitioner (or equivalent). I have reviewed all of the work submitted as evidence in this portfolio and I can assure you of its authenticity.

SIGNED.....
FULL NAME.....
SPECIALITY.....
DATE.....

APPENDIX 7 CRITICAL NARRATIVE

Please insert clinical narrative here (3500-5000words)

Accreditation of work:

I can confirm that the information provided in the critical narrative is the genuine work of the applicant.

Signature of Advanced Practitioner/MACP Member.....

Name.....

Position and Speciality.....

Date

APPENDIX 7 FEEDBACK FORM



Feedback form for portfolio route

Please complete and return via email to portfolio route lead.

Thank you for taking the time to give us some feedback following your experiences on the Portfolio Route. Your perspectives and ideas are important to us and will help to shape future experiences and delivery of the route.

Name

Portfolio Route (standard/accelerated)

Dates of contact with MACP

1. Overall satisfaction with experience of Portfolio Route:

VERY SATISFIED SATISFIED NEUTRAL UNSATISFIED VERY UNSATISFIED

2. Overall satisfaction with Portfolio Route Lead:

VERY SATISFIED SATISFIED NEUTRAL UNSATISFIED VERY UNSATISFIED

3. Overall satisfaction with members of the MACP (mentor, clinical mentored clinical practice mentor etc):

VERY SATISFIED SATISFIED NEUTRAL UNSATISFIED VERY UNSATISFIED

4. Are there any positive experiences/interactions which you would like to share

5. Are there suggestions/areas for improvement?

6. Would you recommend the Portfolio Route to colleagues?

7. Please use 3 words to describe your experience undertaking the Portfolio Route:

8. Do you have any other comments that you would like to add?

Thankyou for completing this survey. Please feel free to contact us at any time (add selection of contact details) if you have any further feedback, comments or questions about the Portfolio Route.