

Prifysgol Cymru
Y Ddeddf Dewi Sant
University of Wales
Trinity Saint David

Introduction to Level 6 studies

Week 1

Trausnewid Addysg; Trausnewid Byrwydau
Transforming Education; Transforming Lives

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Competence Cycle

Unconsciously Incompetent Consciously Incompetent

Unconsciously Competent Consciously Competent

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Refresh of Level 4&5

Name: Claire Kelly	Address:	D.O.B: 04/12/1982	Tel Number:	Email:
Initial Assessment Date:	Medication: Diclofenac and paracetamol	Occupation: Credit agent	GP:	
Therapist:	Past Medical History (previous operations, accidents, illness, other health problems): Asthma since childhood, well controlled with medication # clavicle 2012 ago			
Special Questions: Pain - no Pain - no Medication - no	Sport/Exercise (type, level, position, competition, training intensity, frequency, duration): Plays tennis socially 1-2x/week, for 1-2hrs Occasionally plays club competitions Mountain biking most weekends if not playing tennis, cross country up to 3 hrs			
Main Problem: R shoulder stiffness				
History of the present condition (when, activity, mechanism): Returned to tennis 1/52 ago after # clavicle R shoulder feels stiff when serving and playing backhand shots Finds it hard to get arm all the way up for overhead shots/serving Also finds it when washing hair, other overhead actions Has been out on bike, but ok at time but shoulder was achy afterwards				
Aggravating: Strong overhead backhand - immediate		Easing: Shopping activity ~ 5 mins		
Sleep: No problems	Behaviour of symptoms: Main ache in evening / aggravated earlier in day, but normally only at time		BN:	

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Objective Findings

Observation: Some atrophy on R shoulder musculature				Touch: NAD	
ROM	A	P	B	ACROSSBODY	
R	ROM P/FLEX°	ROM P/FLEX°	ROM P/FLEX°	ROM P/FLEX°	Muscles: Slight weakness noted throughout musculature Papaport: Discomfort on papaport A/C joint line Ligaments: N/A Functional: PI reproduced with minimal nerve and backhand Clients Name & DOB: _____ Sports Therapist: _____
L	ROM P/FLEX°	ROM P/FLEX°	ROM P/FLEX°	ROM P/FLEX°	
R	ROM P/EXT°	ROM P/EXT°	ROM P/EXT°	ROM P/EXT°	
L	ROM P/EXT°	ROM P/EXT°	ROM P/EXT°	ROM P/EXT°	
					Other tests: 1st/2nd -ve 3rd/4th -ve 5th/6th -ve
					Date: _____

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Treatment Plan?

- What are your short term aims?
– i.e. today, this week
- What are your long term aims?
– This month, next 6 months?

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Rehabilitation Plan

- Develop a rehabilitation plan for this patient
 - Early
 - Intermediate
 - Late
 - Predischarge

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Clinic

- Report in after subjective
 - Present diagnosis hypothesis
 - Set SIN
 - Plan objective
- Report in after objective
 - State working diagnosis
 - Present relevant clinical findings to support Dx
 - Plan treatment & rehabilitation
- At end of appointment
 - Hand in clinic notes (to legal documentation standard)
 - Reflect on clinical cases
 - Wider reading
 - Prepare for next session



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Support in Clinic

- Clinic folder
 - Aide memoire
 - Reference
 - NOT comprehensive manual
 - Consciously/unconsciously competent
- Peers
 - Evaluations
 - Feedback
 - Mentoring
 - Case conferences
- Clinical supervisor



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Being Critical at Level 6

- Being critical does not mean being negative or argumentative
- Not accepting information at face value without carefully evaluating it
- Not about ANSWERING QUESTIONS but QUESTIONING ANSWERS
 - Questioning, probing, judging...



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Benefits of learning to think critically

- Gain confidence
- Be safe & autonomous
- Improve patient outcomes & your own job satisfaction
 - A high performance workplace requires workers who have a solid foundation in thinking skills
 - Preventing & resolving problems



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What employers want...

- Self starter – takes initiative, ownership & responsibility
- Works independently & in groups to solve problems & develop plans
- Teach & advocate yourself & others
- Use resources
- Establish positive interpersonal relationships
- Access, evaluate & use information (organise)
- Apply professional & ethical standards to guide decision making



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- Critical Thinking – broad term - includes reasoning both inside & outside of the clinical setting
- Clinical Reasoning – specific term – ways of thinking about patient care issues
- Clinical judgement – result of the critical thinking or clinical reasoning





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What do critical thinkers look like?

- Characteristics
 - Inquisitive
 - Self-informed
 - Trustful of reason
 - Open-minded
 - Flexible
 - Fair-minded
 - Honest about personal biases
 - Prudent in making judgements
 - Willing to reconsider
 - Clear about issues
 - Orderly in complex matters
 - Diligent in seeking relevant information
 - Focused & persistent



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What do non-critical thinkers look like?

- Disorganised & vague
- Critical for the sake of attacking
- Critical without offering solution
- Unconcerned about motives, facts
- Emotion driven
- Isolated, competitive or unable to communicate with others when dealing with complex issues



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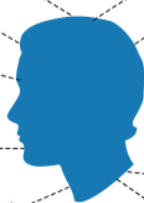
Working as a critical thinker

- Think ahead
 - Proactive, organised, prepare
- Think in-action
 - Be flexible, adaptive
- Thinking back
 - Reflective thinking



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Questions to Evaluate Your CT Potential



Have I examined how my values and beliefs affect my thinking?

How confident am I in my ability to reason?

How secure am I asking for clarification?

How open am I to new ideas and viewpoints that differ from my own?

Am I aware of my usual thinking and learning habits?

How well do I communicate and get along with others?

Do I anticipate and solve problems effectively?

Do I persist to find answers and solutions?

Am I able to overcome personal desires and beliefs in favor of thinking about what's in the key players' best interest?

Do I have effective reading and learning skills?

How well do I express myself in writing?

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Summary

- "I learned more from questioning than from reading" Socrates
- 'It is not that I am smart, it is that I stick with problems longer' Einstein

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Example study...

Critically review

British Journal of Nutrition (2007), 98, 173–180
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Milk as an effective post-exercise rehydration drink

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