



BASRaT Educational Framework

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Table of Contents

Preface	3
BASRaT Accreditation Process.....	9
<i>Criteria for Accreditation</i>	9
<i>Stages of the Accreditation Process</i>	10
<i>Fee</i>	12
<i>Ongoing Management of Accreditation</i>	12
<i>Period of Accreditation</i>	12
<i>Summary</i>	13
Professional Practice and Behaviour.....	14
Course Content.....	16
<i>Anatomy</i>	18
<i>Exercise Physiology</i>	19
<i>Sports Injuries / Musculoskeletal Assessment</i>	20
<i>Sports Massage</i>	21
<i>Academic Skills / Methods of Enquiry</i>	22
<i>Evidence Based Practice</i>	23
<i>Injury Treatment Modalities</i>	24
<i>Principles of Exercise and Rehabilitation</i>	25
<i>Sports Psychology</i>	26
<i>Sports Biomechanics</i>	27
<i>Public Health and Wellbeing</i>	28
Clinical Placement Requirements	29
Suggested Teaching Methods.....	31
Suggested Assessment Methods.....	32
Contact Details.....	34
Acknowledgements.....	35

Preface

The BASRaT Educational Framework is designed to provide educational institutions with a guide to the expectations in knowledge, skills and clinical competencies that must be acquired by students studying on BASRaT accredited courses.

The ability of students to successfully evidence their completion of the competencies as a minimum, ensures that they meet the requirements needed to achieve and maintain their status as a Graduate Member of BASRaT and therefore enjoy the benefits associated with the achievement of that professional status. The successful completion of a BASRaT accredited course also ensures that students have displayed their ability to safely and competently apply clinical reasoning across a variety of situations and assign each patient with an affective individualised treatment plan.

These guidelines offer educational institution staff with suggestions on teaching and assessment methods which may be suitable to best support the students through their programme of study. It also provides guidance as to the professional body requirements for completing the industrial work-based placements within the educational programme.

With the on-going development of healthcare professions both nationally and internationally, the educational standards of undergraduates and the governing bodies that they join after their graduation are under scrutiny. Specific health profession regulators such as the Health and Care Professionals Council (HCPC) or General Medical Council (GMC) and the organisations who regulate them, such as the Professional Standards Agency (PSA), are taking a greater interest and role in shaping the education and standards required of those who are under their organisational banners. The 2008 Lord Darzi report, 'A High Quality Workforce' recommended a standardisation of quality assurance procedures in educational programmes. The PSA have subsequently developed upon these ideas as part of the 2015 report 'Rethinking Regulation' and the follow up 2016 report 'Regulation Rethought'. BASRaT is the regulatory body for the profession of Sport Rehabilitation, with the BASRaT Accredited Register being accredited by the PSA and does therefore closely follow their recommendations and guidelines in order to ensure the quality of its registrants and offer the highest level of protection for members of the public who are service users.

BASRaT follows the established process of quality assurance and regulation of educational programmes by accrediting courses that

meet strict criteria. This involves every institution progressing initially through an accreditation process followed by regular programme review and periodic re-accreditation. Once accredited with BASRaT, institutions are required to submit details of any major programme changes as a part of the BASRaT Review of Standards process. Every institution is also required to undergo BASRaT re-accreditation in line with their standard programme re-validation cycle. This separate process of programme re-validation is controlled by both an institutions individual quality assurance team and the guidelines set out by external educational bodies, such as the Quality Assurance Agency (QAA).

One of the key ideas suggested to drive forward the excellence in educational programmes is to minimise the repetition seen between programmes producing undergraduates within the healthcare professions. This idea has been promoted and integrated into the educational framework produced by BASRaT. This document is used as a way of guiding the development of educational programme hoping to gain or maintain BASRaT course accreditation. Many of the key topics studied are promoted to being unique to an institution's Sport Rehabilitation programme. The need of unique module content is to maximise a programmes ability to meet the specific needs of a specialised professional graduate.

As has been noted by the PSA 2009 CHRE summary report 'Quality Assurance of Undergraduate Education by Health profession regulators' greater clarity is needed about the role of the respective roles of the various agencies. It is also suggested that there is a link made between the regulators programme requirements and how it relates to patient safety. This standardisation of the regulation processes means that the quality promoted by established BASRaT programmes should be inline with the excellence seen in related healthcare professional educational programmes under the banner of the PSA.

Another key idea put forward as part of the PSA regulation of professional registers is the standardisation of fitness to practice in students. The PSA have published this as part of the CHRE 2008 summary of advice on student registration. This includes;

- Professionalism and regulation should run as a developing strand of the curriculum throughout the course of study. Measures should be put in place between the Regulatory Body and Higher Education Institution for the student to develop a thorough understanding of professionalism and the purpose of regulation, as indicated in the White Paper. Respondents agreed that this should begin at recruitment to the

programme so that students enter programmes with the full knowledge of what will be expected of them beyond the straightforward academic achievement.

- Students should be made aware of the inherent risks in any learning situation and understand their responsibility in relation to the safety of the patient. The risk to patients from student practice varies from profession to profession and with the circumstances and style of their training. A single approach is therefore not desirable. The different professions expose students to patients to different extents and using different levels of supervision. There is strong support from regulators for professional behaviour being expected of students throughout their course whether working directly with patients or not.
- Higher Education Institutions should have formally agreed mechanisms for removing students from contact with patients if their fitness to practice is impaired. One approach would be for Higher Education Institutions to have Fitness to Practise committees that function in accordance with guidance from the relevant regulatory body and with the ability to remove a student from a course on the basis of a finding.
- Regulatory Bodies and Higher Education Institutions should agree to a Code of Conduct for students. The common values agreed by the Regulatory Bodies should be used as the core principles for the document.
- There is insufficient evidence to suggest that registration of students is necessary to protect patients and the public.

It is also suggested as to the extent to which fitness to practice is integrated into Higher Education programmes including;

- Throughout their training students should come to understand the requirements of professionalism and the standards that will be expected of them when they become registrants. One session per semester is insufficient. Professionalism should be reflected in everything the student is engaged in and teachers on the programmes should be role models of such professionalism.
- Higher Education Institutions should include in their disciplinary codes for healthcare students that they may be removed from a course of study either by academic failure or as a consequence of a Fitness to Practise decision. The PSA proposes a joint sign-off by the student, the university and the clinical practice supervisor on completion of training on the professional suitability of the student to be entered onto the register.

These ideas are formed under review of the six Common Values Statements by the Chief Executives Group of the Health Care Regulators on professional values;

1. Be open with patients and clients and show respect for their dignity, individuality and privacy:

- Listen to patients and clients.
- Keep information about patients and clients confidential.
- Make sure their beliefs and values do not prejudice their patients' or clients' care.

2. Respect patients' and clients' right to be involved in decisions about their treatment and health care:

- Provide information about patients' and clients' conditions and treatment options in a way they can understand.
- Obtain appropriate consent before investigating conditions and providing treatment.
- Ensure that patients have easy access to their health records.

3. Justify public trust and confidence by being honest and trustworthy:

- Act with integrity and never abuse their professional standing.
- Never ask for, nor accept any inducement, gift, hospitality or referral which may affect, or be seen to affect, their judgement.
- Recommend the use of particular products or services only on the basis of clinical judgement and not commercial gain.
- Declare any personal interests to those who may be affected.

4. Provide a good standard of practice and care:

- Recognise and work within the limits of their knowledge, skills and experience.
- Maintain and improve their professional knowledge, skills and performance.
- Make records promptly and include all relevant information in a clear and legible form.

5. Act quickly to protect patients, clients and colleagues from risk of harm:

- If either their own, or another health care worker's conduct, health or performance may place patients, clients or colleagues at risk.

- If there are risks of infection or other dangers in the environment.

6. Co-operate with colleagues from their own and other professions:

- Respect and encourage the skills and contributions that others bring to the care of patients and clients.
- Within their work environment, support professional colleagues in developing professional knowledge, skills and performance.
- Not require colleagues to take on responsibilities that are beyond their level of knowledge, skills and experience.

These ideas are in a similar vein to the Seven Nolan Principles used to maintain standards in public life. These are:

1. Selflessness

Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.

2. Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.

3. Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

4. Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

5. Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for

their decisions and restrict information only when the wider public interest clearly demands.

6. Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

7. Leadership

Holders of public office should promote and support these principles by leadership and example.

While this educational framework is designed to provide an institution with guidance, its recommendations are suggested as a minimum level of requirement in order to meet the professional governing body graduate role delineation.

Please feel free to provide constructive feedback to BASRaT in regard to this educational framework to allow future revisions to reflect the ever-changing requirements in working and educating within the healthcare sector.

BASRaT Accreditation Process

Aim

The accreditation process is to assess the ability of an educational programme to produce graduates who are fit for the purpose as Graduate Sport Rehabilitators (GSR) and thus eligible to join BASRaT as a Graduate Member.

Criteria for Accreditation

The purpose of the accreditation process is to assess if the programme produces or would be capable of producing sport rehabilitation graduates fit for purpose in line with the competencies expected of a GSR.

Key areas that are assessed are:

- Programme content.
- Nature of the delivery and assessment of the programme.
- Qualifications and experience of the lecturers to deliver material of the appropriate quality and content.
- The availability of appropriate facilities, including staffing to support learning of the skills and knowledge required to produce Graduate Sport Rehabilitators.
- The availability of suitable and appropriate clinical placements where the students can gain a variety of quality clinical experiences under appropriate supervision.

In order for a graduate to become a member of BASRaT they must meet the competencies outlined in the BASRaT Role Delineation. For a graduate programme to produce graduates who are fit for this purpose and meet this requirement, the course must cover all of the domains outlined in this educational framework. This is the minimum level of content and knowledge a course must have conveyed to its graduate. Courses are however also welcome to add additional content to that outlined within the educational framework to develop institutional areas of interest or unique selling points.

Applications may be received from:

- New undergraduate and postgraduate programmes in the field of Sport Rehabilitation.
- Undergraduate and postgraduate programmes that are being re-validated and are applying for accreditation for the first time.

- Undergraduate and postgraduate programmes that have are currently accredited by BASRaT and are being re-validated.
- Undergraduate and postgraduate programmes in the field of Sport Rehabilitation that are applying for accreditation to a currently validated programme.

Stages of the Accreditation Process

Stage One - Initial Approach

The Director/Head of the programme applying for accreditation is required to make a formal written approach to the Accreditation Officer of BASRaT, indicating an intention to seek accreditation for their course. The Accreditation Office will act as a formal liaison in these preliminary stages and provide appropriate guidance in order to facilitate the process.

Stage Two - Documentation Submission

The Director/Head of programme, once at an appropriate state of readiness, will submit of the following documentary evidence:

- 1.) Full course documentation, including programme specifications, clear module outlines and descriptions e.g. validation document.
- 2.) Brief CV's of academic staff involved in delivery of the programme including their academic and professional qualifications, and professional experience specifically related to the field of sport rehabilitation.
- 3.) A list of clinical placements including the name of principle supervisor including a brief resume of the principle supervisor's professional qualifications and experience. If, in the case of new courses seeking accreditation, such a list does not yet exist, an outline of placement planning must be submitted in its place.

Stage Three - Documentation Audit

On receipt of the documentation the Accreditation Officer will carry out the accreditation of the course in question with support from the BASRaT Executive Committee or other designated associates. They will be experienced educators in the field of Sport Rehabilitation.

These individuals will then carry out an audit of the documentation provided. They will report their findings and where they feel insufficient information has been provided, will contact the Director/Head of programme directly in an attempt to remedy this.

Once they have received and appraised the appropriate documentation informal feedback shall be given to the Director/Head of the programme.

Stage Four - Accreditation Event

For programmes going through a re-validation or validation event:

It is suggested that where possible the BASRaT representatives attend the validation event as panel members. It is hoped this may reduce the burden and cost on the educational institution and on the programme team rather than having separate events. During the event, the BASRaT accreditator(s) will view the facilities, have an opportunity to meet with students on the current programme from each level (if available on re-validations only). In addition, there may be a need for a brief separate meeting outside the main validation panel meeting with the programme team so that the accreditator(s) may discuss the process further and clarify any outstanding issues at this stage.

For existing programmes or programmes of study not undertaking re-validation or validation – institutional visit:

Once the documentation has been completed to the satisfaction of the BASRaT accreditator(s) the Accreditation Officer will then coordinate a visit to the institution. The purpose of this visit is principally to clarify any points raised from the documentation audit and secondly to view the facilities and meet with current students to assess the appropriateness for the teaching of the programme.

Stage Five – Reporting

The accreditator(s) shall report to the BASRaT Executive Committee via the Accreditation Officer as to the suitability of the programme's ability to produce "fit for purpose" Sport Rehabilitation graduates. The report they produce should include a brief review of their visit and their conclusions at the end of the process. This report can include any recommendations for accreditation as appropriate. Once approved by the BASRaT Executive Committee the Accreditation Officer will then be able to release the accreditation report to the Director/Head of the programme following payment of the accreditation fee.

Any application that has failed to gain accreditation will be informed of this and the report will outline any action required in order to fulfil any additional requirements for accreditation.

Additional Information

Fee

The applying institution is liable for a fee to cover the costs of the process and the on-going management of the course accreditation, currently £3500. This fee may change at the discretion of the BASRaT Executive Committee. The applying institution must also meet reasonable travel expenses of the visiting accreditor(s). The final written report will not be released until these costs have been met. This fee can be paid through the BASRaT administration office.

Ongoing Management of Accreditation

Please note that the BASRaT Accreditation Officer will maintain a file for each of the accredited programmes.

The Accreditation Officer should be informed of any alterations made to the programme content or delivery during the period of accreditation, as a minimum through the completion of the Review of Standards process. Failure to complete this may impact the accreditation of the course with BASRaT.

Each Programme Director or other named academic within the higher educational institution responsible for the sport rehabilitation programme shall submit a brief update confirming the nature and scope of any changes to the programme, a summary of staffing changes or changes in placement provision.

Each accredited institution is also required to contribute to the annual development and progression of the sport rehabilitation profession. **A representative member of the teaching team from each institution is expected to attend any educational events or symposia.** This representative member of staff must have a working knowledge of the delivery of the sport rehabilitation course and must not be, where possible, a member of the BASRaT Executive Committee.

Period of Accreditation

The period of accreditation will normally apply to a programme until the next point of re-validation within the institution's academic cycle (normally 4-6 years) or where following the Review of Standards, there have been significant changes to the programme noted that result in the programme no longer fulfilling the accreditation criteria. The BASRaT committee also reserve the right to trigger an institution's reaccreditation earlier should they feel significant

academic drift from the educational framework has occurred or notable need arises.

Summary

The purpose of the accreditation process is to assess if the programme under assessment produces sport rehabilitation graduates who are fit for purpose in line with the competencies expected of a Graduate Sport Rehabilitator.

Key areas that are assessed are:

- Course content, its delivery and the suitability of the experience of the lecturers to deliver material of the appropriate quality and nature.
- The availability of appropriate facilities conducive to learning of the skills required by a Graduate Sport Rehabilitator.
- The availability of suitable clinical placements where the students can gain a variety of quality clinical experiences.

It should be clear that on successful completion of a BASRaT accredited programme, graduates should be able demonstrate their capacity to:

- Practise within the core areas of sport rehabilitation.
- Manage individual workloads and work with others to optimise results.
- Deliver sport rehabilitation in response to individual needs.
- Demonstrate and apply knowledge and understanding to issues affecting sport rehabilitation practice.
- Engage in research and evidence-based healthcare.
- Respond appropriately to changing industrial demands.
- Practise and promote Continuing Professional Development (CPD).

Professional Practice and Behaviour

This style of practice should be incorporated into both the teaching and assessment throughout the educational program. This will instil the levels of behaviour and professional practice expected of a Graduate Sport Rehabilitator.

Patient Care

- Recognise conflicts of interest that may impact a care provided to a patient.
- Know and apply the commonly accepted standards for patient confidentiality.
- Always provide the best care possible for the patient using the range of skills possessed by the Graduate Sport Rehabilitator.
- Advocate for the needs of the patient.

Team Approach to Practice

- Recognise the unique skills and abilities of other healthcare professionals.
- Understand the scope of practice of other healthcare professionals and when to refer patients to others.
- Only execute duties within the identified scope of practice for Graduate Sport Rehabilitators.
- Include the patient (and others, where appropriate) in the decision-making process.
- Work with others as part of a multidisciplinary team in effecting positive patient outcomes.

Legal Practice

- Always practice in a legally competent manner.
- Identify and conform to the laws that govern healthcare, particularly those that relate to Sport Rehabilitation practice.
- Understand the consequences of violating the laws that govern healthcare, particularly those that relate to Sport Rehabilitation practice.

Ethical Practice

- Comply with the BASRaT Code of Ethics.
- Understand the consequences of violating the BASRaT Code of Ethics.
- Comply with other codes of ethics related to your area of practice, as applicable.

Advancing Knowledge

- Critically examine the body of knowledge in healthcare within related fields to sport rehabilitation.
- Always use evidence-based practice as a foundation for the delivery of care for your patient.
- Appreciate the connection between Continuing Professional Development and the improvement of your own practice as a Graduate Sport Rehabilitator.
- Promote the value of research and scholarship within the field of sport rehabilitation.
- Disseminate new knowledge within the field of sport rehabilitation to others working within similar fields using the highest possible standards to positively promote the profession.

Cultural Competence

- Demonstrate awareness of the impact that a patients' cultural differences may have on your practice and their attitudes and behaviour toward your care.
- Demonstrate the knowledge, attitudes, behaviour and skills necessary to achieve optimal treatment outcomes for a diverse range of patient populations.
- Work respectfully and effectively with all patient populations and in a diverse range of work environments.

Professionalism

- Advocate professionalism at all times as a representative of the sport rehabilitation profession.
- Demonstrate honesty and integrity at all times.
- Exhibit compassion and empathy with all patients.
- Demonstrate effective interpersonal communication skills.

Course Content

The first stage of the course should introduce the level of study expected within Higher Educational, create uniformity across the student body and develop a foundation of knowledge. The second and third stages of the course should develop that knowledge students have gained. These stages should be designed to provide students with more appreciation of the practical skills and knowledge required and ultimately provide students with the guidance needed to become an autonomous practitioner and academic of the quality expected of a GSR.

- BASRaT does not allow the condonement of any module as part of an accredited programme.
- To maintain a standardised experience and knowledge of a GSR Accreditation of Prior Experiential Learning (APEL) is not permitted against any BASRaT course modules, unless from an alternative BASRaT accredited course programme.
- Students must maintain an attendance level above 80% in each module through the completion of their course to be eligible for graduate membership with BASRaT. Failure to maintain this attendance requirement must be indicated as part of the Programme Leaders annual submission to the BASRaT Registrar of safe and competent graduates.
- BASRaT also recommends that the staff:student ratio does not exceed 1:16 and requires that this ratio does not exceed 1:20 in any practical or seminar-based sessions.
- In order to minimise the risk to service users and to minimise the risk of not gaining informed consent before treatment, students must be able to evidence a suitable English language score (overall IELTS of 6.0, with no individual element lower than 5.5).
- To help ensure clarity and protect service users, course exit awards, other than the final award, must be named appropriately to indicate the limitations in scope of practice of students and should not include 'sport rehabilitation' within those interim award names.

Integrated clinical practice must be embedded throughout the programme. Institutions should consider the inclusion of graduate support and employability programmes, such as how to start a business or how to find a job. The content that would be expected includes:

- An introduction to the Health and Safety requirements of clinical practice in line with current legislation.

- A description of the need to complete risk assessments of activities in line with current legislation.
- An introduction of the process of referral to allied healthcare providers for treatments beyond the scope of practice set out within the BASRaT professional documents.
- An introduction to the process of clinical reasoning and its application to complex patient presentation.
- A description of the need for confidentiality, in line with current legislation and reference to the data protection act.

Anatomy

This content is vitally important to forming the fundamental underpinning knowledge of a Graduate Sport Rehabilitator.

Exercise Physiology

This content is important to allowing a Graduate Sport Rehabilitator to form links in human function between the other modules studied throughout the course and should have emphasis towards the impact of exercise upon the human body within sport rehabilitation practice.

Sports Injuries / Musculoskeletal Assessment

This content is important to start developing the clinical skills and knowledge that is required of a Graduate Sport Rehabilitator. This will most likely link closely to the knowledge acquired as part of the Anatomy and Physiology modules.

Sports Massage

This is important to start developing the clinical skills and knowledge which are required of a Graduate Sport Rehabilitator. This content will most likely link closely to the knowledge acquired as part of Anatomy, Physiology and Sports Injuries. In many cases this is now being run by institutions in line with industry awarding and professional bodies, such as VTCT and The SMA, to give students who complete the content recognised qualifications in this area and an ability to increase their employability. Where possible, institutions are encouraged to link with local charities and events to allow students to apply their knowledge practically on members of the public, while also providing the institution with good public relations opportunities.

Academic Skills / Methods of Enquiry

This content is important to start developing the academic skills and knowledge that is required of any higher education student, as well as those expected of a Graduate Sport Rehabilitator.

Evidence Based Practice

This content must form a part of the final stage of the programme. It is important to produce a piece of academic evidence of sufficient quality to warrant its dissemination to others, a process that should be promoted to all higher education students, as well as Graduate Sport Rehabilitators.

Injury Treatment Modalities

The inclusion of this content is important within the programme as the use of treatment modalities forms a major part of the skills that can be utilised by Graduate Sport Rehabilitators.

Students must **complete** as part of their course a recognised advanced trauma care qualification that is endorsed by the Faculty of Pre-Hospital Care, Royal College of Surgeons of Edinburgh (details can be found [here](#)) or a course covered by the BAsem Cross Recognition of Emergency Care Courses in Sport agreement.

Principles of Exercise and Rehabilitation

The inclusion of this content is important within the programme as the use of exercise is one of the key elements of treatment used by Graduate Sport Rehabilitators.

Sports Psychology

The inclusion of this information is important within the programme as it will encourage the students to take a more holistic approach to the treatment of patients. By understanding some of the basic principles and theories that underpin an allied profession, students should be in a better position to refer patients to others in suitable circumstances, something that should be encouraged in all Graduate Sport Rehabilitators.

Sports Biomechanics

The inclusion of this content is important as it will encourage students critically evaluate patient kinematics and improve their ability to identify possible predisposing risks to injury occurrence. By understanding some of the basic principles and theories that underpin an allied profession, students should be in a better position to refer patients to others in suitable circumstances, something that should be encouraged in all Graduate Sport Rehabilitators.

Public Health and Wellbeing

The inclusion of this content is important to develop the knowledge and ability of Graduate Sport Rehabilitators to engage with the growing field of employment opportunities related to public health and wellbeing. As specialists in the prescription and application of exercise for the improvement of health, this makes GSR's the ideal professionals to meet this need.

Clinical Placement Requirements

An important and requisite part of any accredited Sport Rehabilitation course is an element of clinical experience. The current BASRaT requirements for the clinical experience element of an educational programme equates to a minimum of 400 total hours, the majority of which must be collated in environments external to the course teaching team. This is a minimum and as such should be viewed as a level from which students should be encouraged to look to build upon to gain as much experience as possible.

The clinical placement requirements of a Sport Rehabilitation course allow for students to synthesise and integrate the application of the knowledge and skills that they have acquired as part of their university programme into actual patient care. It is important therefore that the placement time is conducted using members of the public and athletes from clubs outside of their university course peers. This is important to develop the students' ability to deal with patients who they are not familiar and who present with real signs and symptoms. An important element of the clinical placement is that the experiences of the students are regularly reflected upon individually to encourage their own critical approach to practice which should be instilled into all students, while also providing an opportunity for the students to be assessed by the institution in order to establish module grading.

All institutions currently running programmes or who are seeking to accredit their course must have evidence of established, stable links to a variety of placement providers who are deemed to be of suitable quality. While on placement students must be suitably insured to allow them to complete the expected activities associated with that placement. Most commonly this insurance is provided under the institutional policy. If this is not the case and is reliant upon cover under the insurance held by the placement supervisor, this must be clearly and explicitly disclosed by the institution to the supervisor in advance of taking a student under their supervision. This agreement should be evidenced through the completion of suitable placement documentation including signature of the supervisor. This will ensure that students are able to gain experience of practice under the direct guidance of qualified, knowledgeable and suitable placement supervisors. Examples of suitable professionals would include; Graduate Sport Rehabilitators, Physiotherapists, Doctors, Chiropractors, Graduate Sport Therapists, Osteopaths and other healthcare professionals with significant industrial experience. From these placements a

maximum of 50 clinical hours can be achieved through the completion of observational placements due to the lack of direct student engagement with patients.

Placements should be conducted, within a variety of settings in which a Graduate Sport Rehabilitator may operate once their studies have been completed. Students would be required to, as a minimum, undertake placements within clinical and sports club environments with the supervisor student ratio at any one time recommended to be 1:1 but must not exceed 1:4, unless part of large event experience such as the London Marathon.

Suggested Teaching Methods

The teaching methods of any part of the degree programme are dictated by many factors such as the individual student group, the staff delivering the module and each specific module. The nature of the topics of the course, as well as the typical characteristics of the student body often encourages the use of practical or kinaesthetic styles of learning to dominate the delivery of the programme. It is however advisable that the style of teaching encompasses a wide variety of pedagogic methods to maximise the engagement of learners who prefer other learning styles. **BASRaT recommends that the staff:student ratio does not exceed 1:16, and requires that this ratio does not exceed 1:20 in practical or seminar-based sessions.**

It would be strongly encouraged that when implementing the Anatomy content of the course that it would focus upon anatomy specifically for sport rehabilitation, with a strong emphasis placed upon the palpation skills and functional knowledge of the human body. This style of learning also lends itself well to the teaching of other modules such as the Musculoskeletal Assessment and Sports Massage modules as they are dominated by manual therapy-based skills and techniques. These practically dominated workshops may commonly be accompanied with seminar-based support in which to develop the underpinning theoretical knowledge used to build the practical skills.

Modules which are dominated by the application of established theories to practice, such as Sports Psychology or Sports Biomechanics may benefit most from the use of seminars and laboratory-based sessions in which to develop the acquired knowledge to the working environment in which they are commonly applied. This style of delivery may also be applicable to other similar modules, such as Physiology.

Modules which are dominated by the application of theories of research and study skills may be considered as the most suitable for the use of more traditional styles of formal lecturing with the support of smaller group support sessions. The small group support sessions may become increasingly suitable as the course programme progresses and the use of ICT based software, such as SPSS, become prevalent.

Other module delivery styles may form a much more mixed approach to their design as the topics are much wider in their areas of application and knowledge. This may result in their delivery style changing on a session-by-session basis.

Suggested Assessment Methods

The assessment methods utilised within a Sport Rehabilitation programme will, as with the teaching methods, vary from module to module in their relevance and suitability. It would be encouraged however that as wide a range of methods will be employed in order to engage as many learners as possible, maintain the student grade profile and ensure that the level of competence is maintained across the student body.

Each institution may wish to consider the use of different assessment methods, based on each individual module's own merits and suitability to each style. Examples of assessment methods commonly employed across this subject area include;

- Practical Assessment / Viva Voce.
- Time Constrained Test.
- Short Answer Examination.
- Essay Answer Examination.
- Multiple Choice Examination.
- Case-Study Essay.
- Laboratory Report.
- Self-Reflective Essay.
- Dissertation / Extended Research Project.
- Journal Précis / Literature Review.
- Individual Presentation.
- Group Presentation.
- Poster Presentation.
- Open-Book / Seen Question Examination.
- Extended Writing Essay.
- OSCE.

While it is the decision of each institution how they assess each module, some guidance would be suggested across some modules.

The practical based modules such as Anatomy, Sports Massage and Musculoskeletal Assessment would strongly be advised to contain an element of a practical assessment using case-study examples. All practical assessments require students to attain a minimum level of competence and safety in their demonstration and application of the skill. **In order to be deemed as a competent practitioner, students must achieve a pass grade in all assessments in order for an institution to deem them to be competent and therefore to gain graduate membership to BASRaT. Students cannot use credit gained from other forms of assessment to make up any shortfall and thereby allowing them to pass that module. At undergraduate**

levels this must be at a minimum achievement of 40% and at postgraduate level this must be at a minimum achievement of 50% in each assessment.

Modules which utilise an application of data, such as Sports Biomechanics, Academic Skills and Physiology may benefit from the inclusion of laboratory report style of assessment within their assessment strategy.

Modules that draw together and apply the ideas of the programme, would be advised to contain an OSCE style assessment using a wide variety of case-studies and practical stations to test each student's ability to function as an autonomous practitioner, at a level expected of a Graduate Sport Rehabilitator.

Finally, as part of a programme, all students would be expected to complete an extended piece of individual scholarly activity. Institutions would be strongly encouraged to advise students with research which is deemed to be of sufficient quality, to publish their work after completing their programme studies.

BASRaT does not allow for the condonement of any of module as part of an accredited programme. In order to maintain the standardised experience and knowledge of a potential Graduate Sport Rehabilitator Accreditation of Prior Experiential Learning (APEL) is not permitted against BASRaT course modules, unless they are from an alternative accredited BASRaT course programme. All students must also maintain an attendance level above 80% in each module through the completion of their course to be eligible for graduate membership with BASRaT. Failure to maintain this attendance requirement must be indicated as part of the Programme Leaders annual submission to the BASRaT Registrar of safe and competent graduates.

Contact Details

The BASRaT Executive Committee would like to extend their help and support to institutions. Details can be found on the BASRaT website, www.BASRaT.org and please feel free to contact us.

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