

## Student Learning Contract

I ..... (print name) acknowledge my intention to take up a place as a student Physiotherapist within the School of Allied Health Professions, (“the School”) at the University of Leicester.

### Course participation

I agree to use all my efforts to benefit from the learning opportunities that are presented to me in both the academic and practice aspects of my programme. This I understand will include:

- **Participation in classroom and practical teaching sessions:** I understand that in consenting to take part in professional skills development I may be required to remove items of clothing that may prevent observation and / or examination so that I am able to undertake professional skills effectively. If this is a sensitive issue for me, I have been told I can discuss this with my tutor in order that agreed strategies can be put in place to remedy this.
- **Participation in group work:** I understand that I can act as a model for the teaching and learning processes involved in the acquisition of physiotherapy skills both in the School and in Practice Education placements but that I am under no obligation to agree to be a model and my refusal will in no way be a barrier to my continued eligibility to participate in skills learning exercises.

### Personal responsibilities

I understand I will be solely responsible for:

- Undertaking self-study and learning;
- Observing, learning and putting into practice the practice aspects of the programme;
- Reflecting on experiences from teaching and practice education to further enhance my learning;
- Planning my own learning and monitoring my own progress with support from support staff;
- Participating in Inter-Professional Learning Activities with peers from Nursing, Midwifery and Medicine courses;
- Producing an electronic portfolio to support my clinical and professional progress;
- Being aware of the precautions and contraindications for each of the practical skills and to wear appropriate clothing and no jewellery;
- Participating in course open days, UCAS visit days and prospective student interview events as part of my continuous professional development (CPD) activities;
- I consent to being photographed/videoed by Physiotherapy teaching staff in any learning environments for the purposes of teaching, learning support, assessment moderation, and research. In addition images may be used on the physiotherapy course website and for physiotherapy course marketing with no time limit, however additional consent will be sought for this and students can request for images to be removed at any point.

### Personal conduct

I agree to behave in a manner that supports and enhances the professional standing of the School and the reputation of Physiotherapy Education and that of all clinical organisations where I undertake my Practice Education experience at all times during the Practice and Academic aspects of my programme. This I understand includes:

- Being polite and courteous to all I come in contact with during my programme.
- Behaving in such a manner that does not compromise the health and safety, confidentiality and dignity of others.
- Ensuring that my personal attitude and behaviour to others is in line with the aim to provide an equal opportunity service and to reduce harassment of others.

### **Policies**

I shall adhere to the following:

- University of Leicester's [code of student responsibilities](#).
- [Standards of Conduct, Performance and Ethics](#) produced by the Health and Care Professions Council (HCPC).
- [Code of Members' Professional Values and Behaviour](#) published by the Chartered Society of Physiotherapy (CSP)

### **Concerns**

I agree to notify my personal tutor or placement manager immediately if I have any of the following concerns:

- Relating indirectly and/or directly to the safety of patients in my care;
- About the behaviour of a fellow student that might put another person at risk;
- About the behaviour of a colleague on Practice Education placement that might put another person at risk;
- About any situation that might constitute a health and safety risk to a service user, student, member of staff or a member of the public.

### **Minimum hours of study**

I agree to achieve the minimum hours required for each Module of study. I agree to achieve this by:

- Attending the programme for the required hours each week;
- Working the hours expected of me each day;
- Attending the programme throughout the duration of the programme except when I am granted leave of absence.

### **Regulations**

- I agree to abide by the conditions imposed on me by the [regulations of the University of Leicester](#) and by the regulations of my placement hospital in relation to hours of work, clinical uniform and professional behaviour as defined by the HCPC and CSP codes of conduct above.
- I understand that as an integral component of my learning I may be asked to participate as a patient/client during practical or clinical teaching, I consent to do this but reserve the right to withdraw my consent in any particular situation

### **Removal from the programme**

I understand that the following situations will be amongst those that may result in my participation in the physiotherapy programme being discontinued:

- Failure to abide by any of the above requirements;
- Behaviour resulting in criminal charges being brought against me whether on the premises of the University, placement hospital or otherwise;
- Persistent poor attendance and/or poor punctuality resulting in a failure to meet the required learning hours of the programme;
- Persistent poor attitude or poor behaviour, which affects my ability to progress or participate in learning opportunities.

I agree to bring to the attention of my Personal Tutor any issue that may compromise my ability to meet the above requirements. I understand that my Personal Tutor may speak to me on any of the above issues if they are concerned that I am unable to comply with any of them.

Signed. .... Date. ....