**How to get your physiotherapy student involved in client care**

The models utilised in private practice placements can be broadly summarised under the following three examples. You may choose whichever model is most suited to your practice.

1. Student led: The practitioner initially assesses/triages their clients to build a client list for a student. The student provides additional client sessions free or at a reduced cost to the client. The student may start with a few patients and observation, and build over time as they progress through the placement.

2. Shared care: The student does components of assessments and treatments with/for practitioners. The client session is shared from the start, with the student engagement with the client increasing over time.

3. Shared care progressing to student led: Student gradually manages the session over the placement with the later weeks mostly student led (fully supervised). This may start as observation with a client and progress from there.

4. Student clinic: A private practice actively utilises the whole year and sources students from several universities to enable a continuous stream of patients to see students. This tends to be larger providers who have worked out a model that works for them. The type of model will vary, but they may progress as per option

**Suggestions for effective clinical education in private practice**

There are many ways to allow students to participate actively in client care. To increase the client load and learning opportunities for students private practices have reported success when utilising the following strategies:

1. You may choose for students to perform **extra sessions** free of charge, or at a reduced rate which the client funds privately but may be in line with, or below, their usual out-of-pocket expenses under their health insurer (i.e. their gap payment). This may also provide a benefit to your clients by allowing them more sessions before reaching the ceiling limit on their rebated services under their insurer.
2. You may choose to **extend your physiotherapy sessions** (e.g. by 15-30 minutes), in which physiotherapy students can provide additional services that would not generally be provided
3. to time restrictions, such as the creation and delivery of more detailed education, support for self-management, supervised gym and home exercises or additional manual therapy.
4. Students can still be **actively involved in the process of clinical reasoning**, rather than just passively observing. Involving them integrally in history taking, assessments, and treatments, and having them involved as a partner with you on patient management can enhance their understanding of real world practice.
5. Ask students to **provide assessment and treatment plans for clients**, even if they do not provide the actual service. This will allow you to assess their knowledge, clinical reasoning and planning skills
6. Consider using templates such as the **Clinical Reasoning Model** so that students complete an in-depth analysis of the patients they see/observe so that they get the most out of the learning experience. You can ask your university to provide specific templates if needed.
7. Where applicable, assist therapists with work at local sporting clubs and group therapy classes (e.g. hydrotherapy)