

**British Association of Hand Therapists**

**Accreditation of Prior Learning  
(APL)  
Level III Guidelines**



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This Document replaces all previous documents

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## 1. Introduction

This Accreditation of Prior Learning (APL) route to gain BAHT points will be mainly used by experienced Hand Therapists. Occupational Therapists and Physiotherapists with five or more years of practice within the specialty of Hand Therapy already have evidenced based work and prior learning which they have already completed within the field of hand therapy. This route allows them to submit the work retrospectively to be assessed within this APL Level III route to gain their Level III points. These points can then be utilised to pursue the goal of achieving the Accredited Hand Therapist (British Association Hand Therapy) award.

The work submitted via the APL route must be relevant to the Post-qualification Hand Therapy Education Programme of the British Association of Hand Therapists (BAHT) and follow the guidelines in the APL document. Candidates may be asked, on application, to update their work if it is over three years old.

Therapists with less than five years' experience in Hand Therapy are advised to pursue the majority of their BAHT credit points via attendance at validated BAHT courses at Levels I and II, and to gain their Level III points prospectively using the Level III guidelines.

### **Accredited Hand Therapist (AHT BAHT)**

To achieve this award you need to have obtained 12 BAHT points. There are FOUR routes for attaining these 12 points: -

1. BAHT validated courses plus prospective Level III project assignment
2. APL (prior learning submitted retrospectively) for Level II and/or Level III points
3. Combination of 1 and 2 above to achieve 12 points
4. Achievement of the Derby University MSc in Hand Therapy or Diploma Hand Therapy from Essex University completing specific validated modules

**2) Achieving BAHT points**

Experience	Level I	Level II	Level III
	1 point	3 X 2 = 6 points	5 points
<b>Less than 2 years</b>	Intro to Hand therapy Course	N/A	N/A
<b>2-5 years</b>	Portfolio of Evidence	3 courses @ 2 points per course OR may combine with APL route	Prospective written project Level 3 route
<b>More than 5 years</b>	Portfolio of Evidence	Combination of:- <ul style="list-style-type: none"> <li>• Courses</li> <li>• APL Educator points</li> <li>• APL Case studies</li> </ul>	Prospective written project Level 3 route OR Written project via APL level III route for prior learning

**2.1 Claim for 1 APL credit point at level I**

One BAHT Credit Point can be claimed by therapists with a minimum of two years' experience in any aspect of Hand Therapy. To support this claim, the applicant is expected to submit a verified statement which should be included within their Portfolio of Evidence (PoE) when applying for other BAHT points. This statement should confirm your continuous and recent experience within the area of hand therapy over a period of two years on a full-time basis or its equivalent. Please note again this claim is only required when you are applying for other points.

**2.2 Claim for APL credit points at level II**

A maximum of SIX credit points can be claimed at Level II. TWO credit points at Level II can be achieved for every two case studies on a specialist Hand Therapy field submitted. All the information is found in the Level II APL guidelines.

To obtain 2 points at Level II you need to submit a PoE which includes:-

- An extended CV.
- 1 testimony to confirm your career in Hand Therapy .
- One long case study.
- One short case study.

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Therefore, to claim all 6 points at Level II **three** different aspects of hand therapy must be covered within **six** case studies. However, it is advised that you should not submit for all 6 points concurrently.

Clinicians who lecture on BAHT validated Course can claim educator points for Level II points. Please review the Level II APL documents to find more information on this [process](#)

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### 2.3 Claim for APL credit points at level III

To claim 5 points at this level you are required to produce a PoE which includes:-

- An extended CV
- 1 testimony to confirm your career in Hand Therapy
- A written project **completed previously** which can fit into ONE of the following three Level III assessment categories:
  1. Review of pertinent literature
  2. Employment-based report
  3. Presentation of a research project

This project submitted must not be more than 3000 words and must include recent literature.

When you have achieved 12 points you may apply for your AHT (BAHT) award using the application form on the BAHT website.

#### **Please note**

**If you have recently completed an APL application successfully you can use the same extended CV for this process. State this in your E mail to the AHT Co ordinator when you apply [baht.aht@gmail.com](mailto:baht.aht@gmail.com).**

### 2.4 Fee Structure when applying for the Level III APL route

Registration fee £30 (for admin costs)

Once you have paid your registration fee you will be provided with a supervisor to assist you with the process

For submission & assessment by two independent assessors £170

Total: **£200**

Fees must be paid electronically by BACS transfer or over the phone by phoning the BAHT secretary. Details will be provided at time of application by **Eve Dunn** (Clerical and Admin Assistance, BAHT)

**WORKING HOURS:** Monday to Thursday 1-5.30pm, Friday 12-2pm. **Tel:** [01394 610131](tel:01394610131)  
Email: [bahthandtherapy@gmail.com](mailto:bahthandtherapy@gmail.com) - Cheques can no longer be accepted by BAHT

**3) The APL Process for obtaining Level III BAHT points.**

The following table with check boxes should enable the applicant to follow this process.

No	Action / process
1	Applicant enquires to ESC regarding following the APL route to gain their Level III points .
2	Applicant completes short CV, summary of the work to be submitted and sends to ESC APL coordinator via E mail <a href="mailto:baht.apl@gmail.com">baht.apl@gmail.com</a> . £30 application fee must be paid via BACS transfer or on phone to BAHT secretary (see fee structure and payment details above).
3	Following ESC committee approval the APL coordinator will contact applicant with submission due date and name of supervisor who will support applicant throughout the process
4	Applicant prepares PoE; supervisor available for assistance. Supervisor can only give written feedback <b>once</b> on each part of written work.
6	Applicant must submit within 12 months of registration unless an extension has been negotiated with the ESC via the APL coordinator.
7	PoE can now be submitted via E mail to the BAHT secretary <a href="mailto:bahthandtherapy@gmail.com">bahthandtherapy@gmail.com</a> . The documents attached must be in PDF form and clearly titled.
8	A copy is sent to each of the Assessors who will evaluate the PoE using the marking criteria for Level III APL found later within this document.
9	The assessors will be required to return the evaluated work within 6 weeks.
10	If disparity between assessors the PoE will be submitted to an External Verifier who has the final decision.
11	The External Verifier submits his/her independent evaluation to the BAHT ESC and a decision is made as to the number of BAHT points to be awarded.
12	Applicant is notified of the results by BAHT APL Coordinator. This will be either PASS or REFER. The candidate receives feedback (front sheet of the marking criteria).
15	Those candidates who receive an REFER may resubmit taking into account the feedback provided within 6 weeks of receiving their feedback
16	The amended PoE will be evaluated by the same assessors and awarded PASS or FAIL.

17	An applicant whose PoE fails at this stage and wishes to continue through the APL route will have to return to the start of the process
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### 3.1 Responsibility of candidate within APL process

The candidate:

1. Has the responsibility for supporting their claim with appropriate evidence? It is imperative that **reflection** on all learning experiences are visible and clearly demonstrated throughout the PoE as this will be an important element of the assessment.
2. Is responsible for contacting the supervisor allocated to them for feedback and support.
3. Must submit the PoE within the agreed timescale or request an extension in a timely fashion.
4. Must follow the guidelines within this document and review the marking criteria to ensure that all aspects are covered within their Portfolio of Evidence.
5. Keep a copy of their submission

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### 3.2 Responsibility of the supervisor within the APL process

The supervisor must:

1. Answer queries on the APL process or refer back to APL coordinator as necessary.
2. Discuss possible information to be included in extended CV.
3. Discuss their choice of retrospective written paper i.e. review paper, OR employment-based report OR research project. They may be advised that this work needs updating before submission.
4. Check draft copy of extended CV and written paper submitted noting errors and omissions. The advisor is not expected to read and review further versions.
5. Keep a copy of corrected text and to document issues discussed in case this is required by the APL Coordinator at a later date.
6. The ultimate decision on the final text lies with the candidate; the advisor is not held responsible for the submitted PoE. There is peer support available for advisors through the APL Coordinator if they feel it is necessary.

### 3.3 Responsibility of the assessor within the APL process

The assessor must:

1. Objectively assess PoE claims or other relevant evidence using the assessment criteria provided.
2. Evaluate the PoE within the agreed timescale or to contact the APL Coordinator if this is not possible.

3. Provide written constructive feedback to the candidate on the front sheet of the marking criteria which will be passed to them anonymously by the APL Coordinator regardless of outcome.
4. Be available to reassess the PoE in the event of a Refer.

It is expected at Level III that one assessor will be a clinician and one will be in an academic post and therefore the roles reflect the skills and knowledge of these professional experts.

Recognising the two fields of expertise the assessors may communicate during the evaluation process if this is deemed useful.

The role of an assessor cannot be undertaken by the supervisor.

#### 3.4 Responsibility of the External Verifier within the APL process

An External Verifier will only be appointed in the event of disparity between assessors which cannot be resolved.

An external verifier will:

1. Independently review the Po E without knowledge of the assessors' comments.
2. Provide a detailed written report to APL coordinator. The External Verifier's decision is final.
3. The External Verifier will not be a member of the current BAHT ESC but will be appointed by this committee.



#### **4) Portfolio of Evidence (PoE)**

The purpose of the PoE is to provide evidence of the applicant's learning and reflection of this learning in relation to their clinical hand therapy practice.

The evidence must be : -

- In typed format, word processed in a minimum of 12-point text. The only exceptions to this are hand-written testimonials and feedback forms
- Professionally presented including subheadings and titles
- Submitted in PDF format to allow ease of evaluation by the assessors.
- Organised into three clear sections: -
  - A. Extended Curriculum Vitae (CV)
  - B. Testimony
  - C. Previously written project which must be relevant and fit into one of the following: -
    - Review paper OR
    - Employment-based report OR
    - Research project

##### **A Extended Curriculum Vitae**

When completing the extended CV it is wise to use the following headings and the examples of evidence you may wish to use.

#### **1. Professional Experience**

Postgraduate experience in Hand Therapy

- Number of years' experience.
- Previous appointments, location of work, responsibilities and, where appropriate. Reflections and evidence must be apparent.
- Present post including clinical, educational and managerial responsibilities.

This section gives the candidate the opportunity to reflect on his/her role/s alongside their clinical expertise including assessment and treatment skills.

#### **2. Courses/Qualifications pertinent to Hand Therapy**

- Qualifications and dates (university, etc.)
- Short courses, with subject/field and date(s) attended within the last 10 years.
- BAHT validated courses, with level, if applicable

Wherever practicably possible evidence of the above e.g. Certificates, programmes etc. should be included in an appendix to the CV section **with reflection** on the learning gained and how this influenced clinical practice.

The assessors are looking for demonstration of learning and reflections from any courses attended. These can be included in the appendix alongside the relevant course.

### 3 Promotion of specialism/sharing of expertise.

#### Evidence can include:

- In-service training planning and involvement.
- Innovation and changes in practice initiated/facilitated/encouraged.
- Teaching both within the Trust and outside.
- Organisation of outside speakers.
- Organisation of BAHT validated courses & teaching input.
- Experience as an External Representative for BAHT.

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Wherever practicably possible evidence of the above e.g. programmes, feedback from attendees etc. should be included in an appendix to the CV section.

The assessors are also looking for demonstration of learning/reflection from the above.

#### Management Skills

- Experience in day-to-day management/organisation of caseloads within the Hand Therapy services;
- Involvement in quality initiatives
- Involvement within the wider multi-disciplinary team (MDT)
- Experience in supervising other staff within the service
- Experience in evaluation and audit pertinent to Hand Therapy

Wherever practicably possible evidence of the above should be included as an appendix to the CV section.

The assessors are also looking for demonstration of learning/reflection from the above.

### Personal Contribution to Development of Hand Therapy

Personal statement by applicant

Evidence could include:-

- Statement of research studies completed

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- Presentations of research findings (publications &/or presentations at conferences)

The assessors are also looking for demonstration of learning/reflection from the above.

### **B Testimony**

- For APL evaluation purposes the written testimony should take the form of a short statement provided by someone who is able to judge the worth and quality of the applicant's work, experience and expertise. This may be illustrated by reference to observation of particular incidents.
- The testimony must be on headed traceable notepaper and provide the name, position & title of the person who has compiled the testimony and be signed and dated by that person.

### **C Written project**

ALL claims for APL credit points at Level III must be supported by a previously completed written project which broadly fits into ONE of the following three categories: Any new prospective work should be submitted via the Level III guideline route not the APL route.

Candidates for APL should review this next section and decide which best fits the work that they have completed.

1. Review of pertinent literature
2. Employment-based report
3. Presentation of a research project

Evidence required in the submitted paper is expected to demonstrate the candidate's:-

- Familiarity with the critical, methodological and theoretical literature associated with their field of enquiry;
- Ability to sustain, from the evidence submitted, a reasoned argument and to draw consistent and coherent conclusions;
- Ability to reflect in a mature fashion upon the outcome/conclusions of the study and to be self-critical in assessing the contribution it makes to learning;
- Review of relevant and appropriate literature which may also argue an alternative to the literature reviewed.

- Augment or provide an argued alternative to the literature associated with the topic of study
- Show a thorough grounding in appropriate research methodology(ies) and the academic concerns associated with the chosen field of study
- Demonstrate the candidate's ability to collect data and analyse them according to accepted models of analysis
- Demonstrate the candidate's ability to evaluate critically models of analysis
- Demonstrate, where appropriate, the candidate's ability to propose alternative (or hypothetical) models of analysis.

### Presentation

The written paper should:-

- Be professionally presented on numbered pages preceded by a list of contents
- Provide a cover page stating:-
  - Name of the candidate
  - Purpose of the paper e.g. "Evidence in partial support of a claim for

BAHT

APL credit points at Level III"

- Word count:- **3,000 words** not including references,  
This should not include reference list, appendices or tables.  
*The word count must not exceed prescribed length by more than 10%. If exceeded the work will only be assessed up to the 10% excess.*
- Respective dates of compilation and submission
- Include a reference list - references must conform to the Vancouver system as per BAHT journal.
- Include an appendix, if appropriate.

Notes and/or lists may be used to summarise information where appropriate but care must be taken to avoid ambiguity. All passages of continuous prose must be presented in normal sentences.

### Sources of learning

For each of the categories for the Level III written paper it is recognized that the paper may be the result of and/or influenced by either independent study or through taught courses/modules.

It is permissible to use a piece of work which may have been submitted as part of a course e.g. university or Trust, or has previously been published. Please see Level III

guidelines if you have published in the BAHT journal. If publishing in another journal please note that the paper will be reviewed and needs amending in the light of current literature/research/ practice and needs to fit with the criteria for Level III.

### **Evaluation of evidence based on co-authorship/collaborative written papers**

In keeping with the policy stated in Level III Guidelines, the BAHT ESC will consider written papers based on joint and/or collaborative work. The BAHT credit points that can be awarded for joint or collaborative work will reflect the level of involvement and responsibility of the author who is applying for APL.

For example, where it can be clearly demonstrated that 50% of the work was undertaken by each of two authors, a maximum of 2.5 BAHT credit points can be awarded. There must be written, signed evidence as to who is the main author.

In the case of group projects, BAHT credit points can be awarded to the first author only, again there must be written and signed evidence as to who is the main author.

#### **i) Review Paper**

The review paper may be written in a style required for publication by a specific journal. It should be an analytical, critical and evaluative written discussion making use of published and other sources. It is not expected that the preparation of a paper will include original research. It is expected that the paper will:

- Explore and discuss the way the issue under review is analysed in the published literature and unpublished sources.
- Present an overview which evaluates the discussion (own and others) and brings this together in a conclusion.

The review paper should have elements of this framework:

- Literature review.
- Identification of strands of thinking and research.
- Review of topic in light of identified thinking & research.
- Follow-through & evaluation of perspectives.
- Framing of perspectives & research in own thinking.
- Development & argument of own position.
- Review of topic in light of own argument.
- Evaluation of study & placement in context.

## **ii) Employment based Report**

The report may be based on managerial and organisational aspects of hand therapy. It may consider published and unpublished documents, research reports and the author's own investigations.

The employment-based report should have a secure evidence base and aspects of the framework below:

- Literature review.
- Other data (including own).
- Review of areas of information and analysis.
- Review of issue in light of information & analysis.
- Review of possible responses/solutions.
- Evaluation of responses/solutions.
- Proposal and argument.
- Evaluation.

## **iii) Research Project**

An acceptable written paper will provide an account of original research/investigation carried out by the candidate. The research must be related to hand therapy and the written paper must demonstrate that the applicant has used appropriate investigative design, appropriate methods of data collection and analysis, with discussion and critical evaluation.

The project report should follow this framework:

- Introduction.
- Literature review.
- Method (design, equipment/materials, subjects).
- Results.
- Discussion.
- Evaluation and recommendations.
- Conclusion.

### Achieving a pass for the Portfolio of Evidence

The next table of this document illustrates the detailed marking criteria used by the assessors.

In accordance with the Level III marking criteria the candidate must achieve a pass grade of at least 60 % within sections A and B combined (Extended CV & Testimonies) AND at least 60% in section C (Written paper) to achieve an overall pass grade.

The weighting shown on the marking criteria sheets show the areas in which a pass is essential. It is advised that the candidate assessors their portfolio of evidence themselves before submission to make sure that they haven't missed any important information or sections.

### Criteria for marking Portfolio of Evidence – Level III

Name of applicant:-				
		PASS	REFER/FAIL	COMMENTS
Presentation of portfolio	E	A well presented piece of work which follows the required format; is carefully and logically organised into three sections. Grammar and spelling are accurate.	Presentation does not follow the required format; is disorganised with inconsistent use of headings or sections. Language not always clear; grammar and spelling poor.	
<b>A. Extended CV</b> Professional Experience	E	Years of experience in each post stated.	Inconsistent statements regarding years in post.	
	E	Previous appointments, location of work with responsibilities identified with clear reflections.	Previous appointments, location of work listed. Limited description of work responsibilities with little evidence of reflection.	
	E	Clear description of present post including	Description of present post including clinical,	

Level III APL

		clinical, educational and managerial responsibilities and roles Evidence of reflection on roles.	educational and managerial responsibilities and roles is unclear or incomplete. Little evidence of reflection on roles.	
	E	Clear evidence of reflection on personal development of clinical expertise.	Little evidence of reflection on personal development of clinical expertise.	
<b>1. Courses/Qualifications pertinent to Hand Therapy.</b>	E	Professional qualification/s with date/s and place/s included. Evidence included in the appendix.	Incomplete detail of professional qualification/s with date/s and place/s. Inadequate evidence in the appendix.	
	E	Short courses, with subject/field and date(s) attended within the last 10 years logically listed. BAHT validated courses are listed, with level, if applicable.	Short courses, with subject/field and date(s) attended are not logically listed and/or go beyond the last 10 years. BAHT courses are listed but where applicable the Level not identified.	



Name of applicant:-				
		PASS	REFER/FAIL	COMMENTS
	E	Certificates, programmes etc. are included in the appendix to the CV section.	Certificates, programmes etc. are absent from the appendix to the CV section.	
	E	Clear demonstration of learning from courses attended and are included in the appendix alongside the relevant course.	Learning gained from courses attended is not identified or if included in the appendix is not alongside the relevant course and is more descriptive than reflective.	
<b>2. Promotion of specialism / sharing of expertise.</b>	E	<p>Examples of at least 3 of the following are included:-</p> <ul style="list-style-type: none"> <li>• In-service training planning and involvement.</li> <li>• Teaching both within the Trust and outside through programmes etc in appendix.</li> <li>• Organisation of outside speakers.</li> <li>• Organisation of BAHT validated courses &amp; teaching input.</li> <li>• Experience as an External Representative for BAHT.</li> </ul> <p>Feedback from attendees is included and is positive.</p> <p>Evidence of reflection and learning from these activities is clearly stated.</p>	<p>Less than 3 examples are given.</p> <p>Examples are not well documented.</p> <p>Little evidence of involvement in planning or teaching on courses related to hand therapy.</p> <p>OR</p> <p>If involvement there is little or no reflection on the learning from the experience.</p>	

Name of applicant:-				
		PASS	REFER/FAIL	COMMENTS
<b>3. Management Skills</b>	E	<p>There is clear evidence of:</p> <ul style="list-style-type: none"> <li>• Experience in day-to-day management/organisation of caseloads within the Hand Therapy services.</li> <li>• Experience in supervising other staff e.g. students, support workers.</li> <li>• Experience in evaluation and audit pertinent to Hand Therapy.</li> </ul> <p>Wherever possible further evidence of the above is included in the appendix to the CV section. Demonstration of learning identified.</p>	<p>Evidence of some managerial skills but these are not clearly presented.</p> <p>Little or no reflection of learning from the managerial aspects of the post/s held.</p>	
<b>4. Personal contribution to Development of Hand Therapy.</b>	E	<p>The personal statement by applicant demonstrates commitment to the speciality of hand therapy.</p> <p>Possible evidence included:-</p> <ul style="list-style-type: none"> <li>• research studies, clinical audit, and/or development of treatment modalities.</li> <li>• If published or presented at conferences etc. evidence of this is included in the appendix.</li> </ul> <p>Demonstration of learning from the above.</p>	<p>The personal statement is more descriptive than reflective and shows limited contribution to the speciality of hand therapy. Where evidence is presented little or no learning is identified.</p>	

Name of applicant:-				
		PASS	REFER/FAIL	COMMENTS
<b>B. Testimony</b>	E	The testimony is provided by someone who is deemed able to judge the worth and quality of the applicant's work, experience and expertise. Where appropriate reference is made to observation of particular incidents.	The testimonies submitted is limited or inappropriate and does not provide evidence of a variety of experience and expertise.	
	E	The testimony provides the name, position & title of the person who has compiled the testimony and is signed and dated by that person.	Provenance of testimony is in doubt.	
	E	The testimony reflects a different aspect of the candidate's skills and knowledge pertinent to hand therapy.	The testimony is limited and repetitive in the evidence they provide.	
<b>Appendix to CV</b>	E	Logically presented with clear enumeration and headings/title. Supporting documents are easily located in the appendix.  Appendices to support the extended CV are clearly numbered and logically presented	Disorganised presentation and items are not easily found in relation to main document. Not all appendices have heading/title. Limited use of appendices to support the CV. Appendices are not numbered or logically presented.	
<b>Number of passes for sections A &amp; B:</b>			<b>/16</b>	
<b>Name of assessor:</b>				

<b>Name of applicant:</b>			
<b>C Written paper</b> Please circle which has been presented and use relevant marking criteria.	<b>Review paper</b>	<b>Employment-based report</b>	
		<b>Research project</b>	
	<b>PASS</b>	<b>REFER/FAIL</b>	<b>COMMENTS</b>
<b>All written papers</b>  <b>Presentation/structural criteria.</b>	There is a cover page stating the following: Title, clinical/institutional setting, date of submission, name of author, word count.	Not all required elements are stated.	
	A professionally presented piece of work, carefully and logically organised with numbered pages preceded by a list of contents.	The paper is poorly presented with little to no attention to detail e.g. contents list is incomplete and/or inaccurate, pagination is absent or intermittent.	
	Grammar and spelling are correct, all passages of continuous prose are presented in a fluent style, meaning is clear.	Grammar and spelling are uncorrected and in sections of prose, at times, the meaning is unclear.	
	Tables and/figures, where used, are clearly labeled and included in the contents page. Tables/figures are used with discretion and their inclusion clearly explained in the text.	Tables and/figures are not systematically labeled and not included in the contents page. Tables/figures are used without explanation and do not aid the reader's understanding of the paper.	
	Abstract or summary 250 words max. includes purpose and outcome/s of study.	Abstract exceeds the word count and /or does not give clear purpose or outcome of the study.	

<b>Statement of ownership</b>	Signed by author, countersigned by supervisor OR by representative of steering group	One or both signatures are absent.	
<b>Word count (2 000 – 3 000)</b>	Word count is stated and the work is within the word limit.	Word count not stated / is deemed to be inaccurate. Word limit exceeded by more than 10%.	

Name of applicant:				
		PASS	REFER/FAIL	COMMENTS
<b>Referencing including bibliography</b>		Referencing is consistently and accurately applied and follows a recognised convention (e.g. Vancouver) which is stated. All sources identified and acknowledged.	Referencing is inconsistently and/or inaccurately applied and does not follow a recognised referencing convention. Not all sources are acknowledged in the text. Evidence of plagiarism.	
<b>Appendices</b>		Appendices are used as appropriate and follow the reference section. They are clearly numbered and included in the contents page.	Appendices are used inappropriately e.g to present information which should have been a part of the main text. They are not clearly numbered and/or are not included in the contents page.	
<b>Ethical issues</b>		Acknowledgment that ethical issues have been considered and the relevant action taken i.e. ethical approval: consent forms/letters are included.	Ethical issues not addressed / acknowledged. Where consent is deemed necessary, absence of consent forms / letters etc.	
<b>Contribution to the field of Hand Therapy</b>		Study augments / provides an argued alternative to the literature associated with the nominated topic of study.	Study provides little support or new knowledge to the nominated topic of study.	
<b>Mandatory for all written papers</b>	E	Evidence of familiarity with the critical, methodological & theoretical literature associated with the field of enquiry.	Little or limited evidence of familiarity with the critical, methodological & theoretical literature associated with the field of enquiry.	
		Able to sustain, from evidence submitted, a reasoned argument and to draw consistent and coherent conclusions.	Limited ability to use the evidence submitted to sustain a reasoned argument and to draw consistent and coherent conclusions.	

<b>Name of applicant:</b>			
	<b>PASS</b>	<b>REFER/FAIL</b>	<b>COMMENTS</b>
	Able to reflect in a mature fashion upon the outcomes /conclusions of the study and to be self-critical in assessing the contribution that the study makes.	Little or no evidence of an ability to reflect in a mature fashion upon the outcomes /conclusions of the study and/or to be self-critical in assessing the contribution that the study could make.	
<b>Review Paper</b>			
<b>Literature review</b>	Wide range of literature is reviewed relevant to the topic with evidence of critical appraisal.	Limited range of literature reviewed or some is irrelevant to the topic being addressed.	
<b>Strands of thinking and research</b>	Evidence of understanding of the various strands of thinking and research in the topic area and an ability to synthesise these.	Little or no evidence of understanding of the various strands of thinking and research in the topic area with limited ability to synthesise these.	
<b>Review of topic</b>	Topic is reviewed from a variety of sources of evidence, demonstrating a good knowledge of the topic area.	Topic is reviewed from limited sources of evidence.	
<b>Evaluation of perspectives</b>	Demonstration of an ability to critically evaluate different perspectives.	Little evidence of critical evaluation of perspectives and/or tendency to biased, unsupported viewpoints.	
<b>Evaluation of study &amp; placement in context.</b>	Realistic appraisal and evaluation of study. Implications for future practice are summarised. Clear conclusions made.	Appraisal and evaluation of the study is limited. Inability to recognise/identify implications for future practice. Unsubstantiated or invalid conclusions.	
<b>Employment based report</b>			
<b>Introduction</b>	Introduction clearly identifies the issue/topic to be discussed.	Introduction is vague and the topic for discussion is not clearly identifiable.	

<b>Name of applicant:</b>			
	<b>PASS</b>	<b>REFER/FAIL</b>	<b>COMMENTS</b>
<b>Literature review</b>	Wide range of literature is reviewed from both published and unpublished sources all of which are relevant to the topic with evidence of good critical appraisal.	Limited range of literature reviewed or some is irrelevant to the topic being addressed. Little or no evidence of critical appraisal.	
<b>Review of information</b>	Other information presented is critically appraised and synthesised and leads the reader logically to the issue for discussion.	The information is presented in a descriptive manner with little or no critical appraisal. The reader is unsure of the final issue for discussion.	
<b>Review of possible responses/solutions.</b>	Possible responses/solutions are clearly presented and reviewed.	Possible responses/solutions are unclear and not systematically reviewed.	
<b>Evaluation of possible responses/solutions.</b>	The possible responses/solutions are clearly evaluated and critically appraised.	Little to no evidence of evaluation or critical appraisal of possible responses/solutions.	
<b>Proposed response/solutions.</b>	The proposed response is identified with clear justification for its choice.	The proposed response is described but little to no rationale or justification for its choice.	
<b>Conclusion &amp; Evaluation.</b>	Conclusions well argued and substantiated.	Unsubstantiated or invalid conclusions.	
<b>Research report</b>			
<b>Introduction</b>	Clear introduction to the project. Topic related to hand therapy identified and focus of study is consistent and maintained throughout.	Introduction is absent or brief. Link to hand therapy is unclear and focus of study is not maintained.	
<b>Literature review</b>	Wide range of literature is reviewed relevant to the topic with evidence of	Limited range of literature reviewed or some is irrelevant to the topic being addressed.	



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	good critical appraisal.	Literature is described rather than appraised.	
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<b>Name of applicant:</b>			
	<b>PASS</b>	<b>REFER/FAIL</b>	<b>COMMENTS</b>
<b>Research method</b>	Thorough grounding in possible research methods for the topic area with clear justification for the method chosen.	Little evidence of knowledge of research methods and no justification for the method chosen for the study.	
	Able to collect data and analyse it according to accepted models of analysis.	Inappropriate choice of research method – subject/s OR instrument/s OR method/s of data analysis.	
	Able to briefly critically evaluate available models of analysis and to propose alternative (or hypothetical) models of analysis.	Little or no evidence of critical evaluation of available models of analysis.	
<b>Results</b>	Results are clearly and logically presented in a range of appropriate forms for the data collected e.g. tables, graphs etc.	Results are not clearly presented and/or are in inappropriate forms OR with heavy reliance on one format.	
<b>Discussion</b>	Discussion reflects the data collected and analysed. There is realistic evaluation of the research method used with possible alternatives if appropriate.	Discussion does not reflect the data collected or analysed. There is little or no evaluation of the research method used.	
<b>Recommendations/ Conclusions</b>	There are recommendations for future research related to the topic area. Conclusions well argued and substantiated.	Recommendations are unclear, unrealistic or unrelated to topic of study. Simplistic or brief conclusion. Unsubstantiated or invalid conclusions.	
<b>General appraisal of portfolio of evidence</b>	The portfolio demonstrates the applicant's commitment to hand therapy through personal professional development and	The portfolio is more descriptive than reflective and professional development is limited in relation to the time in the specialty. Little or no	

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	facilitating good practice in others. Clear evidence of reflective practice.	evidence of reflective practice.	
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<b>Name of applicant:</b>	
<b>Number of passes for sections A &amp; B:</b>	<b>/16</b>
<b>Number of passes for written paper:</b>	<b>/</b>
<b>TOTAL:</b>	<b>/</b>
<b>PASS/REFER/FAIL (delete as appropriate)</b>	
<b>Name of assessor:</b>	

**APL Application Form**

Please complete this form and tick checklist to ensure you have included all the information required. Return this electronically to the BAHT APL advisor baht.apl@gmail.com after confirming payment of the £30 registration fee with the BAHT Secretary. This fee must be included before the ESC can consider the application

Name of Candidate:
BAHT Membership number:
Contact email:
Contact address:

I wish to apply for the APL process to complete (please circle)		
Level 2 (2 points)	Level 2 (4 points)	Level 2 (6 points)
Level 3 (5 points)		

Title of project to be used for Level 3 points:
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I have paid the £30 application fee via (Please circle)

Bacs Transfer

Via telephone

Signature of candidate: \_\_\_\_\_

Date: \_\_\_\_\_

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