

 Form 18 G OCP Portfolio Marking Guide	HEALTH PROFESSIONS OF SOUTH AFRICA PROFESSIONAL BOARD FOR OCCUPATIONAL THERAPY, MEDICAL ORTHOTICS AND PROSTHETICS AND ARTS THERAPY PORTFOLIO MARKING GUIDE FOLLOWING PERIOD OF SUPERVISED PRACTICE
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The criteria shown in the table below will be used to examine the portfolio. A mark will be awarded for each criterion. An average of the five criteria will be calculated for the final mark.

CRITERIA:	MARK
Uncovering / identifying needs: Awareness of the specific individual circumstances of this client community or situation and the central issues to be addressed.	
Theoretical constructs: Ability to draw on theory to make sense of the various dimensions of practice.	
Context: All factors tangible and intangible that impacted on the interchange.	
Agent: Recognition of the applicant's own ability to use strategies in effecting change.	
Learner: Ability to capture what was learnt and how this could be generalised to other situations.	
Final Mark	

The descriptors in the table below will be used when criteria are examined:

DESCRIPTORS	INDICATORS OF STRUCTURAL COHERENCE	%
Brilliant: Far exceeds expectations; absolutely outstanding; excels across all domains	Exceptional coherence, integration of and abstraction from theory and practice; formulates new constructs; high order interrogation and re-conceptualisation of practice	85 - 100
Excellent: Consistently integrates and excels across most domains.	Well-grounded in professional paradigms; applies & critiques theory in practice; interpretive, reflective and intuitive implementation; modifies judgement using objective and intuitive evidence	75 - 84
Strong: Consistently good integration; some aspects are excellent.	Applies relevant theory to represent personal & professional insights but misses finer points, attempts to transfer emerging insights to wider contexts, integrates evidence into practice.	70 - 74
Sound: Basics intact and integration beginning to be evident; good across most	Grasps key issues, appreciates and uses essential principles, well developed concrete arguments, some consideration of meta theories & starting to apply critical thinking	60 - 69

DESCRIPTORS	INDICATORS OF STRUCTURAL COHERENCE	%
domains, some aspects are strong.		
Basic: Basics are in place but application is shallow, obvious weakness in certain in certain areas.	Develops structure using external frames of reference, begins to interpret evidence, uses unsupported personal rather than professional or academic beliefs, beginning to substantiate with reference to theory.	50 - 59
Weak: Almost meeting threshold standard, barely satisfactory with significant weaknesses.	Reproduces with limited understanding of inter-relatedness of concepts, possibly unsafe practice but has awareness, sparse understanding of fundamental principles, rudimentary attempts at linking constructs.	40 - 49
Inadequate: Very poor, does not meet minimum requirements to demonstrate competence for independent practice.	Fundamental flaws; significant gaps in knowledge, skills and attitudes, fragmented and inaccurate reproduction of information; may pose danger to clients due to unsafe practice	0 - 39

Reference

Buchanan H, Van Niekerk L, Moore R (2001). Assessing Fieldwork Journals: Developmental Portfolios. *British Journal of Occupational Therapy*, 64(8), pp. 398-402.

ISPO 2009 article in respect of Medical Orthotics and Prosthetics to follow.