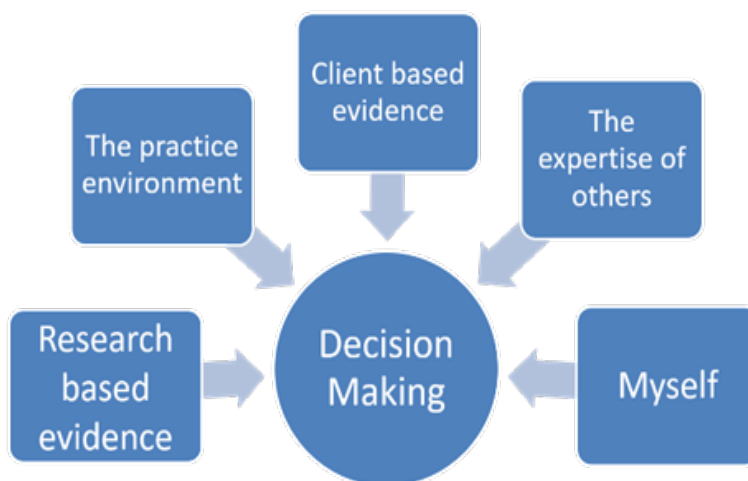


THE FIVE FINGER FRAMEWORK




This framework has been developed from a research project with clinicians, lecturers, students and the literature. It represents the influence of a variety of sources of evidence for professional decisions. It provides direction to explore the essential information when thinking through practice decisions. Five aspects were considered to have an important influence on decision making. These are:





- research evidence from literature
- local environment resources (culture, policies, guidelines, and protocols)
- client's expertise, situation and perspective
- expertise of others
- practitioners' own knowledge and experience.

The purpose of the framework is to make these overt so that they can be readily considered as sources of evidence to underpin reasoning in practice.

The decision making process is in the palm of your hand. Each person has a hand that has unique features. So every decision making process may differ depending on what informs it. What is important is that your reasoning is well informed. The fingers represent the sources of evidence available to inform the decision at hand.

The decision making process follows the problem solving process – there are multiple decisions that need to be made at each step of the process such as identifying the cues, the assessments to use, the problem that you will address, the plans to manage the problem, what the outcome was and how to evaluate the outcome. This framework helps the student/therapist ensure they are exploring evidence to inform decisions from a variety of sources.

THE FIVE FINGERS	THE HAND IN ACTION:
 Research Evidence	This is the literature i.e. research articles, books, reports that provide information about the value of e.g.a specific assessment, or an intervention. <i>Here the question is what's the best research evidence to help me.</i>

<p> The local context/environment</p>	<p>Consider polices that impact on practice and provide direction for service such as clinical guidelines, specified assessment or practice frameworks. Much of the research evidence is integrated into local best practice guidelines. The culture of the environment is also considered – the way things are done that might be unique to that practice environment and will be influenced by contextual factors such as geographical location, services available, ethnicity of population, who are in the team and how they work together. The question to ask is <i>“how are things done here in this workplace and community, and how do I best find that out?”</i></p>
<p> Client Insights</p>	<p>The client understands what will make a difference to them and is able to identify “what works” from their perspective. This finger represents client centred practice – developing an understanding of the clients’ view, working in partnership with the client, equalising the power balance in the relationship. Associated skills include but are not limited to therapeutic communication and relationship development skills, cultural competence, collaboration skills, advocacy skills. The student/therapist asks <i>“what is the client’s perspective and how can I best ascertain this? How can we work together in this situation? What do I need to inform the client of and how should I do this?”</i></p>
<p> Experienced practitioner expertise</p>	<p>An experienced clinician works with similar cases and acquires a lot of ‘know how’. They are also very familiar with the practice environment; they know how things are done in that place. An efficient way to get information about what to do and how to do it is to use the expertise of others by asking them questions and by observing them in practice. This is ideal information for the student/therapist, here they ask <i>“who is the best person to help me with this, and how can I get that help?”</i> Tapping the expertise of others can also be broadened to attending conferences and professional training and watching online presentations from experts in the field.</p>
<p> Myself</p>	<p>What do you bring to the situation? What experience and knowledge do you already have that informs your clinical reasoning? The most influential element of decision making comes from what we already have in terms of knowledge, skills and attitudes developed in academic and fieldwork learning and through all past life experience. Safe use of this is enhanced through genuine reflective practice, the ability to understand and use constructive feedback and self-awareness. Skills in therapeutic use of self develop as the student/therapist learns about what they have within them that is helpful and how they can use this awareness to practice in a way that is right for them.</p>