Clinical Assignments and Important Dates

Cl Survey faxed to 217-540-3599 or scan and send to <u>kforeman@lakelandcollege.edu</u> at end of first week of clinical______. (Due by Friday at 12:00 pm.)

The following are due at Site Visit:

Orientation check off sheet Verification of hours Student Report at Site Visit 10 SOAP notes (for Clinical Practicum III) Pharmacology Report (for Clinical Practicum V)

APTA Clinical Evaluation Experience Survey and case study outline will be due on

------•

Send back electronically to <u>kforeman@lakelandcollege.edu</u> or mailto:

LLC Kluthe Center Kay Foreman 1204 Network Centre Drive Effingham, IL 62401

For each day late, 5 hours of observation at a physical therapy setting is required along with a grade reduction of one (1) letter grade.

LAKE LAND COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM STUDENT MEDICAL INFORMATION FORM

| NAME | |
|--|---------------|
| ADDRESS | |
| HOME PHONE | |
| Medical Conditions: | |
| | |
| Directions in case of Medical Emergency: | |
| | |
| Emergency Contacts: | |
| Name: | Name: |
| Relationship: | Relationship: |
| Home Phone: | Home Phone: |
| Work Phone: | Work Phone: |

Blanket student liability insurance is provided to all Physical Therapist Assistant students by Lake Land College.

LAKE LAND COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM CLINICAL AFFILIATION ORIENTATION CHECKLIST

Please use the following checklist when providing the LLC PTA student with an orientation to your facility.

Introduction to Personnel

- ____ Clinical Instructor (CI)
- _____ Center Coordinator of Clinical Education (CCCE)
- _____ Physical Therapy or Rehab Department Manager
- _____ Physical Therapy Department staff/support personnel
- ____ Other members of the rehab team

Orientation of Policies and Procedures

- _____ Safety and emergency procedures
- _____ Infection control procedures
- _____ Procedures for billing and documentation
- _____ Procedures for patient discharge
- _____ Procedures for ordering of equipment
- _____ Policy related to Patient Privacy and Confidentiality

Orientation for Delivery of Care

- _____ Patient services provided
- ____ Treatment areas
- ____ Equipment/supplies
- _____ Cleaning procedures

Establish CI/student PTA Relationship

- _____ Review written student expectation/goals
- _____ Review student's previous clinical and life experience
- _____ Review student's preferred learning style(s)
- _____ CI expectations for clinical made clear
- _____ Establish mechanism for communication
- _____ Establish frequency of communication

Other Topics Discussed

Clinical Practicum Time Sheet PTA085 -Clinical Practicum III - 160 hours (4 Weeks) PTA097 -Clinical Practicum IV-240 hours (6 Weeks) PTA099 - Clinical Practicum V- 320 hours (8 Weeks)

Student Name

Name of Facility _____

Clinical Instructor Name_____

| DATE | No. of Hours* | CI Signature |
|--------|---------------|--------------|
| | | |
| | | |
| | | |
| | | |
| WEEK 1 | Total*= | Signature= |
| | | |
| | | |
| | | |
| | | |
| WEEK 2 | Total*= | Signature= |
| | | |
| | | |
| | | |
| | | |
| WEEK 3 | Total*= | Signatura_ |
| WEER 3 | | Signature= |
| | | |
| | | |
| | | |
| | | |
| WEEK 4 | Total*= | Signature= |
| | | |
| | | |
| | | |
| | | |
| WEEK 5 | Total*= | Signature= |
| | | |
| | | |
| | | |
| | | |
| WEEK 6 | Total*= | Signature= |

| DATE | No. of Hours* | CI Signature |
|--------|---------------|--------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| WEEK 7 | Total*= | Signature= |
| | | |
| | | |
| | | |
| | | |
| | | |
| WEEK 8 | Total*= | Signature= |

TOTALHOURS = _____ CLINICAL INSTRUCTOR SIGNATURE _____

*As per the student handbook, lunch/break and prior arrival to start of day does not count toward clinical hours. In some settings, the work week may exceed 40 hours. Students will be expected to complete the full clinical practicum dates.

Lake Land College PTA Program Clinical Instructor Survey Fax to 217-540-3599 within 1 week

| Cl's | 's Name | Facility | |
|------|---|---|----------------|
| Cl's | 's Email | Year: | |
| Stat | ate of Licensure | License Number | |
| | meet your needs as a Clinical Instructo | r, please complete the following survey. Please circle the best res | sponse to each |
| 1. | Do you feel the CPI is a good eva | uation tool for clinicals? | |
| | Yes | No | |
| 2. | I need to have additional training | on using the online Clinical Performance Instrument. | |
| | Yes | No | |
| | If yes, please indicate the area(s | you needassistance: | |
| 3. | Are there any areas of clinical tea | ching that you would like information on: YES NO | |
| | If yes, please indicate what areas | Role of the CI Legal Issues | |
| | Orienting Students | Evaluating Students | |
| | Communicating with Stude | ts Ethical Issues Goal Writing | |
| | Supervising Students | Dealing with Exceptional Students | |
| | Facilitating Learning | | |
| | Minimum Required Skills | | |
| | - | Student deficits and Unsafe Practices | |
| | Other | | |
| 4. | Are you an APTA Credentialed C | nical Instructor? YES NO | |
| | If no, are you interested in attending | g an APTA Clinical Instructor Credentialing Workshop? | YES NO |
| 5. | Please list other specialist certific | ations that you have | |
| 6. | • | TA Recognition of Advanced Proficiency? YES | NO |
| 7.] | How many years of experience do you | have <u>as a PT or PTA</u> ? | |
| | Less than 1 year 1-5 yea | s 5-10 years 10-15 years 15-20 years Over | 20 years |
| 8.] | How many years of experience do you | have as a Clinical Instructor? | |
| | Less than 1 year 1-5 yea | rs 5-10 years 10-15 years 15-20 years Over | 20years |
| 9 | Area(s) of Expertise: | | |
| 10.] | .Do you use the Lake Land College Cl | Development webpage listed below? YES NO | |
| | https://www.lakelandcollege.edu | academic-programs/clinical-instructor-information/ | |

PTA CPI Web 2.0 Instructions for a Cl

Login to PTA CPI Web 2.0 at https://cpi2.amsapps.com/user_session/new

- 1. Your username is your email address provided to the school you are working with.
- 2. If you had a username/password with a Physical Therapy program, it will also work with the Physical Therapy Assistant programs. If you did not have a password, or forgot your password, please click on the 'I forgot or do not have a password' link and follow the instructions to set/reset your password. PLEASE NOTE: Make sure to close out of any internet browsers containing PTA CPI Web 2.0 prior to accessing the link in your email as this may result in an error when trying to set/reset your password.

Update Information (If you've previously have done this, please go to Editing the CPI)

- 3. Click on the 'My Info' tab to update your information. You must update the APTA Data Release Statements found in the Data Authorization section.
- When you are done editing, hit 'Update'. Verify APTA Training/Start the CPI (If you've previously have done this, please go to Editing the CPI)
- 5. Click on your student's name in the 'My Evaluations' section on your home page or click on the Evaluations tab and then hit 'Edit'. If you do not see your students name listed, and have previously used CPI Web for a PT student, click on 'PTA' in the upper right hand corner to switch to the PTA CPI Web view. You are prompted to verify if you have completed the APTA PTA CPI Training. If you have completed the training, please click the 'I have completed the APTA PTA CPI online training and assessment.' button.
 - a. If you have not completed the training, please follow the directions on the page to take the APTA PTA CPI Training.
 - b. If the email address you took the training with is different than your username, you will be prompted to enter the email address registered with APTA.
 - c. If you are having issues verifying you've completed the training, please contact PTA CPI Web Support at <u>ptacpiwebsupport@academicmanagement.com</u>. Please provide your name, email address used to take the training, and the date you passed the training.

Editing the CPI

- 1. Once you have verified you have completed the APTA PTA CPI Training, you will see all 14 sections of the CPI.
 - a. You can edit one section at a time by clicking on 'Edit Now' to the right of the CPI.
 - b. You can edit all sections at the same time by clicking on 'Edit All' at the top of the Edit column.
- 2. Click on 'View Sample Behaviors', 'View Introduction', and 'View Instructions' to view the details of how to fill out the CPI.
 - a. If you have any questions, comments or run into any issues using PT CPI Web, please contact Support at ptacpiwebsupport@academicmanagement.com. (Last Updated 3/09/10)
- 3. Mouse over any underlined word to view an APTA glossary definition. This is available for the Performance Dimensions and the Anchor Points on the APTA Rating scale.
- 4. Add comments to the comment box and select the rating for the student on the slider scale. For the Interventions, please make sure to select whether a skill was Performed, Observed, or Not Available.
- 5. When you are done editing a section, click on the 'Section Sign Off' box and hit 'Save'. Be sure to save your work!! If you leave the page without saving, your comments could be lost!!

Signing off on the CPI

- 1. Once all sections are marked as 'Completed', please sign-off on your CPI. You can sign off on the CPI by clicking on the 'Evaluations' tab and clicking on the 'Sign Off' link.
- 2. Once you sign off on your CPI, you are unable to edit it further. Your student will be able to see your CPI only if they have also signed off on their CPI.

Viewing your CPI with your Student and Signing-Off on your student's CPI

- 1. Click on the 'Evaluations' tab.
- 2. Click on 'View' in the Actions column.
- 3. Use the filters to see the comments from both student and Cl at once.
- 4. In the 'Evaluations' tab you will see a link to sign-off on your student's CPI indicating you've discussed the performance with your student.

Additional Features:

Creating a Critical Incident Report (only to be used as needed)

- 1. To create a Critical Incident Report, click the link that says 'Critical Incident'
- 2. Fill out the report appropriately
- 3. Once you hit 'Save', the report will be sent to the CCCE, ACCE and student.
- 4. Any completed Critical Incident Reports can be found in the 'Critical Incidents' tab.

Adding Post-Assessment Comments to the CPI:

1. In the 'Evaluations' tab you will see a link to sign-off on your student's CPI indicating you've discussed the performance with your student. Once you and your student have signed-off on each other's CPI, you can add overall comments by clicking on 'View' and adding comments.

Anchor Definitions

Beginning performance*:

- A student who requires direct personal supervision 100% of the time working with patients with constant monitoring and feedback, even with patients with simple conditions.
- At this level, performance of essential skills is inconsistent and clinical problem solving* is performed in an inefficient manner.
- Performance reflects little or no experience in application of essential skills with patients.
- The student does not carry a patient care workload with the clinical instructor (a PTA directed and supervised by a physical therapist or a physical therapist).

Advanced beginner performance*:

- A student who requires direct supervision 75% 90% of the time working with patients with simple conditions, and 100% of the time working with patients with more complex conditions.
- At this level, the student demonstrates consistency in developing proficiency with simple tasks (eg, medical record review), clinical problem solving, interventions (eg, monitoring therapeutic exercise), and related data collection (eg, single angle goniometry), but is unable to perform more complex tasks, clinical problem solving, interventions/data collection without assistance.
- The student may begin to share the patient care workload with the clinical instructor.

Intermediate performance*:

- A student who requires direct personal supervision less than 50% of the time working with patients with simple conditions, and 75% of the time working with patients with complex conditions.
- At this level, the student is proficient with simple tasks, clinical problem solving, and interventions/data collection and is developing the ability to consistently perform more complex tasks, clinical problem solving, and interventions/data collection.
- The student **is capable** of maintaining 50% of a full-time physical therapist assistant's patient case workload.

Advanced intermediate performance*:

- A student who requires clinical supervision less than 25% of the time working with new patients or patients with complex conditions and is independent working with patients with simple conditions.
- At this level, the student is consistent and proficient in simple tasks, clinical problem solving, and interventions/data collection and requires only occasional cueing for more complex tasks, clinical problem solving, and interventions/data collection.
- The student is <u>capable of</u> maintaining 75% of a full-time physical therapist assistant's patient care workload with direction and supervision from the physical therapist.

Entry-level performance*:

- A student who is <u>capable of</u> completing tasks, clinical problem solving, and interventions/data collection for patients with simple or complex conditions under general supervision of the physical therapist.
- At this level, the student is consistently proficient and skilled in simple and complex tasks, clinical problem solving, and interventions/data collection.
- The student consults with others to resolve unfamiliar or ambiguous situations.
- The student is <u>capable of</u> maintaining 100% of a full-time physical therapist assistant's patient care workload in a cost effective* manner with direction and supervision from the physical therapist.

PTA085 PTA Student Competencies

Entry level competencies (knowledge and skills) of the PTA student for PTA085 - Clinical Practicum III The following is a listing of competencies which the student is prepared to demonstrate during their clinical rotation.

- 1. Perform and measure vital signs: blood pressure, pulse and respiration.
- 2. Calculate maximum heart rate and target heart rate.
- 3. Wash hands aseptically according to universal precautions.
- 4. Demonstrate proper application and removal of sterile gloves.
- 5. Prepare a sterile field.
- 6. Apply effective bloodborne pathogen precautions.
- 7. Drape patient appropriately for treatment procedures.
- 8. Position patient with correct bed positioning techniques.
- 9. Instruct patient in bed mobility.
- 10. Perform and demonstrate proper body mechanics for all treatments.
- 11. Measure and fit wheelchair.
- 12. Instruct patient in correct wheelchair mobility.
- 13. Perform a safe patient transfer: pivot, two-person lift, sliding board and mechanical lift.
- 14. Measure and fit ambulatory assistive devices: walker, canes and crutches.
- 15. Instruct patient in appropriate gait pattern for level surfaces and on stairs.
- 16. Perform passive range of motion, active assistive range of motion and active range of motion with proper hand placement.
- 17. Locate bony landmarks and muscles of upper and lower extremities.
- 18. Use effective verbal and written communication with the physical therapist.
- 19. Describe components of SOAP note documentation and Patient Client Management format.
- 20. Document relevant aspects of patient treatment using the SOAP note format.
- 21. Perform physical therapy procedures under the supervision of a licensed physical therapist according to the state's statute for physical therapy practice.
- 22. Perform treatments according to the American Physical Therapy Association guidelines for the ethical practice of physical therapy.
- 23. Use effective verbal and non-verbal communication with the patients and families.
- 24. Use appropriate medical terminology in oral and written communication.
- 25. Respect individual cultural, religious and socioeconomic differences.
- 26. Implement a tilt table treatment program.
- 27. Knowledge of wound and burn care.
- 28. Instruct patient with common therapeutic exercises.
- 29. Administer therapeutic massage.
- 30. Administer mechanical therapeutic traction: cervical and pelvic.
- 31. Administer superficial heats: hydrocollator, fluidotherapy, paraffin, whirlpool and infrared.
- 32. Administer cryotherapy: cold packs, contrast baths, and ice massage.
- 33. Administer ultrasound.
- 34. Administer ultraviolet.
- 35. Administerdiathermy.
- 36. Perform a Jobst treatment.
- 37. Perform electrical stimulation and biofeedback.
- 38. Perform Electrical Stimulation with ultrasound.
- 39. Administer iontophoresis.
- 40. Perform TENS treatment.
- 41. Perform laser.
- 42. Perform goniometry measurements.
- 43. Perform treatments in a logical sequence according to the plan of care.
- 44. Knowledge of various dressings used for wound care.
- 45. Describe components of normal gait.
- 46. Identify correct alignment for normal posture.
- 47. Knowledge of kinesiology.
- 48. Perform limb circumference measurements to document changes in limb size.
- 49. Knowledge of compression therapies.

PTA097 PTA Student Competencies

Entry level competencies (knowledge and skills) of the PTA student for PTA097 -Clinical Practicum IV

The following is a listing of competencies which the student is prepared to demonstrate during their clinical rotation.

- 1. Perform and measure vital signs: blood pressure, pulse and respiration.
- 2. Calculate maximum heart rate and target heart rate.
- 3. Wash hands aseptically according to universal precautions.
- 4. Demonstrate proper application and removal of sterile gloves.
- 5. Prepare a sterile field.
- 6. Apply effective bloodborne pathogen precautions.
- 7. Drape patient appropriately for treatment procedures.
- 8. Position patient with correct bed positioning techniques.
- 9. Instruct patient in bed mobility.
- 10. Perform and demonstrate proper body mechanics for all treatments.
- 11. Measure and fit wheelchair.
- 12. Instruct patient in correct wheelchair mobility.
- 13. Perform a safe patient transfer: pivot, two-person lift, sliding board and mechanical lift.
- 14. Measure and fit ambulatory assistive devices: walker, canes and crutches.
- 15. Instruct patient in appropriate gait pattern for level surfaces and on stairs.
- 16. Perform passive range of motion, active assistive range of motion and active range of motion with proper hand placement.
- 17. Locate bony landmarks and muscles of upper and lower extremities.
- 18. Use effective verbal and written communication with the physical therapist.
- 19. Describe components of SOAP note documentation and Patient Client Management format.
- 20. Document relevant aspects of patient treatment using the SOAP note format.
- 21. Perform physical therapy procedures under the supervision of a licensed physical therapist according to the state's statute for physical therapy practice.
- 22. Perform treatments according to the American Physical Therapy Association guidelines for the ethical practice of physical therapy.
- 23. Use effective verbal and non-verbal communication with the patients and families.
- 24. Use appropriate medical terminology in oral and written communication.
- 25. Respect individual cultural, religious and socioeconomic differences.
- 26. Implement a tilt table treatment program.
- 27. Knowledge of wound and burn care.
- 28. Instruct patient with common therapeutic exercises.
- 29. Administer therapeutic massage.
- 30. Administer mechanical therapeutic traction: cervical and pelvic.
- 31. Administer superficial heats: hydrocollator, fluidotherapy, paraffin, whirlpool and infrared.
- 32. Administer cryotherapy: cold packs, contrast baths, and ice massage.
- 33. Administer ultrasound.
- 34. Administer ultraviolet.
- 35. Administer diathermy.
- 36. Perform a Jobst treatment.
- 37. Perform electrical stimulation and biofeedback.
- 38. Perform Electrical Stimulation with ultrasound.
- 39. Administer iontophoresis.
- 40. Perform TENS treatment.
- 41. Perform laser.
- 42. Perform goniometry measurements.
- 43. Perform treatments in a logical sequence according to the plan of care.
- 44. Knowledge of various dressings used for wound care.
- 45. Describe components of normal gait.

- 46. Identify correct alignment for normal posture.
- 47. Knowledge of kinesiology,
- 48. Perform limb circumference measurements to document changes in limb size.
- 49. Knowledge of compression therapies.
- 50. Identify faulty postures.
- 51. Perform passive and active stretching.
- 52. Perform manual resistance exercises.
- 53. Perform length testing.
- 54. Assess balance and perform balance training.
- 55. Apply general exercises in an aquatic environment.
- 56. Perform fundamental spinal stabilization training.
- 57. Perform isometric and dynamic exercises.
- 58. Instruct on diaphragmatic, segmental and pursed lip breathing.
- 59. Perform progressive resistance exercises.
- 60. Develop a therapeutic exercise program for the UE and the LE.
- 61. Perform strengthening exercises for the UEs and LEs.
- 62. Perform joint mobilization.
- 63. Perform kinesiotaping and McConnell taping techniques.
- 64. Perform manual muscle testing to major muscle groups.
- 65. Develop a therapeutic exercise program.
- 66. Perform therapeutic exercises to all joints of the body.
- 67. Identify orthopedic disorders and surgeries.
- 68. Identify treatment plan for orthopedic conditions.
- 69. Identify common test procedures for orthopedic conditions.
- 70. Instruct patient in self ROM exercises.
- 71. Perform PNF techniques.

PTA099 PTA Student Competencies

Entry level competencies (knowledge and skills) of the PTA student for PTA099 - Clinical Practicum V

The following is a listing of competencies which the student is prepared to demonstrate during their clinical rotation.

- 1. Perform and measure vital signs: blood pressure, pulse and respiration.
- 2. Calculate maximum heart rate and target heart rate.
- 3. Wash hands aseptically according to universal precautions.
- 4. Demonstrate proper application and removal of sterile gloves.
- 5. Prepare a sterile field.
- 6. Apply effective bloodborne pathogen precautions.
- 7. Drape patient appropriately for treatment procedures.
- 8. Position patient with correct bed positioning techniques.
- 9. Instruct patient in bed mobility.
- 10. Perform and demonstrate proper body mechanics for all treatments.
- 11. Measure and fit wheelchair.
- 12. Instruct patient in correct wheelchair mobility.
- 13. Perform a safe patient transfer: pivot, two-person lift, sliding board and mechanical lift.
- 14. Measure and fit ambulatory assistive devices: walker, canes and crutches.
- 15. Instruct patient in appropriate gait pattern for level surfaces and on stairs.
- 16. Perform passive range of motion, active assistive range of motion and active range of motion with proper hand placement.
- 17. Locate bony landmarks and muscles of upper and lower extremities.
- 18. Use effective verbal and written communication with the physical therapist.
- 19. Describe components of SOAP note documentation and Patient Client Management format.
- 20. Document relevant aspects of patient treatment using the SOAP note format.
- 21. Perform physical therapy procedures under the supervision of a licensed physical therapist according to the state's statute for physical therapy practice.
- 22. Perform treatments according to the American Physical Therapy Association guidelines for the ethical practice of physical therapy.
- 23. Use effective verbal and non-verbal communication with the patients and families.
- 24. Use appropriate medical terminology in oral and written communication.
- 25. Respect individual cultural, religious and socioeconomic differences.
- 26. Implement a tilt table treatment program.
- 27. Knowledge of wound and burn care.
- 28. Instruct patient with common therapeutic exercises.
- 29. Administer therapeutic massage.
- 30. Administer mechanical therapeutic traction: cervical and pelvic.
- 31. Administer superficial heats: hydrocollator, fluidotherapy, paraffin, whirlpool and infrared.
- 32. Administer cryotherapy: cold packs, contrast baths, and ice massage.
- 33. Administer ultrasound.
- 34. Administer ultraviolet.
- 35. Administerdiathermy.
- 36. Perform a Jobst treatment.
- 37. Perform electrical stimulation and biofeedback.
- 38. Perform Electrical Stimulation with ultrasound.
- 39. Administer iontophoresis.
- 40. Perform TENS treatment.
- 41. Perform laser.
- 42. Perform goniometry measurements.
- 43. Perform treatments in a logical sequence according to the plan of care.
- 44. Knowledge of various dressings used for wound care.
- 45. Describe components of normal gait.

- 46. Identify correct alignment for normal posture.
- 47. Knowledge of kinesiology.
- 48. Perform limb circumference measurements to document changes in limb size.
- 49. Knowledge of compression therapies.
- 50. Identify faulty postures.
- 51. Perform passive and active stretching.
- 52. Perform manual resistance exercises.
- 53. Perform length testing.
- 54. Assess balance and perform balance training.
- 55. Apply general exercises in an aquatic environment.
- 56. Perform fundamental spinal stabilization training.
- 57. Perform isometric and dynamic exercises.
- 58. Instruct on diaphragmatic, segmental and pursed lip breathing.
- 59. Perform progressive resistance exercises.
- 60. Develop a therapeutic exercise program for the UE and the LE.
- 61. Perform strengthening exercises for the UEs and LEs.
- 62. Perform joint mobilization.
- 63. Perform kinesiotaping and McConnell taping techniques.
- 64. Perform manual muscle testing to major muscle groups.
- 65. Develop a therapeutic exercise program.
- 66. Perform therapeutic exercises to all joints of the body.
- 67. Identify orthopedic disorders and surgeries.
- 68. Identify treatment plan for orthopedic conditions.
- 69. Identify common test procedures for orthopedic conditions.
- 70. Instruct patient in self ROM exercises.
- 71. Identify different cardiac/pulmonary conditions and treatments.
- 72. Perform postural drainage.
- 73. Assess sensory and motor function.
- 74. Assess coordination and balance.
- 75. Identify and perform sensory, motor and coordination tests.
- 76. Describe components of abnormal gait.
- 77. Describe the components of home and environmental assessments.
- 78. Identify and perform PNF techniques.
- 79. Identify other neuromuscular techniques.
- 80. Describe other neuromuscular, vascular and lymphatic diseases and treatments.
- 81. Perform manual soft tissue techniques.
- 82. Describe different spinal cord, head injury, and cerebral conditions.
- 83. Identify and perform treatment of a patient with a SCI, TBI, CVA.
- 84. Identify normal and abnormal pediatric development.
- 85. Identify pediatric diagnoses and treatment.
- 86. Identify different amputations and treatments
- 87. Identify different prosthesis and orthotics.
- 88. Identify normal and abnormal gait of an amputee.
- 89. Knowledge of women's health.
- 90. Knowledge of OB-GYN issues.
- 91. Knowledge of pathologies of all systems of the body.
- 92. Knowledge of pharmacologic agents for various pathologies.
- 93. Knowledge of laboratory tests.
- 94. Knowledge of the Illinois Practice Act.
- 95. Knowledge of Medicare, coding and billing.

Weekly Planning Form (Optional)

StudentName:_____ Clinical Instructor:_____

Date:______Week#:_____ of_____

When completing this form consider the five (5) performance dimensions: quality of care, supervision/guidance required, consistency of performance, complexity of tasks/environment, and efficiency of performance. Forms will be turned in at site visit and at end of clinical

| | Students Review of the Week | Cl's Review of the Week |
|-------------|--------------------------------------|--|
| Strengths: | Professionalism, Behavior, Attitude: | Professionalism, Behavior, Attitude: Strengths: |
| Weaknesses: | | Weaknesses: |
| Strengths: | Safety: | Safety: Strengths: |
| Weaknesses: | | Weaknesses: |
| Strengths: | Communication Skills: | Communication Skills: Strengths: |
| Weaknesses: | | Weaknesses: |
| Strengths: | Problem-Solving Skills: | Problem-Solving Skills: Strengths: |
| Weaknesses: | | Weaknesses: |
| | Goals set by the | he CI |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| | | 7 |
| 1. | Goals set by the | Student |
| 2. | | |
| 3. | | |
| 4. | | |

CI Report on Student at Site Visit

| Date | | | |
|---|----------------|---------------------|----------|
| Student's Name: | CP III, CP I | V, CP V | |
| | Please ci | , | |
| Facility: Phone: | | | |
| Clinical Instructor Name: | | | |
| Do you have Significant Concerns on any item of the Clinic | | | |
| Performance Instrument (CPI) that may result in the studen failing? | | No | |
| (If yes, identify which item number(s), and briefly describe | the problem of | on the midterm eval | uation.) |
| Are the first 5 "red flag" items (Safety, Punctuality, Respo | • | | |
| Ethical, Respectful) of the CPI currently in the appropriate for this clinical on the Visual Analog Scale (VAS)? | | No | |
| Is the student aware of the areas of performance that they should work on for the remainder of the clinical? | Yes | No | |
| Is the student's performance appropriate for a student of th level? | | No | |
| What types of patients is the student treating? | | | |
| What are your goals for the student for the remainder of | the clinical? | | |
| Will the student conduct an in-service? | Yes | No | |
| Do you need any training on the use of the PTA CPI? | Yes | No | |
| COMMENTS: | | | |
| CONCERNS and/or STRENGTHS: | | | |

THANK YOU FOR YOUR COMMITMENT TO CLINICAL EDUCATION!

Student Evaluation of Clinical Experience at Site Visit

CP III, CP IV, CP V

Please circle

| Date: | | |
|---|-------------------------|----|
| Name: | | |
| Facility: Phon | e: | _ |
| Clinical Instructor: | PT / PTA | _ |
| Did your CI use the orientation check off form? | Yes | No |
| Are you comfortable with the amount of feedback/supervision receiving from your Cl? | on you are Yes | No |
| If your Cl is a PTA, are you receiving appropriate interaction w | | No |
| | aluation/assessment wit | |
| Is this learning experience challenging? | Yes | No |
| What are the strengths of this clinical site? | | |
| What are the weaknesses of this clinical site? | | |
| Were there any problems with your midterm conference? | Yes | No |
| If yes, please comment: | | |
| Have you had opportunities for direct patient care? | | No |
| List: | | |
| Have you had opportunities to observe/participate in other | areas? Yes | No |
| List areas: | | |
| Have you had opportunities for involvement in interprofessional (interacting with multiple healthcare workers from other profess backgrounds working together with patients, families)? | sional | No |
| Giveexamples: | | |
| Have you established/revised goals for the remainder of | the clinical? Yes | No |
| your Clusing the Weekly Goal form? | Yes | No |
| COMMENTS: | | |

Student Evaluation of Clinical Instructor at Site Visit

| Stı | ident's Name | | | Clinical Prac | cticum III IV V |
|-----|------------------|--------------------|------------------|------------------------|-----------------|
| Cl | 's Name | | | Semester | |
| Us | ing the scale be | low, rate your (| Cl for each stat | ement. | |
| | 1 = poor | 2 = fa | ur | 3=Good | 4 = Excellent |
| 1. | My Cl demonst | trates a desire to | work with stud | lents. | |
| | 1 | 2 | 3 | 4 | |
| 2. | My Cl adheres | to legal practice | e standards. | | |
| | 1 | 2 | 3 | 4 | |
| 3. | My Cl demonst | rates ethical bel | navior. | | |
| | 1 | 2 | 3 | 4 | |
| 4. | My Cl demonst | rates clinical co | mpetence in his | s or her area of pract | ice. |
| | 1 | 2 | 3 | 4 | |
| | | | | | |
| 5. | My Cl sets clea | r performance g | goals during my | rotation. | |
| | 1 | 2 | 3 | 4 | |
| | | | | | |

Developed September 3, 2013

Clinical Instructor Development Form

| Name of Cl: | Date: | |
|-------------|-------|--|
| | | |

Facility:_____

Education that was Provided:

Reason why:

Lake Land College Physical Therapist Assistant Program Documentation of PTA Student Clinical Behavior

All Clinical Instructor (CI) concerns about the student's unsafe and/or unprofessional behavior, and any safety violations by the student while practicing in the clinic, must be documented and communicated by telephone to the LLC PTA program the day of the violation.

Use this form to document any student behaviors which cause concern regarding this student's ability to perform safely and professionally in their clinical rotation. If any incidents should occur, complete this form immediately. Append one copy to the student's clinical evaluation form and send a copy to LLC:

Kay Foreman, ACCE PTA Program Lake Land College - Kluthe Center 1204 Network Centre Blvd Effingham, IL 62401

In addition, please call the LLC PTA program (217-540-3552) to notify us about the incident and to discuss whether additional action is needed.

| Student Name: | | | Facility: | | |
|-------------------------|-------------|-------------------------------------|---------------------------------------|-----|------|
| Date: | Nar | neofClcompl | etingthisreport: | | |
| Date of Incident: | | | | | |
| Briefly describe the i | ncident (Us | se additional sh | eets if necessary): | | |
| | | | | | |
| | | | | | |
| Clia Actions Taken | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| ACCE notified: | - | 10 ate: | | | |
| Does the incident warn | | action or discus case explain on | sion with Lake Land College? back. | YES | NO |
| Clinical Instructor Sig | nature | Date | Student Signature | | Date |

CLINICAL PRACTICUM GUIDELINES

1. Attend all scheduled clinical practicum experiences at the scheduled time of day according to Cl. It is the student's responsibility to notify the Cl at the beginning or before scheduled time in case of illness or emergency. He/she must also contact the ACCE the same time of day at 217-540-3552. It is required that all absences must be made up on days that are acceptable with the Cl.

As per the PTA Handbook, two **excused** absences are allowed. Any **unexcused** absences will result in dismissal from the program. **More than 2 absences will result in dismissal from program. If you are late two times, you may be dismissed from the program.**

As per the student handbook, lunch/break and prior arrival to start of day does not count toward clinical hours.

In some settings, the work week may exceed 40 hours. Students will be expected to complete the full clinical practicum dates.

- 2. Wear appropriate clinical practicum attire: dress slacks, red or black polo shirt with Lake Land College PTA program on shirt, clean tennis shoes and name tag. Shirt must be tucked in. Few clinical facilities will have its own attire policy. Per the dress code in the **LLC** PTA StudentHandbook:
 - No excessive visible body piercing
- 3. Receive no unacceptable reports from Cls based on behavior, attendance, dress attire, or clinical skill performance.
- 4. Complete all clinical assignments satisfactorily in a timely, safe, legal and ethical manner.
- 5. Complete a 15-minute in-service at the clinical facility for CP IV and CP V.
 - CP IV= in-service on journal literature
 - CP V = in-service on topic approved by Cl
- 6. Abide by the Health Insurance Portability and Accountability Act (HIPAA).
- 7. Demonstrate appropriate professional behavior at all times.
- 8. Complete the online CPI at final for CP III and at midterm and final for CP IV & V.
- 9. Return completed course work on due date.

Cell Phone Policy: Cell phones must be turned off during clinical hours. No cell phone use in patient care area or office will be permitted. Student will be allowed to use phones during breaks and lunch hour only.

Late Policy: All course work is expected to be completed and turned in by 12:00 p.m. at the Kluthe Center the following work day after the last day of clinical unless other arrangements have been made by the ACCE. For each day late, 5 hours of observation at a physical therapy setting is required along with a grade reduction of one (1) letter grade.

GRADING FOR CLINICAL PRACTICUMS

Students will be assigned a letter grade on all Clinical Practicums by the Academic Coordinator of Clinical Education (ACCE) based on the Physical Therapist Assistant Clinical Performance Instrument scoring and comments, email communications, site visits, and other assignments. A student must maintain a grade of "C" or higher in all Clinical Practicums to remain in and graduate from the program. **The ACCE makes all final grade determination.**

The ACCE determines what constitutes satisfactory performance and assigns grades at the end of the clinical practicum course.

- Clinical Practicum III (first clinical experience): Student performance ratings at final should be above Beginning level to Advanced Beginning level.
- Clinical Practicum IV (intermediate clinical experience): Student performance ratings are expected to progress along the continuum. Student performance ratings at midterm should be between Advanced Beginning and Intermediate. Student performance rating on all criteria at final including red flag areas should be at Intermediate level or above.
- Clinical Practicum V (Final clinical experience): Student performance rating at midterm should be at Advanced Intermediate on all objectives. Student performance rating at final should be at Entry level for red flag areas with the exception of one mark away from Entry level for problem solving. All other objectives should be at or one mark below Entry level.

The ratings on the Clinical Performance Instrument (CPI) at final is worth 75% of the grade and other assignments and completed forms are worth 25% of the grade.

| CPI points: | Beginning = | 1 point |
|-------------------|---|-------------------------|
| | Advanced beginning = | 2 points |
| | Intermediate = | 3 points |
| | Advanced intermediate = | 4 points |
| | Entry level = | 5 points |
| | | |
| | I Survey (due at end of 1 st week) | 5 points |
| (If not re | ceived by Friday at 12:00 p.m., 0 points will | be given) |
| Site visit forms: | CI Report on Student at Site Visit | 1 point |
| Site visit forms. | Student Evaluation of Clinical Experie | 1 |
| | - | - |
| (If form not com | ppleted by ACCE arrival time, 0 points will b | be given for that form) |
| | | |
| Final forms APTA | Clinical Experience and | |

| al Instructor Survey | 10 points |
|-------------------------------------|--|
| ment for CP III (Soap Notes) | 10 points |
| ment for CP IV (case study outline) | |
| (and consent form) | 10 points |
| ment for CP V (pharmacology report) | 10 points |
| | al Instructor Survey ment for CP III (Soap Notes) ment for CP IV (case study outline) (and consent form) ment for CP V (pharmacology report) |

(Each day late on APTA survey and assignments 1 point will be deducted and there will be a 2-point reduction on total points each day late)

| Clinical | Practicum | III | Grading |
|----------|-----------|-----|---------|
|----------|-----------|-----|---------|

| CPI: | Red flag criteria (5 x 2) | 10 points | |
|--------------|--|-----------------------------------|------|
| | 9 criteria (9 x 2) | <u>18 points</u> | |
| | Maximum points | 28 x .75 = | 21 |
| Forms: | CI Survey Site visit form APTA Clinical Experience & CI Survey | 5 points 2 points 10 points | |
| Assignments: | SOAP notes | 10 points | |
| Maximum poi | nts on forms and assignments 27 points x .25 | = | 6.75 |

27.75 points

Total points will be converted to a percentage.

Grading Scale for Clinical Practicum III

| А | (100-94%) | 27.75-25.95 points |
|---|-----------|--------------------|
| В | (93-86%) | 25.94-23.73 points |
| С | (85-78%) | 23.72-21.50 points |
| D | (77-70%) | 21.49-19.28 points |

Clinical Practicum IV Grading

| CPI: | Red flag criteria (5 x 3) 9 criteria (9 x 3) Maximum points | 15 points <u>27 points</u> 42 x .75 = | 31.5 |
|-------------|---|---|-----------------------------|
| Forms: | CI Survey Site visit form APTA Clinical Experience &CI Survey | 5 points 2 points 10 points | |
| Assignments | Case study outline | 10 points | |
| Maximum poi | nts on forms and assignments 27 points x .25 | 5 = | <u>6.75</u> 38.25 points |

Total points will be converted to a percentage.

Grading Scale for Clinical Practicum IV

| А | (100-94%) | 38.25-35.77 points |
|---|-----------|--------------------|
| В | (93-86%) | 35.76-32.71 points |
| С | (85-78%) | 32.70-29.63 points |
| D | (77-70%) | 29.62-26.57 points |

Clinical Practicum V Grading

| CPI: | Red flag criteria (5 x 5) 9 criteria (9 x 5) Maximum points | 25 points <u>45 points</u> 70 x .75 = | 52.50 |
|----------------|--|---|-----------------------------|
| Forms: | CI Survey Site visit form APTA Clinical Experience & CI Survey | 5 points 2 points 10 points | |
| Assignments | Pharmacology | 10 points | |
| Ť | ints on forms and assignments 27 points x .2 | 5 = | <u>6.75</u> 59.25 points |
| Total pointa u | will be converted to a percentage | | |

Total points will be converted to a percentage.

Grading Scale for Clinical Practicum V

| А | (100-94%) | 59.25-55.37 points |
|---|-----------|--------------------|
| В | (93-86%) | 55.36-50.63 points |
| С | (85-78%) | 50.62-45.89 points |
| D | (77-70%) | 45.88-41.14 points |
| | | |

The ACCE may also consider the following when determining a grade:

- Clinical setting
- Student experience with patients in that setting
- Expectations for the clinical experience
- Expectations of the clinical site
- Level of experience within the didactic and clinical components
- Whether significant concerns box or with distinction box was checked
- Congruence between the CI's midterm and final comments
- CI report on student at site visit

Clinical Experience Track Form

| Student's Name | Years Attending |
|----------------|-----------------|
| CPIll site | Type of Setting |
| CPIV site | Type of Setting |
| CPV site | Typeof Setting |

On the following skills please put a check mark if completed during the appropriate clinical.

| FUNDAMENTALS OF PTA I SKILLS | CPIII COMPLETED | CPIV COMPLETED | CPV COMPLETED |
|---|------------------------|-----------------------|----------------------|
| MEASURE VITAL SIGNS- BLOOD PRESSURE | | | |
| MEASURE VITAL SIGNS- PULSE | | | |
| MEASURE VITAL SIGNS-RESPIRATION | | | |
| CALCULATE TARGET HEART RATE | | | |
| PREPARE STERILE FIELD | | | |
| FOLLOW BLOOD BORNE PRECAUTIONS | | | |
| REMOVE DRESSINGS | | | |
| APPLY NEW DRESSINGS | | | |
| DRAPE PATIENT | | | |
| POSITION PATIENT | | | |
| INSTRUCT PATIENT IN BED MOBILITY | | | |
| MEASURE AND FIT WHEELCHAIR | | | |
| INSTRUCT PATIENT IN WHEELCHAIR MOBILITY | | | |
| TRANSFER PATIENT | | | |
| GAIT TRAINING-CRUTCHES | | | |
| GAIT TRAINING-WALKER | | | |
| GAIT TRAINING-CANE | | | |
| GAIT TRAINING-HEMIWALKER | | | |
| GAIT TRAINING-PLATFORM WALKER | | | |
| PERFORM PROM | | | |
| PERFORM AAROM | | | |
| PERFORM AROM | | | |
| INSTRUCT ON GENERAL EXERCISES | | | |
| DOCUMENT PATIENT TREATMENT | | | |
| IMPLEMENT TILT TABLE | | | |
| FUNDAMENTALS OF PTA II SKILLS | | | |
| ADMINISTER THERAPEUTIC MASSAGE | | | |
| ADMINISTER MECHANICAL PELVIC TRACTION | | | |
| ADMINISTER MECHANICALCERVICALTRACTION | | | |
| MEASURE EDEMA | | | |
| ADMINISTER CRYOTHERAPY | | | |
| ADMINISTER HOT PACKS | | | |
| ADMINISTER FLUIDOTHERAPY | | | |

| ADMINISTER PARAFFIN | | |
|--|----------|--|
| ADMINISTER WHIRLPOOL | | |
| ADMINISTER ULTRASOUND | | |
| ADMINISTER COMBO | | |
| ADMINISTER RUSSIAN STIMULATION | | |
| ADMINISTER INTERFERENTIAL STIMULATION | | |
| ADMINISTER OTHER TYPES OF STIMULATION: | | |
| | | |
| | | |
| ADMINISTER TENS | | |
| ADMINISTER IONTOPHORESIS | | |
| PERFORM GONIOMETERY OF U/E | | |
| PERFORM GONIOMETERY OF L/E | | |
| | | |
| FUNDAMENTALS OF PTA III SKILLS | | |
| | | |
| ASSESS POSTURE | | |
| PERFORM PASSIVE STRETCHING | | |
| PERFORM MANUAL RESISTANCE EXERCISE | | |
| ASSESS LENGTH OF MUSCLE | | |
| ADMINISTER BALANCE TESTS | | |
| PERFORM BALANCE TRAINING | | |
| PERFORM STABILIZATION EXERCISE | | |
| PERFORM ISOMETRIC EXERCISE | | |
| PERFORM ISOMETRIC EXERCISE PERFORM ISOTONIC EXERCISE | | |
| PERFORM ISOTONIC EXERCISE PERFORM ISOKINETIC EXERCISE | | |
| PERFORM ISOKINETIC EXERCISE PERFORM PROGRESSIVE RESISTANCE EXERCISE | | |
| INSTRUCT BREATHING EXERCISES | | |
| | | |
| PERFORM PERIPHERAL JOINT MOBILIZATION | | |
| ASSIST WITH KINESIOTAPING | | |
| PERFORM GROSS MANUAL MUSCLE TESTING | | |
| ORTHOPEDIC CONCEPTS AND APPLICATIONS | | |
| ORTHOFEDIC CONCEFTS AND AFFEICATIONS | | |
| | | |
| PERFORM OR OBSERVE ORTHOPEDIC TESTS: LIST: | | |
| | | |
| | | |
| | | |
| FUNDAMENTALS OF PTA IV SKILLS | | |
| | | |
| ASSESS SENSORY FUNCTION | | |
| ASSESS MOTOR FUNCTION | | |
| ASSESS MOTOR FORCHON | | |
| ASSESS COORDINATION ASSESS GAIT ABNORMALITIES | <u> </u> | |
| | <u> </u> | |
| INSTRUCT OF PNF TECHNIQUES | | |
| PEFROM MANUAL SOFT TISSUE TECHNIQUES | | |
| WORK WITH PROSTHETICS AND ORTHOTICS | | |
| WORK WITH NEUROLOGICAL DIAGNOSIS | | |
| OTHER (PLEASE SPECIFY) | | |
| | | |
| | | |

Indicate if you had the opportunity to work with the following age groups using the following scale:

| 1 = Never $2 = Rarely$ | 3=Occasionally | 4 = Often | |
|---|----------------|-----------|-----|
| PATIENTS/CLIENTS ACROSS THE LIFESPAN | CP III | CPIV | CPV |
| INFANCY (BIRTH - 2 YEARS) | | | |
| EARLY CHILDHOOD (2-6 YEARS) | | | |
| MIDDLE CHILDHOOD (7-9 YEARS) | | | |
| LATE CHILDHOOD (10-12 YEARS) | | | |
| EARLY ADOLESCENCE (13-15 YEARS) | | | |
| LATE ADOLESCENCE (16-19 YEARS) | | | |
| EARLY ADULTHOOD (20-40 YEARS) | | | |
| MIDDLE ADULTHOOD (41-65 YEARS) | | | |
| GERIACTRIC (66 AND UP) | | | |
| | | | |
| Please indicate yes or no if you had opportunities to | | | |
| work or observed in the following areas: | | | |
| | | | |
| INTERPROFESSIONAL | | | |
| ADMINISTRATORS | | | |
| NURSES | | | |
| OT/OTA | | | |
| SPEECH PATHOLOGISTS | | | |
| MASSAGE THERAPISTS | | | |
| | | | |
| ATHLETIC TRAINERS PHYSICIANS | | | |
| RESPIRTATOR THERAPISTS | | | |
| SOCIAL WORKER | | | |
| PROSTHETISTS/ORTHOTISTS | | | |
| DIETITIANS | | | |
| PSYCHOLOGISTS | | | |
| | | | |
| OTHER (PLEASE SPECIFY) | | | |
| | | | |
| OTHER EXPERIENCES | | | |
| AQUATIC | | | |
| CARDIAC REHABILITATION | | | |
| COMMUNITY PROGRAMS | | | |
| CRITICAL CARE/INTENSIVE CARE | | | |
| DEPARTMENTAL ADMINISTRATION | | | |
| EMPLOYEE WELLNESS PROGRAM | | | |
| HOME HEALTH | | | |
| INDUSTRIAL | | | |
| NEONATAL | | | |
| ORTHOTIC/PROSTHETIC FABRICATION | | | |
| PAIN PROGRAMS | | | |
| PEDIACTRIC/EARLY INTERVENTION | | | |
| PULMONARY REHABILITATION | | | |
| QUALITY ASSURANCE | | | |
| SCREENING/PREVENTION | | | |

| SPORTS PT | | |
|---------------------------|--|--|
| SURGERY OBSERVATION | | |
| TEAM MEETINGS | | |
| VESTIBULAR REHABILITATION | | |
| WOMEN'S HEALTH | | |
| WORK HARDENING | | |
| WOUND CARE | | |
| OTHER (SPECIFY) | | |
| | | |
| | | |

Indicate the frequency of working with the following diagnoses using the following scale:

1 =Never 2 =Rarely 3 =Occasionally 4 =Often

| DIAGNOSES | | |
|--------------------------|--|--|
| MUSCULOSKELETAL | | |
| CARDIOVASCULAR/PULMONARY | | |
| INTEGUMENTARY | | |
| NEUROLGOICAL | | |
| OTHER (SPECIFY) | | |
| | | |
| | | |

Indicate yes or no if you had the opportunity of the following interactions with a PT:

| PARTICIPATION AS A MEMBER OF PT/PTA TEAM | | |
|---|--|--|
| USEEFFECTIVEVERBALCOMMUNICATION WITH PT | | |
| REVIEW EXAM/EVAL WITH PT | | |
| PERFORM PROCEDURES UNDER ASUPERVSION | | |
| OF APT | | |
| DISCUSS TREATMENT CARE WITH A PT | | |
| OBSERVE AN INITIAL EVALUATION | | |
| OTHER | | |
| | | |

At the end of Clinical Practicum Vindicate yes or no if you feel you have attained the following clinical education achievement outcomes.

| CLINICAL EDUCATION OUTCOMES | YES | NO |
|---|-----|----|
| ADMINISTER ANDPROVIDE COMPLEX ANDEVIDENCE BASE PRACTICE UNDER THE DIRECTION OF A PT | | |
| ESTABLISH AND MAINTAIN CULTURALLY COMPETENT AND AGE APPROPRIATE RELATIONSHIPS WITH PATIENTS AND FAMILIES | | |
| PARTICIPATE IN TEACHING AND SUPPORT OF PATIENTS, FAMILIES, AND OTHER HEALTH CARE PROVIDERS | | |
| COMMUNICATE EFFECTIVELY WITH PATIENTS, FAMILIES, COLLEAGUES AND PUBLIC VIA VERBAL, WRITTEN AND ELECTRONIC MEANS | | |
| UTILIZE ACCEPTED PROFESSIONAL STANDARDS TO DOCUMENT CARE ESTABLISH COLLEGIAL RELATIONSHIPS WITHPEERS AND OTHER HEALTH CARE | | |
| PROVIDERS USE CRITICAL THINKING AS A BASIS FOR DECISION MAKING IN PROFESSIONAL | | |
| PRACTICE | | |
| DEMONSTRATE RESPONSIBILITY FOR PROFESSIONAL SELF-DEVELOPMENT AND CONTINUED LIFE LONG LEARNING | | |
| PRACTICE WITHIN THE PROFESSION'S ETHICAL AND LEGAL FRAMEWORK | | |



Last Updated: 09/14/2011 Contact: pta@apta.org

PHYSICAL THERAPIST ASSISTANT STUDENT EVALUATION:

CLINICAL EXPERIENCE AND CLINICAL INSTRUCTION

June 10, 2003 (updated 9/14/11)

American Physical Therapy Association Department of Physical Therapy Education 1111 North Fairfax Street Alexandria, Virginia 22314

PREAMBLE

The purpose of developing this tool was in response to academic and clinical educators' requests to provide a voluntary, consistent and uniform approach for students to evaluate clinical education as well as the overall clinical experience. Questions included in this draft tool were derived from the many existing tools already in use by physical therapy programs for students to evaluate the quality of the clinical learning experience and clinical instructors (CIs), as well as academic preparation for the specific learning experience. The development of this tool was based on key assumptions for the purpose, need for, and intent of this tool. These key assumptions are described in detail below. This tool consists of two sections that can be used together or separately: Section 1-Physical therapist assistant student assessment of the clinical instruction. Central to the development of this tool was an assumption that students should actively engage in their learning experience and with summative feedback offered at both midterm and final evaluations. One of the benefits of completing Section 2 at midterm is to provide the CI and the student with an opportunity to modify the learning experience by making midcourse corrections.

Key Assumptions

- The tool is intended to provide the student's assessment of the quality of the clinical learning experience and the quality of clinical instruction for the specific learning experience.
- The tool allows students to objectively comment on the quality and richness of the learning experience and to provide information that would be helpful to other students, adequacy of their preparation for the specific learning experience, and effectiveness of the clinical educator(s).
- The tool is formatted in Section 2 to allow student feedback to be provided to the CI(s) at both midterm and final evaluations. This will encourage students to share their learning needs and expectations during the clinical experience, thereby allowing for program modification on the part of the CI and the student.
- Sections 1 and 2 are to be returned to the academic program for review at the conclusion of the clinical experience. Section 1 may be made available to future students to acquaint them with the learning experiences at the clinical facility. Section 2 will remain confidential and the academic program will not share this information with other students.
- The tools meet the needs of the physical therapist (PT) and physical therapist assistant (PTA) academic and clinical communities and where appropriate, distinctions are made in the tools to reflect differences in PT scope of practice and PTA scope of work.
- The student evaluation tool should not serve as the sole entity for making judgments about the quality
 of the clinical learning experience. This tool should be considered as part of a systematic collection of
 data that might include reflective student journals, self-assessments provided by clinical education
 sites, Center Coordinators of Clinical Education (CCCEs), and CIs based on the Guidelines for Clinical
 Education, ongoing communications and site visits, student performance evaluations, student planning
 worksheets, Clinical Site Information Form (CSIF), program outcomes, and other sources of
 information.

Acknowledgement

We would like to acknowledge the collaborative effort between the Clinical Education Special Interest Group (SIG) of the Education Section and APTA's Education Department in completing this project. We are especially indebted to those individuals from the Clinical Education SIG who willingly volunteered their time to develop and refine these tools. Comments and feedback provided by academic and clinical faculty, clinical educators, and students on several draft versions of this document were instrumental in developing, shaping, and refining the tools. Our gratitude is extended to all individuals and groups who willingly gave their time and expertise to work toward a common voluntary PT and PTA Student Evaluation Tool of the Clinical Experience and Clinical Instruction.

Ad Hoc Group Members: Jackie Crossen-Sills, PT, MS, Nancy Erikson, PT, MS, GCS, Peggy Gleeson, PT, PhD, Deborah Ingram, PT, EdD, Corrie Odom, PT, DPT, ATC, and Karen O'Loughlin, PT, MA

©2003 American Physical Therapy Association. All rights reserved. Duplication of this form in its entirety is permitted; however, any revision, addition, or deletion is prohibited.

GENERAL INFORMATION AND SIGNATURES

| General Information | |
|---|--------------------------|
| Student Name | |
| Academic Institution | |
| Name of Clinical Education Site | |
| AddressCityState | |
| Clinical Experience NumberClinical Experience Dates | |
| <u>Signatures</u> | |
| I have reviewed information contained in this physical therapist assistant studer education experience and of clinical instruction. I recognize that the information to facilitate accreditation requirements for clinical instructor qualifications. I under information will not be available to students in the academic program files. | below is being collected |
| Student Name (Provide signature) | Date |
| Primary Clinical Instructor Name (Print name) | Date |
| Primary Clinical Instructor Name (Provide signature) | |
| Entry-level PT/PTA degree earned Highest degree earned Degree area Years experience as a Cl Years experience as a clinician Areas of expertise Clinical Certification, specify area APTA Credentialed Cl Yes No Other Cl CredentialState Yes No Professional organization memberships APTA Other | |
| Additional Clinical Instructor Name (Print name) | Date |
| Additional Clinical Instructor Name (Provide signature) | |
| Entry-level PT/PTA degree earned Highest degree earned Degree area Years experience as a Cl Years experience as a clinician Areas of expertise Clinical Certification, specify area APTA Credentialed Cl Yes No Other Cl CredentialState Yes No Professional organization memberships APTA Other | |

SECTION 1: PTA STUDENT ASSESSMENT OF THE CLINICAL EXPERIENCE

Information found in Section 1 may be available to program faculty and students to familiarize them with the learning experiences provided at this clinical facility.

| 1. | Name of Clinical Education Site |
|----------------|---|
| | Address City State |
| 2. | Clinical Experience Number |
| 3. | Specify the number of weeks for each applicable clinical experience/rotation. |
| | Acute Care/Inpatient Hospital FacilityPrivate PracticeAmbulatory Care/OutpatientRehabilitation/Sub-acute RehabilitationECF/Nursing Home/SNFSchool/Preschool ProgramFederal/State/County HealthWellness/Prevention/Fitness ProgramIndustrial/Occupational Health FacilityOther |
| <u>Orienta</u> | ation |
| 4. | Did you receive information from the clinical facility prior to your arrival? |
| 5. | Did the on-site orientation provide you with an awareness of the Yes No information and resources that you would need for the experience? |
| 6. | What else could have been provided during the orientation? |
| <u>Patient</u> | <u>Client Management and the Practice Environment</u> For questions 7, 8, and 9, use the following 4-point rating scale: 1= Never 2 = Rarely 3 = Occasionally 4 = Often |

7. During this clinical experience, describe the frequency of time spent in each of the following areas. Rate all items in the shaded columns using the above 4-point scale.

| Diversity Of Case Mix | Rating | Patient Lifespan | Rating | Continuum Of Care | Rating |
|-----------------------|--------|------------------|--------|---------------------------|--------|
| Musculoskeletal | | 0-12 years | | Critical care, ICU, Acute | |
| Neuromuscular | | 13-21 years | | SNF/ECF/Sub-acute | |
| Cardiopulmonary | | 22-65 years | | Rehabilitation | |
| Integumentary | | over 65 years | | Ambulatory/Outpatient | |
| Other (GI, GU, Renal, | | | | Home Health/Hospice | |
| Metabolic, Endocrine) | | | | Wellness/Fitness/Industry | |

8. During this clinical experience, describe the frequency of time spent in providing the following components of care from the patient/client management model of the *Guide to Physical Therapist Practice*. Rate all items in the shaded columns using the above 4-point scale. List the five (5) most common interventions that you provided to patients/clients during this clinical experience.

| Components Of Care | Rating | Five Most Common Interventions |
|--|--------|--------------------------------|
| Data Collection | | 1 |
| Implementation of Established Plan of Care | | 2 |
| Selected Interventions | | 3 |
| Coordination, communication, documentation | | 4 |
| Patient/client related instruction | | 5 |
| Direct Interventions | | |

9. During this experience, how frequently did staff (ie, CI, CCCE, and clinicians) maintain an environment conducive to your work and growth? Rate all items in the shaded columns using the 4-point scale on page 4.

| Environment | Rating |
|---|--------|
| Providing a helpful and supportive attitude for your role as a PTA student. | |
| Providing effective role models for problem solving, communication, and teamwork. | |
| Demonstrating high morale and harmonious working relationships. | |
| Adhering to ethical codes and legal statutes and standards (eg, Medicare, HIPAA, | |
| informed consent, APTA Code of Ethics, etc). | |
| Being sensitive to individual differences (ie, race, age, ethnicity, etc). | |
| Using evidence to support clinical practice. | |
| Being involved in professional development (eg, degree and non-degree continuing | |
| education, in-services, journal clubs, etc). | |
| Being involved in district, state, regional, and/or national professional activities. | |

10. What suggestions, relative to the items in question #9, could you offer to improve the environment for your work and growth? _____

Clinical Experience

- 11. Were there other students at this clinical facility during your clinical experience? (Check all that apply):
 - Physical therapist students
 - Physical therapist assistant students
 - Students from other disciplines or service departments (Please specify_____)
- 12. Identify the ratio of students to CIs for your clinical experience:
 - 1 student to 1 Cl
 - 1 student to greater than 1 Cl
 - 1 CI to greater than1 student; Describe _____
- 13. How did the clinical supervision ratio in Question #12 influence your learning experience?
- 14. In addition to patient/client management, what other learning experiences did you participate in during this clinical experience? (Check all that apply)
 - Attended in-services/educational programs
 - Presented an in-service
 - Attended special clinics
 - Attended team meetings/conferences/grand rounds
 - Observed surgery
 - Participated in administrative and business management
 - Participated in providing patient/client interventions collaboratively with other disciplines (please specify disciplines)_____
 - Participated in service learning
 - Performed systematic data collection as part of an investigative study
 - Used physical therapy aides and other support personnel
 - Other; Please specify _____
- 15. Please provide any logistical suggestions for this location that may be helpful to students in the future. Include costs, names of resources, housing, food, parking, etc. _____

Overall Summary Appraisal

| 16. | Overall, | Overall, how would you assess this clinical experience? (Check only one) | | | |
|-----|-----------|---|--|--|--|
| | | Excellent clinical learning experience; would not hesitate to recommend this clinical education site to another student. | | | |
| | | Time well spent; would recommend this clinical education site to another student. Some good learning experiences; student program needs further development. Student clinical education program is not adequately developed at this time. | | | |
| 17. | | pecific qualities or skills do you believe a physical therapist assistant student should have ion successfully at this clinical education site? | | | |
| 18. | lf. durin | a this clinical education experience, you were exposed to content not included in your | | | |

- 18. If, during this clinical education experience, you were exposed to content not included in your previous physical therapist assistant academic preparation, describe those subject areas not addressed.
- 19. What suggestions would you offer to future physical therapist assistant students to improve this clinical education experience?
- 20. What do you believe were the strengths of your physical therapist assistant academic preparation and/or coursework for *this clinical experience*?
- 21. What curricular suggestions do you have that would have prepared you better for *this clinical experience*?

SECTION 2: PTA STUDENT ASSESSMENT OF THE CLINICAL INSTRUCTOR

Information found in Section 2 is to be shared between the student and the clinical instructor(s) at midterm and final evaluations. Additional copies of Section 2 should be made when there are multiple CIs supervising the student. Information contained in this section is confidential and will not be shared by the academic program with other students.

Assessment of Clinical Instruction

22. Using the scale (1 - 5) below, rate how clinical instruction was provided during this clinical experience at both midterm and final evaluations (shaded columns).

1=Strongly Disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly Agree

| Provision of Clinical Instruction | Midterm | Final |
|--|---------|-------|
| The clinical instructor (CI) was familiar with the academic program's | | |
| objectives and expectations for this experience. | | |
| The clinical education site had written objectives for this learning | | |
| experience. | | |
| The clinical education site's objectives for this learning experience were | | |
| clearly communicated. | | |
| There was an opportunity for student input into the objectives for this learning experience. | | |
| The CI provided constructive feedback on student performance. | | |
| The CI provided timely feedback on student performance. | | |
| The CI demonstrated skill in active listening. | | |
| The CI provided clear and concise communication. | | |
| The CI communicated in an open and non-threatening manner. | | |
| The CI taught in an interactive manner that encouraged problem solving. | | |
| There was a clear understanding to whom you were directly responsible | | |
| and accountable. | | |
| The supervising CI was accessible when needed. | | |
| The CI clearly explained your student responsibilities. | | |
| The CI provided responsibilities that were within your scope of knowledge and skills. | | |
| The CI facilitated patient-therapist and therapist-student relationships. | | |
| Time was available with the CI to discuss patient/client interventions. | | |
| The CI served as a positive role model in physical therapy practice. | | |
| The CI skillfully used the clinical environment for planned and unplanned | | |
| learning experiences. | | |
| The CI integrated knowledge of various learning styles into student | | |
| clinical teaching. | | |
| The CI made the formal evaluation process constructive. | | |
| The CI encouraged the student to self-assess. | | |

23. Was your Cl'(s) evaluation of your level of performance in agreement with your self-assessment?

| Midtorm | Evaluation | Yes | No |
|-----------|------------|-----|-----|
| wildterin | Evaluation | 162 | INO |

Final Evaluation Yes No

| 24. | If there were inconsistencies, how were the | y discussed and managed? |
|-----|---|--------------------------|
| | | |

Midterm Evaluation

| Final | Evaluation | |
|-------|------------|--|
| | | |

25. What did your CI(s) do well to contribute to your learning?

Midterm Comments

Final Comments

26. What, if anything, could your CI(s) and/or other staff have done differently to contribute to your learning?

Midterm Comments

Final Comments

Thank you for sharing and discussing candid feedback with your CI(s) so that any necessary midcourse corrections can be made to modify and further enhance your learning experience.