PHYSICAL THERAPIST STUDENT EVALUATION:

CLINICAL EXPERIENCE AND CLINICAL INSTRUCTION

June 12, 2003



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 student assessment of the clinical experience and Section 2-Physical therapist student assessment of clinical instruction. Central to the development of this tool was an assumption that students should actively engage in their learning experiences by providing candid feedback, both formative and summative, about the 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 goes out to all of those 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

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GENERAL INFORMATION AND SIGNATURES

General Information Student Name Academic Institution UMass Lowell Name of Clinical Education Site <u>Lawrence General Hospital Outpaitent Rehab</u> Address 35 Marston St City Lawrence State MA Clinical Experience Number I Clinical Experience Dates 5/21/18-7/27/18 **Signatures** I have reviewed information contained in this physical therapist student evaluation of the clinical education experience and of clinical instruction. I recognize that the information below is being collected to facilitate accreditation requirements for clinical instructor qualifications for students supervised in this academic program. I understand that my personal information will not be available to students in our program files. 7/27/18 Student Name (Provide signature) Date 7/27/18 Primary Clinical Instructor Name (Print name) Date Primary Clinical Instructor Name (Provide signature) Entry-level PT degree earned Highest degree earned DPT Degree area Years experience as a CI 0 Years experience as a clinician 4 Areas of expertise Clinical Certification, specify area APTA Credentialed CI \Box Yes \Box No □Yes □ No Other CI Credential State Professional organization memberships □APTA □0 ther Additional Clinical Instructor Name (Print name) Date Additional Clinical Instructor Name (Provide signature) Entry-level PT degree earned Highest degree earned Degree area Years experience as a CI Years experience as a clinician Areas of expertise Clinical Certification, specify area APTA Credentialed CI □ Yes \square No \square No Other CI Credential □ Yes State Professional organization memberships □APTA □Other

SECTION 1: PT 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 at this clinical facility.

1.	Name of Clinical Education Site <u>Lawrence General Hospital</u>					
	Address 35 M	larston St.	City_	Lawrence	State	<u>MA</u>
2.	Clinical Experie	ence Number	1			
3.	Specify the number of weeks for each applicable clinical experience/rotation.					
	Amb ECF/Nu Federal	Care/Inpatient Houlatory Care/Ou ursing Home/SN I/State/County Hopational Health	tpatient F lealth	School/Pre		
<u>Orienta</u>	<u>ntion</u>					
4.	Did you receive	e information fro	m the clinical fa	acility prior to your arri	val? X Ye	s □No
5.			•	awareness of the d for the experience?	X Ye	s \square No
6.	What else coul	d have been pro	ovided during th	e orientation?		
<u>Patient.</u>	Patient/Client Management and the Practice Environment For questions 7, 8, and 9, use the following 4-point rating scale: $1 = \text{Never}$ $2 = \text{Rarely}$ $3 = \text{Occasionally}$ $4 = \text{Often}$					
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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	4	0-12 years	1	Critical care, ICU, Acute	1
Neuromuscular	3	13-21 years	2	SNF/ECF/Sub-acute	1
Cardiopulmonary	1	22-65 years	4	Rehabilitation	1
Integumentary	1	over 65 years	4	Ambulatory/Outpatient	4
Other (GI, GU, Renal,	1			Home Health/Hospice	1
Metabolic, Endocrine)				Wellness/Fitness/Industry	1

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.

Components Of Care	Rating	Components Of Care	Rating	
Examination		Diagnosis		
Screening	4	Prognosis	3	
History taking	4	Plan of Care	4	
Systems review	4	Interventions	4	
Tests and measures	4	Outcomes Assessment	4	
Evaluation	4			

9. During this experience, how frequently did staff (ie, CI, CCCE, and clinicians) maintain an environment conducive to professional practice 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 PT student.	4
Providing effective role models for problem solving, communication, and teamwork.	4
Demonstrating high morale and harmonious working relationships.	4
Adhering to ethical codes and legal statutes and standards (eg, Medicare, HIPAA,	4
informed consent, APTA Code of Ethics, etc).	
Being sensitive to individual differences (ie, race, age, ethnicity, etc).	4
Using evidence to support clinical practice.	4
Being involved in professional development (eg, degree and non-degree continuing	4
education, in-services, journal clubs, etc).	
Being involved in district, state, regional, and/or national professional activities.	4

10. What suggestions, relative to the items in question #9, could you offer to improve the environment for professional practice and growth? For the most part the staff was helpful in explaining various techniques and treatments. Staff was very supportive of one another including myself as a student, and often offered kind words of praise towards one another. Requesting more from me, such as researching a specific topic or quizing me about anatomy or special tests might have been helpful as it could have steered me towards my own gaps in knowledge easier.

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 from other disciplines or service departments (Please specify OT) 					
12.	Identify the ratio of students to CIs for your clinical experience:					
	X 1 student to 1 CI 1 student to greater than 1 C I 1 CI to greater than 1 student; Describe					
13.	How did the clinical supervision ratio in Question #12 influence your learning experience? <u>It worked well. It might have been beneficial to have more than one CI per student to offer a variety of treatment approaches and perspectives.</u>					
14.	In addition to patient/client management, what other learning experiences did you participate in during this clinical experience? (Check all that apply)					
	 X Attended in-services/educational programs X Presented an in-service Attended special clinics 					
	X Attended team meetings/conferences/grand rounds					
	X Directed and supervised physical therapist assistants and other support personnel					
	 ☐ Observed surgery ☐ Participated in administrative and business practice management 					
	 Participated in administrative and business practice management Participated in collaborative treatment with other disciplines to provide patient/client care (please specify disciplines) 					
	☐ Participated in opportunities to provide consultation					
	☐ Participated in service learning					
	☐ Participated in wellness/health promotion/screening programs					
	□ Performed systematic data collection as part of an investigative study					

	☐ 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. <u>Everything was great in terms of access, parking, etc.</u>
<u>Overa</u>	all Summary Appraisal
16.	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.	What specific qualities or skills do you believe a physical therapist student should have to function successfully at this clinical education site? Firm grasp of basic anatomy and musculoskeletal issues. Language barrier was an interesting additional obstacle to over come when treating patients. It can be fun, but requires patience and a willingness to try new things and go outside your comfort zone. Some spanish experience would be helpful.
18.	If, during this clinical education experience, you were exposed to content not included in your previous physical therapist academic preparation, describe those subject areas not addressed. Low back pain, cervical radiculopathy, and unsteady gait were common issues. It was somewhat difficult to treat these issues without having taken musculoskeletal PT of the trunk or Neuro PT. With the guidance of my CI I was able to treat these patients without much trouble by the end of my clinical and I'm sure this experience will help me going into next semester.
19.	What suggestions would you offer to future physical therapist students to improve this clinical education experience? Observe early on and make a list of questions to ask later. Often times questions will be answered over time with observation. If not you can always ask later on. Try to observe as many different therapist as possible as many of them have different styles, different ways to explain certain diagnoses or treatments, and they will teach you various approaches which you can then pick from as being useful tools for treating your own patients.
20.	What do you believe were the strengths of your physical therapist academic preparation and/or coursework for this clinical experience? Coursework in LE and UE musculoskeletal functions

21. What curricular suggestions do you have that would have prepared you better for this clinical experience? Reviewing the basics of a common condition such as low back pain would have been helpful to have more of a basic undestanding of how to treat this prior to the first clinical. Additional practice or role playing conducting physical exams would have been helpful. For example, taking time in lab where one person has a cue card with a list of complaint to act out and the other needs to choose a set of tests and measures that are appropriate for that patient.

SECTION 2: PT STUDENT ASSESSMENT OF CLINICAL INSTRUCTION

Information found in this section 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 Section 2 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.	4	4
The clinical education site had written objectives for this learning experience.	3	3
The clinical education site's objectives for this learning experience were clearly communicated.	3	3
There was an opportunity for student input into the objectives for this learning experience.	5	5
The CI provided constructive feedback on student performance.	4	4
The CI provided timely feedback on student performance.	5	5
The CI demonstrated skill in active listening.	5	5
The CI provided clear and concise communication.	4	4
The CI communicated in an open and non-threatening manner.	5	5
The CI taught in an interactive manner that encouraged problem solving.	2	3
There was a clear understanding to whom you were directly responsible and accountable.	4	4
The supervising CI was accessible when needed.	5	5
The CI clearly explained your student responsibilities.	4	4
The CI provided responsibilities that were within your scope of knowledge and skills.	4	4
The CI facilitated patient-therapist and therapist-student relationships.	4	4
Time was available with the CI to discuss patient/client management.	5	5
The CI served as a positive role model in physical therapy practice.	3	4
The CI skillfully used the clinical environment for planned and unplanned learning experiences.	3	4
The CI integrated knowledge of various learning styles into student clinical teaching.	3	3
The CI made the formal evaluation process constructive.	4	4
The CI encouraged the student to self-assess.	3	3

	The CI made the formal evaluation process constructive.				4	4
	The CI encouraged	the student to self-	assess.		3	3
23.	Was your Cl'(s) evalua	ation of your level o	f performance in agree	ment with yo	our self-asses	ssment?
	Midterm Evaluation	X Yes I No	Final Evaluation	X Yes I N	0	

24. If there were inconsistencies, how were they discussed and managed?

Midterm Evaluation

Final Evaluation

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

Midterm Comments Observering my CI was helpful early on and being eased into pt interview, then physical exams, then conducting full evaluations on my own was a beneficial progression so as to not overwhelm me.

Final Comments My CI taught me useful techniques regarding topics that I had not previously covered such the use of CPAs to treat back pain or suboccipital release for nekc pain. My CI was always available and approachable to ask questions to about POC, progressing patient exercises, or administrative concerns like documentation and billing. It was helpful to see what my CI would have written for a specific note after I wrote my version to be able to compare and contrast what elements I was missing.

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

Midterm Comments Explaining what you are doing while doing it or shortly after doing it and, more importantly, explaining why you chose to do a certain exercise etc. (ie what muscles are you trying to work and why or why this STM technique might be beneficial).

Final Comments Providing me with critiques of treatments or asked me to justify why I chose to do certain things or what else I could have done would have been worthwhile. Additional exposure to billing and various types of insurance requirements etc. would have been helpful.

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.