# 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 Cls 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 <u>University of Massachusetts Lowell</u>	
Name of Clinical Education Site Norwood Hospital	
Address 800 Washington Street City Norwood State MA	
Clinical Experience Number 1 Clinical Experience Dates May 31, 2014-	August 1, 2014
<u>Signatures</u>	
I have reviewed information contained in this physical therapist student eveducation experience and of clinical instruction. I recognize that the inform to facilitate accreditation requirements for clinical instructor qualifications facademic program. I understand that my personal information will not be program files.	nation below is being collected or students supervised in this
	<u>8-1-14</u> Date
Student Name (Provide signature)	
Primary Clinical Instructor Name (Print name)	Date
Primary 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 CIYesNo Other CI CredentialStateYesNo Professional organization membershipsAPTAOther	
Additional Clinical Instructor Name (Print name)	Date
Additional Clinical Instructor Name (Provide signature)	
Entry-level PT degree earned	

### 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 Norwood Hosp	<u>ital</u>				
	Address800 Washington Street	City <u>Norwood</u>	State	MA		
2.	Clinical Experience Number <u>1</u>					
3.	Specify the number of weeks for each applicable	e clinical experience/rota	ation.			
	Acute Care/Inpatient Hospital Facility  10 Ambulatory Care/Outpatient ECF/Nursing Home/SNF Federal/State/County Health Industrial/Occupational Health Facility	Private Practice Rehabilitation/S School/Prescho Wellness/Preve	Sub-acute ool Progra	am		
<u>Orienta</u>	<u>ntion</u>					
4.	Did you receive information from the clinical fac	ility prior to your arrival?	⊠ Y	∕es □ No		
5.	Did the on-site orientation provide you with an a information and resources that you would need		⊠ Y	∕es □ No		
6.	What else could have been provided during the felt very comfotable arriving on my first day.	orientation? Orientation	was very	/ thorough and I		
Patient/Client Management and the Practice Environment						
	For questions 7, 8, and 9, use the following 4  1= Never 2 = Rarely		4 = Ofte	en		

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	4	13-21 years	2	SNF/ECF/Sub-acute	1
Cardiopulmonary	2	22-65 years	4	Rehabilitation	1
Integumentary	2	over 65 years	4	Ambulatory/Outpatient	4
Other (GI, GU, Renal,	2			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	3
Screening	3	Prognosis	2
History taking	3	Plan of Care	4
Systems review	3	Interventions	4
Tests and measures	4	Outcomes Assessment	4
Evaluation	3		•

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.	2

What suggestions, relative to the items in question #9, could you offer to improve the environment 10. for professional practice and growth? At a meeting some community involvement was discussed but I am unaware how involved the clinic is within any professional activities with the state or district, so perhaps having the clinic be more involved with something along those lines.

apply):    Physical therapist students   Physical therapist assistant students   Physical therapist assistant students   Physical therapist assistant students   Physical therapist assistant students (Please specify)    Identify the ratio of students to Cls for your clinical experience:		
apply):    Physical therapist assistant students   Physical to Cls for your clinical experience:    1 student to 1 Cl   1 student to 1 Cl   1 student to greater than 1 Cl   1 student to 2 clinical instructors, and for the second part of my affiliation part of the time 1 Cl had 2 students.    How did the clinical supervision ratio in Question #12 influence your learning experience?   Ithink working with more than 1 Cl can be benefitial because you learn from two different people who can teach you differently. It was also great working with another student to work together and bounce ideas about intervention for patients off of each other.    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   Directed and supervised physical therapist assistants and other support personnel   Observed surgery   Participated in administrative and business practice management   Participated in collaborative treatment with other disciplines to provide patient/client care (please specify disciplines)   Participated in service learning   Participated in service learning	<u>Clinical</u>	<u>Experience</u>
Physical therapist assistant students from other disciplines or service departments (Please specify)  12. Identify the ratio of students to Cls for your clinical experience:    1 student to 1 Cl	11.	
1 student to 1 CI 1 student to greater than 1 CI 2 1 CI to greater than 1 student; Describe For the first month of my clinical affiliation the ratio was 1 student to 2 clinical instructors, and for the second part of my affiliation part of the time 1 CI had 2 students.  13. How did the clinical supervision ratio in Question #12 influence your learning experience? Ithink working with more than 1 CI can be benefitial because you learn from two different people who can teach you differently. It was also great working with another student to work together and bounce ideas about intervention for patients off of each other.  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 Directed and supervised physical therapist assistants and other support personnel Observed surgery 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		☐ Physical therapist assistant students
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	<ul> <li>Performed systematic data collection as part of an investigative study</li> <li>Other; Please specify</li> </ul>
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. There is a fridge to store food in as well as a café and cafeteria within the building.
<u>Overa.</u>	Il 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.
	<ul> <li>Time well spent; would recommend this clinical education site to another student.</li> <li>Some good learning experiences; student program needs further development.</li> <li>Student clinical education program is not adequately developed at this time.</li> </ul>
17.	What specific qualities or skills do you believe a physical therapist student should have to function successfully at this clinical education site? Students should have an open mind coming to this clinical site. This clinical affilation also encorporates aquatic therapy which someone might enjoy or dislike if one who does not enjoy a pool setting
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. In this clinical expirience I was able to learn a few measurements for the shoulder which I will learn in an academic setting next semester.
19.	What suggestions would you offer to future physical therapist students to improve this clinical education experience? I would suggest future physical therapy students to have a positive attitude and always ask to be apart of new learning possibilities.
20.	What do you believe were the strengths of your physical therapist academic preparation and/or coursework for <i>this clinical experience</i> ? In the classroom it was really hard for me to take scenarios and create a plan of care. In this clinical expirience I had the opportunity to do a lot of paperwork and POCs and my clinical instructors were great teaching me proper ways to word things and improve upon my documentation.
21.	What curricular suggestions do you have that would have prepared you better for this clinical experience? I think it would be beneficial to practice entire evaluations in a lab to be able to practice each part together before going out on the first clinical expirience.

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

The CI served as a po	sitive role model in p	hysical therapy prac	ctice.	5	5
The CI skillfully used t learning experiences.	he clinical environme	ent for planned and u	unplanned	4	4
The CI integrated kno clinical teaching.	wledge of various lea	rning styles into stu	dent	5	5
The CI made the form	al evaluation process	constructive.		4	5
The CI encouraged the student to self-assess.			4	5	
Was your Cl'(s) evaluation of your level of performance in agreement with your Midterm Evaluation ☐ Yes ☐ No Final Evaluation ☐ Yes ☐					essment?

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

Midterm Evaluation <u>I had rated myself much lower for the midterm evaluation</u>. My CI and I met and went over what each category includes and how I was doing.

Final Evaluation N/A

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

Midterm Comments My Cls were welcoming to me from day 1. They made me feel comfortable in a new setting and are challenging my creativity.

Final Comments My CIs have done a wonderful job contributing to my learning. They have taught me new things each week. I have expanded my knowledge on documentation greatly as well as exercise programming. I have also progressed in areas such as evaluations and screenings.

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

Midterm Comments <u>Majority of the time I was able to work with lower extremity patients but it would be nice to observe and learn more about other diagnosis</u>

Final Comments I was able to work more with LE, back as well as some shoulder patients and see some other diagnosis but it would have been nice to learn how to do some of the upper extremities earlier.

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.