# PHYSICAL THERAPIST STUDENT EVALUATION:

## CLINICAL EXPERIENCE AND CLINICAL INSTRUCTION

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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 (Cls), 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 Cl 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.

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### **GENERAL INFORMATION AND SIGNATURES**

General Information	
Student Name	
Academic Institution University of Massachusetts Lowell	
Name of Clinical Education Site <u>Hasbro Childrens Hospital</u>	
Address 765 Allens Ave City Providence State RI	
Clinical Experience Number 3 Clinical Experience Dates Jan 2018-March	h 2018
<u>Signatures</u>	
I have reviewed information contained in this physical therapist student evaluation experience and of clinical instruction. I recognize that the inform to facilitate accreditation requirements for clinical instructor qualifications for academic program. I understand that my personal information will not be a program files.	ation below is being collected or students supervised in this
Student Name (Provide signature)	Date
Primary Clinical Instructor Name (Print name)	Date
Primary Clinical Instructor Name (Provide signature)	
Entry-level PT degree earned DPT Degree area Pediatrics, PCS  Years experience as a Cl 5  Years experience as a clinician-510  Areas of expertise Pediatrics, Concussion, Equiptment, Aquatics  Clinical Certification, specify area Pediatric Clinical Specialist  APTA Credentialed Cl SYes No  Other Cl Credential RI, APTA State Yes No  Professional organization memberships APTA Other Concuss	sion, Aquatics
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 Hasbro	Childrens Hospi	<u>tal</u>		
	Address <u>765 Allens Ave</u>	City <u>Providence</u>	State	<u>RI</u>	
2.	Clinical Experience Number 3				
3.	Specify the number of weeks for each a	pplicable clinical	experience/rota	ition.	
	12 Acute Care/Inpatient Hospital Facility Ambulatory Care/Outpatient ECF/Nursing Home/SNF Federal/State/County Health Industrial/Occupational Health F		Private Practice Rehabilitation/S School/Prescho Wellness/Preve Other	Sub-acute Reha ool Program	
<u>Orienta</u>	<u>ntion</u>				
4.	Did you receive information from the cli	nical facility prior	to your arrival?		□No
5.	Did the on-site orientation provide you vinformation and resources that you wou			⊠ Yes	☐ No
6.	What else could have been provided du	iring the orientation	on? <u>NA</u>		
<u>Patient</u> ,	Colient Management and the Practice Enformations 7, 8, and 9, use the following $1 = Never$ $2 = Range$			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	4	0-12 years	4	Critical care, ICU, Acute	3
Neuromuscular	4	13-21 years	4	SNF/ECF/Sub-acute	0
Cardiopulmonary	4	22-65 years	0	Rehabilitation	0
Integumentary	3	over 65 years	0	Ambulatory/Outpatient	4
Other (GI, GU, Renal,	4			Home Health/Hospice	0
Metabolic, Endocrine)				Wellness/Fitness/Industry	3

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	4
Screening	4	Prognosis	4
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

What suggestions, relative to the items in question #9, could you offer to improve the environment for professional practice and growth?  $\underline{\text{NA}}$ 10.

<u>Clinical</u>	<u>Experience</u>
11.	Were there other students at this clinical facility during your clinical experience? (Check all that apply):
	<ul> <li>☑ Physical therapist students</li> <li>☑ Physical therapist assistant students</li> <li>☑ from other disciplines or service departments (Please specify OT)</li> </ul>
12.	Identify the ratio of students to CIs for your clinical experience:
	<ul> <li>☐ 1 student to 1 CI</li> <li>☐ 1 student to greater than 1 CI</li> <li>☐ 1 CI to greater than 1 student; Describe</li> </ul>
13.	How did the clinical supervision ratio in Question #12 influence your learning experience? It was very helpful to have 2 Cl's in this setting and other mentors as I was able to gain experience in different specialities. Additionally, when there were cancellations with one CI this provided the oppurtunity to have another educational experience. This also prepared me to be able to pick up patients that were not originally in my schedule and be flexible.
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) PT, OT, SLP, child life specialist, psych, case management, social work, MD (neurologist) 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. <a href="Parking is free-street parking">Parking</a>.

#### Overall Summary Appraisal

16.	Overall	, how would you assess this clinical experience? (Check only one)
	$\boxtimes$	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? Flexibility- be willing to pick up a new case that was not in your schedule. Will need to be able to get in/out of the pool quickly to and transition from one case to another. Creativity & be fun- working with kids you cannot expect to do "normal" PT. Need to be able to be creative and make things into games/fun. Be open and willing to learn. Pediatrics is a SPECIALTY. Be aware that you will need to look things up at home. Be able to seek out your own learning oppurtunities.
- 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. Pediatrics course was very light. Would recommend switching required text book to Campbell Pediatrics book as this is the book used at other universities and used for the PCS exam. Would recommend pediatrics course being restructured for more content. URI & Northeastern programs have different tracks that PT students can take. Pediatrics track has one extra pedi course (advanced pediatrics) and orthopeadic track has extra course for specific joint mobilizations ext. This structure would have helped as URI students were much more prepared than I was. I would recommend Pedi lab being more structured to go through outcome measures rather than use of dolls. URI also requires more cases used which would be helpful and they are required to observe 2 pediatrics cases (in the advanced pediatrics course) which would have been helpful.
- 19. What suggestions would you offer to future physical therapist students to improve this clinical education experience? Obtain a copy of Campbell book study this prior to clinical experience. I borrowed a copy and reviewed common diagnoses that Cl's treat prior to clinical.
- 20. What do you believe were the strengths of your physical therapist academic preparation and/or coursework for *this clinical experience*? Neuro class and lab was helpful because many pedi cases have neuro invovlement. Additionally, observation of healthy developing babies in pedi lab was helpful to compare healthy development of atypical development.
- 21. What curricular suggestions do you have that would have prepared you better for *this clinical* experience? See question 18- restructure pediatrics course- include more content & use more appropriate text book.

#### **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.	0	0
The clinical education site had written objectives for this learning experience.	0	0
The clinical education site's objectives for this learning experience were clearly communicated.	0	0
There was an opportunity for student input into the objectives for this learning experience.	0	0
The CI provided constructive feedback on student performance.	0	0
The CI provided timely feedback on student performance.	0	0
The CI demonstrated skill in active listening.	0	0
The CI provided clear and concise communication.	0	0
The CI communicated in an open and non-threatening manner.	0	0
The CI taught in an interactive manner that encouraged problem solving.	0	0
There was a clear understanding to whom you were directly responsible and accountable.	0	0
The supervising CI was accessible when needed.	0	0
The CI clearly explained your student responsibilities.	0	0
The CI provided responsibilities that were within your scope of knowledge and skills.	0	0
The CI facilitated patient-therapist and therapist-student relationships.	0	0
Time was available with the CI to discuss patient/client management.	0	0
The CI served as a positive role model in physical therapy practice.	0	0
The CI skillfully used the clinical environment for planned and unplanned learning experiences.	0	0
The CI integrated knowledge of various learning styles into student clinical teaching.	0	0
The CI made the formal evaluation process constructive.	0	0
The CI encouraged the student to self-assess.	0	0

learning experiences.				U	U
The CI integrated knowled clinical teaching.	edge of various lear	ning styles into stu	dent	0	0
The CI made the formal	evaluation process	constructive.		0	0
The CI encouraged the s	student to self-asse	SS.		0	0
Was your Cl'(s) evaluation  Midterm Evaluation	n of your level of pe ☐ Yes ☐ No	rformance in agree			essment?

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
	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.