

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 Facility _____ Ambulatory Care/Outpatient _____ ECF/Nursing Home/SNF _____ Federal/State/County Health _____ Industrial/Occupational Health Facility	_____ Private Practice _____ Rehabilitation/Sub-acute Rehabilitation _____ School/Preschool Program _____ Wellness/Prevention/Fitness Program _____ Other _____
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Orientation

4. Did you receive information from the clinical facility prior to your arrival? ___ Yes ___ No
5. Did the on-site orientation provide you with an awareness of the information and resources that you would need for the experience? ___ Yes ___ No
6. What else could have been provided during the orientation? _____

Patient/Client Management and the Practice Environment

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, Metabolic, Endocrine)				Home Health/Hospice	
				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. _____ 2. _____ 3. _____ 4. _____ 5. _____
Implementation of Established Plan of Care		
Selected Interventions		
• Coordination, communication, documentation		
• Patient/client related instruction		
• 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 CI
 _____ 1 student to greater than 1 CI
 _____ 1 CI to greater than 1 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, 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 assistant student should have to function successfully at this clinical education site? _____
- _____
- _____
- _____
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*? _____
- _____
- _____
- _____