NORTHWEST ARKANSAS COMMUNITY COLLEGE
PHYSICAL THERAPIST ASSISTANT PROGRAM
CLINICAL EXPERIENCE I EVALUATION FORM

Student:________________________________
Facility:_______________________________
CI:____________________________________
Date:___________________________________

*Utilize the visual analog scale to rate the student as beginning, developing, or entry level for the following professional and communication behaviors. See attached form for sample behaviors.

1. **Interpersonal Skills**

   ______________________________________
   | Beginning Level | Developmental Level | Entry Level |

2. **Communication Skills**

   ______________________________________
   | Beginning Level | Developmental Level | Entry Level |

3. **Effective Use of Time**

   ______________________________________
   | Beginning Level | Developmental Level | Entry Level |

5. **Professionalism**

   ______________________________________
   | Beginning Level | Developmental Level | Entry Level |

8. **Responsibility**

   ______________________________________
   | Beginning Level | Developmental Level | Entry Level |

Date reviewed with student:_______________________________
Student’s Signature:____________________________________
Clinical Instructor’s Signature:____________________________________
Comments:

Clinical Experience I
Evaluation Form & sample behaviors

1
SAMPLE BEHAVIORS: Please use the following sample behaviors to rate the student using the visual analog scale. The sample behavior list is not meant to be all inclusive.

1. **INTERPERSONAL SKILLS**: The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community, and to deal effectively with cultural and ethnic diversity issues.

   **Beginning/Novice Level:**
   - Maintains professional demeanor in all clinical interactions
   - Demonstrates interest in patients as individuals
   - Communicates with others in a respectful, confident manner
   - Respects personal space of patients and others
   - Maintains confidentiality in all clinical interactions
   - Demonstrates acceptance of limited knowledge and experience
   - Recognizing impact of non-verbal communication (eye contact, active listening, open posture etc.)

   **Developmental Level:**
   - Recognizes impact of non-verbal communication & modifies accordingly
   - Assumes responsibility for own actions
   - Seeks to gain knowledge and input from others

   **Entry Level**
   - Listens to patient but reflects back to original concern
   - Works effectively with challenging patients
   - Responds effectively to unexpected experiences
   - Talks about difficult issues with sensitivity and objectivity
   - Delegates to others as needed
   - Approaches others to discuss differences in opinion in non-threatening manner
   - Accommodates differences in learning styles

2. **COMMUNICATION SKILLS**: The ability to communicates effectively (i.e. speaking, body language, reading, writing, listening) for varied audience and purposes.

   **Beginning Level:**
   - Demonstrates understanding of basic English (written & verbal)
   - Uses correct grammar, accurate spelling, and expression
   - Written information is organized and legible for patient documentation, assignments, presentations, etc.
   - Recognizes impact of non-verbal communication
   - Maintains eye contact if appropriate.
   - Communicates appropriately
   - Recognize differences in communications styles
   - Basic understanding of verbal and non-verbal communication techniques, teaching and learning styles, stages of learning, SOAP note documentation

   **Developing Level:**
   - Utilizes non-verbal communication to augment verbal message
   - Restates, reflects and clarifies message
   - Collects necessary information from the patient interview for discharge planning
   - Communicates appropriately and effectively with, clinical instructor, and patients
   - Communicates with non-verbal messages that are consistent with intended message
• Listens actively and attentively to understand what is being communicated by others

Entry Level:
• Modifies communication (verbal & written) to meet the need of different audiences
• Presents verbal or written message with logical organization & sequencing
• Maintains open & constructive communication
• Patient documentation is organized, clear, concise, legible and meets facility and legal guidelines
• Communicates professional needs and concerns to appropriate people
• Interprets and responds to non-verbal communication of others appropriately
• Assesses effectiveness of own communication and modifies as needed

3. Effective Use of Time: The ability to obtain the maximum benefit form a minimum resource investment of time and resources.

Beginner/Novice Level:
• Recognizes own time management issues
• Uses unscheduled time efficiently

Developing Level
• Uses resources effectively
• Coordinates schedule with others as needed
• Demonstrates flexibility
• Plans ahead
• Identify patient time management problems in clinical setting

Entry Level
• Sets priorities & reorganizes as needed
• Performs multiple tasks simultaneously and delegates when appropriate
• Uses scheduled time with each patient efficiently
• Demonstrates the ability to say no if request made does not add to priorities, or if the activity is in conflict with the set goals
• Makes recommendations for changes in response to patient/clinic time management issues
• Delegates to appropriate personnel as appropriate

4. Professionalism: The ability to exhibit appropriate professional conduct and to represent the professional effectively

Beginning/Novice Level
• Basic understanding of Arkansas Physical Therapy Practice Act
• Demonstrates awareness of state licensure regulations
• Abides by facility and program policies and procedures
• Projects professional image
• Demonstrates honesty, compassion, courage and continuous regard for all
• Follows dress code during
• Presents positive image to others
• Leaves personal problems outside of class/work environment i.e. does NOT discuss personal information with other colleagues in presence of patient

Developing Level
• Identifies positive professional role models
• Discusses societal expectations of the profession
• Acts on moral commitment
• Involves other health care professionals in decision making
• Awareness of ethical and legal issues impact on the profession
• Practices within the plan of care and the PT Practice Act
• Promotes the practice of physical therapy in a positive, professional manner
• Seeks opportunities for leadership
• Abides by state PT Practice Act

**Entry Level:**
• Demonstrates accountability for professional decisions
• Treats patients within scope of expertise
• Discusses role of physical therapy in health care
• Keeps patient as priority
• Maintains confidentiality

**Responsibility:** The ability to fulfill commitments and to be accountable for actions and outcomes.

**Beginning/Novice Level:**
• Demonstrates dependability by being on time and prepared
• Follows through on commitments
• Recognizes own limits
• Accepts responsibility for own actions and outcomes
• Follows infection control guidelines standards
• Provides safe and secure environment for patients
• Punctual and dependable
• Cleans treatment area upon completion in school and clinical settings
• Prepared and on time for clinical affiliations
• Contributes to a safe and secure environment for patients

**Developing Level:**
• Provides safe and secure environment for patients
• Utilizes acceptable techniques for safe handling of patients interventions
• Offers and accepts assistance
• Completes projects without prompting
• Directs complaints to the proper person in authority
• Provides constructive feedback to the appropriate person
• Encourages colleague accountability
• Initiates and spends downtime in class and clinical affiliations assisting others or engaging in learning activities
• Demonstrates awareness of contraindications and precautions of interventions
• Request assistance when needed

**Entry Level:**
• Dependable, punctual, aware of personal and professional limitations
• Accepts full responsibility for actions and outcomes
Student: ____________________________

Facility: ____________________________

CI: ________________________________

Date: ______________________________

Clinical Instructor: Please observe the student perform the following, then initial and date. Thank you!

1. Basic Treatment Preparation __________________________
2. ROM Measurement __________________________
3. Manual Muscle Test __________________________
4. Vital Signs: __________________________

Observation Only:

1. Wound __________________________

COMMENTS: _______________________________________________________

______________________________________________________________

CI Signature: ________________________________

Student Signature: ________________________________

Clinical Experience I
Evaluation Form & sample behaviors