

PT 680 - Clinical Internship Site Objectives

Week 1-2

Emphasis in on orientation, and establishing a positive, productive relationships and accurate and appropriate expectations for the internship. *The first several days the student would typically require close supervision for most patient care activities; the student is primarily relying on being an active observer, initiating questions and discussing clinical rationales.*

The student should:

1. Meet with SCCE and/or CI
 - a. Review objectives, and other information; share past experience, expectations, etc.
 - b. Be introduced to rest of the team.
2. Complete orientation to the facility and policy and procedures (documentation, risk management, safety, tour, etc.).
3. Shadow CI to become familiar with the patients and procedures.
 - a. Share your ideas on assessments (diagnosis, treatment plan, etc.) and interventions.
4. As time period progresses, with close monitoring and guidance as needed provided by CI.
 - a. Begin to assist the CI with interventions and examination procedures including patient interview and test and measures; typically working with less complicated patients to begin with.
5. Demonstrate safe practice (pt and self), professional communications and demeanor with minimal guidance from CI.
6. Complete daily notes on select patients and with minimal to moderate guidance and correction from CI.
7. During the second week, complete an initial examination/evaluation on appropriate patients with close monitoring, guidance and correction as needed from the CI.
 - a. Synthesize available data on a patient/client with a non-complicated diagnosis to include impairments, activity limitations, and participation restrictions.
 - b. Integrate the examination findings to diagnostically classify the pt and discuss with CI.
 - c. Prioritize impairments to determine a specific dysfunction towards which the intervention will be directed.
8. Select and prioritize the essential treatment interventions that are safe and meet the specific functional goals/outcomes in the plan of care with assistance from CI.
9. Review performance for the time period and discuss with CI - level of monitoring, feedback methods, plan for next week, etc. (This is on-going for the entire duration of the internship)
10. At the end of 2nd week, it would be generally expected that the student:
 - a. Requires monitoring and/or correction between 75% of the time, depending on the familiarity and complexity of the patients/tasks.

Week 3-4

The student should be familiar with facility, general policies and procedures and personnel. It is expected that student is becoming more efficient and consistent at basic tasks and eager to share their own clinical reasoning. Student is consistently requesting and assuming patient care responsibilities with less-complicated patients and administrative tasks and beginning to participate in more complex patient management activities.

The student should:

1. Assume more responsibilities for initial examinations/evaluations on non-complicated patients with monitoring from the CI, but with less correction needed for accuracy, and completeness. Efficiency is improving.
2. Increase participation in the examination and evaluation of more complicated patients.
3. Assess effectiveness and make adjustments with interventions concerning on-going, non-complicated patients with some monitoring and correction from CI as needed.
4. Document initial evaluations and progress notes on patients in a suitable time frame for a student and with less correction from CI.
5. Actively seek feedback with and demonstrate safe practice (pt and self), professional communications and demeanor with little correction needed from CI.
6. Write measurable functional goals that are time referenced with minimal correction from CI.
7. Prepare for patient conferencing and/or progress report writing with moderate monitoring and correction from CI.
8. Share relevant and appropriate evidence from the literature that supports clinical decision making.
9. Take initiative with patient scheduling and other administrative responsibilities with minimal monitoring and correction from CI.
10. As available, begin to supervise and delegate responsibilities to support staff.
11. If appropriate, work with CI to meet other stated goals such as planning meetings/observations of other disciplines, surgery, specialty areas, etc.
12. At the end of 4th week, it would be generally expected that the student:
 - a. Requires consistently less monitoring, and/or correction overall, ~50% of the time, depending on the familiarity and complexity of the patients/tasks.
 - b. Be capable of minimally managing 10-20% of a full-time PT case load expected of a new clinician for the clinical site.

Week 5-6

The student should be demonstrating more confidence, taking initiative in identifying appropriate learning activities and consistently self-assessing.

The student should:

1. Continue to assume more responsibility for completing examinations, evaluations and applying interventions.
2. Select, administer, and evaluate valid and reliable outcome measures to assess patient function.
3. More consistently and appropriately uses evidence to support clinical decisions.
4. Implement and assess effectiveness of treatment interventions addressing impairments, activity limitations and specific patient goals.
5. Consistently demonstrate safe behaviors; professional communications and demeanor and requires little to no correction from CI.

6. Document progress notes and initial evaluations with increasing efficiency and decreasing need of correction from CI.
7. Effectively instructs patients on their condition and interventions with less need for monitoring and/or correction.
8. Begins to take responsibility for discharge planning.
9. Present patient during care conference and/or completes progress reports minimal correction needed from CI.
10. Take initiative with patient scheduling and other administrative responsibilities with very little correction needed from CI.
11. At the end of 6th week, it would be generally expected that the student:
 - a. Requires consistently less monitoring and/or correction overall, ~30% of the time, depending on the familiarity and complexity of the patients/tasks.
 - b. Be capable of minimally managing 20-40% of a full-time PT case load expected of a new clinician for the clinical site.

Week 7-8

Student becomes efficient and skilled requiring infrequent monitoring and/or corrections with basic familiar tasks. Student should be taking more initiative with more challenging and less familiar responsibilities. Confidence is growing.

The student should:

1. Be able to apply interventions and complete examination/evaluations for familiar, less complicated patients with minimal monitoring, guidance and/or correction from CI.
2. Be capable of taking the lead with patient discharge responsibilities.
3. Continue to make progress on all responsibilities previously exposed to with regard to the need for monitoring, guidance and/or correction.
4. At the end of 8th week, it would be generally expected that the student:
 - a. Requires consistently less monitoring and/or correction overall, ~10-25% of the time managing less complicated and/or familiar patients and other tasks.
 - b. Be capable of minimally managing 40-60% of a full-time PT case load expected of a new clinician for the clinical site.
5. Complete midterm self-assessment of performance and review and compare with CI.
6. Complete midterm assessment of experience (Acadaware) and review with CI.
7. Review goals for last half of internship with CI.

Week 9-13

The student refines performance with familiar patient presentations and administrative tasks, including improving efficiency. Student seeks specific patients and other tasks and activities to compete midterm goals. Each week, the student effectively demonstrates a capability of managing a greater % of the responsibilities expected of an entry-level PT for that clinic.

The student should:

1. Emphasize development of clinical reasoning skills.
2. Work towards independence with managing new patients and patients with more complex conditions. Consultation with CI and others in a more collegial manner and appropriate for new and/or challenging patients.
3. Identify challenging patient management/treatment issues where you can co-treat and/or observe CI or other clinicians.
4. As available, be able to initiate supervisory and delegation responsibilities of support staff.
5. Take on other non-patient care responsibilities associated with being a PT at the clinical internship site.
6. When clinical skills are near or at entry-level, engage in broader professional learning activities, such as shadowing other disciplines, mentoring first or second year PT students, marketing, program development, management, and administration duties, etc.
7. At the end of 13th week, it would be generally expected that the student:
 - a. Requires minimal monitoring and/or correction overall for managing most patients and other tasks. May require some guidance for appropriately complex and unfamiliar patients and situations. CI is mainly providing guidance towards more effective and/or efficient way to accomplish a task that is beyond entry-level expectations; or provides an alternative way to accomplish a task.
8. Be capable of managing 90-100% of a full-time PT case load expected of a new clinician for the clinical site.

Week 14-15

For a student that is practicing at entry-level, the remaining time can be spent participating in alternative learning experiences not engaged in previously; refining high-level skills; completing special project(s), and shadowing other types of providers, etc.

The student should:

1. Rarely if ever need correction and monitoring (Between 5 – 0%). Mentoring and/or demonstration is typically associated with the unusual, complex patient and/or situation; student appropriately consults for guidance. Performance is competent overall and is consistent with entry-level practice expectations of the facility. Student would be appropriate to practice as a new clinician colleague.
2. Follow-through with patient-discharges that are pending.
3. Complete the final self-assessment of performance and review and compare with CI assessment.
4. Complete Acadaware final CI and Site evaluation and share with CI/SCCE.
5. Celebrate a job well done.