Messiah College Athletic Training <u>Student Clinical Experience Performance Evaluation – Form A</u> [For ATED 246]

Clinical/Practical Course Name: Practicum I in Athletic Training

Student Name:Cl	ass/Level: Sophomore/Level I
Preceptor:Pi	racticum Supervisor:
Clinical Assignment:Se	emester/Year Eval. Completed:
Point Value: 125 Points Earned:	Grade:
	E system. All performance areas (attributes/skills) are master a skill/attribute when a four (4) (B) rating is received.
Practicum II & III students (omores) are Introductory/Basic- Level I students. Juniors) are Intermediate/Mid- Level II students. niors) are Advanced/Entry- Level III students.
Cognitive skills, Psychomotor Skills, and Affe criteria/rating scale below.	ctive Characterizations are evaluated according to the
Criteria/Rating Scale:	
A = (5 pts) Excellent Skill/Behavior	Performance is exceptional (consistently exceeds expectations for level)
3 = (4 pts) Very Good Skill/Behavior	Performance is complete or at a mastery level (can immediately/appropriately adjust behavior/skill for Preceptor if requested).
C = (3 pts) Average Skill/Behavior	Performance is close to complete/mastery level, but requires occasional instruction/correction.
) = (2 pts or below) Unacceptable Skill/Behavior	Student must <u>repeat/improve</u> the skill or behavior.
NO = Not Observed	Note: In cases where a professional practice or a clinical integrated proficiency is not observed directly, give the student a hypothetical scenario, and evaluate their performance/response or application.

• Please make comments to clarify ratings, indicate areas for improvement, or indicate improvements that have been made.

Directions: Evaluate and review the student's performance twice during the clinical experience.

Eval A, approximately halfway through and Eval B at the end. The Athletic training student should read and sign first, followed by the Preceptor, then the Practicum Supervisor and finally the Program Director.

• Please return this form to the Practicum Supervisor within a week of the student's completion of the Practicum experience.

Grade %: The % of Total Points and Grade Equivalents are listed below. Please indicate the student's total points when indicated. A student must average a B or better to meet the course skill requirements.

A = 93 (116) A- = 90 (113) B+ = 87 (109) B = 83 (104) B- = 80 (100) C+ = 77 (96) C = 74 (93)

ATED 246 Performance Evaluation Page 2

Note: In cases where a skill/attribute is not observed, give the student a scenario, problem, task/skill to

perform in a hypothetical setting/situation and evaluate the performance/response.

A B+ B C+ C D Scale: 5 4.5 4 3.5 3 2

I. Professional Practice Behaviors

In each of the Professional Practice Behaviors listed, the ATS will demonstrate:

IA. Professionalism:

1. Professional Dress/Appearance: (follows standard dress/appearance guidelines)

A B+ B C+ C D A B+ B C+ C D Eval A: Scale: 5 4.5 4 3.5 3 Eval B: Scale: 5 4.5 4 3.5 3 2 Comments: Comments:

2. Effective interpersonal communication skills (develops rapport with all personnel and exhibits compassion and empathy with patient/clients)

Eval A: Scale: 5 4.5 4 3.5 3 Eval B: Scale: 5 4.5 4 3.5 3 2 Comments: Comments:

3. Honesty, integrity, dependability and initiative (is organized, completes all duties, is trustworthy and self-motivated)

Eval A: Scale: 5 4.5 4 3.5 3 2 Eval B: Scale: 5 4.5 4 3.5 3 2 Comments: Comments:

4. Accepts authority/constructive criticism (interacts positively & professionally, follows chain of command, attempts Recommendations/instructions, etc.)

Eval A: Scale: 5 4.5 4 3.5 3 2 Eval B: Scale: 5 4.5 4 3.5 3 2 Comments: Comments:

5. Self-Confidence (works with self-assurance and independence)

Eval A: Scale: 5 4.5 4 3.5 3 2 Eval B: Scale: 5 4.5 4 3.5 3 2

Comments: Comments:

IB. Primacy of the Patient

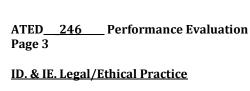
IC. Team Approach to Practice

6. Knowledge/application of patient confidentiality standards.

Eval A: Scale: 5 4.5 4 3.5 3 2 Eval B: Scale: 5 4.5 4 3.5 3 2 Comments: Comments:

7. They can a) execute duties within the legal scope of practice and b) work with others in effecting positive patient outcomes.

Eval A: Scale: 5 4.5 4 3.5 3 2 Eval B: Scale: 5 4.5 4 3.5 3 2 Comments: Comments:



8. Understanding and compliance with PA licensure laws, Messiah College policies, and CAATE requirements (e.g. direct supervision)

Eval A: Scale: 5 4.5 4 3.5 3 2

Eval B: Scale: 5 4.5 4 3.5 3 2

Comments: Comments:

9. Understanding and compliance with professional standards and codes (ex. NATA, BOC, PATS, etc.)

Eval A: Scale: 5 4.5 4 3.5 3 2 Eval B: Scale: 5 4.5 4 3.5 3 2

Comments:

IF. Advancing Knowledge

10. Knowledge and use of evidence based practice in the delivery of care.

Eval A: Scale: 5 4.5 4 3.5 3 2 Eval B: Scale: 5 4.5 4 3.5 3 2

Comments:

IG. Cultural Competence

11. Understanding and articulation of how to work respectfully/effectively with diverse patients in the college/university setting.

Eval A: Scale: 5 4.5 4 3.5 3 2 Eval B: Scale: 5 4.5 4 3.5 3 2

Comments:

II. Clinical Integration Proficiencies (CIP)

In each of the CIPs listed, the ATS will:

<u>CIP- Prevention & Health Promotion</u> <u>CIP-3.0</u>

Eval A:

- _____ 1. Describe, implement and monitor program's prevention strategies for at-risk individuals (e.g. persons with: asthma, allergies, diabetes, hx of heat illness, sickle cell trait, hypertension, etc.).
- 2. Obtain/interpret data related to potentially harmful environmental conditions or body functions (e.g. blood glucose, peak expiratory flow, hydration status/body weight, etc.)
- ____ 3. In case of emergency, can make appropriate recommendations for individual safety/activity status or activate appropriate E.A.P. (emergency action plan).

Comments:

Eval	p.

- _____ 1. Describe, implement and monitor program's prevention strategies for at-risk individuals (e.g. persons with: asthma, allergies, diabetes, hx of heat illness, sickle cell trait, hypertension, etc.).
- _____ 2. Obtain/interpret data related to potentially harmful environmental conditions or body functions (e.g. blood glucose, peak expiratory flow, hydration status/body weight, etc.)
- _____ 3. In case of emergency, can make appropriate recommendations for individual safety/activity status or activate appropriate E.A.P. (emergency action plan).

Comments:

Page 4
CIP- Prevention & Health Promotion (continued)
 Eval A: 1. Evaluate, select, modify and apply standard protective equipment, braces, pads and other custom devices to prevent/minimize the risk of injury and allow safe participation in sport or physical activity. 2. Evaluate, select, modify, and apply wrapping, taping and supportive techniques in order to prevent and/or minimize the risk of injury, or to provide an adjunct to effective rehabilitation and reconditioning activities. Comments:
 Eval B: 1. Evaluate, select, modify and apply standard protective equipment, braces, pads and other custom devices to prevent/minimize the risk of injury and allow safe participation in sport or physical activity. 2. Evaluate, select, modify, and apply wrapping, taping and supportive techniques in order to prevent and/or minimize the risk of injury, or to provide an adjunct to effective rehabilitation and reconditioning activities. Comments:
CIP- Clinical Assessment Dx/Acute Care/Therapeutic Intervention
Eval A:a.1 Performs an introductory/basic clinical exam of an upper extremity injury, determines a dx/differential dx, participation clearance or restriction, referral, initial care, treatment goals/follow-up care, application of appropriate therapeutic modalities, rehabilitation techniques, medications, etc. Also, utilize one standard documentation form (e.g. S.O.A.P.) to document activity level, return to play decisions, patient outcomes and progress in treatment plans).
b.2 Performs an introductory/basic clinical exam of a lower extremity injury to determine clinical assessment, acute care and therapeutic interventions and documentation (see CIP-4a.1 above).
c.3 & d.4 Performs an introductory/basic clinical exam of a head/neck/face injury to determine clinical assessment, acute care and therapeutic interventions and documentation (see CIP-4a.1 above).
e.5 & f.6 Performs an introductory/basic clinical exam of spine/thoracic/abdominal injury to determine clinical assessment, acute care and therapeutic interventions and documentation (see CIP-4a.1 above).
g.7 Performs an introductory/basic on the field Injury Assessment for any injury to determine immediate return to activity status; or the need to provide a comprehensive clinical exam. Comments:
Eval B: a.1 Performs an introductory/basic clinical exam of an upper extremity injury, determines a dx/differential dx, participation clearance or restriction, referral, initial care, treatment goals/follow-up care, application of appropriate therapeutic modalities, rehabilitation techniques, medications, etc. Also, utilize one standard documentation form (e.g. S.O.A.P.) to document activity level, return to play decisions, patient outcomes and progress in treatment plans).
b.2 Performs an introductory/basic clinical exam of a lower extremity injury to determine clinical assessment, acute care and therapeutic interventions and documentation (see CIP-4a.1 above).
c.3 & d.4 Performs an introductory/basic clinical exam of a head/neck/face injury to determine clinical assessment, acute care and therapeutic interventions and documentation (see CIP-4a.1 above).
e.5 & f.6 Performs an introductory/basic clinical exam of spine/thoracic/abdominal injury to determine clinical assessment, acute care and therapeutic interventions and documentation (see CIP-4a.1 above).
g.7 Performs an introductory/basic on the field Injury Assessment for any injury to determine immediate

return to activity status; or the need to provide a comprehensive clinical exam.

Comments:

ATED 246 Performance Evaluation

ATED 246 Performance Evaluation Page 5
Eval A: Performs an introductory/basic clinical exam utilizing a standard illness/condition documentation plan/procedure (e.g. HIPS, S.O.A.P.) to determine a dx/different diagnosis, immediate follow-up care plan, referral, and restrictions in participation. Comments:
Eval B: Performs an introductory/basic clinical exam utilizing a standard illness/condition documentation plan/procedure (e.g. HIPS, S.O.A.P.) to determine a dx/different diagnosis, immediate follow-up care plan, referral, and restrictions in participation. Comments:
Eval A:Clinically evaluate and manage a patient with an emergency injury/condition including primary survey, secondary survey, level of consciousness/shock, activation of E.A.P., diagnosis, provision of emergency care (e.g. CPR, AED, O ₂ , splints, spine stabilization, etc.) and appropriate documentation of emergency and care given (on standard forms/procedures). Comments:
Eval B:Clinically evaluate and manage a patient with an emergency injury/condition including primary survey, secondary survey, level of consciousness/shock, activation of E.A.P., diagnosis, provision of emergency care (e.g. CPR, AED, O ₂ , splints, spine stabilization, etc.) and appropriate documentation of emergency and care given (on standard forms/procedures). Comments:
Psychosocial Strategies and Referral CIP-7.0 Eval A: Select and integrate psychosocial techniques into a patient's treatment program to enhance treatment adherence and overall outcomes including: verbal motivation, goal/plan setting and pain management (at a basic/introductory level). Comments:
Eval B:Select and integrate psychosocial techniques into a patient's treatment program to enhance treatment adherence and overall outcomes including: verbal motivation, goal/plan setting and pain management (at a basic/introductory level). Comments:
Eval A: Demonstrate ability to recognize and refer at-risk individuals with psychosocial disorders and/or mental health emergencies and understand Messiah's management plan. Comments:
Eval B:Demonstrate ability to recognize and refer at-risk individuals with psychosocial disorders and/or mental health emergencies and understand Messiah's management plan.

Comments:

ATED_	246	_ Performance Evaluation
Page 6		

III. Signatures/Documentation

A. Date/year the student received/reviewed/completed the clinical skill/attribute evaluation:		
B. Student Signature:	Date:	
C. Preceptor Signature:	Date:	
D. Practicum Supervisor Signature:	Date:	
E. Program Director Signature:	Date:	

Note: The student signature does not necessarily mean that he/she is in agreement with the evaluation. It serves as proof that the clinical skill/attribute evaluation was reviewed with the student.

Comments: