



Clinical Placement Two (CP 2) – Expectations of Clinical Instructors

Course Description

Clinical Practice Two (CP 2) is a five-week, full-time (approx. 37.5 hrs/week) clinical course that provides students with a broad clinical experience, usually in a rural, regional or remote setting. Upon beginning CP 2, students have had two full semesters of foundational theory preparation and have completed:

- Clinical Practice One (CP 1) – 1-week, introductory clinical practice course in the classroom setting and a one-day observation in a clinical setting.

This is the first clinical course in the MPT program in which the clinical instructor should challenge the student to provide rationale (scientifically-based wherever possible) and connect their theory to practice. If the student does not believe they have had any curricular content to date in a particular area, they should be encouraged to review their notes for all academic courses to date.

Definitions of Performance



Students are expected to progress from a 'Beginner' level toward an 'Advanced Beginner' level throughout CP 2. The student should be ready to share a caseload with the clinical instructor and progress to managing a limited caseload of patients with simple conditions.

Role of Clinical Instructor

- Support the student in sharing/managing a limited caseload
- Challenge the student to provide rationale (highest level of available evidence) for clinical choices in assessment and treatment
- Critically assess competency and provide constructive feedback on an ongoing basis
- Clarify changing expectations and clearly communicate expectations over the course of the placement
- Assist student in the transition from sharing a caseload to some independent caseload responsibilities

Theory Preparation for Clinical Practice Two (CP 2)

Clinical Practice Two (CP 2) is part of Module 3 of the MPT Program. The theory preparation immediately preceding CP 2 includes courses in anatomy, pathology, neuroanatomy, basic foundational clinical skills and evidence-based practice. Students will also have covered courses devoted to introductory exercise physiology,



exercise testing, movement analysis, and PT as an educator, pain assessment and the multidimensional nature of pain. Lifespan I includes human growth and development, nutrition and pharmacology.

Functional Activities	Treatment Methods	Movement Analysis	Critical Injury
<ul style="list-style-type: none"> • Passive ROM • Progressive resisted exercise • P.N.F. • Hydrotherapy • Lifts and transfers • Bed mobility • Assisted ambulation • Clinical exercise tests (6 min walk, timed up and go, cycle ergometry) 	<ul style="list-style-type: none"> • Heat • Ice • Wound healing principles and management • Compression bandaging • Massage • Relaxation techniques • Basic taping and bandaging • Aerobic/anaerobic exercise prescription 	<ul style="list-style-type: none"> • Anatomy • Movement through positions • Gait • Posture • Balance • Energy system task analysis • Assessment of ROM and strength • Generic subjective assessment 	<ul style="list-style-type: none"> • Searching the literature • Critiquing articles • Principles and practice of patient education by PT

****As there can be a diversity of MPT Course Instructors, with changes at times, in any course year, it is useful to discuss the emphasis on particular course content delivered with the student. Although course objectives are consistent from year-to-year, content to demonstrate the objectives may vary. The Clinical Instructor can ask to review available course notes/handouts with the student as a way of better understanding the course content covered to date.***

Clinical Practice 2 Course Objectives

Upon completion of the course, students will be able to:

1. Apply an evidence-based analysis of various assessment and treatment procedures employed.
2. Apply and evaluate effective communication strategies with patients, families, caregivers, and other health professionals as individuals and groups including specific application of educational principles and delivery of health promotion education.
3. Demonstrate professional behaviors in the clinical setting which will include: confidentiality, respect for staff and patients, constructive criticism, self-directed learning, reflective learning, obtaining consent for physical therapy management, and other aspects of legal and ethical practice.
4. Implement and document a basic, individualized physical therapy assessment with emphasis on subjective assessment, analysis of movement, applied anatomy, and exercise physiology.
5. Prioritize patient problems, based on interpretation of assessment data collected. Plan and document a basic treatment approach emphasizing patient goal setting, basic exercise prescription, and appropriate use of cryotherapy and thermotherapy.



- Demonstrate sensitivity to, and respect for, each client's rights, dignity, and unique mix of characteristics including gender, age, ethnicity, religion, culture, language, lifestyle orientation, health and cognitive and behavioral status.

Student Introduction Letter & Clinical Learning Record

Prior to the beginning of placement, the student will send an introductory letter and clinical learning record by email. This letter will outline previous experiences and outline goals for the placement. It is hoped that this will be discussed as part of the orientation to the clinic.

Student In-service Presentation on Placement

Each student is required to do at least two (2) in-service presentations to health care professionals while on placement over the course of CP 2-6. The student may choose during which two clinical placements they wish to deliver the presentations, though a clinical site may require the student to do a presentation as part of the total learning experience or the caseload management. The CI may note a situation that is particularly suited to a student presentation and may require it as part of the rotation (i.e. a patient education session). Patient education programming that is a part of the regular caseload management approach in a placement does not substitute for the mandatory in-service requirements.

Note: On the last page of the final electronic student performance tool (ACP 2.0), there is a space for the CI to indicate whether a student presentation was done. It is helpful to populate the text box with details such as title of presentation, audience in attendance and a brief comment around the quality of the presentation.

Self-directed Learning

Students are expected to fully participate in self-directed learning in order to maximize their learning and are accountable for all self-directed activities through evaluation.

Performance Evaluation for Clinical Practice Two (CP 2)

It is expected that the CI will assess aspects of the student's performance and provide balanced and constructive feedback on relevant performance indicators, **on an ongoing basis**, over the course of the placement. The student should be appraised regularly of how they are performing and encouraged to provide their perspective as well.

The ACP 2.0 is completed electronically via the Student Assessments Module (SAM) through the platform HSPnet (Health Sciences Placement Network). Detailed information/instructions for accessing the online ACP are provided to the CI by MPT Clinical Coordinators in advance of each clinical placement.

- **Every student and Clinical Instructor is expected to independently orient to the ACP 2.0 via the short online training module (30-45 minute time commitment) via the following link:**

<https://app.rehab.utoronto.ca/ACP2.0>

*Note: The module is best viewed with Chrome



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- A completed ACP 2.0 and accompanying discussion of the performance review using the ACP 2.0, must be completed at **midterm** and **final** benchmarks of the placement Note: Submitting your assessment will make it visible to the student, so you may want to delay this step until just before you are ready to discuss it with them.
- Final performance evaluation completed and submitted through HSPnet **within two (2) business days** following completion of the placement