



Clinical Placement 3 – Expectations of Clinical Instructors

Course Description

Clinical Practice Three (CP 3) is a six week, full-time (approx. 37.5 hrs/week) clinical course where the student will apply theory from all academic and clinical modules preceding it with the primary focus on Modules 3, 4, 5, and 6. These key modules within the MPT Program focus on the core systems relevant to Physical Therapy practice: Musculoskeletal, Cardiorespiratory, Neurological. Upon beginning CP 3, students have completed:

- Clinical Practice One (CP 1) – 1 week, introductory clinical practice course
- Clinical Practice Two (CP 2) – 5 week, full-time clinical practicum with limited caseload management and primarily assisting clinical instructor with caseload management

The student will be expected to demonstrate basic assessment and program planning in the core systems and, under supervision, take the patient from admission to discharge for at least a portion of their caseload. For the more complex portion of a caseload assignment, the student is expected to collaborate with the clinical instructor and assist in cooperative caseload management.

Definitions of Performance

Advanced Beginner

Student requires clinical supervision (i.e. monitoring, discussing, observing) 75% - 90% of the time with simple patients, and 100% of the time with complex patients



Intermediate

Student requires clinical supervision (i.e. monitoring, discussing, observing) less than 50% of the time with simple patients, and 75% of the time with complex patients

Students are expected to progress from an 'Advanced Beginner' level toward an 'Intermediate' level throughout CP 3.

The student will begin by sharing a caseload with the CI and progress toward independently maintaining approx. 50% of a full-time new graduate physical therapist's caseload with simple patients and 25% of a full-time new graduate physical therapist's caseload with complex patients.

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 to independent caseload responsibilities

Theory Preparation for Clinical Practice Three (CP 3)

Clinical Practice Three (CP 3) is part of Module 7 of the MPT Program. The theory preparation immediately preceding CP 3 includes courses in Cardiorespiratory, Evidence Based Practice, Musculoskeletal, Neurology, Exercise Physiology, Lifespan, and Professional Practice.



Cardiorespiratory	Musculoskeletal	Neurology
<ul style="list-style-type: none"> • Cardiopulmonary screening • Cardiovascular clinical examination • Respiratory clinical examination • Thorough C-R assessment • Vital signs (HR, pulses, RR & BP) • Airways / Lungs / Chest → anatomy and biomechanics • Breathing patterns and chest movement • Pre-exercise screening • Clinical exercise testing • Submaximal test • Auscultation • ECG's • Airway Clearance techniques: postural drainage, percussion, active/manual techniques, suctioning 	<ul style="list-style-type: none"> • Medical/surgical management of fractures • PT management of acute soft tissue injuries • PT management of common pediatric MSK conditions • Upper and Lower Quadrant Scan examinations • General rheumatology screening assessment (gait, arms, legs, spine) • Active Joint Count (Rheumatoid Arthritis and similar conditions) • Articular Index (Spondylo-arthropathies) • Total joint replacement • Differential diagnosis and management principles of common upper quadrant MSK conditions • Biomechanical examination / joint mobilization / soft tissue techniques for: C/spine, TMJ, shoulder girdle, elbow , wrist, hand 	<ul style="list-style-type: none"> • Postural orientation and stability, functional tasks • Task oriented approach to PT management, supplemented by a neurofacilitation approach • Assessment of sensory and perceptual impairments • Resting positions for adult hemiplegia • Postural control (normal & abnormal) • Assessment of balance and gait • Balance retraining – sitting, standing • Assessment & treatment: adult hemiplegia, Traumatic Brain Injury, M.S., post-polio, Guillain-Barré syndrome

**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 3 Course Objectives

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

1. Establish effective communication strategies with the patients, families, caregivers, other health professionals and community agencies.
2. Incorporate the broad determinants of health relevant to the patient or population, community development principles and principles of primary health care.
3. Demonstrate safe, ethical, culturally sensitive and autonomous professional practice.
4. Demonstrate an organized and individualized physical therapy assessment with emphasis on subjective and objective assessment of musculoskeletal, cardiorespiratory and neurological systems.
5. Prioritize patient problems based on interpretation of assessment data collected.
6. Formulate a physical therapy diagnosis based on interpretation of assessment data collected.
7. Develop a basic treatment plan emphasizing individual exercise prescription, health promotion education and appropriate use of electro-physical modalities.
8. Apply an evidence-based rationale for assessment and treatment procedures employed.
9. Reflect on their practice which includes: self-evaluation of actions and decisions with continuous improvement of knowledge and skills.
10. Recognize the defining features that clinical settings present, including their funding models, and deliver physical therapy services in the unique context of that setting.
11. In a non-judgmental manner, develop a rationale for the therapeutic approach based on an understanding of the patient situation.



Student In-service Presentation on Placement

Each student is required to do at least two (2) in-service presentations to health care professionals over the course of the five (5) distinct clinical placements. 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.

Performance Evaluation for Clinical Practice Three (CP 3)

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 be 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
- 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 three (3) business days** following completion of the placement