

**Mercer County Community College
Physical Therapist Assistant Program
Clinical Instructor Survey**

Information from this brief survey assists us in assessing clinical education experiences, identifying trends, and responding to the Commission on Accreditation in Physical Therapy Education. Please complete this form and return it with the student performance evaluation. Thank you.

Clinical Instructor Data:

Name:	
Date:	
Clinical Facility:	
Number of years in clinical practice:	
Number of years as a clinical instructor:	
Number of PT and PTA students supervised within the last 12 months:	

Clinical Instructor Educational Profile:

Highest Degree Earned (please circle)	AAS, BS, entry level MS, postprofessional MS, DPT, DScPT, PhD, EdD, Other:_____	
Are you an APTA Credentialed Clinical Instructor?	Yes / No	
Do you have ABPT Specialty Certification?	Yes / No	If yes, list area:
Have you earned other advanced certification?	Yes / No	If yes, list area:

Professional Activities:

Please indicate which of the following you have been active in within the last 3 years.

- Teaching (inservices, continuing education courses, community wellness/prevention)
 Topic(s): _____
- Research. Area: _____
- Attendance at district/state/national meetings

Educational Activities:

- Continuing Education Courses I-services
- Graduate Education Case Studies
- Literature Reviews other _____

(2 sided)

Feedback for ACCE:

1. Is the communication with the ACCE and PTA Program at Mercer County Community College sufficient?
_____yes _____no

2. Is the communication with the ACCE and PTA Program at Mercer County Community College effective?
_____yes _____no

3. Did the student packet(s) sent prior to this clinical affiliation contain adequate and appropriate information to fulfill the role of Clinical Instructor effectively? _____yes _____no

4. Did the ACCE provide sufficient and appropriate support for any questions/concerns prior to and during this clinical affiliation? _____yes _____no _____n/a

Questionable Student Behavior Survey

Have you ever struggled with how to grade a particular student behavior? Have you ever wondered how *other* Clinical Instructors (CI) would handle the same clinical concern that you have?

This survey is identical to the Fall 2017 survey. It contains a couple of scenarios and asks you to grade the student. This survey data will allow the PTA program to see the level of variation to which different CIs grade the same student behavior. Once this data is collected, I will share it with our clinical faculty. This is part of an ongoing clinical discussion in which the PTA program will more concretely define “competence” in a clinical setting, operational definitions for passing and failing a clinical affiliation (e.g. what exactly is acceptable student behavior and what is not?), and steps to take when students are not meeting the criteria outlined.

Thank you so much for taking the time to complete this survey. We are always striving to improve our program and your support makes all the difference!

Scenario #1

Your student took a blood pressure reading over a broken humerus.

1.	Would this behavior be a concern to you?	YES	NO	If you answered “no”, please stop here.
2.	Would you contact the school regarding this concern?	YES	NO	
3.	How would you communicate this concern to the student?			
4.	Would this behavior constitute a failure to meet the criteria to pass the affiliation?	YES	NO	

Please grade this behavior below:

PERFORMANCE: The student/learner performs Manual muscle tests (MMT), range of motion (ROM) using a goniometer, and vital signs measurements on patients, competently and safely.

(NOT MET) 0 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 _____ 9 _____ 10 (MET)

Please share any additional thoughts about this scenario here:

Scenario #2

Today, your student was working with a patient with a spinal cord injury in your outpatient gym. The student left the patient unattended in the gym to get herself a drink of water, without first informing you.

1.	Would this behavior be a concern to you?	YES	NO	If you answered "no", please stop here.
2.	Would you contact the school regarding this concern?	YES	NO	
3.	How would you communicate this concern to the student?			
4.	Would this behavior constitute a failure to meet the criteria to pass the affiliation?	YES	NO	

Please grade this behavior below:

PATIENT SAFETY: The student/learner ensures patient safety by the use of universal precautions, proper body mechanics, proper guarding techniques, maintaining a safe environment, and utilizing proper intervention techniques.

(NOT MET) 0 1 2 3 4 5 6 7 8 9 10 (MET)

Please share any additional thoughts about this scenario here:

Scenario #3

Your student has not done anything wrong, but he is not demonstrating **any** growth during this clinical affiliation.

1.	Would this behavior be a concern to you?	YES	NO	If you answered "no", please stop here.
2.	Would you contact the school regarding this concern?	YES	NO	
3.	How would you communicate this concern to the student?			
4.	Would this behavior constitute a failure to meet the criteria to pass the affiliation?	YES	NO	

Please share any additional thoughts about this scenario here: