

## MODULE 8

### The Evaluation Process



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#### The ACP



UBC's Department of Physical Therapy uses the new *Canadian Physiotherapy Assessment of Clinical Performance – or ACP* – evaluation tool. It is a pan-Canadian evaluation and was phased into our MPT program as of April 2015. 

This form is used by most of the PT programs in Canada, enabling comparisons of data between programs and nationally. It is a competency-based tool based on the *Essential Competency Profile for Physiotherapists* (which also provides the basis for the UBC MPT curriculum). The ACP tool has been validated for reliability, internal consistency and practicality.

The ACP tool has **21 key competencies** and **7 roles**, which are taken from the *Essential Competency Profile for Physiotherapists in Canada (2009)*.



Organization of the ACP evaluation tool

<b>Role</b>	2.0 COMMUNICATOR Physiotherapists use effective communication to develop professional relationships with clients, families, care providers, and other stakeholders.																					
<b>Key Competency</b>	2.1 Develops, builds, and maintains rapport, trust, and ethical professional relationships through effective communication.																					
<b>Enabling Competency</b>	2.1.1 Demonstrates sensitivity to the uniqueness of others. 2.1.2 Listens effectively and facilitates discussion to ensure reciprocal exchange of information. 2.1.3 Demonstrates an awareness of self behaviours and the responses of others and adapts communications appropriately. 2.1.4 Respects confidentiality, privacy and autonomy.																					
	<table border="1" style="width: 100%; text-align: center;"> <tr> <td></td> <td>Beginner</td> <td>Advanced Beginner</td> <td>Inter-mediate</td> <td>Advanced Inter-mediate</td> <td>Entry Level</td> <td>With Distinction</td> </tr> <tr> <td>Midterm</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> </tr> <tr> <td>Final</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> <td>○</td> </tr> </table>		Beginner	Advanced Beginner	Inter-mediate	Advanced Inter-mediate	Entry Level	With Distinction	Midterm	○	○	○	○	○	○	Final	○	○	○	○	○	○
	Beginner	Advanced Beginner	Inter-mediate	Advanced Inter-mediate	Entry Level	With Distinction																
Midterm	○	○	○	○	○	○																
Final	○	○	○	○	○	○																
	2.2 Elicits, analyzes, records, applies, conveys and shares information. 2.2.1 Seeks out and gathers information from clients and others to assist in shared and informed decision-making. 2.2.2 Encourages and asks clarifying questions. 2.2.3 Provides information and responds to questions in a truthful, objective, sensitive, empathic, and respectful manner.																					



'Simple' to 'Complex'

Throughout the ACP you will find mention of 'Simple' and 'Complex' – for example:  
*"The student requires clinical supervision less than 50% of the time managing patients with **simple** conditions and 75% of the time managing patients with **complex** conditions."*

SIMPLE

- One diagnosis
- No comorbidities
- Follow an anticipated plan of recovery
- Speak English/French as their first language
- Oriented x3
- Want to participate in PT
- Minimal, if any, lines in the acute setting

COMPLEX

- Many diagnosis and overlapping comorbidities
- Not oriented to person, place or time
- Complicated family interactions
- Chronic condition
- Unknown prognosis
- Multiple lines in the acute setting

## Instructions for the completion of the ACPe tool



- The ACP is online (ACPe) and is accessible to our Clinical Educators (called *CI*, or *Clinical Instructor*, in the system) and students. It is accessed via HSPnet.
- When a CI has been assigned a student s/he will receive an *HSPnet Welcome Email* on the placement start date.
- The *Welcome Email* contains a link to an ACPe module (*needs to be completed one time only; takes two minutes to complete*).
- Upon completion of the module, the CI clicks on "submit." This generates a second email with a User ID and temporary password. This gives the CI access to evaluate his/her student using the ACPe.

**2.0 COMMUNICATOR**  
Physiotherapists use effective communication to develop professional relationships with clients, families, care providers, and other stakeholders.

2.1 Develops, builds, and maintains respect, trust, and ethical professional relationships through effective communication.

2.1.1 Demonstrates sensitivity to the uniqueness of others.

2.1.2 Listens effectively and facilitates discussion to ensure reciprocal exchange of information.

2.1.3 Demonstrates an awareness of self boundaries and the responses of others and adapts communications appropriately.

2.1.4 Respects confidentiality, privacy and autonomy.

2.2 Elicits, analyzes, records, applies, corrects and shares information.

2.2.1 Seeks out and gathers information from clients and others to assess or shared and informed decision-making.

2.2.2 Encourages and asks leading questions.

2.2.3 Provides information and responds to questions in a useful, objective, sensitive, empathic, and respectful manner.

2.3 Employs effective and appropriate verbal, non-verbal, written, and electronic communications.

2.3.1 Provides and maintains legible, accurate, and appropriate records, in keeping with regulatory requirements (e.g., may be written or electronic and uses acronyms or modifiers).

2.3.2 Effectively presents information about client care and physiotherapy services (verbally, written or electronic).

Rating: Beginner, Advanced Beginner, Intermediate, Advanced Intermediate, Entry Level, With Distinction

Midterm Comments: [Text Area]

Final Comments: [Text Area]

Please check if you have significant concerns with the student's performance in this role. [ ] Midterm CI Final

## The Rating Scale and Anchor Descriptors



Click on a coloured anchor to read the descriptor for that level

## The Rating Scale and Anchor Descriptors



Click on a coloured anchor to read the descriptor for that level

### Beginner Performance:

- The student requires close supervision 90-100% of the time managing patients with constant monitoring even with patients with simple conditions.
- The student requires frequent cueing and feedback.
- Performance is inconsistent and clinical reasoning is performed at a very basic level.
- The student is not able to carry a caseload.

A beginner will be working with the preceptor the majority of the time even, with simple patients. The student may perhaps assist with part of the treatment or take on a small independent role.

The preceptor will be providing guidance at all stages of the intervention including assessment, analysis, treatment planning and administration, and documentation.

A good way to think about a beginner level is what you might expect in the first few days of placement in an unfamiliar area.

## The Rating Scale and Anchor Descriptors



Click on a coloured anchor to read the descriptor for that level

### Advanced Beginner Performance:

- The student requires clinical supervision 75% to 90% of the time managing patients with simple conditions and 100% of the time managing patients with complex conditions.
- The student demonstrates consistency in developing proficiency with simple tasks (e.g., chart review, goniometry, muscle testing and simple interventions).
- The student initiates, but is inconsistent with comprehensive assessments, interventions, and clinical reasoning.
- The student will begin to share a caseload with the clinical instructor.

## The Rating Scale and Anchor Descriptors



Click on a coloured anchor to read the descriptor for that level

### Intermediate Performance:

- The student requires clinical supervision less than 50% of the time managing patients with simple conditions and 75% of the time managing patients with complex conditions.
- The student is proficient with simple tasks and is developing the ability to consistently perform comprehensive assessments, interventions, and clinical reasoning.
- The student is capable of maintaining ~ 50% of a full-time physical therapist's caseload.

The intermediate student is able to apply higher clinical reasoning skills to a slightly more complex patient or interpret basic assessment findings for a more complex patient.

While capable of carrying a more independent caseload the student may still need supervision or suggestions for assessment and treatment in patients with complex conditions.

## The Rating Scale and Anchor Descriptors



Click on a coloured anchor to read the descriptor for that level

### Advanced Intermediate Performance:

- The student requires clinical supervision less than 25% of the time managing new patients or patients with complex conditions and is independent managing patients with simple conditions.
- The student is consistent and proficient in simple tasks and requires only occasional cueing for comprehensive assessments, interventions, and clinical reasoning.
- The student is capable of maintaining ~75% of a full-time physical therapist's caseload.

## The Rating Scale and Anchor Descriptors



Click on a coloured anchor to read the descriptor for that level

### Entry Level Performance:

- The student requires infrequent clinical supervision managing patients with simple conditions and minimal guidance/supervision for patients with complex conditions.
- The student consistently performs comprehensive assessments, interventions and clinical reasoning in simple and complex situations.
- The student consults with others and resolves unfamiliar or ambiguous situations.
- The student is capable of maintaining at minimum 75% of a full-time physical therapist's caseload in a cost-effective manner.

The student's assessment, clinical reasoning and treatment skill level should be what you would consider if you were going to hire new graduate.

s/he should be able to carry a caseload of simple and complex patients at 75% of a normal caseload. Like all new physiotherapists this student will benefit from continued mentorship and may need help problem-solving in ambiguous situations that may be specific to your caseload.

## The Rating Scale and Anchor Descriptors



Click on a coloured anchor to read the descriptor for that level

### Performance With Distinction:

- The student is capable of maintaining 100% of a full-time physical therapist's caseload without clinical supervision or guidance, managing patients with simple or complex conditions, and, is able to function in unfamiliar or ambiguous situations.

*In addition, the student demonstrates at least one of the criteria listed below:*

- The student is consistently proficient at comprehensive assessments, interventions and clinical reasoning.
- The student willingly assumes a leadership role for managing patients with more complex conditions or difficult situations.
- The student is capable of supervising others.
- The student is capable of serving as a consultant or resource for others.
- The student actively contributes to the enhancement of the clinical facility or service with an expansive view of physical therapy practice and the profession.

## Grading



Rather than Pass/Fail the student is ranked:

**Credit with exceptional performance** (Pass)

**Credit** (Pass)

**Credit with reservation** (Pass)

**No credit** (Fail)



Grade: Midterm:	Please select	Final:	Please select
Days Absent:		Extra:	Please select Credit with exceptional performance Credit Credit with reservation No credit

## Should my student be awarded credit?



Final: Please select

Extra: Please select  
Credit with exceptional performance  
Credit  
Credit with reservation  
No credit

When deciding whether or not to recommend awarding of credit to a student, it is important to remember that Clinical Educators have an important role in student progression through their program.

Supervisors tend to award credit to students, despite poor performance, due to:

- Lack of documentation
- Lack of knowledge of what to document
- Fear of appeal
- Lack of remediation options
- Lack of confidence in their own judgments
- Discomfort with the process

## When you have concerns



If you are considering **Credit with reservation**, or if you have concerns regarding your student, please contact the AHCE (or designate) as soon as possible!

Grade: Midterm: Please select Final: Please select

Days Absent: [ ] Extra: Please select  
Credit with exceptional performance  
Credit  
Credit with reservation  
No credit

Final Comments:

Please check if you have significant concerns with the student's performance in this role.  Midterm  Final

## Feedback and assistance to a student in difficulty



- Providing feedback throughout the placement is essential, especially if a failing grade is being considered
- Students also need opportunities to demonstrate improved competence in weak skills, and carefully structured learning opportunities to strengthen their areas of challenge
- Students need to know early on if there may be issues with them gaining credit for a placement, and have clear guidelines as to what needs to improve in order to be successful ?

## Key steps when working with a student in difficulty



- Document each incident of concern
- Often it is a pattern of 'smaller' incidents, not one major one
- Look for trends
- APTA Anecdotal Record form may be useful <sup>1</sup>

- Focus on the behaviour, not the person
- Document examples of behaviours

- Compare what you observed against the competencies in the ACP
- Focus on behaviours and skills when evaluating the student

### Remember...

The Associate Head, Clinical Education, is always available to assist if you have concerns about student performance and should be informed about any issues which may lead to student failure

## Conducting the evaluation meeting



- Private location, mutually convenient time which is pre-arranged
- Student evaluates the site and you as a supervisor
  - Usually this happens first
- Ask student for their perception of performance and rankings in the ACP
- Provide your impressions and rationale for ranking assigned
- Discuss discrepancies in ranking
  - Come to agreement if possible (be prepared to change your perspective but don't feel pressured)
  - If you both cannot agree, then "agree to disagree"
- Sign form

*There should be no surprises on the final evaluation!*

## Debrief and reflect



**It is important to debrief and reflect after the placement.**

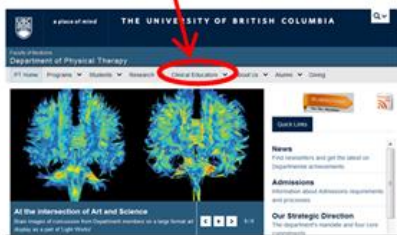
### Think about the following:

- What might have worked better in terms of placement structure, process or learning experiences?
- What might you do differently next time you have a student?
- Does your student have any suggestions as to what might make for a better learning experience in your clinical situation?

# ADDITIONAL RESOURCES

This module is intended as a quick reference. For the most current and information about program specifics please see our [UBC PT Clinical Education Manual](#).

Visit [www.pt.med.ubc.ca](http://www.pt.med.ubc.ca).  
Our website has a Clin Ed tab on the front page!



### Resources we recommend:

[ACP information sheets and online education module link](#)

[E-Tips for Practice Education website](#)

[Preceptor Education Program \(PEP\) website](#)

Facilitating Learning in the Workplace

Excel Module 10: Supporting the student in difficulty

For a multitude of other great resources, please visit our [Clin Ed Placement Resources page](#) on the UBC PT website.

# MODULES IN THE EXCEL SERIES

- Module 1: **Introduction to the UBC Master of Physical Therapy (MPT) Program**
- Module 2: **The Role and Importance of Clinical Education**
- Module 3: **Developing Learning Objectives**
- Module 4: **Planning and Facilitating the Learning Experience**
- Module 5: **Adult Learning Styles**
- Module 6: **Your Student's First Day: Orientation**
- Module 7: **Providing Feedback**
- Module 8: **The Evaluation Process**
- Module 9: **The "Perfect Preceptor"**
- Module 10: **Supporting a Student in Difficulty**
- Module 11: **Providing Challenge for an Exceptional Student**
- Module 12: **Placement and Supervision Models**
- Module 13: **The Hidden Curriculum**
- Module 14: **T-Res Overview: The Students' Clinical Log**



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### Questions?? Suggestions?

If you have any questions about this module or suggestions for future modules [please contact us!](#)

You are welcome to use and share these modules. If you would like to link to them, [please email your request](#), as we would appreciate knowing what purpose they will be used for. This will help us in future module development.

These modules were conceived and produced by **Carolyn Andersson** (Clinical Education Officer), with the assistance of **Sue Murphy** (Associate Head, Clinical Education).

Invaluable professional services and assistance provided by the MedIT team (Faculty of Medicine) at UBC.



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Feedback?

Do you have a few minutes to complete a short (we promise!) survey about this module?

Your feedback is VERY important to us!

[Go to survey](#)

With thanks...

• Judit Spence

[Click to exit module](#)

nr: August 2016