First Full Time Experience

PERFORMANCE EXPECTATIONS

Title	Two Weeks	Four Weeks	Six Weeks	Eight Weeks	Ten Weeks
	Mith amonision	With guidance	Accurately identifies	Daged on identified	Daged on colf
Self- Assessment/ Reflection	With supervision, following patient interaction, provides general description of clinical performance related to safety and communication	With guidance, following patient interaction, provides general description of clinical performance related to safety and communication and with supervision for clinical reasoning skills and psychomotor skills	Accurately identifies at least two things that went well and two things that could have been done differently following a patient interaction With guidance provides description of performance across all domains	Based on identified needs during weekly goal meeting identifies at least two goals and strategies for the upcoming week	Based on self- assessment of needs, generates question for Clinical Instructor
		Content of weekly goal sheet represents a reflective process of the previous week	all domains		
Accountability/ Responsibility	Identifies knowledge deficits and resources with Clinical Instructor's assistance	Consistently, follows up on areas where there are identified knowledge deficits.	Applies general information learned from one situation to a similar situation	Comes into clinic each day with a plan for known/familiar patients	Anticipates when knowledge may not be adequate to manage a simple/familiar patient and seeks help
Patient Rapport	Appropriately introduces self and CI to patient Provides information about role with	. Consistently introduces self and with guidance provides basic explanation of role	Recognizes patient non-verbal communications and modifies communication	. Recognizes when patient verbal/non-verbal responses do not correspond, and seeks CI help to	. Consistently introduces self and provides basic explanation of role to patient

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	supervision	. Identifies barriers	plans	manage	. Recognizes when
	. Uses professional languages with guidance	to communication with assistance . Recognizes patient non-verbal communication with supervision	Demonstrates listening skills by reframing questions with supervision Consistently uses professional language	.Demonstrates listening skills by reframing questions with guidance	communication is not effective and seeks assistance to modify .Recognizes patient non-verbal communication seeks assist to modify approach
Advocacy	Listens and attends to patient's/families' concerns		With supervision, identifies when patient/family concerns may benefit from resources outside physical therapy	.Recognizes the need for outside services (SW, OT, SLP, pain, Case Management)	With guidance recognizes when team/patient/PT goals are not in synch and seeks assistance of CI to develop advocacy plan
Culture		With supervision discusses "culture" in context of impact of disease/injury hospitalization on patient's life roles	With assistance, identifies ways that "culture" impacts engagement/ participation in physical therapy	Recognizes when patient values and own values differ	With guidance modifies physical therapy approach to meet "cultural" needs of F/NC patients
Safety	. With supervision recognizes when information from chart, electronic tools, interview may represent safety	. Identifies new/unfamiliar components of environment and seeks help to learn safety aspects	.Identifies information from variety of electronic sources that may represent safety issues . With guidance	Identifies new/unfamiliar components of environment and with guidance suggests possible	 sets up and manages clinical environment to maintain patient's safety defaults to

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	concerns . With supervision, sets up clinical environment to maintain patient's safety	. With guidance sets up clinical environment to maintain patient's safety in F/NC situations	accurately monitors patient hemo-dynamic/ verbal response during treatment to maintain safety	ways to maintain safety with Clinical Instructor. Recognizes when hemodynamic response is not normal and with guidance modifies intervention in F/NC patients	stopping intervention if unsure of next step With guidance in F/RC patient monitors physiological changes in patients and adjusts care
Clinical Knowledge/ Decision Making Use of Medical Record/ Electronic Data	Applies basic academic knowledge to clinical situations With guidance locates information within EMR and navigates within flow sheets. Describes components of the MDS	Places data in appropriate location within flow sheets Follows up on unfamiliar information from medical record and with supervision determines how it might impact care provided	.Follows up on unfamiliar information from medical record and with guidance determines how it might impact care provided . With guidance, uses data from chart to plan subjective examination and implications for MDS	Accurately records data in flow sheets . Follows up on unfamiliar information from medical record and with guidance determines how it might impact care provided	Uses information from multiple sources to make decisions
Subjective Interview	.With supervision/ guidance plans/executes subjective examination	.With guidance, interviews patient and gets sufficient data to plan for basic	.With Clinical Instructor guidance, modifies questions to get full set of data	.Recognizes when questioning is not effective in getting data and seeks help	.In situations where questioning is not effective, attempts to understand barriers to

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	with Clinical Instructor assistance required to obtain complete data set	examination, including information around pain, function and life roles	and develop an examination plan	to modify	communication and with CI supervision modifies approach
Objective Examination	. Familiar with basic tests and measures needed to complete screen/MDS. With supervision, accurately completes components of basic examination	Completes screen/MDS with guidance for F/NC patients With Supervision completes definitive testing	With I guidance, completes more definitive testing Performs all components of the MDS and recognizes the need to modify testing	Is able to sequence tests and measures in a logical manner Performs MDS with occasional guidance. Performs some identified definitive tests with guidance.	Collects enough, reliable data to begin to understand functional problem
Evaluation	Describes patient's functional problem and develops impairment list from data collected with supervision	With guidance describes relationship between data collected and functional problem Describes patient's life roles with supervision	With guidance, describes factors that are limiting patient's functional problem With guidance outlines relationship between functional problems and life roles	With supervision prioritizes impairment in relationship to functional problems Identifies patient strengths and barriers related to improving functional status	Prioritizes impairment in relationship to functional problems with guidance With supervision develops patient prognosis
POC	Based on data collected and outlined impairment, develops	Establishes realistic ST goals with guidance With guidance,	Outlines frequency, intensity, and duration of physical therapy with	Develops realistic ST goals for familiar patients With supervision	. , develops realistic ST With guidance, develops LT goals,

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	basic plan for treatment session with guidance	outlines appropriate frequency, intensity, and duration for familiar patients . Based on data collected and outlined impairment, develops basic plan for treatment session with guidance	guidance . With supervision, outlines treatment progression . Based on data collected and outlined impairments, develops basic plan for single treatment session that is safe and baseline effective	develops LT goals/prognosis With Clinical Instructor, goes to literature to help establish prognosis With guidance, Based on re-examination, reviews intervention plan and with guidance, plans for treatment modifications	Initiates review of literature to help establish prognosis, Clinical Instructor assistance to apply to patient Recognizes changes in physicologic/emotio nal status and with supervision modification of intervention plan to patient
Procedural Intervention	Demonstrates knowledge of safety when performing treatment interventions	Safety performs familiar treatment interventions	With guidance recognizes when intervention is not effective and seeks assistance to modify	For F/NC patients, prior to treatment, develops alternative intervention plan in event it does not work	Recognizes intervention plan is not effective and and with supervision assesses why. With supervision, modifies treatment pan with t during session.
Educational Interventions	.With supervision, assesses the needs of the learner to	.With guidance assesses the needs of the learner.	.With supervision is able to present a summary of initial		With guidance is able to present a summary of initial

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	develop a successful educational plan	.With supervision, identifies barriers to communication	findings to the patient and general plans for D/C.		findings to the patient and general plans for D/C.
Palpation/ Handling Skills	. Seeks patient's permission before touching and applies knowledge of basic landmarks and soft tissue conditions during palpation . Protects self and patient during transitional movement	With guidance demonstrates safe handling of patient during transitional movements, ambulation and stairs . Accurately describes bony landmarks while performing manual skills	. With supervision, uses tactile, visual and verbal cueing to guide basic movement	.Demonstrates safe handling of patient during transitional movements, ambulation and stairs . With guidance, uses tactile, visual and verbal cueing to guide basic movement	. Recognizes when handling skills are not effective to achieve desired outcome, with guidance modifies approach to achieved desired result .
Range of S kills	Performs bed mobility, transfers, gait training, vital signs, A&P ROM, general stretching with supervision	. Performs bed mobility, transfers, gait training, vital signs, A&P ROM general stretching with guidance.		For familiar patients, performs basic intervention, recognizes when intervention is not effective and seeks supervision to modify.	With supervision, developing more specific hands-on skills for definitive testing and treatment

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Teamwork/ Collaboration, Interdisciplinary	Understands, floor organization/ hierarchy, team member roles With supervision, develops collegial relationships	Consistently interacts with nurse, case manager, and other disciplines with guidance for F/NC patients	Identifies need to involve team and with supervision completes interaction	Initiates discusses with Clinical Instructor about needs for team interaction and with guidance carries out	For familiar situations, carries out team's interactions and seeks assistance in situations of potential conflict
Productivity	(Treat) these patients)				
Inpatient	2-3	3	3-4	3-4	4