

**MASSACHUSETTS GENERAL HOSPITAL – PHYSICAL THERAPY SERVICES
CLINICAL EDUCATION PROGRAM**

INTERNSHIP PERFORMANCE EXPECTATIONS

Title	Two Weeks	Four Weeks	Six Weeks	Eight Weeks	Twelve Weeks	Fourteen Weeks
Self-Assessment/ Reflection	With supervision, following patient interaction, provides general description of performance related to safety, communication and clinical decisions	Beginning to break down “constructs” (i.e., examination/ intervention) with Clinical Instructor guidance	Following patient interaction, describes performance in areas that address weekly goals with occasional guidance	Based on self-assessment of needs, generates more specific questions for Clinical Instructor	Beginning to identify some clusters of signs/symptoms in patterns	Beginning to reflect across patients and describe similarities and differences in approach Recognizes the developmental nature of patient and actively seeks out information and feedback using a variety of methods
Accountability/ Responsibility	Identifies knowledge deficits and resources with Clinical Instructor’s assistance	Applies general information learned from one situation to a similar situation	<ul style="list-style-type: none"> . Routinely identifies and follows up on areas where there are knowledge deficits. . With Clinical Instructor’s assistance, plans for patients when absent 	<ul style="list-style-type: none"> . Uses a variety of resources to fill knowledge gaps . Plans daily schedules with general sense of entire team/service needs with Clinical Instructor’s assistance 	Routinely plans for patients during absences with occasional assistance Consistently reviews schedule in advance to maximize productivity	<ul style="list-style-type: none"> . Routinely plans for patients during absences. . Considers needs of team when planning daily schedule Independent schedule management
Patient Rapport	<ul style="list-style-type: none"> . Appropriately introduces self to patient . Provides 	<ul style="list-style-type: none"> . Consistently introduces self and provides basic explanation of role 	<ul style="list-style-type: none"> . Keeps patient informed of physical therapy plan across 		<ul style="list-style-type: none"> . Informs patient about treatment plans across treatment 	<ul style="list-style-type: none"> . Articulates overall physical therapist role in relationship to

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	<p>information about role with guidance</p> <ul style="list-style-type: none"> . Uses professional languages . Recognizes patient non-verbal communication with assistance 	<ul style="list-style-type: none"> . Recognizes patient non-verbal communication and seeks assistance to modify approach . Identifies barriers to communication with assistance . Demonstrates listening skills by reframing questions with assistance 	<p>treatment with guidance</p> <ul style="list-style-type: none"> . Recognizes patient non-verbal communications and modified communication plans with occasional guidance . Recognizes when patient verbal/non-verbal responses do not correspond, attempts to clarify 		<ul style="list-style-type: none"> . Recognizes when communication is not effective and attempts to modify. Seeks guidance if needed. 	<ul style="list-style-type: none"> . care provided . Accurately identifies when communication is not effective and outlines potential barriers and modifications
Advocacy	Listens and attends to patient's/families' concerns	With assistance, identifies when patient/family concerns may benefit from resources outside physical therapy	With assistance, describes variety of resources available to meet patient's needs	With guidance, recognizes when team/patient/PT goals are not in synch and with seeks assistance of CI to develop advocacy plan	With guidance, advocates for specific patient's needs with team members	Develops and presents plan and rationale for patient's needs to team members
Culture		With assistance, 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	With assistance, modifies physical therapy approach to meet "cultural" needs		<p>Recognizes when approach needs to be modified to meet culture needs and seeks assistance to modify</p> <p>Recognizes when patient values and</p>

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						own values are different
Safety	<ul style="list-style-type: none"> . With assistance, recognizes when information from chart, electronic tools, interview may represent safety concerns . With guidance/supervision, sets up clinical environment to maintain patient's safety 	<ul style="list-style-type: none"> . Brings safety questions forward to Clinical Instructor and, with assistance, modifies approach . Identifies new/unfamiliar components of environment and seeks help to learn safety aspects 	<ul style="list-style-type: none"> . Accurately monitors patient hemi-dynamic/ verbal response during treatment to maintain safety . Identifies new/unfamiliar components of environment and suggests possible ways to maintain safety with Clinical Instructor 	<ul style="list-style-type: none"> . Recognizes change in status that would impact safety – consistently stops treatment . Consistently maintains basic levels of safety with all patient's interactions 	Recognizes changes in status that could impact safety and modifies treatment with guidance	<ul style="list-style-type: none"> . Recognizes changes in status that could impact safety and modifies treatment . Anticipates potential safety issues and clinical precautions seeks out assistance in advance for new situations
Clinical Knowledge/ Decision Making Use of Medical Record/ Electronic Data	Locates information in medical records, CAS, LMR, results and places on form	<ul style="list-style-type: none"> . Places data in appropriate location on form . With guidance, uses data from chart to plan subjective examination and implications for basic examination/MDS 	With guidance, identifies implications of data collected for objective examination outside basic MDS	Beginning skills in "selectively" reviewing aspects of chart/electronic data to determine if patient is appropriate for PT	Effectively uses chart/electronic information to plan exam, seeks guidance as needed	<ul style="list-style-type: none"> . Demonstrates increased selectivity in reviewing chart/electronic data . Seeks resources to identify implications of data in unfamiliar or new situations Notes MD classification of patient

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						problems, but relies on own data to come up with clinical evaluation
Subjective Interview	With assistance, plans/executes subjective examination with Clinical Instructor assistance required to obtain complete data set	With guidance, interviews patient and gets sufficient data to plan for basic examination, including information around pain, function and life roles	With Clinical Instructor guidance, modifies questions to get full set of data and develop an examination plan	Recognizes when questioning is not effective in getting data and seeks help	In situations where questioning is not effective, attempts to understand barriers and modify approach	<ul style="list-style-type: none"> . Questioning is effective to obtain essential data to plan examination . Uses effective listening to modify questions to get more specific level of data >50% time
Objective Examination	<ul style="list-style-type: none"> . Familiar with basic tests and measures needed to complete screen/MDS. With guidance, accurately completes components of basic examination	<ul style="list-style-type: none"> . Completes screen/MDS . With guidance, completes more definitive testing for familiar situations. 	<ul style="list-style-type: none"> . With occasional guidance, completes more definitive testing for familiar situations . Consistently screens above and below area of injury 	Collects enough, reliable data to begin to understand function problem	Data collected during examination is beginning to guide modifications of examination plan "in the moment"	Data collected is now thorough and reliable to allow for development of assessment for familiar patients With familiar patients begins to prioritize testing to allow for more complete initial evaluation and pt explanation at end of first session
Evaluation	Describes patient,	. Describes	. With guidance,	With assistance,	With guidance,	Prioritizes

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	develops functional problem and develops impairment list from data collected with guidance	relationships between data collected and functional problem for familiar patients <ul style="list-style-type: none"> . Describes patient's life roles 	describes factors that are <u>most</u> limiting patient's functional problem <ul style="list-style-type: none"> . Outlines relationship between functional problems and life roles 	prioritizes impairment in relationship to functional problems With supervision, develops patient prognosis	prioritizes impairment in relationship to functional problems With guidance develops patient prognosis	impairments in relationship to functional problem
POC	Based on data collected and outlined impairment, develops basic plan for treatment session	<ul style="list-style-type: none"> . With assistance, establish realistic ST goals . With supervisor, outline frequency, intensity, and duration of physical therapy . With supervisor, outlines appropriate frequency, intensity, and duration for familiar patients . Based on data collected and outlined impairment, develops basic plan for treatment session 	<ul style="list-style-type: none"> . With guidance, develops realistic ST goals . With guidance, outlines frequency, intensity, and duration of physical therapy . With guidance, outlines appropriate frequency, intensity, and duration for familiar patients . With guidance, outlines treatment progression . With guidance, presents findings and intervention plan to patient 	<ul style="list-style-type: none"> . Develops realistic ST goals for familiar patients . With assistance, to develop LT goals/prognosis . With Clinical Instructor, goes to literature to help establish prognosis . Outlines appropriate frequency and intensity of intervention for familiar patients . Based on re-examination, reviews intervention plan and, with guidance, plans 	<ul style="list-style-type: none"> . Develops realistic ST goals for familiar patients . With guidance, develops LT goals, assist for prognosis . Initiates review of literature to help establish prognosis, Clinical Instructor assistance to apply to patient . With assistance, describes "stages" of rehab based on acuity of patient and understanding 	<ul style="list-style-type: none"> . Develops realistic ST goals for familiar patients . Develops LT goals guidance for prognosis . Initiates review of literature to help establish prognosis, Clinical Instructor assistance to apply to patient . With assistance, describes "stages" of rehab based on acuity of patient and understanding of healing

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				for treatment modifications	of healing · With guidance, outlines changes in status and modification of intervention plan to patient	<ul style="list-style-type: none"> · Consistently collects impairment level and functional data to assess if patient is progressing as anticipated Identifies when POC is not adequate to meet goals and seeks help to modify Initiates re-examination in a timely manner and seeks assistance as needed to modify plan and presents revised plan to patient
Procedural Intervention	Demonstrates knowledge of safety when performing	Safety performs familiar treatment interventions	Recognizes when intervention is not effective and seeks assistance to modify	Prior to treatment, develops alternative intervention plan in event it does not	Recognizes intervention plan is not effective and begins to modify	Consistently seeks help when modifications of intervention

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	treatment interventions			work	during session	attempted during treatment are not effective
Palpation/ Handling Skills	<ul style="list-style-type: none"> . 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 	<ul style="list-style-type: none"> . Beginning to describe different soft tissue conditions . Accurately describes bony landmarks while performing familiar manual skills 	<ul style="list-style-type: none"> . With guidance, varies palpation intensity to meet situation needs . With guidance, uses tactile, visual and verbal cueing to guide basic movement 	<ul style="list-style-type: none"> . With guidance, uses acceptable terminology to describe outcomes of soft tissue palpation 	<ul style="list-style-type: none"> . Recognizes when palpation skills are not achieving desired response and seeks help 	<ul style="list-style-type: none"> . Considers a variety o factors prior to beginning palpation and seeks assistance in unfamiliar situations to plan initial approach
Range of Skills	For familiar patient, performs bed mobility, transfers, gait training, vital signs, A&P ROM, general stretching with guidance	<ul style="list-style-type: none"> . For familiar patient, performs bed mobility, transfers, gait training, vital signs, A&P ROM general stretching Seeks guidance as needed 	Performs basic intervention for familiar patients with assistance for definitive/specific testing/manual skills		With guidance, developing more specific hands-on skills to maximize effectiveness	<ul style="list-style-type: none"> . Develops alternative strategies to use to “modify hands” in the moment Recognizes when hands-on skill limits effectiveness and seeks assistance
Teamwork/ Collaboration, Interdisciplinary	<ul style="list-style-type: none"> . Describes floor organization/ hierarchy, team member roles . With assistance, 	Consistently interacts with nurse, case manager, and other disciplines with guidance	Identifies need to involve team and with guidance, presents patient’s needs to team members	Initiates discusses with Clinical Instructor about needs for team interaction and	For familiar situations, carries out team’s interactions and seeks assistance in	Recognizes conflict and manages own reactions to minimize escalation. Seeks

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	develops collegial relationships			carries out	situations of potential conflict	assistance to resolve
Productivity	(Treat) these patients)					
Inpatient	3	3-4	4	4-5	5	5-6
Outpatient	5	6-7	7	7-8	8-9	9