**Title and Focus of Activity:** Group Practical Examination *Patient/Client Management; Evaluative Grading Rubric*

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**Course Information:** Clinical Management of Patients with Neurological Dysfunction II; 2.5 credits; Second trimester of the second year of the curriculum. This course is the third of three clinical neurologic courses that are taught in tandem with 3 Neuroscience classes.

**Learning Activity Description:** The group practical examination provides an opportunity for students to interact with community volunteers who have a movement dysfunction secondary to a central nervous system lesion, who range in age from toddlers to older-adults. This examination involves 10 class sessions that takes place over the course of a 13 week trimester. In small groups (5 students), students have the opportunity to:

* + demonstrate safe and effective performance of neurological examination
	+ select, discuss, and administer relevant outcome measures
	+ develop a treatment plan and support it with best evidence
	+ administer the interventions and provide a home program
	+ interact with the community volunteer
	+ document the sessions
	+ engage in self-reflection
	+ provide feedback to peers

The group practical examination allows faculty to observe the way in which students conduct themselves over a period of time. This affords multiple opportunities to provide students individual feedback on their examination and intervention skill, clinical reasoning, and communication and other professional behaviors.

|  |
| --- |
| Session 1: Initial Examination (with community volunteer)* Each group of students has 1½ hours to interview, observe, and examine a community volunteer with movement problem(s) associated with central nervous system dysfunction. Part of the time in the group is spent with the faculty facilitating a discussion about the movement problem(s), exam findings and hypotheses regarding the factors underlying the movement problem(s).
* Students are expected to independently document the session using a SOAP format.
 |
| Session 2: Outcome Measures Discussion* Student group is required to identify and briefly discuss one outcome measure that addresses each domain of the ICF: Body Function and Structures, Activity, and Participation that is relevant (linked to patient’s goals and PT assessment) for the community volunteer and is feasible to administer in this context.
* Student group submits a document that:
	+ identifies one relevant and feasible outcome measures for each domain of ICF (Body Function and Structure, Activity, and Participation)
	+ addresses how environmental and personal factors might impact patient outcomes
	+ provides brief description of outcome measure, procedure, time to administer, and equipment needed
	+ documents the reliability, validity, and responsiveness to change of the selected outcome measures
 |
| Session 3: Outcome Measures Administration (with community volunteer)* Students administer selected outcome measures
* Students document results of outcome measures
* Students discuss implications of results of outcome measures with students in their group and the supervising faculty
 |
| Session 4: Intervention Plan and Evidence Discussion * Student group is required to design a treatment session for their patient that addresses the goals and the factors underlying their movement problems. The plan must incorporate a home program. They are required to describe in writing and discuss with students in their group and the supervising faculty how the intervention plan integrates the following: 1) the best evidence from well-designed studies; 2) their clinical expertise to date; and 3) the patient’s and/or family’s preferences and values.
* Expectations for the group written treatment plan and supporting evidence:
	+ Written plan begins with short and long term goals for the plan of care.
	+ Written plan addresses the primary problems underlying the patient’s movement problems and the patient’s and/or family’s goals.
	+ Written plan is feasible.
	+ Written plan includes a plan for the initial session AND a home program written in a format suitable for the patient and/or family.
	+ Written plan includes the most recent available evidence for all main interventions.
	+ Intervention choices should come from (in this order as available) clinical practice guidelines, meta-analyses or review articles, RCTs, non-randomized studies, case reports.
	+ Students must provide PDF’s of the articles used
	+ Evidence used in written plan must be closely tied to the volunteer’s diagnosis, problems and personal factors.
	+ Written plan addresses how clinical experience influenced treatment choices.
	+ Written plan addresses how patient’s/family’s preferences and values influenced your treatment choices.
	+ Include in your written plan one paragraph to describe how patient’s/family’s preferences and values influenced your intervention choices.
 |
| Session 5: First Intervention (with community volunteer)* The group has a 1 ½ hour intervention session with their community volunteer. Each student will be expected to carry out the treatment plan and respond appropriately depending on the patient’s response.

*Students submit Peer Feedback Forms following this session* |
| Session 6: Reflection on First Intervention Session* Prior to the group discussion, students are expected to submit individual written responses to these questions:
1. What went well in the first intervention session? Provide specific observations that demonstrated to you that the session served to challenge the patient appropriately, address the goals, engage the patient, etc. This includes how well you anticipate the patient adhering to the home program.
2. How did you personally contribute to the success of the session? Be specific.
3. What did not go well in the first intervention session? Could this have been anticipated? What you would do differently if you were to repeat the session? Be specific.
* In the discussion students are expected to share their reflections and respond to faculty questions.
 |
| Session 7: Planning for Second Intervention* Group meets with faculty to discuss a plan for the subsequent intervention session based on their analysis of the first intervention session.
 |
| Session 8: Second Intervention (with community volunteer)* The group has a 1 ½ hour intervention session with their community volunteer. Each student will be expected to carry out the treatment plan and respond appropriately depending on the patient’s response.
 |
| Session 9: Planning for Third Intervention* Group meets with faculty to discuss a plan for the subsequent intervention session based on their analysis of the first intervention session.
 |
| Session 10: Third Intervention (with volunteer)* The group has a 1 ½ hour intervention session with their community volunteer. This may include repeating some of the outcome measures. Each student will be expected to carry out the treatment plan and respond appropriately depending on the patient’s response.

*Students submit Peer Feedback Forms following this session* |

Time for student to complete the activity: 1. preparation for activity outside of/before class: Students need to prepare prior to each of the 10 sessions that comprise this examination. For two sessions this includes preparing a group written document. Students also must submit a self-reflection and peer evaluations. 2. class time completion of the activity: Five sessions are spent with the students interacting in small groups with a community volunteer (7.5 hours) and 5 sessions are spent in small group discussion (4.5 hours).

Readings/other preparatory materials: Students are accountable for all previous and concurrent knowledge from the Clinical Management of Patients with Neurological Dysfunction and Neuroscience courses. In addition, students are expected to utilize the literature to select appropriate outcome measures and plan the intervention.

Learning Objectives:

**Behavioral**

* 1. Adhere to legal and ethical practice standards, including all federal, state and institutional regulations related to patient/client care and fiscal management.
	2. Change behavior in response to understanding the consequences (positive and negative) of his or her communication and actions.
	3. Promote active involvement of the patient/client in his or her care.
	4. Demonstrate professional behavior in all interactions with patients/clients, family members, caregivers, other health providers, students, other consumers, and payers.
	5. Participate in self-assessment to improve the effectiveness of care.
	6. Effectively educate others using culturally appropriate teaching methods that are commensurate with the needs of the learner

**Evidence**

1. Consistently integrate the best evidence for practice from sources of information with clinical judgment and patient/client and family values to determine the best care for the patient/client.

**Course Content**

1. Describe patient’s movement dysfunction, associated activity and participation limitations and relevant personal and environmental contextual factors by gathering information from medical chart, patient or significant other interview or observation.
2. Hypothesize potential components of movement (body structure and function) that are interfering with movement.
3. Using the Motor Control Framework (Hedman, Rogers, and Hanke, 1996), identify the stages of movement most affected across the movement continuum.
4. Hypothesize the neural, mechanical, physiologic and behavioral factors underlying component(s) of movement (and their interaction) in order to develop initial hypotheses about the cause of the movement dysfunction.
5. Perform a screening examination of all systems and continually assess and determine whether it is advisable to proceed with examination or intervention or identify the need to refer to or consult with another health care practitioner
6. Recognize and respond to emergency medical conditions prevalent in this patient population
7. Design and implement a comprehensive physical therapy examination safely, effectively and efficiently.
	1. Discuss reliability and validity of selected tests and measures
	2. Modify the examination plan a) if indicated by information gathered during the examination b) based on time constraints c) based on patient response.
	3. Accurately summarize examination findings verbally.
	4. Accurately document examination findings in writing.
8. Based on a synthesis of examination findings, develop and document in writing an evaluation or working hypothesis(es) regarding the patient’s movement that
	1. Establishes a movement diagnosis
	2. identifies the location and extent of lesion in the central nervous system
	3. describes the underlying reasons for the movement problem as it relates to central nervous system dysfunction
9. Select, administer and analyze the results of outcome measures to assess individual outcomes of patients/clients using valid and reliable measures
10. Establish a prognosis based on evidence based practice principles and prioritize and document realistic outcomes and short-term goals based on prognosis and personal and environmental contextual factors.
11. Design a physical therapy plan of care including a home program based on evidence based principles that is congruent with medical, surgical and pharmacologic management and patient and family goals and that could prevent recurrence of problems or could have prevented the problems from occurring in the first place.
12. Perform intervention(s) safely, effectively and efficiently.
13. Document Interventions
14. Evaluate the outcome of specific interventions and the plan of care
15. Modify the intervention, and possibly the working hypothesis based on the patient's response to the intervention.

Methods of evaluation of student learning: We use the following rubrics to evaluate students for each session and written document. The peer feedback forms are also included.

**Session 1: Initial Examination - Individual Performance Evaluation**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Examination & Evaluation:* |
| ***3*** | *Examination/documentation/communication - appropriate and complete*  |
| ***2*** | *Examination/documentation/communication – mostly appropriate and complete* |
| ***1*** | *Examination/documentation/communication – mostly inaccurate and/or incomplete* |
| ***0*** | *Examination/documentation/communication – ineffective*  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. | The student contributed to the discussion/process by: correctly answering question(s) directed to themvoluntarily offering meaningful comment(s) or question(s)  | 00 | 11 | 22 | 33 |
|  |  |  |  |  |  |
| 2. | The student demonstrated appropriate clinical skills including:appropriate communication /interaction with the patient(includes motivation, instruction, feedback and active listening)correct administration of examination techniquesaccurate oral summary of examination findings  | 000 | 1 3 1 | 2 62 | 3 93 |
|  |  |  |  |  |  |
| 3. | The student demonstrated appropriate written documentation including:accurate, concise, legible and timely recording of examination findings or intervention appropriate interpretation of findings (assessment) *(to be written and graded after the outcome measures session)*goal setting *(to be written and graded after the outcome measures session)* | 000 | 111 | 222 | 333 |
|  |  |  |  |  |  |
|   | The student demonstrated professional behavior and attire. |   |   |   |   |
|  |  (deduction if expectations not met) |  |  |  |  |
|  |  |  |  |  |  |
|  | Safety Score\*: if 0 or 1, explain:**Session 1 Total Performance Score** **(safety score adjustment included):**  | 0 | 1 | 2 | **/30** |

*Safety scoring applies to all sessions with community volunteers.*

# *\*Safety issues regarding patient, care-giver and therapist will be scored in the following manner:*

*Full credit (2 points) - Minimizes all safety risks*

*Partial credit (1 point) - Potential risk exists*

*No credit (0 points) - unsafe OR high probability of harm occurring*

*First practical exam of the course:*

*If safety score = 0 points – 21% deducted from total exam score*

 *= 1 point – 10.5% deducted from total exam score*

 *= 2 points - no deduction from total exam score*

*Subsequent practical exams of the course:*

*If safety score = 0 points - 31% deducted from total exam score*

 *= 1 point – 15.5% deducted from total exam score*

 *= 2 points - no deduction from total exam score*

**Session 2: Outcome Measures Discussion – Performance Evaluation**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Outcome Measures:* |
| ***2*** | *Completely meets or exceeds expectations* |
| ***1*** | *Incompletely meets expectations* |
| ***0*** | *Does not meet expectations* |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Written Document - Selection of & Support for Outcome Measures – Group Grade** |  |  |  |
| 1. | Written Plan identifies relevant and feasible outcome measures (OM) at each level of ICF (Body Function and Structure, Activity, and Participation). | 0 | 1 | 2 |
| 2. | Written plan addresses how the patient’s environmental and personal factors might impact outcomes. | 0 | 1 | 2 |
| 3. | Written plan provides a brief description of OM’s procedure, time to administer, and equipment needed, including a score sheet for each OM. | 0 | 1 | 2 |
| 4. | Written plan documents the reliability, validity, and responsiveness to change of the selected outcome measures.   | 0 | 1 | 2 |
|  |  |  |  |  |
| **No Deduction*** Content adequately referenced AND
* Appropriate references

 AND* References in AMA format AND
* Minimal typos &/or grammatical errors

  | **1 Point Deduction*** inconsistencies in adequacy OR appropriateness OR formatting of references

OR* Distracting amount of typos &/or grammatical errors

1 point will be deducted for any one of the criteria  | **2 Points Deduction*** Content insufficiently referenced

OR* Inappropriate references

OR* References not in AMA format

2 points will be deducted for any one of the criteria  |

 **Group Written Plan Score: /8**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Outcome Measures:* |
| ***2*** | *Completely meets or exceeds expectations* |
| ***1*** | *Incompletely meets expectations* |
| ***0*** | *Does not meet expectations* |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Participation in Outcome Measures Discussion – Individual Grade** |  |  |  |
| 1. | Demonstrates understanding of the ICF.  | 0 | 1 | 2 |
| 2. | Demonstrates understanding of pros and cons of the outcome measure(s) in relation to other outcome measures. | 0 | 1 | 2 |
| 3. | Demonstrates understanding of the relevance of the outcome measure(s) to patient. | 0 | 1 | 2 |
| 4. | Presents clearly and concisely. | 0 | 1 | 2 |
| 5. | Correctly answers question(s) directed to them.  | 0 | 1 | 2 |
| 6. | Volunteers meaningful comment(s) or question(s) during discussion. | 0 | 1 | 2 |

*It is expected that the group will organize the discussion so each student has a comparable role.*

 **Individual Participation Score: /12**

**Session 2: Total Outcome Measures Planning Score: /20**

**Session 3: Outcome Measures Administration – Performance Evaluation**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Outcome Measures:* |
| ***2*** | *Completely meets or exceeds expectations* |
| ***1*** | *Incompletely meets expectations* |
| ***0*** | *Does not meet expectations* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Administration of Outcome Measures - Individual Performance** |  |  |  |  |
|  |  |  |  |  |  |
| 1. | Appropriate communication /interaction with the patient(includes motivation, instruction, feedback and active listening) |  | 0 | 1 | 2 |
| 2. | Correct administration of outcome measure(s). |  | 0 | 1 | 2 |
| 3. |  Accurate, concise, legible and timely recording of results. |  | 0 | 1 | 2 |
| 4. | Active participation in discussion of interpretation of results.The student demonstrated professional behavior and attire.(deduction if expectations not met) |  | 0 | 1 | 2 |
| Safety Score\*: if 0 or 1, explain: |  | 0 | 1 | 2 |

**Session 3: Total Performance Score**

**(with safety score adjustment): /8**

*It is expected that the group will organize the testing so each student has a comparable role.*

**Session 4: Intervention Plan and Evidence Discussion – Performance Evaluation**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Evidence to Support Interventions:* |
| ***2*** |  *Completely meets or exceeds expectations* |
| ***1*** |  *Incompletely meets expectations* |
| ***0*** |  *Does not meet expectations* |

**Written Treatment Plan and Evidence Supporting Interventions – Group Grade**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. | Written plan begins with short and long term goals for the plan of care. | 0 | 1 | 2 |
| 2. | Written plan addresses the primary problems underlying the patient’s movement problems.  | 0 | 1 | 2 |
| 3. | Written plan is feasible. | 0 | 1 | 2 |
| 4. | Written plan includes a plan for the initial session AND a home program written in a format suitable for the patient.  | 0 | 2 | 4 |
| 5. | Written plan addresses the best available evidence for all the main interventions.  | 0 | 1 | 2 |
| 6. | Evidence used in written plan is closely tied to your volunteer’s diagnosis, environmental and personal factors. | 0 | 1 | 2 |
| 7. | Written plan addresses how clinical experience influenced your treatment choices. | 0 | 1 | 2 |
| 8.  | Written plan addresses how patient’s/family’s preferences and values influenced your treatment choices. | 0 | 1 | 2 |
| 9. | Written plan is clearly written. | 0 | 1 | 2 |
|  |  |   |   |   |
| **No Deduction*** Content adequately referenced AND
* Appropriate references

 AND* References in AMA format AND
* Minimal typos &/or grammatical errors

  | **1 Point Deduction*** inconsistencies in adequacy OR appropriateness OR formatting of references

OR* Distracting amount of typos &/or grammatical errors

1 point will be deducted for any one of the criteria  | **2 Points Deduction*** Content insufficiently referenced

OR* Inappropriate references

OR* References not in AMA format

2 points will be deducted for any one of the criteria  |

 **Group Written Plan** **Score: /16**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Participation in Discussion:* |
| ***2*** |  *Completely meets or exceeds expectations* |
| ***1*** |  *Incompletely meets expectations* |
| ***0*** |  *Does not meet expectations* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Participation in Discussion of Plan of Care and Evidence to Support Interventions – Individual Grade** |  |  |  |  |
| 1. | Demonstrates understanding of the plan of care and its relationship to the patient’s movement problems, goals, preferences and values. |  | 0 | 1 | 2 |
| 2. | Demonstrates understanding of the evidence, the strength of the evidence to support the intervention(s), and its relevant to your patient.  |  | 0 | 1 | 2 |
| 3. | Presents clearly and concisely. |  | 0 | 1 | 2 |
| 4. | Correctly answers question(s) directed to them  |  | 0 | 1 | 2 |
| 5. | Volunteers meaningful comment(s) or question(s) during discussion |  | 0 | 1 | 2 |

 **Individual Participation Score: \_\_\_\_\_\_\_\_\_/10**

**Session 4 Total Score: \_\_\_\_\_\_\_\_\_/26**

**Session 5: First Intervention - Individual Performance Evaluation**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Examination & Evaluation:* |
| ***3*** | *Intervention/documentation/communication - appropriate and complete*  |
| ***2*** | *Intervention/documentation/communication – mostly appropriate and complete* |
| ***1*** | *Intervention/documentation/communication – mostly inaccurate and/or incomplete* |
| ***0*** | *Intervention/documentation/communication – ineffective*  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. | The student contributed to the discussion/process by: correctly answering question(s) directed to them voluntarily offering meaningful comment(s) or question(s)  |  0 0 |  1 1 |  2 2 |  3 3 |
|  |  |  |  |  |  |
| 2. | The student demonstrated appropriate clinical skills including:appropriate communication /interaction with the patient(includes motivation, instruction, feedback and active listening)correct administration of treatment including home program - includes sequencing and modification based on patient/caregiver responseaccurate oral summary of examination findings/treatment results  |  0 0  0 |  1  3  1 |  2  6  2 |  3  9  3 |
|  |  |  |  |  |  |
| 3. | The student demonstrated appropriate written documentation including:accurate, concise, legible and timely recording of intervention appropriate interpretation of findings (assessment)goals and plan of care modification as needed  | 0 00 | 1 11 | 222 |  3 3 3 |
|  |  |  |  |  |  |
|   | The student demonstrated professional behavior and attire.(deduction if expectations not met) |   |  |  |   |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | Safety Score\*: if 0 or 1, explain: | 0 | 1 | 2 |  |

 **Session 5: Total Performance Score (with safety score adjustment): /30**

**Session 6: Reflection on First Intervention Session – Individual Performance Evaluation**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Individual Reflection and Participation in Discussion:* |
| ***2*** |  *Completely meets or exceeds expectations* |
| ***1*** |  *Incompletely meets expectations* |
| ***0*** |  *Does not meet expectations* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Individual Reflection and Participation in Discussion** |  |  |  |  |
| 1. |  Written reflection is complete accurate, addresses positives, negatives, and challenges of session andrealistic plans for modification |  | 0 | 1 | 2 |
| 2. |  Contributes meaningfully to discussion |  | 0 | 1 | 2 |

 **Session 6 Total Score: /4**

**Session 7: Planning for Second Intervention Discussion Performance Evaluation**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Individual Reflection and Participation in Discussion:* |
| ***2*** |  *Completely meets or exceeds expectations* |
| ***1*** |  *Incompletely meets expectations* |
| ***0*** |  *Does not meet expectations* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Individual Participation in** **Planning for Second Intervention Discussion**  |  |  |  |  |
| 1. | Demonstrates accurate description and assessment of intervention session |  | 0 | 1 | 2 |
| 2. | Contributes to plan for follow-up session  |  | 0 | 1 | 2 |
| 3. | Presents clearly and concisely. |  | 0 | 1 | 2 |
| 4. | Correctly answers question(s) directed to them  |  | 0 | 1 | 2 |
| 5. | Volunteers meaningful comment(s) or question(s) during discussion |  | 0 | 1 | 2 |

 **Session 7 Total Planning Score: /10**

 **Session 8: Second Intervention - Individual Performance Evaluation**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Examination & Evaluation:* |
| ***3*** | *Intervention/documentation/communication - appropriate and complete*  |
| ***2*** | *Intervention/documentation/communication – mostly appropriate and complete* |
| ***1*** | *Intervention/documentation/communication – mostly inaccurate and/or incomplete* |
| ***0*** | *Intervention/documentation/communication – ineffective*  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. | The student contributed to the discussion/process by: correctly answering question(s) directed to them voluntarily offering meaningful comment(s) or question(s)  |  0 0 |  1 1 |  2 2 |  3 3 |
|  |  |  |  |  |  |
| 2. | The student demonstrated appropriate clinical skills including:appropriate communication /interaction with the patient(includes motivation, instruction, feedback and active listening)correct administration of treatment including home program - includes sequencing and modification based on patient/caregiver responseaccurate oral summary of examination findings/treatment results  |  0 0  0 |  1  3  1 |  2  6  2 |  3  9  3 |
|  |  |  |  |  |  |
| 3. | The student demonstrated appropriate written documentation including:accurate, concise, legible and timely recording of intervention appropriate interpretation of findings (assessment)goals and plan of care modification as needed  | 0 00 | 1 11 | 222 |  3 3 3 |
|  |  |  |  |  |  |
|   | The student demonstrated professional behavior and attire.(deduction if expectations not met) |   |  |  |   |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | Safety Score\*: if 0 or 1, explain: | 0 | 1 | 2 |  |

 **Session 8: Total Performance Score (with safety score adjustment included): /30**

**Session 9: Planning for Third Intervention Discussion Performance Evaluation**

 *Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Participation in Discussion:* |
| ***2*** |  *Completely meets or exceeds expectations* |
| ***1*** |  *Incompletely meets expectations* |
| ***0*** |  *Does not meet expectations* |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Individual Participation in** **Planning for Second Intervention Discussion**  |  |  |  |  |
| 1. | Demonstrates accurate description and assessment of intervention session |  | 0 | 1 | 2 |
| 2. | Contributes to plan for follow-up session  |  | 0 | 1 | 2 |
| 3. | Presents clearly and concisely. |  | 0 | 1 | 2 |
| 4. | Correctly answers question(s) directed to them  |  | 0 | 1 | 2 |
| 5. | Volunteers meaningful comment(s) or question(s) during discussion |  | 0 | 1 | 2 |

 **Session 9: Total Planning Score: /10**

**Session 10: Third Intervention - Individual Performance Evaluation**

*Grading Criteria:*

|  |  |
| --- | --- |
| *Points* | *For Examination & Evaluation:* |
| ***3*** | *Intervention/documentation/communication - appropriate and complete*  |
| ***2*** | *Intervention/documentation/communication – mostly appropriate and complete* |
| ***1*** | *Intervention/documentation/communication – mostly inaccurate and/or incomplete* |
| ***0*** | *Intervention/documentation/communication – ineffective*  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. | The student contributed to the discussion/process by: correctly answering question(s) directed to them voluntarily offering meaningful comment(s) or question(s)  |  0 0 |  1 1 |  2 2 |  3 3 |
|  |  |  |  |  |  |
| 2. | The student demonstrated appropriate clinical skills including:appropriate communication /interaction with the patient(includes motivation, instruction, feedback and active listening)correct administration of treatment including home program - includes sequencing and modification based on patient/caregiver responseaccurate oral summary of examination findings/treatment results  |  0 0  0 |  1  3  1 |  2  6  2 |  3  9  3 |
|  |  |  |  |  |  |
| 3. | The student demonstrated appropriate written documentation including:accurate, concise, legible and timely recording of intervention appropriate interpretation of findings (assessment)goals and plan of care modification as needed  | 0 00 | 1 11 | 222 |  3 3 3 |
|  |  |  |  |  |  |
|   | The student demonstrated professional behavior and attire.(deduction if expectations not met) |   |  |  |   |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | Safety Score\*: if 0 or 1, explain: | 0 | 1 | 2 |  |

 **Session 10: Total Performance Score (with safety score adjustment): /30**

PEER FEEDBACK – ND III GROUP PRACTICAL

Colleague you are evaluating:

Your name (evaluator): Period of Evaluation: First Assessment Final Assessment (highlight one)

PART ONE: QUANTITATIVE ASSESSMENT (CHECK ONLY ONE BOX FOR EACH OF THESE 12 ITEMS)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COOPERATIVE LEARNING SKILLS: | NEVER | SOMETIMES | OFTEN | ALWAYS |
| Arrives on time and remains with team during activities |  |  |  |  |
| Demonstrates a good balance of active listening & participation |  |  |  |  |
| Asks useful or probing questions |  |  |  |  |
| Shares information and personal understanding |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SELF-DIRECTED LEARNING: | NEVER | SOMETIMES | OFTEN | ALWAYS |
| Is well prepared for team activities |  |  |  |  |
| Shows appropriate depth of knowledge |  |  |  |  |
| Identifies limits of personal knowledge |  |  |  |  |
| Is clear when explaining things to others |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| INTERPERSONAL SKILLS: | NEVER | SOMETIMES | OFTEN | ALWAYS |
| Gives useful feedback to others |  |  |  |  |
| Accepts useful feedback from others |  |  |  |  |
| Is able to listen and understand what others are saying |  |  |  |  |
| Shows respect for the opinions and feelings of others |  |  |  |  |

PART TWO: QUALITATIVE ASSESSMENT (FOR EACH ITEM, WRITE AT LEAST ONE SENTENCE, BUT

NOT MORE THAN THREE SENTENCES)

1) What is the single most valuable contribution this person makes to your team?

2) What is the single most important way this person could alter their behavior o more effectively help your team