WRITING SITE OBJECTIVES FOR CLINICAL EDUCATION

Why should clinical sites write objectives for clinical education?

- Assists the student in knowing what to expect and what is expected of him/her during the clinical experience
- Facilitates communication between the student, CI and CCCE
- Allows the CI to better pace and/or alter the clinical to meet the student's needs
- Assists the CI in measuring student progress
- Encourages center coordinators of clinical education (CCCEs) and clinical instructors (CIs) to plan and optimize student learning at their site
- Facilitates communication among CIs at the site allowing for efficient use of time and other resources
- Assists academic programs in assigning the most appropriate student for the clinical site

What can help sites develop objectives for clinical education?

- Consider the learning opportunities that may be unique to the site and be of benefit to students
- Define entry-level practice expectations at the site
- Use the tools described in section one of the basic CI Credentialing course to assess what the site has to
 offer students
- Review the course objectives for each clinical experience from the student's academic program. Site
 objectives should complement, but not necessarily duplicate, the program's objectives. For example, the
 program may expect that the student carry 75% of a typical caseload by the end of the experience; the
 site objective could describe how many and what types of patients constitute a typical caseload at the
 site
- Contact the academic coordinator of clinical education (ACCE) or director of clinical education (DCE) at the academic program/s you work with. They would be happy to help you.

When should the site objectives be shared with the student?

- Objectives could be emailed to the student prior to the clinical experience and reviewed with the student during orientation on-site.
- If your site has a clinical education website, objectives could be posted there and you could inform students to review the objectives prior to the first day.
- You could share the objectives with the academic program's director of clinical education (DCE) or academic coordinator of clinical education (ACCE) and ask them to share the objectives with students. In this event, it would be helpful to check with the student during the on-site orientation to determine if there are any questions about expectations.

How many objectives should be written?

Five to ten generic objectives could be written that would apply to students at all levels or you may wish to customize objectives depending on whether the student is at the beginning, middle or end of their academic program. You could consider having objectives that are specific to each week of the clinical experience or specific to the first half or quarter of the experience. You could also write objectives within each of the performance criteria on the clinical performance instrument. This method may make assessment easier.

How should I format the objectives?

The format of writing behavior objectives as described in the CI Credentialing Course (basic) would be an effective format to follow:

- A = Audience (who generally will be the student)
- B = Behavior (what the student will do)
- C = Condition (when)
- D = Degree (how well)

The examples of site objectives below will get you started.

Examples of Clinical Site Objectives

This list of samples is NOT intended to provide a ready-made set of site objectives, but provides a guide for the types of objectives that sites might choose to write.

The SPT/SPTA will:

Sign-off on orientation to the facility including risk management, safety and tour during week one.

Abide by the policies and procedures described in the student orientation manual given minimal cuing from the CI.

Demonstrate the characteristics of active adult learning as described in the student orientation manual during the entire internship.

Take responsibility for their own learning by providing the CI with candid on-going feedback about pace and usefulness of CI's feedback throughout the internship.

Begin to utilize rehab aides to assist in interventions during week 3 given minimal cuing from the CI.

Identify relevant in-service or project to be completed after discussion with CI by end of week 3.

Independently select 2 special observation experiences from the list of options provided in the student orientation manual by the end of week 2.

Meet/observe other disciplines, surgery, and/or specialty areas as time allows.

Meet with the CCCE (or Cl's supervisor/mentor) at midterm to provide candid feedback about the experience and make constructive recommendations, if any, for the second half of the internship.

Independently utilize facility library and electronic databases to identify the best available evidence to support evidenced-based practice to enhance patient outcomes throughout the internship.

Schedule an appointment with the human resources director by week 2 for a mock employment interview that will take place during the final 2 weeks of the internship.

Carry 50% of a normal caseload (3 patients from orthopedic and 3 from neurologic floors) by week 5 with assistance 25% of the time or less.

Consult with physicians, insurance companies, and/or vendors as appropriate during weeks 3-9 of the internship given minimal cuing from CI.

Present patients during rounds with oversight only during weeks 6-10.

Independently initiate a discussion with the CI about the core values of the internship site by the end of week 5.

Turn in a completed, concise Weekly Planning Form (from CI Credentialing course) to the CI by 4:00pm each Thursday of the internship.