

**Huntingdon College Athletic Training Education Program  
Self Assessment of Clinical Instruction**

A. Purpose  
The purpose of this form is to assist in the assessment of the student's clinical education experience. The assessment will assist in gaining information relative to the effectiveness of clinical instruction. All information will be kept confidential.

B. Identification of the Setting: Academic Year being evaluated: \_\_\_\_\_

Type of clinical education setting: \_\_\_\_\_ College / University Athletic Training Facility  
 \_\_\_\_\_ High School Athletic Training Facility  
 \_\_\_\_\_ Community based Health Care Facility

Name of institution/setting: \_\_\_\_\_

Name of clinical instructor: \_\_\_\_\_

The clinical instructor is to complete the following questions relative to the clinical education experience and clinical instruction. After completing the form, return the form to the program director at Huntingdon College. Use the following scale to respond to each question:

**0 - Never      1 - Sometimes      2 - Most times      3 - All the time      NA - Not Applicable**

As the clinical instructor, I...

- |    |  |   |   |   |   |    |
|----|--|---|---|---|---|----|
| 1. | actively participated in the education of the student during the clinical / field experience   | 0 | 1 | 2 | 3 | NA |
| 2. | showed initiative relative to instructing the student versus assigning the student random tasks  | 0 | 1 | 2 | 3 | NA |
| 3. | had an understanding of the role of the clinical / field experience  | 0 | 1 | 2 | 3 | NA |
| 4. | educated the student to ensure sufficient understanding of terminology relative to the clinical / field experience                             | 0 | 1 | 2 | 3 | NA |
| 5. | was aware of the student(s) academic level and skill, and provided appropriate guidance in allowing the student to increase his/her confidence | 0 | 1 | 2 | 3 | NA |
| 6. | demonstrated a willingness to answer questions   | 0 | 1 | 2 | 3 | NA |
| 7. | provided adequate time to address the questions of the student(s)  | 0 | 1 | 2 | 3 | NA |
| 8. | provided adequate time to address the individual needs of the student(s)   | 0 | 1 | 2 | 3 | NA |
| 9. | provided adequate instruction in the use of unfamiliar therapeutic modalities  | 0 | 1 | 2 | 3 | NA |

10. provided adequate instruction in the use of unfamiliar therapeutic exercises and protocols 0 1 2 3 NA
11. provided adequate instruction in the performance of unfamiliar evaluation / assessment procedures 0 1 2 3 NA
12. provided adequate opportunities for the student(s) to demonstrate proficiency of clinical skills 0 1 2 3 NA
13. How often did you provide feedback to the student relative to clinical performance?  
 \_\_\_ Daily \_\_\_ Weekly \_\_\_ Midway \_\_\_ At End
14. Place a mark beside each type of instructional method used during the clinical / field experience:
- |  |  |
|--|--|
| ___ One-on-one instruction               | ___ Group instruction                          |
| ___ Special project (individual / group) | ___ Simulate athletic injury / patient illness |
| ___ Outside readings                     | ___ Seminar / workshop attendance              |
| ___ Surgical observation                 | ___ Video instruction                          |
| ___ Computer simulations                 |  |
15. Place a mark to indicate how you feel relative to your clinical skills and ability to teach clinical proficiencies in each of the following area:
- |  |               |                |                 |
|--|---------------|----------------|-----------------|
| Injury assessment                            | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Injury recognition                           | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Injury prevention                            | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Taping / wrapping                            | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Splinting                                    | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Use of therapeutic modalities                | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Use of therapeutic exercises                 | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Organization / administration                | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Nutrition guidance                           | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Reconditioning                               | ___ Need Work | ___ Sufficient | ___ Very Strong |
| First Aid / CPR                              | ___ Need Work | ___ Sufficient | ___ Very Strong |
| Counseling the injured<br>or ill participant | ___ Need Work | ___ Sufficient | ___ Very Strong |
16. How would you rate the overall effectiveness of the clinical experience?
- 1 **Not Effective** - A waste of time for me and the students.
  - 2 **Somewhat Effective** - Student(s) benefitted some from the experience, but were mostly unprepared and showed little interest in learning.
  - 3 **Effective** - Student(s) benefitted from the experience, but required extra motivation from the instructor to complete the objects of the experience.
  - 4 **Very Effective** - Student(s) were well prepared, interested, willing to learn, and benefitted greatly from the experience.

Comments:

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