Revised Clinical Performance Instruments: PT CPI v.3.0 and PTA CPI v.3.0



Preliminary information for PT CPI and PTA CPI subscribers to assist with the transition to the revised tools.

In 2022, APTA made the decision to invest in the psychometric review of the PT and PTA CPIs to align the content and scoring model to best practices in 2023. That work was completed in partnership with Human Resources Research Organization (HumRRO) in November 2022. APTA is currently working with its new technology vendor, Competency.AI, to have these tools available for use in an electronic, mobile friendly platform.

APTA is aware that academic programs and clinical sites need to be able to review the revised proficiency domains, behaviorally anchored rating scales, and rater instructions for the revised tools ahead of their launch on the technology platform. This information is being provided to assist users prepare for the transition. **Note:** These sample paper versions of the revised tools do not include the fields for critical incident, narrative comments, and other features.

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Revised Uses of the CPIs

Formative Uses (Low-Stakes)

Providing a checkpoint for the student's progress during their clinical experience while helping to identify deficits and areas for growth in the student's performance and/or skills: DCEs use performance ratings and comments on the midterm evaluation to determine if the student is on track to pass their clinical experience. Additionally, DCEs examine changes in ratings and feedback from the student's midterm evaluation to their final evaluation. If the CPI indicates gaps in the student's clinical performance, then the DCE and CI use that information to determine what types of additional support are necessary to help the student. The final CPI evaluation serves as a "mentoring guide" or tool for professional development before the student moves on to their next clinical experience.

When using the CPIs for this purpose, key stakeholders should take into consideration that CPI ratings are only completed at two points during the student's clinical experience (midterm and final); thus, the CPI does not serve as a tool to help *continuously* monitor the student's progress throughout their clinical experience. Moreover, CPI ratings should be based on where the student is at when the CPI is completed, not based on where they were in the weeks prior to the evaluation.

Facilitating the student's self-assessment of their clinical performance: The CPI serves as a tool to help students engage in self-assessment of their clinical performance at the midpoint and end of their clinical experiences. One useful feature of the CPIs is the sample behaviors embedded throughout the instruments. These sample behaviors provided in the CPI help guide students in creating thoughtful written comments. Ultimately, DCEs and CIs will work with students to guide and support students who rate themselves on the lower end or who rate themselves much higher than the ratings provided by their CI.

When using the CPIs for this purpose, key stakeholders should take into consideration that the length of the CPI could lead to limited written feedback from students. Thus, limited written comments from the student should not always be interpreted as lower levels of self-reflection. Further, the CPI provides only one checkpoint for students to complete a self-assessment; however, students should engage in self-assessment of their clinical performance on an ongoing basis.

Identifying areas of discordance in evaluation and/or expectations between the CI and the student: The CPI reinforces communication between the students and their instructors and provides insight into whether more frequent communication is needed. If the CI observes lower ratings from the student, they can work with the student to help instill confidence in the student. If necessary, CIs can provide the DCE with additional feedback on the student's performance in the form as an addendum to the original CPI after meeting with the student to discuss their ratings.

When using the CPIs for this purpose, key stakeholders should take into consideration that completing the CPI is already a large time commitment for the CI and asking the CI to meet again with the student to discuss their ratings adds to this time commitment. Key stakeholders should also keep in mind that allowing the CI and student to view each other's ratings and feedback before the CI and student have both signed off on their CPIs could sway the other's ratings.



Summative Use (High-Stakes)

Guiding the DCE's decision on the student's pass-fail status for their clinical experience: The CPI is used to provide data on a PT or PTA student's performance during their clinical experience. There are thresholds or criteria for the CPI performance ratings to help DCE's determine a student's pass-fail status for their clinical experience. DCEs also use the written comments from the CPI to support their decisions for whether a student passes or fails their clinical experience. Overall, key stakeholders described the CPI as most useful for determining readiness to enter practice when the student is participating in a clinical experience at the end of their clinical education program (i.e., a terminal clinical).

When using the CPIs for this purpose, key stakeholders should take into consideration that the CPI is only one piece of information that is used to determine a student's pass-fail status. Additionally, ratings and rating methods tend to be inconsistent across CIs due to differing interpretations of the rating scales. For example, CPI ratings are dependent on the CI's ability to conceptualize entry-level, especially if the CI is in a specialty setting (e.g., level-one trauma, pediatrics). Entry-level ratings should be based on readiness to practice in a *general* clinical setting, not readiness to practice in a *specific* specialty clinical setting. CIs may also interpret entry-level as practicing at the level the CI is currently at rather than at the level the CI was at when they first started practicing.

Inappropriate Uses of the CPIs

Standards 4.1 and 6.10 of the AERA/APA/NCME standards establish the need for test developers to identify potential limitations and inappropriate uses of test results to avoid misinterpretation and misuse of test scores by test users (AERA, APA, NCME, 2014). During our interviews, the key stakeholders identified the following for which the CPI should *not* be used. During the focus group workshops, we asked key stakeholders to confirm that each of the uses listed below were inappropriate. Group discussions were guided by the following questions:

- Do you feel this an inappropriate use for the CPIs? Why or why not?
- Would this be an inappropriate use for all CPI users or for a specific group?

In the end, each of the initial inappropriate uses for the PTA and PT CPIs were confirmed as being inappropriate during the focus group workshops. We provide further details on each use below.

Determining if a student is ready to sit for the Board exam: The CPI is more performance based while the Board exam is more knowledge based. Additionally, the CPI does not touch on didactic knowledge as it is not the intent of the tool. Overall, there are other academic factors that likely serve as more appropriate indicators to determine if a student is prepared for the Board exam.

Making comparisons about the relative effectiveness of education programs: The CPI should not be used to make judgments on the overall effectiveness of education programs, nor to compare the relative effectiveness of various education programs because the CPI does not account for differences in program design (e.g., the duration of the clinical experience, sequencing of clinical experiences). Key stakeholders stated that more breadth is necessary in comparing clinical education programs, not just the CPI; that's only one "piece of the puzzle."



As the single deciding factor for whether a student should be recommended for removal from their PT/PTA program: The red flag indicator in the CPI serves as a method of notifying the DCE of any immediate problems with the student's behavior or performance; however, the CI and DCE typically discuss any major concerns before using the red flag system is necessary. Key stakeholders described information from the CPI as a "consideration" but not a determining factor and stated that DCEs should not use the CPI as the only data point in making decision on a student's status. It should be used in combination with other data points. Despite this, the CPI provides a source of documentation and rationale for issues such as unethical or unprofessional behavior and safety concerns.



Final PT CPI BARS¹

Rating Instructions

The key to accurately evaluating the student you are rating is to match their typical behaviors in the clinical setting to the descriptions in the rating scales. Four pieces of information are provided for each performance criterion: (1) a description of the performance criterion, (2) statements or "anchors" that describe the six performance levels (**Beginning Performance**, **Advanced Beginner**, **Intermediate Performance**, **Advanced Intermediate Performance**, **Entry-Level Performance**, and **Beyond Entry-Level Performance**), (3) percentage ranges for the student's level of required clinical supervision and caseload (except for the 'Professionalism' domain where these benchmarks are less applicable), and (4) example behaviors that further clarify the performance levels. It is critical to rely on these descriptors while making your ratings. Doing so will help to ensure that all students within and across programs are assessed using the same standards.

When making your ratings, think about all aspects of the student's clinical behavior during their current clinical placement. Then, find the example behaviors that best represent the student's typical clinical behavior or performance. For each performance criterion, example behaviors span across two performance levels (Beginning Performance – Advanced Beginner; Intermediate Performance – Advanced Intermediate Performance; Entry-Level Performance – Beyond Entry-Level Performance). Please remember that the example behaviors are provided to illustrate the types of behaviors associated with different levels of performance. Not all example behaviors may be relevant to the student you are rating, and they are not intended to be an exhaustive list of behaviors representative of all performance at that level. Rather, they are provided as examples of the types of behaviors that constitute different performance levels for each criterion.

When deciding between performance levels, consider where (a) the student's level of supervision and caseload falls on the rating scale and (b) the majority of the behaviors that best represent the student's performance fall on the rating scale. If the student's clinical performance spans multiple performance levels, consider where there is a preponderance of evidence and make your rating at that level.

Finally, when making your ratings, it is important to remember the following:

- Do not compare the student you are rating to other students. Each student's effectiveness should be determined by comparing their clinical behavior to the standards provided on the rating scales, and not by comparing them to others. In other words, you should make absolute rating judgments (e.g., comparing students to a specific, common standard), not relative rating judgments (i.e., comparing students to each other).
- Do not allow your general impression of a student to influence your ratings of the separate performance criteria. Rather, you should focus on one performance criterion at a time, not letting the student's overall clinical performance or the ratings you have given that student on other performance criteria affect your current performance criterion rating.
- Lastly, remember that every student has strengths and areas for development. Your ratings should clearly reflect the student's strengths and less effective clinical behaviors, as appropriate.

¹ While not reflected in the pages that follow, the stakeholders advised that a checkbox be included to denote any safety violations.



Professionalism: Ethical Practice

	otion: Practices accordii tuations.	ng to the Code of Ethic	cs for the Physical Ther	apist; demonstrates resp	pect for self, the patier	nt/client, and colleagues
Rating Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
		2	3		5	6
Sample Behaviors (NOT an exhaustive list)	 in the clinical setting. Identifies, acknowledg responsibility for their a Maintains patient/clien 	ey should abide. thical behaviors that occur es, and accepts actions. t confidentiality. d respectful manner with	 their clinical practice s Articulates most of the Ethics for the Physical Reports clinical errors CI. Gathers objective infor regarding any potentia observed in the clinica Seeks advice from CI potentially unethical be clinical setting. Seeks assistance with addressing unethical be Devotes appropriate times 	without prompting from the rmation to support questions ally unethical behaviors al setting. on how to address ehaviors observed in the executing plans for behaviors. me and effort to meet oes not rush treatment	 clinical practice settir Adheres to the eleme for the Physical Ther Consistently identifie Uses resources (e.g. for addressing and re Recognizes the need therapy services to u underrepresented pa Strives to provide par beyond expected star 	s unethical behaviors. , hospital ethics committee) esolving ethical conflicts. d and advocates for physical inderserved and itient/client populations. tient/client services that go



Professionalism: Legal Practice

Description: Practices according to legal and professional standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.

0000	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
(NOT an exhaustive list)	 should abide. Identifies obvious viola professional practice s others in the clinical se Adheres to patient/clie practice standards (e.g documentation system others, speaks in a low a patient's/client's case Discusses patient/clier others involved with th 	ations of legal and standards performed by etting. ont privacy laws and g., keeps patient/client as out of line of sight of v volume when discussing e). nt information only with lat patient's/client's care. sonance that can arise	 practice standards relation including federal, state regulations. Gathers some objective questions regarding per observed in the clinical Reports clinical errors Seeks advice from CL of legal and profession observed in the clinical 	e information to support erceived illegal activity I practice setting. without prompting from CI. on how to address violations al practice standards I setting. rces to report any perceived professional practice	 standards, including fristitutional regulation care. Readily identifies viola professional practices Gathers objective inforquestions regarding probserved in the clinica Answers any question perceived illegal or ur Articulates and resolv that can arise during or textbook care versus 	as related to patient/client ations of legal and standards. ormation to support any perceived illegal activity al practice setting. The to support reports of oprofessional behavior. es cognitive dissonance clinical training (i.e.,



Professionalism: Professional Growth

Rating Scale	Beginning Performance		Intermediate Advanced Performance Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
	 Seeks guidance from Cl for steps to improve their clinical performance and/or clinical practice knowledge. Participates in planning to improve clinical performance and/or clinical practice knowledge. Develops and prioritizes several short- and long-term goals for improving their clinical practice skills. Takes initiative to communicate their clinical practice goals and learning needs to the Cl. Accepts feedback without defensiveness. 		 an effort to improv and/or clinical prace Identifies educatio 	strength and areas for growth in e their clinical performance trice knowledge. nal opportunities and resources o their clinical setting.	effort to improve pSeeks out evidenRecognizes when
(NOT an exhaustive list)			 Researches diagn in the clinic that ar Revises previously goals for improving participating in add Implements new ir and reflects on effi- interventions. Provides effective 	oses and treatments encountered	 meet the patient's Participates in dis foster their own p the professional g Demonstrates the and/or share theii Shares articles of colleagues for ed their areas of inte patient/client pop Participates in the education opport a local or national Seeks out addition knowledge and s



Interpersonal: Communication

Description: Demonstrates professional verbal and nonverbal communication with all stakeholders (e.g., patients/clients, caregivers, intra/interprofessional colleagues); adapts to diverse verbal and nonverbal communication styles during patient/client interactions; utilizes communication resources (e.g., interpreters) as appropriate; incorporates appropriate strategies to engage in challenging encounters with patients/clients and others; facilitates ongoing communication with physical therapist assistants regarding patient/client care.

Scale	Beginning Advanced Performance Beginner		Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
Rating S	1	2	3	4	5	6
Supervision/ Caseload	A student who requires – 100% of the time many with non-complex cond time managing patients conditions. The student caseload or may begin with the clinical instruct	aging patients/clients itions and 100% of the /clients with complex t may not carry a to share a caseload	A student who requires clinical supervision less than 50% of the time managing patients/clients with non-complex conditions and 25 - 75% of the time managing patients/clients with complex conditions. The student maintains at least 50 – 75% of a full- time, entry-level physical therapist's caseload.		A student who is capable of working independently while managing patients/clients with non-complex and complex conditions and seeks guidance/support as necessary. The student is capable of maintaining 100% of a full-time, entry-level physical therapist's caseload.	
Sample Behaviors (NOT an exhaustive list)	 Demonstrates basic profito effective communication their caregiver(s) (e.g., h low vision, low health lite Typically demonstrates end communication with patient situations. Demonstrates basic profit appropriately with other head lites the patient's/clites style and uses their prefet throughout most of the end cases and begins using assistance. 	effective verbal and non-verbal ents/clients in non-complex iciency in communicating healthcare providers. ent's preferred communication erred communication style pisode of care. ing translation services with status with other healthcare echnical and layman	 and non-verbal commun Uses appropriate translatinterpreter, sign languag Typically refrains from us patient/client. Communicates with other patient/client care in ord care between clinicians/ Asks the patient/client patient patient patient patient patient patient patient patient patient pat	sing technical jargon with the er clinicians regarding er to facilitate a continuum of disciplines. ertinent questions related to medical screening to gain bisode of care. opropriate follow-up questions of care to clarify and	 communication with p situations. Recognizes when co seeks external assist Demonstrates effectin patients/clients in diff topics, emotional situ empathy in order to r Establishes rapport a caregiver(s) through Facilitates ongoing co therapist assistants a teams regarding pati Provides constructive verbal and non-verba appropriate. 	ve verbal and non-verbal vatients/clients in complex mmunication is ineffective and ance for mediation as needed. ve communication with icult situations (e.g., difficult ations) with respect and neet patient's/client's goals. ind trust with patient/client and effective communication. communication with physical and the intra/interprofessional ent/client care. e feedback to others on effective al communication, when situations of potential conflict.



Interpersonal: Inclusivity

Description: Delivers physical therapy services with consideration for patient/client diversity and inclusivity for all regardless of age, disability, ethnicity, gender identity, race, sexual orientation, or other characteristics of identity; Provides equitable patient/client care that does not vary in quality based on the patient's/client's personal characteristics (e.g., ethnicity, socioeconomic status).

Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
Rating S	1	2	3	4	5	6
Supervision/ Caseload	A student who requires cli 100% of the time managing non-complex conditions a managing patients/clients conditions. The student m or may begin to share a ca instructor.	g patients/clients with nd 100% of the time with complex ay not carry a caseload	A student who requires clinical supervision less than 50% of the time managing patients/clients with non-complex conditions and 25 - 75% of the time managing patients/clients with complex conditions. The student maintains at least 50 – 75% of a full- time, entry-level physical therapist's caseload.		A student who is capable of working independently while managing patients/clients with non-complex and complex conditions and seeks guidance/support as necessary. The student is capable of maintaining 100% of a full-time, entry-level physical therapist's caseload.	
Sample Behaviors (NOT an exhaustive list)	 Identifies some individua may be impactful to the p Demonstrates a general patient's/client's backgro regardless of their backgro 	age, disability, ethnicity, kual orientation, etc. st patient/client interactions. I or cultural differences that batient/client. understanding of the und and is respectful round. me questions to improve group differences (e.g., , individuals who are	 Seeks additional information on patient/client populations with cultural differences with which they may be less familiar. Reflects on and identifies personal biases. Seeks out resources to manage personal biases. Recognizes socioeconomic, psychological, and economical influences that might impact care and identifies possible avenues to address these concerns. 		 Provides patient/client care that does not vary in quality based on the patient's/client's personal characteristics, including age, disability, ethnicity, gender identity, race, sexual orientation, etc. Assesses, reflects, and manages own biases, on an ongoing basis so that they do not interfere with the delivery of patient/client care. Demonstrates sufficient knowledge of various cultures and backgrounds in order to effectively treat and provide equitable patient/client care. Identifies when equitable care is not being provided to a patient/client and takes steps to correct their course of care. Advocates for their patients/clients in order for them to receive the appropriate course of care needed to address their physical therapy needs. Advocates for patient/client populations on a local or national level. 	



Technical/Procedural: Clinical Reasoning

Description: Strategically gathers, interprets, and synthesizes information from multiple sources to make effective clinical judgments; applies current knowledge and clinical judgement leading to accurate and efficient evaluations including: selection of examination techniques, diagnosis, prognosis, goals, and plan of care; ensures patient/client safety via medical screening during the episode of care and when making discharge and progression decisions; presents a logical rationale for clinical decisions with all stakeholders (e.g., patients/clients, caregivers, intra/interprofessional colleagues).

Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
Rating S	1	2	3	4	5	6	
Supervision/ Caseload	 100% of the time ma with non-complex cor 	n to share a caseload	than 50% of the time with non-complex co the time managing pa	es clinical supervision less managing patients/clients nditions and 25 - 75% of atients/clients with complex ent maintains at least 50 – try-level physical	independently while managing patients/clients with non-complex and		
Sample Behaviors (NOT an exhaustive list)	 patient's/client's continuities appropriate in questions with assistant safety during the episor. Works with the CI to id activity limitations, and Selects basic therapeut the patient's/client's fuil Explains their rationale to the level of the experience overed up to that point. Articulates clinical thoo International Classification and Health (ICF) mode Identifies all red flags to the flags to the level of the set of the set	dentify patient/client impairments, d participation restrictions. utic interventions that address inctional limitations. e for treatment choices according erience and the didactic material nt. ught processes using the ation of Functioning, Disability, el. that contraindicate treatment. for clarification and seeks	 sources (e.g., subject measures) for non-conscreening. Makes sound clinical interventions when m complex disorders. Identifies progression Uses hypothetico-dece patient/client case with Verbalizes rationale to Demonstrates the ab apply to patient/client Recognizes when a Construction 	o support specific interventions. ility to use pattern recognition to	 Collects, interprets, and compares data from multiple sources (e.g., subjective history, objective tests, and measures) for complex cases to guide medical screening. Makes sound clinical decisions during treatment interventions when managing patients/clients with complex disorders. Identifies diverse interventions to progress or regress the patient's/client's plan of care. Acknowledges ineffectiveness of chosen interventions based on reflection. Articulates alternative options to provide effective patient/client care. Articulates the benefits and challenges of various treatment options. Provides suggestions to CI regarding changes in the plan of care citing evidence-based resources. Utilizes ongoing professional development and scholarly resources to make clinical decisions. 		



Technical/Procedural: Examination, Evaluation, and Diagnosis

Description: Performs evidence-based initial and re-examination tests and measures that are relevant to the practice setting; rules out other pathologies and refers to or consults with other healthcare professionals as necessary; evaluates data from the patient/client examination (e.g., history, systems review, tests and measures, screening, and outcome measures) to make clinical decisions, including the determination of a diagnosis to guide future patient/client management.

Scale		Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
Rating		A student who requires clinical supervision 75 – 100% of the time managing patients/clients with non-complex conditions and 100% of the time managing		A student who requires less than 50% of the tip patients/clients with no and 25 - 75% of the tim	me managing on-complex conditions	A student who is capable of working independently while managing patients/clients with non-complex and complex conditions and seeks guidance/support as necessary.	
Supervision/ Caseload	Caseloa	patients/clients with co The student may not c may begin to share a c clinical instructor.	arry a caseload or	patients/clients with co student maintains at le time, entry-level physic caseload.		The student is capable a full-time, entry-level caseload.	e of maintaining 100% of physical therapist's
Sample Benaviors	(NOT an exhaustive list)	 complex cases. Identifies appropriate sist screening consideration and measures with ass cases. Performs an initial example subjective history taking 	g, previous medical history e tests and measures with plex cases. it relates to the	 cases. Uses subjective and ob examinations to develo for non-complex cases. Sets appropriate short- identified and/or anticip cases. Performs re-examination history and objective te complex cases. Develops differential dia complex cases. Identifies limiting factor Consistently makes app discharge recommenda 	p a physical therapy diagnosis and long-term goals for lated deficits in non-complex ons, including subjective sts and measures for non- agnosis options for non- s in recovery. propriate patient/client ations for non-complex cases. ther healthcare providers	 including subjective hi history screening, and for complex cases. Sets appropriate short identified and/or antici cases. Works through different examination/evaluation complex cases. Uses evidenced-based synthesize findings from examination to determ treatment or referral. Consistently makes and discharge recommend 	hations and re-examinations, story taking, previous medical objective tests and measures - and long-term goals for pated deficits in complex - and long-term goals for pated deficits in complex - and long-term goals for - and deficits in complex - and deficits in complex - and deficits in complex - and deficits in complex - and deficits in the process of handing discharge.



Technical/Procedural: Plan of Care and Case Management

Description: Establishes a physical therapy plan of care that is safe, effective, patient/client-centered, and evidence-based while also considering prognostic factors; adapts plan of care as appropriate by utilizing test and retest measures, outcome measures, and caseload discussions to ensure patients/clients are progressing toward discharge goals.

Scale	Beginning Advanced Performance Beginner		Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
Rating S	1	2	3	4	5	6	
Supervision/ Caseload	A student who requires of – 100% of the time manage with non-complex condit time managing patients/of conditions. The student is caseload or may begin to with the clinical instructor	ging patients/clients ions and 100% of the clients with complex may not carry a o share a caseload	less than 50% of the t patients/clients with r and 25 - 75% of the tip patients/clients with o student maintains at	non-complex conditions	A student who is capable of working independently while managing patients/clients with non-complex and complex conditions and seeks guidance/support as necessary. The student is capable of maintaining 100% of a full-time, entry-level physical therapist's caseload.		
Sample Behaviors (NOT an exhaustive list)	 of care. Develops patient-/clien Modifies goals based or response to the treatmet Typically includes the provide the providet the providet	n the patient's/client's ent with assistance. batient/client in the plan of uding goal setting. ned plan of care that is ient-/client-centered with chnical questions from vely for non-complex ing use of routine	 designs a plan of c timeline for the pati diagnosis. Monitors and adjus and retest measure continued therapy is planning. Recognizes the pati activity and progress intensity of the acti Suggests alternative evidence-based and care. Recognizes where consultation with of warranted. Answers most of the active the active of the active consultation with of the active warranted. 	erstanding of prognosis and are with an appropriate ent's/client's specific ts the plan of care using test es to determine the need for services or discharge tient's/client's tolerance to an sees or regresses the vity accordingly. re interventions that are d congruent with the plan of further referral to or ther specialties might be the technical questions from fectively for complex cases.	 on the patient's/clien plan of care. Demonstrates creat innovative evidence the patient/client wh established plan of Communicates with professionals on the ensure an appropria Follows up with pati post-discharge. Utilizes all appropria 	other healthcare e status of the plan of care to ate discharge plan. ents/clients and/or caregivers ate interprofessional team finical decisions regarding	



Technical/Procedural: Interventions and Education

Description: Selects and performs appropriate physical therapy interventions (e.g., therapeutic exercise, therapeutic activity, neuromuscular re-education, application of modalities, manual therapy) that are evidence-based and completed in a competent and efficient manner; consults with interprofessional colleagues as appropriate (e.g., nurse, physician, occupational therapist, speech-language pathologist, orthotist-prosthetist) to seek advice or an opinion; educates patients/clients and caregivers using multimodal approach based on patient's/client's learning style; educates healthcare team on relevant topics by taking an active role in activities (e.g., journal clubs) or in-service opportunities.

Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
Rating S	1	2	3	4	5	6
Supervision/ Caseload	A student who requires 75 – 100% of the time m patients/clients with no and 100% of the time m patients/clients with co student may not carry a begin to share a caselo instructor.	nanaging n-complex conditions anaging mplex conditions. The a caseload or may	than 50% of the time ma	t maintains at least 50 –	A student who is capable of working independently while managing patients/clients with non-complex and complex conditions and seeks guidance/support as necessary. The student is capable of maintaining 100% of a full-time, entry-level physical therapist's caseload.	
Sample Behaviors (NOT an exhaustive list)	 therapeutic interventions Identifies viable options in assistance to address of deficits. Performs basic therapeut one or more problems in Identifies the preferred le patient/client and adapts information to meet patie 	for interventions with ojective and functional tic interventions that address a patient's/client's diagnosis. earning style of the a delivery of educational ent's/client's needs. otential barriers to learning s with the CI in order to	 exercise, therapeutic ac education, application o safely, competently, and cases. Delivers patient/client en decision making safely, non-complex cases. Adapts interventions ba Educates the patient/client anatomical rationale/real 		 exercise, therapeutic education, application safely, competently, cases. Determines when in require modification making. Delivers patient/client based decision mak efficiently for comple Educates patients/c interventions for pre- as part of a post-fall Educates the patient therapeutic intervent management at hom Educates interprofere 	ients and caregivers on vention (e.g., floor-to-sit transfers recovery strategy). t's/client's caregivers on directing tions for patient/client self- ne or post-discharge. ssional team members on king an active role in educational



Business: Documentation

Description: Produces quality documentation that includes changes in the patient's/client's status, descriptions and progressions of specific interventions used, and communication among providers; maintains organization of patient/client documentation. Intermediate Beginning Advanced Advanced **Entry-Level Beyond Entry-**Performance **Beginner** Performance Intermediate Performance Level **Rating Scale** Performance Performance 5 2 3 6 4 A student who requires clinical supervision A student who requires clinical supervision less than A student who is capable of working 75 – 100% of the time managing 50% of the time managing patients/clients with nonindependently while managing Supervision/ Caseload patients/clients with non-complex complex conditions and 25 - 75% of the time patients/clients with non-complex and conditions and 100% of the time managing managing patients/clients with complex conditions. complex conditions and seeks patients/clients with complex conditions. The student maintains at least 50 - 75% of a full-time, guidance/support as necessary. The The student may not carry a caseload or entry-level physical therapist's caseload. student is capable of maintaining 100% of may begin to share a caseload with the a full-time, entry-level physical therapist's clinical instructor. caseload. Produces additional documentation to justify Understands most of the components of Produces documentation that includes changes in • ٠ documentation of an initial evaluation (e.g., patient/client status, interventions, a thorough the need for ongoing services for the SOAP). assessment of patient/client tolerance, and progression patient/client. Typically identifies the appropriate location toward goals. • Includes comparison statements across Produces documentation of the patient's/client's plan of within the documentation system for time and across interventions/techniques in Sample Behaviors (NOT an exhaustive list) • necessary components. care that is accurate and error-free. the assessment of the patient's/client's Assists with producing documentation with Provides a rationale for patient/client progression and response to skilled therapy. accurate information regarding the • Provides documentation that supports rearession. patient's/client's status, interventions, • Submits and organizes documentation in a reasonably external payer requirements. assessment, and plan of care. timely manner. • Participates in quality improvement review Demonstrates awareness of the need for of documentation (e.g., chart audit, peer appropriate documentation as essential to review, goals achievement). the provision of care. Submits and organizes documentation in a • • Submits documentation but takes timely manner. considerable time and effort to do so.



Business: Financial Management and Fiscal Responsibility

Description: Identifies financial barriers and limitations to patient/client care (e.g., authorization limits, cost to patient); adjusts plan of care and schedule frequency based on the patient's/client's financial concerns or needs; understands nuances of insurance including copay, co-insurance, out-of-pocket max, deductible, etc.; appropriately bills patients/clients according to legal guidelines and insurance regulations; demonstrates appropriate understanding of other fiscally responsible behaviors, including time management and appropriate use of clinical supplies and equipment when providing physical therapy services.

Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
Rating S	1	2	3	4	5	6
Supervision/ Caseload	A student who requires 75 – 100% of the time m patients/clients with nor conditions and 100% of patients/clients with cor The student may not car may begin to share a ca clinical instructor.	anaging n-complex the time managing nplex conditions. rry a caseload or	50% of the time managing complex conditions and 2 managing patients/clients	5 - 75% of the time with complex conditions. east 50 – 75% of a full-time,	A student who is capable of working independently while managing patients/clients with non-complex and complex conditions and seeks guidance/support as necessary. The student is capable of maintaining 100% of a full-time, entry-level physical therapist's caseload.	
Sample Behaviors (NOT an exhaustive list)	 terminology (CPT) codes Recognizes and follows guidelines of insurance r clinical setting. Typically identifies the a techniques that would fa codes to ensure appropri 	agal/federal guidelines e rule, current procedural s, ICD-10 codes). most of the legal regulations for their ppropriate exercises and ill under various CPT riate billing practices. e to find billing information lectronic medical record the CI related to time anding of the basic	 copay, co-insurance, out-of for the patient's/client's fina Typically identifies financial patient/client care (e.g., aut patient/client) and adjusts p to meet the patient's/client's Appropriately bills patient/cl and insurance regulations. Demonstrate appropriate tir cases. Assists with scheduling to n patient/client and directs ca appropriate. 	barriers and limitations to horization limits, cost to lan of care and schedule frequency s needs and concerns. ient according to legal guidelines me management with non-complex	 Completes accurate, timely billing that is in accordance with each insurance agency's requirements. Answers insurance questions from the patient/client. Structures clinically appropriate treatment plan within patient/client payment restrictions to ensure adequate patient/client care. Advocates for patient/client needs through communication with insurance companies and providers. Demonstrates appropriate time management with complex cases. Demonstrates awareness of clinical supplies and the impact on the utilization of financial resources of the organization. Demonstrates awareness of equipment recommendations or continuum of care recommendations made for patient/client with regards to financial resources available to 	



Responsibility: Guiding and Coordinating Support Staff

Description: Actively participates in caseload discussions with interprofessional colleagues to optimize patient/client outcomes; delegates tasks to support staff as appropriate; identifies patient/client complexity model of care when scheduling patients/clients with a physical therapist assistant versus a physical therapist.

Rating Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
	1	2	3	4	5	6
supervision/ Caseload	75 – 100% of the time patients/clients with and 100% of the time patients/clients with student may not carr	non-complex conditions managing complex conditions. The	than 50% of the time with non-complex co the time managing pa		independently while managing patients/clients with non-complex and complex conditions and	
Sample Benaviors (NOT an exhaustive list)	 delegation to supp personnel (e.g., P² Articulates most of responsibilities of t setting. Articulates who ca patient/client in the at hand. Communicates res and licensed person 	ate, and federal) related to oort staff and licensed TA). f the roles and those within the clinical an best serve the e clinical setting for the task spectfully with support staff onnel (e.g., PTA). om support staff on	 compliance with o to support staff an PTA). Begins to identify implement to addr in their plan of car Participates in cas patient/client outco expected. 	e tasks, as appropriate, and in rganizational/state/federal law d licensed personnel (e.g., changes that support staff may ess patient/client progression e. seload discussions to ensure omes are progressing as nation from support staff.	 Schedules patients/clients according to their plan of care. Identifies patient/client complexity model of care when scheduling patients/clients with a PT vs. PTA. Participates in caseload discussions with interprofessional colleagues about patient/client presentation, progression, and status to optimize patient/client outcomes. Anticipates and plans for the need for support staff. Supervises support staff and licensed personne (e.g., PTA). Monitors the outcomes of patients/clients receiving physical therapy services delivered by support staff and licensed personnel (e.g., PTA) and provides feedback on areas for improvement. Develops and delivers support staff training to address the management of specific patient/client populations. 	



Final PTA CPI BARS²

Rating Instructions

The key to accurately evaluating the student you are rating is to match their typical behaviors in the clinical setting to the descriptions in the rating scales. Four pieces of information are provided for each performance criterion: (1) a description of the performance criterion, (2) statements or "anchors" that describe the six performance levels (**Beginning Performance**, **Advanced Beginner**, **Intermediate Performance**, **Advanced Intermediate Performance**, **Entry-Level Performance**, and **Beyond Entry-Level Performance**), (3) percentage ranges for the student's level of required clinical supervision and caseload (except for the 'Professionalism' domain where these benchmarks are less applicable), and (4) example behaviors that further clarify the performance levels. It is critical to rely on these descriptors while making your ratings. Doing so will help to ensure that all students within and across programs are assessed using the same standards.

When making your ratings, think about all aspects of the student's clinical behavior during their current clinical placement. Then, find the example behaviors that best represent the student's typical clinical behavior or performance. For each performance criterion, example behaviors span across two performance levels (Beginning Performance – Advanced Beginner; Intermediate Performance – Advanced Intermediate Performance; Entry-Level Performance – Beyond Entry-Level Performance). Please remember that the example behaviors are provided to illustrate the types of behaviors associated with different levels of performance. Not all example behaviors may be relevant to the student you are rating, and they are not intended to be an exhaustive list of behaviors representative of all performance at that level. Rather, they are provided as examples of the types of behaviors that constitute different performance levels for each criterion.

When deciding between performance levels, consider where (a) the student's level of supervision and caseload falls on the rating scale and (b) the majority of the behaviors that best represent the student's performance fall on the rating scale. If the student's clinical performance spans multiple performance levels, consider where there is a preponderance of evidence and make your rating at that level.

Finally, when making your ratings, it is important to remember the following:

- Do not compare the student you are rating to other students. Each student's effectiveness
 should be determined by comparing their clinical behavior to the standards provided on the rating
 scales, and *not* by comparing them to others. In other words, you should make *absolute* rating
 judgments (e.g., comparing students to a specific, common standard), not *relative* rating
 judgments (i.e., comparing students to each other).
- Do not allow your general impression of a student to influence your ratings of the separate performance criteria. Rather, you should focus on one performance criterion at a time, not letting the student's overall clinical performance or the ratings you have given that student on other performance criteria affect your current performance criterion rating.
- Lastly, remember that every student has strengths and areas for development. Your ratings should clearly reflect the student's strengths and less effective clinical behaviors, as appropriate.

² While not reflected in the pages that follow, the stakeholders advised that a checkbox be included to denote any safety violations.



Professionalism: Ethical Practice

Description: Practices according to the Standards of Ethical Conduct; demonstrates respect for self, the patient/client, and colleagues in all situations.

ng Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
Sample Behaviors (NOT an exhaustive list)	the clinical setting.	should abide. al behaviors that occur in and accepts responsibility onfidentiality. espectful manner with	 of their clinical practice HIPAA). Articulates most of the Standards of Ethical (Reports clinical errors the CI. Gathers objective infor questions regarding a behaviors observed ir Seeks advice from CI potentially unethical b clinical setting. Seeks assistance with addressing unethical Devotes appropriate t 	Conduct. without prompting from prmation to support iny potentially unethical the clinical setting. on how to address behaviors observed in the n executing plans for behaviors. ime and effort to meet loes not rush a treatment	 clinical practice set Adheres to the eler Ethical Conduct. Consistently identifi Uses resources (e. committee) for addition conflicts. Recognizes the new physical therapy set underrepresented p Strives to provide p beyond expected statements 	ressing and resolving ethical ed and advocates for prvices to underserved and patient/client populations. watient/client services that go tandards of practice. or other healthcare providers



Professionalism: Legal Practice Description: Practices according to legal and professional standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management. **Beyond Entry-**Entry-Level Beginning Intermediate Advanced Advanced Performance Level Beginner Performance Intermediate Performance **Rating Scale** Performance Performance 2 3 5 4 6 Acknowledges that there are legal and Articulates most of the legal and professional Practices according to legal and professional ٠ ٠ . professional practice standards by which they practice standards related to patient/client care, standards including federal, state, and should abide. including federal, state, and institutional institutional regulations related to patient/client Identifies obvious violations of legal and regulations. care. professional practice standards performed by Gathers some objective information to support ٠ Readily identifies violations of legal and others in the clinical setting. questions regarding perceived illegal activity professional practice standards. observed in the clinical practice setting. Adheres to patient/client privacy laws and Gathers objective information to support any practice standards (e.g., keeps patient/client Reports clinical errors without prompting from CI. questions regarding perceived illegal activity ٠ (NOT an exhaustive list) documentation systems out of the line of sight Seeks advice from CI on how to address observed in the clinical practice setting. • of others, speaks in a low volume when violations of legal and professional practice ٠ Answers any questions to support reports of discussing a patient's/client's case). standards observed in the clinical setting. perceived illegal or unprofessional behavior. Sample Behaviors Discusses patient/client information only with Seeks appropriate sources to report any • Articulates and resolves cognitive dissonance others involved with that patient's/client's care. perceived violations of legal and professional that can arise during clinical training (i.e., practice standards observed in the clinical Identifies cognitive dissonance that can arise textbook care versus clinical care). during clinical training (i.e., textbook care setting. Sets an example for other healthcare providers ٠ versus clinical care). in their daily actions. Works within the scope of what would be expected of the licensure and practice for their state.



P	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
exhaustive list)	their clinical perfor practice knowledge Participates in plar performance and/o knowledge. Develops and prio long-term goals for practice skills. Takes initiative to o practice goals and	nning to improve clinical	 an effort to improv and/or clinical pra- ldentifies education that are relevant to Researches diagn in the clinic that and Revises previously goals for improvin participating in ad Implements new in and reflects on the interventions. Provides effective 	nal opportunities and resource o their clinical setting. oses and treatments encounte	 effort to improve Seeks out eviden Recognizes when with individuals we experience/experiment the patient's foster their own p the professional g Demonstrates the and/or share theii Shares articles of colleagues for ed their areas of interpatient/client pop 	 Self-assesses their clinical performance in an effort to improve patient/client care. Seeks out evidence-based research. Recognizes when referral to or consultation with individuals with greater experience/expertise is warranted in order to meet the patient's/client's needs. Participates in discussions with colleagues to foster their own professional growth or aid in the professional growth of their colleagues. Demonstrates the ability to effectively teach and/or share their professional knowledge. Shares articles or information with their colleagues for educational purposes within their areas of interest or within the needs of the patient/client population. 	



Interpersonal: Communication

Description: Demonstrates professional verbal and nonverbal communication with all stakeholders (e.g., patients/clients, caregivers, intra/interprofessional colleagues); adapts to diverse verbal and nonverbal communication styles during patient/client interactions; utilizes communication resources (e.g., interpreters) as appropriate; incorporates appropriate strategies to engage in challenging encounters with patients/clients and others; facilitates ongoing communication with physical therapist regarding patient/client care.

	Beginning Advanced			Advenced	Entry Lovel Boyond Entry		
Scale	Beginning Performance	Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
Rating S	[1]	2	3	4	5	6	
Supervision/ Caseload	100% of the time mana non-complex condition managing patients/clie conditions. The studen		less than 50% of the patients/clients with and 25 - 75% of the t patients/clients with student maintains a	non-complex conditions	independently under the direction/supervision of the PT while managing ex conditions. The 0 – 75% of a full-		
Sample Behaviors (NOT an exhaustive list)	 Introduces self and the role of PTA to the patient/client. Demonstrates basic proficiency in identifying barriers to effective communication with patient/client and/or their caregiver(s) (e.g., hearing impairment, aphasia, low vision, low health literacy). Typically demonstrates effective verbal and non-verbal communication with patients/clients in non-complex situations. Demonstrates basic proficiency in communicating appropriately with other healthcare providers. Identifies the patient's/client's preferred communication style and uses their preferred communication style throughout most of the episode of care. Accesses and begins using translation services with assistance. Discusses patient/client status with other healthcare providers. Differentiates between technical and layman terminology. Typically exhibits active listening for improved understanding. 		 verbal and non-verb patient/client. Uses appropriate tra (e.g., interpreter, sig Typically refrains fro patient/client. Communicates with patient/client care in care between clinici Asks the patient/clie their medical history information during ti Asks the patient/clie questions throughout 	om using technical jargon with the other clinicians regarding n order to facilitate a continuum of ians/disciplines. ent pertinent questions related to y and medical screening to gain	 communication with situations. Recognizes when a seeks external assi Demonstrates effect patients/clients in d topics, emotional si empathy in order to Establishes rapport caregiver(s) throug Facilitates ongoing therapist and the in regarding patient/cl Provides constructi effective verbal and 	tive verbal and non-verbal patients/clients in complex communication is ineffective and stance for mediation as needed. ctive communication with lifficult situations (e.g., difficult tuations) with respect and o meet patient's/client's goals. and trust with patient/client and h effective communication. communication with the physica tra/interprofessional teams ient care. ve feedback to others on d non-verbal communication. s situations of potential conflict.	



Interpersonal: Inclusivity

Description: Delivers physical therapy services with consideration for patient/client diversity and inclusivity for all regardless of age, disability, ethnicity, gender identity, race, sexual orientation, or other characteristics of identity; Provides equitable patient/client care that does not vary in quality based on the patient's/client's personal characteristics (e.g., ethnicity, socioeconomic status).

Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance
Rating S	1	2	3	4	5	6
Supervision/ Caseload	A student who requires clinical supervision 75 – 100% of the time managing patients/clients with non-complex conditions and 100% of the time managing patients/clients with complex conditions. The student may not carry a caseload or may begin to share a caseload with the clinical instructor.		A student who requires clinical supervision less than 50% of the time managing patients/clients with non-complex conditions and 25 - 75% of the time managing patients/clients with complex conditions. The student maintains at least 50 – 75% of a full- time, entry-level physical therapist assistant's caseload.		A student who is capable of working independently under the direction/supervision of the PT while managing patients/clients with non-complex and complex conditions. The student is capable of maintaining 100% of a full-time, entry-level physical therapist assistant's caseload.	
Sample Behaviors (NOT an exhaustive list)	 Typically demonstrates respect for diversity and inclusivity regardless of age, disability, ethnicity, gender identity, race, sexual orientation, etc. Displays empathy in most patient/client interactions. Identifies some individual or cultural differences that may be impactful to the patient/client. Demonstrates a general understanding of the patient's/client's background and is respectful regardless of their background. Asks the patient/client some questions to improve understanding of cultural group differences (e.g., homeless, mental health, individuals who are incarcerated). Responds professionally to patients/clients with conflicting values. 		 may be less familiar. Reflects on and identifie Seeks out resources to Recognizes socioecono 	I differences with which they es personal biases. manage personal biases. mic, psychological, and hat might impact care and	 quality based on the p characteristics, includi gender identity, race, s Assesses, reflects, an ongoing basis so that delivery of patient/cliei Demonstrates sufficiei cultures and backgrou and provide equitable Identifies when equita to a patient/client and course of care. Advocates for their pa to receive the appropr address their physical 	d manages own biases, on an they do not interfere with the nt care nt knowledge of various inds in order to effectively treat patient/client care. ble care is not being provided takes steps to correct their tients/clients in order for them iate course of care needed to



Technical/Procedural: Clinical Reasoning

Description: Strategically gathers, interprets, and synthesizes information from multiple sources to make effective clinical judgments; applies current knowledge and clinical judgement while supporting the physical therapist with clinical activities; ensures patient/client safety during the episode of care; presents a logical rationale for clinical decisions with all stakeholders (e.g., patients/clients, caregivers, intra/interprofessional colleagues).

Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
Rating S	1	2	3	4	5	6	
Supervision/ Caseload	A student who requires clinic 100% of the time managing p non-complex conditions and managing patients/clients wi conditions. The student may or may begin to share a case instructor.	batients/clients with 100% of the time ith complex not carry a caseload	A student who requires less than 50% of the tin patients/clients with no and 25 - 75% of the tim patients/clients with co student maintains at le time, entry-level physic	ne managing on-complex conditions e managing omplex conditions. The	managing patients/clients with non-comp and complex conditions. The student is capable of maintaining 100% of a full-time		
Sample Behaviors (NOT an exhaustive list)	 Performs chart review with assistance to determine a patient's/client's continued appropriateness for services. Identifies appropriate medical history and screening questions with assistance to ensure patient/client safety during the episode of care. Works with the CI to identify patient/client impairments, activity limitations, and participation restrictions. Selects basic therapeutic interventions that address the patient's/client's functional limitations. Explains their rationale for treatment choices according to the level of the experience and the didactic material covered up to that point. Articulates clinical thought processes using the International Classification of Functioning, Disability, and Health (ICF) model. Identifies all red flags that contraindicate treatment. Recognizes the need for clarification and seeks assistance from the CI as appropriate. 		 sources (e.g., subjectiv measures) for non-com screening. Makes sound clinical du interventions when mai non-complex disorders Identifies progression a Uses hypothetico-dedu a patient/client case wit Verbalizes rationale to Demonstrates the abiliti apply to patient/client c Recognizes when a CI 	nd regression situations. ctive reasoning to talk through th the CI. support specific interventions. y to use pattern recognition to	 multiple sources (e.g. tests, and measures) medical screening. Makes sound clinical interventions when m complex disorders. Identifies diverse interegress the patient's/c Acknowledges ineffect interventions based of Articulates alternative patient/client care. Articulates the benefit treatment options. Provides suggestions the plan of care citing Utilizes ongoing profe 	tiveness of chosen	



•				Therapeutic Exercis s, airway clearance, and inte			
Rating Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
Supervision/ Caseload	75 – 100% of the time patients/clients with and 100% of the time patients/clients with student may not carr	non-complex conditions	than 50% of the time with non-complex co the time managing pa conditions. The stud	es clinical supervision less managing patients/clients nditions and 25 - 75% of atients/clients with complex ent maintains at least 50 – try-level physical therapist	A student who is capable of working independently under the direction/supervision of the PT while managing patients/clients with non-complex and complex conditions. The student is capable of maintaining 100% of a full-time, entry-level physical therapist assistant's caseload.		
Sample Behaviors (NOT an exhaustive list)	 instructor. Reviews patient/client chart for previous treatment notes. Competently performs basic therapeutic interventions for non-complex cases. Maintains patient/client safety throughout the patient's/client's episode of care while performing therapeutic interventions. Student relies on assistance from CI to help educate patients/clients on basic therapeutic exercises. Student relies on assistance from CI to prescribe basic therapeutic techniques. 		 Competently performs therapeutic interventions for non-complex cases. Recognizes contraindications and precautions to prescribed interventions may require some cueing to apply knowledge appropriately for complex and non-complex cases. Makes adjustments to specific therapeutic exercises and techniques for non-complex cases. Identifies patient/client learning barriers and communicates to the supervising PT. 		 Competently performs therapeutic interventions for complex cases. Recognizes contraindications and precautions t prescribed interventions and applies knowledge appropriately for complex and non-complex cases. Makes adjustments to specific therapeutic exercises and techniques within the plan of care for complex cases to progress the patient's/client's status and reach goals. Instructs others with respect to intervention performance, expected results, and identifying the need for adjustments. 		



Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
Supervision/ Rating Caseload	A student who requires clinical supervision 75 – 100% of the time managing patients/clients with non-complex conditions and 100% of the time managing patients/clients with complex conditions. The student may not carry a caseload or may begin to share a caseload with the clinical instructor.		A student who requires clinical supervision less than 50% of the time managing patients/clients with non-complex conditions and 25 - 75% of the time managing patients/clients with complex conditions. The student maintains at least 50 – 75% of a full-time, entry-level physical therapist assistant's caseload.		independently under the direction/supervision of the PT while managing patients/clients with non-complex and complex conditions. The student is capable of maintaining 100% of a		
Sample Behaviors (NOT an exhaustive list)	•		 Performs mechanical and electrotherapeutic modalities for non-complex cases. Identifies when to adjust mechanical and electrotherapeutic modalities for non-complex cases dependent on patient/client feedback. Implements and recommends discontinuation of mechanical and electrotherapeutic modalities for non-complex cases. Implements and recommends discontinuation of mechanical and electrotherapeutic modalities for non-complex cases. Implements and recommends discontinuation of mechanical and electrotherapeutic modalities for non-complex cases. Implements and recommends discontinuation of mechanical and electrotherapeutic modalities for non-complex cases. Implements and recommends discontinuation of mechanical and electrotherapeutic modalities for non-complex cases. Implements and recommends discontinuation of mechanical and electrotherapeutic modalities for non-complex cases. Implements and recommends discontinuation of mechanical and electrotherapeutic modalities for non-complex cases. Implements and recommends discontinuation of mechanical and electrotherapeutic modalities for non-complex cases. 		c modalities for complex case adjust mechanical and c modalities for complex case tient/client feedback. ecommends discontinuation electrotherapeutic modalities		



	tion: Performs function ipment in a competent		home management, ind	cluding therapeutic activities;	performs application a	nd adjustment of devices	
Rating Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
Ratin		2	3		5	6	
Supervision/ Caseload	75 – 100% of the time patients/clients with and 100% of the time patients/clients with student may not carr	non-complex conditions e managing complex conditions. The ry a caseload or may	than 50% of the time with non-complex co the time managing p conditions. The stud	res clinical supervision less managing patients/clients onditions and 25 - 75% of atients/clients with complex ent maintains at least 50 – ntry-level physical therapist	A student who is capable of working independently under the direction/supervision of the PT while managing patients/clients with non-complex and complex conditions. The student is capable of maintaining 100% of a full-time, entry-level physical therapist assistant's caseload.		
Sample Behaviors (NOT an exhaustive list)	begin to share a caseload with the clinical		 use of the device o cases. Performs functiona complex cases. Progresses or regreequipment used with Begins to demonstrational training in (e.g., uneven grour) 	ent and/or caregiver(s) on the r equipment for non-complex I training activities for non- esses the need for device or th minimal cueing from the CI. rate the ability to safely perform n more complicated situations nd, car transfer). ders body mechanics.	 with the use of a complex cases. Performs function complex cases. Identifies, fits, and appropriate equip functional training (e.g., in the patient therapy gym, duri Progresses or regerquipment use. Maintains patient patient's/client's experiment solution function Instructs other teal handling skills, sale 	resses the need for device of client safety throughout the pisode of care while	



		ocumentation that includes viders; maintains organizat		/client's status, a description a mentation.	nd progressions of spe	ecific interventions used	
Rating Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
		2	3	4	5	6	
Supervision/ Caseload	A student who requires clinical supervision 75 – 100% of the time managing patients/clients with non-complex conditions and 100% of the time managing patients/clients with complex conditions. The student may not carry a caseload or may begin to share a caseload with the clinical instructor.		than 50% of the time in non-complex condition managing patients/cline The student maintains	es clinical supervision less managing patients/clients with ons and 25 - 75% of the time ents with complex conditions s at least 50 – 75% of a full- ical therapist assistant's	direction/supervision of the PT while		
Sample Behaviors (NOT an exhaustive list)	 documentation of au SOAP). Typically identifies t the documentation s components. Assists with product accurate information patient's/client's sta assessment, and pl Demonstrates awar appropriate docume provision of care. 	tus, interventions, an of care. eness of the need for entation as essential to the ation but takes considerable	 patient/client status assessment of pati progression toward Produces document of care that is accu Provides a rational and regression. 	ntation of the patient's/client's plan irate and error-free. e for patient/client progression nizes documentation in a	 justify the need f the patient/client Includes compar time and across in the assessme response to skill Provides docume external payer responses in quo of documentation review, goals acrosses 	rison statements across interventions/techniques int of the patient's/client's ed therapy. entation that supports equirements. uality improvement revie n (e.g., chart audit, peer	



		B	usiness: Resou	rce Management			
		e efficient delivery of physic uipment when supporting p		monstrates appropriate under es.	rstanding of time mana	agement and appropriate	
ig Scale	Beginning Performance	Advanced Beginner	Intermediate Performance	Advanced Intermediate Performance	Entry-Level Performance	Beyond Entry- Level Performance	
Supervision/ Rating Caseload	A student who requires clinical supervision 75 – 100% of the time managing patients/clients with non-complex conditions and 100% of the time managing patients/clients with complex conditions. The student may not carry a caseload or may begin to share a caseload with the clinical instructor.		than 50% of the time with non-complex co the time managing pa conditions. The stud	res clinical supervision less managing patients/clients inditions and 25 - 75% of atients/clients with complex ent maintains at least 50 – try-level physical therapist	independently under the direction/supervision of the PT while managing patients/clients with non-complex and complex conditions. The student is capable of maintaining 100% of a		
Sample Behaviors (NOT an exhaustive list)	•		 and documentation Adjusts patient/clien occur with assistan Begins to identify a patient/client cases Participates in qual 		 Effectively manages full caseload and documentation within allotted work hours. Demonstrates effective time management skills and effective use of clinical supplies throughout treatment sessions. Manages multiple tasks simultaneously while maintaining the time schedule of the clinic. Assists other staff as able within their own time constraints. Plans ahead to determine how to maintain efficiency while treating a patient/client independently, in a group setting, or during a co-treatment (coTx) with other therapy staff. 		



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