

COOPERATIVE WORK EXPERIENCE MANUAL

FOR

ATHLETIC THERAPY MAJORS

DEPARTMENT OF ATHLETIC TRAINING & NUTRITION

WEBER STATE UNIVERSITY

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Introduction

Your cooperative work experience is an opportunity to enhance your educational preparation and to obtain structured and professional experience in a safe, supervised work environment. The purpose of your cooperative work experience is to foster a spirit of independence and initiative as well as provide you the opportunity to develop confidence in both your personal and professional abilities and establish vital links with professionals in your field of study.

Your Cooperative Work Experiences may be:

- Taken for credit (1 – 6 semester credit hours).
- Part-time or full-time.
- On campus and/or off-campus.
- Paid or unpaid.
- Completed during the fall, spring, or summer

Your Cooperative Work Experience **MUST** be completed in the semester in which you have registered for the credit. Extenuating circumstances will be taken into consideration.

You **MUST** be registered for AT 4890 by the **4th week of the semester** in which you are registering for cooperative work experience.

For your cooperative work experience to be successful, a committed and collaborative partnership must exist among those involved in the experience (intern, site supervisor, Cooperative Work Experience coordinator).

As the key benefactor of this partnership, you must be willing to put forth an optimal performance.

Expectations

You will be expected to:

1. Pre-Cooperative Work Experience

- Meet with your faculty mentor or department advisor to discuss potential experiences within your field(s) of study. Prior to this meeting, review the contents of your *Cooperative Work Experience Manual*. Your cooperative work experience course instructor, will further discuss your professional preparation and potential Cooperative Work Experience opportunities.
- Propose potential work sites and review requirements for each site.
- Use available resources to obtain a cooperative work experience interview.
- After being accepted for a cooperative work experience, complete the *Cooperative Work Experience Contract* with the site supervisor and

Cooperative Work Experience course instructor. Note: There are two contracts, one for unpaid internships and one for paid internships. Obtain and review specific responsibilities with the site supervisor. The Cooperative Work Experience course instructor will determine the number of credit hours that you are eligible to enroll.

- Review work assignments, reports and evaluations with the cooperative work experience coordinator and then with the site-supervisor.
- Register for the cooperative work experience.
- Complete any required criminal background verification, immunizations, and drug screening per the Cooperative Work Experience setting (e.g., McKay Hospital and Ogden Clinic both require HBV vaccinations, criminal background check, and drug-screening.) The cost will be absorbed by the student or the setting depending on each location.

2. Cooperative Work Experience

- Meet individually with the course instructor to review the course packet, syllabus, requirements, and due dates.
- Accomplish to the best of your ability all of the daily duties and tasks as well as special projects assigned by the site supervisor which are related to the agreed upon expectations and responsibilities of the position.
- Maintain a professional appearance (this will be determined by your work site and should be strictly followed as you are representing yourself and the University) and behave in a professional manner.
- Adhere to professional ethics and follow the rules and regulations and performance requirements of the site's organization.
- Complete the academic requirements (reports and evaluations) as outlined in the Cooperative Work Experience Manual.
- Notify the Cooperative Work Experience course instructor of any changes in the original Cooperative Work Experience agreement or of any problems that develop during the work experience.
- If changes to established due dates are necessary, it is your responsibility to submit revised due dates to your Cooperative Work Experience course

instructor for approval. This must be done prior to the established due date.
Late reports will have a negative effect on your final grade.

Orientation and Initial Impression Report

Schedule an organization/company orientation session with your cooperative work site supervisor. Attempt to obtain information on or gain exposure to:

1. The work environment (e.g., facilities and equipment offered, various program areas, type of clientele atmosphere).
2. Your immediate cooperative work site supervisor(s) and associated colleagues.
3. The mission and vision of the organization/company.
4. Any policies, procedures, and expectations relating to you as an intern at the cooperative work site.
5. The type of marketing strategies, program development/offerings, and assessment/outcome materials related to your cooperative work experience.

In your report you will briefly describe what you have learned and what your initial impressions were of the organization.

Follow the sample below to develop your orientation and initial impression report.

ORIENTATION AND INITIAL IMPRESSION REPORT
Cooperative Work Experience
Organization
Location
Program Supervisor

Submitted by
Your Name
Course Number and Credit Hours
Date

Work Environment

Facilities (e.g., description, operation, maintenance)
Equipment (e.g., general, description, maintenance)
Programs/Opportunities (e.g., type, variety, scope)
Clientele
Atmosphere (e.g., functional, inviting, friendly)
Safety

Supervisors and Immediate Colleagues

Name
Position/Title
Areas of Responsibility

Mission/Philosophy/Vision

General Expectations/Requirements

Knowledge
Psychomotor/Professional Skills/Competence
Required Education/Experience

Materials

Programming offered
Assessment/outcome measures utilized
Marketing and sales strategies

Report Example

ORIENTATION AND INITIAL IMPRESSION REPORT

Cooperative Work Experience

Clinic Name

Address

Clinical Supervisor

Submitted by

Student

Date

Work Environment

Facilities: The hand therapy department is located in the south building next to physical therapy and orthopedics. Urology and Podiatry are located on the other side of the building. Physical therapy has a reception area, a large main exercise room with several tables, two private rooms, an aide station, and a separate room for hand therapy. The doctors' offices are located along the back walls that connect physical therapy to orthopaedics.

Equipment: The hand therapy room has 4 little tables, 6 chairs, barbells ranging from 1 to 8 lbs, a hammer, peg board, several sizes of theraband flex bars, and balls for exercise therapy. Hand therapy and physical therapy share two hydrocollators and two paraffin baths, which are stored in the hand therapy room. A combo US/e-stim is used as a modality and goes through a safety check every year. There is also a master-mite dryer, a heating pan, and supplies for casting and splinting.

Programs/Opportunities: none

Clientele: Patients are typically referred by their physician and are all across the age spectrum. We see approximately 15 to 20 patients a day, most of which are post-operative requiring splinting, casting, and therapy for their hand or wrist. We occasionally see patients requiring therapy for their elbow.

Atmosphere: The employees at the orthopaedic and physical therapy departments are a tight knit community focused around teamwork and effective communication. This creates a fun, upbeat atmosphere that patients enjoy while still remaining professional.

Safety: Used towels are disposed of in a soiled biohazard bag until laundry can be done. All electrodes, tables, and exercise equipment is disinfected between uses to reduce the risk of infection between one patient to another. When patients are performing their exercises there is always someone watching them to ensure that the patient is doing them properly and that they do not cause injury to themselves.

Supervisors and Immediate Colleagues

John Smith

OTR/L, CHT

Hand therapist duties include patient exercises, casting, and splinting

Rhonda Smith

OTR/L, CHT

Hand therapist duties include patient exercises, casting, and splinting

Shawna Johnson

DPT

Physical therapist duties include patient care and exercise programs

Mission/Vision

Vision: The place of choice where needs are met through quality health care.

Mission: To be the place of choice for patients, employees, and providers by remaining a thriving, independent, physician owned, multi-specialty group practice

General Expectations/Requirements

Knowledge: Anatomy, physiology, medical terminology, massage, estim, ultrasound

Psychomotor/Professional Skills/Competence: Communication skills, dexterity, ability to learn quickly

Required Education/Experience: No formal education required although it is preferred that one is pursuing a degree in health science and has a grasp of content listed under “knowledge”.

Materials

Programming offered: Clinic wide competitions, physician owned

Assessment/outcome measures utilized: Range of motion measurements and ability to perform tasks and movements needed for daily living

Marketing and sales strategies: Volunteers at local sporting events (ex. Ogden Marathon), bone pens, sale of braces, putty, and pain relief gel

Cooperative Work Experience Description Report

Once you have completed the orientation and initial impression report you will be required to develop a description of your Cooperative Work Experience. Include an explanation of your areas of work and professional responsibility, the tasks and duties you have been assigned within each area and the assignments or projects you will be involved in or responsible for. Follow the sample below to develop your Cooperative Work Experience description.

COOPERATIVE WORK EXPERIENCE DESCRIPTION REPORT

Cooperative Work Experience

Organization

Location

Program Supervisor

Submitted by

Your Name

Course Number and Credit Hours

Date

First Area of Responsibility (e.g., Reception Desk)

Assigned tasks and duties

Special assignments or projects

Immediate Supervisor

Second Area of Responsibility (e.g., Resistive Conditioning Area or Program)

Assigned tasks and duties

Special assignments or projects

Immediate Supervisor

Third Area of Responsibility (e.g., Aerobics Area or Program)

Assigned tasks and duties

Special assignments or projects

Immediate Supervisor

Fourth Area of Responsibility (e.g. Marketing and Sales)

Assigned tasks and duties

Special assignments or projects

Immediate Supervisor

Report Example

COOPERATIVE WORK EXPERIENCE DESCRIPTION REPORT

Cooperative Work Experience

Clinic Name

Address

Clinical Supervisor

Submitted by

Student Name

Date

First Area of Responsibility (assisted OT in getting patient ready for the day)

Assigned tasks and duties: We woke the patient, and helped them get out of bed. We would help them stand and go to the restroom, and clean up any mess if they urinated, or defecated on themselves. We would help them shower if needed. We would help them get dressed, brush their hair, and teeth. All of these tasks work on ROM, flexibility, coordination, balance, and strength. The thing that most patients had the hardest time doing is putting on their socks.

Special assignments or projects: The patients were usually stiff or have pain in the morning and would need help rolling to a seated position. We would work on getting them standing and moving to help lubricate their joints. I would be in charge of making sure that there were clean briefs, wipes, dirty laundry bag, and trash cans ready to use for the toileting. If showering I would make sure that we had enough towels to wash and dry with and make sure that they shower room floor as dry as possible for maximum safety while transferring.

Second Area of Responsibility (played balance challenge games)

Assigned tasks and duties: A lot of the patients that we saw have trouble with their balance because of muscle weakness, so playing games while standing helps to strengthen their gluteus, quads, and hamstrings. Playing games is a good distraction method and the patient will usually be able to stand longer than with just standing alone. We played all kinds of games: card games, bowling, 52 card pickup, bean bag tosses, peg boards, hide and go seek with cones, played catch, filled goody bags with snacks, and worked on puzzles.

Special assignments or projects: I would help set up the games and clean up afterwards. It was my responsibility to stand on one side of the patient and watch their balance and make sure to notice if they're were showing signs of getting tired, such as excessive swaying, heavy breathing, shaking, or not focusing on the games. I would also keep track of how long the person was standing.

Third Area of Responsibility (assisted OT in stretching for more ROM)

Assigned tasks and duties: Either in the gym or in the patient's room we would do PROM and AROM exercised to help the patient increase their ROM. This is a very important component in order to be able to do everyday tasks such as grooming, dressing, and toileting unassisted. Sometimes in the some cases, a "reacher" apparatus would be used on a short term basis to increase the ROM, due to pain, post-surgery precautions.

Special assignments or projects: I would be in charge of getting the area ready for stretching, by removing extra pillows and blankets, or foam blocks if in the gym. We

would try and remember to count as we would have the patient doing a stretch, but we would usually forget how many reps they were on because of conversing with the patient, as a distraction technique.

Fourth Area of Responsibility (remembering extra things)

Assigned tasks and duties: While working with the patients we would often have things that needed to be conveyed to either another therapist, nurse, CNA, or maintenance worker for that patient. These were not something that I was actually asked to do, I just did them naturally as we started working together, and then as the weeks went on Tawna would say “will you remember...”

Special assignments or projects: An example was the have hand rails installed on the bed for increased push off pressure to sit up, to ask nurses about pain or anxiety medications, tells the recreational therapist about a need for more activities to do in their rooms, remind CNA’s to turn a patients bed from the static position to un-static, or tell them about a possible pressure sore starting. Or it could have been as simple as remembering a pair of socks someone requested, a pen, to take a blood pressure, or a drink of water after a workout.

Expectations Report

In this section you are required to outline the expectations you and site supervisor(s) have established for this cooperative work experience. Describe how you plan to accomplish each expectation. Review these expectations and plans with your supervisor to determine if they are realistic and feasible. The expectations should be specific not broad objectives, attainable within the term of the cooperative work experience, measurable and capable of formative evaluation. Your expectation, much like a therapy goal needs to be measurable! This report should be viewed as a professional growth experience that provides you the opportunity to identify specific professional areas you need to develop or improve upon and outline plans to achieve them. Follow the sample below to develop your expectations report.

EXPECTATIONS REPORT Cooperative Work Experience Expectation Organization Location Program Supervisor

Submitted by
Your Name
Date

Professional Orientation

Expectation

Plan for Achievement (e.g., how will you met the expectation?)

Human Relations

Expectation

Plan for Achievement

Communication

Expectation

Plan for Achievement

Computer Literacy

Expectation

Plan for Achievement

Professional Knowledge

Expectation

Plan for Achievement

Psychomotor/Professional Skills/Competence

Expectation

Plan for Achievement

Teaching/Facilitating

Expectation

Plan for Achievement

Program/Resource Management

Expectation and Plan for Achievement

Report Example

EXPECTATIONS REPORT Cooperative Work Experience Expectation

Clinic Name

Address

Clinical Supervisor

Submitted by

Student

Date

Professional Orientation

Expectation: It is expected of me to arrive at the Hospital in the rehab office no later than 1 PM on the days I work. I am also expected to wear the clinic's black scrubs and have my name badge at all time.

Plan for Achievement: I leave to work at least 20 minutes before my shift begins to allow me enough time to arrive at the outpatient clinic, clock in, and walk to the hospital before my shift starts. I usually make it a habit of arriving at the hospital ready to go 10 minutes before 1 PM. In order to avoid forgetting my scrubs or my name tag, I wear my scrubs to school on the days I work and I leave my name tag in a drawer in the office at the hospital. It is particularly important that I have my name badge with me for every shift because it gives me access to different areas of the hospital.

Human Relations

Expectation: Be kind and courteous to all patients.

Plan for Achievement: I always treat my patients with respect. I always knock on the patient's door before entering and introduce myself to the patient before I begin any preparations for treatment. I then make sure that I treat each patient with the same respect and care that I would give a member of my own family in the hospital.

Communication

Expectation: Obtain consent from each patient before providing treatment and explain the procedure clearly.

Plan for Achievement: The first thing I do when I enter a room is introduce myself and ask how the patient is doing. I then will explain what we would like to do with him or her and ask if they are willing to participate in the treatment. We always respect a patient's choice not to participate in PT exercises.

Computer Literacy

Expectation: To bill the patients at the end of the day and update the day sheet and rehab tracking log.

Plan for Achievement: There are a lot of steps involved in billing and updating all of the information at the end of each day. When I first started working at the hospital, it was difficult to remember all of the steps. I had another aide walk me through the process the first couple of times and then I used paper cheat sheets for the next couple of weeks to ensure that I was entering in everything correctly. I am not quite comfortable with all of the computer procedures as an aide. I can bill very quickly and accurately.

Professional Knowledge

Expectation: To have a basic understanding of the rehabilitation process and how our treatments benefit our patients.

Plan for Achievement: While I am studying in my classes at Weber State, I make sure to relate the things I am learning to the patients I have worked with at the hospital. I have found it quite helpful to explain what I know to the patients I work with when they have questions. Each time I have to explain something to a patient, it helps me retain it better. I also ask the PT questions frequently to better understand the nature of each diagnosis we see and how rehab exercises will help the patient.

Teaching/Facilitating

Expectation: In general, the only teaching I am expected to do is teaching the patients about the benefits of rehabilitation exercises.

Plan for Achievement: As previously stated, I make it a point to explain the exercise produces clearly and simply to the patients we see. I explain to them why exercise is important and how it will help them return to normal activity.

Program/Resource Management

Expectation: I am expected to periodically clean and maintain the equipment as well as take inventory of items such as crutches, CPM pads, and braces.

Plan for Achievement: I complete tasks as assigned by the PT during my shifts. I work quickly to make sure the equipment is always ready to be used by the patients. When taking inventory, I count each item carefully to make sure that we do not run out of any equipment.

Midterm Status Report

This report should be written as an outcomes report. The purpose of a status report is to summarize what you have accomplished. This requires quantitative as well as qualitative information. For example, *Customer Service & Productivity*: How many clients have you worked with (e.g., average or total per day, week, and month)? How many conditioning sessions? Did you have a system in place to have them rate their satisfaction with your service (e.g., client or supervisor feedback)? Follow the sample below to complete your mid-term status report.

Midterm Status Report Cooperative Work Experience Organization Location Program Supervisor

Submitted by
Your Name
Date

Duties and Responsibilities

Area of Responsibility
Duties & Tasks
Special Assignments and Projects

Professional Orientation (Service)

Goals, Objectives, Opportunities
Quality Experiences and Performance
Customer Service and Productivity

Human Relationship

Teamwork & Leadership
Counseling

Communication and Computer Skills

Oral
Written
Computer (Equipment, applications, communication)

Professional Development

Knowledge
Psychomotor/Professional Skills/Competence
Technical Opportunities and Challenges

Facilitation and Resource Management

Teaching/Facilitating such as Patient education and/or peer education
Program and Resource Management

Sample of Midterm Status Report

Midterm Status Report
Cooperative Work Experience
Clinic Name
Address
Clinical Supervisor

Student Name
Date

Duties and Responsibilities

Area of Responsibility

My main area of responsibility is to make sure the patient goes through all of their exercises and does them with the proper form, as well as maintenance of the gym and all of the equipment.

Duties and Tasks

I am also in charge welcoming new patients and handling their paper work while they are getting treated. This could mean notes to their doctors, exercise home programs, physical assessment tests, and even discharge papers.

Special Assignments and Projects

One special assignment that I have is to make the patient a home exercise program after their first initial visit and later on if they are progress to a more labor intensive work-out. I do this by looking over their exercises they have currently and putting them together so they understand and can achieve them at home.

Professional Orientation

Goals, Objectives, Opportunities

I have been able to teach body mechanics to about 15 patients. I have also had the opportunity to assist in measuring and recording patient's range of motion and their progress.

Quality Experiences and Performance

While being able to teach body mechanics I have gotten better at using more common words to explain myself, that why the patient understands more clearly what I am saying to them.

Customer Service and Productivity

I have been able to call a number of hospitals for patient's MRIs, X-rays, and other imaging so the therapist has a better understanding of what he is seeing while he does his evaluation.

Human Relations/Communication

Teamwork and Leadership

Occasionally I will help the therapist brainstorm ideas for exercise the patients can do. I also make sure the therapist stays on tasks and doesn't spend too much time with just one patient the entire time. That way other patients feel more welcomed and appreciated. I do this by creating a flow in the gym so patients are always in contact with someone whether it is me or the therapist.

Counseling

I often counsel with patients about their body mechanics and things they should look out for in their day to day activities. By doing this, patients are more open, honest, and aware of what causes them to flare up. They also start to trust and rely on my opinion and instructions.

Communication and Computer Skills

Oral

My communications skill with patients as they come in as become so much more meaning the longer I work. I now ask more meaningful questions about what they do outside of therapy to see if they are doing any activities that would cause them to flare up.

Computer

I have made about 15 home exercise programs for patients, 15 diagnoses codes for insurance and HIPPA purposes, and fill data records for the company purposes. While being on the computer I have learned the proper technique way to format a note that is going to get sent to a doctor.

Professional Development

Knowledge (Conversancy)

My knowledge of seeing the steps of physical therapy and the protocols have increased since I have started working. I have seen many patients come in and improve right from the beginning and others that have started off slow. But I know what they must accomplish to move to the next steps in getting back to full function. I also know that every patient is different and there for you have to do different things to effect different people.

Skill (Competency)

Know the things from the previous paragraph have I have been able fine tune the way I teach exercises and the way I present myself to patients. I am more able to see what may cause patients pain and what they can actually when reinforced with positive attitude.

Facilitation and Resource Management

Teaching/Facilitating

I show patients how to do their exercises at home that they when they perform them they will be doing it correctly. I also make sure they have to proper equipment to complete the exercises.

Program and Resource Management

I have been in a charge of checking out equipment and making sure it gets returned. I have made a couple of calls to people to remind them they have to return an item and if they don't they will be held accountable to pay for.

FINAL OUTCOMES REPORT
Cooperative Work Experience
Organization
Location
Program Supervisor

Submitted by
Your Name
Date

Explain ten of the most important things have you learned during this internship.

Examples might include:

1. *Exercises you've learned how to instruct*
2. *Modalities you've learned how to apply*
3. *Communication strategies for effectively working with patients/clients/athletes*
4. *Computer, documentation, and/or billing procedures*
5. *Assessment skills – taking a history, physical assessment, strength testing, etc.*
6. *Surgical procedures you've observed*
7. *Different types of injuries you've seen and/or co-morbidities that changed the way you managed an injury that you were familiar with*

Reflections on your internship and choice of profession

1. *In what ways did this internship confirm or make you question your future career choice?*
2. *Describe one patient/athlete/client you worked with or observed that influenced your decision.*
3. *Based on what you've observed, what behaviors did you observe in your supervisor(s) that you hope to emulate in your own career? What behaviors will you make sure not to emulate?*
4. *If you are planning to do another internship or if you could redo this internship, what would you do differently?*
5. *What are you most excited to learn more about in graduate school?*
6. *What is your timeline for applying to graduate school? When do you hope to begin?*
7. *If you are not accepted into the type of graduate program you are seeking, what is your Plan B?*

SAMPLE FINAL OUTCOMES REPORT

Cooperative Work Experience

Clinic Name

Address

Clinical Supervisor

Submitted by

Student

Date

Explain ten of the most important things have you learned during this internship.

1. I think the most important thing I've learned during this internship is the definition of physical therapy. The PT defined it as "any form of treatment that is not surgical in nature or the injection of a chemical into the body." That's a huge field! The physical therapy that most people think of is orthopedic therapy but that is just one branch of the tree. Even sports medicine is just a specialization of physical therapy.
2. One of the first things I learned was how to make and update charts for patients. New patients are given folders with generic paperwork inside; it's their insurance carriers and injury circumstances that determine what else goes in to their files. If they are Workers Comp cases or have been injured in an auto accident they use single page daily sheets. Everyone else uses multi-day "flow sheets" that allows for the same amount of custom care but uses less paper.
3. Constantly I am learning how to read various medical terms and shorthand, as well as the PT's handwriting. Doing so improves my efficiency as an observer/helper because I don't have to interrupt the PT as often to have him read directional scripts and I can help the other aides visualize the exercises so they could direct patients during their exercises.
4. In my expectations report I set the goal for myself to learn how to adjust the exercise machines. I am pleased to report that I am getting better and better at this task. The NK chair doesn't baffle me anymore. It's just a matter of thinking about what exercise the patient needs to do then moving the bar to the correct side of the safety catch. The UBE hand bike is very easy to set up because we typically use manual mode. Finally, the Total Gym never gave me any trouble to start with. As long as I remember to undo the safety bar I can move the machine up and down for varying intensities.
5. An important safety fact I've learned is that burns are the most common accident in therapy settings. This means that it's especially important to monitor patients while they are warming up with moist heat to make sure that they don't get too hot.
6. I also set the goal to practice setting up and using the ultrasound and e-stim modalities. During this internship I've had the most practice with the ultrasound and I learned that it is unsafe to use ultrasound directly over the spine. This might cause a condition called cavitation (which is the formation of empty space in a solid object or bubbles in a liquid) which can cause air bubbles to form in the spinal fluid.
7. Another safety fact I've learned in a previous class and reaffirmed is to not put on ice a patient until the voltage levels have been adjusted for e-stim. This ensures that the patient doesn't receive too much current that causes tissue damage. Interestingly, though, I was informed that there are different forms of e-stim. I didn't know that TENS units and e-stim machine usually use a premodulated form of current (modulation is the "mixing" of electric waves). The electric waves that they use are sharp, box-like waves but e-stim machines also have the option of using

interferential currents that use sine waves. The benefit of using this form of stimulation is that these waves modulate inside the body and are better tolerated by patients.

8. On a business note, I discovered that a therapist cannot just open a practice. They must apply and get on to an insurance carrier's panel in order to treat patients. This is a great thing to keep in mind for when I get to the point in my life when I need to think about starting my own practice.
9. It should have been obvious, but I didn't know that all insurance companies operate a little differently and require different things to start and/or continue treatment. Some require a doctor's referral to authorize treatment, others require RSA (restorative services authorization/denial) forms during treatment, and still others allow only a certain number of visits.
10. It may seem trivial, but a very important lesson I've learned was to have more confidence in myself as a potential care giver. During this internship I've felt like a very tiny cog in the healthcare machine but as Disney's *The Incredibles* have said, the machine needs all the cogs to work. I may be an observer, but any and all help that I can offer helps increase the efficiency of patient care and thus improves that care.

Reflections on your internship and choice of profession

1. *In what ways did this internship confirm or make you question your future career choice?*
This internship confirmed for me my desire to help and care for patients. I feel so terrible for patients who come to us in pain and I'm always happy to see their progress. This a great field for me to be in because I would be able to help people live better lives.
2. *Describe one patient/athlete/client you worked with or observed that influenced your decision.*
There isn't one person in particular that has influenced my decision. I like helping all of the patients and seeing them progress. Really, I think the people who have influenced me the most are my co-workers. Working with people with different education and fields of expertise has shown me that I don't have to go straight up the mountain to a physical therapy degree. I can take the scenic route, get other forms of education, and then work on climbing the mountain.
3. *Based on what you've observed, what behaviors did you observe in your supervisor(s) that you hope to emulate in your own career? What behaviors will you make sure not to emulate?*
I sincerely hope to emulate the PT's caring spirit and his working knowledge. An open mind, like his, will also serve me well with new and alternate ways to care for patients. As for not doing something, I hope I don't put off paper work like he sometimes does. It makes it a little bit harder to get patient charts going when we are still waiting for the PT to sign off on their last appointment.
4. *If you are planning to do another internship or if you could redo this internship, what would you do differently?*
I would definitely do a hands-on internship. I've learned a lot this semester already but I know that I could learn much more if I had physical practice treating patients.
5. *What are you most excited to learn more about in graduate school?*
I don't know. There is so much to learn and this field changes often. With technology advancing like it is it would be amazing to learn how to apply it to treatment. Maybe

something will happen to me that will develop a desire to specialize in something, like hand therapy or sports medicine.

6. *What is your timeline for applying to graduate school? When do you hope to begin?*
My timeline is now longer than I originally thought. My new plan after taking one year off to rest and recuperate is to get my massage therapy license, work, get my PTA license, work some more, and then consider graduate school. All of this will probably take ten years.

If you are not accepted into the type of graduate program you are seeking, what is your Plan B?
I'm not sure what my Plan B would be because graduate school is so far down my projected road. I want to get other forms of education before seeking out a graduate program so they would probably be what I fall back on. These would give me the security I need to keep trying to get accepted into a graduate program.

Midterm Performance Evaluation

At some point near the middle of the semester, the student will have their supervisor complete the evaluation form below. The student will review the evaluation with their supervisor and then both the student and supervisor will sign the form. The student will then scan and upload the completed form in Canvas. This evaluation is not required for students completing only 1 credit hour.

MIDTERM PERFORMANCE EVALUATION (Completed by Internship Supervisor)

Supervisor Name, Credentials: _____ Internship Site: _____

Student Name: _____ Semester _____ Year _____ Date _____

| KEY AREAS | Semester | | | | | | | | | | Year | Date | Rating Comments or No Opportunity to Observe (N/A) |
|---|----------------|---|---------------|-----|----------|-----|---------------|-----|-----------|-----|-------|------|--|
| | Unsatisfactory | | Below Average | | Average | | Above Average | | Excellent | | Score | | |
| A. Professional Practice Dependable [<input type="checkbox"/>] Punctual [<input type="checkbox"/>] Productive [<input type="checkbox"/>] Work Ethic [<input type="checkbox"/>] Appearance, Dress, Grooming [<input type="checkbox"/>] Customer Service, Manner [<input type="checkbox"/>] | 0 | 1 | 1.5 | 2.0 | 2.5 | 3.0 | 3.5 | 4.0 | 4.5 | 5.0 | _____ | | |
| B. Human Relations 1. Interpersonal: Teamwork[<input type="checkbox"/>] Leadership[<input type="checkbox"/>] Maturity[<input type="checkbox"/>] Coachable[<input type="checkbox"/>] Enthusiasm/Energetic[<input type="checkbox"/>] 2. Patient Interaction: Listening ability[<input type="checkbox"/>] Advising ability[<input type="checkbox"/>] Genuine concern[<input type="checkbox"/>] Relates to Diverse Patients[<input type="checkbox"/>] Empathetic[<input type="checkbox"/>] | 0 | 1 | 1.5 | 2.0 | 2.5 | 3.0 | 3.5 | 4.0 | 4.5 | 5.0 | _____ | | |
| C. Communication & Computer Skills 1. Oral: Clear[<input type="checkbox"/>] Articulate[<input type="checkbox"/>] Relevant[<input type="checkbox"/>] 2. Written: Content[<input type="checkbox"/>] Grammar[<input type="checkbox"/>] Coherent[<input type="checkbox"/>] Professional [<input type="checkbox"/>] Clear, concise[<input type="checkbox"/>] Accurate[<input type="checkbox"/>] 3. Computer Literacy: Spreadsheet[<input type="checkbox"/>] Database[<input type="checkbox"/>] Power Point[<input type="checkbox"/>] Social Media[<input type="checkbox"/>] | 0 | 1 | 1.5 | 2.0 | 2.5 | 3.0 | 3.5 | 4.0 | 4.5 | 5.0 | _____ | | |
| D. Professional Development/Performance 1. Background Knowledge: Nutrition[<input type="checkbox"/>] Aerobic Conditioning[<input type="checkbox"/>] Resistive Training[<input type="checkbox"/>] Health Education/Promotion[<input type="checkbox"/>] Exercise Progression[<input type="checkbox"/>] Testing Procedures[<input type="checkbox"/>] Therapy: Modalities[<input type="checkbox"/>] 2. Skill/Competency: Exercise Progression[<input type="checkbox"/>] Testing Procedures[<input type="checkbox"/>] Therapy: Modalities[<input type="checkbox"/>] 3. Technical: (Operation, Maintenance) Exercise Equipment[<input type="checkbox"/>] Assessment Equipment [<input type="checkbox"/>] Therapy Equipment[<input type="checkbox"/>] | 0 | 1 | 1.5 | 2.0 | 2.5 | 3.0 | 3.5 | 4.0 | 4.5 | 5.0 | _____ | | |
| OVERALL PERFORMANCE RATING | E | | D | | C | | B | | A | | | /45 | |

Supervisor's Signature _____ Date _____

Student's Signature _____ Date _____

Evaluation of Cooperative Work Experience Setting and Site Supervisor (to be completed by the Student)

Cooperative Work Experience Site: _____ **Site Supervisor:** _____ **Term/Year:** _____
Type of Clinic: _____ **Full Address:** _____
Phone #: _____ **Supervisor's Credentials: (AT, PT, OT, MD, DO, PA, etc.)** _____

| EVALUATION CATEGORIES | RATING | | | | | COMMENTS, SUGGESTIONS, CONSTRUCTIVE CRITICISM |
|---|----------|----------|----------|----------|-----------|--|
| | Poor | Weak | Adequate | Good | Excellent | |
| PREPARATION FOR COOPERATIVE WORK EXPERIENCE | | | | | | |
| Requirements for intern position clearly articulated | 1 | 2 | 3 | 4 | 5 | |
| 1. Knowledge | 1 | 2 | 3 | 4 | 5 | |
| 2. Psychomotor/Professional Skills | 1 | 2 | 3 | 4 | 5 | |
| QUALITY OF SETTING | 1 | 2 | 3 | 4 | 5 | |
| 1. Quality of facilities | 1 | 2 | 3 | 4 | 5 | |
| 2. Quality of equipment | 1 | 2 | 3 | 4 | 5 | |
| 3. Quality of facility personnel | 1 | 2 | 3 | 4 | 5 | |
| EXPERIENCES & OPPORTUNITIES | | | | | | |
| Rate your overall experiences with your cooperative work experience setting and site supervisor relative to the following area: | | | | | | |
| 1. Professional Orientation | 1 | 2 | 3 | 4 | 5 | |
| 2. Human Relations | 1 | 2 | 3 | 4 | 5 | |
| 3. Communication/Computer Skills | 1 | 2 | 3 | 4 | 5 | |
| Oral | 1 | 2 | 3 | 4 | 5 | |
| Written (reports, documentation) | 1 | 2 | 3 | 4 | 5 | |
| Computer | 1 | 2 | 3 | 4 | 5 | |
| 4. Professional Development | 1 | 2 | 3 | 4 | 5 | |
| Knowledge (conversancy) | 1 | 2 | 3 | 4 | 5 | |
| Skill (competency) | 1 | 2 | 3 | 4 | 5 | |
| Technical equipment | 1 | 2 | 3 | 4 | 5 | |
| 5. Facilitation & Resource Mngmnt | 1 | 2 | 3 | 4 | 5 | |
| Teaching and Facilitation | 1 | 2 | 3 | 4 | 5 | |
| Ability to teach/educate patients about their rehab/recovery | 1 | 2 | 3 | 4 | 5 | |
| Feedback from site supervisor(s) | 1 | 2 | 3 | 4 | 5 | |
| Areas of improvement | 1 | 2 | 3 | 4 | 5 | |
| 6. Administrative/Management | 1 | 2 | 3 | 4 | 5 | |
| Plan & organize | 1 | 2 | 3 | 4 | 5 | |
| Implement | 1 | 2 | 3 | 4 | 5 | |
| Promote, market, sale | 1 | 2 | 3 | 4 | 5 | |
| Financial (budget) | 1 | 2 | 3 | 4 | 5 | |
| Legal | 1 | 2 | 3 | 4 | 5 | |
| OVERALL RATING | 1 | 2 | 3 | 4 | 5 | Submitted by: |

Weber State University
Department of Athletic Training and Nutrition
Cooperative Work Experience Intern Performance Evaluation

Dear Cooperative Work Experience Site Supervisor,

The following information is provided to assist you with helping us evaluate the performance of our interns. The profile is broken down into five major performance categories. On the attached form evaluate only those items that apply.

When the evaluation has been completed, please have a meeting to review it with your intern to expand on your commendations, recommendations, and concerns. Once you have had the meeting, please have the intern sign the form, indicating that they have had an opportunity to review it with you. The student will then submit the evaluation form to the course instructor.

A. Professional Orientation

1. Did the intern demonstrate a positive professional perspective through:
 - a. Their personality, attitude, and stable nature?
 - b. The goals and objectives they attempted to accomplish?
 - c. Innovative and developmental opportunities they were willing to undertake?
2. Was the intern principle oriented (e.g., demonstrate integrity, honesty, quality service, responsibility, accountability)?
3. In practice was the intern dependable, punctual, productive, customer/client/patient service driven and presentable in his/her attire and appearance?

B. Human Relations

1. Did the intern demonstrate desirable interpersonal skills through their teamwork, leadership, coachable nature, mature and friendly interaction, as well as enthusiastic and energetic attitude?
2. Was the intern's counseling/patient interaction skill adequate (e.g., ability to listen, advise, relate, remain focused and demonstrate genuine concern)?

C. Communication and Computer Skills

1. Was the intern effective in their oral communication (e.g., clear, concise, focused and relevant)?
2. Was the written communication submitted by the intern of acceptable quality (e.g., content, grammar, error free, clinical documentation, medical terminology, SOAP notes)?
3. Did the intern demonstrate adequate computer literacy? Was he/she capable of using word processing, database, spreadsheet, and Internet applications/sources?

D. Professional Knowledge and Skill

1. Was the intern conversant in areas such as: nutrition, aerobic conditioning, flexibility, resistive training, health promotion, and therapy?
2. How would you rate the skill or competency of the intern related to nutritional analysis, leading aerobic activities, performing as a personal trainer or coach, therapist?
3. Was the intern technically competent? How well did they operate/manage media, exercise, assessment, and therapy equipment?

E. Facilitation and Resource Management

1. How effective was the intern in facilitating and teaching? Was he/she a capable planner, organizer, manager, instructor/guide and evaluator?
2. How effective was the intern in program and resource management? Did he/she plan, organize, implement, and evaluate effectively? Were the intern's budgeting, marketing and sales skills acceptable?

Your evaluation and feedback is vital to the continued development of both the intern and our program. Thank you for providing this Cooperative Work Experience opportunity to our student.

Respectfully,

Valerie W. Herzog, EdD, LAT, ATC
Athletic Therapy Program Director
1435 Village Drive, Dept. 2801
Ogden, UT 84408
801-626-7656
valerieherzog@weber.edu

Cooperative Work Experience Student Performance Evaluation Profile

(to be completed by the Site Supervisor)

Profile of: _____ ID#: _____ Term _____ Year: _____ Date: _____

Cooperative Work Experience Site: _____

Site Supervisor: _____

| FACTORS/COMPONENTS | Standard Performance Scale (Weighted) | | | | | | | | | | Score | RATING COMMENTS | |
|---|---------------------------------------|---|---|---|---|---|---|---|---|----|-------|---|--|
| | E | D | C | B | A | | | | | | | | |
| A. Professional Orientation | | | | | | | | | | | | | |
| 1. Perspective: Attitude/Personality[] Innovation[] Stability[] Development[] Goals & Objectives[] | 0 | 1 | 2 | 3 | 4 | 5 | | | | | | _____ | |
| 2. Principles: Responsibility/Accountability[] Integrity[] Service[] Quality/Excellence[] | 0 | 1 | 2 | 3 | 4 | 5 | | | | | | _____ | |
| 3. Practice: Dependable[] Punctual[] Productive[] Appearance[] Work ethic[] Customer service[] | 0 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | _____ | | |
| B. Human Relations | | | | | | | | | | | | | |
| 1. Interpersonal: Teamwork[] Leadership[] Mature[] Coachable[] Friendly[] Enthusiasm/Energetic[] | 0 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | _____ | | |
| 2. Counseling/Patient Interaction: Listening ability[] Advising ability[] Relates to others[] Focus[] Genuine concern[] Energetic[] Enthusiastic[] | 0 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | _____ | | |
| C. Communication & Computer Skills | | | | | | | | | | | | | |
| 1. Oral: Clear[] Focused[] Relevant[] | 0 | 1 | 2 | 3 | 4 | 5 | | | | | | _____ | |
| 2. Written: Content[] Grammar[] Freedom from errors[] Clinical Documentation: Medical terminology[] SOAP notes[] Clear, concise[] Accurate[] | 0 | 1 | 2 | 3 | 4 | 5 | | | | | | _____ | |
| 3. Computer Literacy: Word Processing[] Spreadsheet[] Database[] Internet[] | 0 | 1 | 2 | 3 | 4 | 5 | | | | | | _____ | |
| D. Professional Development/Performance | | | | | | | | | | | | | |
| 1. Knowledge/Conversancy: Nutrition[] Flexibility[] Aerobic Conditioning[] Resistive Training[] Health Education/Promotion[] Therapy: Modalities[] Exercise Progression[] Testing Procedures[] | 0 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | _____ | | |
| 2. Skill/Competency: Nutrition Analysis[] Leading Aerobics[] Resistive Training[] Therapy: Modalities[] Exercise Progression[] Testing Procedures[] | 0 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | _____ | | |
| 3. Technical: (Operation, Maintenance) Media Equipment[] Exercise Equipment[] Assessment Equipment[] Therapy Equipment[] | 0 | 1 | 2 | 3 | 4 | 5 | | | | | | _____ | |
| E. Facilitation & Resource Management | | | | | | | | | | | | | |
| 1. Teaching/Facilitating: Plan/Organize [] Manage [] Instruct/Guide [] Evaluate [] | 0 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | _____ | _____ Evaluator's Signature and Date | |
| 2. Program & Resource Management Plan/Organize [] Implement [] Evaluate [] Budget [] Market [] Sales [] | 0 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | _____ | _____ Student's Signature and Date | |
| OVERALL PERFORMANCE RATING | E | D | C | B | A | | | | | | | /100 Estimated Grade_____ | |

AT 4890 Internship Checklist

| | |
|--|---|
| | Weekly Schedule |
| | Orientation and Initial Impression Report |
| | Coop Work Experience Description Report |
| | Expectations Report |
| | Midterm Status Report |
| | Final Outcomes Report |
| | Midterm Performance Evaluation |
| | Evaluation of Coop Work Experience Setting and Supervisor Report |
| | Cooperative Work Experience Student Performance Evaluation Profile (to be completed by the Site Supervisor) |
| | Hours log – signed by supervisor |