



Professional Diploma in Athletic Training

Clinical Education Manual (2024-25)

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Programme Objectives

CUHK Athletic Training (AT) programmes seeks to be a leader in athletic training education in Hong Kong by offering a program that will develop health care providers in athletic training who exhibit the highest levels of clinical scholarship, are dedicated to patient advocacy and social responsibility in health care, practice patient-centered care, and strive to address the burden of injury through a public health lens. The programmes are dedicated to service, scholarship and developing socially responsible clinicians.

Upon completion of this programme, AT students will:

- 1) Comprehend the function of an athletic trainer within the healthcare system.
- 2) Exhibit suitable verbal and written communication abilities among medical professionals.
- 3) Formulate and implement strategies to reduce the occurrence and/or intensity of injuries and illnesses.
- 4) Show the necessary clinical skills to accurately diagnose patients for treatment and referral.
- 5) Utilise clinical and decision-making abilities to address acute injuries and illnesses, including emergencies.
- 6) Evaluate patient condition and devise treatment and rehabilitation plans in line with contemporary International Classification of Functioning, Disability and Health (ICF) models.
- 7) Show clinical scholarship through the evaluation and application of evidence to influence athletic training practice.
- 8) Uphold the highest clinical practice standards by assessing the quality of patient care using patient-reported outcome measures.
- 9) Use research methods to formulate and assess clinical questions relevant to practice-based research environments, demonstrating an understanding of ethical research practice.

Overview of Clinical Education (CE) Courses

The Clinical Education (CE) courses (AT11, AT21, AT31) aim to provide athletic training students with extensive hands-on clinical experience, teaching and interaction with preceptors in and out of the classroom. Applying the theories of athletic training under the guidance of a clinical preceptors facilitates the transition of the student to an entry-level practitioner.

Each placement setting allows the student to observe and be involved with the healthcare of athletes/ patients across different lifespans, which is meant to supplement classroom presentation of theoretical materials and further professional skill development. During both practices and competitions, the athletic training students will be involved in injury prevention, recognition, management, and rehabilitation of athletic injuries for those athletes/patients in care.

Students are encouraged to adopt a holistic approach in clinical reasoning and practice, together with systematic and logical evaluation skills. Students are expected to become more independent and competent in handling both on-field and in-house clinic cases as they gain more clinical experience, communicative and evaluative skills.

The CE courses are designed according to CAATE standards:

- Standard 14: A program's clinical education requirements are met through graduate courses and span a minimum of two academic years.
- Standard 15: A program's athletic training clinical experiences and supplemental clinical experiences provide a logical progression of increasingly complex and autonomous patientcare and client-care experiences.
- Standard 16: The clinical education component is planned to include at least one athletic training immersive clinical experience.
- Standard 17: program's clinical education component is planned to include clinical practice opportunities with varied client/patient populations. Populations must include clients/patients
 - throughout the lifespan (for example, paediatric, adult, elderly),
 - of different sexes,
 - with different socioeconomic statuses,
 - of varying levels of activity and athletic ability (for example, competitive and recreational, individual and team activities, high- and low-intensity activities),
 - who participate in non-sport activities (for example, participants in military, industrial, occupational, leisure activities, performing arts).
- Standard 18: Students gain experience with patients with a variety of health conditions commonly seen in athletic training practice.
- Standard 47: The number and qualifications of preceptors are sufficient to meet the clinical education needs of the program.

Clinical Placement Rotations

The CE courses (AT11, AT21, AT31) provide an environment for students to put forward knowledge and theories into practices. The 3 different clinical placement settings throughout programme have its corresponding educational focuses according to different practice settings, various client/ patient populations and health conditions.

All components of clinical placements are compulsory.

The schedules of clinical education courses may be subject to changes, depending on the availability of placement centers.

Course code	Placement settings
AT11	Sports Events/ Overseas visiting
AT21	Professional sports teams/ clubs
AT31	Musculoskeletal clinics

Table 1 Details of each CE rotation settings

All clinical placements are assigned by programme coordinators, according to teaching schedules and align with students' needs. The course components are planned to include students' clinical practice opportunities with different populations of clients/ patients (throughout lifespan, genders, socioeconomic statuses, variable athletic ability and level of activity in daily living etc.)

AT11 will take place in variety of local/ international sports events take place in Hong Kong, where the caseload and clinical practices could be more complex and integrated skills sets are required. AT21 will have a focus on on-field support and emergency management (training and games) for professional or national level athletes. AT31 will take place in a private physiotherapy MSK clinics, which focuses on helping students in formulating clinical reasoning and practicing basic manipulative skills and prescription of therapeutic exercises. All the clinical education courses span throughout the whole academic years. This arrangement of clinical placement is intended to better prepare the students to work as an athletic trainer in different settings, serving patients/ athletes with a variety backgrounds/ needs after graduation.

Clinical placement site(s)	Standard 17	Standard 18
Sports events	<ul style="list-style-type: none"> ✓ Patients through the lifespan ✓ Different sexes ✓ Different socioeconomic statuses ✓ Varying levels of activity and athletic ability 	<ul style="list-style-type: none"> ✓ Injury prevention ✓ Urgent and emergent care ✓ Orthopaedics ✓ Rehabilitation ✓ Behavioural health ✓ Performance enhancement
Professional sports team/ clubs	<ul style="list-style-type: none"> ✓ Different sexes ✓ Different socioeconomic statuses ✓ Varying levels of activity and athletic ability 	<ul style="list-style-type: none"> ✓ Injury prevention ✓ Urgent and emergent care ✓ Orthopaedics ✓ Rehabilitation ✓ Behavioural health ✓ Performance enhancement
MSK clinics	<ul style="list-style-type: none"> ✓ Patients through the lifespan ✓ Different sexes ✓ Different socioeconomic statuses ✓ Varying levels of activity and athletic ability ✓ Who participate in non-sports activities 	<ul style="list-style-type: none"> ✓ Primary care ✓ Orthopaedics ✓ Rehabilitation ✓ Performance enhancement

Table 2 Describes how different clinical placement settings help students to accomplish (CAATE standard 17 and 18)

Students' work is closely supervised by the clinical preceptors at the early stage of placement. As it progresses, students have acquired fundamental skills, whereas caseload becomes heavier and more complex, higher degree of work independence and competence is expected from students. The course will include evaluation and assessment of an athletic training student's skills, along with monitoring the clinical rotations, by the clinical preceptors. Additional assignments may be requested in order to enhance students' learning outcomes.

Throughout the clinical placement course, students are encouraged to maintain regular communication with their clinical preceptors regarding learning or other problems. In case of need in counselling or remedial teaching, students can look for help and advice from module coordinators accordingly. The student is referred to the most appropriate professional to deal with the problem if in concern.

Students who fail to pass the clinical placement/ achieve a satisfactory level of performance during placement will be awarded a grade 'F'. The programme coordinator, clinical preceptors, university faculty concerned, and the student, will devise arrangements and design to retake placement at a different location. Pre-placement guided learning and assistance will be organised. This remedial placement will take place at a different clinical centre.

To be considered eligible to practice, a student must successfully complete **a minimum of 350 contact hours** (subject to changes according to affiliated teams' requests/ training schedules/ fixtures) in appropriate physiotherapy/ athletic training settings before they can be considered eligible for graduation.

Roles and Responsibilities

Programme coordinators

- Organise all arrangements of the clinical placements in all 3 clinical education settings.
- Assign students to clinical education sites and monitor the performance of both the staff and students regarding all arrangements.
- Ensure open channels for communication are maintained with both parties.
- Monitor the assessment procedures and grading criteria among different clinical preceptors to ensure equity and consistency.
- To monitor and review the Program implementation, and propose suitable changes
- To handle staff feedback and enquiry on the Program.
- Organise training workshops for newly appointed clinical preceptors. Regular meetings will also be held with all the clinical preceptors in each semester to plan and discuss issues/ enquiry about the arrangement of the clinical placements/ programme.

Clinical preceptors

- Supervise students during clinical education.
- CAATE supervision standards and guidelines are defined as follows:
 - Direct Supervision: Constant visual and auditory interaction between the student and the preceptor must be maintained. The preceptor must be physically present for proficiency instruction and evaluation.
 - Supervision: Daily personal/verbal contact at the site of supervision between the athletic training student and the preceptor who plans, directs, advises, and evaluates the students' athletic training field experience. The preceptor shall be physically present to intervene on behalf of the athlete/patient.
- Provide instruction and assessment of the current knowledge, skills, and clinical abilities designated by the CAATE.
- Provide instruction and opportunities for the student to develop clinical integration proficiencies, communication skills and clinical decision-making during actual patient/client care.
- Provide assessment of athletic training students' clinical integration proficiencies, communication skills and clinical decision-making during actual patient/client care;
- Facilitate the clinical integration of skills, knowledge, and evidence regarding the practice of athletic training.
- Demonstrate understanding of and compliance with the CUHK's policies and procedures.

Students

- Demonstrate acceptable standards of safety at all time
- Demonstrate care and compassion for the client and respect the privacy and confidentiality of the client.
- Maintain all records and comply with the administrative procedures and duties specified by the clinical preceptors.
- Work out a training plan with supervisors and participate actively.
- Maintain a professional standard of dress code and behaviours.
- Responsible for own competency improvement and professional development.

Practice Expectations For A Competent Athletic Trainer

An athletic trainer should be able to identify and assess the health needs of individuals, groups, and the delivery of clinical service.

Regarding the delivery of athletic training service:

- Identify and assess the health needs of individuals, groups and communities including screening, prevention, and wellness programmes.
- Evaluate individual treatment, plan of care and/or intervention programme to determine the optimal treatment effects and outcomes.
- Select and appraise published studies and information on techniques and technology and know how to apply the relevant findings to his/her AT practice, research and education.
- Demonstrate professional behaviour and effective written, verbal and non-verbal communication with clients, caregivers, colleagues and the general public.
- Incorporate an awareness of the economic, psychological, cultural, and sociological factors that influence the context of athletic training practice.

Regarding patient/ client care:

- Demonstrate a holistic patient-centered treatment approach.
- Demonstrate the ability in clinical reasoning, clinical judgement, and reflective practice.
- Propose a clinical impression according to clients' physical, psychological, and environmental factors.
- Collaborate with clients, family members, other health care providers and community-based organisations for optimal client care.
- Establish achievable functional/ treatment goals with the patient/ clients within a specific time period and limited resources.
- Ensure the implemented treatment/ plan of care is safe, effective, and cost-effective.
- Supervise the delegated supporting personnel and monitor the care plan in response to client status.
- Communicate and interact with clients/ family members, other healthcare providers/ community organisations for the purpose of coordinating activities for optimal client care.

Regarding professionalism:

- Formulate and implement a plan for personal and professional career development based upon self-assessment, reflection, and feedback from others.
- Participate in clinical education.
- Recognise her/his responsibility to maintain and promote the highest professional and ethical standard and to contribute to the development of the profession.

Requirements Prior to Clinical Placement

Students should have completed the following courses/ reading the guidelines published by the government and collect proof of certificates before attending their first clinical education rotation.

- Basic Life Support and CPR Certification organised by locally accredited organisations in Hong Kong (e.g., St John Ambulance in Hong Kong/ Hong Kong Red Cross)
 - <https://www.stjohn.org.hk/en/training-courses/course-list>
 - <https://training.redcross.org.hk/tms/en/fatCourseDetails.jsp?courseCode=ACPR>
- Certificate in First Aid organised by locally accredited organisations in Hong Kong (e.g., St John Ambulance in Hong Kong/ Hong Kong Red Cross)
 - <https://www.stjohn.org.hk/en/training-courses/course/first-aid-certificate>
 - <https://training.redcross.org.hk/tms/en/fatCourseDetails.jsp?courseCode=SFA>
- Proof of Sexual Conviction Record Check (SCRC)
 - https://www.police.gov.hk/ppp_en/11_useful_info/scrc.html
- Infectious control training organised by relevant organisations (e.g. Department of Health/ Hospital Authority in Hong Kong)
 - <https://www.chp.gov.hk/en/resources/346/365.html>
 - <https://www.chp.gov.hk/en/healthprofessionals/30/index.html>

For further details, please refer to Policy & Procedures Manual.

General Regulations During Clinical Placement

- Students must complete all the designated clinical education rotations.
- Students are required to pass all subject(s) taught in the semester before attending the clinical placement. If not, there would be a delay in his/her study.
- FULL attendance at every component of the Clinical placement rotation is compulsory. If a student is absent, with legitimate reasons, for more than 20% of any one placement, he/she will be awarded a grade 'I' (Incomplete) and will have to make up for the missed hours later when it is offered.
- Clinical preceptors will assess students' performance during their whole clinical placement. A grade is awarded to the student as a result of continuous assessment.
- For passing any clinical placement rotation, the student must score grade 'C' or above.
- If under the stated level of guidance for a clinical placement, a student fails to practice in a safe manner than minimises risk to clients, self and others
- adhere to ethical and/ or legal practice standards
- complete any one placement without legitimate reasons
- achieve satisfactory level of performance (grade 'C' or above)
- Students will be awarded a grade 'F' and will have to retake a clinical placement rotation at a later date when it is offered and complete at a 'satisfactory' (grade 'C' or above) level.

Safety Guidelines For Athletic Training Students During Clinical Placement

General

- Students should always seek clinical preceptors’ advice or clarifications whenever there exists anything doubtful/ feel not too confident to handle (e.g. type of case that you are handling for the first time.)
- Report to clinical preceptors immediately in case of any unexpected events.
- Students should consult clinical preceptors with your proposed treatment plan and obtain approval prior to performing any treatment to any patient.

Under the following conditions, you should seek advice from clinical preceptors **before** performing any assessment or treatment to the patient:

Subjective complaint	Resting chest pain	
	Palpitation	
	Coffee ground vomitus	
General observations	Abnormal bruising of patient	
	Respiratory distress	Paradoxical breathing, nasal flaring, gasping, RR>30 breaths/min
	Seizure	
	Marked change in general condition of patient	
	Signs of deep vein thrombosis	

*Or any other signs or symptoms that may indicate patients’ condition not fit for physical treatment.

- Students must stop and report to clinical preceptors immediately if any of the following occurs **during** or **after** assessment/ treatment
 - Patient falls
 - Undue redness of skin or pain after treatment
 - Severe shortness of breath
 - Un-documented abrasions, swelling or bruising
 - Increase in pain or discomfort
 - Increase in dizziness, palpitation, cold sweating, pallor
 - Any other signs or symptoms that may indicate patients’ condition deteriorating
- Make sure that every patient under care is safe, comfortable and properly positioned before, during and after assessment and treatment.
- Students should ensure patients’ clothing and shoe wear are properly fitted before they start any rehabilitation exercises.
- Seek verbal consent from the patient before subject and objective assessment.
- Students should carefully evaluate a patient's physical condition beforehand, then select proper level and types of exercises, and estimate the level of assistance needed.
- Stay close to the patient and be ready to give support as needed.

Therapeutic exercise

- Discuss with and get the approval from clinical preceptors for the choice and parameter of the exercises for the first time and in any case of progression of exercises.
- Check all contradictions and precautions for the exercise to the patient.
- Explain to the patient the aims and procedures of the exercise.
- Demonstrate the exercise and provide precise verbal cues and warnings. Make sure the patient fully understands

- Make sure the prescribed exercises are performed accurately.
- Review the patient regularly during exercise. Stop immediately when a patient feels discomfort. Report to clinical preceptors as appropriate.

Manual Therapy

- Discuss with and get the approval from clinical preceptors for the choice and parameter of manual techniques for the first time and in any case of progression of manual techniques.
- Check all contradictions and precautions for the manual therapy to the patient.
- Explain to the patient the aims and procedures of the manual techniques.
- Give proper instructions and warnings. Make sure the patient fully understands
- Make sure the manual techniques are performed accurately.
- Review the patient regularly during manual therapy. Stop immediately when a patient feels discomfort. Report to clinical preceptors as appropriate.

Guidelines For Athletic Training Students Handing Patients' Data During Clinical Placement

- All patient data is confidential.
 - Patients' demographics (full name, HKID, address, phone numbers) are sensitive. In preparing reports/ presentations/ case discussion, no identifiable particulars should be taken away from centers or clinics.
- Students should only access patients' data who are under their care and organisational need-to-know basis.
- If students are bringing patients' information away from clinics/ centers for revision or preparation for the next day, the following measures must be taken:
 - Blind patients' identifiable using initials (TMC for Tai Man CHAN) or substitutes.
 - Do not allow unauthorized persons to view and protect the case file documents during transport.
 - Destroy the records in a confidential manner once finished using.
 - Create encryptions and passwords to protect the security of electronic files/ storage devices.
- Students should ask for patients' consents before taking any photos/ videos during treatment.
- All clinical photos/ videos without patients' face masking should be securely stored with no identifiable personal particulars.
- For any loss of patient data, the student must report to the clinical preceptors and programme coordinators immediately. The case should be considered reporting to police as appropriate.

Guidelines For Athletic Training Students Dress Code

Athletic Training Students are expected to dress in a professional manner at all times. A professional appearance portrays confidence, knowledge and positively promotes the athletic training profession.

Each student will be provided a minimal of one set a CUHK Sports Medicine polo shirt and jacket. Student should maintain the uniform in good condition. Replacement would be provided in case of any lost/ damage upon request.

For clinical education setting practices, unless specific event-t-shirts/ team uniform are provided, otherwise CUHK sports medicine polo shirt/ jacket. Specific rules on dress are at the discretion of the clinical preceptor. Students should discuss proper dress code expectations during the orientation session at the beginning of each clinical assignment. No additional charges should be incurred with uniforms provided in all settings.

Athletic Training room/ clinic attire & Athletic event attire (game day):

- CUHK Sports Medicine polo shirt/ Jacket or event-t-shirts/ team uniform (in any)
- Black/ navy sports shorts (mid-thigh) pants. No yoga pants, tight pants/ shorts, jeans will be permitted. Dressing for the weather allows for variation with this.
- Shoes and socks are to be worn at all times. No sandals, Crocs, Keen, open toed shoes will be permitted.
- No hats or caps are to be worn in the athletic training rooms but can be worn on fields.
- No excessive jewellery is to be worn, i.e. long, bulky necklaces, chains, or hoop earrings
- Students are reminded to change back to their own clothing after the session.

Clinical Placement Attendance Requirement

FULL attendance at every component of the Clinical placement rotation is compulsory. If for any reason the student cannot attend his/her placement, the student must inform the Clinical Preceptor by telephone BEFORE 8:30 am of that day. Students who are absent due to illness for half a day or more will be required to produce a doctor's certificate. If you must be absent from your placement for any other legitimate reason (half day or more) you must submit a request in advance, in writing to both the programme coordinator and clinical preceptors, requesting permission for the absence, stating legitimate reasons. If a student is absent, with legitimate reasons, for more than 20% of any one placement, he/she will be awarded a grade 'I' (Incomplete) and will have to make up for the missed hours at a later date. After completion of the make-up hours, the grade associated with the student's performance will replace the initial grade 'I' and will have to make up for the missed hour or retake the whole placement at a later time. A respective grade will replace the initial grade 'I' after completion of the make-up hours. A student, who does not complete a clinical practicum without legitimate reasons, will be awarded a grade 'F'. He/ she will need to retake the whole placement when it is offered at a later time.

Acceptable reasons for absence or failure to participate in placement include illness and family emergencies. Students have to submit the explanations and evidence to athletictraining@cuhk.edu.hk before, or within one day after reporting absence.

Arrangement of Practicum in the Typhoon Season and Bad weather: refers to the latest instructions from the clinical preceptors of your attaching university/ athletic training centre or private Clinic. Details will be told in your first day orientation.

Students' Clinical Placement Assessment

The clinical preceptors oversee the clinical education experiences of all athletic training students. Students' placement assessment is used effectively as an aid to measure the learning outcome, feedback about student performance (from clinical preceptors) must be timely and progressive in nature.

On the first day of each clinical placement, students are advised to have an orientation meeting with their clinical preceptor(s) to forewarn the expected standards of clinical performance with respect to the placement objectives and set goals. It is advised that both the clinical preceptors and students should frequently evaluate together upon individual student's learning schedule and performance.

Athletic training students will be assigned to clinical assignments based upon a variety of factors which include, but are not limited to, clinical proficiency and competency, professional responsibility and dependability. The assessment methods adopted for Clinical education course are designed to ensure that the student's ability in clinical reasoning develops as the academic programme progresses.

Students' performance should be reported in both oral and written format, which serves as a part of a continuous assessment method. The assessment forms for all the Clinical education courses are designed to evaluate the criteria-based behaviours of the students in different aspects, and the expected level of performance is progressed throughout the 3 clinical experience settings. Students' number of hours logged in each clinical placement rotation will also be considered. For details, please refer to the appendix for Students' assessment form and logbook.

Evaluation of Clinical Instruction

Feedback of students' performance should be reported in both oral and written format, which serves as a part of a continuous assessment method. After each placement rotation, students are required to complete an online feedback questionnaire before receiving final evaluation from their clinical preceptors, which serves for improvement of future teaching arrangement.

Evaluation of clinical instruction is a key element of programmatic evaluation. Clinical evaluations help to determine the individual's competency, examine the individual's teaching style, inform the individual of performance expectations, and identify areas for strength and weakness of the clinical education rotations. Clinical Instruction will be evaluated on the following levels:

Clinical Preceptor Qualification

According to CAATE standard 31, clinical preceptors must be an athletic trainer or physician. Since this postgraduate course is newly established, and insufficient number of BOC (Board of Certification) certified AT in Hong Kong, supplemental clinical experiences by other qualified healthcare providers are considered in agreement with the CAATE committee.

The following will be used as criteria when selecting preceptors for clinical rotations.

- 1) Student needs and circumstances
- 2) Registered Physiotherapist (in Hong Kong) with at least 3 years' clinical experience.
- 3) Years of experience of athletic trainer, per CAATE standard 45.
- 4) Annual clinical preceptor assessment scores
- 5) Master Preceptor Training by NATA
- 6) Professional development specific to precepting or attendance of a CAATE Accreditation Conference.
- 7) Level 2 of sports trainers' course, accredited by CUHK, plus with at least 3 years' experience

Clinical Placement Feedback

At the end of each clinical placement rotation, within 2 days, the athletic training student will complete an evaluation form of the clinical experience through quadratics online. The purpose of this assessment is to gain information relative to the athletic training student's learning experiences during the clinical experience. Also, the assessment will assist in gaining information relative to the effectiveness of clinical instruction.

The form is designed to gather information regarding the orientation to operating procedures of the clinical site, expectations of the student by the Clinical preceptor, availability of therapeutic supplies, opportunity to interact with other allied health and medical professionals, frequency of feedback from the Preceptor, benefits of the experience, and amount of supervision received.

Information from the assessment will be reviewed by the programme staff and used to make necessary changes or modifications in clinical instruction to improve the clinical experience and ensure that the performance expectations of the athletic training students are being achieved. If a clinic site is failing in offering the athletic training student(s) a rewarding clinical experience, a meeting will be scheduled by the Program Director with representatives of the clinical site to discuss the situation and determine changes or modifications that can be made to improve the clinical experience for the athletic training student(s).

Assessment of the Clinical Site

Each clinical site will be evaluated annually by either the Program Director or coordinator from CUHK. Information gathered during these site visits will determine the viability and continued use of the clinical site by evaluating the compliance of the site with CAATE, and CUHK-AT regulatory policy and procedures. Any violation of these policies and procedures will result in a suspension in use of the site as a clinical site.

The preceptor responsible for the site will be informed of the violations and given information on how to remedy the situation. Use of the site for clinical education will be suspended until the violations are remedied and the clinical site is compliant with the aforementioned policies and procedures. Any site found in violation will be reassessed by the Clinical Education Coordinator and/or the Program Director to assure compliance before any athletic training student is placed at the clinical site in question.

Additional planned site visits will be performed by the Clinical Education Coordinator and/or the Program Director during the semesters when an athletic training student is assigned to the clinical site. During the random site visits the site will be reassessed for continued compliance with the aforementioned policies and procedures as well as CUHK Athletic Training Program Supervision policies.

Travel Policy

Traveling as part of the clinical assignment is not a requirement of the clinical education sequence. However, in the event the student is able to travel with the assigned clinical preceptor it is highly recommended.

When such opportunities arise, students must adhere to the following guidelines:

- Make sure students have their own personal health insurance.
- Only clinical hours during the event and treatments are counted, not travelling time.
- If a player is injured and admitted to a hospital, the CUHK-AT student should return home with the team.
- Transportation/ accommodation fees incurred during **local clinical placement** are **self-financed**.
- Expenses occur during **overseas placement/ trip** will be **at students' own cost**, including flight tickets, accommodation, meals, local transport and personal expenses.
- Students are required to arrange their own flight ticket and accommodation. **Travel allowance will be given to students for purchasing flight**. Payment of the travel allowance will be made on reimbursement basis.
- Students are encouraged to keep constant communication with modular coordinators/ programme staff for more updated and detailed logistics.

Appendix 1 – Course Outline of Clinical Experience Courses

The Chinese University of Hong Kong
Professional Diploma in Athletic Training
AT11 Clinical Experience (I) (Sports events/ Overseas Visiting)

Course Outline

Course Descriptions

This course aims to provide students with mega sports events/ global exposure in athletic training. Under the guidance of clinical preceptors, students will practise comprehensive clinical proficiencies and skills from assessment, therapeutic treatment, reconditioning and return-to-play.

Course Learning Objectives

- Retrieve pertinent information from medical notes and reports and make an attempt to interpret their relevance to physiotherapy and patient care.
- Acquire clinical skills necessary to develop one's practice in an athletic training setting.
- Integrate the theoretical knowledge acquired from previous courses in daily practice within physiotherapy clinic or other athletic training setting.
- Gain basic understanding of the operation and role of the athletic trainer within a professional sports team or other clinical setting.
- Acquire the technical/ clinical skills necessary to treat high level athletes.
- Design rehabilitation programs in the distinct phases of rehabilitation.
- Identify the individual needs of the athlete or patient.
- Acquire the skills necessary to evaluate and treat on-field sports injuries.
- Demonstrate an ethical and professional behaviour when interacting with other professionals, patients and their family.

Teaching Format

- Observation Settings/ reports
- Case studies/ presentations
- Skills demonstration
- Role play/ simulations

Assessment Method

The course grade will be based on students' individual performance on attendance, and assignment. The weightings of each component are as follows:

	<u>Weighting</u>
Continuous assessment ¹	90%
Case Presentation ²	10%

Note:

1. Attendance:

- *FULL attendance at every component of the Clinical Education Series is compulsory. If for any reason the student cannot attend his/her placement, the student must inform the Clinical Preceptor by telephone BEFORE 8:30 am of that day. Students who are absent due to illness for half day or more will be required to produce a doctor's certificate. If you must be absent from your placement for any other legitimate reason (half day or more) you must submit a request in advance, in writing to your CE, requesting permission for the absence, stating legitimate reasons. If a student is absent, with legitimate reasons, for more than 20% of any one placement, he/she will be awarded a grade 'I' (Incomplete) and will have to make up for the missed hours at a later date. After completion of the make-up hours, the grade associated to the student's performance will replace the initial grade 'I'. A student, who does not complete a clinical practicum without legitimate reasons, will be awarded a grade 'F'.*
- *Acceptable reasons for absence or failure to participate in placement include illness and family emergencies. Students have to submit the explanations and evidence to AthleticTraining@cuhk.edu.hk before, or within one day after reporting absent.*

2. Details of the assignment and examination will be announced in due course.

Placement Requirement

- Internships in Athletic training centres, sports physiotherapy centres, clubs, and sports federations
- Participation in sporting events, as a medical support team for athletes.

Proposed Clinical Attachment Sites

Sports Events Placement (Subject to changes)	
Sep – Jun	Standard Chartered Marathon Hong Kong International Women’s Baseball Tournament Hong Kong Lacrosse Open Other sports events

(OPTIONAL) Overseas Attachment <i>Details to be confirmed. Subject to changes with overseas institutes.</i>	
May – July	Wisconsin, USA Taoyuan & Kaohsiung, Taiwan

Course content

1. Analysis of the medical history, social/family background, identification of Red Flags and other subjective information as appropriate.
2. Review and analyse patients’ medical history, social/family background, recent and current medical, neurological, and/or orthopaedic conditions, care and interventions implemented
3. Perform relevant objective clinical tests, assessments and outcome measurements
4. Utilise clinical reasoning skills in the planning of care and management.
5. Evidence-based intervention strategies for client care and management
6. Evaluation of the effectiveness of intervention.
7. Modification of plan of care and management where appropriate
8. Establish rapport and effective communication with various parties, such as clients, their family members, and other health care professionals.
9. Record documentation with credible accuracy and clarity.
10. Suitable use of reasoned clinical judgement and reflection.
11. Multi-professional and interdisciplinary teamwork.

Module Coordinators

Prof. Patrick SH Yung

- *Programme Director, Professor and Chairman, Department of Orthopaedics and Traumatology, Faculty of Medicine, CUHK*

Prof. Samuel KK Ling

- *Clinical Assistant Professor, Department of Orthopaedics and Traumatology, Faculty of Medicine, CUHK*

Prof. Michael TY Ong

- *Clinical Assistant Professor, Department of Orthopaedics and Traumatology, Faculty of Medicine, CUHK*

Clinical Preceptors

Ms Karen Kwong

- *Registered Physiotherapist*

Mr. Nathan Ng

- *Registered Physiotherapist*

Mr. Gorman Ngai

- *Registered Physiotherapist*

Mr. Quentin Yau

- *Registered Physiotherapist*

Course Outline

Course Descriptions

This course aims to provide students with both in-house and on-field exposure to athletic training in professional sports teams/ clubs. Under the guidance of clinical preceptors, students will practise basic clinical proficiencies and skills related to emergency management, on-field assessment and treatment of athletes, and designing of rehabilitation programmes for patients.

Course Learning Objectives

- Retrieve pertinent information from medical notes and reports and make an attempt to interpret their relevance to physiotherapy and patient care.
- Acquire clinical skills necessary to develop one's practice in an athletic training setting.
- Integrate the theoretical knowledge acquired from previous courses in daily practice within physiotherapy clinic or other athletic training setting.
- Gain basic understanding of the operation and role of the athletic trainer within a professional sports team or other clinical setting.
- Acquire the technical/ clinical skills necessary to treat high level athletes.
- Design rehabilitation programs in the distinct phases of rehabilitation.
- Identify the individual needs of the athlete or patient.
- Acquire the skills necessary to evaluate and treat on-field sports injuries.
- Demonstrate an ethical and professional behaviour when interacting with other professionals, patients and their family.

Teaching Format

- Observation Settings/ reports
- Case studies/ presentations
- Skills demonstration
- Role play/ simulations

Assessment Method

The course grade will be based on students' individual performance on attendance, and assignment. The weightings of each component are as follows:

	<u>Weighting</u>
Continuous assessment ¹	90%
Case Presentation ²	10%

Note:

1. Attendance:

- *FULL attendance at every component of the Clinical Education Series is compulsory. If for any reason the student cannot attend his/her placement, the student must inform the Clinical Preceptor by telephone BEFORE 8:30 am of that day. Students who are absent due to illness for half day or more will be required to produce a doctor's certificate. If you must be absent from your placement for any other legitimate reason (half day or more) you must submit a request in advance, in writing to your CE, requesting permission for the absence, stating legitimate reasons. If a student is absent, with legitimate reasons, for more than 20% of any one placement, he/she will be awarded a grade 'I' (Incomplete) and will have to make up for the missed hours at a later date. After completion of the make-up hours, the grade associated to the student's performance will replace the initial grade 'I'. A student, who does not complete a clinical practicum without legitimate reasons, will be awarded a grade 'F'.*
- *Acceptable reasons for absence or failure to participate in placement include illness and family emergencies. Students have to submit the explanations and evidence to AthleticTraining@cuhk.edu.hk before, or within one day after reporting absent.*

2. Details of the assignment and examination will be announced in due course.

Placement Requirement

- Internships in sports physiotherapy centres, clubs, and sports federations
- Participation in sporting events, as a medical support team for athletes.
- Placement details will be announced in due course.

Course content

1. Analysis of the medical history, social/family background, identification of Red Flags and other subjective information as appropriate.
2. Review and analyse patients' medical history, social/family background, recent and current medical, neurological, and/or orthopaedic conditions, care and interventions implemented
3. Perform relevant objective clinical tests, assessments and outcome measurements
4. Utilise clinical reasoning skills in the planning of care and management.
5. Evidence-based intervention strategies for client care and management
6. Evaluation of the effectiveness of intervention.
7. Modification of plan of care and management where appropriate
8. Establish rapport and effective communication with various parties, such as clients, their family members, and other health care professionals.
9. Record documentation with credible accuracy and clarity.
10. Suitable use of reasoned clinical judgement and reflection.
11. Multi-professional and interdisciplinary teamwork.

Module Coordinators

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Mr. Nathan Ng

- *Registered Physiotherapist*

Mr. Gorman Ngai

- *Registered Physiotherapist*

Mr. Quentin Yau

- *Registered Physiotherapist*

The Chinese University of Hong Kong
Professional Diploma in Athletic Training
AT31 Clinical Experience (I) (Musculoskeletal Clinic)

Course Outline

Course Descriptions

This course aims to provide students with basic exposure to athletic training in musculoskeletal clinics. Under the guidance of clinical preceptors, students will practise comprehensive clinical proficiencies and skills from assessment, therapeutic treatment, reconditioning and return-to-play.

Course Learning Objectives

- Retrieve pertinent information from medical notes and reports, and make an attempt to interpret their relevance to physiotherapy and patient care.
- Acquire clinical skills necessary to develop one's practice in an athletic training setting.
- Integrate the theoretical knowledge acquired from previous courses in daily practice within physiotherapy clinic or other athletic training setting.
- Gain basic understanding of the operation and role of the athletic trainer within a professional sports team or other clinical setting.
- Acquire the technical/ clinical skills necessary to treat high level athletes.
- Design rehabilitation programs in the distinct phases of rehabilitation.
- Identify the individual needs of the athlete or patient.
- Acquire the skills necessary to evaluate and treat on-field sports injuries.
- Demonstrate an ethical and professional behaviour when interacting with other professionals, patients and their family.

Teaching Format

- Observation Settings/ reports
- Case studies/ presentations
- Skills demonstration
- Role play/ simulations

Assessment Method

The course grade will be based on students' individual performance on attendance, and assignment. The weightings of each component are as follows:

	<u>Weighting</u>
Continuous assessment ¹	90%
Case Presentation ²	10%

Note:

1. Attendance:
 - *FULL attendance at every component of the Clinical Education Series is compulsory. If for any reason the student cannot attend his/her placement, the student must inform the Clinical Preceptor by telephone BEFORE 8:30 am of that day. Students who are absent due to illness for half day or more will be required to produce a doctor's certificate. If you must be absent from your placement for any other legitimate reason (half day or more) you must submit a request in advance, in writing to your CE, requesting permission for the absence, stating legitimate reasons. If a student is absent, with legitimate reasons, for more than 20% of any one placement, he/she will be awarded a grade 'I' (Incomplete) and will have to make up for the missed hours at a later date. After completion of the make-up hours, the grade associated to the student's performance will replace the initial grade 'I'. A student, who does not complete a clinical practicum without legitimate reasons, will be awarded a grade 'F'.*
 - *Acceptable reasons for absence or failure to participate in placement include illness and family emergencies. Students have to submit the explanations and evidence to AthleticTraining@cuhk.edu.hk before, or within one day after reporting absent.*
2. *Details of the assignment and examination will be announced in due course.*

Placement Requirement

- Internships in MSK clinics, sports physiotherapy centres, and sports federations etc.
- Participation in sporting events, as team support for athletes.
- Placement details will be announced in due course.

Course content

1. Analysis of the medical history, social/family background, identification of Red Flags and other subjective information as appropriate.
2. Review and analyse patients' medical history, social/family background, recent and current medical, neurological, and/or orthopaedic conditions, care and interventions implemented
3. Perform relevant objective clinical tests, assessments and outcome measurements
4. Utilise clinical reasoning skills in the planning of care and management.
5. Evidence-based intervention strategies for client care and management
6. Evaluation of the effectiveness of intervention.
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- *Registered Physiotherapist*

Mr. Quentin Yau

- *Registered Physiotherapist*

Appendix 2 - Athletic Training Education Competencies required by CAATE

- CIP-1. Administer testing procedures to obtain baseline data regarding a client's/patient's level of general health (including nutritional habits, physical activity status, and body composition). Use this data to design, implement, evaluate, and modify a program specific to the performance and health goals of the patient. This will include instructing the patient in the proper performance of the activities, recognizing the warning signs and symptoms of potential injuries and illnesses that may occur, and explaining the role of exercise in maintaining overall health and the prevention of diseases. Incorporate contemporary behavioural change theory when educating clients/patients and associated individuals to effect health-related change. Refer to other medical and health professionals when appropriate.
- CIP-2. Select, apply, evaluate, and modify appropriate standard protective equipment, taping, wrapping, bracing, padding, and other custom devices for the client/patient in order to prevent and/or minimise the risk of injury to the head, torso, spine, and extremities for safe participation in sport or other physical activity.
- CIP-4. Perform a comprehensive clinical examination of a patient with an upper extremity, lower extremity, head, neck, thorax, and/or spine injury or condition. This exam should incorporate clinical reasoning in the selection of assessment procedures and interpretation of findings in order to formulate a differential diagnosis and/or diagnosis, determine underlying impairments, and identify activity limitations and participation restrictions. Based on the assessment data and consideration of the patient's goals, provide the appropriate initial care and establish overall treatment goals. Create and implement a therapeutic intervention that targets these treatment goals to include, as appropriate, therapeutic modalities, medications (with physician involvement as necessary), and rehabilitative techniques and procedures. Integrate and interpret various forms of standardised documentation including both patient-oriented and clinician-oriented outcomes measures to recommend activity level, make return to play decisions, and maximise patient outcomes and progress in the treatment plan.
- CIP-5. Perform a comprehensive clinical examination of a patient with a common illness/condition that includes appropriate clinical reasoning in the selection of assessment procedures and interpretation of history and physical examination findings in order to formulate a differential diagnosis and/or diagnosis. Based on the history, physical examination, and patient goals, implement the appropriate treatment strategy to include medications (with physician involvement as necessary). Determine whether patient referral is needed and identify potential restrictions in activities and participation. Formulate and communicate the appropriate return to activity protocol.
- CIP-7. Select and integrate appropriate psychosocial techniques into a patient's treatment or rehabilitation program to enhance rehabilitation adherence, return to play, and overall outcomes. This includes, but is not limited to, verbal motivation, goal setting, imagery, pain management, self-talk, and/or relaxation.
- CIP-8. Demonstrate the ability to recognize and refer at-risk individuals and individuals with psychosocial disorders and/or mental health emergencies. As a member of the management team, develop an appropriate management plan (including recommendations for patient safety and activity status) that establishes a professional helping relationship with the patient, ensures interactive support and education, and encourages the athletic trainer's role of informed patient advocate in a manner consistent with current practice guidelines.
- CIP-9. Utilise documentation strategies to effectively communicate with patients, physicians, insurers, colleagues, administrators, and parents or family members while using appropriate terminology and complying with statutes that regulate privacy of medical records. This includes using a comprehensive patient-file management system (including diagnostic and procedural codes) for appropriate chart documentation, risk management, outcomes, and billing.

Appendix 3 – Clinical Education Logbook

The Chinese University of Hong Kong
Professional Diploma in Athletic Training
Clinical Experience (I/ II/ III) (AT11/ 21/ 31)

Clinical Education Logbook

Placement date: from _____ to _____

Clinical Education Unit: _____

Clinical Preceptor: _____

Student name: _____

Date Seen	Gender & Age, Condition	Observations & Assessment	Treatment & Management	Learning Feedback
<i>Instructions (List all the dates patient was seen)</i>	1. Name in “abbreviated” form, (Sex and age) 2. Dx and chief complaint briefly described 3. Nature of condition (acute/ chronic)	<i>Briefly describe the types of assessment performed and main findings – Highlight the most important findings</i>	<i>Describe the main types of treatment that YOU have performed yourself.</i>	<i>Think about what you have learned in this case (reflection), and any feedback received from clinical preceptors.</i>
(Sample1) 10/08/2020 12/08/2020 14/08/2020 17/08/2020 20/08/2020 25/08/2020	Ms. WCF, F/59 Dx: Lt Frozen Sh. C/O: Lt. ant lat shoulder pain++ starting from approx. June,2020.	Lt. Sh: Round sh., ROM: 1/2R F, 2/3 MR, Power: Sh. F 4+/5 Sensation: intact 20/8: Improved: 70% Lt SH; 3/4 F, full MR	IFT, US, mobs, DFM, MET, Sh mob & stretching ex. HP & Advice given 20/8: Lt Sh F(x) activities trg.	Able to understand more about Pathology of frozen shoulder, RCRSP and SIS; patient-centred care
(Sample2) 10/08/2020 13/08/2020 17/08/2020 20/08/2020 25/08/2020	Mr. LBC, M/35 Dx: Mm Strains C/O: Rt. med knee pain for 2 years	Hx of med meniscus tear; Apley’s -ve; Rt Knee: EOR pain+ in F Power: Quad 4-/5 20/8: Improved 60%. Rx regime continued. – Highlight the most important findings in this case	US, Heat Pack, DFM, soft tissue mobs, stretching ex. Quad ex., HP & Advice	Pathology of pes anserinus; posture relationship with sartorius m. – learned about how to make differential diagnosis
(Sample3) 14/08/2020 19/08/2020	Mr. ABC, M/47 Dx: Lt Tennis elbow c/o: P+ in Lt lateral epicondyle x 2/12 (subacute □chronic)	Cozen’s test +ve, pain in passive F EOF and resisted wrist Ext 25/8: Improved 50% Good to describe special tests performed	DFM, US, IFT, stretching exercise given Use of Tennis Elb Strap. Ergonomics Advice & self-care (e.g. use of HP at home) For patient education, try to be more specific, e.g., home ex program, ergonomic advice, self-care, work equipment modification etc)	Management of chronic tennis elbow – Able to see patient’s response to different forms of PT treatment (e.g. DFM), compared to the effect of medication. Asterisks findings from previous session can be used for FU for checking on comparable sign, and monitoring of Rx.

Date Seen	Gender & Age, Condition	Observations & Assessment	Treatment & Management	Learning Feedback
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Appendix 4 – Program Staff Visit During Placement

The Chinese University of Hong Kong
Professional Diploma in Athletic Training
Clinical Experience (I/ II/ III) (AT11/ 21/ 31)

Programme staff visit during clinical placement

The programme staff represented The Chinese University of Hong Kong during this clinical placement was _____, who visited this Clinical Placement site on _____ (date). Specific learning issues, if any, which were discussed with the student, are noted below:

(Name of Programme Coordinator)

(Signature)

Appendix 5 – Student Clinical Assessment Form

The Chinese University of Hong Kong
Professional Diploma in Athletic Training
Clinical Experience (I/ II/ III) (AT11/ 21/ 31)

Student Clinical Assessment Form

Placement date: from _____ to _____

Clinical Education Unit: _____ Leave of absence: _____ days

Clinical Preceptor: _____

Student name: _____

Students are expected to hold a high standard of professional behaviour and perform the clinical work in a safe and ethical manner.

Students must adhere to ethical and legal practice standards, in accordance with athletic trainers' professional code of ethics.

The student will be evaluated on the following levels:

Clinical Skill Acquisition - This will include the assessment of the specific clinical proficiencies to be performed by the student. An assessment form has been developed for each clinical proficiency. The form identifies the clinical proficiency or proficiencies to be assessed. Each form includes a checklist of the key components of the task to be performed by the student and a rating of the student's overall performance of the task.

Overall Student Performance - This will include the assessment of the athletic training student's overall performance during the clinical experience. The Preceptor is instructed to rate the athletic training student's performance relative to professional behaviours and attitudes of the allied health professional. The Preceptor is also asked to indicate the clinical skills demonstrated by the student during the clinical experience. The forms also include a place for comments by the Preceptor relative to the student's overall performance. This form is to be completed at the end of each clinical rotation by the Preceptor. The form will be reviewed by the Clinical preceptor as part of the assessment of the athletic training student's overall progression in the program, as well as in determining the grade in the clinical course. We ask that you discuss the evaluations with the students to provide feedback on their clinical experience.

Overall

Practice in a safe manner than minimise risk to clients, self and others	Yes / No
Adhere to ethical and/ or legal practice standards	Yes / No

Criteria

Application of knowledge:

1. Demonstrates adequate understanding of client's clinical condition reflecting knowledge of basic, applied and behavioural sciences.	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
2. Analyses and interprets clinical findings to establish clinical impressions/ diagnoses, problem list, and outcomes of care.	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
3. Designs a rehabilitation plan of care that integrates goals, treatments (including progression and modifications), outcomes.	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
4. Applies the principles of critical inquiry to the practice.	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															

Athletic Training skills:

5. Performs clinical assessment in a logical, organised and accurate fashion.	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
6. Performs therapeutic interventions efficiently and effectively	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
7. Produces legible, concise and accurate documentation to support the delivery of clinical service, in accordance with guidelines and format required by the centre.	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
8. Reports cases in an organised and clear manner.	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
9. Communicates effectively and develops good rapport with clients, family or other caregivers.	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
10. Educates others (client, family, caregivers, staff, students, and other healthcare providers) using relevant and effective teaching methods.	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															

Professional behaviour:

<p>11. Demonstrates initiative to seek advice, clarify doubts, and maximise own learning.</p>	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
<p>12. Demonstrates professional behaviours during interactions with clients, colleagues, educators and other healthcare team members.</p>	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
<p>13. Adapts delivery of treatment/ athletic training service to reflect respect for and sensitivity to individual differences.</p>	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															
<p>14. Organises work in a cost effective and timely manner (i.e. efficiently).</p>	<table border="1"> <tr> <td>A</td><td>A</td><td>A</td><td>B</td><td>B</td><td>B</td><td>C</td><td>C</td><td>I</td><td>F</td> </tr> <tr> <td>+</td><td></td><td>-</td><td>+</td><td></td><td>-</td><td>+</td><td></td><td></td><td></td> </tr> </table>	A	A	A	B	B	B	C	C	I	F	+		-	+		-	+			
A	A	A	B	B	B	C	C	I	F												
+		-	+		-	+															

Mid-term Evaluation

Area of strength:

Area needing improvement:

Recommendations:

The mid-term review was conducted on (date) _____.

(Clinical Preceptor's name)

(Signature)

(Student's name)

(Signature)

Final Evaluation

Recommendations/ Comments
(Application of knowledge/ Professional skills/ Professional behaviour)

Final grade award for this placement is: _____.

The final evaluation was conducted on (date) _____.

(Clinical Preceptor's name)

(Signature)

(Student's name)

(Signature)

Appendix 6 – Student Clinical Placement Feedback Form

The Chinese University of Hong Kong
 Professional Diploma in Athletic Training
 Clinical Experience (I/ II/ III) (AT11/ 21/ 31)

Student Clinical Placement Feedback Form

Placement date: from _____ to _____ (Midterm/ Final)

Clinical Education Unit: _____

Clinical Preceptor: _____

Student name: _____

Students are required to complete this form at the midterm and final evaluation periods of the placement. One form is to be completed per placement unit (i.e. even if there is more than one site/preceptor). The form must be submitted to the programme office within 2 days of the midterm/final review of the clinical placement. Programme director and staff will use information gathered from this form for evaluation and continuous quality improvement.

For the fields that require rating, please use the following scale:

- A scale of 0-6 is adopted in the Course and Teaching Evaluation (CTE)
- Grading score “6” for Strongly Agree: The statement strongly reflects your experience
- Grading score “0” for Disagree (D): The statement does not reflect your experience
- N/A: The statement is not applicable to the setting.

Organisation/ learning environment	0	1	2	3	4	5	6
1. There was adequate opportunity for interaction with other staff during the placement.							
2. Collaboration with the team members was encouraged.							
3. There was access to learning resources.							
4. The clinical preceptor was available to provide information and/or answer questions encountered.							
5. The placement environment was conducive to develop clinical skills for the placement level.							

Rapport with clinical preceptor	0	1	2	3	4	5	6
6. The clinical preceptor(s) communicated with me regularly.							
7. The clinical preceptor(s) recognised my learning style and reviewed his/ her teaching style.							
8. The clinical preceptor(s) discussed with me students' expectations, roles and responsibilities.							
9. The clinical preceptor(s) explored my personal learning objectives and seek opportunities for learning, growth and development							
10. The clinical preceptor(s) was available and accessible consistent with the practice demands at the setting.							
11. I felt comfortable asking my clinical preceptor(s) questions.							

Facilitation & development of clinical reasoning skills	0	1	2	3	4	5	6
12. This placement served as a good opportunity to develop clinical reasoning skills							
13. There was an opportunity to access resources to develop my clinical reasoning skills.							
14. The placement allowed for time to be scheduled to discuss clinical reasoning.							
15. There was an opportunity to progress my independence with interactions as my skills level increased.							
16. There was an opportunity for self- directed learning.							
17. There were opportunities to critically think through/ talk through clinical reasoning.							

Learning opportunities	0	1	2	3	4	5	6
18. The variety of client populations and needs provided a valuable learning experience.							
19. There was opportunity to practice assessments and outcome measures.							
20. There was opportunity to practice implementation of treatment plans							
21. There was opportunity to evaluate and modify treatment plans.							
22. There was opportunity to practice documentation skills.							
23. There was opportunity to participate in relevant meetings and/or professional development activities.							

Feedback	0	1	2	3	4	5	6
24. Feedback provided by clinical preceptors was timely.							
25. Feedback provided assisted with hands on skills development							
26. Adequate time was available/ scheduled to review progress.							
27. The learning environment fostered an open feedback process.							

Evaluation	0	1	2	3	4	5	6
28. The supervision structure allowed my clinical preceptor(s) to document true reflection of my performance during placement.							
29. Evaluation was completed in a timely fashion (i.e. at midterm & final)							
30. The evaluation process included collaborative plans with my clinical preceptor(s) to move forward in my competency development.							

Positive aspects of this placement were:

Suggestions for enhancing the learning experience are:

Overall, I would rate this clinical placement as:

Excellent	Very good	Good	Fair	Poor
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(Student's name)

(Signature)

* The form must be submitted to the PDipAT office within 2 days of your midterm & final review.

Appendix 7 – Examples of Behaviour for Each of the Clinical Performance Criteria

Safety Management

Practices in a safe manner that minimises risk to clients, self, and others.

- Demonstrates a clear understanding of all safety requirements.
- Should not have to be constantly reminded of safety issues.
- Observes health and safety regulations.
- Maintains safe working environments.
- Recognises physiological and psychological changes in clients and adjusts treatment accordingly.
- Demonstrates awareness of contraindications and precautions during treatment/ athletic training service.
- Requests assistance when necessary.
- Uses acceptable techniques for safe handling.
- Protects welfare of self, client and others in emergency situations.
- Reports accidents or adverse events to CEs Adheres to ethical and legal practice standards.
- Abides by relevant ethical codes and standards of practice guidelines.
- Adheres to institutional policy and procedures.
- Identifies situations in which ethical questions are present.
- Reports violations of ethical practice.
- Identifies situations in which legal questions are present.
- Follows rules and regulations to maintain client confidentiality.

Application of knowledge

Demonstrate adequate understanding of client's clinical condition reflecting knowledge of basic, applied and behavioural sciences.

- Demonstrates understanding of aetiology, pathology, clinical course and prognosis of the condition.
- Retrieves and interprets relevant information from multiple data sources when making a sound clinical decision.
- Understands the significance of signs and symptoms and traces their source.
- Demonstrates knowledge of abbreviations commonly used in the clinical setting.
- Applies knowledge of basic, applied, and behavioural sciences in athletic training management and understands their implications on the client's clinical picture

Analyses and interprets clinical findings to establish diagnoses, problem list, and outcomes of care.

- Synthesises examination data to complete clinical evaluation.
- Interprets clinical findings and hypothesizes/identifies possible underlying causes to establish clinical impression(s) within the practitioner's knowledge base.
- Identifies differential diagnoses that must be ruled out to establish a diagnosis and refers to other medical professions as indicated
- Explains the influence of pathological, pathophysiological, and pharmacological processes on the client's signs and symptoms.
- Identifies other medical, social, or psychological problems influencing treatment/ athletic training service and not identified through diagnosis of a client's problem.
- Utilises research evidence, clinical findings and other contributing factors to determine treatment outcomes and treatment prognosis within the practitioner's knowledge base.
- Performs regular re-examination of client status to reconfirm or refute original hypothesis/es of underlying problems.
- Performs regular evaluations of treatment effectiveness and appropriately modifies treatment according to re-examination findings.
- Identifies and evaluates changes in client status.
- Prioritises and justifies relevant information from assessment based on sound clinical reasoning and client's preference.

Designs a comprehensive athletic training service/ treatment plan of care that integrates goals, treatments (progression and modification), outcomes and discharge plan.

- Establishes realistic and measurable short- and long-term goals of treatment and desired functional outcomes that specify expected time duration.
- Establishes a treatment plan of care in collaboration with the client, the family, caregiver, and others involved in the delivery of health care services.
- Recognises the role and contribution of other allied disciplines to the clients' total management.
- Establishes a plan of care consistent with the examination and evaluation.
- Establishes a plan of care that minimises risks to the clients and those involved with the delivery of the client's care.
- Designs a plan of care using best evidence and available resources to maximize client outcomes.
- Justifies the rationales behind treatment plan using research evidence while balances needs and preferences of clients
- Adjusts the plan of care in response to changes in client status.
- Selects intervention strategies to achieve the desired outcomes.
- Establishes a plan for a safe and timely client discharge.
- Identifies and establishes appropriate post-discharge follow-up or support groups involvement
- Shows the capability to apply theoretical knowledge (i.e. anatomy, physiology, pathology, biomechanics etc.) for assessment.

Athletic Training hands-on skills

Performs a subject and object assessment in a logical, organised and accurate fashion.

- Selects reliable and valid physical examination methods and outcome measures relevant to the chief complaint, results of screening, and history of the client.
- Obtains accurate information by performing selected examination methods.
- Adjusts examination choices and procedures according to client's response, age, sex, culture, disease severity, behaviour, etc
- Performs physical examination in a safe manner and adheres to contraindications/precautions of the client's conditions.
- Performs physical examination procedures logically, consistently and efficiently.

Performs therapeutic interventions efficiently and effectively

- Demonstrates intervention skills and techniques in a safe, effective, and correct manner.
- Performs intervention consistent with the plan of care.
- Provides intervention in a manner that minimises risk to self, the client, and others involving the delivery of the client's care.
- Provides appropriate feedback to the client during and after intervention.
- Uses intervention time efficiently and effectively.
- Uses the environment and/or equipment effectively during an intervention.
- Adapts intervention to meet individual needs and responses of the client.

Produces legible, concise and accurate documentation to support the delivery of athletic training services, in accordance with guidelines and format required by the centre.

- Selects relevant information to document the delivery of client care.
- Documents all respects of physiotherapy care, including screening, examination, evaluation, plan of care, treatment, response to treatment, discharge planning, family conferences, and communication with others involved in delivery of client care.
- Produces documentation that follows guidelines and format required by the practice setting.
- Documents clients care consistent with guidelines and requirements of regulatory agencies and third-party payers.
- Produces documentation that is accurate, concise, timely, legible and clinically sound.

- Demonstrates professionally and technically correct written communication skills.

Reports cases in an organised and clear manner.

- Demonstrates professionally and technically correct verbal communication skills.
- Reports client's condition timely and routinely without referring to case notes.
- Organises the report content systematically to reflect adequate understanding of the client's condition and the associated implications.
- Understands the difference between a brief and full report of a client's condition.

Communicates effectively and develops good rapport with clients.

- Communicates, verbally and non-verbally, in a polite, respectful, non-defensive and in a timely manner.
- Initiates communication in difficult situations.
- Selects the most appropriate person(s) with whom to communicate.
- Communicates with respect for the roles and contributions of all participants in client care.
- Listens actively and attentively to understand what is being communicated by others.
- Demonstrates professionally and technically correct verbal communication.
- Communicates using non-verbal messages that are consistent with intended messages.
- Interprets and responds to the non-verbal communication of others.
- Evaluates effectiveness of his/her own communication and modifies communication accordingly.

Educates others (client, family, caregivers, staff, students, other healthcare providers) using relevant and effective teaching methods.

- Identifies and establishes priorities for educational needs in collaboration with the learner.
- Identifies learning style and learning barriers of clients.
- Designs educational activities to address identified needs.
- Conducts educational activities using a variety of instructional strategies as needed.
- Evaluates effectiveness of educational activities.
- Modifies educational activities and strategies considering different learner's needs, characteristics, and capabilities.
- Ensures that the client is able to carry out home exercise/advice and self-assessment of own conditions.

Professional behaviours

Demonstrates initiative to seek advice, clarify doubts, and maximize own learning.

- Always seeks clarification first whenever in doubt.
- Understands when to report immediately to the clinical preceptors.
- Approaches the clinical preceptors for supervision whenever required.
- Refrains from performing uncertain procedures.
- Shows initiative in searching for and studying reference materials to supplement own knowledge.
- Participates actively in additional learning opportunities during placements.

Demonstrates professional behaviours during interactions with others, and presents himself in a professional manner to clients, colleagues, educators and other healthcare team members.

- Maintains productive working relationships with clients, families, CE, and others.
- Behaves in a respectful and responsible manner to colleagues, educators and other health care team members.
- Treats others with positive regard, dignity, respect, and compassion.
- Demonstrates behaviours that contribute to a positive work environment.
- Accepts criticism without defensiveness.
- Manages conflict in constructive ways.
- Make a choice after considering the consequences to self and others.
- Assumes responsibility for choices made in situations presenting legal or ethical dilemmas.

- Maintains client privacy and modesty (draping, confidentiality).
- Demonstrates concern for the comfort, safety, welfare, needs and dignity of the client.
- Reports violations of laws governing practice of athletic training.
- Recognises limitation of knowledge and skills and seeks assistance in an appropriate manner.
- Respects the rights of the individual.
- Respects the client's feelings and well-being.
- Accepts responsibility for their own actions.
- Is punctual and dependable.
- Completes scheduled assignments in a timely manner.
- Wears attire (including name badge) consistent with expectations of the practice setting.
- Demonstrates initiative.
- Abides by the policies and procedures of the practice settings.
- Adapts to change.

Organises work in a cost effective and timely manner (i.e. efficiently).

- Sets priorities for the use of resources to maximise outcomes.
- Functions within the organisational structure of the practice setting.
- Uses time effectively.
- Coordinates athletic training with other services to facilitate efficient and effective client care.
- Schedules clients, equipment, and space.
- Maximises utilisation of equipment and manpower in the practice setting

Adapts delivery of treatment/ AT service to reflect respect for and sensitivity to individual differences.

- Exhibits sensitivity to differences in race, creed, colour, gender, age, national or ethnic origin, sexual orientation, and disability or health status in communicating with others, developing and implementing plans of care.
- Demonstrates a non-judgmental athletic training care/ treatment when dealing with differences in opinions and beliefs.

Appendix 8 – Descriptions of Various Grades

Grading	Competency Level	Clinical Placement Performance
A+	Exceptionally Outstanding	The student has met the EXPECTED level of clinical performance consistently in the assessed areas, and he/she performs INDEPENDENTLY WITH CONSULTATION (minimal monitoring) even for COMPLEX* tasks/environment.
A	Outstanding	The student has met the EXPECTED level of clinical performance consistently in the assessed areas, and monitoring is infrequently required for COMPLEX tasks/environment.
A-	Very Good	The student has met the EXPECTED level of clinical performance consistently in the assessed areas, and monitoring is seldomly required for COMPLEX tasks/environment.
B+	Good	The student has met the EXPECTED level of clinical performance consistently in the assessed areas, and monitoring is occasionally required for COMPLEX tasks/environment.
B	Fairly Good	The student has met the EXPECTED level of clinical performance consistently in the assessed areas, and monitoring is required for COMPLEX tasks/environment.
B-	Wholly Satisfactory	The student has met the EXPECTED level of clinical performance consistently in the assessed areas, though intensive monitoring is occasionally required for COMPLEX tasks/environment.
C+	Fairly Satisfactory	Under the stated level of guidance for this clinical placement, the student has met the EXPECTED level of clinical performance in the assessed areas, though intensive monitoring is consistently required for COMPLEX tasks/environment.
C	Satisfactory	Under the stated level of guidance for this clinical placement, the student has met the EXPECTED level of clinical performance in the assessed areas, though intensive monitoring is consistently required for COMPLEX tasks/environment.
I	Incomplete	The student has been absent, with legitimate reasons, for more than 20% of the placement and has to make up for the missed hours (or equivalent as endorsed by the Subject Assessment Review Panel) at a later date.
F	Inadequate (Failed)	The student has failed to practice in a safe manner that minimizes risk to clients, self, and others. OR The student has failed to adhere to ethical and/or legal practice standards. OR Under the stated level of guidance for this clinical placement, the student has not met the accepted level of clinical performance in the assessed areas, despite intensive monitoring has been routinely provided. OR The student has been absent for more than 20% of the placement without legitimate reasons.

* "COMPLEX tasks/environment" are defined according to the stage of learning of the student.