

Preparing Smart Clinical Placement for Physical Therapy Students

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Overview

Clinical practice is necessary for medical education to expose students to real clinical contexts. Clinical placement thus has been set in the TQF1 of physical therapy program with specific credit. Although using simulated learning environment and standardized patients can provide a way to scaffold the development of skills for patient management in a low risk environment, clinical practice with real patients can be challenging in which it is an uncontrolled situation. Nevertheless, the organizational and financial costs were prohibitive. These complexity involved many factors, i.e., students, clinical instructors, academic staffs, big data processing, and bureaucracy. Innovation for develop clinical placement is always required to proceed students gaining clinical learning in the most effective way.

Future development of project

1. Develop contemplative education
2. Develop specific course training for CI
3. Develop tool for data collection
4. Develop reflective process

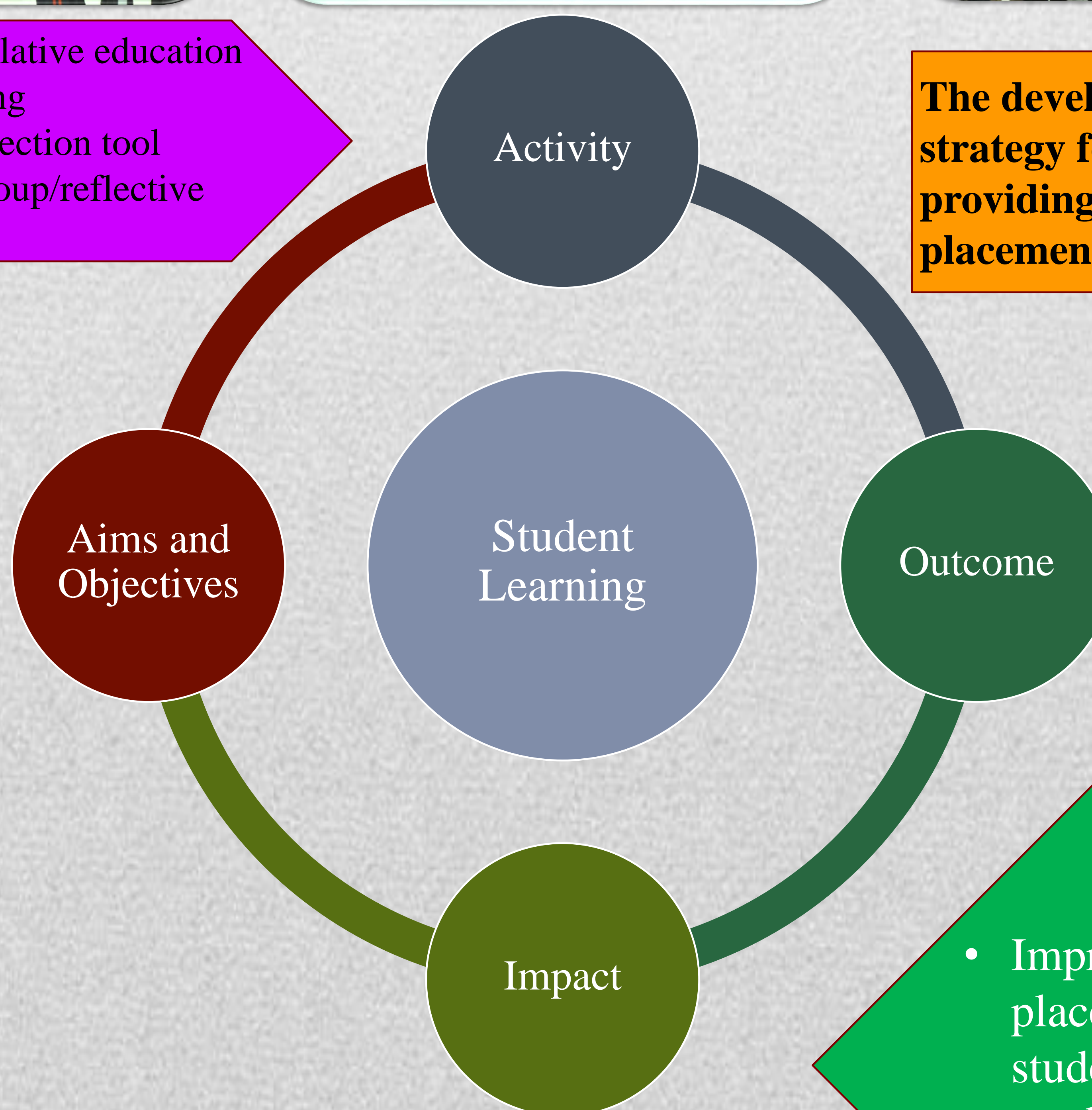
“**Contemplative education** is both concept and practice that purposes to transformative learning in various level such as self transformation, organizational transformation and social transformation. Transformative learning leads to basic change deeply. Contemplative education helps students know themselves more deeply and engage constructively with others.”



- Contemplative education
- CI training
- Data collection tool
- Focus group/reflective process

To develop strategy for providing the better clinical placement

1. To prepare students for clinical placement
2. To train CI for bedside teaching
3. To train young staffs for visiting clinical placement
4. To train academic staffs for big data management
5. To reduce cost for collecting big data
6. To evaluate course study in depth



The developed strategy for providing clinical placement

1. More student number can meet learning outcome without any problems.
2. CI understand learning process and can apply it for bedside teaching.
3. Young staffs understand process of visiting clinical placement and can perform it by themselves.
4. Academic staffs can better manage big data
5. Reduction of cost for collecting big data
6. In depth course evaluation

- Improvement of clinical placement impact to student learning, CI and academic staffs developments.

References

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