

## University of Utah Department of Physical Therapy

### Developing an Action Plan

Students will work with their clinical instructor (CI) to create a plan of action to address areas needing improvement in order to satisfactorily complete their full time internship. As stated by May, Straker, and Foord (Facilitation Development of Professional Student Behaviors in Physical Therapy Education, 1997), students frequently require assistance in taking ownership of the identified problem and development of a formal plan to address the issue(s) needing remediation is helpful. A formal plan facilitates the student's understanding of the expectations. Although development of a plan is a collaborative effort with a CI (and/or CCCE, DCE), it is the student's responsibility to compose the plan.

The Action Plan consists of the following components:

- Problem list – behaviors (from the list of behavioral criteria or the Clinical Performance Instrument) that the student is not demonstrating.
- SMART learning objectives – specific, measurable, achievable, results oriented, time bounded
- Specific activities to achieve the objectives
- Outcome measurement – what the student and CI will see, hear or feel to verify the achievement of the objectives. This is what the student will do on a consistent basis that demonstrates competency.

Steps to develop the plan of action:

1. CI and student discuss the problem list and come to agreement on the primary issue(s) of concern. If there are multiple issues, more than one Action Plan may be required.
2. The student drafts an initial plan and submits to CI. The learning objective must be specific, measurable, achievable, results oriented and time bounded. The specific activities are identified by the student as opportunities to increase skill, attitude, or behavior and may include such items as review of texts, practice with others to promote skill acquisition, strategies to increase knowledge or awareness, discussion, consultation with faculty or classmates, chart review, etc. The number of activities may be determined by the student but should include a sufficient quantity to increase the chances of success. The outcome measurement is what the student will demonstrate to show competency in the problem behavior.
3. The CI reviews the Action Plan draft, provides feedback, and returns it to the student for revision. This process may continue until the Action Plan is clear, concise and addresses the issue(s) thoroughly. Once the Action Plan has been approved, both the CI and the student sign it. Copies are made for each.
4. Consequences in the event of unsuccessful completion of an Action Plan should be discussed with the student during the initial meeting with the CI. These consequences should be clear and documented with signature by the student and the CI
5. The student proceeds with the Action Plan, asking for assistance if appropriate, using the strategies and specific activities.
6. Once the student has demonstrated the behavior consistently per the outcome, signatures are obtained and the Plan is complete.
7. Copies with signatures are provided to the CI and the student.

## Action Plan Form

CI signature: \_\_\_\_\_

Student signature: \_\_\_\_\_

Date of Start of Plan: \_\_\_\_\_

Problem	Specific Activities (The student will fill in this section. Add activities that will facilitate achievement of the outcome)	Outcome Measurement (what student, faculty, CI will see, hear or feel to verify accomplishment)
Documentation – inaccurate and places patient at risk due to lack of information provided	<ul style="list-style-type: none"> <li>• Review documentation text from school</li> <li>• Review documentation written by my CI and one other PT in the department.</li> <li>• Following this review, explain my understanding of the patient's performance to the writer followed by discussion of accuracy.</li> <li>• Have a PT (other than my CI) and an OT or SLP read my documentation.</li> <li>• Following this review, ask the reader to explain his/her understanding of the patient's performance to me followed by discussion of accuracy.</li> </ul>	I will consistently document to accurately reflect patient performance to a degree that another physical therapist would be able to safely treat the patient without cues beginning with my first patient today and continuing to the end of my internship with the number of cues provided by my CI decreasing to one.
<b>Consequences of Unsuccessful Completion</b>	If not met by the end of the internship, student will not meet expectations of the internship and a recommendation of course failure will be sent to the DCE	

A "Smart" Objective is:

1. Specific
2. Measurable
3. Achievable
4. Results centered
5. Time bounded

At completion of the time frame:

Date \_\_\_\_\_

Student \_\_\_\_\_

CI \_\_\_\_\_

## Action Plan Form

CI Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date of Start of Plan: \_\_\_\_\_

Problem	Specific Activities (The student will fill in this section. Add activities that will facilitate achievement of the outcome)	Outcome Measurement (what student, faculty, CI will see, hear or feel to verify accomplishment)
Inappropriate and inadequate modification of manual muscle tests for patients	<ul style="list-style-type: none"> <li>• review my manual muscle testing notes from class</li> <li>• review my manual muscle testing techniques using my textbook</li> <li>• practice manual muscle testing techniques for the extremity joints with a classmate</li> <li>• practice modifying manual muscle testing techniques for the extremity joints on a classmate using case studies</li> <li>• discuss the modifications and rationale with my CI</li> <li>• observe 2 PTs in the facility do manual muscle testing on patients</li> <li>• discuss the modifications made with the 2 PTs at a convenient time within 2 days of the observation</li> </ul>	I will demonstrate appropriate modifications of manual muscle testing techniques on 3 patients with extremity joint dysfunction within the next 10 days of the internship.
<b>Consequences of Unsuccessful Completion</b>	If not met, DCE will be contacted for further remediation planning.	

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At completion of the time frame:

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Student \_\_\_\_\_

CI \_\_\_\_\_