

# Provision of Feedback to Students, Part 2: Use of Clinical Encounter Cards

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Feedback is an important aspect of athletic training clinical education. Feedback provides information to athletic training students about their clinical skill performances to correct and guide future behavior.<sup>1</sup> Without feedback, a student often lacks accurate understanding of his or her clinical competence.<sup>1</sup> Effective feedback should provide specific, immediate information, and should actively engage the student.<sup>1</sup> Clinical Encoun-

ter Cards (CECs) can help an ACI (Approved Clinical Instructor) provide effective feedback to students. The purpose of Part 2 of this report is to describe CECs and to provide examples of their use in athletic training clinical education.

ter comments or suggestions for improvement of future performance.<sup>2,5</sup> CECs may include information that provides context for the clinical skill performance, such as the location, time of day the skill was performed, and other information that program administrators may want to use for program evaluation.<sup>2,5</sup> Medical educators have documented a lack of feedback in clinical education that has been improved through the use of CECs.<sup>2,4,5</sup> CECs have increased medical student satisfaction with instructor feedback,<sup>2,4,5</sup> and they have reported improvement of clinical skills.<sup>5</sup>

CECs are typically used with students who have a basic level of proficiency, because they provide feedback that is more directive than corrective in nature. In some cases, an ACI may need to correct a relatively inexperienced student before the completion of a skill (e.g., to maintain patient safety) or to help the student properly progress through the process of performing the skill. Although CECs can be used with students at all experience levels, the ACI should consider the knowledge and experience level of each student when making a determination about the appropriateness for the use of a given CEC.

Whether initiated by the ACI or a student, a CEC facilitates specific, constructive feedback about the student's performance. For example, a student who has developed a shoulder rehabilitation plan could give a CEC to the ACI to initiate performance feedback.

## KEY POINTS

Clinical encounter cards are short, easy-to-use methods for providing feedback to athletic training students.

Clinical encounter cards can help with program assessment and evaluation of student activities during clinical rotations.

## Clinical Encounter Cards

Clinical encounter cards have been successfully used to improve the quality and amount of feedback provided to medical students.<sup>2-5</sup> An "encounter" in medical education is considered a skill or procedure performed by a student that is observed by a faculty member or instructor.<sup>3</sup> CECs typically include the skill performed by the student, student and ACI assessments of the skill performance, and

In addition to the ACI's assessment, the CEC should document student self-assessment to facilitate reflection.

CECs are relatively short and informal, which makes them quick and easy to complete in a high-volume clinical setting. The written feedback provides a record of the student's progress in skill acquisition, which verbal feedback does not provide. Use of CECs provides regular formative feedback to the student and can provide information to support a broader summative evaluation (i.e., mid-term or end-of-term evaluations). CECs are especially helpful for skills that are not designated as clinical proficiencies (e.g., isolated psychomotor skills, such as manual stretching) and those that are not utilized during a student's current clinical rotation (e.g., learning objectives focused on the lower extremity, which cannot be achieved through routine clinical interactions that primarily involve patients with upper extremity problems). CECs can serve as helpful reminders for the ACI to watch students as they perform clinical skills, because no other feedback may be regularly provided after performance of routine clinical activities. On the basis of examples derived from the literature<sup>4,5</sup> and the personal ACI experiences, two versions of CECs were created for athletic training clinical education.

## Clinical Skill Feedback Form

The Clinical Skill Feedback Form (CSFF) was created to reflect qualities of effective feedback (Figure 1). In addition to documentation of the ACI's assessment and suggestions for improvement, the CSFF includes student self-assessment of performance. The form provides three lines for the student to record reflections on his or her performance after having self-rated the performance on a five-point scale. The ACI provides both open-ended comments and specific ratings of the student's performance. The CSFF provides information about the type of skill performed and where the feedback was given. This can be helpful if the content of the completed forms is used for program assessment; data can easily be coded and entered into an electronic spreadsheet. The form includes several check boxes that facilitate rapid completion. The evaluative format of the CSFF generates a qualitative analysis of performance that may be perceived as judgmental by the student. It provides the student with specific feedback about performance accuracy, however, which can be compared to previous assessments to gauge improvement in attainment of skill proficiency. The ACI may choose to discuss the form's content with a student to ensure understanding of the reasons for a

<b>Clinical Skill Feedback Form</b>	<b>Assessment:</b>
Student Name: <u>John Doe</u> Date: <u>4/7/10</u>	Student: <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Below Average <input checked="" type="checkbox"/> Average <input type="checkbox"/> Above Average <input type="checkbox"/> Outstanding Comments: <u>I need to have a system so I can perform an eval in a timely and smooth manner.</u>
<b>Description of Skill (check all that apply):</b> <input type="checkbox"/> Taping/Bracing <input type="checkbox"/> Acute Care <input type="checkbox"/> Rehabilitation <input type="checkbox"/> Pharmacology <input type="checkbox"/> General Medical <input type="checkbox"/> Injury Prevention <input type="checkbox"/> Modalities <input checked="" type="checkbox"/> Evaluation/Assessment <input type="checkbox"/> Administrative <input type="checkbox"/> Psychosocial <input type="checkbox"/> Other: _____ Details: <u>Ortho evaluation for ITB/R lateral knee pain</u>	ACI: <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Below Average <input checked="" type="checkbox"/> Average <input type="checkbox"/> Above Average <input type="checkbox"/> Outstanding Comments: <u>Continue to work on communication with athlete using layman terms so they better understand what you are asking from them.</u>
<b>Location of Skill Performance:</b> <input type="checkbox"/> Physician's Office <input checked="" type="checkbox"/> Athletic Training Facility <input type="checkbox"/> Weight Room <input type="checkbox"/> Gym/Practice Field <input type="checkbox"/> Other: _____	<b>Suggestions for Improvement:</b> <u>Develop flow of evaluation so you can become comfortable with patient positioning terms.</u> _____ _____ ACI Signature: _____

Figure 1 Clinical skill feedback form.