

The APTA Clinical Instructor Education and Credentialing Program: Perceptions of clinical instructors related to the need and a change in clinical instruction skills before and after the course. Stephens, Stacey L.; Bandy, William D. University of Central Arkansas, Conway, AR, USA.

Purpose: The purpose of this study was to investigate how clinical instructors (CIs) feel about the APTA Clinical Instructor Education and Credentialing Program before and after participation in the program. An additional purpose was to determine perceptions about one's own clinical instruction skills before and after the credentialing program. **Background/Significance:** Although the voluntary APTA Clinical Instructor Education and Credentialing Program began in 1996, no studies have evaluated CIs' perceived need for the course or use of acquired skills after the course. **Subjects:** Twenty (15 female and 5 male) participants of an APTA CI Education and Credentialing Program served as subjects. Average years experience as a CI was 5.89 and ranged 1-18 years; 50% were APTA members; and as highest degree 60% held the masters, 30% bachelors and 10% DPT. **Methods and Materials:** Pre, post, and four-month post surveys were used to (1) collect information about each CI (pre-course survey) and (2) assess, using a five-point Likert scale of strongly disagree (1.0) to strongly agree (5.0), whether CIs viewed a credentialing program as an asset, whether the program was necessary to be a good CI, and how comfortable they were performing 10 general activities (pre, immediate post, and 4 month post surveys), and (3) to assess learning and application of information gained in the credentialing program immediately following the course and then four-months later (immediate post and four-month post surveys). **Analyses:** Descriptive statistics were used. **Results:** The majority of participants at pre, immediate post, and 4 month post, (mean = 4.05, 4.45, and 4.36, respectively), agreed that the course was an "asset"; however, participants did not feel that the course was "necessary" to be a competent CI (mean = 3.00, 3.50, and 2.57 at pre, post, and 4 month post, respectively), particularly at 4 month post. Also, fewer agreed that the course was valued by their peers/colleagues (mean = 3.84, 4.0, 3.71) and employer (3.85, 4.30, 4.0) at the 4 month post compared to the pre and immediate post. At immediate post, 100% of participants agreed or strongly agreed that the course resulted in gain of professional abilities, that the new abilities would be used, and that use of the new abilities would make a difference in quality of their instruction (mean = 4.07, 3.86, and 3.50, respectively). However, at 4 month post 93% agreed (mean = 4.07) that the course resulted in gain of abilities, 78% agreed (mean = 3.86) that the abilities were being used, while only 50% agreed (mean = 3.50) that the gained abilities were making a difference in quality of their instruction. Regarding CI activities, the combined mean for all 10 skills related to clinical instruction were 3.69 at pre-course, 4.21 at immediate post-course, and 4.16 at 4 month post course. Skills that were rated high at pre-course and increased at immediate post and 4 month post included goal setting and communicating effectively. Skills that varied in ratings at each survey interval were identifying legal issues such as ADA and dismissing a student. **Conclusions:** On many items, ratings were higher at immediate post compared to 4 month post course and pre-course. Participants have more confidence in the CI Credentialing course and their abilities immediately after than they did prior to and four months after the course. Also, participants agreed that the course was an "asset" both before and after the course, but rated it less "necessary" to be a competent CI 4 months later than they did prior to and immediately after the course. In addition, CIs agreed overall that they possessed the needed abilities to perform the majority of skills surveyed, except for rating themselves lowest for dealing with legal issues and dismissing a student. **Funding Source:** Funded by the University of Central Arkansas Department of Physical Therapy, Conway, Arkansas. No monetary reward pending.

This abstract was presented as a poster presentation at PT2005: Annual Conference and Exposition of the APTA, Boston, MA; June 10, 2005.