

Initial Clinical Site Assessment

Facility Name:					
Address:					
Clinical Setting:	IP acute	IP SNF	OP ortho	OP sports	Other:
	IP sub-acute	Home Health	OP neuro	OP peds	
Site Accreditation	JCAHO	CARF	Govt Agency	Other	
SCCE for PT:			Email:		
			Phone:		
Active DPT student program: Yes or No					
IACCC partner: Yes or No					
CI:student model:		1:1	1:2	2:1	Other:
Number of Clinical Instructors:					
ABPTS Board Certified:					
APTA CCIP credentialed:					
Other CI Training:					
Years of Experience as CI:					
Specified Learning Outcomes beyond school provided syllabi?					
Clinic Operations					
Specific philosophy of care or focus or treating style?					
Parent site with multiple locations: Yes or No					
Clinic Hours:					
Patient population (ie age, conditions, ethnic, socioeconomic demographics):					
Types of insurance accepted:					
Direct access: Yes or No					
Daily caseload of staff PT:					
Time for evaluation:		Time for treatment:		Time given to documentation:	
EMR:					
Use of PTAs or aides:					

IPE activities (ie co-treatments, consultations, grand rounds, journal clubs, etc):	
Other unique opportunities:	
Student Onboarding Requirements:	
<i>Inpatient specific:</i>	
Which floors/units take students:	
If census fluctuates, can the student float to another unit?	
Any units which restrict students treating (ie COVID areas, ICUs)?	
<i>Home Health specific:</i>	
Are the staff PTs full time?	
Typical caseload?	
If caseload fluctuates, can the student float to an affiliated clinic?	
Are students expected to drive themselves or ride with CI?	
Clinical site and immediate surrounding area appears safe for students: Yes or No	
Clinical site appears to have adequate and up to date equipment: Yes or No	
Clinical site appears to have adequate staffing at time of visit: Yes or No	
Site Visitor Name/Signature:	Date: