



Competency Statement	Sample Learning Objectives	Associated Learning Activities	Associated Assessment Strategies
Domain II: Communication and Collaboration			
1. Adapt verbal and non-verbal communication strategies used with patients and care partners to maximize patients' receptive and expressive language and/or emotional and behavioral status to foster engagement, inclusion and shared decision making;	1. Demonstrate effective methods for approaching and communicating with a patient who exhibits behaviors such as: agitation, emotional lability, and impulsivity. 2. Adapt communication with an individual who has limited verbal communication or impaired cognition. 3. Identify signs of distress and discomfort in patients with limited verbal communication or impaired cognition 4. Demonstrate effective communication (verbal and /or non-verbal) with a patient / care partner (or simulated	See outline below	See outline below

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	<p>patient/care partner) incorporating shared decision making to set patient centered goals.</p>		
<p>2. Collaborate with patients and care partners, interprofessional teams, and relevant community partners to gather comprehensive information to negotiate, and manage a successful and evolving patient-centered plan across the continuum of care;</p>	<ol style="list-style-type: none"> 1. Describe the role of the PT in collaborating with the rehabilitation team to develop a discharge plan for a patient in an acute care setting 2. Demonstrate effective communication with interprofessional team members related to changes in patient status (such as changes necessitating modification to the plan of care and/or emergent medical changes) 3. Effectively communicate and demonstrate care partner education for home discharge incorporating training related to the patient's health condition, needed 		

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	<p>supports, and safety concerns</p>		
<p>3. Produce documentation that clearly describes the complex elements of patient management and justifies the resources necessary to support changes in functional status, environmental context, or life situations across the lifespan.</p>	<ol style="list-style-type: none"> 1. Based on a synthesis of examination findings, document a succinct and comprehensive assessment statement. 2. Based on examination findings, document realistic short- and long-term goals based on prognosis and personal environmental / contextual factors. 3. Produce documentation of a patient treatment session, incorporating appropriate descriptions of interventions, thorough assessment, and plan for continued management during the episode of care 		

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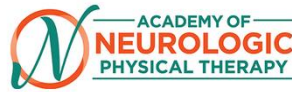
Competency Statement 1:

Adapt verbal and non-verbal communication strategies used with patients and care partners to maximize patients' receptive and expressive language and/or emotional and behavioral status to foster engagement, inclusion and shared decision making

- ***Objective 1: Demonstrate effective methods for approaching and communicating with a patient who exhibits behaviors such as agitation, emotional lability, and impulsivity.***
 - **Learning activity** (Think-Pair-Share/Small Group case discussion): A video patient interaction (either simulation or real patient) can demonstrate these behaviors in a clinical context. Instructor will pause the video at appropriate times to allow small group discussion, e.g., students reflect on behaviors the patient is exhibiting and discuss how the therapist should mitigate these behaviors to maximize communication.
 - **Learning activity** (Student simulation/role play). Pairs of students will simulate a PT evaluation or treatment session where the patient exhibits behaviors that the PT must manage to accomplish the task.
Assessment: A student “observer” could provide peer feedback including what the SPT did well and how they could improve in future interactions. Alternatively, simulated interactions could be video recorded to allow the SPT to assess their own performance.
- ***Objective 2: Adapt communication with an individual who has limited verbal communication or impaired cognition.***
 - **Learning Activity:** (Think-Pair-Share/Small Group case discussion) Could use same learning activities listed in Objective 1, adapted to patients with limited communication/cognition
 - **Learning Activity:** (IPE presentation) Lecture from SLP regarding communication disorders and adaptive communication methods.
Assessment: Pre-assessment (test of knowledge) / repeated after the lecture and discussion.
- ***Objective 3: Identify signs of distress and discomfort in patients with limited verbal communication or impaired cognition***

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- **Learning Activity:** (Simulation/role play) One student/standardized patient will simulate the role of a patient with a neurologic diagnosis while another student will simulate the role of a PT. The students will simulate a PT evaluation or treatment session where the patient exhibits distress or a medical emergency (unsafe vital sign response, sudden SOB, non-verbal signs of physical/emotional distress, etc.).
Assessment: 2-3 other students could be assigned as “observers” to analyze the interaction and provide appropriate feedback to the “patient” and “PT”

- **Objective 4: Demonstrate effective communication (verbal and /or non-verbal) with a patient / care partner (or simulated patient/care partner) incorporating shared decision making to set patient centered goals.**
 - **Learning Activity:** Vignettes of patient cases will be provided to the student PT paired one on one with a scripted role player (faculty or SP) as the care partner. Examination data will be provided to the student PT. Goal of the conversation is to come to shared patient centered goals (role play can include various challenges such as care partner not recognizing level of impairment or need for assist, anxiety, etc.).
Assessment: Graded rubric with active listening and shared communication expectations. Debrief after the role play with immediate feedback. Can choose to simulate aspects of the experience again to implement communication strategies.

Competency Statement 2:

Collaborate with patients and care partners, interprofessional teams, and relevant community partners to gather comprehensive information to negotiate, and manage a successful and evolving patient-centered plan across the continuum of care

- **Objective 1: Describe the role of the PT in collaborating with the neurorehabilitation team**
 - **Learning Activity:** (IPE presentation) Panel discussion including members of the interdisciplinary rehab team (ex: Nursing, OT, ST, MSW, RD). Each presenter/panel member will discuss their role and scope of practice in the management of individuals with neuro diagnoses across the continuum of care.
Assessment: Students will take a “pre-quiz” prior to the presentation to identify the PT students' understanding and gaps in knowledge of the role/scope of other healthcare professions. A post-quiz will be taken after the presentation to highlight knowledge gained.

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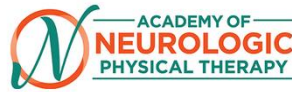
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- **Learning Activity:** (IPE activity) Students from various health care disciplines (as available) will participate in an interprofessional panel discussion in which they describe their role and scope across the continuum of care. The PT student will emphasize general exam and intervention strategies as well as the role of PT in patient/care partner education, equipment prescription, and community re-entry.
Assessment: Students will take a “pre-quiz” to identify their understanding and gaps in knowledge of the role/scope of other settings prior to the discussion. A post-quiz should identify knowledge gained about the role/scope of all disciplines.
- **Objective 2: Demonstrate effective communication with interprofessional team members related to changes in patient status (such as changes necessitating modification to the plan of care and/or emergent medical changes)**
 - **Learning Activity:** Simulated patient care “huddle” in acute care. Students present physical therapy case information including if a patient has made progress towards goals and works with the interdisciplinary team (can be with other SLP, OT, case manager students or role players) to collaborate on a plan of care or discharge recommendations.
Assessment: Debrief with faculty and interdisciplinary team.
 - **Learning activity** (Simulation/role play). Students will participate in a simulated interaction with another healthcare provider to communicate a change in patient status or medical emergency, e.g., ex. simulation of an individual in acute care s/p SCI who is experiencing autonomic dysreflexia, individual s/p stroke who is experiencing orthostatic hypotension with syncope). (This could be done with PT students simulating all roles, utilizing students from other disciplines in their roles, or having an instructor serve as the person the PT student is communicating with). 2-3 other students could be assigned as “observers” to analyze the interaction and provide appropriate feedback to the providers.
Assessment: “Observers” could provide peer feedback including what the SPT did well to maximize communication; how the SPT could improve verbal and non-verbal communication.
***This could be paired with the simulation activity listed under identification of signs of distress in a patient with limited communication*

- **Objective 3: Effectively communicate and demonstrate care partner education for home discharge incorporating training related to the patient's health condition, needed supports, and safety concerns.**
 - **Learning Activity:** During psychomotor lab practices of skills (e.g. transfers, bed mobility, gait), incorporate cases that require demonstration of care partner education for discharge home for various skills and equipment use.
Assessment: During psychomotor skills check or practical examination, students will also demonstrate appropriate communication and methods of care partner education.
 - **Learning Activity:** (Simulation / Role Play): Present cases with various neurological diagnoses and educational needs (e.g. Individual with traumatic brain injury with impulsivity and safety concerns, requiring 24 hour supervision / minimal physical requirements; individual s/p stroke with hemiplegia who requires physical assist for all mobility, individual with ALS who is dependent for all mobility and breathing assistance (lines and tube management)). Complete care partner education for home discharge.
Assessment: Rubric with communication expectations (complete / incomplete) for immediate feedback from either peers or faculty members. Could use video with assignment including self-reflection and assess personal performance (recommend guided self-reflection questions, goals for how this will change behavior in future interactions).
 - **Learning Activity:** Using paper cases or video patient examples, students will identify potential barriers and facilitators to home discharge. Verbalize strategies for care partner education that will facilitate effective education and safe discharge. Identify appropriate equipment needs, and discuss how to communicate this to care partners, considering the person's home, insurance benefits / financial barriers.
Assessment: case-based multiple choice exam questions or short answer questions
 - **Learning Activity:** (Simulation/Role Play) Acute care simulation activity (simulation lab or SP role players) with a variety of cases. Based on exam data or prior physical therapy notes, students will complete caregiver education or patient education for safe discharge home. (e.g. diagnosis of stroke requiring assist for all transfers and gait, individual with diagnosis of TBI who requires dependent assist for all mobility including dependent transfers with hydraulic lift, etc.).

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Assessment: Debrief in small groups with faculty after the simulation including discussion of effective communication and education.

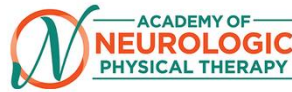
Competency Statement 3:

Produce documentation that clearly describes the complex elements of patient management and justifies the resources necessary to support changes in functional status, environmental context, or life situation across the lifespan

- **Objective 1: Based on a synthesis of examination findings, document a succinct and comprehensive assessment statement, and realistic short- and long-term goals based on prognosis and personal environmental/contextual factors**
 - **Learning Activity:** In small groups with faculty facilitators, view videos of individuals with various central and/or peripheral nervous system diagnoses, performing some type of functional movement (patient videos, YouTube videos identified by faculty). Think / Pair / Share: intermittently breaking into pairs, students describe the individual's movement problem through the stages of movement. Link the movement problem to specific impairments (body structure function / clinical components) describe how this led to differential diagnosis of central and/or peripheral nervous system diagnosis. Provide a detailed examination, and have students individually write an assessment portion of a SOAP note. After giving additional personal, environmental and contextual information, have students write STG / LTG (SMART Format) in pairs before returning to large group for discussion (can use a shared document (ex. google doc) to allow students access to example goals).
Assessment: Once documentation is completed, have students read their discussion partners' assessment, providing feedback based on a grading rubric, including the strengths and opportunities to strengthen the documentation.
 - **Learning Activity:** As part of a larger community volunteer series (or using scripted patient role plays): In a series of 3-5 sessions, small groups of 3-4 students paired with a faculty member and a community volunteer with a neurological diagnosis have 1.5 hours "physical therapy" simulated sessions. Each session has a specific goal (ex. Examination, outcome measure performance, interventions). After each session, students independently write a SOAP note.
Assessment: Rubric with specific criteria for faculty feedback on each component of the note for feedback. Expectation that feedback will be integrated into the next SOAP note in the series.

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- **Learning Activity:** Integrate this activity into a psychomotor lab-based course either as an individual assignment, or a series throughout the course. Students choose case(s) that were practiced during the session to develop SMART format STG and LTGs. At the end of the lab session, students independently write goals. Or can turn in for feedback by faculty.
Assessment: Documentation expectations (e.g. rubric, list format) for peer review, faculty feedback or self-assessment. Can also provide an example documentation after assignment is completed for reference.

- **Objective 2: Produce documentation of a patient treatment session, incorporating appropriate descriptions of interventions, thorough assessment, and plan for continued management during the episode of care**
 - **Learning Activity: Continuation of Above:** As part of a larger community volunteer series (or using scripted simulated role plays): In a series of 3-5 sessions, small groups of 3-4 students paired with a faculty member and a community volunteer with a neurological diagnosis have “physical therapy” simulated sessions. Each session has a specific goal: 1. Examination, 2. Outcome Measures, 3 – 5: Interventions. After each session, students independently write a SOAP note.

Assessment: Rubric with specific criteria for faculty feedback on each component of the note for feedback. Expectation that feedback will be integrated into the next SOAP note in the series.

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