AN EXAMINATION OF APPROVED CLINICAL INSTRUCTOR-STUDENT DYADS IN ATHLETIC TRAINING CLINICAL EDUCATION

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Context: Current literature has found that student learning (including feedback and active learning time) in the athletic training clinical education setting differs between settings and clinical instructors. However, more information is needed about the intricacies of ACI-student relationships and their influence on student learning.

Objective: The purpose of this study was to investigate the interactions that occur between one-on-one Approved Clinical Instructor (ACI) and athletic training student dyads in multiple athletic training clinical settings. Design: This exploratory, multi-case qualitative study drew from case study and grounded theory approaches to research. Setting: Data was collected in one intercollegiate athletic training facility and one outpatient rehabilitation clinic that were clinical rotation sites for one CAATE-accredited entry-level master’s Athletic Training Education Program (ATEP). Patients or Other Participants: Four ACIs and four second-year athletic training students were purposefully selected based on their clinical rotation sites and year in the ATEP. ACI participants included three females and one male with various years of experience as a clinician (14.8±9.6) and ACI (5.3±3.0). Student participants included three males and one female, all in their fourth semester of a five-semester educational program.

Data Collection and Analysis: Participants were observed, audiorecorded, and interviewed over a seven-week period during the fall semester. Interviews and feedback statements from the audiorecordings were transcribed verbatim. Data was analyzed using the constant comparative process of coding, in addition to coding categories used in the literature. Peer debriefing, participant quotations, member checking, and triangulation of methods, sources, and sites were used to improve trustworthiness of the data.

Results: Results demonstrated that while some components of ACI-student interactions are similar, each ACI-student dyad has unique interactions. ACIs had similar approaches to teaching their students, and both students and ACIs described that personality, setting, time, presence of the patient, and other factors influence their interactions. Three distinctive themes also emerged from each ACI-student dyad. One dyad focused on extensive discussion, often led by the student, whereas another dyad had a more traditional, instructor-led interaction that relied on formal documentation and less input from the student. One ACI-student pair had difficulty with communication, professionalism, and confidence, which negatively impacted the delivery of feedback and interaction between the pair. Another ACI and student both prioritized learning and advanced clinical reasoning, which they believed improved the student’s clinical experience.

Conclusions: Results of this study suggest that each ACI-student interaction is unique. This has implications for the training and evaluation of ACIs, and the pairing of ACIs and students for clinical education experiences. Future research should explore these unique factors in more depth across several athletic training education programs. In the meantime, clinical education coordinators should consider how student learning experiences may differ between ACI-student dyads in their own ATEP. Key Words: Feedback, Supervision. Word Count: 453