



CLINIC GUIDELINES

These policies support and extend COMTA Accreditation Standard II.E. This document serves to provide additional guidelines and instruction for schools striving for compliance.

STATEMENT OF PURPOSE: *The clinic/fieldwork experience is a vital component of student learning. Clinic/fieldwork should be considered an integral part of the instructional process, with appropriate learning objectives and evaluation tools. Clinics may be either permanent health centers in which students operate or temporary clinics in classrooms, as long as the program can substantiate that the experience models professional procedures and involves members of the general public. Off-site, supervised fieldwork may also be included, but hands-on practice in other classes may not be considered part of the clinic hours.*

STANDARD II.E.5: Clinic/fieldwork hours are appropriate to the length of the program and adhere to the following:

- a. Hours do not exceed 25 percent of the required hours of the program.
- b. A minimum number of hours/client sessions on the general public must be performed and documented.

COMMISSION GUIDELINES:

After much research deliberation and review of calls for comment, the Commission determined to not prescribe a set number of minimum client sessions for all schools/programs around the country. Instead, the Commission relies upon the institution/program to **demonstrate that its number of clinic hours and/or client sessions is appropriate to ensure student proficiency in meeting the standards and curriculum competencies**. The number of clinic hours and/or client sessions should be set with the following considerations in mind:

1. State massage/esthetics licensing law requirements
2. COMTA Standard II.E.5.a: Does not exceed 25% of hours
3. COMTA Curriculum Competencies
4. ELAP minimum recommendation: 50 hours
5. Commission suggestion: 100 hours (based on calls for comment and school survey results)

If the school's minimum number of clinic hours and/or client sessions differs significantly from any of these factors, the responsibility rests with the school to demonstrate how it is appropriate and sufficient for the school's curriculum and size/scope and the Commission's background rationale for the clinic experience (below).

BACKGROUND RATIONALE:

During the 2013 revisions of the COMTA standards, the Commission evaluated the current recommendations for minimum and maximum amounts of time spent in clinic. Previous versions of the standards specified a maximum percentage of the program which could be spent in clinic, as a method for ensuring that programs provided adequate content in addition to practice time.

The opportunity to practice on clients with guidance from instructors is believed to have a significant role in preparing students for professional practice after graduation. There are many opinions about how much time is enough; the ELAP recommendation is 50 hours, responses to COMTA surveys indicated that 100 hours would be adequate, while others have asserted that the quality of interaction with clients is more important than the number of sessions or amount of time. The Commission expects each program to create a clinical experience which provides students the opportunity to practice techniques, get nervous about working with strangers, encounter pathologies which they may not understand, become humble about the myriad of situations which may present themselves in the professional world and subsequently build their confidence for entering that world. A knowledgeable and qualified faculty member should be available to guide students through their challenges in the clinic.

Clinic experiences should give students an opportunity to practice skills within the protected environment of faculty supervision. Further, the Commission asserts that the clinic experience must have an *instructional* focus, not merely practice with supervision. This is a college course for which students are paying to learn and improve in a valuable hands-on environment and all operations should be conducted to such an end.

Each institution may emphasize different aspects of the clinic experience to align with the mission, objectives and philosophy of the school. For instance, a program with an emphasis on detailed rehabilitative work and on-going treatment planning should have a significant portion of clinic devoted to students practicing pre-session assessment, note taking, development of an on-going treatment plan, documentation of session results, and so on. Alternatively, a program which emphasizes the value of full-body relaxation for stress relief might instead create a clinic experience where the student practices their rhythm and sequencing, without as much time devoted to note taking.

As such, the course objectives for clinic may vary widely between institutions. Programs may choose from any of the COMTA Competencies to be included in the clinic experience, and this should be clear to reviewers and students. Some clinic experiences are devoted solely to hands-on practice with diverse clientele; others involve considerable business/professionalism objectives; some may involve research and case studies. All of these varying objectives are fine as long as the operations and student evaluation/assessment support the objectives. For example,

if the objective is to practice skills taught in the classroom, clinic instructors may do more direct observation and evaluation of students' hands-on performance. However, if professionalism is more a focus, supervision may be less direct and emphasize discussions, review of notes and client feedback. **The Commission will look for this alignment between course objectives, COMTA Competencies, and assessment during the review.**

Regardless of the operations, the clinic experience must involve students working on members of the general public to help them develop and practice strategies for interacting with clients who may present challenges other than those they have encountered in the classroom.

COMPLIANCE REVIEW:

During the accreditation process, the institution or program will describe to COMTA how the clinic experience is designed to prepare students for their entry to the profession. A program may measure their clinic experience based on number of client sessions, hours of contact with clients, or hours of time working in the clinical environment. In all cases, the program should ensure that the clinic is a structured learning environment rather than an open study hall. In addition to working with clients, students might participate in office duties, marketing, and other tasks which are clearly related to learning how a clinic operates. (In such cases, the course objectives/syllabus should clearly demonstrate these activities.) There should be procedures in place to dictate what happens when a client does not show for an appointment or presents a health condition for which the planned treatment is contraindicated. The school must have some way to ensure that students are completing the expected number of sessions or hours of client contact, within a reasonable allowance for client absence.

NOTE ABOUT EXCESSIVE HOURS:

Clinic standards have also aimed to prevent programs from requiring students to perform excessive amounts of clinical work on clients without having guidance from or their performance evaluated by supervising faculty members. To this end, requiring that students perform sessions on family and friends outside of the supervised environment has only been allowed as homework; no clock hours may be awarded for such practice. COMTA recommends that institutions be familiar with the liability implications for student practice before assigning work in this fashion, as students may not be covered by institutional insurance when practicing out of the classroom. Furthermore, some state laws specifically prohibit students from practicing techniques without supervision. The institution is responsible for knowing the laws in their jurisdiction and being aware of the limits of the insurance coverage that they provide on behalf of students.