

KINESIOLOGY PRACTICUM DESCRIPTION

Practicum Position Title: Physiotherapy/ Chiropractic Assistant

Agency/Company: [Active Sports Therapy \(AST\)](#)

Location: 220, 9950 Macleod Trail SE, Calgary, AB

Terms Available: Fall, Winter, or Spring

Number of Positions: 2-3

Specified Schedule: Afternoons

Project Duties/Responsibilities:

Active Sports Therapy (AST) is an innovative multidisciplinary health care facility dedicated to the treatment and prevention of sports injuries, repetitive strain disorders and conditions involving the joints and soft tissues. A collaborative network of highly skilled practitioners provide patients with the best and most up to date results oriented treatment methods for injury correction, prevention and health optimization.

Practicum students will:

- Assist therapists with set-up and removal of modalities such as ultrasound, interferential current (IFC), Laser, Heat and Ice
- Assist and monitor clients through their exercise program
- Observe the physiotherapists' assessments, treatment plans and patient management
- Observe hands-on treatment including active release techniques, IMS, acupuncture, exercise prescription and custom orthotics
- Support therapists by helping to ensure that the clinic is operating efficiently by greeting and caring for patients in a supportive manner, making patient's beds and maintaining cleanliness of working environment
- Network with professionals in the clinic who are involved in specialties such as Active Release Technique (ART), Physiotherapy including Intramuscular Stimulation (IMS), Sport and Family Chiropractic, Massage Therapy, Athletic Therapy, Naturopathic Medicine, Traditional Chinese Medicine, Prolotherapy, Low Intensity Laser Therapy, Nutrition and Exercise Rehabilitation/ Movement Correction

Required Student Qualifications:

- Completion and excellent recall of KNES 259/260 (Anatomy & Physiology)
- Completion of KNES 373 (Exercise Physiology)

Assets:

- KNES 375 (Tests & Measurements) an asset
- KNES 479 (Advanced Fitness Appraisal & Exercise Prescription) an asset

On-Site Supervisor: Dr. David Westmacott, BKin, DC, RMT, drdave@activesportstherapy.ca

Kinesiology Practicum Application

Placement: Active Sports Therapy (AST)

Students must have 60 units completed to qualify for a practicum, including 30 units of KNES
Students may participate in up to three practicums, with no more than two at the same location

Submit together to
knespracticum@ucalgary.ca:
 Completed Practicum Application
 Confidentiality Agreement

INSTRUCTIONS

1. Contact the on-site supervisor to arrange an interview.
2. Bring a copy of this application with the completed student portion to your interview to be completed by the On-Site Supervisor.
3. Submit application and required documentation (if applicable) to knespracticum@ucalgary.ca; our office will email your @ucalgary address within 5 business days with next steps for you and your On-Site Supervisor.

STUDENT PORTION – COMPLETE PRIOR TO INTERVIEW

| | | |
|---|---|--|
| Practicum Term | | |
| <input type="checkbox"/> Fall _____ (year) | <input type="checkbox"/> Winter _____ (year) | <input type="checkbox"/> Spring _____ (year) |
| Student Information | | |
| Name: | UCID: | |
| Phone Number: | Email: | @ucalgary.ca |
| Student Practicum Expectations: Why have you chosen this practicum placement? (1-2 sentences) | | |
| Code of Conduct | | |
| Students are responsible for compliance with the University of Calgary's Code of Conduct . | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | I have read and understood the University of Calgary's Code of Conduct. | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Do you have a pre-existing relationship(s) with person(s) or group(s) associated with this practicum placement? If yes, please briefly explain the nature of the relationship: | |
| I agree that: | | |
| <ul style="list-style-type: none">• No salary or payment will be received based upon my participation in a Kinesiology practicum placement• I will meet the expectations of the practicum placement for which I am applying• I will be punctual throughout my practicum placement and will adequately notify the On-Site Supervisor about any absence(s).• I will complete 60-72 hours within the dates of the term. | | |
| Start Date (first day of lectures) | End Date (last day of lectures) | |
| _____ | _____ | |
| <input type="checkbox"/> I agree with the above-mentioned terms and conditions. | | |
| Student's Signature: | Date: | |

| | |
|---|--|
| ON-SITE SUPERVISOR PORTION | |
| Name: Dr. David Westmacott | Organization: Active Sports Therapy (AST) |
| Phone: | Email: dr.dave@activesportstherapy.ca |
| As the On-Site Supervisor, I agree that: | |
| <ul style="list-style-type: none">• No salary or compensation will be given to the practicum student• I will provide sufficient hours, supervision, and guidance during this practicum placement• I will complete a mid-point and final evaluation for the practicum student. | |
| <input type="checkbox"/> I agree with the above-mentioned terms and conditions. | |
| On-Site Supervisor's Signature: | Date: |

CONFIDENTIALITY AGREEMENT

Practicum students and the agency must complete the signed confidentiality agreement and submit it (along with the practicum application form) to knespracticum@ucalgary.ca.

THIS AGREEMENT is made as of the _____ day of _____, 20_____.

BETWEEN:

(hereinafter called the "**Agency**")

AND:

(hereinafter called the "**Student**")

Whereas:

It is the Student's legal and ethical responsibility to protect the privacy, confidentiality and security of all records, proprietary information and other confidential information relating to the Agency, including business, employment and medical information relating to patients, members, employees and health care providers. ("Confidential Information").

And whereas:

The Agency has adopted policies and procedures regarding Confidential Information including its policies and procedures for complying with the *Freedom of Information and Protection of Privacy Act* and the *Health Information Act* ("Policies and Procedures").

In witness hereof, the parties agree as follows:

1. The Agency agrees to disclose and the Student agrees to receive Confidential Information in furtherance of participating in his/her practicum with the Agency, as set out in the Practicum Agreement.
2. The Agency agrees to advise, instruct and guide the Student as to the Policies and Procedures.
3. Upon receipt of the information set out in paragraph 2 herein, the Student agrees to use his/her best efforts to comply with the Policies and Procedures and to protect the Confidential Information, or any part thereof, and prevent it from being disclosed to any person contrary to the Policies and Procedures.

IN WITNESS WHEREOF, the parties have duly executed this Agreement effective as of the day and year first written above.

Agency

Student

Signed: _____

Signed: _____

Print Name: _____

Print Name: _____

Title: _____

Date _____

Date: _____