

Clarkson College

Clinical Education Handbook

Associate of Science
Physical Therapist Assistant Program
2018-2019



CAPTE Accreditation Statement

The A.S. Physical Therapist Assistant program at Clarkson College is accredited by (CAPTE) Commission on Accreditation in Physical Therapy Education, of the American Physical Therapist Association. CAPTE may be contacted at 1111 North Fairfax Street, Alexandria, VA 22314; 703-706-3245; accreditation@apta.org; www.capteonline.org.



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INTRODUCTION

This handbook provides guidelines for the Clinical Education Program in the Physical Therapist Assistant (PTA) curriculum at Clarkson College. The handbook should be used, as a reference, for the College's faculty, Center Coordinators of Clinical Education (CCCE), Clinical Instructors (CI), and for the learning experiences for our students.

The handbook is reviewed annually by the College's Clinical Education Team (see below) and seeks review and approval of any changes and updates with the faculty and program's curriculum committee.

Clinical Education Team

The Clinical Education Team is comprised of the Academic Coordinator of Clinical Education (ACCE) and designated Course Coordinators, who collectively manage and facilitate the PTA clinical education program and provide communication and outreach to clinical agencies, CCCEs, CIs, and students.

The primary role of the ACCE includes serving as the primary contact between Clarkson College's PTA program and clinical agencies, establishing/updating clinical affiliation agreements, student clinical placements/ matching, and ensuring all health and safety and additional onboarding requirements are completed, and students are in compliance, prior to attending clinical practicums, as well as facilitating PTA 125 Clinical Practicum I.

The primary role of the Course Coordinator is serving as the primary contact for CCCEs/CIs and students while completing PTA 220, PTA 240, and PTA 245 (Clinical Practicum II, III, and IV, respectively), scheduling and completing midterm site visits/calls, assisting with PTA CPI Web assessment, and final grading. All clinical agencies will receive electronic notification of who the Course Coordinator will be, for any given clinical practicum, prior to the student's arrival.

All students are subject to the policies of Clarkson College, as delineated in the PTA Program Handbook. It is recognized that this document may not contravene any policy of the College or laws of the state of Nebraska, or any rules, regulations, or policies of any state the student may be active in the capacity of receiving clinical education.

Please contact me if you have any questions, comments, and/or areas that need improvement within the Clinical Education Program at Clarkson College.

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PHYSICAL THERAPIST ASSISTANT IN THE PROFESSION

PTAs are an integral part of the health care team and provide skilled services to individuals across the lifespan. PTAs may work in a variety of settings including, but not limited to, hospitals, outpatient clinics, nursing homes, educational settings, and wellness facilities. PTAs perform and progress patient treatment based on the plan of care established by the supervising PT. Whether the patient's goal is to resume function after an illness or injury or to improve their physical fitness, PTAs have the skills to help people gain functional independence and improve quality of life.

Education

1. Clarkson College is accredited by the Commission on Institutions of Higher Education and North Central Association of Colleges and Schools (HLC).
2. The PTA Program is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) to offer an Associate of Science degree in PTA.

Role of PTAs

The PTA's functions, performed under the direction and supervision of a PT, include:

1. Application of physical therapy procedures to patients through:
 - a. Use of therapeutic exercise, mechanical traction, therapeutic massage, heat, cold, ultraviolet, hydrotherapy and electricity.
 - b. Measurement and adjustment of crutches, canes, walkers and wheelchairs with instruction in their use and care.
 - c. Instruction, motivation, and assistance to patients, and others, in improving pulmonary function, learning and improving functional activities such as transfers, ambulation, activities of daily living, and the use and care of orthoses, prostheses, and supportive devices.
 - d. Perform, without interpretation, selected measurement procedures such as range of joint motion, gross strength of muscle groups, length and girth of body parts, and vital signs.
 - e. Modification of treatment procedures, as indicated by patient response and within the limits specified in the plan of care, and reporting orally or in writing to the physical therapist.
 - f. Communication with members of physical therapy staff and other health team professionals, individually and in conference, to provide patient information.
2. Participation in routine administrative procedures required for physical therapy service.

Supervisory Relationships

1. The PTA works within a physical therapy service administered by a PT.
2. As a supervisor of the PTA, the PT is responsible for the following activities, regardless of the setting in which service is provided:
 - a. Interpretation of practitioner's referrals
 - b. Initial evaluation of the patient
 - c. Development of the treatment plan and program, including the long and short term goals
 - d. Assessment of the competence of the PTA to perform assigned tasks
 - e. Selection and delegation of the appropriate portions of the treatment plan and program

- f. Identification and documentation of precautions, special problems, contraindications, goals, anticipated progress, and plans for re-evaluation
 - g. Direction and supervision of the PTA in the delegated functions
 - h. Re-evaluation of the patient and adjustment of the treatment plan, final evaluation of the patient, and discharge planning
 - i. Designation or establishment of channels of written and oral communication
3. The PTA is obligated to:
 - a. Perform physical therapy services under the direction and supervision of a PT
 - b. Obtain, when necessary, the direction and supervision of the PT
 4. Supervision of the PTA by the PT includes observation of the application of physical therapy procedures, conferences related to patient progress, verbal reports of progress, and written reports. The closeness and frequency of supervision depends on the:
 - a. Complexity of the needs of the patients under care
 - b. Performance level of the PTA
 - c. Proximity of professional supervision in event of emergencies or critical events
 - d. Setting which patient care is being provided and the PT and the PTA are not continuously in the same physical setting; greater emphasis must be placed on supervision through frequent oral and written reports. Frequent observation of the care rendered must also be included in order for supervision to be effective.
 5. Communication of the treatment plan and patient program to the PTA by the PT, should include:
 - a. Long and short term goals
 - b. Precautions
 - c. Unique situations/concerns
 - d. Contraindications
 - e. Identification of physical therapy procedures delegated to the PTA
 - f. Anticipated rate of patient progress, and plans for re-evaluation of the patient

[CURRICULUM OVERVIEW](#)

Curriculum Outline/Course Descriptions

The PTA curriculum at Clarkson College is designed to be completed in either six semesters, two of which are summer sessions, or four semesters, which includes one summer session, if accepted into the transfer program. The program is based on an integrated model where general education requirements are incorporated throughout the PTA core curriculum. Some flexibility is built into the order of taking general education requirements; however, all designated PTA core courses must be taken in the sequence offered. At the present time, no courses designed as PTA are transferable to, or from, another educational institution with a comparable PTA program, or an institution which supports a physical therapy program.

The curriculum includes 15 weeks/600 hours of full-time clinical practicums. During these clinical practicums, each student will interact and have experiences with patients from across the lifespan, in a variety of settings that encompass a range of conditions, from acute to chronic. The goal for each student is to gain experience in primary, secondary, and/or tertiary care, in each of the following settings:

- Acute/inpatient (IP) hospital settings and/or skilled nursing facilities (SNF)

- Outpatient (OP) ambulatory care settings
- Specialized settings, such as pediatrics, burn units, or neurological rehabilitation centers, to name a few.

One of the clinical practicums must be completed in a rural setting, or an underserved area urban facility. The growing need in healthcare is largest in rural areas (defined as a population of 50,000 or less). Having experience in this setting will be beneficial in advancing a student’s own skills and in the job search following graduation. Rural areas are also historically known for providing a wide variety of experiences and learning opportunities.

The following links provide an outline of the Clarkson College PTA curriculum, with course descriptions for the traditional and transfer Associate’s degree options, as well as the Bachelor of Science in Physical Therapist Assistant (BS PTA) degree program options:

[Traditional Option](#)

[Transfer Option](#)

[BS PTA Degree](#)

*If there is a break in the links above please review information at our website <http://www.clarksoncollege.edu/physical-therapist-assistant/program-options/>.

Clinical Practicum Hours Summary

Clarkson College’s PTA program requires students to complete four (4) separate clinical practicums. Students will be expected to achieve designated competencies prior to participating in each clinical practicum, and are required to meet specific objectives for successful completion of each clinical affiliation experience (see Clinical Practicum Objectives in Appendices).

Clinical Practicum	Week/Hours	Traditional Program	Transfer Program
I- PTA 125	1 wk. /40 hrs.	Summer Semester-1 st year	Spring Semester -1 st year
II- PTA 220	3 wks. /120 hrs.	Spring Semester- 2 nd year	Summer Semester-1 st year
III- PTA 240	5 wks. /200 hrs.	Summer Semester -2 nd year	Fall Semester-2 nd year
IV- PTA 245	6 wks. /240 hrs.	Summer Semester- 2 nd year	Fall Semester -2 nd year

Achieved Academic Competencies

Clarkson College has formally measured PTA students on the performance of the following activities, as described under the appropriate clinical practicum objectives, and has declared them competent in such matters. The purpose of the information listed below is to provide the CCCE/CI with an overview of the clinical abilities the student has obtained prior to each clinical practicum noted.

CP I- PTA 125 (1-week)	CP II- PTA 220 (3-week)	CP III and IV – PTA 240 and PTA 245 (5- and 6-week)
<ol style="list-style-type: none"> 1. Joint range of motion (active, passive, active-assistive) 2. Patient positioning techniques 3. Use of proper body mechanics 4. Various patient transfers 5. Wheelchair management 6. Activities of daily living 7. Bandaging/asepsis/isolation techniques 8. Assessment of vital signs 9. Massage (effleurage, petrissage, tapotement) 10. Posture assessment /exercises to correct postural dysfunction 11. Gait training with various assistive devices 12. Goniometry (UE, LE, spine) 13. Manual muscle testing 14. Modalities: <ol style="list-style-type: none"> a) Therapeutic heat /cold b) Diathermy c) Ultrasound d) Phonophoresis e) Interferential current f) Transcutaneous electrical nerve stimulation g) Cervical/pelvic traction h) Intermittent pressure pump i) Low volt/high volt currents j) Iontophoresis k) Biofeedback l) Ultrasound/e-stim combo m) Neuromuscular electrical stimulation n) Soft tissue mobilization 15. Documentation/SOAP note-written, typed, electronic, dictation 16. Basic coding/billing (CPT and ICD codes, Medicare 8-minute rule, timed/service-based codes) 	<p>All items noted in PTA 125, in addition to the following skills:</p> <ol style="list-style-type: none"> 1. Study of pathological conditions 2. Stretching techniques 3. Isokinetic/isotonic /isometric exercises 4. Basic therapeutic interventions in physical therapist services 6. Modalities: <ol style="list-style-type: none"> a) Microcurrent b) Hydrotherapy/fluidotherapy c) Laser d) Taping techniques (including Kinesiotape, McConnell tape, and athletic tape) e) Manual Therapy (including therapeutic massage, transverse friction massage, trigger point massage, myofascial release) f) Wound Care 	<p>All items noted in PTA 220, in addition to the following skills:</p> <ol style="list-style-type: none"> 1. Spinal cord injury 2. Traumatic brain injury 3. Cerebrovascular accident 4. Amputations (prosthetics/ orthotics) 5. Burn and wound physical therapist services 6. Cardiopulmonary and cardiac physical therapist services 7. Manual therapy, including grade I-IV joint mobilizations 8. Wellness/prevention 9. Industrial rehabilitation 10. Sports medicine injuries 11. Pediatrics 12. Geriatrics 13. Women's health 14. Aquatics 15. Lymphedema

ADMINISTRATION OF CLINICAL PRACTICUMS

Student Clinical Selection/Placement

Student clinical practicum (CP) selection and placements are coordinated based on learning opportunities that provide a variety of experiences in a variety of physical therapy settings. The potential of the clinical site's staff to model professional behaviors within the PT/PTA team and provide opportunities with patients, representative of current practice across the lifespan, is also considered. Clinical practicums must enable students to meet all the clinical objectives outlined by the College and must contribute to the achievement of the outcomes required to achieve entry-level performance to safely practice in the profession. While students are permitted to indicate their preferences for placement, the clinical objectives will receive highest priority in the assignment process; convenience factors (such as schedule or commute time to the facility) will be given lowest priority.

During the clinical selection process, students select their top six (6) choices from a roster of available clinical agencies for PTA 220 (CP II), PTA 240 (CP III), and PTA 245 (CP IV) courses. Clinical practicum placement assignments are made by the ACCE for each clinical practicum. Clinical request forms are sent out on March 1st, of each year, to all CCCEs at clinical agencies who have an established affiliation agreement with Clarkson College PTA program. This date corresponds with the national uniform mailing date, as set forth by the APTA and is requested one year in advance of the upcoming clinical education year. Clarkson College is an Equal Opportunity/Equal Access/Affirmative Action institution. Clinical practicum placements are made without regard for race, color, marital status, gender, sexual orientation, religion, national origin, disability, age, Vietnam or disabled veteran status, as provided by law and in accordance with the College's respect for personal dignity.

Students may not contact clinical agencies, in advance, to discuss or arrange clinical learning experiences to meet their personal needs. Because of the importance and complexity of the processes for evaluating clinical agencies, and determining student readiness for clinical education, any student efforts to bypass the selection and placement process may result in disciplinary action by the ACCE and Program Director. Students may only initiate contact with a clinical agency after receiving a placement confirmation letter from the ACCE.

Students cannot be placed at any clinical agency where they are currently employed or have previously worked, in any capacity, or have an existing relationship with staff, such as being a patient or volunteer, which would have any potential for a conflict of interest. Students also cannot be placed at a clinical agency where an immediate family member would be in a position with supervisory authority over the student, CI, or the therapy department. Extracurricular activities may not interfere with clinical requirements.

Determination of Student Readiness for Clinical Education

The College faculty is responsible for determining students' readiness and progression toward clinical education by the achievement of course objectives, development of ethical and professional behavior, and safe practice. As such, faculty members, including the Clinical Education Team, are responsible for evaluating data to determine each student's achieved academic competency level toward practice expectations. Data used for evaluation may include written and practical exams, course assignments, professionalism grades, and any previous clinical practicums and assessments. In addition, students must demonstrate safe practice standards in order to achieve a passing score on the lab practical examinations, which are incorporated into many of the PTA courses.

The PTA CPI Web is the evaluation tool used during clinical education courses and includes several “red flag” items that students must successfully complete in order to receive a grade of “P” (Pass) in any clinical practicum course. Finally, students must attend all required clinical preparation meetings prior to beginning clinical practicums. These meetings include a review of the clinical practicum syllabus, student expectations, training and/or review of the PTA CPI, and strategies for independent learning and assuming responsibility for meeting their own learning needs.

PREPARING FOR CLINICAL PRACTICUMS

Clinical Affiliation Agreements

Prior to the first day of any student’s clinical experience, a valid affiliation agreement (i.e., contract) must be established between the College and clinical agency. Any agency providing physical therapist services may initiate the affiliation agreement process with the Clarkson College PTA program by contacting the College ACCE. The College ACCE may also approach an agency to explore the possibility of initiating an affiliation agreement.

After discussion of the requirements of the facility/staff to host a clinical practicum experience and the benefits of collaboration with Clarkson College, and both parties are in agreement to continue, an affiliation agreement will be established. Clarkson College has an established affiliation agreement encompassing all legal duties of the parties involved and is reviewed annually to remain current. The clinical agency and designated officer will then review and execute by signing this agreement. If the clinical agency wishes to propose their own contract/agreement, it would need to be presented to the College ACCE and Clinical Education Compliance Coordinator/s for review, prior to signing. Following signature execution, two copies of the affiliation agreement are provided, one will be housed at the College and the other with the clinical agency and/or CCCE. When possible, affiliation agreements will be established electronically, using DocuSign.

Clinical Agency/CCCE Student Manual

It is strongly recommended that each clinical agency have a student clinical education manual for review, or have students review the appropriate section of the department’s policies and procedures manual upon arrival. Having the student review such a document, prior to beginning the clinical practicum, will help him/her become familiar with the organization and prepare for the clinical experience. This may also decrease the time required for orientation upon arrival. In addition, information in such documents confirms the agency’s responsibility for preserving the privacy, dignity, and safety of all people involved in the care of patients and the education of students. Most of this information can be extracted from departmental policies and procedures, and/or HIPAA regulations.

Suggested clinical site manual information may include:

1. Statements of patients’ and students’ rights (note: patients’ rights must include the right to refuse treatment provided by a student PTA (SPTA)).
2. Release of information/confidentiality of the medical record and authorization for photographic use by subject
3. Informed consent to participate in care
4. Procedures for reporting illegal, unethical, or incompetent practices
5. Incident reporting process (employee, patient, student)
6. Emergency procedures

7. Safety rules, hazardous materials (SDS), universal precautions, emergency code system
8. Departmental philosophy and objectives
9. Organizational chart
10. Peer/utilization or quality assurance review processes
11. Facility support information: Parking, meals, library, lockers, etc...)
12. Samples of appropriate patient documentation, use of abbreviations, billing procedures, etc...

Student Clinical Education Orientation

The CCCE/CI is encouraged to prepare a summary of essential information that can be sent to each student prior to his/her arrival. Information should include the CI's name and phone number, driving instructions, parking, hours of operation, dress code, information about meals, etc. A formal, structured orientation to the center (and physical therapy/rehab department) should occur as early as possible in the clinical practicum to help relieve any student concerns, which can prevent potential problems that are a result of "no one told me" or "I didn't know". Time needed for orientation is primarily dependent on the size of the facility and the student's prior experience(s). A typical orientation should include the following:

1. Introduction to key personnel and their job responsibilities; chain of command
2. Tour of the center and department and review of personal safety concerns
3. Location of equipment and supplies
4. Desk space, office supplies, library and other resources
5. Introduction to documentation, medical record, filing, student credentials
6. Introduction to patient scheduling and billing
7. Initial observation of delivery of physical therapist services
8. Emergency procedures, evacuation routes, safety rules, infection control
9. Calendar of events for department; timetable for student objectives
10. Review of confidentiality and facility policies
11. Hours of operation
12. Dress code
13. Review of policies and procedures manual
14. Items from student clinical education manual (above)

Assignment and Effectiveness of CIs

The assignment of clinical instructors is performed by the CCCE and should be based on criteria for clinical competence determined by each clinical center. These criteria may include in-services and continuing education courses attended, advanced degrees, clinical experience (no less than one year), teaching experience (in-services, clinical education, continuing education, formal classroom), and research experience. The CCCE is encouraged to give thoughtful consideration not only to the potential clinical instructor's clinical skills but also to his/her interest and willingness to teach. The CCCE may also consult with the College ACCE to develop guidelines and a formal procedure for establishing criteria for clinical instructors, appropriate for their center and consistent with job descriptions. The effectiveness of clinical instructors, as educators, is determined by the ACCE in collaboration with the CCCE. Means for determining effectiveness include the review of completed PTA CPIs, formal feedback from students on the APTA Student Evaluation of Clinical Experience and Clinical Instruction (SECECI) form, CI self-assessment, and direct communication between the ACCE and students and the CCCE and CIs. Each facility is encouraged to include criteria for clinical instructor responsibilities in job descriptions and

performance evaluations. The ACCE is available to assist in the development of these documents and relies on the CCCE to take action on any deficiencies according to the center's policies.

Ineffectiveness of clinical instructors includes such behaviors as:

1. Failure to identify potential "red flags" early in the student performance
2. Failure to provide students with the CI's expectations and on-going feedback on their performance
3. Failure to complete the PTA CPI Student Assessment in a timely manner
4. Failure to develop on-going, progressively more challenging learning opportunities for students
5. Failure to demonstrate contemporary physical therapist practice consistent with the APTA Code of Ethics for the Physical Therapist, Standards of Ethical Conduct for the Physical Therapist Assistant, Standards of Practice for Physical Therapy, and the Guide to Physical Therapist Practice

Initial Student Contact with Assigned CI

It is the student's responsibility to contact the assigned CI/CCCE **at least four (4) weeks prior** to the first assigned day of a clinical practicum. The student's first contact should be by phone or letter, and may be followed up by other means of communication. The student should then e-mail or fax the CI a copy of the completed Student Self-Assessment (SSA) form. Failure to do so may result in a delay in beginning the clinical practicum, or may necessitate reassignment. Many agencies have specific requirements (onboarding); because these requirements are subject to change, students must allow ample time to respond. All agency requirements should be met prior to, or by the end of, the first day of the clinical practicum.

Communication between Clinical Agency, Student, and Clinical Education Team

Clinical agencies, the CCCE, and CIs may contact the Clarkson College PTA program through several means. Contact information for mail, e-mail, telephone and fax are listed for the ACCE in the "Introduction" section, on page 5, of this Handbook. Contact information for the designated Course Coordinator will be sent electronically, via email, prior to the start of the clinical practicum. Students are also provided with the cell phone numbers of the Course Coordinator and ACCE, in case of emergency. Students are held accountable for professional and timely responses to all e-mail, mail and phone transmission requests.

Communication between CI and Clinical Education Team

The Course Coordinator makes every effort to visit, or phone, every CI while they are supervising a student on all clinical practicums, with the exception of PTA 125 Clinical Practicum I, due to the short duration of the rotation. The purpose of the visit/call is to determine, first-hand, if students are meeting performance expectations, if the CIs have any concerns about the clinical education experience, and the general quality of learning opportunities. CIs may also initiate contact at any time. It is the responsibility of the student to assure that the Course Coordinator is notified of any changes in the agreed upon plan for the midterm call/visit.

Because absences have serious implications for the curriculum as a whole, and because every clinical agency becomes an extension of the College, it is important that the Course Coordinator/ACCE be notified when any of the following events occur:

1. Change in location or assignment to units within an organization
 - Faculty must know where the student is in case of an emergency, or if an incident report is required.
2. Student has unexcused absence(s)
 - The Course Coordinator/ACCE and CCCE/CI will plan for completion of missed hours, which will be determined on an individual basis; please review the PTA program “Clinical Attendance” policy.
3. Requests for leave or change in working hours
 - Student requests, outside of the predetermined “excused” absences, may be detrimental to accomplishing the learning objectives, and are not allowed.
4. Change or extended absence of CI
 - The Clinical Education Team may need to assist in any plans necessary to assure supervision of the student.

CI Supervision of the PTA Student

Students assigned to clinical agencies in other states (www.fsbpt.org) are responsible to research and become familiar with the applicable state statutes that may affect their clinical education before beginning their clinical practicum. All students are supervised at the appropriate level (according to national standards, state regulation and Medicare regulations) by a licensed PT or PTA. Other learning opportunities (that do not involve direct physical therapist services) may occur under the supervision of other healthcare providers. Students may not be assigned duties to "fill in" for absent employees or vacant positions. Students should not accept assignments that are not related to their role as a SPTA, or learning objectives/goals.

Please contact the ACCE for APTA Medicare specific student supervision chart or request copy from student to receive from their online course shell.

Release of Student Information

Information regarding the rights of students in the Family Educational Rights and Privacy Act (FERPA) is provided here for review. Each clinical agency is encouraged to have a similar rule regarding the confidentiality of their student records. **CCCEs and CIs may not reveal any information to other parties about the student without the student’s written permission.**

Pursuant to the provisions of the Family Educational Rights and Privacy Act (FERPA) (20 USC Par. 1232g), 34 CFR Par. 99.1 et seq

CLINICAL EDUCATION PROGRAM ASSESSMENT AND EXPECTATIONS

Clinical Education Curriculum Assessment

Assessment of the Clinical Education program assists in evaluation of the clinical education program and the PTA program curriculum. The Clarkson College PTA program has implemented the following assessments to facilitate communication and provide feedback between the student, clinical agency, clinical education team, and PTA program, as well as ensure standards, as set forth by the College, program, and CAPTE, are being met. Information from these assessments are relayed to the ACCE and Program Director and used for program enhancement. The assessment plan of the PTA Clinical Education curriculum includes:

- CI's assessment of student's clinical performance (via Clarkson College CAT and PTA CPI Web)
- Student's self-assessment of clinical performance (PTA CPI Web)
- Student's assessment of clinical site and instruction (PTA Student Evaluation of Clinical Experience and Clinical Instruction [SECECI])
- Clinical site's assessment of the PTA program/curriculum (via Survey Monkey link, sent after completion of practicum)
- CI self-assessment (via Survey Monkey link, sent after completion of practicum)

Clinical Practicum Assessment and Expectations

Evaluation is the **professional judgment** about a student's ability to meet the established standards presented on the forms provided (see 'Clinical Practicum Objectives' on page 30). It is evident that evaluating performance, whether self-assessment or evaluation by a CI, is challenging. It is a matter of professional judgment and no matter how objective one wishes to be, subjective opinion cannot be avoided. Each instructor establishes criteria for performance that are influenced by personal expectations and values. Therefore, this initial discussion between the student and CI about strengths, weaknesses, and goals is critical. If expectations of both the student and CI are clarified initially, there will be fewer misunderstandings about evaluation of performance. It is assumed that all CIs are fair and reasonable in their expectations and evaluation of students, unless proven otherwise. It is also assumed that all students set high expectations for their own performance and are eager to take on the challenges presented to them. Some recommendations for grading one's self and the performance of others include:

1. Avoid personal biases and interests that have nothing to do with the student's learning goals and performance. In reporting student performance, emphasize behaviors that the student can improve, rather than personal opinions about the student.
2. Focus on the goals. Were goals set high enough to challenge the student? Were goals set and modified appropriately throughout the learning experiences?
3. Compare initial and final performance. Has the student made major gains in performance?
4. Inform the student what it takes to be successful. What a student is expected to do to be successful should not be a secret.
5. Be confident in your judgment. Students know what they do well and what they do not. Clinical instructors know what good, ethical physical therapy is and what is not. Utilize weekly planning forms (provided in Appendices) to guide learning and focus on clinical education objectives.

In order to pass the clinical practicum, students must earn an overall grade of 75% in coursework and achieve the minimum level for designated clinical performance as described below:

Summary of Performance Expectations and Assessment for All Clinical Practicums

CP I- PTA 125 (1-week)	CP II- PTA 220 (3-week)	CP III- PTA 240 (5-week)	CP IV- PTA 245 (6-week)
Clarkson College CAT- 1. A rating of “ <u>Met</u> ” or “ <u>Intermediate Performance</u> ” on criterion #1 (Safety) and #2 (Professional Behaviors) 2. A rating of, at least, “ <u>Met</u> ” or “ <u>Advanced Beginner Performance</u> ” on remaining criterion #3 (Clinical Problem Solving), #4 (Therapeutic Interventions), #5 (Documentation), and #6 Cultural Competence	PTA CPI Web- 1. A rating of “ <u>Advanced Intermediate Performance</u> ” on criterion #1 (Safety), #2 (Clinical Behaviors), and #3 (Accountability) 2. A minimum of “ <u>Intermediate Performance</u> ” on the remaining criterion #4-#14	PTA CPI Web- 1. A rating of “ <u>Entry-Level Performance</u> ” on criterion #1 (Safety), #2 (Clinical Behaviors), and #3 (Accountability) 2. A minimum of “ <u>Advanced Intermediate Performance</u> ” on the remaining criterion #4-#14	PTA CPI Web- 1. A rating of “ <u>Entry-Level Performance</u> ” on all criterion

Clinical Assessment Tool (CAT)

Clarkson College utilizes the Clinical Assessment Tool (CAT) for CP I: PTA 125 (1-week). The CAT is an abbreviated version of the PTA CPI Web, in a 2-page assessment form. Students are assessed on the following 6 criteria:

1. Safety
2. Professional Behaviors
3. Clinical Problem Solving
4. Therapeutic Interventions
5. Documentation
6. Cultural Competence

Students are expected to achieve a rating of “Met” for “Intermediate Performance” on criterion #1 and #2 and a rating of “Met” for “Advanced Beginner Performance” on criterion #3-6. The rating scale was adapted from APTA Web CPI Performance Level Anchor Definitions (see below). The CAT is provided to the CI prior to/at the beginning of the scheduled clinical practicum and is completed, separately, by both the student and CI.

APTA PTA CPI Web Evaluation of Student Performance

Clarkson College utilizes the APTA PTA CPI Web (2011) and the Rating Scale Anchor Definitions, administered through Liaison International, to evaluate student performance during CP II: PTA 220 (3 week), CP III: PTA 240 (5 week) and CP IV: PTA 245 (6 week) clinical practicums. The PTA CPI Web

has been adopted because of its relationship to the *Guide to Physical Therapist Practice* and the CAPTE criteria for the performance of graduates. All CIs must complete the PTA CPI Web training, which only needs to be completed once. Further instructions on how to complete the training will be sent to CIs, prior to commencement of a clinical practicum. The PTA CPI Web is separate from the PT CPI Web.

The following items are considered “Red-Flag” concerns, if a student is rated below expectation:



Safety



Professional Behavior



Accountability

PTA CPI Web Rating Scale Anchor Definitions

Beginning Performance

- Requires direct personal supervision 100% of the time working with patients with constant monitoring and feedback, even with patients with simple conditions.
- At this level, performance of essential skills is inconsistent and clinical problem solving is performed in an inefficient manner.
- Performance reflects little or no experience in application of essential skills with patients.
- The student does not carry a patient care workload with the clinical instructor (a PTA directed and supervised by a physical therapist, or a physical therapist).

Advanced Beginner Performance

- Requires direct personal supervision 75% – 90% of the time working with patients with simple conditions, and 100% of the time working with patients with more complex conditions.
- At this level, the student demonstrates consistency in developing proficiency with simple tasks (e.g., medical record review), clinical problem solving, interventions (e.g., monitoring therapeutic exercise), and related data collection (e.g., single angle goniometry), but is unable to perform more complex tasks, clinical problem solving, interventions/data collection without assistance.
- The student may begin to share the patient care workload with the clinical instructor.

Intermediate Performance

- Requires direct personal supervision less than 50% of the time working with patients with simple conditions, and 75% of the time working with patients with complex conditions.
- At this level, the student is proficient with simple tasks, clinical problem solving, and interventions/data collection and is developing the ability to consistently perform more complex tasks, clinical problem solving, and interventions/data collection.
- The student is **capable of** maintaining 50% of a full-time physical therapist assistant’s patient care workload.

Advanced Intermediate Performance

- Requires clinical supervision less than 25% of the time working with new patients or patients with complex conditions and is independent working with patients with simple conditions.
- At this level, the student is consistent and proficient in simple tasks, clinical problem solving, and interventions/data collection and requires only occasional cueing for more complex tasks, clinical problem solving, and interventions/data collection.

- The student is **capable of** maintaining 75% of a full-time physical therapist assistant’s patient care workload.

Entry-level Performance

- **Capable of** completing tasks, clinical problem solving, and interventions/data collection for patients with simple or complex conditions under general supervision of the physical therapist.
- At this level, the student is consistently proficient and skilled in simple and complex tasks, clinical problem solving, and interventions/data collection.
- The student consults with others to resolve unfamiliar or ambiguous situations.
- The student is **capable of** maintaining 100% of a full-time physical therapist assistant’s patient care workload in a cost effective manner with the direction and supervision of the physical therapist or PTA under the direction and supervision of the PT.

If you have questions about any of these aspects of clinical education, please contact the Center Coordinator of Clinical Education (CCCE) and the Course Coordinator and/or Academic Clinical Coordinator of Education (ACCE) immediately.

The PTA CPI Web, and additional resources, can be found at the following URL link:

https://cpi2.amsapps.com/user_session/new

Students and CIs use the CAT and PTA CPI Web, along with the Student Self-Assessment (SSA) form, to identify and discuss learning needs and goals during the clinical practicum. With each new setting and CI assigned, students are expected to discuss the strengths and weaknesses they have identified through self-assessment, as well as those identified in their evaluation by former clinical instructors, as applicable. Students are expected to demonstrate continual progress during clinical practicums.

Professionalism Grade

Clarkson College PTA faculty are highly committed to the academic success of each student enrolled in the program and believe that professional behaviors represent a code of conduct that will ensure personal success and promote a positive and professional attitude among all students.

Each student will be graded as pass/fail on professionalism demonstrated while on clinical practicums. Each student will be rated by the CI via the PTA CPI Web using corresponding criterion that correlate with the generic abilities form, used previously in courses and labs (see “Clarkson College Values and Generic Abilities” table). Both visual analog scale (VAS) ratings and written comments are considered in the assessment of the behavior and skills. Professionalism grade components are critical to successful practice in the field of healthcare and include (but are not limited to):

- Professional dress, or attire as appropriate
- Professional participation and active engagement in clinical experiences
- Demonstration of responsibility and initiative
- Commitment to the profession
- Professional language/communication

Clinical Practicum Professionalism Expectations

Minimum level for a passing professionalism grade includes demonstration of a skill at, or above, the indicated rating scale categories below (refer to “Professionalism Grading Policy” in PTA Program Handbook):

CP I (PTA 125) – Developing

1. Demonstrates consistency in developing proficiency with simple tasks (i.e., medical record review), clinical problem solving, interventions, data collection.
2. Unable to perform more complex tasks, clinical problem solving, interventions/data collection without assistance.
3. Occasionally makes meaningful contributions; marginal effort to become involved with the group/learning community (Edelstein & Edwards, 2001).
4. Consistent with a student who requires direct personal supervision/guidance 75% – 90% of the time working with classmates/mock-patients with simple conditions, and 100% of the time working with patients with more complex conditions.

CP II (PTA 220) – Intermediate

1. Proficient with simple tasks, clinical problem solving, interventions, data collection.
2. Developing the ability to consistently perform more complex tasks, clinical problem solving, and interventions/data collection.
3. Frequently attempts to direct the discussion and to present relevant viewpoints to the learning community (Edelstein & Edwards, 2001).
4. Consistent with a student who requires direct personal supervision/guidance less than 50% of the time working with classmates/mock-patients with simple conditions, and 75% of the time working with patients with complex conditions.

CP III/IV (PTA 240/245) – Entry-Level

1. Consistently proficient and skilled in simple and complex tasks, clinical problem solving, and interventions, data collection.
2. Consults with others to resolve unfamiliar or ambiguous situations.
3. Aware of needs of the learning community; attempts to motivate group discussion; presents creative approaches to topic (Edelstein & Edwards, 2001).
4. Consistent with a student who is capable of completing tasks, clinical problem solving, and interventions/data collection for classmates/mock-patients with simple or complex conditions under general supervision/guidance of the physical therapist.

CLARKSON COLLEGE AND PTA PROGRAM POLICIES

Family Educational Right and Privacy Act (FERPA)

In accordance with the Family Educational Rights and Privacy Act of 1976 (FERPA), as amended, a student’s education records are maintained as confidential by Clarkson College and, except for a limited number of special circumstances listed in that law, will not be released to a third party without the student’s prior written consent. A student may grant permission to authorized personnel of the College to release some or all of that student’s education records to clinical agencies, as requested or required by clinical affiliation agreement. *Students will be required to download, print, and complete the Clinical FERPA Release form and submit to their CastleBranch account. This will be completed annually, by November 30th.*

Health and Safety Expectations and Requirements

All Clarkson College PTA students are required to complete program and clinical agency health and safety requirements (per SW-7 Clarkson College policy). Students may be required to complete an additional criminal background check and/or drug screen (per SW-23 Clarkson College policy), as applicable to the clinical agency, prior to the start date, unless otherwise stated by the clinical agency. The College Health and Safety Clinical Education Compliance Coordinator(s), and the program ACCE, monitor these requirements. Students have access to, and are responsible for managing, all of their health and safety expectations and requirements on the CastleBranch website at <https://mycb.castlebranch.com/>. Requirements are listed in all clinical affiliation agreements. If copies of records or a background check are required by a clinical agency, the ACCE should be contacted and the student will provide the information from the CastleBranch system.

1. Drug Screens and Employer Nicotine Testing

Should a student attend class, laboratory session, off-campus event, and/or clinical practicum while under the influence of drugs or alcohol, the student will be in violation of the Clarkson College Drug and Alcohol policy (SW-23). Clarkson College students may be required, with or without notice, to submit to drug testing. If a student tests positive for illegal drug use, according to standards of practice, he/she will be immediately administratively withdrawn from Clarkson College. If the student refuses to submit to drug testing, he/she will be treated as though he/she was tested and the results were positive for drugs. Additional sanctions from the clinical agency may apply when the suspected violation occurs during a clinical/laboratory/practicum session. Clinical agency sanctions may prohibit the student from returning to that particular agency.

When seeking employment, please be aware that some organizations have a tobacco-free/nicotine-free environment policy in effect both inside and outside of their facilities, and will only hire tobacco free/nicotine free candidates. You may be required to complete nicotine testing, as part of the hiring process, and these results may make you ineligible for employment.

2. Criminal Background Checks

PTA students will meet individually with the PTA Program Director and ACCE if a prior conviction is found.

A prior conviction of a felony or misdemeanor may render a student ineligible to participate in clinical practicums, and thus ineligible to complete the scheduled program of study. This can also affect the student's eligibility to receive a PTA certificate or license in the state in which they are applying. These policies are subject to change in order to maintain compliance with state and federal requirements, Centers for Disease Control (CDC) requirements and standards of practice.

3. Health and Safety/Immunization Requirements

The student will be in compliance with the Clarkson College PTA program Health and Safety requirements. Evidence of the following expectations must be completed and updated in their CastleBranch account, by the designated due/renewal date:

- a. Physical examination
- b. Criminal background check
- c. Immunization for Tetanus-Diphtheria- Pertussis (TDaP) booster within 10 years
- d. Private health insurance
- e. Reactive Varicella titer (or evidence of one Varicella immunization)
- f. Mumps, Measles, and Rubella titers (or evidence of two MMR immunizations)

- g. Annual Tuberculosis Screening and
 - i. Annual Non-reactive PPD (skin test/blood test) or,
 - ii. Negative chest x-ray or blood test (if PPD have ever been positive) or,
 - iii. Absence of symptoms of TB, if prior history of reactive PPD and negative chest x-ray or blood test
- h. Current health care provider Basic Life Support (BLS) certification
- i. Appropriate Hepatitis B immunizations and/or titer
- j. Seasonal flu shot- annually or signed waiver
- k. Clinical FERPA Release form

Students will be expected to renew the following items, annually (refer to CastleBranch account for renewal dates):

- TB skin test
- Health insurance
- Influenza vaccination or waiver
- Clinical FERPA Release form

If any TB result is positive, the student must notify the College and seek medical advice. If this occurs, the student cannot attend clinical practicums until the TB questionnaire has been completed, uploaded, and accepted in the Castle Branch system.

4. Onboarding Requirements

Additional agency-specific (onboarding) requirements (i.e., drug/alcohol screen, additional background check or immunizations, copies of health records, etc...) may be required prior to a clinical practicum. Please review any agency-specific affiliation agreement requirements with the ACCE.

Any student who has additional facility onboarding requirements, for any clinical practicum, will need to obtain an “onboarding tracker” through their CastleBranch account. There is no additional cost to add this tracker and it only needs to be ‘purchased’ once. If needed, students will receive a program/purchase code from the ACCE.

Any required documents will need to be uploaded to the onboarding tracker in order for the ACCE and/or Clinical Education Compliance Office to verify compliance, prior to the start of the clinical practicum. Students must identify the Compliance Department, compliance@clarksoncollege.edu, as the College representative for all attestation processes.

*If a student is out of compliance with **any** health and safety items in CastleBranch or agency onboarding requirements, they will not be allowed to attend clinical practicums until they are within the compliance standards. Failure to achieve or maintain compliance by the designated due/renewal date/s may result in a Code of Conduct violation.

Please refer to the College policies for Health and Safety Requirements (SW-7):
<http://catalog.clarksoncollege.edu/academic-catalog/academic-information-policies>

Physical Requirements

The PTA program requires the student to participate in laboratory and clinical experiences related to patient care. Some situations may require the student to lift 50 pounds or more. Every reasonable effort will be made to accommodate individual needs providing for a safe clinical environment for the PTA student, staff and patients. Please review the ***technical standards*** completed at the time of admission for the PTA program. Should a student's physical ability change, or need accommodated (i.e., pregnancy, surgery, injury, etc...), it is the student's responsibility to update an 'Informed Consent for Participation Form' to keep on record in the student's file.

Dress Code and Appearance

Each student represents not only Clarkson College, but also the professional image of the field of physical therapy. Students will maintain an appropriate presentation during on and off campus events, including appearance, dress, hygiene, make-up, jewelry and scent.

The following are minimal expectations of the personal appearance of a Clarkson College PTA student, which will be met, at all times:

1. Hair – Students must have human-colored hair. Extreme looks such as multiple colors, extremes in bleaching, dyeing or tinting, or shaved eyebrows are not allowed. Beards and/or moustaches must be clean and trimmed. Hair should be clean and pulled back to not distract from lab/class/clinical performance.
2. Make-up – If worn, is to be conservative should not detract from the attire, uniform, or work environment, and must reflect a professional image.
3. Nails – Need to be smooth, of a minimal length, and clean. Artificial nails are an infection control risk and are not allowed due to the hands-on care provided by students in classroom, lab, clinical, service, and community settings.
4. Scent – Aftershave, cologne, and perfume will be applied sparingly, as other's sensitivity to scents/odors must be considered at all times. Students' breath and clothing must not smell of smoke.
5. Personal cleanliness – Daily attention to one's personal hygiene is an extremely important component of each student's overall image. Students will maintain a high level of personal hygiene.

Professional/Clinic Attire

Professional attire is required for all clinical practicums and requirements may vary at different clinical agencies. Students must follow the dress code policy of each designated facility. Student appearance must also comply with clinical agency dress code. Appropriateness of attire is at the discretion of the clinical instructor and facility.

- Clinical center employees reserve the right to dismiss a student from a clinical practicum based on unprofessional or inappropriate appearance, dress, and/or behavior.
- If clinical practicums require specific uniforms, these will be purchased/obtained by the student.

Appropriate attire requirements for the learning or work environment include the following:

1. Professional attire includes: collared shirt, blouse, skirt/dress, dress pants, or khakis. Collared shirts (Polo or button up) worn by men will be tucked into their dress pants. Skinny dress pants or leggings are not allowed, unless worn under a dress or top that extends below mid-thigh. No jeans, spandex, denim, material that resembles denim, T-shirts, tank tops or short skirts (shorter than finger tips when arms are down) shall be worn. No cleavage is allowed to be revealed including but not limited to, when sitting, standing, squatting, lifting, or bending. Tops should also be of appropriate length to allow for movement and positions such as reaching overhead and bending forward without revealing midriff. Shoes shall be comfortable, with a low heel and toes covered: no sandals.
2. Tattoos – Visible tattoos are not allowed, when students are in professional attire. If a student has tattoo(s), they must make an active effort to completely conceal the tattoo through the use of clothing, a concealing item, such as a watch or bracelet, or with makeup/tattoo cover-up.
3. Jewelry/piercings – Decorative jewelry is to be conservative and not detract from the attire or work environment, and it must not pose a safety or infection risk.
 - i. Jewelry should be minimal. Students are allowed no more than one ring per hand (unless otherwise stated by the clinical center). Plain-type wedding bands are preferred.
 - ii. Only post/stud type ear and/or nose piercings are allowed. Large gauge spacers should be skin-tone or clear.
 - iii. Covering body/facial piercings, including surgically implanted jewelry, is required, and may vary per clinical center policy, which may include concealing methods such as Band-Aids, clear spacers, retainers, or make-up.
 - iv. One small necklace that fits snug to neck, or is able to be tucked into a shirt, is allowed. Dangling necklaces are a safety risk.
4. Clarkson College nametags will be worn as directed by clinical center/Clarkson College policy; nametags will be worn at chest height on the upper left or right side.
5. No gum, use of smokeless tobacco, or smoking is allowed when in professional attire.

Conduct

1. Use of personal mobile devices (i.e. cell phones, laptops, iPads, etc.) for non-emergencies, and activities not related to patient care or documentation is prohibited during clinical times.
2. Students will conduct themselves in a professional manner, including social media, and follow the College's policy regarding social media.
3. Facility computers and equipment are to be used in accordance with facility policy.
4. Personal internet use is prohibited during scheduled clinical hours.
5. Promptness and respect for others is required by all students toward all other students, faculty, clinical instructors, and administrators. This includes promptness, attention, presentation and posture.

Student Communication

Students are required to communicate with peers, supervisors, and faculty in a professional and respectful manner. Communication involves verbal as well as non-verbal strategies. Non-verbal communication during class periods and clinical experiences should convey interest, respect and a mature professional demeanor. E-mail will be used as a communication tool throughout the PTA program. It is required that students acquire, activate and regularly access (daily during the weekday) his/her Clarkson College e-mail account. It is not acceptable for his/her account to be forwarded. Students are responsible for notifying the Program Director when there is a change in primary telephone number or address for the student.

*Note: All materials communicated from the College to the affiliating clinical agency regarding student demographic information (name, address, phone number), background/drug testing, and clinical performance (PTA CPI Web) are considered confidential. Access to this information should be restricted to the CCCE and the student's CI to ensure privacy.

Required Clinical Practicum Work Hours

Students completing clinical practicum hours are expected to be on site and engaged in patient care, or educational clinical experiences, during their assigned clinical practicum. During this time, students are required to document all clinic hours and achieve 40 hours each week for successful completion of the clinical practicum. There may be instances in which a student does not achieve the required hours each week due to outside circumstances (i.e., staff illness, facility closure, low census or caseload). In accordance with accreditation standards, based on the above instances, a minimum of 36 hours for the week is acceptable, but must be communicated with the Course Coordinator, as soon as possible, to discuss possible solutions. If needed, the clinical practicum may be extended to achieve the minimum number of hours required.

Attendance and Absences

Attendance and timeliness are crucial to the successful completion of the clinical practicum. Students must be punctual for all clinical education obligations. Habitual tardiness and/or attendance problems may seriously impact the course grade and/or jeopardize successful completion of the clinical practicum.

Clinical practicums are full-time commitments, therefore students must be prepared to make each clinical practicum a priority and make accommodations to their personal schedule (i.e. work, child care, personal events, etc...).

The following are attendance expectations for all clinical practicums:

1. Students must comply with the hours established for them by the clinical agency/CI.
2. While on clinical practicum, students are to observe any holidays outlined by the agency.
3. Students are NOT allowed to take/request days off for personal business.
4. Excused absences of one to two (1-2) days may be made up at the discretion of the CI.
5. Time missed for any other reason, not specified under the "Excused Absences" section, is considered unexcused and **MUST** be made up in its entirety.
6. Absences of three (3) or more days, for any reason, must be made up as a requirement of program and accreditation policy, so that days missed will not compromise the student's ability to successfully meet course outcomes.

- The student must coordinate scheduling with the CI and notify the Course Coordinator of how/when he/she will be allowed to make up the missed days.
 - Hours needing to be made up may occur during a scheduled holiday, weekend, or by extending the clinical practicum timeframe beyond the scheduled end date.
 - Absences of three (3) or more days is independent of time in clinic, and must include a remediated day during the clinical practicum (for example, if a student misses 3 days due to illness, and has accrued beyond the minimum number of hours required, the student is still required to make up a minimum of one (1) day).
7. **Notification of any absence/tardy:** it is the student’s responsibility to communicate any instance of absence/tardy with both the clinical agency/CI and the Course Coordinator, as soon as possible.
 8. **For PTA 125 only:** due to the short time frame of the rotation and importance of the clinical experience, any time missed during this clinical practicum will be required to be made up (even for excused absences).

Overview of Clinical Practicum Hours and Missed Attendance Requirements

Clinical Practicum	Expected Total Hours	Missed Attendance Requirement/s
Practicum I- PTA 125 (1-week)	40	Student is required to make up any missed clinic time
Practicum II- PTA 220 (3-week)	120	Allowed up to two (2) days for excused absence (make-up is at CI’s discretion)
Practicum III- PTA 240 (5-week)	200	Allowed up to two (2) days for excused absence (make-up is at CI’s discretion)
Practicum IV- PTA 245 (6-week)	240	Allowed up to two (2) days for excused absence (make-up is at CI’s discretion)

Excused Absences

In order for an absence to be considered “excused”, the absence must include one of the situations below. Students will not be required to make-up missed time, for the first two excused absences, however it is at the discretion of the CI, who may require the time to be made up. Students must include the absence and reason on the Clinical Hours Log, to account for the missed time. Students will notify both the clinical agency and Course Coordinator of the absence as soon as possible. Excused absences include the following:

1. **Personal contagious illness-** student themselves is compromised with contagious illness; proof of the contagious nature of the illness, in the form of a doctor’s note, may be required at the Course Coordinator and/or ACCE discretion.
2. **Inclement weather-** due to the weather, it is deemed unsafe for travel to/from clinical site, such as a tornado, hurricane, flooding, and blizzard conditions etc...
3. **Personal/Family Emergency-** the student or an immediate family sustains injury, illness, accident, or death (immediate family includes parents, spouse, children, and siblings)
4. **Active military requirement/responsibility** (not related to deployment)
5. **Early testing National Physical Therapy Exam (NPTE) PTA-** student receives approval from the Program Director to take the NPTE PTE (student must notify both the Course Coordinator and CI in advance).

Clinical Practicum Course Assignments and Grading

In addition to successfully passing the clinical practicum based on performance, **STUDENTS MUST EARN AT LEAST AN OVERALL AVERAGE OF 75% IN THE COURSE, IN ORDER TO RECEIVE A “PASSING” GRADE.**

Students are expected to submit all assignments by the designated due date/time, as listed in the syllabus, course calendar, or assignment materials/instructions online. Students must complete and submit ALL course assignments and meet at least a 75% graded score for content.

Late and Failed Assignment Policy

Assigned coursework not submitted by the designated due date/time is considered late. Late assignments may be submitted within 24 hours of the original due date/time for a maximum score of 75% of total points possible. Any missed points for content will be deducted from 75%. **Assigned coursework submitted any time after 24 hours past the due date/time will receive a grade of zero.**

Students who fail to earn a grade of at least a 75%, based on content, on any assignment, will be expected to make the necessary corrections and re-submit by the new deadline provided by the Course Coordinator. Grading of the revised assignment will follow the late policy above. Failure to re-submit an assignment by the designated deadline will result in a grade of zero and may also result in a Code of Conduct violation. Repeat occurrences of submitting late assignments is a violation of the student Code of Conduct and will be addressed accordingly, and may result in sanctions, remediation, or failing the clinical practicum.

Did you turn your assignment in on time?			
Yes		No	
Is the content graded at 75% or higher?		Did you turn your assignment in within 24 hrs from original deadline?	
Yes	No	Yes	No
Score is based on content	Must resubmit with revisions with content scoring at least 75%	Maximum of 75% possible if content is also at least a 75%	If the assignment is not submitted by the extended deadline, 0% will be awarded.
	Max score will be 75% despite whether or not content is above 75%	Any points missed for content related issues will be deducted from 75%	However 75% for content must still be met.
		If content is not at least 75%, must resubmit by 2 nd deadline as set by Course Coordinator. ** If this 2 nd deadline is not met, then student is in breach of Code of Conduct and consequences are at the discretion of the Course Coordinator and Program Director as outlined in the Program Handbook	In addition to 0% for the assignment, the student is in breach of Code of Conduct and consequences are at the discretion of the Course Coordinator and Program Director as outlined in the Program Handbook

Clinical Practicum Expenses

Students are responsible for all expenses related to clinical education including specific uniform requirements, meals, housing, and transportation. In cases where a lab coat is required, a student may “check out” one from the PTA program (there is also a very limited selection of scrub attire available that students can inquire about). The student must return the lab coat/scrubs at the end of the clinical practicum and is responsible for making sure it is clean upon returning.

Student Liability Insurance

Students are provided liability insurance against general and professional liability claims (limits of \$1,000,000 per incident and \$3,000,000 in aggregate for students) by Clarkson College. A current certificate of liability insurance is provided in the Appendices.

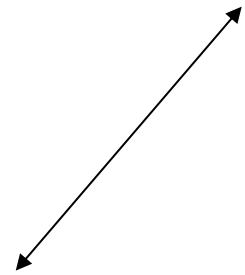
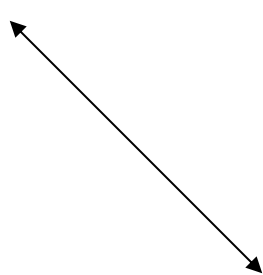
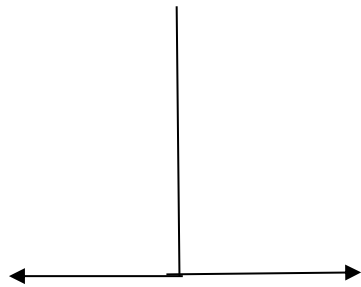
However, students must acknowledge that certain risks are inherent in participating in all program activities and clinical practicums. These risks include, but are not limited to, personal injury, illness, property loss, potential of travel, etc. The student expressly and voluntarily assumes all such risks and costs.

Lines of Communication

**PTA
STUDENT**

**CLINICAL
EDUCATION
TEAM**
ACCE
Course Coordinators

CI



CCCE

PHOTO CONSENT & RELEASE

Project: _____ Date: _____

Photographer/Videographer: _____

Subject Name: _____

Consent to:

_____ Interview _____ Photograph
 _____ Videotape _____ Other _____

In the interest of education and the advancement of the health sciences, I, the undersigned, voluntarily authorize Clarkson College its employee/Student to take photograph/video/interview for the purpose of a course project/medical Case Study.

In understand the material will **NOT** be reproduced or released outside of the college: for newspaper /magazine articles, television advertisement or marketing purposes in whole or part in connection with Clarkson College public awareness programs.

I understand the use of any images and personal information will be utilized in compliance with HIPAA (Health Insurance Portability and Accountability Act) regulations which protect patient private information. PHI (Protected Health Information) include personal identifiers such as Name, DOB, medical record#, and any private information.

I grant this authorization and give my consent as a voluntary contribution. I release Clarkson College and its employees /student to use such materials as outlined above.

NAME: _____
 (Please print)

ADDRESS: _____
 (Please print)

CITY: _____ STATE: _____ ZIP: _____

SIGNATURE: _____

Sign for Minor:

Name of parent or guardian: _____

Name of Minor: _____

Address: _____

City: _____ State: _____ Zip: _____

Signature: _____

Witness: _____

Address: _____

City: _____

Signature: _____

101 South 42nd Street
 Omaha, NE 68131-2739
 Tel: 402.552.3325
 Fax: 402.552.6058

Clinical Practicum Objectives

CPI- PTA 125 (1-week)	CP II- PTA 220 (3-week)	CP III- PTA 240 (5-week)	CP IV- PTA 245 (6-week)
<ol style="list-style-type: none"> 1. Explore various types of medical documentation used in health care and differentiate among Subjective, Objective, Assessment, and Plan data in S.O.A.P. note format. 2. Identify short and long term functional PT goals, in a variety of patient scenarios and clinical examples. 3. Utilize skills learned in PTA 110 (Basic Skills in PT), PTA 115 (Ther Ex I), and PTA 120 (Ther Modalities I) in the clinical setting, under the supervision of a PT/PTA (refer to links under Curriculum Outline/Course Description for more information about specific courses) 4. Recognize the importance of patient confidentiality in health care and identify processes used to maintain compliance in the clinical setting. 5. Model a developing level of professional communication with faculty, peers, and healthcare professionals in both classroom and clinical experiences. 6. Recognize individual and cultural differences and the 	<ol style="list-style-type: none"> 1. Work under the supervision of a PT or PTA while implementing patient care treatment plans, utilizing the skills learned in the PTA program. 2. Demonstrate conduct that reflects legal, safe, and ethical care and appropriately represents the Values of Clarkson College. 3. Generate an intermediate level of documentation on patient care utilizing the format pertinent to the affiliating clinical agency. 4. Identify and discuss both short and long term patient care goals with the CI, as related to function, and the patients established plan of care. 5. Effectively communicate with clinic staff /patients on site, and faculty/peers through the utilization of an Internet based discussion forum. 6. Exhibit a developing level of clinical reasoning in regard to decision making of 	<ol style="list-style-type: none"> 1. Work under the supervision of a PT/PTA during the implementation of patient care treatments and services. 2. Demonstrate an understanding of the multi-disciplinary team approach to patient care in a PT setting. 3. Provide patient-related education and instruction to patients, family members, and caregivers in order to progress patients towards goals within the plan of care. 4. Prepare and present a formal staff in-service on an appropriate topic, agreed upon between the CI and the student. 5. Perform a quality assurance assessment, relevant to the affiliating clinical agency, and prepare a written report on the findings. 6. Produce documentation of patient care treatments utilizing the format pertinent to the affiliating clinical agency. 7. Demonstrate an understanding of professional ethics such as obtaining informed consent and distributive justice, as 	<ol style="list-style-type: none"> 1. Independently work under the supervision of a licensed PT/PTA, in the process of implementing patient care, planning for discharge procedures, and providing follow-up services, as limited to the scope of practice for the PTA. 2. Justify changes of interventions within the plan of care based on patient status and progression/regression, and identify when it is appropriate to report findings to the supervising PT regarding changes to plan of care. 3. Analyze the importance of social responsibility, community service, advocacy, and involvement within the American Physical Therapy Association and the PTA Caucus. 4. Prepare and present a formal in-service to staff on an appropriate topic, agreed upon between the CI and the student. 5. Document and present a selected patient case study to faculty and peers, upon return from clinical practicum. 6. Demonstrate effective and professional verbal/nonverbal communication with faculty, staff, patients and other healthcare providers. 7. Perform complete, accurate, timely, and

<p>responsibility to provide equitable and unbiased care.</p> <p>7. Develop a foundational understanding of the PT/PTA professional relationship in respect to aspects of evaluation, plan of care, treatment, discharge and supervision.</p>	<p>the PTA within the scope of clinical practice.</p> <p>7. Research the etiology, common signs/symptoms, given prognosis and treatment for a specific patient diagnosis, seen in the clinical setting, and orally present the findings to faculty and peers (Case Study)</p> <p>8. Differentiate between various methods to bill for services, the common insurances and third-party payers, and understand how documentation can affect reimbursement.</p> <p>9. Participate in/ identify the appropriate role of a PTA in services including evaluation, establishment of plan of care, intervention and discharge while recognizing when an action may be beyond the PTA's scope of practice.</p>	<p>related to the role of the PTA in patient care.</p> <p>8. Exhibit a working understanding of the PT/PTA supervisory relationship, with specific consideration of when it is appropriate to contact the supervising PT concerning patient status and changes to the plan of care.</p> <p>9. Demonstrate clinical reasoning in the delivery of the plan of care and in the process of discharge planning, relevant to the affiliating clinical agency, under the supervision of a PT.</p>	<p>legible documentation of care of treatments provided, using a format pertinent to the affiliating clinical agency and all applicable regulatory agencies.</p> <p>8. Educate both the public and health care communities about the profession of physical therapy and advocate for the role of the PTA within the rehabilitation team.</p> <p>9. Recognize individual biases, their potential for effect, and identify ways in which to deliver impartial care to all individuals.</p>
<p>CPI- PTA 125 (1-week)</p>	<p>CP II- PTA 220 (3-week)</p>	<p>CP III- PTA 240 (5-week)</p>	<p>CP IV- PTA 245 (6-week)</p>

Resources for Managing the Exceptional and Challenged Student

When a CI suspects either an exceptional or a challenged student, it is beneficial to objectify the situation and breaking down the process into distinct sections: Identification, Description, Classification, and Remediation. Once these sections have been identified, each can be defined and feedback should be given to the students on their behavior. Without this feedback and open dialogue, it is unlikely the behavior will change.

1. Identification is the first vital step in the process. The purpose of this step is to objectively state the concern either for a student performing above or below expectations.
2. Description flows directly from the Identification of the concern. The purpose of this step is to organize assumptions with objective detail. This can be done in a narrative, but using specific examples of behavior. The objectivity is important to alleviate personal feelings and the impression of the student that the CI is placing blame or 'picking' on them as an individual. The description should be fact based.
3. Classification, the third step in the process, involves designation of the type of concern being observed. More than 50% of problems on clinical experiences are non-cognitive in nature. The categories are:
 - a. Inadequate knowledge (cognitive)
 - b. Insufficient performance of technical skills (psychomotor)
 - c. Deficits in professional behavior (affective /interpersonal)
4. Remediation is the final portion in the loop where formal plan is laid out for the student to complete in order to emphasize work in an area of concern. Like patient POC goals, these statements of what the student will perform should incorporate use of Blooms taxonomy, and progress through the performance domains as they master a skill.

It is encouraged that, when appropriate, CI's use evaluation tools or template forms to offer feedback and document. This can create a portfolio of examples to assist in final performance evaluation (PTA CPI Web).

Tips:

- Keep open communication and coordination with not only the student, but the CCCE, Course Coordinator, and ACCE of the educational program
- Keep in mind, a student may excel in one area (i.e., cognitive) yet display a deficit in another (i.e., psychomotor)
- Focus on the behavior and skills and not the individual
- Consider student's previous clinical experience and level of academic preparation
- **See the following clinical remediation forms: "Clinical Remediation- Weekly Planning Form" and "Clinical Remediation- Planning Flow Chart" for options on how to address and document the process**

Clinical Remediation - Weekly Planning Form



Student Name: _____ Date: _____

Clinical Instructor: _____

Skill/s or behavior/s to address:

Summary of previous week (progress, feedback, etc.):

Goals for this week:

1. _____
_____ Met Continued
2. _____
_____ Met Continued
3. _____
_____ Met Continued
4. _____
_____ Met Continued

Student Signature _____

CI Signature _____

Clinical Remediation- Planning Flow Chart

Student's Name: _____

Clinical Instructor(s): _____

School: _____

Date of Clinical Practicum: _____

Evaluation		Remediation			
Specific Behavior/s or Skill/s to Address (Identify and Describe)	Classification (Knowledge, Skill, Professionalism)	Goal or Objectives to be Demonstrated	Learning Experience	Resources Needed	Assessment of Goal Completion

*Form Adapted from APTA Clinical Instructor Education and Credentialing Program Section VI 22

Student Signature: _____

Date: _____

CI Signature: _____

Date: _____

**Acknowledgement of Reading and Receipt
Clinical Education Handbook**

I acknowledge that I have received and read the PTA Program Clinical Education Handbook, know where it can be found, and understand the specific College and PTA program policies, including the specific material below:

I have read the Student Clinical Selection/Placement policy _____ Initial here

I have read the following communication policies:

Initial Student Contact with Assigned CI _____ Initial here

Communication between Clinical Agency, Student, and
Clinical Education Team _____ Initial here

Communication between CI and Clinical Education Team _____ Initial here

I have read the Clinical Education Program Assessment and Expectations _____ Initial here

I have read the Clinical Practicum Professionalism Expectations _____ Initial here

I have read the Health and Safety Expectations and Requirements
policy _____ Initial here

I have read the Required Clinical Practicum Work Hours policy _____ Initial here

I have read the Attendance and Absences policy _____ Initial here

I have read the Late and Failed Assignment policy _____ Initial here

Student Printed Name

Date

Student Signature



Additional Resource Information

Resources Available at www.apta.org

APTA Clinical Development and Education Resources Document

[APTA Ethics and Professionalism](#)

APTA Guide for Conduct of the PTA

APTA Minimum Required Skills of PTA Graduates at Entry-Level

[APTA Role of a Physical Therapist Assistant](#)

APTA Standards of Ethical Conduct for the Physical Therapist Assistant

APTA Supervision of Student Physical Therapist Assistants

[APTA Supervision under Medicare](#)

[APTA PTA CPI Training Information](#)

Additional Website Resources

[APTA Website](#)

[Clarkson College Website](#)

[Commission on Accreditation in Physical Therapy Education \(CAPTE\)](#)

[APTA PTA CPI Log-In Page](#)

[Federation of State Boards of Physical Therapy \(FSBPT\)](#)

[Northern Plains Clinical Education Consortium](#)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/15/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADCL (MSD)	SUBR (WVD)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO JECT <input type="checkbox"/> LOC OTHER:			HCN0001300	10/15/2018	10/15/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ Included MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			UCN0001301	10/15/2018	10/15/2019	EACH OCCURRENCE \$ 20,000,000 AGGREGATE \$ 20,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B A C	Excess Liability Hospital Prof Liab- Excess Liability			HPC018631002 HCN0001300 UHE005171900	10/15/2018 10/15/2018 10/15/2018	10/15/2019 10/15/2019 10/15/2019	Each Occ./Agg. Each Incident/Agg. Each Occ./Agg.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Clarkson College is included as a Named Insured

CERTIFICATE HOLDER <p style="text-align: center;">To Whom It May Concern</p>	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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Mission

Preparing students to professionally provide high quality, ethical and compassionate health care services.

Values

Learning

The lifelong process of education through both structured and unstructured experiences.

Caring

An empowering relationship through an attitude of empathy, compassion and respect for those with whom we interact, serve and lead.

Commitment

Dedication and accountability to the shared mission of Clarkson College.

Integrity

Adherence to moral and ethical standards in personal, professional and organizational actions.

Excellence

A level of performance in which all individuals strive for extraordinary quality.