LOUISIANA COLLEGE

PHYSICAL THERAPIST ASSISTANT PROGRAM

2019-2020

Clinical Handbook

LOUISIANA COLLEGE
PTA PROGRAM CLINICAL HANDBOOK
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PROGRAM ACCREDITATION

The Louisiana College Physical Therapist Assistant Program is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria Virginia 22314; telephone: 703-706-3245; email: accreditation@apta.org; website: www.capteonline.org.

LOUISIANA COLLEGE MISSION STATEMENT

The mission of Louisiana College is to provide liberal arts, professional and graduate programs characterized by devotion to the preeminence of the Lord Jesus, allegiance to the authority of the Holy Scriptures, dedication to academic excellence for the glory of God, and commitment to change the world for Christ by the power of the Holy Spirit.

MISSION STATEMENT OF LOUISIANA COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM

The mission of the Louisiana College Physical Therapist Assistant Program is to provide an environment and opportunity in which the threefold strands of the PTA curriculum are woven into a tapestry representing the PTA career.

The strands of the tapestry are:

- **CHRISTIAN SERVICE**: The Physical Therapist Assistant Associate of Applied Science Degree program reflects the mission of Louisiana College's Christian service component delivered to the client. The program seeks a diverse population of students who will share their talents and gifts in their growth as physical therapist assistants through Christian service by developing a spirit of altruism and healing--- with reverence and love for all of life with all of those entrusted to their care and by serving as a Christian role model/compassionate health care provider to the physical therapy profession and community at large.
- **COMPETENCIES:** Competencies relative to the PTA career acquired upon completion of the program and commitment to a high standard of scholarship and ethical standards which reflect the institution's mission and heritage of academic excellence. Through facilities of the institution and clinic, emphasis on technology and communication will provide opportunities to engage in research and scholarly activities to advanced the knowledge of physical therapy and rehabilitation
- **LIFE-LONG EDUCATION**: Life-long appreciation for and furthering of education within the Physical Therapist Assistant Career commitment to achievement of advanced knowledge, skills and abilities for excellence in practice which will help in creating, anticipating and responding to an evolving health care system and new responsibilities.

The mission and philosophy of the Louisiana College PTA Program are reflected in the following goals:

Upon successful completion of the PTA Program the graduate will:

1. Exhibit effective verbal, non-verbal, and written communication necessary to obtain as well as convey information and/or education to patients, caregivers, other members of the healthcare team, and the community. (*Communication*)
2. Incorporate technical skills, knowledge of physical therapy theory, and the knowledge of the utilization of fiscal and human resources into a meaningful, effective and accountable treatment process under the direction and supervision of the physical therapist. This process facilitates the delivery of cost effective quality patient care and attainment of established treatment goals. (*Interventions and Accountability*)

3. Demonstrate the ability to adapt to a dynamic health care environment while remaining aware of their responsibility and accountability to the patient, Physical Therapy profession, and the community. (*Adaptability*)
4. Promote awareness of his/her career role development and lifelong learning opportunities through career advancement, degree advancement, and continuing education. (*Professional Role Development*)
5. Provide care as a member of the PTA career within the context of a Christian philosophy and standard of ethics in the provision of health care that fosters tolerance for cultural and religious diversity and facilitates ethical choices in professional practices. (*Professional Practice*)
6. Demonstrate the ability to collaborate with members of the healthcare team and others in the profession of physical therapy, to actively promote the profession and contribute to societal well-being. (*Collaboration)*

The Clinical Education Component plays a vital role in Louisiana College's PTA program by assisting in the fulfillment of its mission, philosophy, goals, and objectives.

MISSION STATEMENT OF PHYSICAL THERAPIST ASSISTANT PROGRAM
CLINICAL COMPONENT

The mission of the clinical education component of the curriculum is to offer clinical education experiences, through a collaborative effort of the academic program and clinical education sites, that are safe, effective, and provide an environment in which the following three-fold strands of the program mission are recognized, cultivated, and woven together:

- **CHRISTIAN SERVICE**: Students are given an opportunity to develop a spirit of altruism and healing and to serve as a Christian role model/compassionate health care provider in the clinical setting through hands-on treatment of patients and interaction/collaboration with other members of the healthcare team.
- **COMPETENCIES RELATIVE TO THE PTA CAREER**: Students are provided opportunities to participate in the variety and duration of clinical education placements necessary to achieve the entry-level performance expectation of the program and CAPTE.
- **A LIFE-LONG COMMITMENT TO THE PTA CAREER:** Students are paired with clinical instructors who are committed to remaining current in terms of knowledge of the trends, regulatory, and legal issues in health care in order to mentor the student and model a commitment to the Physical Therapist profession.

To ensure the fulfillment of the mission of the Louisiana College PTA Program Clinical Education Component, the following goals have been established:

GOAL 1

The development, implementation, and assessment of the clinical education component will be an ongoing collaborative effort between the academic and clinical faculty.

To ensure that Goal 1 is met, the PTA program will meet the following objectives:

- All clinical and academic faculty will assess the effectiveness of the clinical education component annually.

- Measureable goals and modification of assessments will be developed based upon outcomes of clinical education component analysis by clinical faculty participation in assessment activities through completion of the Communication Survey.

GOAL 2

The program will make available clinical education experiences of sufficient number, length, timing, and scope to meet the expectations of the program for entry-level physical therapist assistants.

To ensure that Goal 2 is met, the PTA program will meet the following objectives:

- The program will maintain at all times fully executed contractual agreement with no less than 125% or a total of 30 of clinical sites.
- Program will remain adaptable to dynamic nature of the field and changes in the educational and technical needs of students. (Accommodate students' needs in regard to location and specific specialty interests)

GOAL 3

The program will clearly define roles and expectations of all involved parties.

To ensure that Goal 3 is met, the PTA program will meet the following objectives:

- The program will maintain fully executed contractual agreements in which the roles and expectations of all stakeholders involved in the clinical education portion of the curriculum.
- 100% of clinical faculty will report, via the Communication Survey, that they received the clinical education manual which defines roles and expectations of all stakeholders.
- 100% of students will sign that they received and reviewed the clinical education manual containing all clinical education policies and procedures. Written documentation for each student will be filed in the student folders and maintained in the PTA program office.

GOAL 4

The program will use valid and reliable evaluation and assessment instruments for the student and the clinical education process.

To ensure that Goal 4 is met, the PTA program will meet the following objectives:

- The program will utilize the Clinical Performance Instrument (CPI) as the primary tool to assess students during the clinical education component of the PTA program; this tool evaluates knowledge, skills and attitudes which determine clinical competencies.
- Independent CPI Administration In-services provided through an online tutorial, one for PTA students and one for Clinical Instructors will be conducted regarding CPI protocol and instruction. Students will also receive an in-service concerning the CPI tool by the Academic Coordinator of Clinical Education prior to the start of each clinical internship. In addition, all participants will receive written instruction.

GOAL 5

The program's clinical education component will, through all its activities, facilitate respectful, culturally competent, and professional interaction and communication.

To ensure that Goal 5 is met, the PTA program will meet the following objectives:

- The technical portion of the PTA curriculum will provide courses that are specific to professional behaviors, written and verbal communications, and cultural diversity; each student must pass didactic coursework with a grade of 77% or higher in order to progress to the clinical education component of the semester.
- Prior to clinical setting entrance, PTA students will be trained by the PTA faculty in the required student standards of appropriate clinical behaviors and cultural sensitivity awareness.
- PTA students will be issued a clinical handbook. The clinical handbook addresses and documents policy for student clinical education requirements. Requirements include student professional behavior placing priority on respect, cultural competence, professional interactions and communications.
- Professional behaviors will be monitored by the Clinical Performance Instrument (CPI), telephone contact and clinical site visits by the ACCE.

GOAL 6

The clinical education component will include opportunities for self-assessment and mentoring experiences for students and clinical faculty.

To ensure that Goal 6 is met, the PTA program will meet the following objectives:

- Each student will complete a self-assessment utilizing the APTA Clinical Experience Form following each clinical assignment. Aggregated totals of data can be found on the PTA database.
- Upon completion of the clinical internship, Clinical Instructors will be complete the Student Competency and Safety Survey. This assessment tool will evaluate the curriculum, based on student competencies in a clinical setting.
- The program will create a document for Clinical Instructors to complete upon the conclusion of supervising the PTA student; this document will serve as feedback on the mentoring experience for clinical faculty.

Goal 7

Delineation of tangible benefits and rewards for the involved parties will be made by the program.

To ensure that Goal 7 is met, the PTA program will meet the following objectives:

- The APTA Clinical Instructor Credentialing Course will be offered as a continuing education opportunity to Clinical Instructors in an effort to provide optimal clinical experiences for PTA students.

- Clinical instructors will be provided a list of websites or list serves which are internet forums for education and special interest groups concerning the Physical Therapy profession.

Goal 8

Understanding of APTA positions, reimbursement requirements, and state law related to physical therapist assistant direction and supervision requirements.

To ensure that Goal 8 is met, the PTA program will meet the following objectives:

- Coursework completion in the technical portion of the curriculum (Intro to PT and Transition to Career) ensures student competencies in regard to reimbursement requirements, ethics, and PT and PTA supervision requirements.
- Participation in annual APTA conferences is highly promoted in order to keep students abreast of changes in state regulations/standards.
- APTA membership is highly regarded and student membership is promoted to ensure understanding of APTA positions and to gain access to resources offered by the association.

Policies and procedures have been implemented to ensure the mission of the program and clinical education component are achieved:

NON-DISCRIMINATION POLICY

The PTA Program at Louisiana College is in agreement **with and adheres to the college's policy noted below on non-discrimination in regard to its admissions process.**

> *"Louisiana College accepts applications for admission from students of accredited secondary schools and students transferring from accredited colleges without regard to race, sex, color, handicap, age, creed or national origin. Also, special criteria have been established to receive applications from students from unaccredited high schools and non-graduates of high school."*

PTA POLICIES RELATIVE TO CLINICAL COMPONENT

A. Clinical Site Recruitment /Clinical Contract Review Process

Facilities that meet the standards and support the mission of Louisiana College, the *Allied Health Department and the Physical Therapist Assistant program* are invited to become clinical sites for our students. The relationship between the Physical Therapist Assistant program and the site is formalized through the Clinical Site Agreement/Contract. It is necessary to have a duly executed active contract for a student to be placed for internship. Each written agreement contains roles and responsibilities of both Louisiana College as well as the clinical agency. The accuracy of the written agreements will be determined by both parties involved through careful review of the document prior to signing. The adequacy of the written agreement for the needs of the program and clinical facility will be determined periodically through review by the program's faculty and Louisiana College's Administrative Committee. Clinical facilities are encouraged to periodically review written agreements as well as to ensure they adequately meet the facility's needs. The program's administrative assistant will maintain a database and review data to ascertain currency status of all written contracts with clinical facilities. A Clinical Facility Contract Review query has been established in the database from which a monthly report will be generated to indicate clinical site agreement status. The findings from the review will be **documented** and the program's **ACCE will be notified of need to pursue renewal of those contracts found to be nearing the expiration date.** (*Access through LC PTA Database: "Agreement Status Report"*)

1. Site recruitment can be initiated via several different mechanisms:
   - **a.** The ACCE and Program Director can initiate a contract
   - **b.** A clinical site can initiate a contract
   - **c.** The advisory committee, and alumnus can recommend a contract
   - **d.** Any current student can recommend a contract using the All-Purpose form (APF, **Appendix A**)

It is the policy of this college that **STUDENTS SHALL NOT MAKE ANY DIRECT CONTACT WITH SITES UNLESS GIVEN PERMISSION BY THE ACCE**

B. Selection Criteria for Sites

1. The program obtains pertinent information from the clinical sites upon engaging in the contractual agreement for clinical affiliation through APTA's Clinical Site Information Form (CSIF). The following are the most important criteria used as guidelines for establishing contractual agreements for the purpose of clinical education of physical therapist assistant students:

- **a.** Sites that are located throughout the state of Louisiana with heavy concentration on Rapides Parish, surrounding parishes and neighboring states.
- **b.** Sites that afford a variety of different experiences and cover a range of delivery of physical therapy services.
- **c.** Sites that follow the APTA code of Ethics in delivery of service.
- **d.** Sites that adhere to the principles of Equal Opportunity and Affirmative Action as required by federal legislation.
- **e.** Sites supportive of the mission of the program.
- **f.** Sites where staff is open and receptive to the education or our students.
- **g.** Sites where a Physical Therapist completes all evaluations and establishes all plans of care.
- **h.** Sites that afford the Clinical Instructor (CI) adequate release time to supervise and mentor the student.
- **i.** It is preferred that the sites have Center Coordinators for Clinical Education (CCCE) and Clinical Instructors (CI) that are certified CCCE instructors or APTA credentialed instructors.
- **j.** Sites that if outside the target community, have been properly identified as outside the area.
- **k.** Sites where Center Coordinators of Clinical Education have demonstrated knowledge of effective communication and management of the clinical education program.

2. The program obtains pertinent information from APTA's Guidelines and Self-Assessment for Clinical Education in which the Clinical Instructor provides reflection.

C. Clinical Site Review

1. Clinical education sites will be reviewed annually prior to the annual mail out to ascertain if sites continue to meet the above-established criteria. If upon review of the CSIF, Communication Survey (**Appendix B**), student feedback and or site visit, a site is considered to no longer support the program's goals and mission, the site will be placed on the inactive list. The site will be reviewed annually for the possible reactivation. It is also possible for sites to request that they be removed from the program. Sites should contact the ACCE if they are interested in being removed from our active list.

D. Clinical Education Site Files

1. The site files are located in the main office of the Physical Therapist Assistant Program

- **a.** The files include:
  - **i.** The sites CSIF.

ii. APTA Physical Therapist Assistant Student evaluation of Clinical Experience and Clinical Instruction (adopted 7/08) (**Appendix C**)

iii. Miscellaneous: any additional information available.

b. These files are available for the student to review but cannot be signed out or leave the program office.

E. Clinical Instructor Qualifications

Clinicians entrusted to provide supervision and mentorship to program students must be compliant with program expectations for clinical faculty qualifications, clinical competence, and clinical instruction minimal qualifications which are as follows:

- Maintain a license to practice as a Physical Therapist or Physical Therapist Assistant in the state of Louisiana.
- Have no less than one year of full-time clinical experience as a licensed PT or PTA prior to accepting a student.
- Understand and abide by the Louisiana College PTA program *clinical policies and procedures*
- Successfully complete the APTA tutorial of the Clinical Performance Instrument and understand the instructions for completing the CPI as the method of grading the clinical experience. Must also accept responsibility for determining and reporting student competency and safety during periodic evaluation via the CPI.
- Have an interest in teaching both technical skills and professional behaviors commiserate with the Louisiana College Mission that will prepare a PTA student for successful employment as a PTA.
- Communicate with the Academic Coordinator of Clinical Education if there are any questions or concerns regarding student performance or the student learning experience.
- Must have sufficient time to devote to clinical education.

F. Student Competence Prior to Clinical Assignment

The ***Student Competency and Safety Skills List,*** which is a comprehensive list of all skills that students are required to perform competently and safely prior to engaging in clinical courses, is provided to students during the fall semester of the technical component of the program. The skills list includes the critical safety elements which are mandatory elements of various skills. All skills are categorized according to the course in which students are to demonstrate competence. Students are encouraged to maintain a personal copy of the list as well.

The program's process for determining students are competent and safe in the skills identified by the program is evolving and multi-step.

- An informal initial step in the verification of student competence is completion of a skills check-list based on peer review. Students are partnered in the laboratory sessions in order to practice and refine specific skills. Students are advised to provide one another with sufficient feedback to facilitate progress toward competence.

- A student's ability to appropriately select and utilize required data collection and intervention techniques in the clinical setting is further determined through successful completion of required coursework including achievement of a grade of C or better on all practical examinations. Each skill in which students are required to demonstrate competency will be incorporated into and assessed via practical examinations. Students must pass or demonstrate understanding of each skill taught during the semester including critical safety elements before being allowed to progress to the clinical education portion of the program.

Critical Safety Elements:

For Laboratory Practical Examinations and Laboratory Checklists the following are identified as Critical Safety Elements that must be performed to avoid automatic failure of the Exam/checklist:

- Introduction of one's self as an intern to the patient/gain patient consent for treatment
- Identification of patient by two methods (last name, last four, DOB, wristband)
- Patient positioning and draping
- Perform transfers and gait techniques with a gait belt at all times
- Lock wheelchair/bed; castor wheels forward on wheelchair before transfer
- Sign documentation as a PTA student

In addition to the critical safety elements listed above, critical elements specific to course content have been identified for individual courses. All critical safety elements for a course are included on the course syllabus provided to students at the beginning of each semester.

Failure to comply with all critical safety elements involved in performance of individuals skills will result in automatic termination of the practical examination. Students will receive remediation and will be allowed to retake the exam. Also, if a student fails to achieve a score of 77% or greater on the practical examination, he or she will receive remediation and re-test. On the second attempt, the maximum score that can be earned is 85%. If the critical safety elements are not complied with or the students achieves a score that is less than 77% on the second attempt, the student will be provided remediation and a third and final attempt with a maximum score of 77%. Should the student fail to comply with the critical safety elements or score below 77% on the third and final attempt, he/she will fail the course and will not continue in the technical program. Please see the PTA Program Student Handbook for the dismissal policy.

- In the event a student fails to satisfactorily demonstrate competence through any or all of the procedures noted above or if program faculty determines through observation during laboratory exercises that a student requires additional instruction, practice, and/or assessment to achieve sufficient competence prior to receiving a clinical assignment, the student will be responsible for scheduling time with a faculty member to do those things necessary to verify an acceptable level of clinical competence.

G. Clinical Site Assignment

A clinical education request form (CERF) is mailed out annually per APTA policy. This form gives the time frames for internships for the following academic year. In the first month of

the fall and spring semester f each students will be given a Clinical Education Preference Form **(Appendix D**) to complete. This form will outline student geographical preference and clinical interest. The ACCE will match student preference with available sites when possible; however, the clinical site assignment remains solely at the discretion of the ACCE. The following basic criteria are used to insure a variety of experiences:

a. Students must have at least one internship at a skilled nursing facility, acute care hospital, and long-term acute care facility (LTAC) or rehabilitation hospital. The goal is to have every student complete one internship at a hospital, one at OPT (outpatient therapy) and one in a nursing home, this may not always be feasible.

b. When possible, students will be assigned to at least one site where they are able to witness the PT/PTA relationship.

c. Students may have to travel a distance of greater than one-hour travel time to/from clinical sites.

d. Any expense needed for travel to/from a clinical site is the sole responsibility of the student.

e. If a student is assigned to two outpatient experiences, in an effort to insure variety, one should be a large corporate organization and one should be a private clinic.

f. Students are **not** permitted to do a clinical rotation at the following sites:

- **i.** A site where they have previously worked.
- **ii.** A site where a family member has direct line supervision.
- **iii.** A site that has offered the student employment post-graduation or are paying tuition for the student.

Structure of the PTA Program

ASSOCIATE OF APPLIED SCIENCE DEGREE IN PHYSICAL THERAPIST ASSISTING

TOTAL OF 75 HOURS

General Education Courses (30 hours)..... Hrs

Fall Semester

Orientation (CC 100).....1
First Aid and CPR (HP 203).....1
Composition (EN 101).....3
Human Anatomy and Physiology I (BI 231 & 232).....4
Mathematics (MA 111).....3
Religion (RL 101 or 102) 3
Total Credit Hours for Semester..... 15

Spring Semester

Chem Principles for Allied Health/Nursing (CH 131 &132).....4
Human Anatomy and Physiology II (BI 233 & 234).....4
Developmental Psychology (PY 230) 3
Public Speaking (CA 112) 3
Computer Technology for Allied Health (CS 140).....1
Total Credit Hours for Semester.....15

Total Credit Hours for General Education..... 30

Technical Education Courses (45 hours) ..... Hrs

1st Term Summer Term (8 weeks)

Clinical Kinesiology and Anatomy (PT 202) 6
Intro to PT A (PT 201) 2
Total..... 8

Fall Semester (16 weeks)

Physical Therapy Procedures (PT 203)..... 3
PT Intervention for the Orthopedic Client (PT 204) 5
Principles of Physical Agents and Massage (PT 205) 4
PTA Clinical Practicum I (3 weeks))(PT 206)..... 2
Total Credit Hours for Semester.....14

Spring Semester (16 weeks)

Clinical Neurorehabilitation/Motor Control (PT 207)..... 6
PTA Seminar (PT 208) 3
Path. Of Cardiovascular and Multisystem Involvement (PT209).....3
PTA Clinical Practicum II (5 weeks) (PT 210) 4
Total..... 16

2nd Summer Term (8 weeks)

PTA Clinical Practicum III (7weeks) (PT 211)..... 6
Transition to the PTA Career (PT 212) 1

Total..... 7

Total Credit Hours for Technical Education..... 45

Revised 4/2012

H. Structure of Clinical Program

Clinical Practicum I (PT 206) is a three-week clinical affiliation in an acute setting, an inpatient rehab setting or a skilled nursing facility. This Level I clinical experience provides supervised planned learning opportunities for students to apply basic physical therapy principles and techniques under the direction of a physical therapist or physical therapist assistant in the setting of an acute hospital, inpatient rehabilitation, or skilled nursing facility. Basic techniques include but are not limited to: patient safety, patient set up, transfer training, gait training, measuring vital signs, administration of modalities, assessing range of motion and muscle strength, instruction on therapeutic exercise, and proper documentation in the medical charts. Through reflective journaling, during clinical experiences, students will be challenged to identify how his/her personal value system

facilitates conduct that reflects practice standards that are legal, ethical and safe and delivery of care in a compassionate and altruist manner in the clinical environment.

Clinical Practicum II (PT 211) is a five-week clinical affiliation in a nursing home, outpatient facility, or specialty area such as pediatrics. This course is a supervised learning experience in a selected physical therapy setting in which previously taught information is integrated under the supervision of clinical physical therapist or physical therapist assistant. This course is designed to teach students the necessary skills for physical therapy patient care and to build on the skills and knowledge learned in PT 206. These skills include (but are not limited to) active, passive, and resistive exercise programs, as well as continued practice in the delivery of modalities, gait training, transfer training, proper documentation, and overall patient safety. Students will also learn the fundamentals of clinical education by providing an in-service to the therapy staff on a topic that is agreed upon by the student and Clinical Instructor. Through reflective journaling, during clinical experiences, students will be challenged to identify how his/her personal value system facilitates conduct that reflects practice standards that are legal, ethical and safe and delivery of care in a compassionate and altruist manner in the clinical environment.

Clinical Practicum III (PT 212) is a seven-week clinical affiliation in an outpatient setting. This course is a supervised learning experience in a selected physical therapy setting in which previously taught information is integrated under the supervision of clinical physical therapist or physical therapist assistant. This course builds on the skills learned and exercised in PT 211. This course focuses on the collection and interpretation of clinical data and includes exposure to various testing devices and treatments for balance, coordination, and strength. Students are expected to adjust patient treatment plans based on the test results and to communicate these to the CI for the purpose of modifying the treatment plan. The student will also provide daily patient and caregiver education as related to treatment as well as provide an in-service to the therapy staff on a topic that is agreed upon by the student and the CI. Through reflective journaling, during clinical experiences, students will be challenged to identify how his/her personal value system facilitates conduct that reflects practice standards that are legal, ethical and safe and delivery of care in a compassionate and altruist manner in the clinical environment.

I. Clinical Internship Correspondence

1. Assignments will be made using the following time lines for internships:
    a. First internship will be assigned in September, with a confirmation letter from the ACCE.
    b. Second internship will be assigned in January with a confirmation letter from the ACCE.
    c. Third internship will be assigned in March with a confirmation letter from the ACCE.
2. The students will complete the Student Data form (**Appendix E**) and write a letter of introduction to the CI three weeks prior to the start of each internship. This letter will be reviewed by the ACCE and a copy placed in the students file.
3. Two weeks prior to each clinical experience the student will do a self-assessment on preparedness for their clinical using the Clinical Performance Instrument (CPI).

4. Two weeks prior to each clinical experience, the student will write goals (5 goals for the first rotation and 10 goals for the second and third rotation) that they want to accomplish on their internship and submit to ACCE. These goals will be returned to the student to mail with their introductory letter to the CI/CCCE as well as share with CI/CCCE on the first day of their internship.
5. While on clinical the students will be required to submit the following correspondence with the school:
    a. First Week Fax Form (see **Appendix F**)
    b. Midterm Fax Form (See **Appendix G**)
    c. Midterm CPI (See **Appendix H**) Student and CI
    d. Final CPI (See **Appendix H**) Student and CI
    e. In-Service request form (second and third practicum)(**Appendix I**)
    f. In-Service Rubric (second and third practicum)(**Appendix J**)
    g. Action plan if one is indicated
    h. APTA student assessment of clinical experience and clinical instruction
    i. Clinical Journals
6. The CI will complete the assessment of the strengths and weaknesses of the curriculum (Student Competency and Safety Survey, **Appendix K**) and return it via fax or mail to Louisiana College. This form will also include CI's evaluation of the LC faculty communication and administrative support.

J. Medical Malpractice Insurance/Professional Liability

1. PTA students are legally and professionally liable for all acts performed as a PTA student. **Student liability insurance is mandatory and must be purchased prior to the start of the first clinical rotation**. Students are responsible for obtaining and maintaining their own insurance. Insurance can be purchased through the Louisiana College Business office. The PTA program Academic Coordinator of Clinical Education will maintain a list of students who have obtained liability insurance and have current physical examination reports. Students will **not** be permitted to attend clinical until compliance is demonstrated. A copy of the plan is kept in the Allied Health Office and will be provided upon request to any site that requests a copy.

K. College and facility responsibilities to the clinical education program

Duties of Louisiana College:

1. Designate a member of faculty to serve as Academic Coordinator of Clinical Education who will notify the clinical facility about planned student assignments.
2. Inform the student of any special requirements of the clinical facility for acceptance, uniform requirements and necessity to conform to standards, practices, policies and procedures of the clinical facility.
3. Maintain patient confidentiality as required by all federal, state laws and regulators.
4. Inform students of additional drug/alcohol or other testing if required by the clinical facility.
5. Establish the education objectives for the clinical education experience and continually evaluate the effectiveness of the objectives.
6. Assign a grade for the practicum course utilizing criteria identified in the course syllabus.

Duties of the *facility*:

1. Maintain high standards for appropriate health care delivery of physical therapy services**.**
2. Designate an individual who will be responsible for the coordination of services with the college.
3. Designate an individual who is the primary mentor or clinical instructor to the student, who is responsible for completing the evaluation of student performance utilizing the Clinical Performance Instrument.
4. Provide emergency medical care to the students who become ill or injured during their clinical affiliation, if medically necessary and appropriate. The student shall arrange for medical care beyond that of emergency nature. The student shall be responsible for the cost of emergency care and for the cost of any additional medical care beyond that of an emergency nature.
5. Each facility is solely responsible for the care and wellbeing of the patients receiving care at that facility regardless of the individual that is rendering treatment.

L. Community Responsibilities

The Commission on Accreditation in Physical Therapy Education requires accredited educational programs to have programs to assist clinical faculty in professional development. To meet these outlined needs the Academic Clinical Coordinator will send out annually a needs assessment to all clinical sites. Based upon the results of the survey the faculty of LC will develop educational programs to help develop clinical faculty skills. These programs could include CEU credits, workshops on topics including the Guide to Physical Therapy Practice and the Clinical Performance Instrument, and workshops on topics that the faculty has identified expertise, or those topics directly related to the Physical Therapy profession. In addition, the physical therapist assistant faculty will offer APTA CI credentialing course to be offered to prospective Clinical Instructors prior to student internships in the clinics.

M. PTA Clinical Instructor Rights and Privileges

Clinical instructors have a special place in the success of Louisiana College's PTA Program therefore it is the desire of the program to offer special rights and privileges to its clinical instructors that not only provide avenues for career development and education, but that also enhance the clinical education of its students. The following rights and privileges are currently extended to the PTA program clinical instructor:

- CI Credentialing course
- Library resources (on-line as well as in the Library)-includes access to multiple medical/allied health databases. Various physical therapy journals are available with full text as well.
- Continuing Education courses/in-services offered locally at Louisiana College.

The program seeks to facilitate and support ongoing improvement and development of its clinical faculty and may sponsor faculty development activities annually. In an on-going effort to ensure

that the clinical education faculty development activities are designed to improve the effectiveness of clinical teaching within the program's clinical education component and are based on needs of the clinical education faculty, the program will utilize information obtained through various assessment methods.

Students will assess their clinical experience and clinical instructor using the APTA's *Physical Therapist Assistant Student Evaluation: Clinical Experience and Clinical Instruction* assessment tool following each clinical rotation. Determination of clinical faculty development needs will also be based on the clinical instructor's self-assessment of his/her readiness to serve as a clinical instructor (CI) or clinical site coordination of clinical education (CCCE).

Additional sources of information that will be considered in the formulation of clinical faculty development activities will be surveys completed by employers of program graduates, student performance in clinical experiences as assessed through the Clinical Performance Instrument (CPI), and analysis of the individual CIs abilities by the program's ACCE during scheduled visits to clinical sites. The academic coordinator of clinical education (ACCE) will review data collected to identify negative trends or potential weaknesses in clinical instruction that may be bolstered or enhanced by developmental activities. Curricular changes or changes in the CPI utilized in the program's clinical education component may also necessitate and guide clinical faculty development activities.

The **academic coordinator of clinical education** (ACCE)will utilize all information gathered through the assessment methods identified above to plan in-service and/or continuing education programs that will enhance the clinical instructor's teaching ability, CCCE ability to manage clinical education for his/her particular clinical site, and/or to enhance the overall clinical education site. The program also plans to offer continuing education programs that will enhance the CIs clinical skills and assist him/her in staying up-to-date on current practice.

N. Contracts

A copy of duly executed contracts is on file in the Physical Therapist Assistant Program Office. A student cannot be involved in patient care or contact unless there is a signed contract on record.

O. Assessment of Clinical Education Outcomes

The academic and clinical education programs share the responsibility for assessment of the Program's clinical education programs. Assessment of various aspects of the clinical education components is achieved through the following methods:

1. EVALUATION OF STUDENT CLINCIAL PERFORMANCE

Students will receive ***formative and summative evaluations*** by the supervising clinical instructor during each clinical rotation. Interim evaluations and consultations between the clinical instructors and student will be determined at the discretion of those involved as needed.

In order to provide a comprehensive assessment of students' progression throughout the PTA curriculum, the *Physical Therapy Clinical Performance Instrument (**Appendix H**)*

developed by The American Physical Therapy Association, will be used. This instrument will ensure consistent validity and reliability throughout the continuum of clinical learning experience.

It is the student's responsibility to maintain their own documentation and records. Documentation is expected to be kept up-to-date and will be collected and/or reviewed by program faculty regularly. Clear deadlines for submission of documentation throughout each clinical experience are determined by the Academic Coordinator of Clinical Education and communicated in each clinical course syllabus.

Any falsification, forgery, or misrepresentation of clinic documentation is a breach of the student code of conduct will not be tolerated. Students found guilty of falsifying any clinical records will be subject to disciplinary action ranging from course failure to dismissal from program.

2. ASSESSMENT OF ACHIEVEMENT OF CLINICAL EDUCATION OBJECTIVE

The assessment achieved through clinical site and clinical instructor's self-assessments, student evaluations of clinical sites and instructors, overall student performance, etc.

3. ASSESSMENT OF CLINICAL EDUCATION RESOURCES TO MEET PROGRAM GOALS, INCLUDING:

i. Variety of sites-report generated from CSIF database
ii. Quality of student supervision-student assessment of clinical site/instructors, clinical site/instructor self-assessments.
iii. Availability of learning experiences in all practice settings-report generated from CSIF database.
iv. Communication-based on communication surveys completed by clinical instructors/center coordinators of clinical education and on student evaluations of the clinical education component. Include frequency, that it is mutually established and effective formal and informal communication mechanisms which are assessed regularly through a survey, student assessment, and/or self-assessments.

P. Complaints

Complaints that fall outside of due process will follow the Louisiana College PTA Program Complaints Policy which is found on the program homepage, http://www.lacollege.edu/academics/programs/physical-therapist-assistant

STUDENT POLICIES FOR THE CLINIC COMPONENT

A. Health Policies

1. The students must complete the following health related requirements and at the student's expense. These must be completed upon admission to the program and will be kept in the student's file within the PTA program office (locking cabinet for hard-copy material and secured server for electronic information). LC cannot release copies of any of these forms to any third party due to confidentiality issues without written consent from the student (Student Release of

Information Form, **Appendix L**). All confidential clinical student health and academic information will be released in a manner consistent with HIPAA and FERPA guidelines. It is highly recommended that each student maintains the originals of all of these forms and keep them in a readily available place. Some clinical sites may require additional immunization/titers which will also be at the expense of the student. See Student Medical Form (**Appendix M**) Health History and Physical Examination Form (**Appendix N**) for documenting requirements.

- **a.** A Health History and Physical Examination Form (**Appendix N**) completed by a physician
- **b.** A copy of your Basic Life Support card (CPR) that must be current
- **c.** A copy of certificate of completion of your Hepatitis B series or a signed waiver declining series OR proof of titer for Hepatitis B
- **d.** Tetanus Toxoid injection proof in the last ten years
- **e.** PPD tests results or chest X-ray if PPD is positive. (Annual requirement, clinical sites may require PPD every 6 months)
- **f.** Proof of immunization to Varicella and to Measles, Mumps and Rubella. A titer for MMR is required.
- **g.** Influenza vaccine is highly recommended each year
- **h.** Background Check
- **i.** Drug/Alcohol Screen
- **j.** Medical Insurance Card
- **k.** Academic/Clinical Progress
- **l.** Additional information requested by the clinical site

2. It is required by the Allied Health Department that each student have medical health insurance and that a copy is provided to the clinical education office for your file. Please be advised that some sites request that you have insurance in order to do a clinical rotation at that site.

Sharing of student information with clinical sites is at times necessary to ensure student placement into the clinical setting; therefore, student refusal to sign the Student Release of Information Form (Appendix O) may result in an inability to place students and therefore hinder academic progression and may ultimately lead to dismissal from the PTA program.

For additional information contact Penny Reeves, ACCE at 318-487-7162.

B. Criminal Background Check/Drug Testing

The college requires a mandatory background check, sex offender check, and drug screening as part of the application process to the physical therapist assistant program through **CastleBranch**. Additional drug testing (secondary to clinical site requirement) or random drug testing (if student is under suspicion) may be required throughout the program. Fees required for any/all testing are the responsibility of the student. Any positive results may be shared with the clinical affiliation that may or may not allow student to complete their internship. Should a site not permit the student to complete the internship or if the ACCE is unable to find other accommodations, the student may be unable to complete the clinical course and be ineligible for progression within the program.

In the event a student is unable to progress within the program due to the above, the student may re-apply for entry into the subsequent cohort, however, re-entry is not guaranteed. Upon completion of all required application documents the student will be compared with all other potential students for possible admission. In the event the student is re-admitted, he/she may be subjected to random drug/alcohol screening throughout both didactic and clinical coursework.

For further information contact Penny Reeves, ACCE 318-487-7162

C. Clinical Attendance Policy

Clinical rotations provide the experience and practice necessary for development of clinical skills and problem-solving abilities, therefore, attendance of all scheduled clinical sessions is essential in the successful completion of the clinical courses. Failure of any clinical course will impact the student's progression through the program.

Students are to exhibit behaviors that reflect the *Professionalism in Physical Therapy: Core Values* in their approach to clinical attendance, students must contact the clinic site and notify the appropriate staff member providing as much notice as possible that they will be absent or more than 15 minutes late to allow for appropriate changes in staffing to accommodate for the absence and ensure continuity of patient care. Students are then to inform the academic clinical coordinator (ACCE) of the absence or late arrival via phone call by 8:30am. Failure to report the absence or late arrival to the clinical site and/or clinical coordinator may result in disciplinary action.
Students are required to make up any missed clinical time due to tardiness, absence, closure of the clinical site for any reason. It is the responsibility of the student to collaborate with the ACCE, clinical instructor and clinical coordinator to schedule compensatory make-up sessions. All scheduled hours must be completed for progression in subsequent clinical courses or graduation.

D. Attendance Guidelines

Work Day Schedule/Tardiness/Leaving Early

1. Attendance at all clinical affiliations and classes are required as scheduled. Clinical internship credits are based upon clinical hours in the clinic for internships. CAPTE has established guidelines that each program must work within for accreditation.
2. Student flexibility in the scheduling of clinic hours is necessary. A limited number and hours of clinical slots are available at any given time. A student will be expected to follow the clinic's hours and may expect possible evening or Saturday hours or four- ten hour work days. Advance notice will be given in the case of those clinics that have other than normal work hours.
3. Lateness is considered unprofessional conduct. If a student is to be late for clinic, it is the responsibility of that student to contact the clinical instructor and the ACCE. See the next section on absences.
4. Repeated lateness will be reported to the school and may result in the unsuccessful completion of the clinical affiliation.
5. Leaving the assigned clinic early to attend to personal business is ***not*** permitted. Do not ask your clinical supervisor to allow you to leave your assigned clinic during scheduled hours. If

time is requested for an unforeseen emergency, you must contact the ACCE at LC for potential approval before the clinical instructor.

6. Although not required, students are encouraged to "take the step beyond" by participating in clinical activities beyond the minimum required hours in the clinic (staying late to watch a particular procedure, take advantage of an evening or weekend special activity that is sponsored by the clinic, etc) to enhance the learning experience. Some activities may be during clinical hours but outside of the therapy department and away from direct patient care, all activities must be cleared with the clinical instructor prior to participation.

E. Absences from Clinic

1. REMOVAL FROM OR FAILURE OF A CLINICAL ROTATION MAY OCCUR WHEN PROGRAM POLICY REGARDING ABSENCES ARE NOT FOLLOWED.
2. The student must attend all clinics unless a documented emergency occurs. The following procedure ***must be completed*** in the case of an emergency:
    a. Call the clinical supervisor at the clinic within fifteen minutes of the opening of the office. If your clinical supervisor is not available, leave a message and call again later to ensure the supervisor has received your message.
    b. Call the Academic Coordinator of Clinical Education (ACCE) at the college by 8:30am. Leave a message that includes a telephone number where you may be reached that day.
3. Please anticipate the unexpected situations (child illness, lack of transportation, etc.) in advance. You should plan to have other family members or friends ready to assist you. Remember to include your family in your college plans and request support in advance.
4. Any day that is missed must be made up at the convenience of the clinical site. The ACCE must be informed by phone of the absence and the plan to make up time.
5. Clinicians may have other physical therapy or physical therapist assistant students and scheduling missed hours may be difficult for the site.
6. UNEXCUSED ABSENCES FROM THE CLINIC WILL NOT BE TOLERATED. IN THE EVENT OF AN UNEXCUSED ABSENCE, THE STUDENT WILL BE ISSUED A MEMORANDUM CONCERNING ATTENDANCE VIOLATION WARNING IN WHICH THE STUDENT MUST SIGN AND RETURN TO THE PTA OFFICE; ANY FURTHER UNEXCUSED ABSENCES WILL RESULT IN DISMISSAL FROM THE PTA PROGRAM, NO EXCEPTIONS.

Excused Absences

An excused absence must be requested in advance and students must provide documentation requesting excused absence to the ACCE to seek approval prior to notifying the CI. If the ACCE deems the absence to be excused the student may then request the excused absence from the Clinical Instructor and be willing to make up any time missed in the clinic. Examples of excused absences include personal illness, death of an immediate family member, jury duty, military duty, or other situation that has been approved by the ACCE.

Unexcused Absences

An unexcused absence does not meet the parameters of the excused absence and also includes situations in which neither CI or ACCE were notified, in advance, of a student's absence in the clinic. Examples of unexcused absences may include car/transportation problems, child care issues, routine doctor's appointment, etc.

F. Safety in the Clinic

1. Students are given the Louisiana College Student Handbook complete with information dealing with campus safety upon admission to the college. These general rules apply while in the clinic. The students are instructed to be especially cautious when walking to and from their car. If they are working/studying late, they should ask someone to walk with them to their car.
2. Students are expected to review the policy and procedures manual of each internship site so that they can become familiar with the following policies:
    a. Photo release policy
    b. Safety policy
    c. Universal precautions policy especially cleanup of an incident
    d. Policy for reporting unsafe equipment
    e. Policy on Parking
    f. Documentation and Scheduling Procedures
    g. Emergency Codes
3. The generic abilities:
    a. Students are expected to take initiative and be active in their learning. This will include having an enthusiastic outlook on the learning process in the clinic. When patient census is low, students should inquire about other learning opportunities available in the clinic. Clinicians will expect students to have motivation and apply creative ideas.
        I. Students will utilize tact and a constructive manner while communicating with peers and Instructors.
        II. Students are expected to act maturely and responsibly
    b. Students will maintain a balance between personal and professional relationships with other professionals and patients. Professionalism dictates that objectivity must prevail to avoid a detrimental or dependent relationship.
    c. Students will complete any clinical assignments issued in the time frame set by the clinical instructor (CI).
    d. Students are expected to fully complete and promptly submit all required paperwork and documentation after each clinical on the day designated.
    e. Students are expected to accept feedback from clinicians and peers constructively and not with undue stress or excuses. Remember feedback is a tool used to improve, not tear down. Students are expected to be tactful and respectful when offering feedback to clinicians or peers.
    f. Students are expected to refrain from the use of cell phones when in the clinic and any reports of cell phone use in the clinic during business hours will result in a drop in letter grade per each offense.
4. Critical Safety Skills During Clinical Internships include:
    a. Introduction of one's self as an intern to the patient
    b. Identification of patient by two methods (last name, last four, DOB, wristband)
    c. Patient positioning and draping
    d. Perform transfers and gait techniques with a gait belt at all times
    e. Lock wheelchair/bed; castor wheels forward on wheelchair before transfer
    f. Sign documentation as a PTA student

5. Assessment Skills:

For a complete list of intervention and assessment skills, students may be responsible for during each internship, please refer to **Appendix O** (Student Competency and Proficiency Form)

G. Student Medical Emergencies/Injury during Clinical Internship

It is the intent of the Louisiana College PTA Program to promote high quality care and safety for clients, students, academic staff and clinical staff.

Therefore the policy of the PTA program is that in the event of an accident or illness of a Louisiana College student, instructor, or faculty member participating in the education program for the clinical laboratory experience at the facilities of the Agency or participating in the program through an off campus experience, the Agency (or facility representative) shall arrange for immediate emergency care, but shall not be responsible for any of the costs involved in such emergency care, follow-up care, or hospitalization, unless such accident or illness was caused by the negligent act or omission of the officers, directors, or employees of the Agency, or those acting by or through them.

H. Patient Injury during Clinical Internship

In the event of patient/client injury during a clinical practicum course (PT206, PT210, PT211) the student should immediately notify the clinical instructor of the injury and follow the facility policy on reporting the incident and complete required/necessary paperwork (i.e. incident report). The student should then contact the ACCE who will determine the appropriate paperwork to be completed by the student/CI in order to turn submit for malpractice/liability coverage of the incident. Malpractice/Liability insurance is offered through the college and is a requirement of the PTA program and only covers students assigned in clinical practicums. Once the student graduates the insurance is no longer effective.

I. Standards of Behavior for Students in the Clinical Setting

The clinical education portion of the PTA program's curriculum is designed not only to develop clinical skills and problem-solving abilities, but to develop professional behaviors that reflect the standards of conduct and core values of the profession of physical therapy. Louisiana College PTA students will conduct themselves in a manner consistent with the American Physical Therapist Association's *Standard of Ethical Conduct for the Physical Therapist Assistant* (*See **Appendix P** - Standards of Ethical Conduct for the PTA*) and reflect the *Professionalism in Physical Therapy: Core Values* (Accountability, Altruism, Compassion and Caring, Cultural Competence, Duty, Integrity, Social Responsibility). Students enrolled in the PTA program are also required to adhere to the Louisiana College *Student Code of Conduct* found in the Louisiana College Student Handbook (page 104).

Student participation in patient care in the clinical setting to complete the clinical objectives and program requirements is a privilege granted them from the clinical affiliates associated with the Louisiana College PTA program. With this privilege comes responsibility. While in the clinical setting, students are entrusted with private patient information that is protected under the

federal ***Health Insurance Portability and Accountability Act (HIPAA)***. Students are **legally** and **ethically** obligated to protect patient identity and privacy.

In accordance with federal **HIPAA** regulations, removing client records of any kind is expressly prohibited unless the patient has signed a release form, or the material has been thoroughly de-identified. The student must abide by the specific policies and procedures established by each clinical site pertaining to the use of patient cases for educational purposes. Students found to be in violation of HIPPA regulations and/or clinical site policies could face suspension or dismissal from the College and/or legal action. Student liability insurance does not protect against HIPPA violations.

- Discussion of any patient information should be limited only to that which is warranted to fulfill the clinical assignment.
- Any discussion of patient information with appropriate members of the healthcare team should be conducted in a confidential manner and place to ensure protection of the information.
- Written patient information can only be taken from the treatment setting after consultation with the clinical personnel, Clinical Coordinator, or Program Director and a release of information form is signed by the patient. The student is then responsible for de-identifying the material and presenting the case in a manner that complies with HIPAA and other privacy policies and procedures.

Another obligation of those students afforded the opportunity to participate in patient care in the clinical setting is to report and actively prevent medical errors. In addition to maximizing patient safety, reporting errors or the potential for errors facilitates performance improvement efforts to prevent such future mistakes.
In an effort to ensure students understand the crucial nature of confidentiality, during the first semester of the technical program, students must take an online HIPAA training and compliance course and pass an exam in order to obtain a certificate of completion as a requirement in the course PT201, Introduction to Physical Therapy. Students must also sign a *Confidentiality Agreement* (**Appendix Q**) prior to engaging in any clinical rotation. The confidentiality Agreement and the HIPAA certificate will be maintained on file in the PTA program office and shared with assigned clinical sites upon request.

J. Informed Consent-Patient Consent

All patients must be afforded informed consent-the risk-free right to refuse to participate in clinic education. The physical therapist is solely responsible for ensuring the patient/client is aware of the student status of any student involved in providing physical therapy services (APTA's Guidelines and Self-Assessment for Clinical Education 2004 Revision- 1.3.3.1 Copy available in the PTA office). Students are to respond respectfully to the patient's refusal and, upon ensuring the patient's safety, remove his/herself from the patient's care activities and notify the supervising clinical instructor.

In accordance with the dress-code students are required to wear appropriate identification b a d g e s as determined by the clinical site and a lab coat bearing the Louisiana College PTA program insignia further designating his/her student status. Students who falsely represent themselves as licensed therapist assistants will be subject to disciplinary action (see Program Dismissal Policy) a n d potential legal action.

K. Dress Code

Students must abide by the dress code restrictions of clinical facilities and are responsible for contacting their assigned facility prior to the start of the affiliations to inquire about their specific dress codes which may include specific identification badges.

1. Students are to adhere to proper body hygiene at all times and use UNSENTED deodorants.
2. Fingernails are to be kept short, rounded and clean. No overlays or nail polish may be worn.
3. Perfume is **NOT** to be worn. This is inclusive of heavily scented cosmetics, hair and body products.
4. Hair is to be kept clean and neat and must not interfere with patient care or student performance. Long hair must be pulled back.
5. NO JEWELRY is acceptable other than a watch, wedding ring, and post earrings (no larger or dangling).
6. Tattoos must be covered.
7. Moustaches, beards and sideburns may be worn in moderate length; however, special precautions must be taken to ensure personal hygiene and cleanliness.
8. Acceptable footwear for clinical rotations is at the discretion of the host facility. Shoes are to be low heeled, closed-toe, and closed heel.
9. Short-length white lab coats with the Louisiana College PTA insignia and name pins are required. The pin should be royal blue and white lettering, including the student's name, Physical Therapist Assistant, Louisiana College. The pin is to be worn on the lab coat.
    a. The official insignia of the Louisiana College PTA program is sewn neatly on the lab coat. Placement of the insignia should be centered two inches below the shoulder on the left sleeve.
    b. The lab coat is to be worn during clinical assignments.
        i. Sweaters are <u>not</u> permitted or t-shirts that exceed the length of uniform sleeve.
        ii. Jeans are <u>not</u> to be worn
        iii. Shoes are to be low-heeled, closed-toe, and closed heel.
        iv. Shirts are to be reflective of a professional student in a Christian college. This means tailored and conservative.
    c. It is not acceptable to chew gum or to smoke while in uniform on the campus of any clinical facility.
    d. Makeup must be modest.
    e. Use of cell phones is prohibited during clinical hours and in the classroom.

    Students not compliant with the dress code will be dismissed from clinical. The Clinical Director (ACCE) and/or Program Director must be notified prior to dismissing a student for any reason. All clinical time lost in this manner will have to be made up (see attendance policy).

L. Travel/Lunch Expenses

1. Students are responsible for all expenses incurred while traveling to and from their clinical site; this may include parking.
2. The students are responsible for their own lunch. Some sites may offer a reduced cafeteria price to the students.

M. Reassignments

1. Students may request a reassignment during a clinical internship for the following reasons:
    a. Any occurrence of unethical/illegal practices.
    b. An appropriate clinical instructor is not present for the entire scheduled work day.
    c. There is an inadequate patient load.
2. Student's responsibility
    a. A student must contact the ACCE as soon as a problem is identified. The ACCE will work with the CCCE and the CI providing counseling and education in an effort to salvage the clinical experience.
3. Sites may reserve the right for a student to be removed for various reasons as well. The ACCE/CCCE/CI will deal with these on an individual basis. The ACCE will provide counseling and education in an effort to salvage the clinical experience.

N. Assessment/Grading of Clinical Experiences

1. Clinical performance is evaluated using the Clinical Performance Instrument (CPI) for Physical Therapist Assistants developed by the American Physical Therapy Association. The student's performance is evaluated on fourteen different performance criteria using a rating scale with five pre-determined performance levels by the Clinical Instructor (CI). The ACCE determines minimum performance criteria for each clinical experience and assigns a grade based on the CI completed CPI. Scores on criteria 1, 2, 3, 5, and 7 (red flag issues) may indicate need for immediate attention by the ACCE and warrant further action in order to ensure student success.
2. Louisiana College requires a letter grade for clinical internships.
3. The PTA Program has three clinical internships. Each internship occurs at a different point in the students learning. Each clinical site is given an outline via the clinical education handbook of material covered in each semester as well as the Student Competency and Proficiency Form (**Appendix O**) detailing the specific technical skills that the student is responsible for in each clinical internship. This facilitates each CI having a clear understanding of what skills the student should have mastered at that point in their studies.
    a. The first internship is a three-week full-time rotation completed in the fall after completing two semesters of classroom coursework.
    b. The second internship is a five-week full time rotation completed after all coursework at the end of the spring semester.
    c. The final internship is a seven-week full time rotation completed at the end of all coursework during the summer semester.
4. The CPI is used for each internship, but the required average minimum score increases progressively with each clinical.
5. The established guidelines for grade attainments are shared with each CI in a letter and with the student via the syllabus. It is also outlined in the clinical education handbook.
6. The student is evaluated via the CPI at Midterm and at Final. Midterm performance is given to the school via the midterm fax and midterm CPI.
7. The ACCE does a site visit to every student within the target parishes after the midterm assessment of the final rotation; the visit may be conducted earlier if requested. (Site Visit Form (**Appendix R**)

8. Areas of competency and deficiency are discussed during the site visit. All areas identified will be documented on the site visit form. If there are any major areas of concern they will be addressed by and action plan with input from the student, the CI, the CCCE, and the ACCE.
9. Any red flag safety issues should be discussed with the student as soon as possible after the occurrence. If the issue is not resolved to the CI's satisfaction, the CI should notify the ACCE. The ACCE will problem solve with both the student and the CI to resolve the problematic behavior.
10. The ACCE will document all contacts from the student or the CI and place it in the student's record.
11. The student will establish a formal action plan, with advice and consent from the ACCE, on any behaviors that are identified that will negatively impact the student reaching passing criteria. Once written the action plan will be reviewed at least weekly by the CI to give the student feedback on their progress. The ACCE will have weekly contact with both the student and the CI.
12. The final CPI will be measured by the ACCE or their representative to assure that the mandatory standards are met.

See the following pages for standards of grading for each Clinical Experience/Internship.

NOTE: Clinical instructors will be given an outline of the skills that are to be mastered by the student during each internship; expected skill level will be determined by the didactic coursework completed prior to entry into the clinical education portion of the program.

STANDARDS OF GRADING FOR EACH CLINICAL EXPERIENCE/INTERNSHIP

PT 206: (Internship I)

CPI (Final)	70%
• Journals • introduction letter and goals • Turning in documents in a timely manner	30%

PT 210: (Internship II)

Satisfactory in-service presentation and handout	10%
CPI (Final)	75%
• Journals • introduction letter and goals • Turning in documents in a timely manner	15%

PT 211: (Internship III)

Satisfactory in-service presentation and handout	10%
CPI (Final)	75%
• Journals • introduction letter and goals • Turning in documents in a timely manner	15%

STANDARDS OF GRADING FOR CLINICAL PERFORMANCE INSTRUMENT (CPI)

PT 206-PTA Clinical Practicum I

This is a ***three-week full time clinical experience*** in which the cohort will participate at the end of the second semester of the physical therapist assistant curriculum.

Course grades are recorded as A, B and C and Incomplete.

To receive a grade of "A" on the CPI:

1. The student must have no instances of unprofessional behavior, or clinical concerns. This includes completing all pre course work as outlined and completing in timely fashion all required paperwork during clinical.
2. The student must achieve at least "Intermediate Performance" on red flag criteria 1, 2, 3, 5, and 7 by the final assessment. In addition, the student must achieve "Intermediate Performance on at least 6 of the 9 remaining criteria.

To receive a grade of "B" on the CPI:

1. The student must have no more than one issue of professional behavior or clinical concerns.
2. The student must achieve at least "Advanced Beginner Performance" on red flag criteria 1, 2, 3, 5, and 7 by the final assessment. In addition, the student must achieve "Advanced Beginner Performance" on at least 6 of the 9 remaining criteria.

To receive a grade of "C" on the CPI:

1. Student can have no more than 3 instances of unprofessional behavior or clinical concerns.
2. The student must achieve at least "Advanced Beginner Performance" on 3 of the 5 red flag criteria (1, 2, 3, 5, and 7) by the final assessment. In addition, the student must achieve "Advanced Beginner Performance" on at least 3 of the 9 remaining criteria.

Any grade below "C" is not passing.

1. The student who cannot achieve the minimum satisfactory grade of "C" or better by their final rotation and/or the student who has ongoing clinical issues will need to repeat this course until criteria can be achieved.
2. Remediation will be completed at the university before the student can repeat their clinical experience.

The grade of incomplete is given in this course for the following reasons.

1. If a student has to miss clinical days due to illness and or family problems and cannot make up the hours within the established time frames. The student will upon written verification of the problem, be permitted to finish their clinical hours during the next semester. This may delay graduation.

*The online CPI is not a visual analog scale. Please refer to online tutorial for specifics concerning the definition of each anchor point. Furthermore, a mark must meet or exceed an anchor to receive that grade. (i.e. To obtain "Intermediate Performance" the mark must be placed on the anchor line or to the right of the anchor line at any location prior to "Advanced Intermediate Performance")

PT 210- PTA Clinical Practicum II

This is a ***full time five-week clinical experience*** required at the end of the third semester after *completion of all didactic instruction* in the physical therapist assistant curriculum.

Course grades are recorded as A, B and C and Incomplete.

To receive a grade of "A" on the CPI:

1. The student must have no instances of unprofessional behavior, or clinical concerns. This includes completing all pre course work as outlined and completing in timely fashion all required paperwork during clinical.
2. The student must achieve at least "Advanced Intermediate Performance" on red flag criteria 1, 2, 3, 5, and 7 by the final assessment. In addition, the student must achieve "Advanced Intermediate Performance" on at least 7 of the 9 remaining criteria.

To receive a grade of "B" on the CPI:

1. The student must have no more than one issue of professional behavior or clinical concerns.
2. The student must achieve at least "Intermediate Performance" on red flag criteria 1, 2, 3, 5, and 7 by the final assessment. In addition, the student must achieve "Intermediate Performance" on at least 6 of the 9 remaining criteria.

To receive a grade of "C" on the CPI:

1. Student can have no more than 3 instances of unprofessional behavior or clinical concerns.
2. The student must achieve at least "Intermediate Performance" on red flag criteria 1, 2, 3, 5, and 7 by the final assessment. In addition, the student must achieve "Intermediate Performance" on at least 4 of the 9 remaining criteria.

Any grade below "C" on the CPI:

3. The student who cannot achieve the minimum satisfactory grade of "C" or better by their final rotation and/or the student who has ongoing clinical issues will need to repeat this course until criteria can be achieved.
2. Remediation will be completed at the university before the student can repeat their clinical experience.

The grade of incomplete is given in this course for the following reasons.

1. If a student has to miss clinical days due to illness and or family problems and cannot make up the hours within the established time frames. The student will upon written verification of the problem, be permitted to finish their clinical hours during the next semester. This may delay graduation.

*The online CPI is not a visual analog scale. Please refer to online tutorial for specifics concerning the definition of each anchor point. Furthermore, a mark must meet or exceed an anchor to receive that grade. (i.e. To obtain "Intermediate Performance" the mark must be placed on the anchor line or to the right of the anchor line at any location prior to "Advanced Intermediate Performance"

PT 211- Clinical Practicum III

This is a ***seven-week full time clinical experience*** required at the end of all didactic instruction.

CPI grades are recorded at A, B and C and Incomplete.

To receive a grade of "A" on the CPI:

1. The student must have no instances of unprofessional behavior, or clinical concerns. This includes completing all pre course work as outlined and completing in timely fashion all required paperwork during clinical.
2. The student must achieve at least "Entry-Level Performance" on red flag criteria 1, 2, 3, 5, and 7 by the final assessment. In addition, the student must achieve "Entry-Level Performance" on all remaining criteria.

To receive a grade of "B" on the CPI:

1. The student must have no more than one issue of professional behavior or clinical concerns.
2. The student must achieve at least "Entry-Level Performance" on red flag criteria 1, 2, 3, 5, and 7 by the final assessment. In addition, the student must achieve at least "Entry-Level Performance" on at least 7 of the 9 remaining criteria with no mark lower than "Advanced Intermediate Performance".

To receive a grade of "C" on the CPI:

1. Student can have no more than one instance of unprofessional behavior or clinical concerns.
2. The student must achieve at least "Entry-Level Performance" on red flag criteria 1, 2, 3, 5, and 7 by the final assessment. In addition, the student must achieve at least "Entry-Level Performance" on 5 of the 9 remaining criteria with no criteria marked below "Advanced Intermediate Performance".

Any grade below "C" on the CPI:

1. The student who cannot achieve the minimum satisfactory grade of "C" or better by their final rotation and/or the student who has ongoing clinical issues will need to repeat this course until criteria can be achieved.
2. Remediation will be completed at the college before the student can repeat their clinical experience.

The grade of incomplete is given on the CPI (or in the course) for the following reasons.

1. If a student has to miss clinical days due to illness and or family problems and cannot make up the hours within the established time frames. Once written verification is provided to the ACCE, the student will be permitted to finish their clinical hours during the next semester. This may delay graduation.

*The online CPI is not a visual analog scale. Please refer to online tutorial for specifics concerning the definition of each anchor point. Furthermore, a mark must meet or exceed an anchor to receive that grade. (i.e. To obtain "Intermediate Performance" the mark must be placed on the anchor line or to the right of the anchor line at any location prior to "Advanced Intermediate Performance"

O. Remediation

Should a CI have concerns based on a student's performance, professionalism, or safety in the clinic the CI is to give feed back to the student on methods to use to improve in the areas of concern. If the student continues to demonstrate behaviors that raise concern the CI is to contact the ACCE in order to allow for programmatic counseling. Following discussion with the CI, the ACCE will conference with the student and clinical instructor in order to assist the student in creating an action plan complete with objectives to work toward to improve clinical performance in areas of weakness or deficits.

Students that fail to meet the objectives by the end of the clinical internship and students that are unable to achieve a score of "C" or better on the CPI will be placed on probationary status and m u s t complete remediation. Remediation is offered through the PTA program and allows the ACCE and program director, in conjunction with feedback from the CI, to establish a written agreement with the student including parameters and objectives in areas the student needs improvement.

Once the student receives sufficient instruction from program faculty to meet the specified areas of concern the student will be deemed eligible to complete remediation by:

A. Returning to a clinic in which they were initially assigned

B. Participating in a different clinical experience

C. May not be able to complete remediation if the ACCE is unable to locate a clinical site willing to accept student or a site that is able to accommodate the student based on time constraints. If the student is unable to complete remediation due to clinic availability the student may re-enter the program the subsequent cohort however must audit all coursework in the program up to the point of the clinical internship leading to remediation.

In the event the student is unable to sufficiently meet objectives in the pre-determined agreement and/or the student's needs may be more global, the student may be dismissed from the program. Dismissal from the program will not interfere with student's ability to re-apply for the subsequent cohort however, admission is not guaranteed.

Remediation automatically places the student on "probationary status" with the program and any didactic and/or clinical objectives must be met within four weeks of status placement in order to progress through the program.

P. Social Media Policy

Online communication through social media and networking is a recognized form of daily communication. The LC PTA Program has expectations for responsible, professional and ethical behavior with this form of interaction/expression (communication). The following guidelines are intended to clearly define Program expectations for appropriate student behavior related to social media and to protect the privacy and confidentiality of patients, fellow students, faculty/staff, clinical educators and BPCC affiliated facilities.

Social media includes but are not limited to:

- Social networking sites such as Facebook, LinkedIn or MySpace
- Video and photo sharing websites such as YouTube, Snapfish, Flickr
- Microblogging sites such as Twitter
- Weblogs and online forums or discussion boards
- Any other websites or online software applications that allow individual users to post or publish content on the internet

LC PTA students are expected to understand and abide by the following guidelines for use of social media:

- "Private" social networking is non-existent as posts may be copied or forwarded by others and posts may be retrieved years after the original post was made.
- Understand that as part of entering a profession, students will interact with individuals who reflect a diverse set of customs, values and points of view. As a professional, caution should be used to not only avoid obviously offensive comments (ethnic slurs, defamatory comments, personal insults, obscenity, etc.) but also to demonstrate proper consideration of privacy and of topics that may be considered objectionable or inflammatory, such as politics and religion.
- Students are prohibited from initiating "friend-requests" (or the like) with faculty, clinical instructors or other staff of facilities to which they have been assigned. Students are also prohibited from initiating or accepting friend requests from patients/clients of those clinical facilities.
- A violation of the privacy of a patient, guest, instructor, clinical affiliate, college faculty/staff member or classmate is extremely serious. This includes violations to HIPAA and FERPA policies and additionally may include disclosure of confidential information related to business practices of clinical affiliates. Such behavior may result in failure of a clinical practice course, a recommendation to the Office of Student Services for dismissal from the program and may also put the student at risk of legal liability.
- Students utilizing social media should make absolutely no reference to patients, clinical sites or clinical instructors, even if names are not given or if the student attempts to remove identifying information from the comment.
- Posting/publication/distribution of pictures, audio or video of patients, clinical affiliate facilities/instructors/staff, college facilities/faculty/staff classmates/guests is prohibited unless the student receives written permission from the subject(s), clinical affiliate, and the Program/college.
- Students should use discretion when selecting the appropriate time and place for utilizing social media so as not to interfere with classroom instruction/learning or clinical experience performance. For example, posting "status updates" during class or during the clinical day from a smart phone is prohibited.
- Remember that all entries should be made with respect toward others and with conscious forethought concerning your professional reputation as entries are often at the mercy of interpretation based on individual perspective. In an effort to outline expected conduct in the

use of social media, APTA has created a position titled, "*Standards of Conduct in the Use of Social Media*". All students are strongly urged to view APTA's document at:

http://www.apta.org/uploadedFiles/APTAorg/About_Us/Policies/Ethics/StandrdsConductSocialMedia.pdf

Violations of the social media policy are considered professional behavior violations and will result in Programmatic Counseling and if appropriate a disciplinary referral.

THIS POLICY MAY BE UPDATED AT ANY TIME WITHOUT NOTICE, AND EACH TIME A USER ACCESSES A SOCIAL NETWORKING SITE, THE NEW POLICY WILL GOVERN, USAGE, EFFECTIVE UPON POSTING. To remain in compliance, LC suggests that you review the Policy, as well as the other website policies, at regular intervals. By continuing to post any content after such new terms are posted, you accept and agree to any and all such modifications to this Policy.

Q. Tips for Success

The clinical experience is designed to help the student apply the skills and knowledge developed through the course work and lab hours at the College. It is important that the student take an active part in that development and to experience the professional qualities and behaviors that are essential to the licensed professional. Such qualities would include personal initiative, punctuality, responsibility, willingness to learn, dependability, and the ability to relate openly and effectively on a professional level, etc. Your Clinical Instructor and other staff members are volunteers who will provide guidance and direction in the areas of academics and professional development. However, you must assume the primary responsibility for professional behavior.

Below are some ways to direct you toward accomplishing that goal.

1. Communication is the most critical component of professionalism.
2. Initiate and maintain open communication with your CI.
3. Tell your CI your own goals and expectations (e.g. "I really would like time to work on gait training and traction today if possible. "). Clarify *performance expectations with* your CI. If you are unclear - ASK (e.g. Are you to initiate conversation with the patient or will the CI? Should you suggest treatment plans or does the CI have a plan in mind?).
4. Communicate to your CI whether or not you are getting enough feedback as to your performance throughout the day.
5. If you should have any questions, take the initiative to find the answer for yourself. Do not expect your CI to provide all the answers. Remember that one of your goals is to utilize resources effectively.
6. Take the initiative to come into the clinic early to familiarize you with the organization and resources available.
7. Find where equipment and supplies are stored and become familiar with the operation of units.
8. Manage your time-learn how to effectively plan and utilize your time in the clinic. Make a schedule for the day; include time to write notes, meetings, along with patient treatment.
9. Know your work requirements for effective patient treatment. Ask the amount of time a patient is to receive therapy and communicate frequently with you CI about modifications to the plan of care.

10. Utilize your "free" time effectively; offer help to others, plan upcoming treatments, observe other treatments, review medical charts, read resources available for application to treatment plans. If in doubt, ASK what you can do to assist. Remember to take initiative.
11. Complete your paperwork at the clinic. Do not wait until you leave to finish forms.
12. Try to NEVER keep a patient waiting while you plan the treatment. Plan the treatment in advance to utilize time wisely.
13. Establish an outline that includes the procedures for routine responsibilities that are repeated daily (e.g. early morning schedule changes, early morning consultations with other medical staff, team meetings, end of day documentation and billing). If you have difficulty putting this on paper, ask the assistance of the CI.
14. Acquaint yourself with the procedural manual of the facility this manual will have information on what to do in case of emergency and what is expected of you in that situation. Remember to take an active role in learning. Your CI cannot be expected to give you all of the answers.
15. Keep notes on the techniques used by therapists you have observed. This list may be an excellent resource when planning patient treatments.
16. Use a problem-solving approach when developing treatment strategies. Prioritize portions of the treatment. Identify possible problems with reaching goals. Use notes as reminders of these factors and utilize them during treatment. Although this takes extra preparation time, it will increase your level of confidence.
17. Have confidence in your knowledge. You may require input from the CI to help you to pull the pieces together. Brainstorm out loud to your CI and ask his/her feedback.
18. You will be expected to use the basic information that has been provided in the curriculum. However, realize that you are not expected to know everything. The clinical experience is the opportunity for you to test what you have learned and master more.
19. Avoid complaining to fellow students. Remember they too are in unfamiliar settings and contempt breeds more contempt. If you truly are not able to make something into a positive, then talk to the ACCE.
20. Avoid comparing clinics and CI's with other students in different clinicals. Make your clinical affiliation a positive learning experience. Each facility has its strengths and weaknesses that are not under the control of the CI (e.g. current staffing, idiosyncrasies of other staff members, patient load, demands of administration on the CI).
21. Maintain a professional relationship with the CI. Keep your expectations in line with respect to the "teacher/student" factor. Remember not only must your CI be an instructor helping you to achieve your goals, but also an objective professional who will document progress or lack of progress toward those same goals.
22. COMMUNICATE!!!! Almost any difficulty can be based on a lack of appropriate communication. Remember to listen effectively. If you are not certain of your understanding of a task or command, repeat it as you understand to the CI. If you are still unclear, ask for more specific directions possibly in writing.
23. Be open to alternative ways of doing things. The physical therapy profession is "art "and science.
24. Create action plans in writing any deficiencies identified by your CI and ask for their feedback on your plan.
25. Have fun, the clinic is a great place to be.

APPENDICES

APPENDIX A

ALL PURPOSE FORM

Louisiana College
Physical Therapist Assistant Program

Student Name_____

Date_____

Request/Issue

_____

_____

_____

_____

_____

_____

_____

_____

_____

Signature_____ **Date**:_____

Plan of Action
Date:_____

_____

_____

_____

_____

_____

_____

_____

Signature_____ **Date**:_____

APPENDIX B

Louisiana College
Physical Therapist Assistant Program
COMMUNICATION SURVEY
(Communication with Clinical Sites)

The Louisiana College Physical Therapist Assistant Program is gathering information through the use of this survey to determine the effectiveness of communication between the college and clinical affiliations. Please take a moment to and complete the survey and fax to 318-487-7041 or mail to the PTA office at:

Louisiana College
Physical Therapist Assistant Program
1140 College Drive Box 531
Pineville, LA 71359

Name of Clinic: _____

Name/Title of Person Completing Survey: ____

Date: _____

Has the college been available via phone/email or responded in a timely manner when needed?

____yes no

If no, explain: _____

Have all questions/inquiries concerning the clinical portion of the PTA program been answered in a thorough and complete manner? ____yes ____no if no, explain:

_____

_____

Do you feel that there are any barriers/obstacles that create problems with communication?

____yes ____no if yes, explain:

_____

_____

Have you or your company been issued the Louisiana College PTA Clinical handbook if requested?

____yes ____no

Do you have any questions concerning the material in the clinical handbook?_____yes____no

If yes, explain: _____

Did you or your company receive the pre-internship paperwork from ACCE including the course syllabus?

___yes___no

APPENDIX C

Louisiana College
Physical Therapist Assistant Program

PHYSICAL THERAPIST ASSISTANT STUDENT EVALUATION:

CLINICAL EXPERIENCE AND CLINICAL INSTRUCTION

June 10, 2003

American Physical Therapy Association
Department of Physical Therapy Education
1111 North Fairfax Street
Alexandria, Virginia 22314

PREAMBLE

The purpose of developing this tool was in response to academic and clinical educators' requests to provide a voluntary, consistent and uniform approach for students to evaluate clinical education as well as the overall clinical experience. Questions included in this draft tool were derived from the many existing tools already in use by physical therapy programs for students to evaluate the quality of the clinical learning experience and clinical instructors (CIs), as well as academic preparation for the specific learning experience. The development of this tool was based on key assumptions for the purpose, need for, and intent of this tool. These key assumptions are described in detail below. This tool consists of two sections that can be used together or separately: Section 1-Physical therapist assistant student assessment of the clinical experience and Section 2-Physical therapist assistant student assessment of clinical instruction. Central to the development of this tool was an assumption that students should actively engage in their learning experiences by providing candid feedback, both formative and summative, about the learning experience and with summative feedback offered at both midterm and final evaluations. One of the benefits of completing Section 2 at midterm is to provide the CI and the student with an opportunity to modify the learning experience by making midcourse corrections.

Key Assumptions

- The tool is intended to provide the student's assessment of the quality of the clinical learning experience and the quality of clinical instruction for the specific learning experience.
- The tool allows students to objectively comment on the quality and richness of the learning experience and to provide information that would be helpful to other students, adequacy of their preparation for the specific learning experience, and effectiveness of the clinical educator(s).
- The tool is formatted in Section 2 to allow student feedback to be provided to the CI(s) at both midterm and final evaluations. This will encourage students to share their learning needs and expectations during the clinical experience, thereby allowing for program modification on the part of the CI and the student.
- Sections 1 and 2 are to be returned to the academic program for review at the conclusion of the clinical experience. Section 1 may be made available to future students to acquaint them with the learning experiences at the clinical facility. Section 2 will remain confidential and the academic program will not share this information with other students.
- The tools meet the needs of the physical therapist (PT) and physical therapist assistant (PTA) academic and clinical communities and where appropriate, distinctions are made in the tools to reflect differences in PT scope of practice and PTA scope of work.
- The student evaluation tool should not serve as the sole entity for making judgments about the quality of the clinical learning experience. This tool should be considered as part of a systematic collection of data that might include reflective student journals, self-assessments provided by clinical education sites, Center Coordinators of Clinical Education (CCCEs), and CIs based on the Guidelines for Clinical Education, ongoing communications and site visits, student performance evaluations, student planning worksheets, Clinical Site Information Form (CSIF), program outcomes, and other sources of information.

Acknowledgement

We would like to acknowledge the collaborative effort between the Clinical Education Special Interest Group (SIG) of the Education Section and APTA's Education Department in completing this project. We are especially indebted to those individuals from the Clinical Education SIG who willingly volunteered their time to develop and refine these tools. Comments and feedback provided by academic and clinical faculty, clinical educators, and students on several draft versions of this document were instrumental in developing, shaping, and refining the tools. Our gratitude is extended to all individuals and groups who willingly gave their time and expertise to work toward a common voluntary PT and PTA Student Evaluation Tool of the Clinical Experience and Clinical Instruction.

Ad Hoc Group Members: Jackie Crossen-Sills, PT, MS, Nancy Erikson, PT, MS, GCS, Peggy Gleeson, PT, PhD, Deborah Ingram, PT, EdD, Corrie Odom, PT, DPT, ATC, and Karen O'Loughlin, PT, MA

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GENERAL INFORMATION AND SIGNATURES

General Information

Student Name _____

Academic Institution _____

Name of Clinical Education Site _____

Address _____ City _____ State _____

Clinical Experience Number _____ Clinical Experience Dates _____

Signatures

I have reviewed information contained in this physical therapist assistant student evaluation of the clinical education experience and of clinical instruction. I recognize that the information below is being collected to facilitate accreditation requirements for clinical instructor qualifications. I understand that my personal information will not be available to students in the academic program files.

_____ _____
Student Name (Provide signature) Date

_____ _____
Primary Clinical Instructor Name (Print name) Date

_____
Primary Clinical Instructor Name (Provide signature)

Entry-level PT/PTA degree earned_____
Highest degree earned_____ Degree area_____
Years experience as a CI _____
Years experience as a clinician _____
Areas of expertise _____
Clinical Certification, specify area _____
APTA Credentialed CI ☐ Yes ☐ No
Other CI Credential _____State ☐ Yes ☐ No
Professional organization memberships ☐ APTA ☐ Other _____

_____ _____
Additional Clinical Instructor Name (Print name) Date

_____
Additional Clinical Instructor Name (Provide signature)

Entry-level PT/PTA degree earned_____
Highest degree earned_____ Degree area_____
Years experience as a CI _____
Years experience as a clinician _____
Areas of expertise _____
Clinical Certification, specify area _____
APTA Credentialed CI ☐Yes ☐ No
Other CI Credential _____State ☐ Yes ☐ No
Professional organization memberships ☐ APTA ☐ Other _____

SECTION 1: PTA STUDENT ASSESSMENT OF THE CLINICAL EXPERIENCE

Information found in Section 1 may be available to program faculty and students to familiarize them with the learning experiences provided at this clinical facility.

1. Name of Clinical Education Site _____

   Address_____ City _____ State _____

2. Clinical Experience Number _____

3. Specify the number of weeks for each applicable clinical experience/rotation.

_____Acute Care/Inpatient Hospital Facility	_____Private Practice
_____Ambulatory Care/Outpatient	_____Rehabilitation/Sub-acute Rehabilitation
_____ECF/Nursing Home/SNF	_____School/Preschool Program
_____Federal/State/County Health	_____Wellness/Prevention/Fitness Program
_____Industrial/Occupational Health Facility	_____Other _____

Orientation

4. Did you receive information from the clinical facility prior to your arrival? ☐ Yes ☐ No

5. Did the on-site orientation provide you with an awareness of the information and resources that you would need for the experience? ☐ Yes ☐ No

6. What else could have been provided during the orientation? _____

Patient/Client Management and the Practice Environment

For questions 7, 8, and 9, use the following 4-point rating scale:

1= Never 2 = Rarely 3 = Occasionally 4 = Often

7. During this clinical experience, describe the frequency of time spent in each of the following areas. Rate all items in the shaded columns using the above 4-point scale.

Diversity Of Case Mix	Rating	Patient Lifespan	Rating	Continuum Of Care	Rating
Musculoskeletal		0-12 years		Critical care, ICU, Acute	
Neuromuscular		13-21 years		SNF/ECF/Sub-acute	
Cardiopulmonary		22-65 years		Rehabilitation	
Integumentary		over 65 years		Ambulatory/Outpatient	
Other (GI, GU, Renal, Metabolic, Endocrine)				Home Health/Hospice	
				Wellness/Fitness/Industry	

8. During this clinical experience, describe the frequency of time spent in providing the following components of care from the patient/client management model of the *Guide to Physical Therapist Practice*. Rate all items in the shaded columns using the above 4-point scale. List the five (5) most common interventions that you provided to patients/clients during this clinical experience.

Components Of Care	Rating	Five Most Common Interventions
Data Collection		1. _____
Implementation of Established Plan of Care		2. _____
Selected Interventions		3. _____
• Coordination, communication, documentation		4. _____
• Patient/client related instruction		5. _____
• Direct Interventions		

9. During this experience, how frequently did staff (ie, CI, CCCE, and clinicians) maintain an environment conducive to your work and growth? Rate all items in the shaded columns using the 4-point scale on page 4.

Environment	Rating
Providing a helpful and supportive attitude for your role as a PTA student.	
Providing effective role models for problem solving, communication, and teamwork.	
Demonstrating high morale and harmonious working relationships.	
Adhering to ethical codes and legal statutes and standards (eg, Medicare, HIPAA, informed consent, APTA Code of Ethics, etc).	
Being sensitive to individual differences (ie, race, age, ethnicity, etc).	
Using evidence to support clinical practice.	
Being involved in professional development (eg, degree and non-degree continuing education, in-services, journal clubs, etc).	
Being involved in district, state, regional, and/or national professional activities.	

10. What suggestions, relative to the items in question #9, could you offer to improve the environment for your work and growth? _____
_____
_____
_____

Clinical Experience

11. Were there other students at this clinical facility during your clinical experience? (Check all that apply):

_____Physical therapist students
_____Physical therapist assistant students
_____Students from other disciplines or service departments (Please specify _____)

12. Identify the ratio of students to CIs for your clinical experience:

_____1 student to 1 CI
_____1 student to greater than 1 CI
_____1 CI to greater than1 student; Describe _____

13. How did the clinical supervision ratio in Question #12 influence your learning experience? _____
_____
_____
_____

14. In addition to patient/client management, what other learning experiences did you participate in during this clinical experience? (Check all that apply)

___Attended in-services/educational programs
___Presented an in-service
___Attended special clinics
___Attended team meetings/conferences/grand rounds
___Observed surgery
___Participated in administrative and business management
___Participated in providing patient/client interventions collaboratively with other disciplines (please specify disciplines)_____
___Participated in service learning
___ Performed systematic data collection as part of an investigative study
___ Used physical therapy aides and other support personnel
___Other; Please specify _____

15. Please provide any logistical suggestions for this location that may be helpful to students in the future. Include costs, names of resources, housing, food, parking, etc. _____

Overall Summary Appraisal

16. Overall, how would you assess this clinical experience? (Check only one)

_____ Excellent clinical learning experience; would not hesitate to recommend this clinical education site to another student.
_____ Time well spent; would recommend this clinical education site to another student.
_____ Some good learning experiences; student program needs further development.
_____ Student clinical education program is not adequately developed at this time.

17. What specific qualities or skills do you believe a physical therapist assistant student should have to function successfully at this clinical education site? _____

18. If, during this clinical education experience, you were exposed to content not included in your previous physical therapist assistant academic preparation, describe those subject areas not addressed. _____

19. What suggestions would you offer to future physical therapist assistant students to improve this clinical education experience? _____

20. What do you believe were the strengths of your physical therapist assistant academic preparation and/or coursework for *this clinical experience*? _____

21. What curricular suggestions do you have that would have prepared you better for *this clinical experience?* _____

SECTION 2: PT STUDENT ASSESSMENT OF CLINICAL INSTRUCTION

Information found in this section is to be shared between the student and the clinical instructor(s) at midterm and final evaluations. Additional copies of Section 2 should be made when there are multiple CIs supervising the student. Information contained in Section 2 is confidential and will not be shared by the academic program with other students.

Assessment of Clinical Instruction

22. Using the scale (1 - 5) below rate how clinical instruction was provided during this clinical experience at both midterm and final evaluations (shaded columns).

1=*Strongly Disagree* 2=*Disagree* 3=*Neutral* 4=*Agree* 5=*Strongly Agree*

Provision of Clinical Instruction	Midterm	Final
The clinical instructor (CI) was familiar with the academic program's objectives and expectations for this experience.		
The clinical education site had written objectives for this learning experience.		
The clinical education site's objectives for this learning experience were clearly communicated.		
There was an opportunity for student input into the objectives for this learning experience.		
The CI provided constructive feedback on student performance.		
The CI provided timely feedback on student performance.		
The CI demonstrated skill in active listening.		
The CI provided clear and concise communication.		
The CI communicated in an open and non-threatening manner.		
The CI taught in an interactive manner that encouraged problem solving.		
There was a clear understanding to whom you were directly responsible and accountable.		
The supervising CI was accessible when needed.		
The CI clearly explained your student responsibilities.		
The CI provided responsibilities that were within your scope of knowledge and skills.		
The CI facilitated patient-therapist and therapist-student relationships.		
Time was available with the CI to discuss patient/client management.		
The CI served as a positive role model in physical therapy practice.		
The CI skillfully used the clinical environment for planned and unplanned learning experiences.		
The CI integrated knowledge of various learning styles into student clinical teaching.		
The CI made the formal evaluation process constructive.		
The CI encouraged the student to self-assess.		

23. Was your CI's evaluation of your level of performance in agreement with your self-assessment?

Midterm Evaluation _____Yes _____No Final Evaluation _____Yes _____No

24. If there were inconsistencies, how were they discussed and managed?

Midterm Evaluation _____

Final Evaluation _____

25. What did your CI(s) do well to contribute to your learning?

Midterm Comments _____

Final Comments _____

26. What, if anything, could your CI(s) and/or other staff have done differently to contribute to your learning?

Midterm Comments _____

Final Comments _____

Thank you for sharing and discussing candid feedback with your CI(s) so that any necessary midcourse corrections can be made to modify and further enhance your learning experience.

APPENDIX D

Louisiana College
Physical Therapist Assistant Program

CLINICAL EDUCATION PREFERENCE FORM

Name (As you wish it to be forwarded to your clinical site)
Current Address_____
_____ Phone number
_____Cell_____

Setting Preference: Choose Acute hospital, Rehab hospital, OPT, Pediatrics, or SNF and give brief reason why you that clinical at that particular internship
Internship I_____
Internship II_____
Internship III_____

Internship I First Choice _____
Second Choice_____
Third Choice_____

Other: Please give any other information that will be helpful in deciding your clinical placements.

_____
_____
_____
_____

If you know, please identify the type of setting that you feel you will be working at post graduation and reason why that is your preference.

_____
_____
_____

APPENDIX E

STUDENT DATA FORM

(Confidential)

School/Clinical Affiliation

Level _____

Student Name _____

Current Address _____

_____

Permanent Address _____

_____

Current Phone _____ **Permanent Phone** _____

IN CASE OF EMERGENCY CONTACT:

(1) _____

Relationship _____ Phone (home) _____ Work _____

(2) _____

Relationship _____ Phone (home) _____ Work _____

The student will provide the following information to the PTA office and is available upon request:

___Verification of professional liability coverage*

___CPR certification (American Heart Association)

___Verification of health insurance coverage

___Immunization record or declination statement for HBV (or titer test)

___Other immunization records (specify): MMR and Varicella (and titer tests for MMR) **

___Verification of PPD, if positive(x ray in last 6 months)

___Student Evaluation Form (CPI)-Online

___Student goals

Health concerns that clinical faculty should be aware of: _____

Previous clinical affiliations (places, types of patients seen, other related experiences):

Previous PT related work experience:

Areas of clinical interest:

Student goals for this affiliation:

PTA knowledge/ skills:

Experience with particular patient populations:

Types of experiences other than direct patient care:

Preferred methods of learning/type of supervision:

Preferred type and frequency of feedback:

Student signature: **Date:**

APPENDIX F

Louisiana College
Physical Therapist Assistant Program
1140 College Drive Box 531
Pineville, Louisiana 71359

FIRST WEEK FAX FORM: FAX TO 318-487-7041

Your Name: _____

Site Name and address: _____

CI Name: _____

Clinic Phone Number: _____ Clinic Fax Number: _____

CI email address: _____

Your work schedule, Days/Hours: _____

Please answer the following questions:

1. Did you have any problems finding your site?

2. Does the site need anything from Louisiana College?

3. Have you met with your CI and given them the CPI?

4. Did the CI have any questions about the CPI or syllabus?

5. Do you need a phone call?

APPENDIX G

Louisiana College
Physical Therapist Assistant Program
1149 College Drive Box 531
Pineville, Louisiana 71359

MIDTERM FAX FORM: FAX TO 318-487-7041

Student Name: _____

Please list any days that you have missed: _____

To be completed by the student:

1. Were there any major areas of concern that were identified on the midterm CPI assessment?

2. Have you written an action plan to address any identified weakness?

3. Do you feel prepared academically for this clinical?

Student signature:_____ Date:_____

To be completed by the Clinical Instructor (CI):

1. Are you credentialed by ***APTA*** to be a clinical instructor? (This is data that APTA requires our program to gather)

2. Is the student performing at **expected competency** at midterm?

3. If there are **performance issues**, does the student have a clear understanding of what needs to be done to meet criteria? (This should include the student writing an action plan if necessary).

4. Does the student maintain **professional behaviors** (i.e. punctual, receptive, effective communicator avoids talking on cell phone/texting during work hours, maintains appearance)?

5. Do you need a phone call and what is the best time to call?

CI signature:_____ **Date:** _____

APPENDIX H

Louisiana College
Physical Therapist Assistant Program

PHYSICAL THERAPIST ASSISTANT

CLINICAL PERFORMANCE INSTRUMENT

August 2009

American Physical Therapy Association
Department of Physical Therapy Education
1111 North Fairfax Street
Alexandria, Virginia 22314

APTA
American Physical Therapy Association

ISBN # 1-887759-13-1

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For more information about this publication and other APTA publications, contact the American Physical Therapy Association, 1111 North Fairfax Street, Alexandria, VA 22314-1488.
[Publication No. E-42]

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CLINICAL PERFORMANCE INSTRUMENT

INTRODUCTION

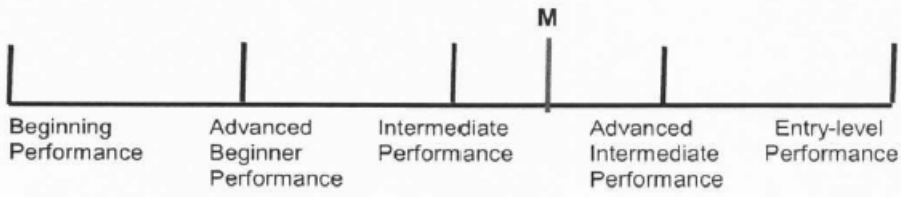
- This instrument should only be used after completing the APTA web-based training for the Physical Therapist Assistant Clinical Performance Instrument (PTA CPI) at www.apta.org/education **(TBD).**
- Terms used in this instrument that can be found in the Glossary are denoted by an asterisk (*) when they first appear in the document.
- The PTA CPI is applicable to a broad range of clinical settings and can be used throughout the continuum of clinical education experiences*.
- Every performance criterion* in this instrument is important to the overall assessment of clinical competence*, and the criteria are observable in every clinical education experience.
- All performance criteria should be rated based on observation of student performance relative to entry-level.*
- To avoid rater bias, the PTA CPI from any previous student clinical education experience should not be shared with any subsequent clinical education experiences.
- The PTA CPI consists of fourteen (14) performance criteria.
- Each performance criterion includes a list of essential skills*, a section for mid-experience and final comments for each performance dimension*, a rating scale consisting of a line with five (5) defined anchors, and a significant concerns box for mid-experience and final evaluations.
- Summative mid-experience and final comments and recommendations are provided at the end of the PTA CPI.
- **Altering this instrument is a violation of copyright law**.

Instructions for the Clinical Instructor

- Sources of information to complete the PTA CPI may include, but are not limited to, clinical instructors (CIs)*, other physical therapist assistants*, physical therapists*, other healthcare providers*, patients*, and students. Methods of data collection may include direct observation, videotapes, documentation review, role playing, interviews, standardized practical activities, portfolios, journals, computer-generated tests, and patient and outcome surveys.
- Prior to beginning to use the instrument in your clinical setting, it would be helpful to discuss and reach agreement on how the performance criteria will be specifically demonstrated at entry-level by PTA students in your clinical setting.
- The CI(s) will assess a student's performance and complete the instrument, including the rating scale and comments, at mid-experience and final evaluation periods. Additionally, the instrument may be used on a daily basis to document observations.
- The CI(s) will document the procedural interventions* and related data collection skills* performed by, observed by, or not available to the student using the drop down boxes in the left column of the procedural interventions and data collection skills tables.
- The CI(s) reviews the completed instrument formally with the PTA student at a minimum at the mid-experience evaluation and at the end of the clinical experience and signs the signature pages following each evaluation. The summative page should be completed as part of the final evaluation.
- Each academic institution is responsible for determining minimum performance expectations for successful completion of each clinical experience. Since CIs are not responsible for assigning grades, it is essential for them to rate student performance based only on their direct observations.

Rating Scale

- The rating scale was designed to reflect a continuum of performance ranging from "Beginning Performance*" to "Entry-Level Performance*." (See Appendix B) Student performance should be described in relation to one or more of the five (5) anchors. For example, consider the following rating on a selected performance criterion.



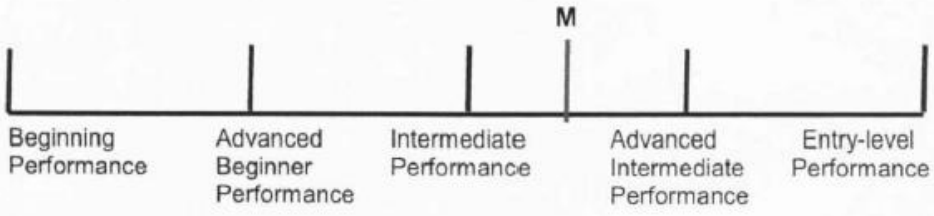
- The rating scale is NOT a visual analog scale. The vertical mark indicates that the student has exceeded the anchor definition of "intermediate performance," however the student has yet to satisfy the definition associated with "advanced intermediate performance." In order to place the rating on an anchor, all of the conditions of that level of the rating must be satisfied as provided in the definition for each of the 5 anchors.

Instructions for the Student

- The student is expected to perform self-assessment at mid-experience and final evaluation based on formal and informal feedback from others, including CI*, other healthcare providers, student peer assessments, and patient* assessments.
- The student self-assesses his/her performance on a separate copy of the instrument.
- The student documents the procedural interventions* and related data collection skills* that have been performed, observed, or are not available at the clinical site using the provided drop down boxes.
- The student reviews the completed instrument with the CI at the mid-experience evaluation and at the end of the clinical experience and signs the signature page following each evaluation.
- Each academic institution is responsible for determining minimum performance expectations for successful completion of each clinical experience. Since CIs are not responsible for assigning grades it is essential for them to rate student performance based only on their direct observations.

Rating Scale

- The rating scale was designed to reflect a continuum of performance ranging from "Beginning Performance*" to "Entry-Level Performance*." (See Appendix B) Student performance should be described in relation to one or more of the five anchors. For example, consider the following rating on a selected performance criterion.



- The rating scale is NOT a visual analog scale. The vertical mark indicates that the student has exceeded the anchor definition of "intermediate performance" however the student has yet to satisfy the definition associated with "advanced intermediate performance." In order to place the rating on an anchor, all of the conditions of that level of the rating must be satisfied as provided in the description for each of the 5 anchors.

COMPONENTS OF THE FORM

Performance Criteria

- The 14 performance criteria describe the essential aspects of the clinical work of a physical therapist assistant performing at entry-level.
- The performance criteria are grouped by the aspects of clinical work that they represent.
- Items 1-6 are related to behavioral expectations, items 7-13 address patient interventions*, and item 14 addresses resource management*.

Red Flag Item

- A flag ( ) to the left of a performance criterion indicates a "red-flag" item.
- The five "red-flag" items (numbered 1, 2, 3, 5, and 7) are considered foundational elements in clinical work.
- Students may progress more rapidly in the "red flag" areas than other performance criteria.
- A significant concern related to a "red-flag" performance criterion item warrants immediate attention, more expansive documentation*, and a telephone call to the ACCE/DCE*. Actions taken to address these concerns may include remediation, extension of the experience with a learning contract, and/or dismissal from the clinical education experience.

Procedural Interventions and Related Data Collection Techniques

- Performance criteria 8 – 12 address categories of procedural interventions commonly performed by the entry-level PTA.
- Common procedural interventions associated with each category are provided. Given the diversity and complexity of the clinical environment, it must be emphasized that ***the procedural intervention skills provided are not meant to be an exhaustive list.***
- Those data collection skills most commonly utilized to measure patient progress relative to the performance of the procedural interventions are provided. Given the diversity and complexity of the clinical environment, it must be emphasized that ***the associated data collection skills provided are not meant to be an exhaustive list.***
- Drop down boxes provide the following options for documenting the student's exposure to the listed skills:
  - Student performed skill
  - Student observed skill
  - Skill not available at this setting
- Documentation of skill competence should be summarized using the rating scale and in the mid-experience and final comment sections.

Essential Skills

- The essential skills (denoted with bullets in shaded boxes) for each criterion are used to guide the evaluation of students' competence relative to the performance criteria.
- Given the diversity and complexity of the clinical environment, it must be emphasized that ***the essential skills provided are not meant to be an exhaustive list.***
- There may be additional or alternative skills relevant and critical to a given clinical setting and all listed essential skills need not be present to rate student performance at the various levels.
- Essential skills are not listed in order of priority, but most are presented in logical order.

Mid-experience and Final Comments

- The clinical instructor* must provide descriptive comments for all performance criteria.
- For each performance criterion, space is provided for written comments for mid-

experience and final ratings.

- Each of the five performance dimensions (supervision/guidance*, quality*, complexity*, consistency*, and efficiency*) are common to all types and levels of performance and should be addressed in providing written comments. The performance dimensions appear above the comment boxes on each page for quick reference.

Performance Dimensions

Supervision/guidance* refers to the level and extent of assistance required by the student to achieve entry-level performance. As a student progresses through clinical education experiences*, the degree of supervision/guidance needed is expected to progress from 100% supervision to being capable of independent performance with customary direction and supervision by the physical therapist and may vary with the complexity of the patient or environment.

Quality* refers to the degree of knowledge and skill proficiency demonstrated. As a student progresses through clinical education experiences, quality should range from demonstration of limited skill to a skilled or highly skilled performance of an intervention.

Complexity* refers to the number of elements that must be considered relative to the patient*, task, and/or environment. As a student progresses through clinical education experiences, the level of complexity of tasks, patient care, and the environment should increase, with fewer elements being controlled by the CI.

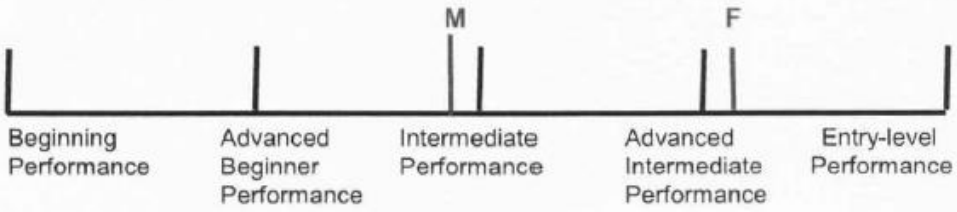
Consistency* refers to the frequency of occurrences of desired behaviors related to the performance criterion. As a student progresses through clinical education experiences, consistency of quality performance is expected to progress from infrequently to routinely.

Efficiency* refers to the ability to perform in a cost-effective and timely manner. As the student progresses through clinical education experiences, efficiency should progress from a high expenditure of time and effort to economical and timely performance.

Rating Student Performance

- Each performance criterion is rated relative to entry-level work as a physical therapist assistant.
- The rating scale consists of a horizontal line with 5 vertical lines that serve as defined anchors and identify the borders of four intervals.
- Rating marks may be placed on the horizontal line, including on the 5 anchor lines or anywhere within the four intervals.
- The same rating scale is used for mid-experience evaluations and final evaluations.
- Place one vertical line on the rating scale at the appropriate point indicating the mid-experience evaluation rating and label it with an "**M**".
- Place one vertical line on the rating scale at the appropriate point indicating the final evaluation rating and label it with an "**F**".
- Placing a rating mark on an anchor line indicates the student's performance matches the corresponding definition.
- Placing a rating mark in an interval indicates that the student's performance is somewhere between the anchor definitions for that interval.

- For completed examples of how to mark the rating scale, refer to *Appendix C: Examples*.



Anchor Definitions

Beginning performance*:

- A student who 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*:

- A student who 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 (eg, medical record review), clinical problem solving, interventions (eg, monitoring therapeutic exercise), and related data collection (eg, 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*:

- A student who 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*:

- A student who 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 with direction and supervision from the physical therapist.

Entry-level performance*:

- A student who is **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 direction and supervision from the physical therapist.

Significant Concerns Box

- Checking this box (☐) indicates that the student's performance on this criterion is unacceptable for this clinical experience.
- When the Significant Concerns Box is checked, written comments to substantiate the concern, additional documentation such as a critical incident form and learning contract are required with a phone call (☎) placed to the ACCE/DCE.
- The significant concerns box provides an early warning system to identify student performance problems thereby enabling the CI, student, and ACCE/DCE to determine a mechanism for remediation, if appropriate.
- The CI **should not** wait until the mid-experience or final evaluation* to contact the ACCE/DCE regarding student performance.

With Distinction Box

- Checking this box (☐) indicates that the student's performance on this criterion is **beyond that expected of entry-level performance**. The marking on the rating scale must indicate entry-level performance.
- The student may have additional degrees or experiences that contribute to the advanced performance of the specific criterion.
- The rationale for checking this box **must** be provided in the mid-experience or final comment section.

Summative Comments

- Summative comments should be used to provide a global perspective of the student's performance across all 14 criteria at mid-experience and final evaluations.
- The summative comments, located after the last performance criterion on pages 34 and 35, provide a section for the rater to comment on the overall strengths, areas requiring further development, other general comments, and any specific recommendations with respect to the learner's needs, interests, planning, or performance.
- Comments should be based on the student's performance relative to stated objectives* for the clinical experience.

STUDENT INFORMATION (Student to Complete)

Student's Name:_____

Date of Clinical Experience:_____ Total Number of Days Absent ____

Student's E-mail:_____ Number ___ of ___ full-time clinical experiences

Check Off Setting Type(s) for Clinical Experience(s)/Rotation(s) Completed:

_____Acute Care/Inpatient
_____Ambulatory Care/Outpatient
_____ECF/Nursing Home/SNF
_____Federal/State/County Health
_____Industrial/Occupational Health
_____Private Practice
_____Rehab/Sub-Acute Rehab
_____School/Pre-school
_____Wellness/Prevention/Fitness
_____Other; specify _____

ACADEMIC PROGRAM INFORMATION (Program to Complete)

Name of Academic Institution: _____

ACCE/DCE's Name: _____

Address:_____

_____
(City) (State/Province) (Zip)

Phone: _____ext._____Fax: _____

ACCE/DCE's E-mail: _____Website:_____

CLINICAL EDUCATION SITE INFORMATION (Clinical Site to Complete)

Name of Clinical Site: _____

Address: _____
(Department) (Street)

_____
(City) (State/Province) (Zip)

Phone: _____ext._____Fax: _____

E-mail: _____Website:_____

Clinical Instructor's* Name: _____Credentialed CI? Y N

Clinical Instructor's Name: _____Credentialed CI? Y N

Center Coordinator of Clinical Education's Name: _____

Check Off Setting Type:

_____Acute Care/Inpatient
_____Ambulatory Care/Outpatient
_____ECF/Nursing Home/SNF
_____Federal/State/County Health
_____Industrial/Occupational Health
_____Private Practice
_____Rehab/Sub-Acute Rehab
_____School/Pre-school
_____Wellness/Prevention/Fitness
_____Other; specify _____

SAFETY

1. Performs in a safe manner that minimizes the risk to patient, self, and others.

ESSENTIAL SKILLS

- Ensures the safety of patient, self, and others throughout the clinical interaction (eg, universal precautions, responding and reporting emergency situations).
- Uses acceptable techniques for safe handling of patients (eg, body mechanics*, guarding, level of assistance).
- Establishes and maintains safe working environment (eg, awareness of all indwelling lines and catheters, other medical equipment, physical therapy equipment and assistive devices*; maintaining hazard free work space).
- Requests assistance when necessary (eg, requests assistance from clinical instructor, utilizes and monitors support personnel).
- Demonstrates knowledge of facility safety policies and procedures.
- Recognizes physiological and psychological changes in patients and
  a. adjusts interventions accordingly within the plan of care or
  b. withholds interventions and consults the clinical instructor and/or supervising physical therapist.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance*, quality*, complexity*, consistency*, and efficiency*.)

(All comment boxes will expand as text is added.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:

Beginning Performance*	Advanced Beginner Performance*	Intermediate Performance*	Advanced Intermediate Performance*	Entry-level Performance*

Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

CLINICAL BEHAVIORS

2. Demonstrates expected clinical behaviors in a professional manner in all situations.

ESSENTIAL SKILLS

- Demonstrates initiative (eg, arrives well prepared, offers assistance, seeks learning opportunities).
- Is punctual and dependable.
- Wears attire consistent with expectations of the work setting and PTA Program.
- Demonstrates integrity* in all interactions.
- Exhibits caring*, compassion*, and empathy* in providing services to patients.
- Maintains productive working relationships with clinical instructor, supervising physical therapist, patients, families, team members, and others.
- Demonstrates behaviors that contribute to a positive work environment.
- Accepts feedback without defensiveness.
- Manages conflict in constructive ways.
- Maintains patient privacy and modesty.
- Values the dignity of patients as individuals.
- Seeks feedback from clinical instructor related to clinical performance.
- Provides effective feedback to CI related to clinical/teaching mentoring.
- Responds to unexpected changes in the patient's schedule and facility's requirements.
- Promotes the profession of physical therapy.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:

Beginning Performance	Advanced Beginner Performance	Intermediate Performance	Advanced Intermediate Performance	Entry-level Performance

Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

ACCOUNTABILITY*

3. Performs in a manner consistent with established legal standards, standards of the profession, and ethical guidelines.

ESSENTIAL SKILLS

- Places patient's needs above self-interests.
- Identifies, acknowledges, and accepts responsibility for actions and reports errors.
- Takes steps to remedy errors in a timely manner.
- Abides by policies and procedures of the facility (eg, OSHA, HIPAA).
- Maintains patient confidentiality.
- Adheres to legal standards including all federal, state/province, and institutional regulations related to patient care and fiscal management*.
- Identifies ethical or legal concerns and initiates action to address the concerns.
- Adheres to ethical standards (eg, *Guide for Conduct of the Physical Therapist Assistant*, *Standards of Ethical Conduct for the Physical Therapist Assistant*).
- Strives to exceed the minimum performance and behavioral requirements.
- Submits accurate billing charges on time.
- Adheres to reimbursement guidelines established by regulatory agencies, payers, and the facility.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:

Beginning Performance	Advanced Beginner Performance	Intermediate Performance	Advanced Intermediate Performance	Entry-level Performance

Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

CULTURAL COMPETENCE*

4. Adapts delivery of physical therapy services with consideration for patients' differences, values, preferences, and needs.

ESSENTIAL SKILLS

- Incorporates an understanding of the implications of individual and cultural differences and adapts behavior accordingly in all aspects of physical therapy services.
- Communicates effectively and with sensitivity, especially when there are language barriers, by considering differences in race/ethnicity, religion, gender, age, national origin, sexual orientation, and disability or health status.
- Provides care in a nonjudgmental manner when the patients' beliefs and values conflict with the individual's belief system.
- Demonstrates an understanding of the socio-cultural, psychological, and economic influences on patients and responds accordingly.
- Is aware of own social and cultural biases and does not allow biases to negatively impact patient care.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:

Beginning Performance	Advanced Beginner Performance	Intermediate Performance	Advanced Intermediate Performance	Entry-level Performance

Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments above.

With Distinction ☐

COMMUNICATION*

5. Communicates in ways that are congruent with situational needs.

ESSENTIAL SKILLS

- Communicates with clinical instructor and supervising physical therapist to:
  - review physical therapist examination/evaluation and plan of care.
  - ask questions to clarify selected interventions.
  - report instances when patient's current condition does not meet the safety parameters established by the physical therapist (eg, vital signs, level of awareness, red flags).
  - report instances during interventions when patient safety/comfort cannot be assured.
  - report instances when comparison of data indicates that the patient is not demonstrating progress toward expected goals established by the physical therapist in response to selected interventions.
  - report when data comparison indicates that the patient response to interventions have met the expectations established by the physical therapist.
  - report results of patient intervention and associated data collection.

a. Communicates verbally, nonverbally, and in writing in an effective, respectful, and timely manner.
b. Listens actively and attentively to understand what is being communicated by others.
c. Interprets and responds appropriately to the nonverbal communication of others.
d. Adjusts style of communication based on target audience (eg, age appropriateness, general public, professional staff).
e. Communicates with the patient using language the patient can understand (eg, translator, sign language, level of education*, cognitive* impairment*).
f. Initiates communication in difficult situations to promote resolution (eg, conflict with CI, unsatisfied patients, caregivers*, and/or family).
g. Selects the most appropriate person(s) with whom to communicate (eg, clinical instructor, physical therapist, nursing staff, social worker).
h. Self evaluates effectiveness of communication and modifies communication accordingly.
i. Seeks and responds to feedback from multiple sources in providing patient care.
j. Instructs members of the health care team, using established techniques, programs, and instructional materials, commensurate with the learning characteristics of the audience.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:

Beginning Performance	Advanced Beginner Performance	Intermediate Performance	Advanced Intermediate Performance	Entry-level Performance

Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

SELF-ASSESSMENT AND LIFELONG LEARNING

6. Participates in self-assessment and develops plans to improve knowledge, skills, and behaviors.

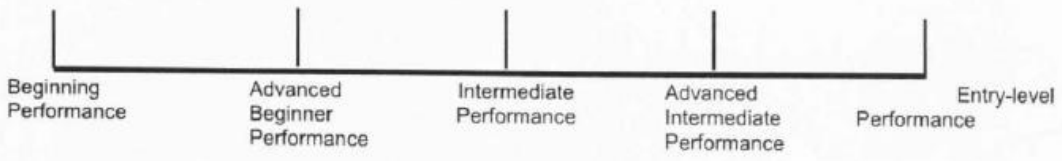
ESSENTIAL SKILLS

- Identifies strengths and limitations in clinical performance, including knowledge, skills, and behaviors.
- Seeks guidance as necessary to address limitations.
- Uses self-assessment skills, including soliciting feedback from others and reflection to improve clinical knowledge, skills and behaviors.
- Acknowledges and accepts responsibility for and consequences of own actions.
- Establishes realistic short and long-term goals in a plan for improving clinical skills and behaviors.
- Seeks out additional learning experiences to enhance clinical performance.
- Accepts responsibility for continuous learning.
- Discusses professional issues related to physical therapy practice.
- Provides and receives feedback from team members regarding performance, behaviors, and goals.
- Seeks current knowledge and theory (in-service education, case presentation, journal club, projects) to achieve optimal patient care.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:



Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

CLINICAL PROBLEM SOLVING

7. Demonstrates clinical problem solving.

ESSENTIAL SKILLS

- Presents sound rationale for clinical problem solving, including review of data collected and ethical and legal arguments.
- Seeks clarification of plan of care and selected interventions from clinical instructor and/or supervising physical therapist.
- Collects and compares data from multiple sources (eg, chart review, patient, caregivers, team members, observation) to determine patient's readiness before initiating interventions.
- Demonstrates sound clinical decisions within the plan of care to assess and maximize patient safety and comfort while performing selected interventions.
- Demonstrates sound clinical decisions within the plan of care to assess and maximize intervention outcomes, including patient progression and/or intervention modifications.
- Demonstrates the ability to determine when the clinical instructor and/or supervising physical therapist needs to be notified of changes in patient status, changes or lack of change in intervention outcomes, and completion of intervention expectations (ie, goals have been met).
- Demonstrates the ability to perform appropriately during an emergency situation to include notification of appropriate staff.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:

Beginning Performance	Advanced Beginner Performance	Intermediate Performance	Advanced Intermediate Performance	Entry-level Performance

Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

INTERVENTIONS: THERAPEUTIC EXERCISE

8. Performs selected therapeutic exercises* in a competent manner.

Therapeutic Exercises Including:	
▼	Aerobic capacity/endurance conditioning/reconditioning*
▼	Balance, coordination, and agility training
▼	Body mechanics and postural stabilization
▼	Flexibility exercises
▼	Gait and locomotion training
▼	Neuromotor development training
▼	Relaxation
▼	Strength, power, and endurance training

Associated Data Collection Skills Including:	
▼	Anthropometric characteristics*
▼	Arousal, attention, and cognition
▼	Assistive & Adaptive devices*
▼	Body mechanics*
▼	Environmental, self-care, and home issues
▼	Gait, locomotion, and balance
▼	Muscle function
▼	Neuromotor function
▼	Pain
▼	Posture
▼	Range of motion
▼	Sensory response
▼	Vital signs

▼ ***Indicates that a drop down box will be available with the following options:***
Student performed skill
Student observed skill
Skill not available at this setting

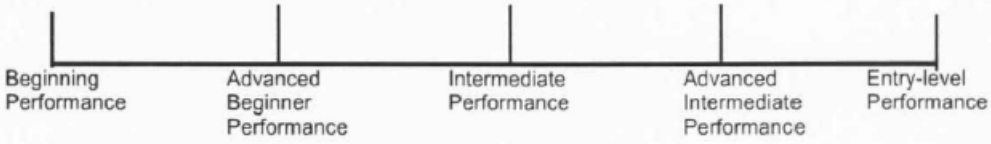
ESSENTIAL SKILLS

- Reviews plan of care* and collects data on patient's current condition to assure readiness for therapeutic exercise.
- Applies knowledge of contraindications and precautions for selected intervention.
- Performs selected therapeutic exercises safely, effectively, efficiently, and in a coordinated and technically competent* manner consistent with the plan of care established by the physical therapist.
- Modifies therapeutic exercises within the plan of care to maximize patient safety and comfort.
- Modifies therapeutic exercises within the plan of care to progress the patient.
- Instructs patient, family members and other caregivers regarding strategies to minimize the risk of injury and to enhance function*, including promotion of health, wellness, and fitness* as described in the plan of care*.
- Identifies barriers to learning (eg, literacy, language, cognition) and adjusts instructional techniques to meet patient learning style (eg, demonstration, verbal, written).
- Collects relevant data accurately and proficiently to measure and report patient response to selected therapeutic exercises.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:



Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

INTERVENTIONS: THERAPEUTIC TECHNIQUES

9. Applies selected manual therapy*, airway clearance*, and integumentary repair and protection techniques in a competent manner.

Manual Therapy Techniques Including:	
▼	Massage – connective tissue and therapeutic
▼	Passive range of motion
Breathing Strategies/Oxygenation Including:	
▼	Breathing techniques (eg, pursed lip breathing, paced breathing)
▼	Re-positioning to alter work of breathing and maximize ventilation and perfusion
▼	Administration of prescribed oxygen
Integumentary Repair/Protection Including:	
▼	Wound cleansing and dressing
▼	Repositioning
▼	Patient education
▼	Edema management

Associated Data Collection Techniques Including:	
▼	Anthropometric characteristics
▼	Integumentary integrity
▼	Pain
▼	Range of motion
▼	Sensory Response
▼	Vital signs

▼ ***Indicates that a drop down box will be available with the following options:***
Student performed skill
Student observed skill
Skill not available at this setting

ESSENTIAL SKILLS

- Reviews plan of care and collects data on patient's current condition to assure readiness for therapeutic techniques.
- Applies knowledge of contraindications and precautions for selected intervention.
- Performs selected therapeutic techniques safely, effectively, efficiently, and in a coordinated and technically competent manner consistent with the plan of care established by the physical therapist.
- Modifies therapeutic techniques within the plan of care to maximize patient safety and comfort.
- Modifies therapeutic techniques within the plan of care to progress patient.
- Instructs patient, family members and other caregivers regarding strategies to minimize the risk of injury and to enhance function, including promotion of health, wellness, and fitness as described in the plan of care.
- Identifies barriers to learning (eg, literacy, language, cognition) and adjusts instructional techniques to meet patient learning style (eg, demonstration, verbal, written).
- Collects relevant data accurately and proficiently to measure and report patient response to selected therapeutic techniques.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:

Beginning Performance | Advanced Beginner Performance | Intermediate Performance | Advanced Intermediate Performance | Entry-level Performance

Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

INTERVENTIONS: PHYSICAL AGENTS AND MECHANICAL MODALITIES

10. Applies selected physical agents* and mechanical modalities in a competent manner.

Physical Agents Including:	
▼	Cryotherapy (eg, cold pack, ice massage, vapocoolant spray)
▼	Thermotherapy (eg, dry heat, hot packs, paraffin baths, hydrotherapy)
▼	Ultrasound
Mechanical Modalities Including:	
▼	Mechanical compression, compression bandaging and garments
▼	Mechanical motion devices (eg, CPM)
▼	Intermittent, positional, and sustained traction devices

Associated Data Collection Techniques Including:	
▼	Anthropometric characteristics
▼	Arousal, attention, and cognition
▼	Integumentary integrity
▼	Pain
▼	Range of motion
▼	Sensory Response
▼	Vital signs

▼ ***Indicates that a drop down box will be available with the following options:***
Student performed skill
Student observed skill
Skill not available at this setting

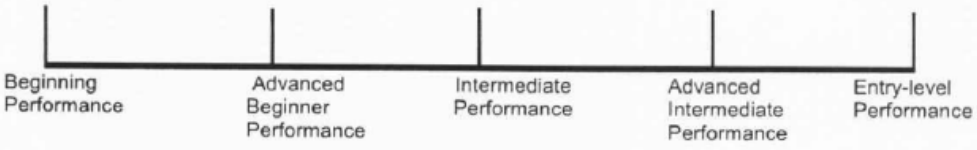
ESSENTIAL SKILLS

- Reviews plan of care and collects data on patient's current condition to assure readiness for physical agents and mechanical modalities.
- Applies knowledge of contraindications and precautions for selected intervention.
- Performs selected physical agents and mechanical modalities safely, effectively, efficiently, and in a coordinated and technically competent manner consistent with the plan of care established by the physical therapist.
- Adjusts physical agents and mechanical modalities within the plan of care to maximize patient safety and comfort.
- Modifies physical agents and mechanical modalities within the plan of care to maximize patient response to the interventions.
- Progresses physical agents and mechanical modalities as described in the plan of care.
- Instructs patient, family members and other caregivers regarding strategies to minimize the risk of injury and to enhance function, including promotion of health, wellness, and fitness as described in the plan of care.
- Identifies barriers to learning (eg, literacy, language, cognition) and adjusts instructional techniques to meet patient learning style (eg, demonstration, verbal, written).
- Collects relevant data accurately and proficiently to measure and report patient response to selected physical agents and mechanical modalities.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:



Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

INTERVENTIONS: ELECTROTHERAPEUTIC MODALITIES

11. Applies selected electrotherapeutic modalities in a competent manner.

Electrotherapeutic Modalities Including:	
▼	Biofeedback
▼	Iontophoresis
▼	Electrical stimulation for muscle strengthening
▼	Electrical stimulation for tissue repair
▼	Electrical stimulation for pain management

Associated Data Collection Techniques Including:	
▼	Anthropometric characteristics
▼	Arousal, attention, and cognition
▼	Integumentary integrity
▼	Muscle function
▼	Neuromotor function
▼	Pain
▼	Sensory response

▼ ***Indicates that a drop down box will be available with the following options:***
Student performed skill
Student observed skill
Skill not available at this setting

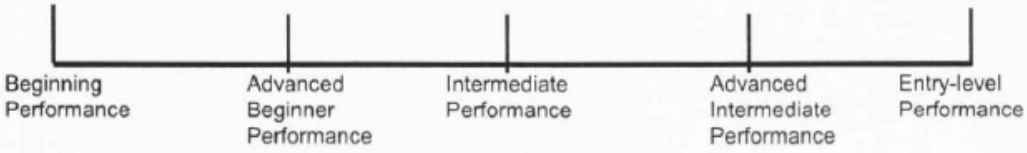
ESSENTIAL SKILLS

- Reviews plan of care and collects data on patient's current condition to assure readiness for electrotherapeutic modalities.
- Applies knowledge of contraindications and precautions for selected intervention.
- Performs electrotherapeutic modalities safely, effectively, efficiently, and in a coordinated and technically competent manner consistent with the plan of care established by the physical therapist.
- Adjusts electrotherapeutic modalities within the plan of care to maximize patient safety and comfort.
- Modifies electrotherapeutic modalities within the plan of care to maximize patient response to the interventions.
- Progresses electrotherapeutic modalities as described in the plan of care.
- Instructs patient, family members and other caregivers regarding strategies to minimize the risk of injury and to enhance function, including promotion of health, wellness, and fitness as described in the plan of care.
- Identifies barriers to learning (eg, literacy, language, cognition) and adjusts instructional techniques to meet patient learning style (eg, demonstration, verbal, written).
- Collects relevant data accurately and proficiently to measure and report patient response to selected electrotherapeutic modalities.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:



Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.
Mid-experience ☐ ☎ Final ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.
With Distinction ☐

INTERVENTIONS:
FUNCTIONAL TRAINING AND APPLICATION OF DEVICES AND EQUIPMENT

12. Performs functional training* in self-care and home management and application and adjustment of devices and equipment in a competent manner.

	Functional Training Including:
▼	ADL* training – specifically:
▼	Transfers
▼	Bed mobility
▼	Device and equipment use and training
▼	Injury prevention or reduction
	Application/Adjustment of Devices/Equipment Including:
▼	Adaptive devices*
	Assistive devices* including:
▼	Cane
▼	Crutches
▼	Walkers
▼	Wheelchairs
▼	Long handled reachers
▼	Orthotic devices* (eg, braces, splints)
▼	Prosthetic devices – upper and lower extremity
▼	Protective devices* (eg, braces)
▼	Supportive devices* (eg, compression garments, elastic wraps, soft neck collars, slings, supplemental oxygen equipment)

	Associated Data Collection Techniques Including:
▼	Anthropometric characteristics
▼	Arousal, attention, and cognition
▼	Assistive and adaptive devices
▼	Body mechanics
▼	Environmental barriers, self-care, and home issues
▼	Gait, locomotion, and balance
▼	Integumentary integrity
▼	Neuromotor function
▼	Pain
▼	Posture
▼	Sensory Response

▼ ***Indicates that a drop down box will be available with the following options:***
Student performed skill
Student observed skill
Skill not available at this setting

ESSENTIAL SKILLS

- Reviews plan of care and collects data on patient's current condition to assure readiness for functional training and application of devices and equipment.
- Applies knowledge of contraindications and precautions for selected intervention.
- Performs functional training and application of devices and equipment safely, effectively, efficiently, and in a coordinated and technically competent manner consistent with the plan of care established by the physical therapist.
- Adjusts functional training and application of devices and equipment within the plan of care to maximize patient safety and comfort.
- Modifies functional training and application of devices and equipment within the plan of care to maximize patient response to the interventions.
- Progresses functional training and application of devices and equipment as described in the plan of care.
- Instructs patient, family members and other caregivers regarding strategies to minimize the risk of injury and to enhance function, including promotion of health, wellness, and fitness as described in the plan of care.
- Identifies barriers to learning (eg, literacy, language, cognition) and adjusts instructional techniques to meet patient learning style (eg, demonstration, verbal, written).
- Collects relevant data accurately and proficiently to measure and report patient response to functional training and application of devices and equipment.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:

Beginning Performance	Advanced Beginner Performance	Intermediate Performance	Advanced Intermediate Performance	Entry-level Performance

Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments above.

With Distinction ☐

DOCUMENTATION

13. Produces quality documentation* in a timely manner to support the delivery of physical therapy services.

ESSENTIAL SKILLS

- Selects relevant information to document the delivery of physical therapy care.
- Documents all aspects of physical therapy care provided, including interventions, patient response to interventions (eg, vital signs, pain, observation), selected data collection measurements, and communication with family and others involved in the delivery of care.
- Produces documentation that is accurate, concise, timely, legible, grammatically and technically correct (eg, abbreviations, terminology, etc).
- Produces documentation (eg, electronic, dictation, chart) consistent with guidelines, format, and requirements of the facility, regulatory agencies, and third-party payers.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:

Beginning Performance	Advanced Beginner Performance	Intermediate Performance	Advanced Intermediate Performance	Entry-level Performance

Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments above.

With Distinction ☐

RESOURCE MANAGEMENT

14. Participates in the efficient delivery of physical therapy services.

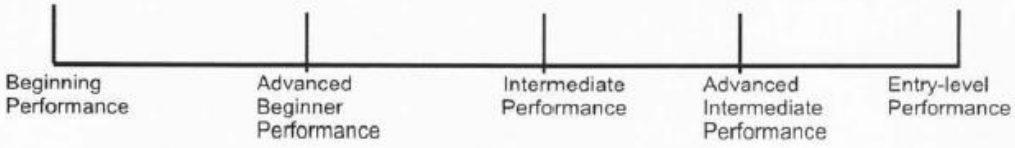
ESSENTIAL SKILLS

- Schedules patients, equipment, and space.
- Coordinates with physical therapist and others to facilitate efficient and effective patient care.
- Sets priorities for the use of resources to maximize patient and facility outcomes.
- Uses time effectively.
- Utilizes the facility's information technology effectively.
- Implements risk-management strategies (eg, prevention of injury, infection control).
- Uses equipment in an efficient and effective manner assuring that the equipment is safe prior to use.
- Utilizes services of the physical therapy aide and other support personnel as allowed by law to increase the efficiency of the operation of the physical therapy services.
- Participates in established quality improvement activities (productivity, length of stay, referral patterns, and reimbursement trends).
- Participates in special events organized in the practice setting related to patients and care delivery as well as health and wellness promotion.

MID-EXPERIENCE COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

FINAL COMMENTS: (Provide comments based on the performance dimensions including supervision/guidance, quality, complexity, consistency, and efficiency.)

Rate this student's clinical performance based on the essential skills and comments above:



Significant Concerns: If performance on this criterion is unacceptable, check the box and call the ACCE/DCE.

Mid-experience ☐ ☎ **Final** ☐

If performance on this criterion is beyond entry-level, check the "With Distinction" box and provide supportive comments.

With Distinction ☐

SUMMATIVE COMMENTS

Given this student's level of academic and clinical preparation and the objectives for this clinical experience, identify strengths and areas for further development. If this is the student's final clinical experience, comment on the student's readiness to work as a physical therapist assistant.

AREAS OF STRENGTH

Mid-experience:

Final:

AREAS FOR FURTHER DEVELOPMENT

Mid-experience:

Final:

RECOMMENDATIONS

Mid-experience:

Final:

OTHER COMMENTS

Mid-experience:

Final:

EVALUATION SIGNATURES

MID-EXPERIENCE EVALUATION

For the Student
I, the student, have read and understood the disclaimer (page 4) and directions (pages 5-13) for the PTA CPI. I have completed the on-line training (website) prior to using this instrument and completed the PTA CPI mid-experience self-assessment according to the training and directions. I have also read, reviewed, and discussed my completed performance evaluation with the clinical instructor(s) who evaluated my performance.

Signature of Student _____ Date _____

Name of Academic Institution _____

For the Evaluator(s)
I/We, the evaluator(s), have read and understood the disclaimer (page 4) and directions (pages 5-13) for the PTA CPI. I/We have completed the on-line training (website) prior to using this instrument. I/We have completed this instrument, as the evaluator(s) according to the training and directions for the PTA CPI. I/We have prepared, reviewed, and discussed the mid-experience completed PTA CPI with the student with respect to his/her clinical performance.

Clinical Instructor Name (1) (*Print*) _____ Position/Title _____

Signature of Clinical Instructor (1) _____ Date _____

Clinical Instructor Name (2) (*Print*) _____ Position/Title _____

Signature of Clinical Instructor (2) _____ Date _____

Center Coordinator of Clinical Education (CCCE)* Name _____ Position/Title _____

Signature of CCCE _____ Date _____

FINAL EVALUATION

For the Student

I, the student, have read and understood the disclaimer (page 4) and directions (pages 5-13) for the PTA CPI. I have completed the on-line training (website) prior to using this instrument and completed the PTA CPI final self-assessment according to the training and directions. I have also read, reviewed, and discussed my completed performance evaluation with the clinical instructor(s) who evaluated my performance.

Signature of Student _____ Date _____

Name of Academic Institution _____

For the Evaluator(s)

I/We, the evaluator(s), have read and understood the disclaimer (page 4) and directions (pages 5-13) for the PTA CPI. I/We have completed the on-line training (website) prior to using this instrument. I/We have completed this instrument, as the evaluator(s) according to the training and directions for the PTA CPI. I/We have prepared, reviewed, and discussed the final completed PTA CPI with the student with respect to his/her clinical performance.

Clinical Instructor Name (1) (*Print*) _____ Position/Title _____

Signature of Clinical Instructor (1) _____ Date _____

Clinical Instructor Name (2) (*Print*) _____ Position/Title _____

Signature of Clinical Instructor (2) _____ Date _____

Center Coordinator of Clinical Education Name (*Print*) _____ Position/Title _____

Signature of CCCE _____ Date _____

APPENDIX I

Louisiana College
Physical Therapist Assistant Program
Inservice Request Form

Students must complete this form and fax back to Ms. Reeves (487-7041) requesting approval of in-service topic. Students must receive approval of your topic before the end of the second week of the clinical rotation.

Student Name_____

Date_____

Clinical Instructor Name: _____

Facility Name: _____

Clinic Phone Number:_____**Type of setting:** _____

In-service Topic: _____

Expected *Date & Time* of In-service: _____

Comments:

_____

_____

_____

_____

_____

_____

_____

_____

_____

APPENDIX J

Louisiana College
Physical Therapist Assistant Program
Inservice Rubric

GRADING FORM FOR CLINICAL INSERVICE

NAME:

DATE OF INSERVICE:

TOPIC/TITLE OF INSERVICE:

NAME OF CLINICAL INSTRUCTOR:

NUMBER OF PEOPLE IN ATTENDANCE:

DISCIPLINES OF THOSE IN ATTENDANCE:

Criteria	0	1	2	3	Points
NONVERBAL SKILLS					
Eye Contact	Does not attempt to look at audience at all, reads notes the entire time	Only focuses attention to one particular part of the class, does not scan audience	Occasionally looks at someone or some groups during presentation	Constantly looks at someone or some groups at all times	
Posture	Sits during presentation or slumps		Occasionally slumps during presentation	Stands up straight with both feet on the ground.	
VOCAL SKILLS					
Vocalized Pauses (uh, well uh, um)	10 or more are noticed	6-9 are noticed	1-5 are noticed	No vocalized pauses noticed	
Delivery	Student mumbles,	Student incorrectly	Student's voice is clear. Student	Student used a clear voice and correct,	

	incorrectly pronounces terms, and speaks too quietly for students in the back of class to hear.	pronounces terms. Audience members have difficulty hearing presentation.	pronounces most words correctly. *Student reads from handout majority of time.*	precise pronunciation of terms.	
CONTENT					
Topic Announced	Audience has no idea what the report is on		Vaguely tells audience what report is about	Clearly explains what the report is covering	
Time frame		Presentation is less than 15 minutes		Presentation falls within required time frame (15 min or >)	
Visual Aid	Poor, distracts audience and is hard to read	Adds nothing to presentation	Thoughts articulated clearly, but not engaging	Visual aid enhances presentation, all thoughts articulated and keeps interest	
Content Knowledge	Student does not have grasp of information; student cannot answer questions about subject.	Student is uncomfortable with information and is able to answer only rudimentary questions.	Student is at ease with content, but fails to elaborate.	Student demonstrates full knowledge (more than required) with explanations and elaboration.	
				TOTAL --→	

Comments:

Signature of Clinical Instructor: _____

APPENDIX K

Louisiana College
Physical Therapist Assistant Program
Student competency and safety survey

Louisiana College
Physical Therapist Assistant Program
1149 College Drive Box 531
Pineville, Louisiana 71359
Fax Number 318-487-7041

Dear Clinical Instructor:

The Physical Therapist Assistant program at Louisiana College is collecting data to identify the strengths and weaknesses of our curriculum. This survey will be utilized in the assessment of the effectiveness of our mechanisms used to determine that students are ***competent and safe*** to progress through the curriculum and for Clinical Instructors to rate the strengths and weaknesses of the curriculum based on student performance in the clinic. Please complete the following assessment of our student's ability to perform the following data collection and intervention techniques competently and safely at the end of the clinical experience. In order to grade the student correctly each task must be observed at least five times; if the task was not observed at least five times the grade should reflect "n/a". Also consider the number of semesters the student has been in the program as well as the number of clinical rotations the student has performed. Please complete the form and either fax (318-487-7041) or mail to the college. Thanks again for your help in educating our students.

The student demonstrated the ability to perform the data collection/intervention technique competently and safely at the beginning of Clinical Practicum I:

	Strongly Disagree				***Strongly Agree***	
Measures standard vital signs	1	2	3	4	5	n/a
Recognizes and monitors responses to positional changes and activities	1	2	3	4	5	n/a
Observes and monitors thoracoabdominal movements and breathing patterns with activity	1	2	3	4	5	n/a
Measures height, weight, length, and girth	1	2	3	4	5	n/a
Recognize changes in the direction and magnitude of patient's state of arousal, mentation, and cognition	1	2	3	4	5	n/a
Describe the safety, status and progression of patients during gait	1	2	3	4	5	n/a
Abide by weight bearing precautions	1	2	3	4	5	n/a

Select appropriate assistive device based on Assessment	1	2	3	4	5	n/a
Recognizes absent or altered sensation	1	2	3	4	5	n/a
Recognizes normal and abnormal integumentary changes	1	2	3	4	5	n/a
Recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensations, or that can produce associated skin trauma	1	2	3	4	5	n/a
Recognizes viable versus nonviable tissue	1	2	3	4	5	n/a
Recognizes normal and abnormal joint movement	1	2	3	4	5	n/a
Assess muscle strength via manual muscle testing	1	2	3	4	5	n/a
Observe presence or absence of muscle mass	1	2	3	4	5	n/a
Recognize normal/abnormal muscle length	1	2	3	4	5	n/a
Recognize change in muscle tone.	1	2	3	4	5	n/a
Administers standardized questionnaires, graphs, behavioral scales, or visual analog scales for pain	1	2	3	4	5	n/a
Recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensations	1	2	3	4	5	n/a
Describes resting posture in any position	1	2	3	4	5	n/a
Recognizes alignment of trunk and extremities at rest and during activities	1	2	3	4	5	n/a
Active and passive range of motion (goniometery, flexibility assessment)	1	2	3	4	5	n/a
Functional range of motion	1	2	3	4	5	n/a
Activities of daily living	1	2	3	4	5	n/a
Select appropriate assistive or adaptive devices	1	2	3	4	5	n/a
Body mechanics and posture	1	2	3	4	5	n/a
Developmental activities (orthopaedics)	1	2	3	4	5	n/a
Gait and locomotion training	1	2	3	4	5	n/a
Provide wheelchair management	1	2	3	4	5	n/a
Isolation techniques	1	2	3	4	5	n/a
Sterile techniques	1	2	3	4	5	n/a

Passive range of motion	1	2	3	4	5	n/a
Therapeutic massage	1	2	3	4	5	n/a
Athermal agents	1	2	3	4	5	n/a
Biofeedback	1	2	3	4	5	n/a
Compression therapies	1	2	3	4	5	n/a
Cryotherapy	1	2	3	4	5	n/a
Electrotherapeutic agents	1	2	3	4	5	n/a
Hydrotherapy	1	2	3	4	5	n/a
Superficial and deep thermal agents	1	2	3	4	5	n/a
Traction	1	2	3	4	5	n/a
Aerobic conditioning	1	2	3	4	5	n/a
Balance and coordination training	1	2	3	4	5	n/a
Breathing exercises and coughing techniques	1	2	3	4	5	n/a
Conditioning and reconditioning	1	2	3	4	5	n/a
Posture awareness training	1	2	3	4	5	n/a
Range of motion exercises	1	2	3	4	5	n/a
Stretching exercises	1	2	3	4	5	n/a
Strengthening exercises	1	2	3	4	5	n/a
Application and removal of dressing or agents	1	2	3	4	5	n/a
Identification of precautions for dressing removal	1	2	3	4	5	n/a
Neuromuscular rehabilitation:						
CVA	1	2	3	4	5	n/a
Parkinson's	1	2	3	4	5	n/a
SCI	1	2	3	4	5	n/a
Documentation	1	2	3	4	5	n/a

How would you rate this student overall knowledge base:
_____Above entry level _____At entry level _____Below entry level

Signature_____

Print Name:_____ **Facility Name:** _____

APPENDIX L

Louisiana College
Physical Therapist Assistant Program

STUDENT INFORMATION RELEASE FORM

I,_____, _____
Student Name Student Identification Number

Hereby give my permission to discuss or disclose information from my personal records regarding but not limited to grades/transcripts, attendance, medical information, discipline records in the clinical site in which I am assigned during the technical portion of the Louisiana College PTA program.

These records may be disclosed by the following means:

_____in person_____by fax_____by phone

Release information to:

_____ on_____/_____/_____
Person/relationship Month Day Year

_____
Student signature Date

_____
Witness Date

APPENDIX M

Student Medical Form

Required for Admission to Clinical

Louisiana College Physical Therapist Assistant Program

1. **Hepatitis B series** required (MUST HAVE 2ND INJECTION PRIOR TO THE START OF CLINICALS)
   1st Injection:_____(date and nurse initials)

   2nd Injection:_____(date and nurse initials)

   3rd Injection:_____(date and nurse initials)

   Hepatitis B Titer Test (must provide proof of Hep B series in past, if titer low student must have series again)
   _____(date and nurse initials) RESULTS: _____

2. **Mantoux TB test** (required before start classes first semester)
   a. one step_____(date issued with initials of nurse that injected)

   b. two step_____(date read with initials of reader)

   RESULTS of test:_____(+ or -)

3. **Rubella Titer** Test required:

   _____(date given with initials of nurse) RESULTS: _____

4. **T-dap** (Tetanus Injection within the last 10 years): _____

5. Must have proof of **Physical Examination** before 1st day of classes *(This service is provided free of charge by Louisiana College. Appointments must be made through Health Services and are the responsibility of the student).*
   Date of Physical :_____(***See Health History and Physical Examination Form)***

6. The student must provide proof of **health insurance** as part of the PTA application packet.

7. The student must purchase and provide proof of **malpractice insurance** prior to the start of clinical.

8. The student is required to provide a copy of a current **CPR card** (American Heart Association) with the PTA application packet.

The student is solely responsible for all costs/fees related to obtaining the above requirements

APPENDIX N

Louisiana College
Physical Therapist Assistant Program

Health History and Physical Examination Form
Louisiana College Physical Therapist Assistant Program

INSTRUCTIONS FOR THE STUDENT

1. A health history, physical examination, and specific immunizations are required for all students entering the PTA program. The restrictions for the physical exam are as follows:
   - The physical exam must be completed before the first day of classes.
   - **Students will NOT be allowed to begin clinical experiences without submission of the forms.**
   - Omission of any area of the form will prevent the student from beginning clinical experiences.

2. Official documentation (i.e., copies or written reports from physician) should accompany the immunizations and lab results (Student Medical Form).

3. Screening lab work and immunizations will need to be updated as necessary.

4. The student should be prepared to provide all of the information on the required forms.

5. The student's physician or nurse practitioner should complete the required forms following the physical examination.

6. It is the responsibility of the student to return this completed application to the Division of Allied Health of Louisiana College.

HEALTH HISTORY

TO BE FILLED OUT BY THE STUDENT

Please check on the list below whether or not, you now have, or have had any of the following:			
CONDITION	**NO**	**YES**	**DESCRIBE**
1. Allergy			
2. Asthma			
3. Musculoskeletal Disorders			
4. Cancer			
5. Diabetes			
6. Emotional Problems/Disorders			
7. Neurological Disorder/Seizures			
8. Eye or Vision Problems/Disorders			
9. Hearing Problems/Disorders			
10. Heart Disease/Hypertension			

CONDITION	**NO**	**YES**	**DESCRIBE**
11. Hernias			
12. Kidney Disease			
13. Menstrual Difficulties			
14. Previous Surgeries			
15. Recurrent Headaches			
16. Serious Injuries			
17. Sleep Problems			
18. Tuberculosis			
19. Gastrointestinal Disorders			
20. Hospitalizations			

21. Please list or describe the following that apply to you***: Regular medications, special diets, allergy injections, or other medical treatments***

_____

_____

_____

_____

_____ _____

Student Signature ***Date***

LOUISIANA COLLEGE

Physical Therapist Assistant Program

TO THE PHYSICIAN or NURSE PRACTITIONER

The physical examination outlined below is required for all of our Physical Therapist Assistant students prior to practicing in the clinical area. Your cooperation in completing this form is appreciated.

Name_____

Height_____ **Weight**_____ **B.P.**_____ **Pulse** _____

Vision (Snellen) **R 20/**_____ **Corrected 20/**_____

L 20/_____ **Corrected 20/**_____

Hearing: **Right**_____ **Left**_____ **Test Method**_____

Please examine this student as you would for a routine check-up, considering age, history, and the fact that the student will be working closely with hospitalized patients as well as with families and groups in the community. Indicate any abnormal findings. PLEASE USE THIS FORM.

COMMENTS	**NORMAL**		**ABNORMAL**
HEENT			
Cardiac			
Respiratory			
Breast (optional)			
Abdomen/GI			
GU/Hernia			
Rectal (optional)			
Musculoskeletal			
Neurological			

COMMENTS:

Does this student require any follow-up health supervision? If so, what do you recommend?

_____

_____

_____

_____

At this date, is this student able to proceed into a rigorous Physical Therapist Assistant program?

Yes_____ No____

_____

Signed, MD/NP and Date

APPENDIX O

Student Competency and Safety Skills List 2014-2015

Critical Safety Skills:

A. Introduction of one's self as an intern to the patient
B. Identification of patient by two methods (last name, last four, DOB, wristband)
C. Patient positioning and draping
D. Perform transfers and gait techniques with a gait belt at all times
E. Lock wheelchair/bed; castor wheels forward on wheelchair before transfer
F. Sign all documentation as a student physical therapist assistant

*****Additional safety elements may be identified on individual course syllabi as well as Laboratory Session Checklists, but the critical safety elements listed above are mandatory for all courses.***

General Skills:

- Documentation with SOAP format
- Patient/Family/Caregiver Education
- Standard Precautions and Infection Control (isolation and sterile techniques)
- Body Mechanics
- Interpret PTs plan of care to determine appropriate interventions
- Effective utilization of interim assessment data to determine patient's response to treatment in order to modify, progress, or cease interventions as well as to determine appropriate timing and nature of consultation with supervising PT
- Ensure safety of self and others in the provision of care in all situations

Students must demonstrate competence and safety in the performance of the following skills prior to engaging in <u>Clinical Practicum I (PT 206):</u>

<u>Clinical Kinesiology and Anatomy (PT202)</u>

Assessment:

- Determines postural alignment and position
- Recognizes alignment of trunk and extremities at rest and during activities
- Describes chest wall expansion and excursion
- Describes gait deviations and their effect on gait and locomotion

Intervention:

- Posture awareness training

Physical Therapy Procedures (PT203)

Assessment:

- Measures standard vital signs
- Recognizes and monitors responses to positional changes and activities
- Measures height, weight, length, and girth
- Describe the safety, status and progression of patients during gait
- Abide by weight bearing precautions
- Measure for assistive or adaptive devices and equipment
- Confirms fit of assistive devices and equipment
- Select appropriate assistive device based on assessment
- Recognizes absent or altered sensation
- Observe and describe skin characteristics
- Recognizes normal and abnormal integumentary changes
- Recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensations, or that can produce associated skin trauma
- Recognizes viable versus nonviable tissue
- Administers standardized questionnaires, graphs, behavioral scales, or visual analog scales for pain
- Recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensations
- Wheelchair assessment and fitting/confirmation of fit

Interventions:

- Positioning of patient to prevent interruptions in integumentary integrity.
- Body mechanics training
- Bed mobility and transfer training
- Gait and locomotion training
- Assistive device/equipment training
- Provide wheelchair management/mobility
- Isolation techniques
- Sterile techniques
- Passive range of motion
- Application and removal of dressing or agents
- Identification of precautions for dressing removal
- Provision of patient education related to injury prevention during bed mobility, transfer, and gait/wheelchair mobility and use of devices and equipment
- Adjustment of equipment in the acute care setting
- Provision of patient education related to integumentary protection

PT Interventions for the Orthopedic Client (PT204)

Assessment:

- Observe presence or absence of muscle mass
- Recognizes normal and abnormal joint movement
- Recognize normal/abnormal muscle length
- Functional range of motion
- Assess muscle strength via manual muscle testing
- Active and passive range of motion (goniometery)
- Performance of orthopedic special tests to aid in identification of impairment

Intervention:

- Balance and coordination training
- Postural stabilization activities
- Range of motion exercises
- Stretching exercises
- Strength, power, and endurance training for head, neck, limb, and trunk.
    - Active assistive, active, and resistive exercises including concentric, dynamic/isotonic, eccentric, isometric and low-level plyometrics
- Standardized, programmatic, complementary exercise approaches
- Administration of prescribed oxygen during interventions
- Mechanical motion devices
- Peripheral joint mobilizations (Grade I & II)

Principles of Physical Agents and Massage (PT205)

Assessment: None

Intervention:

- Therapeutic massage
- Soft tissue mobilization
- Athermal agents
- Biofeedback
- Edema management including but not limited to compression therapies
- Cryotherapy
- Electrotherapeutic agents
    - Electrotherapeutic delivery of medications
    - Neuromuscular electrical stimulation
    - Electrical stimulation for tissue repair
    - Functional electrical stimulation
    - High-voltage pulsed current

- Transcutaneous electrical nerve stimulation

- Hydrotherapy
- Thermotherapy
- Ultrasound
- Traction

Students must demonstrate competence and safety in the performance of the following skills prior to engaging in <u>Clinical Practicum II (PT210) and Clinical Practicum (PT211):</u>

<u>Clinical Neurorehabilitation and Motor Control (PT207)</u>

Assessment:

- Recognize changes in the direction and magnitude of patient's state of arousal, mentation, and cognition
- Recognize and describe change in muscle tone
- Identify the presence or absence of developmental reflexes, associated reactions, or abnormal tone
- Reflex Testing/Sensory testing
- Activities of daily living
- Recognizes gross motor milestones
- Recognizes fine motor milestones
- Recognizes righting and equilibrium reactions
- Assess functional muscle strength
- Grade balance and coordination (general)
- Perform standardized balance testing

Intervention:

- Developmental activities training
- Movement pattern training
- Neuromuscular education or reeducation

<u>PTA Seminar (PT208)</u>

Assessment:

- Ensure alignment and fit of orthotic devices, braces, and/or splints
- Identifies the individual's and caregiver's ability to care for the device
- Recognizes changes in skin condition while using devices and equipment
- Recognizes safety factors while using the device
- Inspects the physical environment and measures physical space
- Recognizes safety and barriers in home, community and work environments

- Administers standardized questionnaires to patients and others

Intervention:

- Adaptive device training
- Delivery of patient education related to awareness training during self-care and home management
- Prosthetic and Orthotic training (including braces, protective and supportive devices)

Pathology of Cardiovascular and Multisystem Involvement (PT209)

Assessment:

- Observes and monitors thoracoabdominal movements and breathing patterns with activity
- Recognizes cyanosis
- Recognizes activities that aggravate or relieve edema, pain, dyspnea, or other symptoms
- Describes cough and sputum characteristics

Intervention:

- Aerobic Conditioning/Endurance Conditioning or Reconditioning
- Movement efficiency and energy conservation training
- Walking/wheelchair propulsion programs
- Breathing strategies/techniques
- Relaxation strategies
- Repositioning of patient tom improve respiratory function
- Breathing Exercises and coughing techniques

APPENDIX P

Louisiana College
Physical Therapist Assistant Program
APTA Standards of Ethical Conduct for the PTA

Standards of Ethical Conduct for the Physical Therapist Assistant

HOD S06-09-20-18 [Amended HOD S06-00-13-24; HOD 06-91-06-07; Initial HOD 06-82-04-08] [Standard]

Preamble

The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients/clients to achieve greater independence, health and wellness, and enhanced quality of life.

No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.

Standards

Standard #1: Physical therapist assistants shall respect the inherent dignity, and rights, of all individuals.

1A. Physical therapist assistants shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

1B. Physical therapist assistants shall recognize their personal biases and shall not discriminate against others in the provision of physical therapy services.

Standard #2: Physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.

2A. Physical therapist assistants shall act in the best interests of patients/clients over the interests of the physical therapist assistant.

2B. Physical therapist assistants shall provide physical therapy interventions with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.

2C. Physical therapist assistants shall provide patients/clients with information regarding the interventions they provide.

2D. Physical therapist assistants shall protect confidential patient/client information and, in collaboration with the physical therapist, may disclose confidential information to appropriate authorities only when allowed or as required by law.

Standard #3: Physical therapist assistants shall make sound decisions in collaboration with the physical therapist and within the boundaries established by laws and regulations.

3A. Physical therapist assistants shall make objective decisions in the patient's/client's best interest in all practice settings.

3B. Physical therapist assistants shall be guided by information about best practice regarding physical therapy interventions.

3C. Physical therapist assistants shall make decisions based upon their level of competence and consistent with patient/client values.

3D. Physical therapist assistants shall not engage in conflicts of interest that interfere with making sound decisions.

3E. Physical therapist assistants shall provide physical therapy services under the direction and supervision of a physical therapist and shall communicate with the physical therapist when patient/client status requires modifications to the established plan of care.

Standard #4: Physical therapist assistants shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, other health care providers, employers, payers, and the public.

4A. Physical therapist assistants shall provide truthful, accurate, and relevant information and shall not make misleading representations.

4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative or other authority (eg, patients/clients, students, supervisees, research participants, or employees).

4C. Physical therapist assistants shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.

4D. Physical therapist assistants shall report suspected cases of abuse involving children or vulnerable adults to the supervising physical therapist and the appropriate authority, subject to law.

4E. Physical therapist assistants shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.

4F. Physical therapist assistants shall not harass anyone verbally, physically, emotionally, or sexually.

Standard #5: Physical therapist assistants shall fulfill their legal and ethical obligations.

5A. Physical therapist assistants shall comply with applicable local, state, and federal laws and regulations.

5B. Physical therapist assistants shall support the supervisory role of the physical therapist to ensure quality care and promote patient/client safety.

5C. Physical therapist assistants involved in research shall abide by accepted standards governing protection of research participants.

5D. Physical therapist assistants shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.

5E. Physical therapist assistants who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.

Standard #6: Physical therapist assistants shall enhance their competence through the lifelong acquisition and refinement of knowledge, skills, and abilities.

6A. Physical therapist assistants shall achieve and maintain clinical competence.

6B. Physical therapist assistants shall engage in lifelong learning consistent with changes in their roles and responsibilities and advances in the practice of physical therapy.

6C. Physical therapist assistants shall support practice environments that support career development and lifelong learning.

Standard #7: Physical therapist assistants shall support organizational behaviors and business practices that benefit patients/clients and society.

7A. Physical therapist assistants shall promote work environments that support ethical and accountable decision-making.

7B. Physical therapist assistants shall not accept gifts or other considerations that influence or give an appearance of influencing their decisions.

7C. Physical therapist assistants shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.

7D. Physical therapist assistants shall ensure that documentation for their interventions accurately reflects the nature and extent of the services provided.

7E. Physical therapist assistants shall refrain from employment arrangements, or other arrangements, that prevent physical therapist assistants from fulfilling ethical obligations to patients/clients

Standard #8: Physical therapist assistants shall participate in efforts to meet the health needs of people locally, nationally, or globally.

8A. Physical therapist assistants shall support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.

8B. Physical therapist assistants shall advocate for people with impairments, activity limitations, participation restrictions, and disabilities in order to promote their participation in community and society.

8C. Physical therapist assistants shall be responsible stewards of health care resources by collaborating with physical therapists in order to avoid overutilization or underutilization of physical therapy services.

8D. Physical therapist assistants shall educate members of the public about the benefits of physical therapy.

APPENDIX Q

Louisiana College
Physical Therapist Assistant Program

Patient/Client Confidentiality Agreement

I acknowledge that I have received training in protecting patient/client confidentiality and HIPAA guidelines. In the course of my clinical training I will have access to confidential information related to patients/clients of the facilities that I enter. I have been informed that it is my responsibility as a student enrolled in a clinical program at Louisiana College to maintain confidential any information related to patients and/or clients. I specifically understand that per HIPPA guidelines, the following behaviors are prohibited:

- Releasing confidential patient/client information by any means (i.e., verbally, electronically, or in print) to any individual/agency who does not have the legitimate, legal or clinical right to the information
- Unauthorized use, copying, or reading of patient medical records
- Unauthorized use, copying or reading of employee/hospital records
- Taking patient records outside the clinical facility
- Any tampering of patient information

I understand that this policy/agreement applies not only to patients/clients with whom I have direct contact, but for any personal/confidential information I may have access to while in the clinical setting.

I further understand that I must use discretion when discussing patient/client information with other appropriate individuals to assure that the nature of the discussion remains professional and pertains only to information clinically relevant. I will make every effort to assure that such conversations cannot be overheard by those not involved in the patient's care.

I am aware that violations of this policy/agreement may result in sanctions and may be grounds for dismissal from the clinical program.

I understand that some clinical facilities will have additional policies related to protecting patient/client information that I will be expected to follow.

_____ _____

Student Signature Date

APPENDIX R

Louisiana College
Physical Therapist Assistant Program

SITE VISIT FORM

GENERAL SITE INFORMATION

Site Name: _____

Type of site: _____

QUESTIONS FOR THE CLINICAL INSTRUCTOR (CI)

Student Name: _____

Date: _____

Clinical Instructor Name: _____

1. How many patients is the student treating a day?
2. What is the average length of each treatment?
3. Identify strengths of student?
4. Identify weaknesses of student?
5. What is the CI doing to resolve weaknesses?
6. Is there adequate time for feedback?
7. Has the student been absent? _____If so, how many days? _____

Questions for the student

2. Are you being adequately supervised?
3. How many patients are you treating in a day?
4. What is the average length of each treatment?
5. What are your strengths in this clinic**?**
6. What are your weaknesses?
7. Are you receiving adequate feedback on your performance?

APPENDIX S

Weekly Planning Form

Dates:_____ **Week #_____**

Summary of Previous Week:
(Progress, Feedback)

Student:

Clinical Instructor:

Goals for the Upcoming Week:

_____ **_____**

Student's Signature **Clinical Instructor's Signature**

APPENDIX T

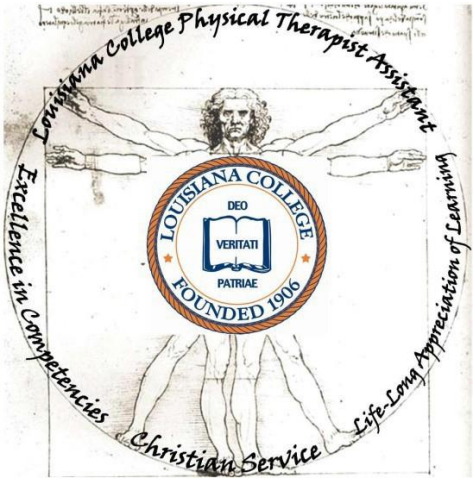
Louisiana College
Physical Therapist Assistant Program

STUDENT PROGRAM HANDBOOK ACKNOWLEDGEMENT

I,_____, acknowledge receipt of a Louisiana College Clinical Handbook for the Physical Therapist Assistant Program. My signature below indicates that I am responsible for abiding by the rules and procedures contained in the Clinical Handbook as well as any policy and procedure of a specific clinical affiliate while at their facility.

_____
Student's Signature

_____
Date


Louisiana College Physical Therapist Assistant
Life-Long Appreciation of Learning
Christian Service
Excellence in Competencies
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PATRIAE
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