



DAYTONA STATE COLLEGE

Physical Therapist Assistant Program

2023-2024

Clinical Education Policies and Procedure Handbook

Table of Contents

Philosophy of Clinical Education

Introduction

College Policies

- A. Clinical Education Site Recruitment
- B. Selection Criteria for Sites
- C. Clinical Education Site Review
- D. Clinical Education Site File
- E. Clinical Site Assignment
- F. Clinical Internship Correspondence
- G. Medical Malpractice Insurance
- H. College and facility responsibilities to the clinical education program
- I. Responsibilities to our clinical sites.
- J. Contracts
- K. Drug And background check

External Forces

- A. Florida statute
- B. Medicare MDS .3.0

Student Policies

- A. Health Policies
- B. Criminal Background Check
- C. Attendance Policy
- D. Absences from Clinic
- E. Safety in the Clinic
- F. Professional; Behaviors
- G. Dress Code
- H. Traveling/Lunch Expenses
- I. Reassignments
- J. Grading of Clinical Experience
- K. Suggestions for success

Daytona State College Mission Statement

Daytona State College, founded with innovation at its core and within a culture of continuous improvement, provides open access to educational programs that transform students' lives and communities we serve.

College of Health and Public Services

The College of Health and Public Services is dedicated to providing quality and affordable degree, degree certificate and vocational certificate programs and services to meet the education, training needs and interests of the health and public service constituency of students and professionals.

School of Health Careers

The mission of the School of Health Careers is to advance teaching, learning, and innovation. Daytona State College, a comprehensive public college, provides access to a range of flexible programs from community enrichment to the baccalaureate degree, emphasizing student success, embracing excellence and diversity, and fostering innovation to enhance teaching and learning.

Physical Therapist Assistant Program Mission Statement

The Physical Therapist Assistant Program promotes the ideals of the Daytona State College Mission statement of providing a quality education for each student. Each Student in the PTA Program will receive academic and clinical experiences to provide them with a professional foundation to become an effective, responsible, licensed and contributing team member in Physical Therapy.

Disclaimer

The Physical Therapist Assistant program reserves the right to make changes in regulations and policies provided in this handbook as circumstances may dictate. If changes are required during an academic year, the student will be notified in writing.

General Policies

A. Clinical Site Recruitment

Facilities that meet the standards and support the mission of Daytona State College, the School of Health Career and Human Services 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 contract for a student to be placed for internship.

1. Site recruitment can be initiated via several different mechanisms:
 - a. The ACCE and program manager can initiate a contact.
 - b. A clinical site can initiate a contact.
 - c. The advisory committee, an alumnus can recommend a contact.
 - d. Any current student can recommend a contact using the All-Purpose Form (APF).

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 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 in Volusia and Flagler counties.
 - 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 a full time PT is available.
 - g. Sites where staff is open and receptive to the education of our students.
 - h. Sites where a Physical Therapist completes all evaluations and establishes all plans of care.
 - i. Sites that provide the Clinical Instructor (CI) adequate release time to supervise and mentor the student.
 - j. Sites with Center Coordinators for Clinical Education (CCCE) and Clinical Instructors (CI) are certified FCCE instructors or APTA credentialed instructors.
 - k. Sites that if outside of the target community, have been properly identified as outside of the area with releases obtained.
 - l. Sites where Center Coordinators of Clinical Education have demonstrated knowledge of effective communication and management of the clinical education program.
 - m. Sites where a full time PT is in attendance during the student's clinical hours per Florida statute.

- 2. Clinical Instructors must meet requirements which include:**
 - a.** Current PT or PTA licensure per appropriate state requirements
 - b.** Clinical experience of at least one year with the type of patients (i.e. OP, acute, rehab) in the setting where the teaching will be conducted
 - c.** Personal desire to teach PTA students
 - d.** Demonstration of effective interpersonal relationships with co-workers
 - e.** Ability to provide onsite supervision to the PTA student
 - f.** Willingness to provide timely and constructive feedback to student
 - g.** Willingness to complete APTA CPI assessment in a timely manner
 - h.** Willingness to model professionalism for the student
 - i.** Willingness to not disclose previous students' performance
 - j.** Willingness to communicate promptly with the CCCE and Program ACCE when serious issues arise with students
 - k.** Willingness to communicate with the CCCE and Program ACCE when assistance/resources are needed to manage issues related to the clinical education of the student
 - l.** Ability to plan, conduct, and evaluate a clinical education experience
 - m.** If the CI is a PTA, willingness to work collaboratively with the PT and within the required guidelines of supervision as stated in the Florida Physical Therapy Practice Act to supervise the student

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, student feedback and or site visit, a site is considered to no longer support our goals and mission, and then the site will be placed on the inactive list. The site will be reviewed annually for 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 ACCE maintains all sites files in their office.
 - a. The files include:
 - i. The sites CSIF.
 - ii. Previous student's evaluation of the CI.
 - iii. Miscellaneous: any additional information available.
 - b. These files are available for the student to review but cannot be signed out or leave the ACCE office.

E. Clinical Site Assignment

1. A clinical education request form (CERF) is mailed out annually in March per APTA policy. This form gives the time frames for internships for the following academic year. In the fall of each year all students will be given a preference form to complete. This form will outline student geographical preference and clinical interest. The ACCE will match student preference with available sites. The following basic criteria are used to insure variety of experiences.
 - a. Students must have at least one internship at an inpatient setting and at least one internship in an outpatient setting.
 - b. Students may have to travel greater than one-hour travel time.
 - c. If a student does two outpatient experiences, to ensure variety, one should be a large corporate organization and one should be a private clinic.
 - d. 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.
2. Specialized clinical experiences such as pediatrics are assigned based upon student performance on the pediatric portion of the curriculum.
 - a. A lottery system may be necessary if there are more students interested than there are available slots.

F. Clinical Experience Correspondence

1. Assignments will be made using the following timelines for internships.
 - a. First internship will be assigned in July, with a confirmation letter from the ACCE to the site.
 - b. Second internship will be assigned in September with a confirmation letter from the ACCE.
 - c. Third internship will be assigned in September with a confirmation letter from the ACCE.
2. The students will complete the Student Data form and write a letter of introduction 3 weeks prior to the start of each internship. This letter will be reviewed by the ACCE and a copy placed in the student's file.
3. Two weeks prior to each clinical experience, the student will do a self-assessment on preparedness for their clinical using the CPI.
4. Two weeks prior to each clinical experience, the student will write ten goals that they want to accomplish on their internship and submit to ACCE. These goals will be returned to student to share with CI/CCCE on their internship.
5. While on clinical the student will be required to submit the following the correspondence with the school.
 - a. Weekly reports (available online).
 - b. Discussions via Florida online.
 - c. Seventh day report (available online).
 - d. Midterm CPI.
 - e. Final CPI.
 - f. In-service.
 - g. Action plan if one is indicated.
 - h. APTA student assessment of clinical experience.
6. The CI will complete the assessment of the strengths and weaknesses of the Curriculum and return it via fax or mail to the college.

G. Medical Malpractice Insurance

1. Daytona State College maintains a Medical Malpractice Plan. A copy of the plan is kept in the School of Health Careers and Human Services Office and will be provided upon request to any site that requests a copy. This request may take 10 to 14 days to honor.

H. Duties of Daytona State College

1. The college and the community have important roles to play to assure success in the clinical education component of this program.
 - a. Designate a member of faculty to serve as Academic Clinical Coordinator of Clinical Education who will notify the clinical facility about planned student assignments.
 - b. Inform the student of any special requirements of the clinical facility for acceptance, uniform requirements and to necessity to conform to standards, practices, policies, and procedures of the clinical facility.
 - c. Maintain patient confidentiality as required by all federal, state laws and regulators.

- d. Inform student of necessity for background and drug testing if required by the clinical facility. Complete the background test following Daytona State College/ School of Health Careers and Human Services policy.
- e. Establish the education objectives for the clinical education experience and continually evaluate the effectiveness of the objectives.
- f. 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.

I. Community responsibilities

1. The mission statement of the Daytona State College encourages involvement in the larger community of Volusia and Flagler counties. Additionally, 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 Daytona State College will develop educational programs to help develop clinical faculty skills. These programs could include Florida Clinical Consortium Educator workshops for CEU credit, workshops on other topics including the Guide to Physical Therapy practice and the Clinical Performance Instrument, and workshops on topics that the faculty has identified expertise. In addition, the physical therapist assistant faculty has access to continuing education programs through the Institute for Health Services. The Institute provides continuing education units on a wide variety of topics that would be beneficial to our clinical faculty.

J. Contracts

1. A copy of duly executed contracts is on file in the Allied Health admissions office and in the office of the Program Chair. A student cannot be involved in patient care or contact unless there is a signed contract on record.

K. BACKGROUND and DRUG TEST

1. College policy is that all applicants are screened for background and drug testing upon admission to the program. The student will then reduce their background check in October of the same year prior to attending their clinical.

EXTERNAL FORCES

A. Florida statute

1. [64B17-6.001](#) Minimum Standards of Physical Therapy Practice. Requires that a physical therapist be on site when a PTA student is delivering patient services.

B. Medicare 3.0

1. Effective October 1, 2010, CMS will implement a new version of the *Resident Assessment Instrument manual (RAI) for MDS 3.0*. These new provisions will significantly alter the way that physical therapists deliver and document therapy in the skilled nursing facility (SNF) setting. There are significant changes to the way SNFs can record and utilize services provided by students. Currently under Medicare Part A, SNFs can record the minutes of service provided by physical therapy students to a SNF resident as skilled individual therapy if the student is in the line-of-sight of the therapist or assistant. The supervising therapist or assistant is not precluded from treating another patient at the same time.

Under the new RAI Version 3.0 manual provisions, when a therapy student is delivering services to a SNF resident, the minutes can only be recorded as skilled individual therapy when the supervising therapist or assistant is not engaged in any other activity or treatment. In the alternative, when a therapy student is delivering treatment to one resident (in line-of-sight of the supervising therapist or assistant) and the supervising therapist or assistant is treating another resident, these minutes will now be recorded as *concurrent therapy* under Medicare Part A. Also, when the therapy student is treating two residents and the therapist or assistant is supervising (line-of-sight), these minutes will also be recorded as concurrent therapy under Medicare Part A.

STUDENT POLICIES FOR THE CLINIC

A. Health Policies

1. The students must complete the following health related requirements and must be completed at the student's expense. These must be completed upon admission to the program and will be kept in your file. Daytona State College cannot release copies of any of these forms to any third party due to confidentiality issues. It is highly recommended that you keep the originals of all these forms and keep them in a readily available place.
 - a. A statement from your physician about your general health.
 - b. A copy of your Basic Life Support card that must be current.
 - c. A copy of your certificate of completion of Blood Borne Pathogens, HIV/AIDS, and Universal precautions.
 - d. A copy of certificate of completion of the medical errors course.
 - e. A copy of completion of your Hepatitis B series or a signed waiver.
 - f. Tetanus Toxoid injection proof in last ten years.
 - g. PPD tests results or chest X ray if PPD is positive (Annual requirement).
 - h. Proof of immunization to Measles, Mumps and Rubella or titer results.
2. Medical health insurance is required, and proof must be offered via a copy of your insurance card.
3. Some sites may request other health information. It is the student's responsibility to complete all requirements and pay expenses. This can include drug testing. The student will provide a copy to the ACCE of completion of the drug test but not the drug test results.

B. Criminal Background Check

1. The college does mandatory background checks Level II Live Scan background checks and drug tests on admission to the physical therapist assistant program. The results are reviewed by the chair of the Allied Health department for compliance. A letter will be provided for each student to provide to their different clinical sites concerning the results. The school cannot release the results of these tests to any clinical site. The student will scan the results into a drop box that is a secured site and only visible by the student and the ACCE.

C. Attendance/Absence policy

1. Workday Schedule/Tardiness/Leaving Early
 - a. 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.
 - b. 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 4/ten-hour workday/wk. Advance notice will be given in the case of those clinics that have other than normal work hours.

- c. 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.
- d. Repeated lateness will be reported to the school and may result in the unsuccessful completion of the clinical affiliation.
- e. 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 (Ginger Tripp) at Daytona State College for potential approval before the clinical instructor.
- f. 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.

D. 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 10 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 8:30 a.m. 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 the time.
5. Clinicians may have other physical therapy or physical therapist assistant students and scheduling missed hours maybe difficult for the site.

E. Safety while in the Clinic

1. Students are given a packet of information about safety issues dealing with on campus safety issues first semester. 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 late, they should ask someone to walk with them to their car. The Daytona area does have a relatively high crime rate and the students always need to be aware of their personal safety.

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. Standard precautions policy.
 - b. Policy for reporting unsafe equipment.
 - c. Policy for reporting child and or elderly abuse.
3. If there is an incident where the student and or patient is injured, an incident report following the polices of the facility must be completed and the college needs to be notified within twenty-four hours.
4. 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 be motivated 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.
 - iii. 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.
 - b. Students will complete any clinical assignments issued in the time frame set by the clinical instructor (CI).
 - c. Students are expected to fully complete and promptly submit all required paperwork and documentation after each clinical on the day designated.
 - d. 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 to tear down. Students are expected to be tactful and respectful when offering feedback to clinicians or peers.

F. Professional Behaviors

1. A student in the clinical setting represents the program, the college, and the physical therapy profession to all those with whom they have contact. The student is a "guest" in the clinical facility and is expected to follow the policies and procedures for that clinical facility. Violations of this code of conduct may result in dismissal from the program or suspension from further attendance at a designated clinical facility.
 - a. A student will be exposed to extremely personal information concerning patients and their families. Access to the patient medical record is limited to use only in carrying out patient care for education purposes such as completion of a case study or research paper. Every patient has a right to privacy as outlined in The Patient Bill of Rights and each student is expected to respect this right by never discussing the content of such medical records with "unauthorized" personnel.

These "unauthorized" persons may include personal friends and relatives of the patient and the student's family and friends. Patient information should never be discussed in the elevator, the hospital lobby, the cafeteria, or any other public place. If information is requested by any of these "unauthorized" persons, they should be referred to the clinical instructor.

- b. New federal guidelines have been established to deal with health care privacy issues. Each student should ask their CI about any HIPPA requirements that may further outline privacy issues.

G. Dress Code

1. The dress code for internship varies with each clinical site; therefore, specific guidelines for each facility will be given prior to each affiliation. Students are responsible for following the facility dress code policy. Students must purchase a white lab coat prior to the first day of clinical. A physical therapist assistant program nametag must always be worn in the clinic. The following are suggested general guidelines. Students are not permitted to participate in dress down attire.
 - a. Ladies: Dress pants, and Daytona State polo shirt. No jeans, shorts, skirts, dresses are permitted. If the site wears scrubs, then the student can wear scrubs. Shoes are to be closed toe shoes and socks or stockings must be worn. Shoes should have no more than one- inch rubber sole. Sweaters maybe worn but the name tag cannot be obscured. It is not appropriate to wear the outerwear of a hoodie.
 - b. Men: Dress pants with Daytona State polo is required If the site wears scrubs, then the student can wear scrubs. No jeans or tank tops may be worn. Shoes must be close toe with socks. Outerwear can be a sweater. but the nametag cannot be obscured. It is not appropriate to wear the outerwear of a hoodie.
2. Other issues to address professional appearance that must be followed:
 - a. Hair must not interfere with patient care or student performance. Long hair must be pulled back.
 - b. Fingernails must be no longer than the end of the fingertips.
 - c. A watch, wedding ring, and post earrings (no larger or dangling) are the only acceptable jewelry that should be visible.
 - d. Each student must have a watch with a second hand, a pad, and pen available at all times.
 - e. While in the clinic:
 - i. Perfume is not permitted (this may be offensive to patients with pulmonary complications).
 - ii. Men should be clean-shaven, or beard neatly trimmed.

H. Travel 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.

I. 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 workday.
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 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 to salvage the clinical experience.

J. 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.
2. Daytona State 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. 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 4-week full time rotation completed in the fall after completing three semesters of classroom coursework.
 - b. The second internship is a 4-week full time rotation completed after all coursework.
 - c. The final internship is a 6-week rotation completed at the end of all coursework.
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 attainment are shared with each CI 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.
7. The ACCE does a site visit to every student within the target counties after the midterm assessment and earlier if requested.
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 an 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 the 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.

PHT 2804-PTA Clinical Practicum I

The following applies to the clinical portion of the course. There are other requirements for the pre-clinical portion of the course.

This is a 4-week full time clinical done at the end of the third semester of the physical therapist assistant curriculum. **The student must complete 160 hours of clinical experience.** Clinical instructors will be given an outline of the skills that are to be mastered by the student in this time of their education.

The clinical practicum course will be graded in combination of assignments and the Clinical Performance Instrument (CPI). **To complete this first clinical practicum the student must be performing at an Intermediate Performance level.** This indicates that a student requires direct personal supervision less than 50% of the time working with patients with simple conditions, and direct personal supervision 75% of the time working with patients with complex conditions.

The final clinical grade is determined by the ACCE.

The student must fully complete the Student Evaluation of the Clinical Site form from the APTA.

Student Learning Outcomes: Upon completion of this course, the student will be able to:

1. Perform all pre-clinical requirements.
2. Demonstrate clinical integration of skills.
3. Performs in a safe manner that minimizes risk to patient, self, and others.
4. Conducts self in a responsible manner.
5. Interacts with others in a respectful manner. (3.3.2.3)
6. Adheres to ethical standards. (3.3.2.2)
7. Adheres to legal standards.
8. Communicates in ways that are congruent with situational needs. (3.3.2.1)
9. Produces documentation to support the delivery of physical therapy services. (3.3.2.16)
10. Delivers established patient care to reflect respect for and sensitivity to individual differences.
11. Participates in patient status judgments within the clinical environment based on the plan of care established by the physical therapist.
12. Obtains accurate information by performing selected data collection consistent with the plan of care established by the physical therapist.
13. Discusses the need for modifications in the plan of care established by the physical therapist. (3.3.2.11)
14. Performs physical therapy interventions in a technically competent manner. (3.3.2.9)
15. Educates other using relevant and effective teaching methods. (3.3.2.19)
16. Participates in activities addressing quality of service delivery.

17. Participates in addressing patient needs for services other than physical therapy.
18. Manages resources to achieve patient goals of the clinical setting.
19. Participates in fiscal management of the physical therapy clinical setting. (3.3.2.22)
20. Uses physical therapy aides and other support personnel according to legal and standards of ethical practice.
21. Implements a self-directed plan of career development and lifelong learning including presenting an in service. (3.3.2.27)
22. Assist the physical therapist in addressing primary, secondary prevention needs of individuals and groups.

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

1. If a student had 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 grade of D or below is considering failure and the student will be dismissed from the program.

PHT 2810- Clinical Practicum II

This is a 4-week full time clinical done at the end of the fourth semester of the physical therapist assistant curriculum. **The student must complete 160 hours of clinical experience.** Clinical instructors will be given an outline of the skills that are to be mastered by the student in this time of their education.

The clinical practicum course will be graded in combination of assignments and the Clinical Performance Instrument (CPI). **To complete this second clinical practicum the student must be performing at Advanced Intermediate Performance level.** This indicates that a student requires direct personal supervision less than 25% of the time working with patients with simple conditions, and direct personal supervision 50% of the time working with patients with complex conditions.

The final clinical grade is determined by the ACCE.

The student must fully complete the Student Evaluation of the Clinical Site form from the APTA.

Student Learning Outcomes: Upon completion of this course, the student will be able to:

1. Perform all pre-clinical requirements.
 2. Demonstrate clinical integration of skills.
 3. Performs in a safe manner that minimizes risk to patient, self, and others.
 4. Conducts self in a responsible manner.
 5. Interacts with others in a respectful manner. (3.3.2.3)
 6. Adheres to ethical standards. (3.3.2.2)
 7. Adheres to legal standards.
 8. Communicates in ways that are congruent with situational needs. (3.3.2.1)
 9. Produces documentation to support the delivery of physical therapy services. (3.3.2.16).
 10. Delivers established patient care to reflect respect for and sensitivity to individual differences.
 11. Participates in patient status judgments within the clinical environment based on the plan of care established by the physical therapist.
- Page 2 of 8
12. Obtains accurate information by performing selected data collection consistent with the plan of care established by the physical therapist.
 13. Discusses the need for modifications in the plan of care established by the physical therapist. (3.3.2.11)
 14. Performs physical therapy interventions in a technically competent manner. (3.3.2.9)
 15. Educates other using relevant and effective teaching methods. (3.3.2.19)
 16. Participates in activities addressing quality of service delivery.
 17. Participates in addressing patient needs for services other than physical therapy.
 18. Manages resources to achieve patient goals of the clinical setting.
 19. Participates in fiscal management of the physical therapy clinical setting. (3.3.2.22)
 20. Uses physical therapy aides and other support personnel according to legal and

standards of ethical practice.

21. Implements a self-directed plan of career development and lifelong learning including presenting an in service. (3.3.2.27)

22. Assist the physical therapist in addressing primary, secondary prevention needs of individuals and groups.

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

1. If a student had 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 grade of D or below is considering failure and the student will be dismissed from the program.

PHT- 2820 Clinical Practicum III

This is a full time 6 weeks clinical done at the end of the fourth semester after completion of all didactic instruction in the physical therapist assistant curriculum. **The student will complete 240 hours.** Clinical instructors will be given an outline of the skills that are to be mastered by the student in this time in their education.

The clinical practicum course will be graded in combination of assignments and the Clinical Performance Instrument (CPI). **To complete this final clinical practicum, the student must be performing at Entry Level Performance level.** This indicates that a student requires direct personal supervision less than 25% of the time working with patients with simple conditions, and direct personal supervision 50% of the time working with patients with complex conditions.

The final clinical grade is determined by the ACCE

The student must fully complete the Student Evaluation of the Clinical Site form from the APTA.

Student Learning Outcomes: Upon completion of this course, the student will be able to:

1. Perform in a safe manner that minimizes risk to patient self and others. (3.3.2.5)
 2. Conducts self in a responsible manner.
 3. Interacts with others in a respectful manner.
 4. Adheres to ethical standards. (3.3.2.5)
 5. Adheres to legal standards. (3.3.2.5)
 6. Communicates in ways that are congruent with situational needs. (3.3.2.1)
 7. Produces documentation to support the delivery of physical therapy services. (3.3.2.16)
 8. Delivers established patient care to reflect respect for and sensitivity to individual differences. (3.3.2.2)
 9. Participates in patient status judgments within the clinical environment based on the plan of care established by the physical therapist.
 10. Obtains accurate information by performing selected data collection consistent with the plan of care established by the physical therapist.
 11. Discusses the need for modifications in the plan of care established by the physical therapist. (3.3.2.10)
- Page 2 of 7
12. Performs physical therapy interventions in a technically competent manner.
 13. Educates others (patients, families, staff, students) using relevant and effective teaching methods. (3.3.2.14)
 14. Participates in activities addressing quality of service delivery.
 15. Participates in addressing patient needs for services other than physical therapy. (3.3.2.21)
 16. Manages resources to achieve patient goals of the clinical setting.
 17. Participates in fiscal management of the physical therapy clinical setting.
 18. Uses physical therapy aides and other support personnel according to legal and standards of ethical practice.
 19. Implements a self-directed plan for career development and lifelong learning, including presenting an in-service. (3.3.2.27)
 20. Assists the physical therapist in addressing primary, secondary prevention needs of

individuals and groups.

21. Completes an in-service for their peers.

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

1. If a student had 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 grade of D or below is considering failure and the student will be dismissed from the program.

K. Tips for Success

Suggestions for Students during Affiliations to Promote Success A-Z 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. Openly share your feedback with your CI about the nature, quantity, and quality of supervision time. Focus on positive changes rather than on negative issues. (e.g., "I would have felt more comfortable in the morning if you (CI) had been available to give me more suggestions for treatments" Rather than, "Your (CI) don't spend enough time with students").
4. 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?).
5. Communicate to your CI whether you are getting enough feedback as to your performance throughout the day.
6. 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.
7. Take the initiative to come into the clinic early to familiarize you with the organization and resources available.
8. Find where equipment and supplies are stored and become familiar with the operation of units.
9. 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.
10. 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.
11. 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.
- 12.** Complete your paperwork at the clinic. Do not wait until you leave to finish the forms.
 - 13.** Try to NEVER keep a patient waiting while you plan the treatment. Plan the treatment in advance to utilize time wisely.
 - 14.** 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.
 - 15.** 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 the answers.
 - 16.** Keep notes on the techniques used by therapists you have observed. This list may be an excellent resource when planning patient treatments.
 - 17.** 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.
 - 18.** 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.
 - 19.** 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.
 - 20.** 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.
 - 21.** 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).
 - 22.** 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.
 - 23.** 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.
 - 24.** Be open to alternative ways of doing things. This profession is "art "and science.
 - 25.** Action plan in writing any deficiencies identified by your CI and ask for their feedback on your plan.
 - 26.** Have fun, the clinic is a great place to be.

SUMMARY OF FIRST YEAR PTA COURSE MATERIAL Spring

Course work- First semester in program

PHT 1128 Kinesiology for PTAs

Muscle actions, origin, insertion, and innervations
Basic biomechanical Concepts of motion and forces
Axis and planes of motion Concepts of levers and pulleys
Normal osteokinematics and arthrokinematics
Identify, locate, and palpate:
 major bony landmarks major bones
 major joints skeletal muscles
 tendon attachments ligaments
 bursa joint capsules
Types of muscle contractions
 Antagonist, stabilizers
Central, peripheral, and autonomic nervous systems
Posture and body alignment Gait Analysis - terms
Analysis of muscle function for ADL Skills Muscles of respiration
Terms for Manual Muscle Testing

PHT 1255 Patient Care Skills and Lab

Positioning and draping techniques Infection control
Transfer technique Sterile field guidelines
Bed Mobility technique Isolation technique
Body mechanics and Lifting Universal Precautions
Massage Documentation
Architectural barriers
 Wheelchair training
Gait training with assistive devices
Ambulation devices/aids
Crutch, cane, and walker
measurement Vital signs
Related medical terminology
Incidents and emergency procedures

PHT 2220 Therapeutic Exercise I and Lab

Goniometric measurements
Therapeutic exercises:
 PROM, AAROM, AROM, isometric and isotonic exercises
Mechanical assistance devices:
 Skateboards pulleys
 CPM shoulder wheel
Manual and mechanical resistance exercise
Stretching techniques
Aerobic exercises/cardiac
Basics of mobilization
Treatment goals for specific joint disorders
Plan of care and documentation
Related documentation and terminology

Presentation of research article

Summer Course work (Second semester in program)

PHT 2211 Modalities I and Lab

Modalities used in PT Clinics.

Principles, Indications, and contraindications for:

Cryotherapy, Thermotherapy and Ultrasound

Cold: Cold packs, ice bags, ice massage.

Heat: Hot packs, Fluidotherapy, Paraffin,

Ultrasound: Thermal and Non-thermal

Hydrotherapy: Tanks and Contrast bath

Compression

Intermittent Compression Unit

Circumferential edema measurements/Garment

Basic bandaging and wrapping

Traction, Spinal and Cervical

Positional and Mechanical

Infection control procedures

Documentation

Wounds

Differential diagnosis and treatment:

Pressure Venous

Venous Arterial

Diabetic Burns

PHT 2221 Therapeutic Exercise II and Lab

Treatment Techniques for Orthopedic Diagnoses:

Exercise progression for common UE conditions

Exercise progression for common LE conditions

Exercise Progression for common conditions of the Spine

Manual muscle testing

Balance and coordination techniques

Gait deviations

Cardiopulmonary patients/Exercise progression

MET Levels

For the deconditioned patient

Documentation

Orthopedic Diagnosis/Per Joint

Principles of fracture/Dislocations Treatment

Soft tissue injuries

Sprains, Strains, tendonitis

Total joint replacements

Common orthopedic surgery

Common treatment methods for orthopedic conditions

Spinal alignment and low back pain diagnoses

Scoliosis

TMJ

PHT 2129 – Neuroanatomy for PTA II

This course is a continuation of Kinesiology for PTA I, emphasizing the neuromuscular system and how it relates to functional movement of the human body. Other systems - cardiopulmonary, integumentary will be addressed for their impact on functional movement of the human body. Describe the anatomic features of the central, peripheral, and autonomic nervous systems. Describe the physical and electrical properties of cells in the nervous system. Discuss synaptic transmission and its relationship to human movement. Describe the concept of neuroplasticity. Discuss the clinical application of somatosensation. Describe the autonomic nervous system and its role in functional movement. Describe the motor systems, its role in motor control and its relationship to functional movement. Describe the cranial nerves and their function. Describe the structure and function of the brainstem region. Describe the cerebrum and its clinical application. Describe the cerebral blood supply and cerebrospinal fluid and its clinical significance. Discuss the impact of the cardiopulmonary and integumentary system on functional movement.

SUMMARY OF PTA SECOND YEAR COURSE MATERIAL Fall

Course work/Third semester in program

PHT 1300 Pathology for PTAs

Mechanisms of inflammation and repair	
Mechanisms of cell injury and necrosis	
Infectious agents and diseases	orthopedic disorders
Neurological conditions	Pediatric diagnoses
Seizure disorders	Pregnancy
Cardiovascular disorders	Respiratory disorders
Oncology and benign tumors	Endocrine disorders
Burns	Genetics
Other Diagnoses seen in the PT Clinic	

PHT 2214 Modalities II and Lab

Principles, indications, and contraindications for
 electrotherapy:HVGS Interferential
 Direct Current TENS/MENS/LIS
 Neuromuscular electrical stimulation
 Iontophoresis
Biofeedback principles and applications (theory)
Treatment strategies with modalities
Related documentation and terminology

PHT 2235 Therapeutic Exercise III and Lab

Wounds-pressure, venous, arterial and neuropathic-identification and treatment
PVD /Diabetes: Exercise considerations
Amputation: Exercise considerations
Ace bandaging for residual limbs
Prosthetics and Orthotics
Gait Deviations
Motor Learning for pre-gait techniques
Data collection for neurological patient
Functional assessments
Balance testing
Sensory testing
Treatments for patient with stroke
Adaptive devices and equipment
Pediatric testing to include: Reflex, Milestones (Denver)
Pediatric Treatments of common neurological conditions
Related documentation and terminology
Adult diagnoses - CV A, Parkinson Disease, Alzheimer's disease, Dementia
TBI
Motor Learning and Motor Control Principles
PNF treatment techniques

PHT 2804 Clinical Practicum I

4 weeks, full time internship
Pre-clinical work on gerontology, dementia and billing and documentation

Spring Course work /Fourth and final semester in program

PHT 2140 Rehabilitation Skills for PTAs and Lab

Spinal Cord Injury and treatment
MS
Guillian Barre
ALS
Related documentation and terminology
Gait deviations and abnormal gait
Pediatric conditions to include, CP, Spinabifida and other genetic conditions
BPPV Oncology
Ob/gyn conditions: postural problems and exercises for pregnancy
Gerontology/Wheelchair activities and Environmental Assessments
Capstone project

PHT 2931 PTA Seminar

Ethics and Legal Issues
Medicare Regulations
Impact of legislation
Licensure and State Applications
Review of professional literature

Community resources for
patients' Psychiatric disorders
Therapeutic Communication Skills
Family Interactions with patient
Cultural Diversity Issues
Job Interviewing Skills

PHT 2810 Clinical Practicum II

4 weeks full-time internship

PHT 2820 Clinical Practicum III

6 weeks full-time internship