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UNION COUNTY COLLEGE POLICIES

ANTIDISCRIMINATION POLICY:

Union County College is committed to a policy of equal opportunity for all students and employees without regard to race, color, religion, sex, sexual preference, national origin, disability or veteran status. Union County College prohibits discrimination in all matters involving admission, registration, and all official relationships with students, including evaluation of academic performance.

SEXUAL HARASSMENT POLICY:

Union County College will not condone any form of sexual harassment. This is defined as the use of unwelcome sexual advances, request for favors, and other verbal or physical conduct of a sexual nature as an implicit condition of employment as the basis for employment decisions or as interfering with an individual's work performance by creating an intimidating, hostile or offensive work environment. Students are instructed to report any issues of this nature to the CI, CCCE and/or ACCEs.

AMERICANS WITH DISABILITIES ACT:

Union County College clinical education policies comply with the guidelines of the Americans with Disabilities Act. Clinical experiences are an essential component of our program for all students. It is the student's responsibility to provide written notification to the ACCE and the CCCE if reasonable accommodations will be required during affiliations. Students requesting accommodations must be registered with the disability counselor in student services. We encourage students to request accommodations as early as possible to facilitate and effective process of supporting his/her needs during the clinical education experience. Any student who does not disclose his/her disability and does not provide a written request for accommodations is not entitled to retrospective accommodations.

The Clinical Education staff is supportive of students with disabilities and will provide assistance in identifying, documenting, and requesting accommodations. Assistance is offered to the staff at clinical sites to establish means to provide reasonable accommodations.

PURPOSE OF THIS HANDBOOK

HANDBOOK

This Handbook has been prepared to assist the student and the clinical faculty in the clinical portion of the Union County College Physical Therapist Assistant Program. The policies and procedures in this handbook have been established to guide each student in attaining entry level competence as a contemporary practicing physical therapist assistant. All students are required to abide by these policies and procedures.

PHILOSOPHY OF CLINICAL EDUCATION:

The American Physical Therapy Association, as well as Union County College, considers clinical education an essential component of the curriculum and an integral part of the academic program. The Physical Therapist Assistant Program at Union County College has established affiliation agreements with a variety of clinical sites. These include general hospitals, rehabilitation centers, community and hospital-based out-patient facilities, skilled nursing facilities, pediatric facilities and schools. Agreements will be continually developed and renewed to ensure each student receives exposure to a minimum of inpatient and outpatient experience in the field of physical therapy.

The Physical Therapist Assistant Program at Union County College is committed to professional practice expectations in physical therapist assistant education as described by the APTA definition of a PTA, *APTA PTA Ethical Standards* and *Core Values*.

Clinical education requires an active partnership between Union County College and the clinical sites to provide clinical educational experiences for students. Clinical education prepares students to demonstrate professionalism while using best practice in a safe and effective manner. Clinical education provides the opportunity to learn in the clinical environment by applying knowledge, skills, and behaviors to practice and to assess personal and professional strengths and limitations relative to practice. Students enter the clinic prepared to be active participants and partners in their learning. Clinical performance evaluation measures safe and effective student behaviors and provides an assessment of the degree to which students are capable, responsible, and accountable for their own learning. Clinical education is the beginning of a lifelong learning experience in the practice of physical therapy and serves as a catalyst for lifelong professional development.

GUIDELINES FOR CLINCIAL EDUCATION SITE:

The information below is summarized for the *Clinical Education Guidelines and Self-Assessment* endorsed by the APTA.

- > The clinical center's philosophy for patient care and clinical education are compatible with those of the academic program.
- Clinical education programs for students are planned to meet specific objectives of the academic program, the physical therapy service, and the individual student.
- The physical therapy staff practices ethically and legally.
- The clinical center is committed to the principle of equal opportunity and affirmative action as required by federal legislation.
- The clinical center demonstrates administrative support of physical therapy clinical education.
- > The clinical center has a variety of learning experiences, appropriate to the setting, available to students.
- The clinical center provides an active, stimulating environment appropriate for the learning needs of students.

- Selected support services are available to students.
- Roles of physical therapy personnel are clearly defined and distinguished from one another.
- The physical therapy staff is adequate in number to provide an educational program for students.
- A Center Coordinator of Clinical Education (CCCE), with specific qualifications, is responsible for coordinating the assignments and activities of students at the clinical center.
- ➤ Physical Therapy Clinical Instructors (CI) are selected based on specific criteria.
- > Special expertise of the clinical center staff is available to students.
- The clinical center encourages clinical educator (CCCE and CI) training and development.
- There is an active staff development program for the clinical center.
- The physical therapy staff is active in professional activities.
- The physical therapy service has an active and viable process of internal evaluation of its own affairs and is receptive to procedures of review and audit approved by appropriate external agencies and consumers.

PLACEMENT OF CINICAL EDUCATION IN THE CURRICULUM

The clinical experience modules use a developmental progression that links the didactic curriculum throughout the course of study. This clinical design encourages integration of previous learning and stimulates achievement of acquisition and application of essential knowledge, skills and behaviors, while promoting independence by increasing professional responsibility and decreasing supervision and feedback.

CLINICAL EDUCATION

Clinical Experience	Clinical Experience	Clinical Experience
1st year	2nd year	2nd Year
Fall semester	Spring I semester	Spring II semester
2 days a week	Full-Time - 7 Weeks	Full-Time - 7 Weeks
8hours/day	36 hours/week	36 hours/week
Acute Care/Rehab/Ortho	Acute Care/Rehab	Acute Care/Rehab
	Ortho/Peds/Neuro	Ortho/Peds/Neuro

PTA 217 Clinical Experience - Two Days per Week

private practice, skilled nursing centers, out-patient rehabilitation centers.

This part time experience is the first of three comprehensive clinical experiences in a Physical Therapy setting. The purpose of this initial experience is to apply, integrate, and perform learned clinical skills on patients under the direct supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant. Basic patient care skills, anatomy/biomechanics, therapeutic exercise, selected assessment techniques, and human disease and pathology will be emphasized. Typical practice settings may include acute care hospitals,

Clinical Practice I – two days per week

Purpose: To expose students to expert clinicians who can act as mentors.

Goals: To facilitate professional behaviors, self-awareness and reflective

thinking, effective communication skills and develop a sensitivity and

ability to interact in a clinical setting.

Focus: Basic data collection, intervention and evaluation routinely performed

by **Physical Therapist Assistant**.

Competencies Attained: Vital Signs

Transfer Activities

Ambulation Aids, Patterns and Activities

Therapeutic Massage Manual Muscle Testing

Goniometry Posture

Therapeutic Modalities Motor Control Principles

Bio-Mechanics and Kinesiology Therapeutic Exercise Musculoskeletal, Pathological Process, and Interventions

Issues of Motor Control

Concurrent Skills: Therapeutic Exercise Research Methods

Research Method Exercise Testing Pharmacology

Orthotic and Prosthetic Assessment Neurological Clinical Medicine Neuromuscular Functional Training.

Pediatric conditions, interventions, cardiopulmonary conditions and

treatment.

Wounds and Burns

Student Supervision: Full-time supervision/advisement/instruction by a member of the

clinical faculty.

Student Assessment: Clinical Performance Evaluation online

Clinical Experience - Full Time Rotations Seven Weeks

The first seven-week rotation of this full time clinical experience is the second of three comprehensive clinical experiences in a physical therapy setting. The purpose of this intermediate experience is to apply, integrate, and perform learned clinical skills on patients under the direct supervision of a licensed Physical Therapist and/or licensed Physical Therapist assistant. The emphasis of this experience is to integrate previously learned and practiced PTA skills, therapeutic modalities, advanced therapeutic techniques, and neurophysiological techniques into an established physical therapy program. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing centers,

geriatrics, pediatrics, in-patient and out-patient rehabilitation centers.

Clinical Practice II - Seven Weeks - Full-Time

Purpose: The development of technical and non-technical competencies within

the mentoring relationship.

Goal: To facilitate the student's ability to integrate knowledge, generate

hypotheses, implement appropriate interventions and develop goals

based on self-assessment.

Focus: To perform any clinical skills introduced in pre-requisite curses in a

clinical setting effectively and competently according to current legal

and ethical standards.

Concurrent Skills: The majority didactic component of the curriculum is complete.

Students are competent, not proficient, in all basic physical therapy

evaluation procedures and treatment techniques.

Time Management Documentation Skin Disease Women's Health

Taping

Student Supervision: Transition from full-time supervision/advisement/instruction to

collaborative process based on student self-assessment and clinical

instructor facilitation.

Student Assessment: Clinical Performance Evaluation online

Clinical Experience – Full Time Rotation Final Seven Weeks

This is the second seven-week rotation of this full time clinical experiences and, is the third of three comprehensive clinical experiences in a physical therapy setting. The purpose of this final experience is to apply, integrate, and perform learned clinical skills on patients under the supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant.

The emphasis of this experience is to integrate previously learned and practiced PTA skills, special topics in PT, and clinical management and health care issues into the delivery of a comprehensive physical therapy treatment program. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing centers, geriatrics, pediatrics, in-patient and out-patient rehabilitation centers.

Clinical Practice III - Final Seven Weeks

Purpose: The development of technical and non-technical proficiencies within the

mentoring relationship.

Goal: To facilitate the student's ability to integrate knowledge, generate

hypotheses, implement appropriate interventions and develop goals

based on self-assessment.

Focus: to perform all competency skills the clinical setting effectively,

competently and proficiently according to current legal and ethical

standards.

Student Supervision: Transition from full-time supervision/advisement/instruction to

collaborative process based on student self-assessment and clinical

instructor facilitation.

Student Assessment: Clinical Performance Evaluation online

COORDINATION OF CLINCICAL EDUCATION

The clinical education curriculum of the Physical Therapist Assistant Program is a coordinated effort between Union County College and the various clinical sites. Union County College has affiliation agreements with many clinical facilities in the greater New Jersey area. Affiliation agreements are established on an ongoing basis and include regional, national clinical sites.

A copy of the Union County College Affiliation Agreement is found in Appendix A. Certain centers have their own agreement that is reviewed by Union County College counsel and then signed by the Union County College administration.

The Academic Coordinator Clinical Education (ACCE) makes every attempt to develop clinical sites that provide the best opportunity for the implementation of theoretical concepts offered as part of the didactic curriculum. In the event that a student is interested in particular facility or wants to complete an internship in a certain geographic area where the Physical Therapy Therapist Assistant Program does not have an affiliation agreement, the student must make an appointment to discuss this with the ACCE. The Clinical Site Information Form completed by the clinical sites is available for the student to review.

CLINICAL EDUCATION PARTICIPANTS ROLES AND RESPONSIBIITIES

ACADEMIC COORDINATOR OF CLINICAL EDUCATION (ACCE)

The Coordinator of Clinical Education is the faculty member responsible for the clinical education component of the Physical Therapist Assistant Program curriculum. The responsibilities of the ACCE are to direct, coordinate, facilitate, administer and monitor activities on behalf of the PTA program. The ACCE collaborates with the academic and clinical faculty.

These Responsibilities include the following:

- Develop, monitor, and refine the clinical education component of the curriculum.
- Ensure quality learning experiences for students during clinical education.
- Evaluate students' performance and their ability to integrate didactic and clinical learning experiences and to progress within the curriculum.
- Educate students, clinical and academic faculty about clinical education.
- Ensure that the clinical learning environment demonstrates characteristics of sound patient management, professional behavior, and currency with physical therapy practice.
- Ensure that the clinical education program maximizes available resources.
- Provide documented assessment of the clinical education component.
- > Develop strategies to actively engage core faculty participation in clinical education planning, implementation and assessment.
- > Provide feedback enhance curricular development.
- Provide effective coaching, counseling and conflict resolution skills.

The Clinical Education office of the Physical Therapist Assistant Program is located at:

Union County College 232 East Second Street, Annex Building Room #202 Plainfield, NJ 07060-1308 Dr. Marie Helene McAndrew, PT, DPT 908-412-3541 marie.helene.mcandre@ucc.edu Program Secretary Phone - 908-791-4917 Program Fax - 908-412-3548

CENTER COORDINATOR OF CLINICAL EDUCATION (CCCE)

The center coordinator of Clinical education is an experienced clinician, experienced in clinical education, interested in students, possessing good interpersonal, communication and organizational skills, is knowledgeable with respect to the clinical center and its resources and serves as a consultant in the evaluation process.

The CCCE's responsibilities include demonstration of:

- Possessing the specific qualifications necessary for coordinating the assignments and activities of students at the clinical center.
- Effective communication and interpersonal skills.

- > Effective instructional skills.
- > Effective supervisory skills.
- > Effective performance evaluation skills.
- Effective administrative and managerial skills.

CLINICAL INSTRUCTOR (CI)

The Clinical Instructor has a minimum of one year of clinical experience and demonstrates a willingness to work with students by pursuing learning experiences to develop knowledge and skills in clinical teaching.

The CI's responsibilities include demonstration of:

- Clinical competence, professional skills and ethical behavior in clinical practice.
- Effective communication skills.
- > Effective interpersonal skills.
- Effective instructional skills.
- > Effective supervisory skills.
- > Effective performance evaluation skills.

STUDENT

The student is the individual enrolled at Union County College in the Physical Therapist Assistant Program. The student must work with the ACCE, CCCE and CI to ensure that the clinical experience is optimal.

The student is responsible for the following:

- Actively participates in clinical education process with the ACCE.
- Complies with all student policies and procedures.
- Complies with all health facility policies and procedures.
- > Submits updated student health information on a yearly basis.
- Submits documentation of ongoing certification CPR and First Aid to the ACCE.
- Submits documentation of ongoing liability insurance in addition to College group plan.
- Accepts the American Physical Therapy Association's Core Values and follows the APTA's Code of Ethics. Guideline for Professional Conduct, and Standards of Practice for Physical Therapy and Guidelines for Physical Therapy Documentation. (Appendix B)
- Notifies the ACCE and clinical site of any change of address and telephone number.
- Actively participates as an adult learner in the clinical education process with the clinical faculty.
- ➤ Completes ongoing assignments and self-assessments during the clinical internship process.
- Discusses any problems related to clinical placements with the ACCE in a timely fashion.
- Completes a self-evaluation and an evaluation of the clinical site at completion of the experience.
- Complies with clinical site requirements for criminal background checks, fingerprinting and/or drug testing to meet clinical facility standards and requirements.

All Union County College students are required to have health care insurance coverage. It is not the responsibility of the clinical education facility to offer or provide health insurance to the students.

Affiliating students are not considered employees of the clinical site so are not entitled to employee benefits. Specifically, they are not covered under the Workman's Compensation Act. In the case of an accident or emergency, the affiliate should provide emergency care at the students' expense.

HEALTH CLEARANCE

The college along with our affiliates requires that students have a health assessment and appropriate immunizations including Hepatitis B negative TB test prior to the Clinical Education experience. An update of certain health information prior to the start of Supervised Clinical Education full time seven week rotations may be required, depending on affiliate expectations.

It is the student's responsibility to obtain the proper Health Clearance Form and present it to the CCCE at each clinical site no later than the first day of clinical experience. A copy will also be kept in the student file in the program office.

It is the student's responsibility to be aware of the health clearance policy and to ensure that all necessary items are completed. It is also the student's responsibility to be aware of any specific health requirements of the affiliating site and to comply with these requests. The ACCE confirms that each student has obtained a Health Clearance Form prior to beginning the part time clinical rotation fall semester. It is the student's responsibility to update the health clearance form as needed for the full time seven week rotations spring semester.

MEDICAL PROBLEMS

Any student with a medical problem that could potentially endanger the other students in the classroom or patients in the clinical situation is requested to set up an appointment with the Program Coordinator to discuss the necessary safety precautions.

CPR/FIRST AID REQUIRMENTS

Students are required to complete a First Aid and CPR certification course for Healthcare Provider as stated earlier. Proof of certification must be presented to the Program Coordinator <u>prior</u> to admission to clinical courses. Failure to do so may result in a delay with the clinical experience for the courses PTA 217 and/or PTA 224.

OSHA TRAINING

Students are required to demonstrate a clear understanding of OSHA regulations regarding universal precautions and blood borne pathogens prior to attending the first clinical course. Documentation of attendance and course content will be provided to affiliates upon request.

HIPAA

The Health Insurance Portability and Accountability Act of 1995 (PL-104-191) is a federal law which, among other things, requires that heath care providers develop and implement policies and procedures to ensure the integrity and confidentiality of patient information. Students are required to demonstrate an understanding of the law prior to attending their first clinical education experience. Documentation of attendance and course content will be provided to clinical sites upon request. Students are required to sign a HIPPA form indicating understanding of privacy issues prior to the first clinical affiliation.

CLINICAL COMPETENCE

No student is to perform a skill not checked off on his/her competency checklist by a Union County College faculty member unless the skill has been presented by the clinical instructor and in their clinical expertise deem the student safe to perform under their supervision.

CLINICAL EDUCATOR DEVELOPMENT

The Physical Therapist Assistant Program and Union County College appreciate the commitment made by the clinical educators to the physical therapy students. Union County College will periodically offer the clinical facility staff the opportunity to attend workshops and clinical education seminars relative to physical therapy education. In addition, the program has developed a web-page specifically for clinical education. On this web-page clinical faculty can find relevant research articles uploaded and/or PowerPoint presentations. In addition, there is an opportunity for clinical faculty to blog each other about clinical education issues. Forms for clinical education will also be posted. The web link address is www. UCCPTACI.edu

In addition, all clinical faculty are invited to obtain access to the college library databases. To do so please e-mail the program administrative assistant Kathleen.Wittrock@UCC.edu and proper forms will be mailed to you.

OTHER EDUCATIONAL BENEFITS

Faculty In-Services

The Clinical Education Faculty and the Academic Coordinator of Clinical Education (ACCE's) at Union County College are available for support or consultation regarding the clinical education process. We can offer you advice in establishing a new clinical education program, assistance on how to more effectively handle a specific student situation, or how to implement alternative teaching models.

Student in-Services and Projects

Students are expected to provide at least one professional presentation or complete one administrative project during <u>each</u> clinical experience. Presentations or projects may be in the form of a case study, journal article review, the development of an exercise protocol, or and in-service focused on one particular area of interest to the staff or the clinical site that supports evidence-based practice.

PROFESSIONAL RECRUITMENT

Clinical facilities find that having affiliating students is a pleasant and effective way to recruit new staff. As a prospective employer, you will have an opportunity to share with your students the unique career opportunities available at your facility. During the educational experience, you will be able to observe the strengths and potentials of each student as they assume some of the roles and responsibilities required of your staff.

PROFESSIONAL GROWTH AND REWARDS

There are many intangible rewards that come from working with students. Most therapists enjoy the challenge students bring to the clinical setting. Student questions, enthusiasm and new ideas can be stimulating. Some Clinical Instructors (CI's) find they truly enjoy working with students and go on to become Center Coordinators of Clinical Education (CCCE's) or part time faculty members in the Physical Therapy programs. Many Clinical instructors find great satisfaction in knowing they have facilitated the growth of a future Physical Therapist Assistant.

CONTEXT FOR CLINICAL LEARNING EXPERIENCES

(Normative Model of Physical Therapist Assistant Professional Education: Version 2007)

Characteristics of student learners

- > Students are expected to identify and articulate their learning expectations in the clinical site.
- > Students are aware of personal learning, teaching, and communication styles.
- > Students actively engage in a dialogue with the CI and/or CCCE about each other's learning teaching and communication styles.
- > Students recognize that clinical education does not occur in a vacuum within the physical therapy department; students recognize other duties of the CI beyond patient care delivery.

Characteristics of Clinical Instructors

- > CI/CCCE demonstrates to students that clinical education occurs within the broader context of the facility services, patient needs and health care systems.
- ➤ CI articulates and demonstrates to students other duties/responsibilities of the CI beyond the provision of patient care (e.g., administration responsibilities, peer review, utilization review).
- ➤ CI/CCCE demonstrates ethical and legal practice and gives evidence of the same.
- > CI/CCCE follows safe practice and risk-management guidelines of the clinical site when determining the level of supervision provided to the student.
- The CI/CCCE recognizes the importance of self-directed learning opportunities.
- > CI/CCCE shares with the student how and why they decide to provide and progress a level of supervision.

Planning of the Clinical Education Experience

- ➤ Orientation is provided by the CI and/or CCCE in a comprehensive, cost-effective manner. If this orientation does not occur the student should contact the clinical course faculty member and the ACCE.
- ➤ Planning and preparation reflect an awareness of the ongoing expectations of the CCCE, CI and academic program during the clinical experience regarding clinical site and academic program goals and curriculum evaluation.
- Soals of the clinical education experience are mutually agreed on and reflect integration of goals of the academic program, student, CI and/or CCCE, and the clinical site.
- Evidence exists that clinical educators understand the curriculum of the academic program (particularly important: the CI obtains the specific course syllabus or outline with goals and objectives for the clinical courses).
- The clinical site implements a backup plan in situations where a CI may not be available to fulfill the clinical education agreement (maternity leave, practice consolidation, reduction in patient caseload) with the academic program and the student.
- ➤ Clinical sites (CCCE, CI) and academic programs (ACCE) share information about methods taught and used to conduct clinical decision making.
- Rules for formal and informal communication are mutually agreed on by all parties (ACCE, CCCE, CI and student) involved in clinical education.
- Clinical educator (CI, CCCE) involve students in other professional roles beyond those of direct patient care delivery.

Organization of the Clinical Experience

- The CI and/or CCCE provide opportunities for student self-learning, including engaging in intellectual discussions.
- Clinical educators provide opportunities for students to be a part of delivery teams.
- Clinical Educators incorporate into the clinical experience opportunities for students to demonstrate and utilize teaching skills (e.g., teach aides, patients, caregivers, and others).
- Staff members who are not CI's are ready and receptive to participate in some aspects of a student's clinical experience.
- Clinical educators involve students in projects that advance patient goals but that are not necessarily within the provision of direct "hands-on" patient care (communicate with others to further patient goals).
- CI's explicitly engage student in clinical decision making.
- The clinical site arranges when possible for extended student learning opportunities, including observation of other disciplines and special programs (e.g., surgery, round, case conferences.).

Evaluation/Assessment

- The CI uses honest and timely constructive feedback throughout the student's learning experience, with sensitivity to the timeliness of the feedback and the need to reflect both the student's strengths and limitation.
- > Students demonstrate modification of their performance by incorporating feedback from the CI.
- > Students perform meaningful self-assessment (e.g., keeping weekly logs with a summary that identifies their perceptions of their strengths and weaknesses).
- > Scheduled time is set aside for feedback between the student(s) and the CI and/or CCCE.
- Students will show an improvement in their ability to perform over the course of the clinical experience.
- There is a process/mechanism for the CI, CCCE, and the student to address student performance in affective, psychomotor, and cognitive domains throughout all clinical experiences, with particular emphasis on the affective domain during the first full-time experience.
- ➤ Upon early identification of student performance deficit(s), remediation will preferably occur by the CI, CCCE, and or the ACCE during the first clinical experience and throughout all other clinical experiences as needed.
- Students, ČI's and CCCE's are held accountable to address professional behaviors.

CLINICAL EDUCATION PROCEDURES

Clinical Education Placement Assignments

Every effort is made to vary student's clinical experiences by having them affiliate at different types of facilities including urban general hospitals, community hospitals, rehabilitation centers, community agencies and specialized facilities (i.e. pediatric, geriatric, sport medicine clinics, private practices, and home care as per state regulations). We strive to provide each student with a variety of clinical experiences. Changes in facility rotations, cancellations, and other unexpected circumstance occasionally create the need to reassign a student after initial placements. Clinical sites are notified when a student is placed at a facility and/or if it becomes necessary to cancel a placement.

Clinical Placement Selection Process

The allocation process starts approximately 1-1/2 years in advance of an experience. The ACCE's sends out requests to the clinical sites for placement availability annually in March at the same time as most other PTA schools. These requests are sent to a large number of clinical sites, including those with established clinical education contracts and those other sites we wish to establish as a clinical education partner. We are dependent on these sites to respond with formal commitment to host a student in a timely manner. However, issues (e.g., short staffing, vacation times, and other student commitments) may prevent a facility form making a commitment which can delay this process.

Student Data Form

Students are required to complete a student data form for each clinical education course. This form is designed as a self-evaluation tool and as a way for the student to highlight his/her learning style and experience. Students are responsible for sending this completed form to assigned clinical sites. CCCE's and Clinical Instructors (CI's) find this information helpful in a planning a meaningful clinical experience for students.

Attendance and Tardiness

Students are expected to attend each day scheduled by the clinical education facility including days that the college may be closed due to inclement weather or holiday. A *total* of three days of absences are allowed across all three clinical courses. The student is not allowed to use these days as travel days or for personal business. Any additional days of absence must be made up in a manner that is acceptable to the clinical site(s). In cases of illness or extreme emergency, the student must notify the CI or CCCE as soon as the clinic opens. Students are also required to call the Program secretary and contact by phone and email the ACCE on the day of absence.

It is mandatory that the student clear the makeup schedule with the school's clinical coordinator PRIOR to your making the arrangements with your clinic. Confirm these arrangements in writing. Failure to follow the ENTIRE program policy regarding clinical absences will result in failure of the clinical rotation and removal from the affiliation

The student must adhere to the schedule established by the ACCE at the clinical site. This might involve a non-traditional schedule such as working four ten hour days, working on a weekend, or working an unconventional shift. If the student is occasionally requested to work more than forty hours per week, this may be counted as make-up time.

Tardiness is not acceptable. In the event of an emergency, the student must call the clinic as soon as possible to notify the ACCE or CI of the situation. All missed time must be made up at the CI's convenience. Three or more episodes of unexcused tardiness will result in a failing grade for the course.

Clinical Site Location

All students require a car for clinical education. Given the geography of our region, public transportation is most often not possible. A student can be assigned to a site up to 2(two) hours driving distance from the campus (one-way). An attempt will be made to minimize the commute or consider a site that is located closer to an off-campus address. Note that although this attempt is made, a short commute cannot be guaranteed. Commuting to clinical placements may also include traveling on bridges/tunnels/ highways that have tolls. Additionally, it is the responsibility of the student to promptly alert the ACCE if housing arrangements change. If an address change is made less than 4 months before the anticipated start date of a clinical experience, the consideration of commuting distance cannot be guaranteed.

Contract Maintenance Affiliation Status

In a continued effort to maintain contracts with clinical sites, contracts are reviewed prior to the student's start date. No student will be permitted to start any clinical experience at a facility that does not have a full executed clinical contract with Union County College and which is valid for the duration of the experience.

New Contract Development

Students are not permitted to arrange their own clinical experiences. A student interested in a particular facility must discuss this with the ACCE. Any potential new clinical site must undergo an evaluation and contract process that is managed by the ACCE's. This is a very lengthy process, and sometimes takes up to 1½ years from the initial contact to obtaining a finalized contract. Any student with an interest to have an experience at a new site should contact the ACCE as early as possible. Although the program and the ACCE's are interested in diversifying and broadening our site affiliations, the process can be very lengthy since all clinical site and locations must be evaluated before engaging in the contract process.

Dress Code

All students are expected to dress in a neat, professional manner while completing clinical education experiences. It is the student's responsibility to determine the dress code of the facility prior to the first day of clinical education experience and to abide by this for the remainder of the course. If the student does not meet the dress requirements of the clinical site, the CI or CCCE has the right to ask the student to leave and return with the appropriate attire. Missed time must be made up. If the clinic does not have a standard for dress code i.e. Scrubs it is expected that the student will wear the school polo and khaki pants, and name tag.

Students are also expected to be neatly groomed at all times. Long hair must be tied back, nails should be short and neat. The use of artificial finger nails is not allowed. Any jewelry that may interfere with the safety or effectiveness of patient treatment is prohibited. Students are asked to refrain from the use of colognes or heavily scented cosmetics as patients may be sensitive to fragrances. "Appropriateness" of the student grooming and attire is determined by the ACCE and/or CI at the clinical site.

Each student name tag should be worn in a clearly visible location each day for the clinical experience. The name tag states the student's name and "Student Physical Therapist Assistant" Each student is

required to wear a watch with a second hand and to obtain his/her own lab coat if one is required by the clinical site.

Assignments

All clinical assignments are to be handed in on time. Students are required to complete an inservice presentation. A copy of the in-service presentation must be submitted to the course faculty member. Additionally, it is the student's responsibility to assure that the course faculty member at Union County College has the following documents at the end of each affiliation (except the one day a week observation):

- 1. CPI—Clinical Performance Instrument
- 2. Student Evaluation of Clinic
- 3. In-service and case studies presented and weekly journal entries

CLINICAL PERFORMANCE INSTRUMENT (CPI)

INTRODUCTION

Class of 2017 and subsequent classes will be evaluated using the CPI-Web internet-based tool or if preferred by paper copy version will still be used. For more information on the CPI-Web see below after this section on the paper-based CPI.

The Physical Therapist Assistant Program at Union Count College has adopted the Physical Therapist Clinical Performance Instrument (CPI), developed by the American Physical Therapy Association, as the instrument to evaluate the full-time clinical performance of the student.

The CPI is designed to evaluate student clinical performance in relation to entry-level competence. It is applicable to a broad range of clinical settings and throughout the continuum of clinical learning experiences. Every performance criterion in this instrument is important to the overall assessment of clinical competence, and most of the criteria are observable in every clinical experience. The student and the CI must discuss the student's performance at the time of the final evaluation. The form will be returned to the ACCE at the completion of the practicum. The ACCE reviews the form and other evidence speaking to the performance of the student and determines the grade.

Using the Form

There are 14 performance criteria to be evaluated on the new Web-based version. In aggregate, these items describe all essential aspects of contemporary professional practice for a physical therapist assistant clinician performing at entry-level. The CI is required to use professional judgment to determine the student's level of performance. Before judging the student on each of the performance criteria, five performance dimensions must be considered. These performance dimensions are common to all types and levels of performance. However, the expectations may change in each dimension as the student progresses toward entry into professional practice. The five performance dimensions are: quality of care, supervision/guidance required, consistency of performance, complexity of tasks/environment, and efficiency of performance.

Quality of care: refers to the degree of skill or competence demonstrated, the relative effectiveness of performance, and the extent to which outcomes meet the desired goals. For example: A student who exhibits high skill in performance but low efficiency or effectiveness would be marked lower on the VAS than one whose performance combined high skill with efficiency or effectiveness.

<u>Supervision/guidance required:</u> 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 monitoring needed is expected to progress from full-time monitoring or cuing for assistance to independent performance with consultation. The degree of supervision and guidance may vary with the complexity of the patient or environment.

<u>Consistency</u>: refers to the frequency of occurrences of desired behaviors related to the performance criterion. Consistency of quality performance is expected to progress form infrequently to routinely.

<u>Complexity of tasks/environment</u>: refers to the multiple requirements of patient or environment. The complexity of the environment can be altered by controlling the number and types of elements to be considered in the performance, including patients, equipment, issues, etc.

<u>Efficiency of performance:</u> refers to the ability to perform in a cost-effective and timely manner. Efficiency is expected to improve from a high expenditure of time and effort to economical and timely.

Red Flag Item: A flag to the right 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 practice. Difficulty with a performance criterion that is a red-flag item warrants immediate attention and a telephone call to the ACCE, and may include remediation and/or dismissal from the clinical experience.

Rating Scale

The rating scale was designed to reflect a continuum of performance ranging from —Beginning Performance to —Entry-Level Performance.

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.

<u>Entry-level performance</u>: A student who consistently and efficiently provides quality care with simple or complex patient in a variety of clinical environments. The student usually needs no guidance or supervision except when addressing new or complex situation.

<u>Sample Behaviors</u>: The sample behaviors may be used to guide assessment of students' competency relative to the performance criteria. Given the uniqueness and complexity of clinical practice, the behaviors provided are not meant to be an exhaustive list. There may be additional or alternative behaviors relevant and critical to a given clinical setting.

<u>Significant Concerns Box:</u> A check in this box indicates that a student's performance on the criterion is unacceptable and places the student at risk of failing the clinical experience. When the box is checked, written comments are required and a phone call is placed to the ACCE.

<u>With Distinction</u> Box: A check in this box indicates that the student's performance on the criterion exceeds expectations for the clinical experience and written comments are required.

<u>Not Observed Box:</u> This should rarely be checked. If you are considering marking this box relative to a specific criterion, please carefully review the sample behaviors listed for the criterion.

<u>Comments:</u> Comments are encouraged for each performance criterion. They should elaborate or clarify students' performance ratings. Comments may include critical incidents, problem or deficit areas, and/or exemplary areas of performance.

<u>Summative Comments:</u> This provides a mechanism for the CI to identify, clarify, and highlight students' overall objective performance as related to their areas of strength, areas needing improvement, and other relevant comments. These Comments should be based on the student's performance relative to the expected performance goal for the clinical experience.

MIDTERM CONFERENCE

Midway through each clinical education experience, the CI and the student meet to formally review/compare the student's performance as measured on their online CPI. Progress and areas for improvement should be noted and goals for the remainder of the experience should be set. Both the student and the CI must sign off online for the ACCE to access it. The student's signature indicates that the student has reviewed the document, but it does not indicate agreement with the review. If the student disagrees with the CI review at midterm, the student is expected to contact the assigned ACCE.

The assigned ACCE or another clinical faculty member will contact the clinical site at or about the midterm. Ideally, the college faculty member will be able to interview both the CI and the student. The ACCE will participate in the midterm conference. Depending on the distance from the college and the needs of the clinical site and the student, this interview will either involve a site visit or a telephone interview. If time and schedules permit, the faculty member may wish to observe the student during a patient evaluation or treatment session.

The purpose of the midterm conference is to ensure that the clinical education experience is going well for all concerned (student, ACCEs and CI(s) and that the educational objectives are being met. This conference provides college faculty with an opportunity to help identify any problems and address these with an Action Plan. See the Appendix for a copy of this form.

Midterm conferences also help to promote effective communication between the college faculty and the faculty at our clinical sites. It enables the ACCEs and the clinical faculty to learn about the unique educational opportunities available at each facility, to establish working relationships, and ultimately, to help facilitate optimal matching of students with sites.

The midterm conference provides an opportunity to discuss the student's strengths, areas for growth, learning style, and goals. The student's feedback is an important component of this discussion. If the student is having difficulty achieving the required level of competency, an Action Plan will be developed. This plan will identify specific goals, which need to be reached, and strategies that will be employed to remediate the deficiencies for the student to pass the course. The faculty member, the CI, and the student will sign the Action Plan. The faculty member with follow-up with phone calls or visits as deemed necessary. The goal of the Action Plan is to help the student and clinical instructor(s) work together to facilitate successful completion.

In addition to the midterm conference, the ACCE is always available to aid clinicians and students should any questions or concerns arise during the clinical education experience. The student, CI, and/or CCCE are encouraged to call the ACCEs at any time and for any reason.

The CI/CCE must inform the ACCE in cases where student performance is below minimal acceptance. (Poor performance should be documented using the anecdotal record and/or the critical incident report). This should occur as soon as the problem is identified so that the ACCE can assist in resolving the problem. A meeting of the CI, ACCE and the student may be scheduled to develop a plan for resolution of the problem. An educational contract will be drawn up to provide specific criteria that must be met within a specified period. In some cases, this may involve extending the time frame of the practicum/internship.

FINAL CONFERENCE

At the end of the clinical experience, the student and the CI will again meet formally to review/compare their completed online CPI. The online CPI should be signed off by both parties for the ACCE to access it. We ask that the CI and student upload the final CPI within one of week completion.

GRADING

In accordance with APTA and college policies, the ACCE is responsible for assigning the final grade and this is done according to the criteria described below. Assigned grades are based on the information contained in the CPI and/or consultation with the student, CI and ACCE. The type of clinical rotation, type of patient diagnoses treated, degree of challenge presented, pace, and expectations of the clinic are all considered. Any student who does not meet the minimum passing criteria for any clinical education experience will be dismissed from the program with no readmission recourse.

Satisfactory:

Minimum competency levels, as defined for each course, have been reached by the end of the clinical experience

Unsatisfactory:

- Minimum competency levels, as defined for each course, have not been reached by the end of the clinical experience;
- The gap between student competence and clinic expectation is so great that the student will be unable to meet the objectives and is asked to leave the facility before the end of the assigned time frame; or
- The CCCE request removal of the student for good cause (e.g., insubordination, non-compliance with policies or procedures, unsafe, unprofessional, or unethical behavior).

Withdrawal

In addition to college policy, the following criteria must also be met to receive a grade of Withdrawal:

- > Student is unable to complete the clinical due to illness (medical documentation is required);
- Student is unable to complete the clinical due to family crisis or emergency; or
- > Student, CCE, and ACCE agree that the site is unable to meet or accommodate the student's learning needs.

The ACCE may terminate a clinical experience at any time if it is felt that the student will be unable to meet the course objectives. Prior to termination, the student may be given written notice that he/she is in danger of failing if possible. This notification may include an educational contract with specific learning objectives set in a detailed period.

Problems resulting from inappropriate professional behaviors or patient safety may result in termination of the clinical practicum/internship and an automatic failure in the course.

Students at any point in time may be asked to leave the clinic by the CI or their supervisor due to unsafe, unprofessional, unethical, and or inappropriate behavior. Additionally, a student may be remove from a clinic site by the CCCE due to unsafe, unprofessional, unethical, and or inappropriate behavior. Students who have been removed from a clinical agency because of unsafe and/or unprofessional behavior will be dismissed from the program. Students who are asked to leave the clinical agency may not return to that agency as a student of the program.

In a situation where a student, of his/her own accord, choose to leave a clinical placement and does not discuss the problem with the ACCE and the CCCE, will be dismissed from the program for professional abandonment.

A student may request a withdrawal from a clinical for extenuating life circumstance or medical conditions. The student must provide documentation regarding the request in writing. The ACCE will present the case to the program coordinator or Dean. The student will be informed of the decision in writing. Scheduling of different clinical placements is done individually and is subject to clinic availability which may result in postponement of continuation in the Physical Therapist Assistant Program and/or graduation.

Incomplete

According to college grading policies, the period to request an Incomplete is restricted to the first six weeks of the next regular semester from the date it is first recorded on the student's permanent record. A grade of Incomplete is warranted if the following criteria are met:

- For CPI Criteria 1,2,3,4,7 the student has reached the competency level required for this clinical course; and
- > The ACCE has determined that failure to meet minimum competency levels required for this clinical course for Criteria 6-14 is due to extenuating circumstances.

COMPLIANCE WITH POLICIES AND PROCEDURES

The Physical Therapy Assistant Program emphasizes to each student the importance of conforming to the appropriate rules and regulations of the clinical site. Students are required to follow all rules and policies, whether provided by college or the clinical site. The CI and the CCE have the right to enforce the policies of the facility and to expect that the student will follow the policies of the college as established in this handbook. As stated in the Agreement for clinical education experiences, the clinical education site has the right to request the college to remove any student upon good cause. Should any problem arise with non-compliance of policies or procedures, the CCCE or CI should notify the ACCE who will immediately assist the facility and the student in resolving the difficulties. Any insubordinate, unprofessional, unsafe or unethical behavior, which results in the clinical site requesting removal of a student, will automatically result in a grade of unsatisfactory for that student and dismissal from the program.

Failure to report to the clinical site on any assigned day or leaving the clinical site without permission of the CCCE or ACCE will result in removal from the site and a failing grade. This excludes emergencies or sick days for which prior permission is not possible. Documentation will be required for any extended period of illness or emergency.

SITE EVALUATION

Upon completion of each clinical experience, the student is asked to complete a Student Evaluation of the Clinical Education Experience This form is designed to provide feedback to the clinical facility and the ACCE regarding the opportunities and experiences at the clinical facility. The student is asked to provide the clinical site and the college with a copy of this form. The program office maintains these evaluations on file for reference by future students considering placement at the clinical site evaluated.

CLINICAL FACULTY EVALUATION

The CCE, CI and the student is asked to complete a CI Assessment form. This form is designed to provide feedback to the clinical faculty and the ACCE. This information is utilized to identify possible professional development needs.

CLINICAL REFLEXIVE JOURNAL for PTA 217 and PTA 224

Guidelines:

- 1. Make a bi weekly entry.
- 2. Do not make your journal a documentary.
- 3. Use your journal for reflection.
- 4. Focus on yourself using the essential skills and professional behaviors as a guide.
 - a. reflect on the type of patients treated and the clinical milestones. accomplished or not accomplished during the week.
 - b. reflect on your reactions to these.
- 5. Write about:
 - a. What you learned.
 - b. Was it a worthwhile will learning experience?
 - i. If so, why?
 - ii. If not, why not?
 - c. Your feelings regarding the clinical experience.
- 6. Write down your reactions, questions, comments, criticisms and insights about the clinical experience.
- 7. Did you gain any insight into your own thoughts, feelings, and/or actions?

Goals:

- 1. To think about the curriculum content outside the classroom.
- 2. To promote critical thinking about how the clinical experience affects, your professional behavior, confidence, competence, and communication skills necessary for optimal patient-practitioner interaction.
- 3. To develop the habit and skill of using a reflective journal.

In-Service Presentations during Clinical Experiences

Performing an in-service at the clinical site is a professional service to the facility demonstrating your appreciation for their time and effort in mentoring you as a student. It is an opportunity for you to showcase your knowledge and professionalism in the role of an educator. The presentation is also an opportunity for you to contribute to the knowledge and skills of your peer professionals and engage in a critical discussion of clinical issues.

Grab this opportunity and make the most of it!

When planning and conducting the in-service follow these steps:

- > Start planning the in-service in the first weeks of the rotation including setting a date and time.
- Investigate what topic is relevant to the clinic, the staff and the Clinical Instructor.
- Send an email to your PTA 217 faculty member regarding the topic and clinical relevance. Specify if you intent to use material from professors in the PTA program.
- If a special project is being identified to serve as your in-service notify your course faculty member immediately.
- ➤ Identify your audience. Make sure that the information presented is valuable to them.
- Perform a literature review of the topic that should include at least 2 peer reviewed journal articles.
- > The material to be presented should include a critical discussion of the available literature and be based on evidence based practice (EBP).
- Include a discussion point how your topic relates to the APTA guide to PT practice.
- Should you want to use PowerPoint slides or other material from professors in the PTA program you must get written permission for all slides/material. The number of slides from a professor should not exceed 25% of your presentation.
- ➤ Produce a presentation including supporting visual material such as PowerPoint, overheads etc.
- Show a draft of the presentation to your CI no later than 1 week before the presentation. The CI must pre-approve the material before conducting the in service.
- Provide a handout for the audience including a literature reference and information about where to find more information (if appropriate).
- After the presentation recruit feedback from the Clinical Instructor about your performance and the material presented.

Guiding Elements for the Case Study*

The case study should address all of the essential elements of patient management: examination, evaluation, diagnosis, prognosis, intervention, and outcome. Refer to the *Guide to Physical Therapist Practice*.

The following are suggestions for focusing the case study:

- Select a patient whose diagnosis was difficult to make.
- Describe changes in one or more patients with chronic conditions over an extended period of time.
- Report on two or more patients with similar characteristics who received different interventions and had different outcomes.
- > Report on the atypical management of common problems.
- > Report on unusual patients.
- > Apply theory to patient management.

Components of a case study:

- Introduction: Introduces the topic of the case and states why it is important, citing literature to support the management of the case.
- ➤ <u>Case Description:</u> Includes information about the subject, the examination, the hypothesis about cause and the intervention. Completed documentation templates, found in the *Guide to Physical Therapist Practice*, must be included in an appendix.
- Outcomes Section: Describes the status of the subject after the intervention.
- Discussion: Reflects on possible reasons of explanation.

Hypothesis-Oriented Algorithm for Clinicians II

The **HOAC II** model for clinical decision making should serve as a guideline for your understanding of the PTA process for implementing the treatment planning. (Rothstein J, et al: "The Hypothesis-Oriented Algorithm for Clinicians II (HOAC II): A Guide for Patient Management" <u>Physical Therapy</u>: 2003(5):455-470.

Paper Preparation

All papers must be submitted double-spaced, with pages numbered. Consult the APA Manual of Style for format and reference style.

*Adapted from Writing Case Reports: A How-To Manual for Clinicians, Irene McEwen, PT, PhD, PCS, American Physical Therapy Association 1996. *

UNION COUNTY COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM 232 EAST SECOND STREET PLAINFIELD, NEW JERSEY 07060

TELEPHONE: 908.412.3541 FAX: 908.412.3548

MEMORANDUM

TO: CCE'S AND CI'S

SUBJECT: RATING STUDENTS WITH THE CPI FOR THE FALL SEMESTER SYLLABUS FOR PTA 217- CLINICAL EDUCATION

The following guidelines are intended to assist you in rating the PTA students from Union County College for this intermediate clinical affiliation.

At the end of the clinical experience students at a minimum should achieve Advance Beginner anchor for criteria 6-14 and Advance Intermediate anchor for criteria 1, 3, and 5 and criteria 2, and 3 Entry Anchor.

As the course instructor, I will assign the course letter grade after reviewing each CPI Evaluation and course requirements. The student must receive a composite score of a C+ to successfully complete the course. Union County College has adopted the following guideline to represent the minimal level of acceptable performance (C+) by a student at the completion of this clinical experience.

PLEASE NOTE:

By midterm a student must score at least as a vertical line after Beginner Level Anchor working towards Advanced Beginner level for criteria 6-14, for criteria 1,3, and 5 at Advance Beginner level and for criteria 2,3 Advanced Intermediate. If the student falls below that standard he/she may receive a Learning Plan or may be removed/dismissed from the clinic site which would result in a clinical failure.

If you have any questions or concerns please contact me at your convenience at Marie-helene.mcandre@ucc.edu or 908-412-3541.

Professionally,

Marie-Helene McAndrew PT, DPT

UNION COUNTY COLLEGE PHYSICAL THEARPIST ASSISTANT PROGRAM 232 EAST SECCOND STREET PLAINFIELD, NEW JERSEY 07060

PTA 217	
Criteria	
1	The student displays this behavior at an Advance Intermediate anchor
2	The student displays this behavior at Entry level anchor
3	The student displays this behavior Entry level anchor
4	The student displays this behavior Advanced Intermediate level anchor
5	The student displays this behavior Advanced Intermediate level anchor
6	The student displays this behavior Advanced Beginner anchor
7	The student displays this behavior Advanced Beginner anchor
8	The student displays this behavior Advanced Beginner anchor
9	The student displays this behavior Advanced Beginner anchor
10	The student displays this behavior Advanced Beginner anchor
11	The student displays this behavior Advanced Beginner anchor
12	The student displays this behavior Advanced Beginner anchor
13	The student displays this behavior Advanced Beginner anchor
14	The student displays this behavior Advanced Beginner anchor

UNION COUNTY COLLEGE PHYSICAL THEARPIST ASSISTANT PROGRAM 232 EAST SECCOND STREET PLAINFIELD, NEW JERSEY 07060

TELEPHONE: 908.412.3582 FAX: 908.412.3548

MEMORANDUM

TO: CCE'S AND CI'S

SUUBJECT: RATING STUDENTS WITH THE CPI FOR THE SPRING

SEMESTER SYLLABUS FOR PTA 224- CLINICAL EDUCATION

ROTATION 1

The following guidelines are intended to assist you in rating the PTA students from Union County College for the <u>first</u> seven-week full-time clinical affiliation.

At the end of the clinical experience students at a minimum should achieve for criteria 6-14 Advance Intermediate anchor for criteria 1-5 Entry Anchor.

As the faculty member, I will assign the course letter to each CPI evaluation. The student must receive a composite score of a C+ to successfully complete the course. Union County College has adopted the following guideline to represent the minimal level of acceptable performance (C+) by a student at the completion of this clinical experience.

PLEASE NOTE:

By midterm a student must score at least as a vertical line after Advanced Beginner Anchor working towards Intermediate Anchor for criteria 6-14, and for criteria 1-5 Advance Intermediate working towards Entry level Anchor. If the student falls below that standard he/she may receive a Learning Plan or you may be removed/dismissed from the clinic site which would result in a clinical failure.

If you have any questions or concerns please contact me at your convenience at Marie-helene.mcandre@ucc.edu or 908-412-3541.

Professionally,

Marie-Helene McAndrew PT, DPT

UNION COUNTY COLLEGE PHYSICAL THEARPIST ASSISTANT PROGRAM 232 EAST SECCOND STREET PLAINFIELD, NEW JERSEY 07060

First Seven Week Clinical Rotation

PTA 224

PERFORMANCE CRITERIA

- 1. The student displays this behavior at an Entry-level performance
- 2. The student displays this behavior at an Entry-level performance
- 3. The student displays this behavior at an Entry-level performance
- 4. The student displays this behavior at an Entry-level performance
- 5. The student displays this behavior at an Entry-level performance
- 6. The student has achieved Intermediate performance anchor but is working towards Advanced Intermediate anchor
- 7. The student has achieved Intermediate performance anchor but is working towards Advanced Intermediate anchor
- 8. The student has achieved Intermediate performance anchor but is working towards Advanced Intermediate anchor
- 9. The student has achieved Intermediate performance anchor but is working towards Advanced Intermediate anchor
- 10. The student has achieved Intermediate performance anchor but is working towards Advanced Intermediate anchor
- 11. The student has achieved Intermediate performance anchor but is working towards Advanced Intermediate anchor
- 12. The student has achieved Intermediate performance anchor but is working towards Advanced Intermediate anchor
- 13. The student has achieved Intermediate performance anchor but is working towards Advanced Intermediate anchor
- 14. The student has achieved Intermediate performance anchor but is working towards Advanced Intermediate anchor

UNION COUNTY COLLEGE
PHYSICAL THEARPIST ASSISTANT PROGRAM
232 EAST SECCOND STREET
PLAINFIELD, NEW JERSEY 07060

TELEPHONE: 908.412.3582 FAX: 908.412.3548

MEMORANDUM

TO: CCE'S AND CI'S

SUUBJECT: RATING STUDENTS WITH THE CPI FOR THE SPRING SEMESTER SYLLABUS FOR PTA 224- CLINICAL EDUCATION ROTATATION 2

The following guidelines are intended to assist you in rating the PTA students from Union County College for the <u>last</u> seven-week full-time clinical affiliation.

At the end of the clinical experience students at a minimum should achieve for all criteria 1-14 Entry Level Anchor.

As the faculty member, I will assign the course letter to each CPI evaluation. The student must receive a composite score of a C+ to successfully complete the course. Union County College has adopted the following guideline to represent the minimal level of acceptable performance (C+) by a student at the completion of this clinical experience.

PLEASE NOTE:

By midterm a student must score at least as a vertical line after Advanced Intermediate Anchor for all criteria 1-14. If the student falls below that standard he/she may receive a Learning Plan or may be removed/dismissed from the clinic site which would result in a clinical failure.

If you have any questions or concerns please contact me at your convenience at Marie-helene.mcandre@ucc.edu or 908-412-3541.

Professionally,

Marie-Helene McAndrew PT, DPT

PHYSICAL THERAPIST ASSISTANT PROGRAM FORMS

CLINICAL FORMS

Student Data Form: This form should be completed by the student and provided to the clinical instructor on or before or the first day of the student's clinical rotation. The purpose of this form is to provide your clinical instructor base line information of your learning style and personality to facilitate and open and productive relationship.

Clinical Experience Form: This form should be completed by the student and provided to the clinical instructor on or before the first day of the student's clinical rotation. The purpose of this form is to provide your clinical instructor insight to your clinical exposure as a student.

Personal Data Sheet: This form is to be completed by the student and provided to the CI prior to or on the first day of clinic. This form provides the clinic contact and insurance information.

Initial Week Evaluation: The first week form is to be completed at the end of the first week by the CI and sent to the course instructor by the student. The purpose of this form is to alert the instructor immediately if there are areas that are unsatisfactory for Essential Functions and Generic Abilities. This form is to be completed for all clinical rotations.

Clinical Performance Referral/Warning: This form may be completed in concert with other methods such as a student meeting to inform the student of problem/concerns during their clinical rotation that must be addressed by the student. In addition to this form the student may receive a Learning Plan.

PTA 224 Clinical Experience Tracking Form: This form must be completed at the end of each week by the student and sent to the course faculty member. The purpose of this form is to allow students to reflect on their learning and progression throughout the clinical experience. This form also serves as a tool that the faculty may use to guide feedback and suggestions to the student. The completed forms may assist students as they complete the midterm and final self CPI.

Weekly Planning Form: This form may be used but is not required to be completed during a clinical rotation. The purpose of this form is to assist the student and CI planning on a weekly basis expectations for student performance to move the student forward in achieving set objectives and anchors for the particular clinical experience.

Anecdotal Record: This form may be used but is not required to be completed during a clinical rotation. The purpose of this form is to assist the student and CI and additional document record for text related to positive or negative student behavior that may not be captured on the CPI tool.

Joint Commission to Excellent Form: This form is to be completed by the end of the first week by the CI and student. The form should be sent to the course instructor by the student.

Critical Incident Report: This form may be completed by the clinical instructor to document a specific event or behavior that is a safety concern for either the student or patient.

Dismissal Notice: This form may be used to document that a student has been informed of their current jeopardy status of failing a clinical experience.

UNION COUNTY COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM STUDENT DATA FORM

Student:		Date:	
	Individu	ual Characteristics Profile	
Personality Style:			
Prepared; supporting		rules; keep at the task while maintain structure and	
Helping en	nphasis, desire to make	e a difference; nurturing; facilitator of other' potential	
	us; loves competition; l a direct line of reason	impulsive; prefers hands-on approach to problem ning.	
Creative; a	bstract thinking; enjoy	s the challenge of problem solving.	
Learning Style: Circ	cle the term that correl	ates with your style:	
Environment:	quiet	noise	
Time of Day:	early	late	
Sociological:	alone	in groups	
Psychological:	short burst	long stretches of time spent on learning	
Visual/Auditor Kinesthetic/Tactile Preference:	tactile/kinesthetic	auditory visual	
Organization:	structured exper	rience create own structure	
Learning Style: con-	crete experience obser	rvation experimentation conceptualization	
Strength Areas:			
Developing Areas:			

Student Name:		
Clinical Experience For	m	
CENTER	TYPE OF EXPERIENCE	DATES
What do you hope your cl	linical instructor will expect of you?	
What are you afraid your	clinical instructor will expect of you?	
what are you arraid your	eninear instructor will expect or you:	
State three educational ob	jectives for this clinical experience.	
1.		
2.		
3.		
	e reasonable accommodations for this ex	vnarianca? Vas/No (Evnlain)
(Optional) Do you require	reasonable accommodations for this e.	xperience: Tes/No (Explain)
Student Signature:		Date:
<i>5</i>		

Personal Data Sheet for Clinical Education

Name:	
Address:	
Cell#:	
Home Phone#:	
Emergency Phone #:	
Email Address:	
Foreign Languages Spoken:	
PERSON TO BE NOTIFIED IN CASE OF EN	MERGENCY
Name:	
Address:	
Cell/Work#:	
Home Phone#:	
Relationship:	
HEALTH INSURANCE	
Name of Company:	
Subscriber Name:	
ID Number:	
Group Number:	
Emergency Phone #:	
Email Address:	
CLINICAL EDUCATION REQUIREMENTS	
First Aid/CPR Certification (date of expiration):	
Hepatitis B Vaccine:	Yes
	<u>No</u>
	Waiver
Mantoux Test (date of last test):	

INITIAL WEEK EVALUATION

First Name:	La	st Name:	Date:	
AFFILIATION SITE:				
The Student	Meets Expectations	Requires Improvement	Comments	
Is Punctual and prepared for the clinic day		Improvement		
Observations skills Demonstrates Professional Conduct				
Demonstrates Adult learning behavior for learning Ex: Initiative				
Communicates Effectively With Peers, Patients and Supervisors				
Demonstrates initial Critical thinking skills				
Accepts and applies constructive feedback				
Demonstrates Competency at expected Skill Level				
Is flexible and adapts to needed changes				
Comments:				
	CLINICA LICENSE	L INSTRUCTOR:_ #:		

CLINICAL PERFORMANCE REFERRAL/WARNING

Student: CWID#:		CWID#:
Instructor: PROBLEM ASSESSMENT	Course:	Date:
 () Absence/Lateness without notification ()Excessive absence () Written requirements late/missing () Communication skills () Lack of adequate preparation for clinical of the control of the control	on nical assignment al) not applied in the clinic	al setting
GOAL:		
LEARNING PLAN/INTERVENTION	<u>S</u>	
 () The student will:	e in the Saturday laboratory ce. completion of written assiguirements as per clinical granization with school/prograss/absence in accordance ce. ation patterns/techniques. or Physical Therapy Practical celor	gnments. uidelines. requirements. ram policies. with policy.
Student Signature:		Date:
Instructor Signature: Date:		Date:
FOLLOW UP Goal achieved Comments:	Goal not achieved	
Student Signature:		Date:
Instructor Signature:		

STUDENT WEELKLY ASSESSMENT Union County College PTA 224 CLINICAL EXPERIENCE TRACKING FORM

Name:	Date:
Affiliation	Week <u>#</u>
1. Identify two positive experiences this week:	
<u>a.</u>	
b.	
2. Identify two experiences or questions that were with your CI.	challenging, or that you would or did discuss
<u>a.</u>	
b <u>.</u>	
3. Identify two clinical skills that have improved o	or continued to improve this week:
<u>a.</u>	
b <u>.</u>	
4. The supervision you received was: adequate	, too little, too much
5. Communication between you and your CI was:	adequate,too little, too much
6. List three measurable goals/objectives to be acc	complished in the coming week:
<u>a.</u>	
<u>b.</u>	
c.	

Weekly Planning Form

- 1. Useful adjunct to summative evaluation
- 2. Promotes program assessment
- 3. Promotes planning

Allows for and promotes student self-assessment

Dates:			Week#
Summary of Previo	ous Week: (progress, fe	edback)	
•	Time In	Lunch In/Out	Total Hours
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Clinical Instructor:			
Goals for the Upco	ming Week:		
Student Signature:		CI Signature	::

Anecdotal Record

- Useful as an adjunct to summative evaluation but does not stand alone well. Can be used to document positive or negative behaviors. 1.
- 2.
- Useful in supporting grades, especially low affective behaviors. Requires student signature. 3.

Student's Name:	Date:
CE/CCE/Observer:	
Setting: (place, persons involved, atmosphere, etc.)	
Student's Action or Behavior:	
Evaluator's Interpretation:	
Student Comments:	
Student Signature:	Evaluator Signature

Joint Commitment to Excellence

The Physical Therapist Assistant Program at Union County College considers clinical education an essential component of the curriculum and an integral part of the academic program. Together the student and CI are committed to the clinical education experience thereby ensuring the student and CI are committed to the clinical education experience thereby ensuring an optimal leaning experience. It is the student's responsibility to take initiative, to be accountable for his/her learning, and to take advantage of opportunities presented during each clinical experience. The clinical instructor demonstrates a willingness to work with students in pursuing learning experiences to develop knowledge and facilitate the integration of clinical teaching.

In order for optimal clinical learning to take place, it is the belief of the Physical Therapist Assistant Program that each of the following must occur between the physical therapist Assistant student and the clinical instructor:

- Active participation in the clinical education process
- Initial establishment of expectations, roles, responsibilities and limitations
- Review of policies and procedures of respective facilities
- Review of students personality characteristics and learning style
- ➤ Identification of student's clinical education goals and plans to meet goals
- Recognition of student's current level of knowledge
- > Regular, ongoing constructive feedback
- Formal and timely mid-term and final evaluations
- Open and honest communication when potential conflicts arise
- Delivery of truthful, accurate and factual information related to clinical content and professionalism.
- Mutual respect for one another on both a personal and professional basis

By signing below, we	and
Acknowledge our support of the Physical Thera <i>Excellence</i> in clinical education, and agree to d aforementioned takes place.	apist Assistant Program's <i>Joint Commitment to</i> do everything that we can to assure each of the
Student Signature:	Date:
Clinical Instructor Signature:	Date:

Critical Incident Report

- 1. Useful adjunct to summative evaluation, but not useful alone.
- 2. Can be used to document a series of similar behaviors, usually problem behaviors.
- 3. No interpretation by observer; just the facts.
- 4. Includes clearly stated consequences for the behavior.
- 5. Requires student signature.

tudent:		Date:	
I/CCE/OBSERV	ER:		
Date (Time)	Antecedents	Behavior	Consequences
tudent Signature]	Evaluator Signature

Notification of the potential for Dismissal from the Clinical Site

Student's Name:	Date:
CI/CCCE:	ACCE:
PT Course:	Clinical Site:
I have been notified on this date,, the physical therapy assistant program course criter in jeopardy of failing this experience at this site and	hat I am not meeting the standards of the facility and ria for the clinical experience. I understand that I am d dismissal from the program.
Student's Signature:	Date:
ACE'S Signature:	Date:
CI's Signature:	Date:
CCCE's Signature:	Date:

COMPETENCY FORM

The purpose of this competency form is to ensure that the student can perform all skills appropriately, effectively and safely.

To pass a competency skills student will identify all indications, contraindications and precautions as well as successfully preform the skill.

Students will be marked pass/fail on each skill, allowing for 3 attempts if needed.

All competency skills will be addressed during the appropriate course in the PTA program.

Student Name		
Evaluators/ Instructors Name and Initials		

PTA 115		
COMPETENCY	DATE/INITIALS	COMMENTS
SKILL		
Goniometry		
Shoulder		
Elbow		
Wrist		
Hand		
Hip		
Knee		
Ankle		
Foot		
Spine		
MMT		
Shoulder		
Elbow		
Wrist		
Hand		
Hip		
Knee		
Ankle		
Spine		
Bony Palpation		
UE landmarks		
LE landmarks		
Muscle Length Test		
Pectoralis		
Hamstrings		
TFL		
Rectus Femoris		
Gastrocnemius		
Posture Analysis		
Gait Analysis		

PTA 130		
COMPETENCY	DATE/INITIALS	COMMENT
SKILL		
Vitals		
Blood pressure		
Heart rate		
Respiration		
Universal		
Precautions		
Sterile field		
Bandaging		
techniques		
Positioning		
Draping		
Transfers/Body		
mechanics		
Two man lift		
Sitting with board		
Sitting without		
board		
Bed mobility		
Rolling		
Scooting		
Supine to sit		
Gait		
Tilt table		
Guarding		
Gait with device		
Stairs		
Device		
mobility/training		
Sensory assessment		
Superficial sensation		

Exercise	
Active	
Concentric	
Eccentric	
Isometric	
Passive	
Stretch/flexibility	
Strengthening	
Aerobic	
Balance	
Plyometrics	
Breathing	
Techniques	
Modalities	
Ultrasound	
Cryotherapy	
Heat therapy	
Compression	
Fluidotherapy	
Paraffin	
Massage	
Therapeutic	
exercises	
Pain Assessment	
Peripheral Joint	
Mobilizations	
PTA251	
Wheelchair	
Propulsion	
Safety	
Manipulation	
Braces	
Orthotics	

PTA 140		
COMPETENCY	DATE/INTIALS	COMMENT
SKILL		
Traction		
Cervical		
Lumbar		
Joint mobs		
Grade I & II Spinal		
Mobilizations		
Girth measurements		
HEP		
Education		
PROM exercise		
CPR Certification		
Neural Glides		
Tendon Glides		
TMD		

PTA 220		
COMPETENCY	DATE/INITIALS	COMMENTS
SKILL		
Coordination		
Dysdiadochokinesia		
Dysmetria		
Movement Analysis		
Neuro techniques		
Tone		
facility/inhibitory		
PNF		
Unilateral pattern		
Slow reversal		
Slow reversal hold		
Repeated		
contraction		
Rhythmic initiation		
Hold relax active		
contract		
Hold relax		
Rhythmic		
stabilization		
NDT		
Bruunstrom		
Technique		
Lying on involved		
side		
Lying on uninvolved		
side		
Lying supine		
Neuro bed mobility		
Rolling to side		
Moving sideways		
Transfers		
Passive		
Active assisted		
Sit to stand		

PTA 220		
COMPETENCY	DATE/INITIALS	COMMENTS
SKILL		
Sensation		
Deep		
Proprioceptive		
Electrical		
Stimulation		
Muscle stim		
Tissue repair		
Iontophoresis		
FES		
HV		
NMES		
TENS		
Amputee Care		
Stump wrapping		
Dynamic stump		
exercise		
Compression		
Prosthetics		
Balance		
Assessment		
Vestibular		
Techniques		

PTA 221		
COMPETENCY	DATE/INITIALS	COMMENT
SKILL		
Chest PT		
Auscultations		
Percussion		
Vibration		
Breathing Exercises		
Postural Drainage		
positions		
Cardiac		
Rehabilitation		
Girth Measurements		
BMI		
Wound Care		
Sterile dressing		
Compression		
Edema management Repositioning		
Repositioning		

Skills required for clinical placement and academic progression

STUDENT AFFILIATION REQUESTS

NAME:	ADDRESS:
TOWNS IN CLOSE PROXIMITY:	COUNTY:
TOWNS IN CLOSE I ROAIIVII I .	COONT.
	<u> </u>
1.) Where did you do your volunteer hours?	
2.) If any, where did you do your aide work?	
3.) Please prioritize your top 3 choices (numbe	r 1_3\
5.) Trease prioritize your top 5 choices (number	1 1-3)
Rehabilitation Center	
Positive to the established	
Pediatric Hospital/School	
Geriatrics/Nursing Home	
Outpatient/Private Practice	
Outpatient/Private Practice	
Acute Care Hospital	

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPPA)

A discussion of how to protect medical privacy has been underway since the passage by Congress in 1996 of the Health Insurance Portability and Accountability Act (HIPPA). This act requires the adoption by medical facilities of security and privacy standards to protect personal health information. The rule limits the use and release of individually identifiable health information; gives patients the right to access their medical records; restricts most disclosures of health information to the minimum needed for the intended purpose; and establishes safeguards regarding disclosure of records for certain public responsibilities, such as public health and law enforcement.

When you begin working at a facility, as part of your orientation, you will be advised of the clinic's specific privacy practices and how you are expected to follow them. It is your responsibility to make sure you understand what you need to do to be in compliance with this important law.

The following information will help you understand the terms and procedures and are general guidelines to follow. Students at Union County College will be expected to follow these guidelines with respect to information gained during examination and intervention of fellow classmates and/or instructors or guests, in the laboratory setting.

HIPPA TERMINOLOGY

(adapted from a St. Barnabas employee handout)

- HIPPA OR HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT: A FEDERAL LAW THAT PROTECTS THE PRIVACY OF PATIENT HEALTH INFORMATION.
- OCR OR OFFICE OF CIVIL RIGHTS: THE GOVERNMENT AGENCY RESPONSIBLE FOR ENFORCING THE HIPPA PRIVACY REGULATIONS.
- PHI OR PROTECTED HEALTH INFORMATION:
 MEANS ANY INFORMATION CREATED OR MAINTAINED BY THE FACILITY THAT
 RELATES TO THE PAST, PRESENT OR FUTURE PHYSICAL, MENTAL HEALTH CARE
 OF A PATIENT, OR PAYMENT FOR THE HEALTH CARE.
 (Any information that can identify the patient such as name, address, medical record number,
 diagnosis, etc.)
- HIPPA PRIVACY NOTICE: STARTING IN APRIL 2003, EVERY PATIENT WILL RECEIVE A PRIVACY NOTICE BEFORE RECEIVING MEDICAL SERVICES TELLING THEM THEIR RIGHTS UNDER HIPPA AND HOW THE FACILITY MAY USE OR DISCLOSE THEIR PROTECTED

HEALTH INFORMATION. THIS NOTICE INCLUDES THE NAME OF THE PRIVACY OFFICER AND PROVIDES INFORMATION ABOUT MAKING A COMPLAINT.

PRIVACY OFFICER:

THE PERSON RESPONSIBLE FOR IMPLEMENTING HIPPA PRIVACY POLICIES AT YOUR FACILITY.

THE PRIVACY OFFICER IS RESPONSIBLE FOR HANDLING PRIVACY RELATED CONCERNS.

• EMPLOYEES ARE NOT PERMITTED ACCESS TO PHI NEEDED TO DO THEIR JOBS. CHECK WITH YOUR SUPERVISOR IF YOU ARE UNSURE ABOUT WHAT TYPE OF INFORMATION YOU ARE ALLOWED TO ACCESS.

PRIVACY PRACTICES:

HIPPA EXPECTS US TO TAKE COMMON SENSE PRECAUTIONS THAT PROTECT THE PRIVACY OF HEALTH INFORMATION.

USING PHI:

MEANS SHARING, ANALYZING, OR USING PHI WITHIN THE FACILITY THAT MAINTAINS THE INFORMATION.

(ex.: to an insurance company)

• REQUESTING PHI:

MEANS WE CAN REQUEST PHI FORM ANOTHER HEALTH CARE PROVIDER.

(ex.: transferred patients from another facility)

GENERAL RULES ABOUT PRIVACY

- DO NOT DISCUSS PRIVATE INFORMATION IN PUBLIC PLACES
- TURN COMPUTER SCREENS AWAY FROM PATIENTS AND VISITORS
- DISCARD PROTECTED HEALTH INFORMATION (PHI) IN LOCKED BINS DO NOT PLACE PHI IN OPEN TRASH BINS
- DO NOT LEAVE FAX MACHINES UNATTENDED WHEN EXPECTING A PRIVATE FAX
- DO NOT LEAVE COPIERS UNATTENDED WHEN COPYING PRIVATE INFORMATION
- LOWER YOUR VOICE WHEN DISCUSSING SENSITIVE INFORMATION
- PROTECT CHARTS AND OTHER PRIVATE INFORMATION FROM PUBLIC VIEW
- NEVER SHARE COMPUTER PASSWORDS AND LOG-OFF WHEN PRACTICAL
- ONLY ACCESS THE MINIMUM INFORMATION NEEDED TO DO YOUR JOB

Union County College Physical Therapist Assistant Program

Physical Therapist Assistant Student HIPPA/Confidentiality Agreement

The Health Insurance Portability and Accountability Act (HIPAA) is a set of federal rules that defines what information is protected, sets limits on how that information may be used or shared, and provides patients with certain rights regarding their information.

These rules protect information that is collected or maintained, (verbally, in paper, or electronic format) that can be linked back to an individual patient and is related to his or her health, the provision of health care services, or the payment for health care services. This includes, but is not limited to, clinical information, billing and financial information, and demographic/scheduling information. Any use or disclosure of protected information requires written authorization from the patient.

Any patient information you see or hear, directly or indirectly, must be kept confidential when attending your clinical education rotations to include but not limited to: charts and other paper and electronic records, demographic information, conversations, admission/discharge dates, names of attending physicians, patient financial information.

I understand and agree to the following:

- I will access, use, and disclose such information as described within my scope of practice as a Physical Therapist Assistant Student.
- I understand that any fraudulent application, violation of confidentiality or any violation of the above provisions will result in the termination of my privilege to observe and participate in the PTA Program's clinical education rotations and I may be subject to legal liability as well.
- My signature below indicates that I have read, accept, and agree to abide by all of the terms and conditions of this Agreement and agree to be bound by it.

Student Name:	Date:
Signature:	Date:

STUDENT CONFERENCE RECORD

Date:	
Student:	
Faculty:	
Topics discusse	<u>ed</u> :
	poor or failing grades on exams
	failure to take exams on scheduled or makeup dates
	failure to hand in assignments on due dates
	consistent late arrival to class
	excessive absences
	poor utilization of lecture and/or lab time
	other
Remedies:	
	tutoring
	participation in study group

Page 2 Conference Record

Student Name:		
	request for help from faculty/instructors	
	increase study time	
	decrease time in outside employment	
	more consistent reading of textbook assignments (i.e. class preparati	on)
	seeing a counselor at Union County College	
Comments:		
Student Signatur	re	Date
Instructor Signa	ture	Date

UNION COUNTY COLLEGE

PHYSICAL THERAPIST ASSISTANT PROGRAM

RELEASE FORM

The Union County College Physical Therapist Assistant Program consists of two components, didactic (classroom learning) and clinical experiences. Upon completion of this program, a national examination is required for licensure.

In order to begin clinical experiences, it may be necessary for the student to have results submitted to a facility with regards to drug screening, HIV testing, criminal background, psychiatric illness and/or substance abuse, or academic concerns. Many of the affiliation sites require a copy of current information (no more than one year old). Students may be required to have two physical examinations completed by their own personal physician during the course of the program. Some facilities may require additional screening such as a more in depth drug screening and/or a two or three step Mantoux test for tuberculosis.

Students are required to make copies of these physical examination forms and submit them to clinical sites upon request. A copy of the documents are kept in a file at Union County College and will be submitted to the clinical site upon request if a student has failed to do so or if the student is unable to do so for any reason.

I have reviewed and understood the information above and give the Union County College administrators permission to release this information to the potential clinical affiliates.

Please Print	
Student Signature	Date