

Physical Therapist Assistant Clinical Handbook

Division of Allied Sciences



DIVISION OF ALLIED SCIENCES
PHYSICAL THERAPIST ASSISTANT PROGRAM
CLINICAL EDUCATION HANDBOOK

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PURPOSE OF THIS HANDBOOK

This Handbook has been prepared to assist the student and the clinical faculty in the clinical portion of the UCNJ- Physical Therapist Assistant (PTA) 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.

UCNJ POLICIES

Antidiscrimination Policy

UCNJ 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. UCNJ prohibits discrimination in all matters involving admission, registration, and all official relationships with students, including evaluation of academic performance.

Sexual Harassment Policy

UCNJ will not condone any form of sexual harassment. This is defined as the use of unwelcome sexual advances, requests 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

UCNJ clinical education policies comply with the guidelines of the Americans with Disabilities Act (ADA). 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 Clinical Coordinator of Clinical Education (CCCE) if reasonable accommodations are required during affiliations. Students requesting accommodations must be registered with Universal Accessibility 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 help in identifying, documenting, and requesting accommodations. Assistance is offered to the staff at clinical sites to establish means to provide reasonable accommodations.

PHILOSOPHY OF CLINICAL EDUCATION

The American Physical Therapy Association (APTA), as well as UCNJ, considers clinical education an essential component of the curriculum and an integral part of the academic program. The Physical Therapist Assistant Program at UCNJ 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

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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 UCNJ is committed to professional practice expectations in physical therapist assistant (PTA) education as described by the APTA definition of a PTA, *APTA PTA Ethical Standards* and *Core Values*. Clinical education requires an active partnership between UCNJ and the clinical sites to provide clinical educational experiences for students. Clinical education prepares students to become professional clinicians while demonstrating best practices in a safe and effective manner.

Clinical education provides the opportunity to learn by applying didactic knowledge, critical thinking, hand on skills, proper behavioral practice, and assess personal and/or professional strengths and limitations relative to clinical 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 using evidence-based practice.

GUIDELINES FOR CLINICAL 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 professionally, 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.
- The 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.

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- The clinical center encourages clinical educators (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 CLINICAL EDUCATION IN THE CURRICULUM

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

CLINICAL EDUCATION

Beginner Clinical Education Experience 2nd year—Fall semester	Intermediate Clinical Education Experience 2nd year—Spring Semester	Terminal Clinical Education Experience 2nd year—Spring Semester
Part-time- 6 weeks 15 hours/week (90 hours)	Full-time—7 weeks 36 hours/week (252 hours)	Full-time—7 weeks 36 hours/week (252 hours)
Rehab/Ortho/Neuro	Acute Care/ Rehab/Ortho/Neuro	Acute Care/Rehab/Ortho/Neuro

PTA 211- Clinical Practice I- Part-time- Beginner Clinical Education Experience – Six Weeks-Two Days Per Week (90 hours)

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 exercises, selected assessment techniques, and human disease and pathology will be emphasized. Typical practice settings may include acute care hospitals, private practices, skilled nursing centers, and outpatient rehabilitation centers.

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

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Basic data collection, intervention and evaluation routinely performed by the **Physical Therapist Assistant**.

Competencies Attained

- Hand Hygiene
- Vital Signs
- Bed Mobility
- Transfer Activities
- Ambulation: Gait training, Assistive Devices, Gait Patterns, and Analysis
- Manual Muscle Testing Goniometry
- Biomechanics
- Mechanical agents: Massage
- Physical Agents: Thermal Modalities and Electrotherapy
- Therapeutic Exercises
- Ortho/Neuro Pathological Process and Interventions
- Wheelchair Management
- Orthotic and Prosthetic Assessment
- Motor Control Principles
- Neurological Clinical Medicine Neuromuscular Functional Training

Concurrent

- Pediatric conditions and interventions
- Cardiopulmonary conditions and interventions
- Wounds and burns and interventions
- Research
- Pharmacology
- Documentation

Student Supervision

Full-time supervision by clinical instructors on-site Advisement/instruction by a member of the clinical faculty.

Student Assessment

Clinical Performance Instrument (CPI), version 3.0, APTA. Online only.

PTA 215- Clinical Practice II – Intermediate Clinical Education Experience- Full Time- Seven Weeks (252 Hours)

This 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

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modalities, advanced therapeutic techniques, and neurophysiological techniques into direct patient care. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing centers, geriatrics, pediatrics, in-patient, and outpatient rehabilitation centers.

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 courses in a clinical setting effectively and competently according to current legal and ethical standards.

Competencies Attained

- Hand Hygiene
- Vital Signs
- Bed Mobility
- Transfer Activities
- Ambulation: Gait training, Assistive Devices, Gait Patterns, and Analysis
- Manual Muscle Testing Goniometry
- Biomechanics
- Mechanical agents: Massage
- Physical Agents: Thermal Modalities and Electrotherapy
- Therapeutic Exercises
- Ortho/Neuro Pathological Process and Interventions
- Wheelchair Management
- Orthotic and Prosthetic Assessment
- Motor Control Principles
- Neurological Clinical Medicine Neuromuscular Functional Training
- Pediatric conditions and interventions
- Cardiopulmonary conditions and interventions
- Wounds and burns and interventions
- Research
- Pharmacology
- Documentation

Concurrent Skills

The majority didactic component of the curriculum is complete. Students are competent, not proficient, in all basic physical therapy procedures and treatment techniques.

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- Aqua therapy
- Bariatric Rehab
- Oncology Rehab
- Women Health
- Men Health

Student Supervision

Full-time supervision by clinical instructors' on-site Advisement/instruction by a member of the clinical faculty.

Student Assessment

Clinical Performance Instrument (CPI), version 3.0, APTA. Online only.

PTA 215- Clinical Practice II – Terminal Clinical Education Experience- Full Time- Seven Weeks (252 Hours)

This 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 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, special topics in PT, and clinical management and health care issues into direct patient care. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing centers, geriatrics, pediatrics, in-patient, and outpatient rehabilitation centers.

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

Full-time supervision by clinical instructors on-site/advisement/instruction by a member of the clinical faculty.

Competencies Attained

- Hand Hygiene
- Vital Signs
- Bed Mobility

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- Transfer Activities
- Ambulation: Gait training, Assistive Devices, Gait Patterns, and Analysis
- Manual Muscle Testing Goniometry
- Biomechanics
- Mechanical agents: Massage
- Physical Agents: Thermal Modalities and Electrotherapy
- Therapeutic Exercises
- Ortho/Neuro Pathological Process and Interventions
- Wheelchair Management
- Orthotic and Prosthetic Assessment
- Motor Control Principles
- Neurological Clinical Medicine Neuromuscular Functional Training
- Pediatric conditions and interventions
- Cardiopulmonary conditions and interventions
- Wounds and burns and interventions
- Research
- Pharmacology
- Documentation

Concurrent Skills

The majority didactic component of the curriculum is complete. Students are competent, not proficient, in all basic physical therapy procedures and treatment techniques.

- Aqua therapy
- Bariatric Rehab
- Oncology Rehab
- Women Health
- Men Health

Student Assessment

Clinical Performance Instrument (CPI), version 3.0, APTA. Online.

CLINICAL SITES DEVELOPMENT

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

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. If a student is interested in a facility or wants to complete an internship in a certain

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geographic area where the Physical Therapist Assistant Program does not have an affiliation agreement, the student must make an appointment to discuss this with the ACCE.

CLINICAL EDUCATION PARTICIPANTS' ROLES AND RESPONSIBILITIES

Academic Coordinator of Clinical Education (ACCE)

The ACCE is the full-time 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 at UCNJ. The ACCE collaborates with all 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 ability to integrate didactic and clinical learning experiences and progress within the curriculum.
- Educate students clinical, and academic faculty about clinical education.
- Ensure that the clinical learning environment demonstrates characteristics of effective patient management and professional & ethical behavior and adhere to current evidence-based practice.
- Ensure that the clinical education program maximizes available resources.
- Provide documented assessment of the clinical education component using the APTA CPI, version 3.0, online.
- Develop strategies to actively engage core faculty participation in the clinical education development, planning, implementation, and assessment.
- Provide effective coaching, counseling, and conflict resolution skills between student and clinical instructor (CI).

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

UCNJ- Plainfield Campus
232 East Second Street, Annex Building, Room #202
Plainfield, NJ 07060
Marie Helene McAndrew, PT, DPT
Associate Professor/ACCE
908-412-3541
Email: Marie-helene.mcandre@ucc.edu

Center Coordinator of Clinical Education (CCCE)

The Center Coordinator of Clinical Education is an experienced clinician, experienced in clinical education, possessing good interpersonal, communication, and organizational skills, is knowledgeable

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with respect to the clinical center and its resources, and may serve as a consultant in the evaluation processes through the Clinical Performance Instrument (CPI), version 3.0, APTA.

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. Certification by the APTA as a Credentialed Clinical Instructor is preferable.

The CI's responsibilities include:

- 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
- Compliance with program policies regarding of clinical education.
- Compliance with the program policies regarding the use of the APTA Clinical Instrument Performance tool (CPI), version 3.0, and its timely completion online in relation to the student's performance at midterm and final, and after a review with the student for both.
- Compliance with the program policies regarding the use of *Trajecs*, a tool that allows tracking of hours completed by the student.
- Contact the ACCE immediately if a significant deficiency in student's performance is observed at any time during the clinical education experience.
- Completion of the PTA-Honor Society recommendation form if requested by the ACCE

Student

The student is an individual enrolled at UCNJ in the Physical Therapist Assistant Program. The student is responsible for completing all requirements essential to embark on their clinical experiences by the due dates designated by the ACCE. Failure to complete these requirements will delay the student from starting their clinical experiences. Students are recommended to make copies of all documents uploaded to Castle

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Branch and/or submitted to the ACCE for their own personal use. 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 the clinical education process with the ACCE.
- Complies with clinical site requirements for criminal background checks, fingerprinting and/or drug testing to meet clinical facility standards and requirements and provides it to the ACCE
- Establish a Castle Branch account in the spring semester before the initiation of the clinical experience in the fall.
- Uploads proof of Health Care Insurance coverage into Castle Branch. It is not the responsibility of the clinical education facility to offer or provide health insurance to the students.
- Complies with all student policies and procedures described in this clinical education handbook.
- Complies with all policies and procedures set forth by the assigned clinical site.
- Completes student health form as provided by the program and uploads it into Castle Branch
- Uploads proof of all required vaccinations as stated in the health form into Castle Branch
- Uploads proof of completed certification of CPR and First Aid from the American Heart Association into Castle Branch.
- Uploads proof of liability insurance into Castle Branch
- Adheres to the American Physical Therapy Association's (APTA) Standards of Ethical Conduct for The Physical Therapist Assistant and Values Based Behaviors for Physical Therapist Assistant. (<https://www.apta.org/apta-and-you/leadership-and-governance/policies/standards-of-ethical-conduct-for-the-physical-therapist-assistant>)
- Notifies the ACCE and clinical site of any change of name, address and telephone number.
- Actively participates as a learner in the clinical education process with the clinical faculty.
- Completes ongoing assignments and self-assessments during the clinical experience process requested by the ACCE and/or the clinical instructor.
- Discusses any problems related to clinical placements with the ACCE within 2-3 weeks of the start of the clinical experience.
- Communicates in a timely fashion with the ACCE and the clinical instructor of any emergencies that will prevent them from attending the clinical experience.
- Provides the ACCE with a medical note if absent for more than two days at the clinical site.
- Completes an evaluation of the clinical site and clinical instructor at the completion of each clinical experience.
- Completes an evaluation of the ACCE at the completion of each clinical experience.
- Completes the student portion of the CPI online at midterm and final, upon completion of each clinical experience and reviews their performance with the clinical instructor.
- Complies with clinical site requirements for criminal background checks, fingerprinting and/or drug testing, as well as health status to meet clinical facility standards and requirements.

Students are not considered employees of the clinical education site and are not entitled to employee benefits or remuneration. Specifically, they are not covered under the Workman's Compensation Act. In

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the case of an accident or emergency at the clinical education site, emergency care will be provided by the clinical education site at the student's expense. The CI/CCCE and/or student will contact the ACCE as soon as possible in the event of an emergency.

HEALTH CLEARANCE

UCNJ, along with our clinical education sites requires that students have a health assessment, and appropriate immunizations completed as stated in the student health form prior to starting the Clinical Education experience. Some facilities may require additional health information that is not presently stated in the student health form. UCNJ has contracted with Castle Branch who will be responsible to maintain all student records. These records must be updated by the student as needed.

It is the ACCE's responsibility to confirm that the student has completed all requirements prior to the start of their clinical experience.

MEDICAL PROBLEM

Any medical problem that will prevent a student from fulfilling the duties related to the profession of Physical Therapy as stated in the *Essential Functions Form*, will need to meet with the ACCE and the Program Director to discuss the steps required to complete their clinical experience successfully. Student will be required to obtain a medical clearance from an MD before returning to the clinical site.

CPR/FIRST AID REQUIREMENTS

Students are required to complete a First Aid and CPR certification course for Healthcare Providers administered only by the American Heart Association. It is the student's responsibility to ensure that the CPR and the First Aid certification are active for the duration of all three clinical experiences. Proof of this certification must be uploaded into Castle Branch before the start of their clinical education experience. Please note that students should possess individual certification cards for CPR and First Aid, respectively.

CRIMINAL BACKGROUND CHECK

Clinical affiliates mandate criminal background checks for all students in patient care settings. Each student must undergo a criminal background check prior to admission to the program. These checks require a valid social security number. Federal and state laws preclude persons with certain criminal backgrounds from being in contact with children and patients. A felony conviction may affect a student's admission to the program and ability to attain state licensure. Some clinical affiliates require annual background checks, and students will be subject to another background check. These checks are conducted by an external vendor, and payment is the student's responsibility. The results of the checks are forwarded to the College and, upon request, to clinical sites. The vendor will evaluate the information and make the final determination on whether the student can engage in patient care. If a student is denied clinical placement by any clinical site due to criminal history information, that student will be dismissed from the program.

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Students are required to demonstrate a clear understanding of OSHA regulations regarding universal precautions and blood borne pathogens prior to attending their clinical education experiences and in PTA 111 students will be provided with regulations related to PTA 111.

HIPAA

The Health Insurance Portability and Accountability Act (HIPAA) of 1995 (PL-104-191) is a federal law which, among other things, requires that health 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. Students are required to sign a HIPAA 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 their *Competency Checklist* by a UCNJ faculty member unless the skill has been presented by the clinical instructor (CI) and in their clinical expertise the student is deemed safe to perform under their supervision.

FACULTY CONSULTATION

The Clinical Education Faculty and the Academic Coordinator of Clinical Education (ACCE's) at UCNJ are available for support or consultation regarding the clinical education process. We can offer advice in establishing a new clinical education program, assistance on how to effectively handle a specific student situation, or how to implement alternative teaching models. Newly formed clinical instructors will be mentored in their respective facility, but the ACCE will also support as needed.

STUDENTS CLINICAL PROJECT

Students are expected to provide at least one professional and evidence-based presentation for each clinical experience. These projects may be in the form of a case study, journal article review, the development of an exercise protocol, or an In-service focused on a topic recommended by the clinical site. Additionally, this clinical project must be approved by the clinical instructor (CI).

PROFESSIONAL RECRUITMENT

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

PROFESSIONAL GROWTH AND REWARDS

There are many potential rewards that come from working with students. Most therapists enjoy the challenge students bring to the clinical setting. Some Clinical Instructors (CI) find they truly enjoy working with students and go on to become Center Coordinators of Clinical Education (CCCE) or part

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time faculty members in a Physical Therapy program. Many Clinical Instructors find great satisfaction in knowing they have facilitated the growth of a future Physical Therapist Assistant (PTA).

CONTEXT FOR CLINICAL LEARNING EXPERIENCES

The UCNJ Physical Therapist Assistant Program follows the *Normative Model of Physical Therapist Assistant Professional Education: Version 2007, prepared by the APTA*.

Characteristics of student learners

Students are expected to identify and articulate their learning expectations in the clinical site. Students are aware of their 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 solely occur within the physical therapy department and that communication with the CI, patient, patient's family, and multiple other medical professionals is essential to achieve success in clinical experiences.

Characteristics of Clinical Instructor and Clinical Coordinator of Clinical Education

- CI/CCCE possesses an active license for the state jurisdiction where the clinical site is located.
- 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 provides 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. If this orientation does not occur the student should contact the clinical course faculty member and/or 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.
- Goals of the clinical education experience are mutually agreed upon, and reflect integration of goals of the academic program, student, CI and/or CCCE, and the clinical site.
- Evidence exists that each clinical educator (CI) understands the curriculum of the academic program. It is the responsibility of the ACCE to provide the CI with the Clinical Handbook and specific course syllabus or outline with the 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, etc.) with the academic program and the student.

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- Clinical sites (CCCE, CI) and academic programs (ACCE) share information about methods taught and used to conduct students' clinical assessments.
- Rules for formal and informal communication are mutually agreed upon by all parties (ACCE, CCCE, CI and student) involved in clinical education.

Organization of the Clinical Experience

- The CI and/or CCCE provide opportunities for student self-learning, including engaging in intellectual discussions.
- Clinical Instructors provide opportunities for students to be involved in an Intradisciplinary team and /or Interdisciplinary team when one is available.
- Clinical Instructors incorporate into the clinical experience, opportunities for students to demonstrate and utilize teaching skills (e.g., educate aides, patients/caregivers, and others).
- Staff members who are not CI may be able to participate in some aspects of a student's clinical experience but should not direct the student in lieu of the Clinical Instructors.
- Clinical educators involve students in projects that advance patient goals but that are not necessarily within the provision of direct "hands-on" patient care (communication with other healthcare professionals).
- CI explicitly engages students 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, rounds, 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 journals with a summary that identifies their perceptions of their strengths and weaknesses).
- Scheduled time is set aside for feedback between the student(s), the CI and/or CCCE.
- Clinical instructors will identify significant student's performance deficit(s) prior to midterm so that remediation can be planned by the ACCE, and a *Learning Contract* can be established if warranted. All clinical evaluations/assessments will be done using the CPI, version 3.0, APTA, online.
- Students, CI and CCCE are held accountable to address professional and ethical 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

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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 circumstances 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 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 many clinical sites, including those with established clinical education contracts and those other sites we wish to establish as clinical education partners. We are dependent on these sites to respond with a 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 from 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. CCCEs and Clinical Instructors (CI's) find this information helpful in planning a meaningful clinical experience for students.

Attendance and Tardiness

Students are expected to attend the clinical education facility each day scheduled by the CCCE/CI. The student is not allowed to use these days as travel days or for personal business. Each student is allowed one excused absence during each clinical experience, which is at the discretion of the ACCE. All unexcused absences must be made up by the student in a manner that is suitable to the clinical education site. This requirement serves to fulfill the minimum clinical hours dictated by the Commission on Accreditation of Physical Therapy Education (CAPTE) after consultation with the ACCE.

In cases of illness or extreme emergency, the student must notify the CI or CCCE directly as soon as the clinic opens. Students are also required to contact the ACCE directly by phone and/or email on the day of their absence. All students must fulfill the required minimum hours required by CAPTE to successfully complete the clinical experience.

Failure in completing the minimum hour requirement for all clinical experiences may result in a graduation delay and possible removal from the clinical education site.

The student must adhere to the schedule established by the clinical education site. This might involve a non-traditional schedule, such as working on a weekend or evenings or working an unconventional shift (i.e., split offices). The student may be asked to work for more than 36 hours a week based on the schedule of the clinical instructor, and those hours will be counted towards the minimum hours requirement to complete the clinical experience. Tardiness is not acceptable. **Three or more episodes of unexcused tardiness will result in a failing grade for the course.**

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In the event of an emergency, if feasible, the student must call the clinic as soon as possible to notify the CCCE or CI of the situation. Students' must also notify the ACCE or the program director as soon as possible. All missed time must be made up at the CI's convenience.

Clinical Site Location

All students are responsible for their transportation to attend their clinical education site. Given the geography of our region, public transportation is not always possible. A student can be assigned to a site up to one and a half (1.5) hour 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, and it is the student's responsibility to assume such expenses.

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 fully executed clinical contract with UCNJ and which is valid for the duration of the full clinical experience.

New Contract Development

Students are not permitted to arrange their own clinical experiences. A student interested in a facility must discuss it with the ACCE. Any potential new clinical site must enter into an agreement with UCNJ, which is a lengthy process and-sometimes takes up to 1 ½ years to finalize.

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 and/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 dress code (i.e., Scrubs), it is expected that the student will wear the school polo and khaki pants, and a name tag.

Students are always expected to be neatly groomed. Long hair must be tied back, nails should be short and neat, and proper hygiene must be maintained. If nail polish is used, it must be of a neutral or clear tone. The use of artificial fingernails is not allowed. Any jewelry that may interfere with the safety or effectiveness of patient treatment is prohibited. Students are asked to refrain from heavy use of colognes or 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 clear visible location each day for the clinical experience. The name tag should state the student's school, name and status ("Student Physical Therapist Assistant").

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Each student is required to obtain his/her own lab coat if one is required by the clinical site.

Clinical Project

All clinical assignments are to be submitted on time. Students are required to complete a clinical project of their choice, but the assignment must be approved by the CI. A copy of the clinical project (In-service, case study, or PowerPoint) must be submitted to the course faculty member for each clinical rotation. The presentation of the clinical project will be done at the clinical facility in a format deemed appropriate for the staff and CI. Note that on occasion, the ACCE may attend the presentation. Guidelines for completion of the clinical project can be found in Canvas. Student responsibility for paperwork submission post-clinic. Additionally, it is the student's responsibility to ensure that the course faculty member at UCNJ has the following documents at the end of each affiliation (except the one-day-a-week observation):

1. CPI (Online)
2. Student Evaluation of Clinic
3. Clinical Projects paperwork
4. Weekly journal entries
5. Student's CI evaluation
6. Student's ACCE evaluation

CLINICAL PERFORMANCE INSTRUMENT (CPI)

Introduction

The Physical Therapist Assistant Program at UCNJ has adopted the online Physical Therapist Clinical Performance Instrument (CPI), version 3.0, developed by the American Physical Therapy Association (APTA), as the tool to evaluate the clinical performance of students in the field. The student, and the CI each must fill out their portion prior to meeting and discussing on the student's performance level. No paper copies of CPI will be accepted by the program.

All students will be evaluated at midterm and completion of each clinical experience using the CPI Web-based tool. At the beginning of the rotation, an information sheet will be sent to each student and CI with instructions on how to complete the training and log in on the CPI website.

Ultimately, it is the student's responsibility to ensure that the CI/CCCE receive this information to ensure deadline of submission for evaluations.

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 (11) is important to the overall assessment of clinical competence. The student and the CI must discuss the student's performance both at the midterm and at the final evaluation. The midterm CPI should be completed prior to the ACCE midterm visit at the clinical site. The form is always available online for the ACCE and will be reviewed prior to the visit.

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The CPI tool is used to guide the ACCE in assigning the final grade once the rotation and all course requirements are completed. Adhering to the deadline submission is imperative for students to receive a grade for the overall course.

You can find information about the CPI, version 3.0, at the following link:

<https://www.apta.org/for-educators/assessments/pt-cpi>

USING THE CPI

There are 11 performance criteria to be evaluated on the new Web-based version 3.0, CPI. These criteria are grouped into four Domains of practice. Mainly, Professionalism, Interpersonal, Technical/Procedural and Business. In aggregate, these Domains describe all essential aspects of contemporary professional practice for a physical therapist assistant clinician performing at entry-level. The CI is required to use ethical and professional judgment to determine the student's level of performance.

The performance criteria are divided into the four Domains as follow:

Professionalism:

- 1.1 Ethical Practice
- 1.2 Legal Practice
- 1.3 Professional Growth

Interpersonal:

- 2.1 Communication
- 2.2 Inclusivity

Technical/Procedural:

- 3.1 Clinical Reasoning
- 3.2 Interventions: Therapeutic Exercises
- 3.3 Interventions: Mechanical and Electrotherapeutic Modalities
- 3.4 Interventions: Functional Training and Application of Devices and Equipment

Business:

- 4.1 Documentation
- 4.2 Resource Management

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Rating Scale

The rating scale is designed to reflect a continuum of performance for the following levels:

Rating Scale	Beginning Performance	Advanced Beginner Performance	Intermediate Performance	Advanced Intermediate Performance	Entry Level	Beyond Entry Level
*Make vertical here	1	2	3	4	5	6

Performance level

All criteria have a Caseload and Supervision component in percentage and at times the student score may span across two numbers. These are called Performance Grouping.

Example: Beginning Performance -> Advanced Beginner Performance would be from 75% to 100%

The users will become familiar with the CPI tool after their respective and short training.

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

Overall Summary: This provides a mechanism for the CI to identify, clarify, and highlight students' overall objective performance as related to their areas of strengths, 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 specific level of 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 the evaluation. 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 ACCE. Importantly, the midterm CPI must be completed by both users prior to the ACCE midterm visit. The ACCE will contact the clinical site early in each semester to schedule the midterm visit. During the visit, the ACCE will interview both the CI and the student to assess the student's performance. ACCE visits can be conducted virtually if unforeseen circumstances prevent an on-site visit. On occasion, if the clinic permits, the ACCE may observe the student during a treatment session.

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The purpose of the midterm conference is to ensure that the clinical education experience is going well for all concerned parties (student, ACCE, and CI) and that the educational objectives are being met. This conference provides the ACCE with an opportunity to help identify any problems with student performance and address them accordingly. 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, a *learning contract* will be developed. This contract will identify specific goals, which need to be reached within a specified period, and strategies that will be employed at the clinic and/ or at the College, to remediate the deficiencies for the student to pass the clinical education experience. The ACCE, the CI, and the student will sign the *learning contract*. The ACCE will follow up with phone calls or visits as deemed necessary during the *learning contract*. The goal of the *learning contract* is to help the student and clinical instructor(s) work together to facilitate a successful completion of the clinical education experience.

In addition to the midterm conference, the ACCE is always available to help the CI and students should any questions or concerns arise during the clinical education experience. The student, CI, and/or CCCE are encouraged to call the ACCE at any time and for any reason. The ACCE will offer, as needed to a newly appointed CI, recommendations, tools, and/or guidance on how to be an effective educator. Note that a CI must have at least one year of clinical experience prior to welcoming a student. The CI/CCCE must inform the ACCE in cases where student performance is below minimal acceptance. Poor performance should be documented using the *critical incident report*. This should occur as soon as the problem is identified so that the ACCE can assist in resolving the problem.

FINAL CONFERENCE

At the end of the clinical experience, the student and the CI will meet formally to review/compare their completed online CPI. This CPI should be signed off by both parties for the ACCE to compute the student's final grade for the clinical education experience. Note that a student in his/her final clinical experience must achieve the passing criteria on the CPI as stated in the syllabus.

GRADING

In accordance with UCNJ policies, the ACCE is responsible for assigning the final grade for all clinical education courses. The CPI tool is used to assess student performance in the clinical education experience, but the ACCE uses other evaluation methods as stated in the course syllabus and the CPI to allocate the final grade for all clinical education courses.

SATISFACTORY PERFORMANCE

Minimum competency levels, as defined for each clinical education experience and stated in the syllabus, have been reached by the end of the clinical experience.

UNSATISFACTORY PERFORMANCE

Students who do not achieve the minimum competency level on the CPI, version 3.0, APTA, as stated in the syllabus for any clinical experience and/or are unable to complete the goals as stated in the learning

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contract will be required to repeat their entire clinical experience. A student will be allowed to repeat their entire clinical experience only once in the program. A student will be deemed as a clinical failure and dismissed from the program with no admission recourse for the reasons stated below:

- If the CCCE/CI request removal of the student for good cause (e.g., insubordination, non-compliance with policies or procedures, unsafe, unprofessional, Inappropriate, or unethical behavior).
- If the ACCE removes a student for any of the reasons stated above.
- If a student, of their own accord, chooses to leave a clinical placement and does not discuss the problem with the ACCE and the CCCE
- If a student exhibits inappropriate professional behavior or patient safety is compromised
- If a student fails to report to the clinical site on any assigned day or leaves the clinical site without permission from the CCCE or ACCE. This excludes emergencies for which prior permission is not possible. Documentation will be required for any extended period of illness or emergency.
- If the student fails the repeated clinical experience by not achieving the minimum competency level on the CPI, version 3.0, as stated in the syllabus.
- If the student fails any subsequent clinical experiences by not achieving the minimum competency level on the CPI, version 3.0, as stated in the syllabus.
- If the student exhibits unsafe, unprofessional, unethical, and or inappropriate behavior and is asked to leave the clinic by the CI/CCCE.

INCOMPLETE GRADE FROM CLINICAL EDUCATION COURSES

A student may request a grade of incomplete from a clinical education site for extenuating life circumstances or medical conditions. The student must provide in writing, documentation regarding his/her request and follow UCNJ policies. The ACCE will present the case to the Program Director and/or the Dean of Plainfield Campus and Allied Health Sciences. The student will be informed of the decision in writing. Scheduling of placements for resumption of clinical education experience is done individually and is subject to the availability of clinical education sites. Interruption in the clinical education experience may result in the postponement of graduation. In addition to UCNJ policy, the following criteria must also be met to receive a grade of incomplete in courses that involve a clinical education component:

- Student is unable to complete the clinical due to illness (medical documentation is required)
- Student is unable to complete the clinical due to a family crisis or emergency.

POST-PROGRAM COMPLETION INFORMATION

National Physical Therapy Exam (NPTE)

After a successful completion of the PTA Program, students will be eligible to sit for the Licensure Exam in the State they wish to practice. It is the responsibility of the student to register, pay the fee, and reserve a seat to take the NPTE.

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State License Obtention

It is the responsibility of the student to apply and pay the fee for a license under the jurisdiction they wish to practice. This can be done before or after sitting for the NPTE.

Further information on the above is available at:

<https://www.njconsumeraffairs.gov/pt/Documents/Physical-Therapy-Helpful-Information-Regarding-the-Application-Process.pdf>

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 UCNJ 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.

CLINICAL 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 UCNJ 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 INSTRUCTOR EVALUATION

The student is asked to complete a CI Assessment form. This form is designed to provide feedback to the CI. This information is utilized by the ACCE and program director to identify possible professional development needs.

ACCE EVALUATION

Students will evaluate the ACCE at the end of the program. All student evaluations are confidential and the ACCE is provided with the aggregate of results.

CLINICAL REFLEXIVE JOURNAL for PTA 211 and PTA 215***GUIDELINES***

- Make a weekly entry.
- Use your journal for reflection on your clinical education experience and focus on yourself using the essential skills and professional behaviors as a guide.
- Reflect on clinical milestones accomplished or not accomplished during the week.
- Reflect on goals planned for the following week.
- Reflect on your feelings regarding the clinical experience.

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- Write down your reactions, questions, comments, feedback, and insights about the clinical experience.

GOALS

- To promote critical thinking about how the clinical experience affects, your professional behavior, confidence, competence, and communication skills necessary for optimal patient-practitioner interaction.

CLINICAL PROJECTS DURING CLINICAL EXPERIENCES

Students are required to do a clinical project at each clinical education site as a professional service to the facility. This can be an In-Service, a case study, or the development of a tool to be used at the facility. It is an opportunity for the students to showcase their didactic knowledge, communication skills, and professionalism. The presentation is also an opportunity for the student to engage in evidence-based practice (EBP) and contribute to the physical therapy profession.

When planning and conducting the clinical project, follow these steps:

- Start planning the clinical project 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 and get approval from the CI.
- Send an email to your PTA 211 and PTA 215 faculty member regarding the topic and clinical relevance.
- Specify if you intend to use material from professors in the PTA program.
- Identify your audience and make sure the information presented is valuable to it.
- Perform a literature review of the topic that should include at least two peer-reviewed journal articles.
- The material to be presented should include a critical discussion of the available literature and be based on EBP.
- Include a discussion point on 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 partial or 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 one 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).
- Students should expect to answer questions from the CI or anyone attending the presentation.
- After the presentation, recruit feedback from the Clinical Instructor about your performance and the material presented.

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MEMORANDUM FOR PTA 211 CLINICAL PRACTICE I-- BEGINNER CLINICAL EXPERIENCE

TO: CCE'S AND CP'S

SUBJECT: RATING STUDENTS WITH THE CPI FOR THE FALL SEMESTER SYLLABUS FOR PTA 211- CLINICAL EDUCATION EXPERIENCE

The following guidelines are intended to assist you in rating the PTA students from the UCNJ-PTA Program for this Beginner's clinical affiliation. 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. UCNJ has adopted the following guideline to represent the minimal level of acceptable performance (C+) by a student at the completion of this clinical experience.

PASSING CRITERIA FOR PTA 211 CLINICAL PRACTICE I BEGINNER CLINICAL EXPERIENCE:

The clinical Performance Instrument (CPI) designed by the American Physical Therapy Association (APTA) will be used by the program to assess the successful completion of the clinical education experience. The clinical performance instrument is divided into four distinct sections: Professionalism, Interpersonal, Technical/Procedural, and Business

For successful completion of PTA 217 Clinical Practice I (Fall Clinical Experience), a student needs to achieve the following anchors on the CPI rating scale

Section I: Professionalism

Ethical practice: Must Achieve Intermediate Performance

Legal practice: Must Achieve Advanced Beginner

Professional growth: Must Achieve Advanced Beginner

Section II: Interpersonal

Communication: Must Achieve Intermediate Performance

Inclusivity: Must Achieve Intermediate Performance

Section III: Technical/Procedural

Clinical Reasoning: Must Achieve Advanced Beginner

Interventions (Therapeutic Exercises and Techniques): Must Achieve Advanced Beginner

Interventions (Mechanical and Electrotherapeutic Modalities): Must Achieve Advanced Beginner

Interventions (Functional Training and Application of Devices and Equipment): Must Achieve Advanced Beginner

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Section IV: Business

Documentation: Must Achieve Intermediate Performance

Resource Management: Must Achieve Advanced Beginner

The PTA program at UCNJ will not accept any paper forms of CPI, and all CI must complete the CPI, version 3.0, electronically. 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
Associate Professor/ACCE
UCNJ-PTA Program
732-412-3541
Marie-helene.mcandre@ucc.edu

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**MEMORANDUM FOR PTA 215 CLINICAL PRACTICE II- INTERMEDIATE
CLINICAL EXPERIENCE**

TO: CCE'S AND CI'S

**SUBJECT: RATING STUDENTS WITH THE CPI FOR THE SPRING SEMESTER SYLLABUS
FOR PTA 215- INTERMEDIATE CLINICAL EDUCATION EXPERIENCE**

The following guidelines are intended to assist you in rating the PTA students from UCNJ- PTA Program for the first twelve-week full-time clinical affiliation.

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. UCNJ has adopted the following guideline to represent the minimal level of acceptable performance (C+) by a student at the completion of this clinical experience.

**PASSING CRITERIA FOR PTA 215 CLINICAL PRACTICE I INTERMEDIATE CLINICAL
EXPERIENCE:**

Safety: The student displays this behavior at an **Entry Level** performance anchor

Clinical Behavior: The student displays this behavior at an **Entry level** performance anchor.

Accountability: The student displays this behavior at an **Entry level** performance anchor

Cultural Competence: The student displays this behavior at an **Advanced Intermediate** performance anchor.

Communication: The student displays this behavior at an **Advanced Intermediate** performance anchor

Self-Assessment and Lifelong Learning: The student displays this behavior at an **Advanced Intermediate** performance anchor.

Clinical Problem Solving: The student displays this behavior at an **Advanced Intermediate** performance anchor.

Interventions: Therapeutic Exercises: The student displays this behavior at an **Advanced Intermediate** performance anchor

Interventions: Therapeutic Techniques: The student displays this behavior at an **Advanced Intermediate** performance anchor

Interventions: Physical Agents and Modalities: The student displays this behavior at an **Advanced Intermediate** performance anchor

Interventions: Electrotherapeutic Modalities: The student displays this behavior at an **Advanced Intermediate** performance anchor

Interventions: Functional Training and Application of Devices and Equipment: The student displays this behavior at an **Advanced Intermediate** performance anchor

Documentation: The student displays this behavior at an **Advanced Intermediate** performance anchor

Resource Management: The student displays this behavior at an **Advanced Intermediate** performance anchor.

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The PTA program at UCNJ will not accept any paper from of CPI and all CI will need to complete the CPI, version 3.0, electronically.-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
Associate Professor/ACCE
UCNJ-PTA Program
732-412-3541
Marie-helene.mcandre@ucc.edu

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MEMORANDUM FOR PTA 215 CLINICAL PRACTICE II- TERMINAL CLINICAL EXPERIENCE

TO: CCE'S AND CI'S

SUBJECT: RATING STUDENTS WITH THE CPI FOR THE SPRING SEMESTER SYLLABUS FOR PTA 215- TERMINAL CLINICAL EDUCATION EXPERIENCE

The following guidelines are intended to assist you in rating the PTA students from UCNJ- PTA Program for the last seven-week full-time clinical affiliation.

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. UCNJ has adopted the following guideline to represent the minimal level of acceptable performance (C+) by a student at the completion of this clinical experience.

PASSING CRITERIA FOR PTA 215 CLINICAL PRACTICE I- TERMINAL CLINICAL EXPERIENCE:

Safety: The student displays this behavior at an **Entry Level** performance anchor

Clinical Behavior: The student displays this behavior at an **Entry level** performance anchor.

Accountability: The student displays this behavior at an **Entry level** performance anchor

Cultural Competence: The student displays this behavior at an **Entry Level** performance anchor.

Communication: The student displays this behavior at an **Entry Level** performance anchor

Self-Assessment and Lifelong learning: The student displays this behavior at an **Entry Level** performance anchor.

Clinical Problem Solving: The student displays this behavior at an **Entry Level** performance anchor.

Interventions: Therapeutic Exercises: The student displays this behavior at an **Entry Level** performance anchor

Interventions: Therapeutic Techniques: The student displays this behavior at an **Entry Level** performance anchor

Interventions: Physical Agents and Modalities: The student displays this behavior at an **Entry Level** performance anchor

Interventions: Electrotherapeutic Modalities: The student displays this behavior at an **Entry Level** performance anchor

Interventions: Functional Training and Application of Devices and Equipment: The student displays this behavior at an **Entry Level** performance anchor

Documentation: The student displays this behavior at an **Entry Level** performance anchor

Resource Management: The student displays this behavior at an **Entry Level** performance anchor

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The PTA program at UCNJ will not accept any paper from of CPI and all CI will need to complete the CPI, version 3.0, electronically.

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
Associate Professor/ACCE
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732-412-3541
Marie-helene.mcandre@ucc.edu

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CLINICAL FORMS

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 into your clinical exposure as a student.

Personal Data Sheet Form

This form is used by the program to contact the person required if the student has an emergency in the clinic.

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 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 Contract created by the ACCE.

Weekly Performance Summary Form

This form will assist the student and CI in formulating goals on a weekly basis to achieve the set objectives and anchors for the clinical experience. The form will also allow the student and CI track their weekly performance during their clinical experiences.

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 the patient.

Dismissal Notice

This form may be used to document that a student has been informed that they are in jeopardy of failing a clinical experience.

Student Affiliation Information Form

This form is used to document student choices for their clinical experiences and to ascertain where, if any, they have performed work as an aide. A student will not be placed at a clinical site where they have worked as an aide.

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HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPPA)

Students are provided with the HIPAA law so that they can familiarize themselves with this law before they embark on their clinical experiences.

HIPPA Confidentiality Agreement

This form is used to attest that a student has read the HIPPA law and are aware of the penalties if they fail to follow the law during their clinical experiences.

Student Conference Record

This form is used to document a meeting between a student and faculty regarding student performance.

Release Form

This form is used to inform students about the necessary documents they need to upload to castle branch and how their records are maintained.

ACCE Midterm Visit Form

The ACCE uses this form to record student progress in their clinical experiences during the midterm clinical site visit.

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CLINICAL EXPERIENCE FORM

Student Name:

CENTER	TYPE OF EXPERIENCE	DATES

What do you hope your clinical instructor will expect of you?

What are you afraid your clinical instructor will expect of you?

State three educational objectives for this clinical experience.

- 1.
- 2.
- 3.

Student Signature:

Date:

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PERSONAL DATA SHEET FOR CLINICAL EDUCATION

Name:	
Address:	
Cell#:	
Home Phone#:	
Emergency Phone #:	
Private Email Address:	
Foreign Languages Spoken:	

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

Name:	
Address:	
Cell/Work#:	
Home Phone#:	
Relationship:	

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INITIAL WEEK EVALUATION

First Name: _____ **Last Name:** _____ **Date:**__

AFFILIATION SITE:

Student	Meets Expectations	Requires Improvement	Does not meet expectations	Comments
Is Punctual and prepared for the clinic day				
Observation skills				
Demonstrates Professional Conduct				
Demonstrates Adult learning behavior for learning				
Communicates Effectively With Peers, Patients and Supervisors				
Demonstrates initial Critical thinking skills				
Accepts and applies constructive feedback				
Is flexible and adapts to needed changes				

Comments:

CLINICAL INSTRUCTOR: _____ **LICENSE#:**

Student Signature:

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CLINICAL PERFORMANCE WARNING

Date:

Student:

Instructor:

ID #:

Course #:

PROBLEM ASSESSMENT

- Tardiness
- Excessive absenteeism
- CI provided Homework late/missing
- Non improving communication skills

- Lack of preparation for clinical assignment
- Previous learning (didactic/clinical) not applied in the clinical setting

- Lack of improvement despite corrective measures undertaken by the clinical instructor
- Other:

Comments:

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Clinical Site:

Clinical Instructor's Name:

Clinical Instructor's signature:

Student Name:

Student Signature:

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WEEKLY PERFORMANCE SUMMARY FORM

Name: _____

Date: __

Affiliation _____

Week# _____

Level of Affiliation

1. Identify positive experiences this week:

2. Identify experiences or questions that were challenging or that you would or did discuss with your CI.

3. Did you reach the goals set in the previous week

6. List three measurable goals/objectives to be accomplished in the coming week:

a. _____

b. _____

c. _____

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CI's Summary of Student Performance for the Week:

Student's Summary of their performance for the Week

Student Signature:

CI Signature

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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.
6. This form must be filled out by the CCCE or CI

Record incident clearly and concisely without reflecting any biases:

Student: _____ **Date:** _____ **Time:** _____

CI/CCE: _____

Description of the incident:

Description of any related injury:

Student's Action:

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Student 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, _____, that I am not meeting the standards of the facility and the physical therapy assistant program course criteria for the clinical experience. I understand that I am in jeopardy of failing this experience at this site and dismissal from the program.

Student's Signature:

Date:

ACE'S Signature:

Date:

CI's Signature:

Date:

CCCE' s Signature:

Date:

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STUDENT AFFILIATION INFORMATION

NAME:	ADDRESS:
TOWNS IN CLOSE PROXIMITY:	COUNTY:
1.) Where did you do your volunteer hours?	
2.) If any, where did you do your aide work?	

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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 follow this important law.

The following information will help you understand the terms and procedures and are general guidelines to follow. Students at UCNJ 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 ABOUT THEIR RIGHTS UNDER HIPPA AND HOW THE FACILITY MAY USE OR DISCLOSE THEIR PROTECTED**

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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 FROM ANOTHER HEALTH CARE PROVIDER. (ex.: transferred patients from another facility)

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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

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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 experiences, 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:

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STUDENT CONFERENCE RECORD

Date:

Student:

Faculty:

Topics discussed:

Remediation Plan:

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Faculty Recommendations:

Comments:

Student Signature:

Date:

Instructor Signature:

Date:

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RELEASE FORM

The UCNJ 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.

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 upload the necessary documents on Castle Branch as instructed by the college. Students themselves provide access to clinical sites regarding their health information through castle branch. A copy of students' health information is not kept on college premises.

I have reviewed and understood the information above and understand that I need to upload the necessary documents on Castle Branch and provide access to those forms to my assigned clinical sites so that I can begin my clinical experience.

Please Print

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ACCE MIDTERM VISIT FORM

DATE	
STUDENT NAME	
CI NAME	
CLINIC NAME/LOCATION	
TYPES OF PATIENTS SEEN	
ROTATION	

Satisfactory: students' meet objectives in knowledge base and skill; no concerns

Unsatisfactory: Students' does not meet objectives in knowledge base and skill

Improvement Needed: Students' present skills for stated objectives with CI prompting; area requires further development.

Objectives/ Skills	Satisfactory	Unsatisfactory	Improvement needed	Comment
Performs in a safe manner				
Conducts self in a responsible manner				
Interacts with others in a respectful manner				
Adheres to ethical and legal standards				
Communicates appropriately				
Performs appropriate documentation				
Demonstrates appropriate judgement				
Performs interventions in a competent manner				
Manages resources				
Observational skills				
Chart review				
Modalities				
Exercise				

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MMT				
Goniometry				
Stretching				
Gait training				
Vitals				
Orthopedic special tests				
Transfers				
PNF				
Bandaging Taping				
Balance				
Sensory Testing				
Equipment Use				
Traction Manual Mechanical				

Student Strengths:

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Areas to Improve:

In-service Topic:

Comments:

Student Signature

Date