

Physical Therapist Assistant

PTA PROGRAM & CLINICAL EDUCATION HANDBOOK for PTA STUDENTS & CLINICIANS

2016 Edition



Herkimer™

THE STATE UNIVERSITY OF NEW YORK

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Failure to Read This Handbook Does Not Excuse Students From the Requirements and Regulations Herein.

SECTION I:

PROGRAM



PTA PROGRAM

PROGRAM PHILOSOPHY

HERKIMER COLLEGE Physical Therapist Assistant program prepares students to enter the healthcare workforce as a Physical Therapist Assistant with an Associate's in Applied Science Degree. The program strives to provide our students with a quality education that promotes professional healthcare practices, while maintaining established guidelines for clinical practice as outlined by the APTA and which emphasizes ongoing post-graduation professional education. The program seeks to increase each student's potential through informal student-faculty exchange and interactions with additional learning and service opportunities sponsored by the Physical Therapist Assistant Club.

MISSION STATEMENT

The Physical Therapist Assistant Program will, by offering students an affordable, quality education, provide local and regional areas with competent, professional, employable, healthcare providers. The PTA is trained, under the supervision of a licensed Physical Therapist, to approach a diversity of health related conditions in a manner that follows established guidelines for practice as outlined by the APTA. The PTA program emphasizes ongoing post-graduate professional education, thereby supporting the overall mission of HERKIMER COLLEGE.

ACCREDITATION STATEMENT

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

Physical Therapy Oath

In the presence of colleagues, friends, family and teachers, and in view of the honored profession into which I am entering, I solemnly and willingly state that I dedicate myself to the following:

I will practice Physical Therapy with compassion and patience.

I will preserve and value the dignity of people who seek my care and will respect them, the choices they make, and the confidential nature of our relationship.


I will do no harm to another.

I will promote health and well-being through the alleviation and prevention of impairments and functional limitations due to illness or injury.

I dedicate myself to life-long learning to augment and expand my knowledge and the profession through consultation, education, and research.

I accept responsibility to assure those who seek Physical Therapy receive services that are proper, ethical, and just. I will not allow my judgment to be influenced by greed or unethical behavior. I expect the same from my colleagues.

Thus with this oath, I freely accept the obligations and rewards which accompany the practice of Physical Therapy.

<p>Program Goals</p> <p><i>A goal of this program is to...</i></p> 	<p>...graduate competent entry level clinicians</p>	<p>...Provide students with opportunities to participate in activities to promote the profession, to promote social responsibility and the professional culture of continuing education.</p>	<p>...meet program entry level expectations</p>	<p>... provide graduates with exposure to a variety of clinical experiences</p>	<p>Meets General Ed Requirement</p>	<p>Meets Graduation Requirement</p>
<p>ILO Reference</p> <p>To which ILO(s) do the PLO(s) link?</p>	<p>A B C</p>	<p>D</p>	<p>A B C D</p>	<p>A B C D</p>		
<p>Program Learning Outcomes</p> <p><i>Successful graduates from this program will be able to...</i></p>	<p>...utilize a knowledge base and scientific principles to effectively implement a physical therapist's plan of care that satisfactorily meets employer expectations and needs</p>	<p>...display professional behaviors in the clinical setting</p>	<p>...pass the licensing exam and find a job as a PTA to fill local and regional marketplace needs</p>	<p>...have three clinical experiences, in three clinical locations to add to their professional resume.</p>		
<p>Assessment Tools</p>	<ol style="list-style-type: none"> Every lab course in this program utilizes practical examinations and competencies with associated rubrics assessing patient orientation, professionalism, safety, technique and documentation Many courses in the curriculum require group projects, papers and presentations graded using rubrics Locally devised multiple choice quizzes, unit tests and examinations that include anatomy, implementation, problem solving, critical thinking questions Each clinical fieldwork assesses technical competence in intervention and data collection, time management skills, safety, communication, documentation, professional behaviors, interpersonal skills, problem solving, cultural competence, lifelong 	<ol style="list-style-type: none"> Every semester a course in the curriculum requires professional development that can include attending continuing education lectures, workshops, professional meetings, promote the profession and promote volunteerism to community needs graded by a rubric Every lab course in this program utilizes practical examinations and competencies with associated rubrics assessing professionalism. Each clinical fieldwork assesses time management skills, professional behaviors, interpersonal skills, cultural competence, lifelong learning using the CPI and 	<ol style="list-style-type: none"> Graduate reports of passing boards FSBPT reports Graduate reports of employment Retention data: Excel data collection of students entering and leaving the program maintained by program director. At least 60% Retention in any 2 year period At least 85% of graduates successfully pass the FSBPT National Licensing Examination averaged over a 2 year period. At least 90% employment in any 2 year period CPI PT 280 – Final Clinical must meet DCE expectations for entry level performance 	<p><u>DCE Data</u></p> <ol style="list-style-type: none"> Data collection maintained by DCE on every clinical review global reports from CPI web 100% of program graduates will have a variety of clinical experiences in a variety of clinical fieldwork locations as specified by the DCE policy 100 % of Clinical placements are within the correct semester to allow on time graduation. 		

	<p>learning using the CPI and associated rubric to determine entry level competency.</p> <ol style="list-style-type: none"> 5. This program is accredited by CAPTE. Onsite accreditation team verified each competency and test question meeting accreditation standards. 6. Annual/biennial survey of graduate employers: <ul style="list-style-type: none"> • 100% will rate graduates as average to above average in meeting safety competency • at least 85% will rate graduates as average to above average in PT intervention delivery, data collection skills, critical thinking, problem solving, integration of skills and procedures learned from classroom to clinical site, documentations skills, all aspects of communication, in time management skills, professional behavior, ethical behavior, interpersonal skills and cultural competence, competent in computer and other current technology as it relates to the Physical Therapy environment. 7. Annual/biennial survey of graduate employers – 85% will rate their employee satisfaction as “highly satisfied” or “satisfied” 8. CPI PT 280 – Final Clinical <ul style="list-style-type: none"> • Safety: must be at entry level • All other criteria on the CPI between Advanced Intermediate Performance and Entry Level as rated by 	<p>associated rubric to determine entry level competency.</p> <ol style="list-style-type: none"> 4. Annual/biennial survey of graduate employers: at least 85% of graduates will participate in professional continuing education, at least 85% will rate graduates as average to above average in time management skills, professional behavior, ethical behavior, interpersonal skills and cultural competence 5. Program graduates with a mandatory minimum of one year clinical experience at their facility, a minimum of 25% of program graduates become clinical instructors after 5 years of being in the field. 			
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	the Clinical Instructor and reviewed by the DCE					
FS 100						
MA 127 Or MA 141	X					
PT 121	X/ I	X/I	X/I			
PT 131	X/I/A/P	X/I	X/I/A/P			
PT 132	X/I/A/P	X/I	X/I/A/P			
SC 253	X					
EN 111						
PT 141	X/I/A/P	X/A	X/I/A/P			
PT 142	X/I/A/P	X/A	X/I/A/P			
PT 143	X/I/A/P	X/A	X/I/A/P			
SC 254	X					
SS 151	X					
EN 112						
PT 251	X/I/A/P	X/A/P	X/I/A/P			
PT 252	X/I/A/P	X/A/P	X/I/A/P			
SS 155	X					
PT 260	X/A/P	X/P	X/I/A/P			
PT 275	X/A/P	X/P	X/I/A/P			
PT 206	X/I/A	X/I/A	X/I/A	X/I/A		
PT 255	X/A	X/A	X/I/A	X/A		
PT 280	X/A/P	X/A/P	X/I/A/P	X/A/P		
Physical Ed						
Physical Ed						

DESIRED PROGRAM OUTCOME ASSESSMENTS 2015

1. **Graduation:** At least 60% of students entering the program will graduate from the PTA program within 2-3 years.
2. **Experience:** 100% of program graduates will have had a variety of clinical experiences. One clinical experience will be inpatient, one will be outpatient and one will be in an area of preferred practice. The other clinical experiences may include, but will not be limited to, out-patient orthopedics, pediatric, geriatric and developmental disabilities.
3. **Performance on the FSBPT Licensing Examination:** At least 85% pass rate of graduates averaged over any 2 year period.
4. **Employment Rate:** 90% of graduates seeking employment will be employed within 1 year of graduation averaged over any 2 year period.
5. **Graduate Clinical Competence is demonstrated by:**
 - a) **Entry Level Clinician at Graduation:** 100% of graduates demonstrate entry level clinical skills at graduation.
 - b) **Competent clinicians:** at least 85% of employers will report they are “highly satisfied” or “satisfied” with program graduates and that they would rehire them if given the opportunity.
 - c) **Physical Therapy Technical Competence:** At least 85% of employers will rate graduates as average to above average in PT intervention delivery and data collection.
 - d) **Critical Thinking, Problem Solving, and Integration of Skills and Procedures Learned in all Coursework:** At least 85% of employers will rate graduates as average to above average in critical thinking, problem solving and integration of skills and procedures learned from classroom to clinical site.
 - e) **Safety:** 100% of employers will rate graduates as average to above average in meeting safety competency.
 - f) **Communication Skills:** At least 85% of employers will rate graduates as average to above average in all aspects of communication.
 - g) **Documentation Skills:** At least 85% of employers will rate graduates as average to above average in documentation skills.
 - h) **Technology Competence:** At least 85% of employers will rate graduates as competent in computer and other current technology as it relates to the Physical Therapy environment.
6. **Graduate professionalism is demonstrated by:**
 - a) **Professional Behavior:** At least 85% of employers will rate graduates as average or above average in professional behavior
 - b) **Ethical Behavior:** At least 85% of employers will rate graduates as average or above average in ethical behavior
 - c) **Interpersonal Skills:** At least 85% of employers will rate graduates as average or above average in interpersonal skills.

- d) **Time Management Skills:** At least 85% of employers will rate graduates as average or above average in time management skills.
 - e) **Cultural Competence:** At least 85% of employers will rate graduates as average to above average in cultural competency.
 - f) **Life Long Learning:** At least 85% of graduates will participate in professional continuing education.
7. **Faculty Contemporary Expertise:** 100% of program faculty demonstrate contemporary expertise in the areas they teach as defined by the program.

FACULTY OBJECTIVES TO ENHANCE PROGRAM EFFECTIVENESS

Curriculum Development

The program faculty will evaluate the didactic component of the program on an ongoing basis, at least annually to ensure material is appropriate, up to date and progresses from very basic to more complex levels of application.

The program faculty will evaluate the clinical component of the program on an ongoing basis, at least annually to ensure clinical goals and objectives are appropriate and up to date.

The program faculty will communicate regularly with general education, science, and clinical faculty to ensure the integration of general education, science and PTA skills at all levels of the curriculum.

The program faculty will conduct graduate performance assessments and adjust the didactic portion or clinical portion of the program appropriately.

The program faculty will review and revise the program philosophy, mission statement, goals, objectives and student outcomes on an ongoing basis, at least annually.

Role Modeling

The program faculty will model and instruct appropriate professional behaviors, attitudes and skills in a variety of lecture, laboratory and clinical learning experiences.

The program faculty will expose students to career development opportunities through continuing education and leadership opportunities to instill a love of learning and lifelong commitment to the pursuit of knowledge.

The program faculty members model professional behavior through APTA membership, attendance at professional meetings and encouraging student participation in both meetings and continuing education opportunities. The PTA students are encouraged to become APTA members in their freshman year.

Skill Development and Competency

The program faculty will determine competency in the skills and practical examinations taught in the program.

The program faculty will hold open labs, structured study groups, individual and/or group review classes and individual office hour appointments to ensure students have a supportive environment in which to learn.

The DCE will schedule student clinical affiliations in a variety of settings to ensure students have an opportunity for supervised practice of all competencies and skills instructed in the program.

The program faculty takes a “holistic” approach to instruct students in therapeutic patient interventions.

The program faculty will use a variety of methodologies to foster cultural competence.

The program faculty will offer remedial suggestions to students not completing didactic or clinical coursework with adequate competency.

Other Roles

The program faculty will advise and counsel qualified students pursuing a PTA degree.

The program faculty will advise and counsel program graduates seeking employment as a PTA.

The program faculty will forward employment opportunities to program graduates.

The program faculty will advise and counsel unqualified students to consult the counseling office to pursue an alternate career.

Expected PTA Program Student Goals per CAPTE

Excepted from the “Standards and Required Elements for Accreditation of Physical Therapist Assistant Education Programs” effective January 1st 2015.

Ethics, Values and Responsibilities

7D1 Adhere to legal practice standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.

7D2 Report to appropriate authorities suspected cases of abuse of vulnerable populations.

7D3 Report to appropriate authorities suspected cases of fraud and abuse related to the utilization of and payment for physical therapy and other health care services.

7D4 Perform duties in a manner consistent with the Guide for Conduct of the Physical Therapist Assistant (PTA) and Standards of Ethical Conduct (PTA) to meet the expectations of patients, members of the physical therapy profession, and other providers as necessary.

7D5 Perform duties in a manner consistent with APTA’s Values Based Behaviors for the Physical Therapist Assistant.

7D6 Implement, in response to an ethical situation, a plan of action that demonstrates sound moral reasoning congruent with core professional ethics and values.

7D7 Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers.

7D8 Identify, respect, and act with consideration for patients’/clients’ differences, values, preferences, and expressed needs in all work-related activities.

7D9 Apply current knowledge, theory, and clinical judgment while considering the patient/client perspective and the environment, based on the plan of care established by the physical therapist.

7D10 Identify basic concepts in professional literature including, but not limited to, validity, reliability and level of statistical significance.

7D11 Identify and integrate appropriate evidence based resources to support clinical decision-making for progression of the patient within the plan of care established by the physical therapist.

7D12 Effectively educate others using teaching methods that are commensurate with the needs of the patient, caregiver or healthcare personnel.

7D13 Participate in professional and community organizations that provide opportunities for volunteerism, advocacy and leadership.

7D14 Identify career development and lifelong learning opportunities, including the role of the physical therapist assistant in the clinical education of physical therapist assistant students.

Patient/Client Management

7D15 Interview patients/clients, caregivers, and family to obtain current information related to prior and current level of function and general health status (e.g., fatigue, fever, malaise, unexplained weight change).

7D16 Use the International Classification of Functioning, Disability and Health (ICF) to describe a patient's/client's impairments, activity and participation limitations.

Plan of Care

7D17 Communicate an understanding of the plan of care developed by the physical therapist to achieve short and long term goals and intended outcomes.

7D18 Review health records (e.g., lab values, diagnostic tests, specialty reports, narrative, consults, and physical therapy documentation) prior to carrying out the PT plan of care.

7D19 Monitor and adjust interventions in the plan of care in response to patient/client status and clinical indications.

7D20 Report any changes in patient/client status or progress to the supervising physical therapist.

7D21 Determine when an intervention should not be performed due to clinical indications or when the direction to perform the intervention is beyond that which is appropriate for the physical therapist assistant.

7D22 Contribute to the discontinuation of episode of care planning and follow-up processes as directed by the supervising physical therapist.

Intervention (This list is adapted from the Guide to Physical Therapist Practice (2014).

7D23 Demonstrate competence in implementing selected components of interventions identified in the plan of care established by the physical therapist. Interventions include:

- a. Airway Clearance Techniques: breathing exercises, coughing techniques and secretion mobilization
- b. Application of Devices and Equipment: assistive / adaptive devices and prosthetic and orthotic devices
- c. Biophysical Agents: biofeedback, electrotherapeutic agents, compression therapies, cryotherapy, hydrotherapy, superficial and deep thermal agents, traction and light therapies
- d. Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
- e. Manual Therapy Techniques: passive range of motion and therapeutic massage
- f. Motor Function Training (balance, gait, etc.)

- g. Patient/Client Education
- h. Therapeutic Exercise
- i. Wound Management: isolation techniques, sterile technique, application and removal of dressing or agents, and identification of precautions for dressing removal

Test and Measures (Categories are adapted from the Guide to Physical Therapist Practice (2014).

7D24 Demonstrate competence in performing components of data collection skills essential for carrying out the plan of care by administering appropriate tests and measures (before, during and after interventions) for the following areas:

- a. Aerobic Capacity and Endurance: measurement of standard vital signs; recognize and monitor responses to positional changes and activities (e.g., orthostatic hypotension, response to exercise)
- b. Anthropometrical Characteristics: measurements of height, weight, length and girth
- c. Mental Functions: detect changes in a patient's state of arousal, mentation and cognition)
- d. Assistive Technology: identify the individual's and caregiver's ability to care for the device; recognize changes in skin condition and safety factors while using devices and equipment
- e. Gait, Locomotion, and Balance: determine the safety, status, and progression of patients while engaged in gait, locomotion, balance, wheelchair management and mobility
- f. Integumentary Integrity: detect absent or altered sensation; normal and abnormal integumentary changes; activities, positioning, and postures that aggravate or relieve pain or altered sensations, or that can produce associated skin trauma; and recognize viable versus nonviable tissue
- g. Joint Integrity and Mobility: detect normal and abnormal joint movement
- h. Muscle Performance: measure muscle strength by manual muscle testing; observe the presence or absence of muscle mass; recognize normal and abnormal muscle length, and changes in muscle tone
- i. Neuromotor Development: detect gross motor milestones, fine motor milestones, and righting and equilibrium reactions
- j. Pain: administer standardized questionnaires, graphs, behavioral scales, or visual analog scales for pain; recognize activities, positioning, and postures that aggravate or relieve pain or altered sensations
- k. Posture: determine normal and abnormal alignment of trunk and extremities at rest and during activities
- l. Range of Motion: measure functional range of motion and measure range of motion using an appropriate measurement device
- m. Self-Care and Civic, Community, Domestic, Education, Social and Work Life: inspect the physical environment and measure physical spaces; recognize safety and barriers in the home, community and work environments; recognize level of functional status; administer standardized questionnaires to patients and others

- n. Ventilation, Respiration and Circulation: detect signs and symptoms of respiratory distress, and activities that aggravate or relieve edema, pain, dyspnea, or other symptoms; describe thoracoabdominal movements and breathing patterns with activity, and cough and sputum characteristics

7D25 Complete accurate documentation that follows guidelines and specific documentation formats required by state practice acts, the practice setting, and other regulatory agencies.

7D26 Respond effectively to patient/client and environmental emergencies that commonly occur in the clinical setting.

Participation in Health Care Environment

7D27 Contribute to efforts to increase patient and healthcare provider safety.

7D28 Participate in the provision of patient-centered interprofessional collaborative care.

7D29 Participate in performance improvement activities (quality assurance).

Practice Management

7D30 Describe aspects of organizational planning and operation of the physical therapy service.

7D31 Describe accurate and timely information for billing and payment purposes.

ADMISSION REQUIREMENTS POLICY

Purpose: To ensure that students admitted to the PTA program have an adequate grounding in science and mathematics. To ensure students have investigated the field of physical therapy prior to admission. To enable student success in the program and when taking the boards post-graduation.

Current Admissions Requirements

Admissions to the PTA program are competitive. Students possessing minimal requirements are invited to apply but are not guaranteed admission to the program.

Minimal Entrance Requirements for PTA program

1. High school graduates must have:

- Average of 80% or higher
- 80% or higher in Regents Biology
- 75% or higher in their mathematics sequence
- 75% or better in chemistry or physics
- 15 hour clinical observation
- 2 letters of reference
- Completed questionnaire

2. Transfer students have two admission tracks

Admission Track 1:

- The applicant must have a GPA of 3.0
- B or better in college biology or a C or better in Anatomy & Physiology I
- C or better in college mathematics
- C or better in chemistry or physics
- 15 hour clinical observation
- 2 letters of reference
- Completed questionnaire

Admission Track 2:

- The applicant must have a GPA of 3.0
- B or higher in Anatomy & Physiology I (all other science requirements are waived)
- C or better in college mathematics
- 15 hour clinical observation
- 2 letters of reference
- Completed questionnaire

Admissions Procedure:

1. The admissions specialist initially does a first pass over the PTA Program applications and makes basic recommendations on the appropriateness of the applicant
2. Then both full time faculty members review all applications and make acceptance recommendations.
3. Then the Dean reviews the applications and recommends admission or not to the program based on the faculty impressions.
4. The files are returned to admissions.
5. Admissions sends letters to the student to offer a place in the program, wait list if full or advise additional preparation is required if the applicant doesn't meet requirements.
6. The program looks to accept 30 – 32 qualified applicants annually.
7. The program faculty annually review admission requirements as delineated in the description of core faculty.

Review of Appropriateness of Admissions Prerequisites Procedure:

1. The program faculty annually review admission requirements as delineated in the description of core faculty.
2. If the program assessment of the curriculum and program outcomes indicate that a change is required the core faculty develop a revised set of program prerequisites in conjunction with the PTA program Advisory committee recommendations.
3. The core faculty seek support of those decisions from the Associate Dean of Academic Affairs in conjunction with the Director of Admissions.

Thresholds:

1. Boards: Less than 85% pass rate on the NPTE averaged over 3 years is an indicator for program review and criteria review following our goal flowchart plan.
2. Attrition: less than 70% of the students progressing from the first to the second semester will trigger the review process.
3. Graduation rate: less than 60% of the matriculated students complete the PTA program averaged over 3 years is an indicator for program review and criteria review following our goal flowchart plan.

Responsible: all

HANDBOOK POLICY

Purpose: All students will be informed and knowledgeable regarding the Physical Therapist Assistant (PTA) program expectations and PTA program values when they begin the curriculum. The program faculty annually updates and revises those policies as part of their commitment to program evaluation.

First Year in the PTA Program Procedure:

1. As a PTA student, you will receive the program handbook access online during your first Fall semester in the PTA program.
2. The designated faculty member will go through this book with you during PT 121 Introduction to Rehabilitation.
3. As a PTA student, you will acknowledge receipt of your handbook and indicate your acceptance of the program's policies as outlined in the handbook.
4. You will give your informed consent to participate in the program by signing the consent in front of the College Notaries during your first semester.

Subsequent Years in the PTA Program Procedures:

1. As a returning PTA student, you will receive access online to the revised program handbook during your subsequent Fall semesters in the PTA program.
2. You will acknowledge your receipt of the handbook and indicate your acceptance of the program's policies (as outlined in the annually revised handbook) by returning the signature page which indicates you have both read and accepted the program policies.

Faculty Responsible: Program Director

ETHICS POLICY

Purpose: To produce ethical, honest practitioners who are prepared to hold the public trust. You will be expected in practice to maintain high standards of conduct such as accurately documenting or billing your patient interactions, dealing with other practitioners in an honorable manner, maintaining confidentiality and to promoting the ethical standards of the profession.

Procedure:

1. Each student will receive the PTA Student Code of Ethics in the PTA Program Handbook each year.
2. Each student will annually acknowledge their acceptance of all policies and the ethical obligations and responsibilities of being in the PTA program and the profession.

PTA Student Code of Ethics

The student in the PTA program is expected to abide by all of the College's policies as outlined in the College Student Handbook. In addition, the PTA student is held to these standards of professional conduct:

1. As a student in the HERKIMER COLLEGE PTA program, it is expected that you will follow the "Standards of Ethical Conduct for the Physical Therapist Assistant" and its interpretive standards, the "Guide for Conduct of the Affiliate Member".
2. You will not plagiarize or aid another in plagiarism. You must submit your own original work and properly cite your sources. Assisting another individual to plagiarize will result in all individuals having committed the same act, and plagiarism penalties will be applied to all involved.
3. You will not obtain or use unauthorized assistance. This includes the use of crib sheets unless a test is designated as "open book", obtaining advance copies of tests or quizzes, includes taking illegal screen shots of tests, textbooks etc., disclosing test or quiz content to other individuals in the program, using books or resources if quizzes are online, copying in any manner tests or quizzes.
4. You are entering a profession that values honesty and professional ethics. As a student in the PTA Program it is your responsibility to inform faculty if you are aware of cheating by anyone enrolled in the PTA Program. This is not "tattling", this is maintaining the integrity of the profession. This is your professional obligation.
5. You will maintain confidential information learned in either the classroom or clinical setting as privileged information.
6. The PTA student must respect the Health Insurance Portability and Accountability Act (HIPAA). You will maintain individually identifiable health information, in any form it is received, that is likely to identify an individual in either the classroom or clinical setting as privileged and confidential information.
7. You will not use or abuse drugs and alcohol. You will not come to class or clinical affiliations or observations in an impaired manner.
8. You will not harass, make unwelcome sexual advances or any implied or implicit sexual remark or gesture.
9. You will not use the belongings of other students without permission, e.g. using or taking someone else's lab coat for a practical exam.
10. You will not commit deceit in any manner, e.g. lying to the faculty member that you attended an off-site observation if you didn't attend it.

11. You will appropriately represent the program by wearing professional dress during any off-site observation or clinical affiliation and during any specially designated days on campus.

Failure to abide by Herkimer College's Academic Honesty Policy and Procedure will result with one of the penalties listed in the Student Handbook.

Faculty Responsible: All

SEXUAL HARASSMENT

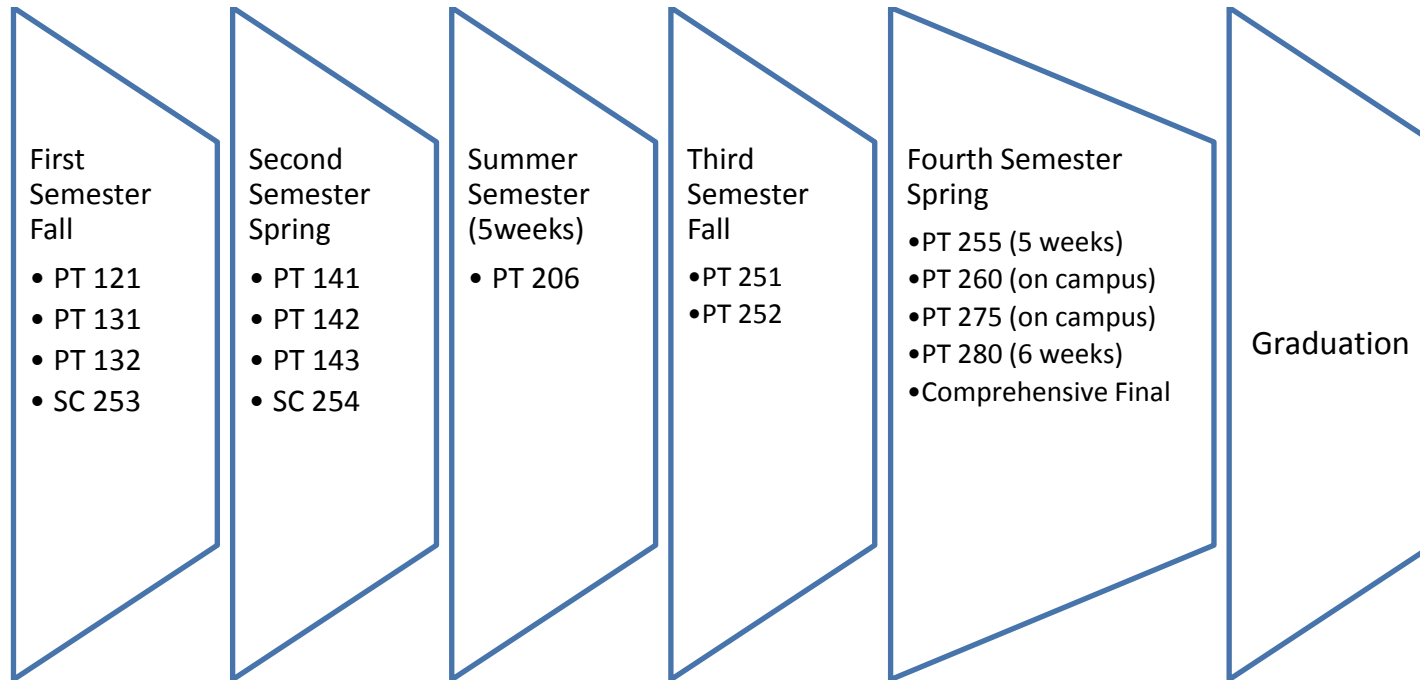
Sexual harassment is defined by the Equal Employment Opportunity Commission as: Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature, explicit or implied, ... when they are accompanied by one or more of the following conditions: (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

The guidelines quoted above from the Equal Employment Opportunity Commission apply only to employment. However, sexual harassment of students is of comparable concern to Herkimer College. Title IX of the Education Amendments of 1972, which is intended to eliminate discrimination on the basis of sex in educational programs and activities, similarly prohibits sexual harassment of students.

Implicit in the legal definition of sexual harassment is the assumption that such behavior prevents the realization of the victim's full potential as a student or employee. A person in a responsible position sexually harassing another who reports to him or her, or whose academic progress can be influenced by him or her (an instructor-student relationship) is robbing the victim of the freedom to work or to study at the level of his or her best performance. For this reason, sexual harassment is considered unethical and unprofessional, as well as illegal behavior. In an effort to prevent sexual harassment, sexual relationships between any employees and students or supervisors and subordinates is strongly discouraged.

Consider the classroom setting as your workplace and the HERKIMER COLLEGE Sexual Harassment policy applies with student to student interaction.

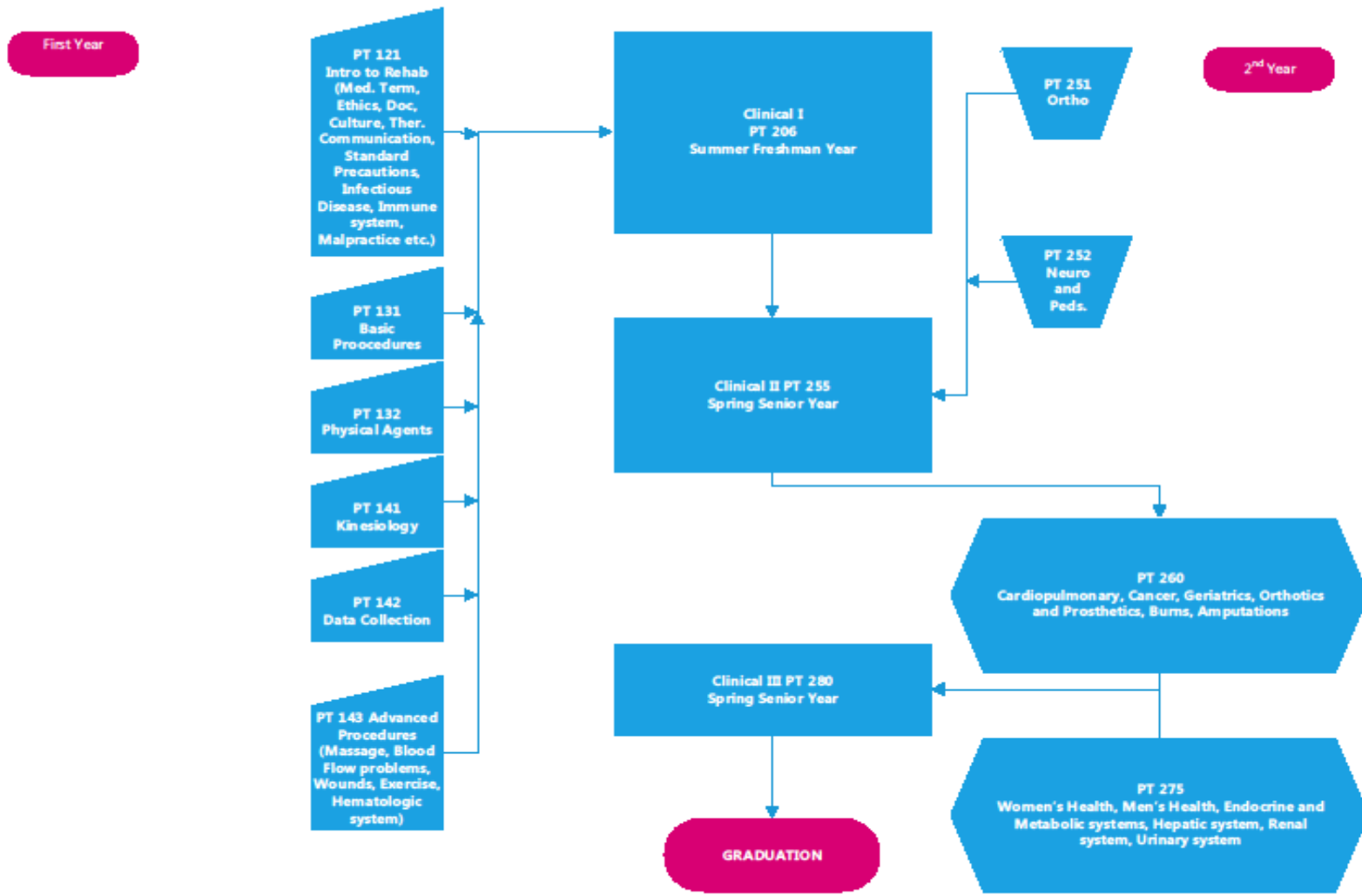
PROGRAM SCHEMATIC



Program Notes:

All PT classes must be successfully completed with a C+ or better to progress to the next semester. A&P classes (SC 253 and SC 254) must be passed with a C or better to progress within the program. Failure to achieve a C+ in PT classes and a C in A&P will result in repeating previously passed coursework. No exceptions. The student must successfully pass all clinical fieldwork assignments to graduate from this program. The student must successfully pass a comprehensive Final Exam prior to graduation with a C+ or better.

COURSEWORK PRIOR TO CLINICAL



ATTENDANCE POLICY

Purpose: To ensure students learn and practice all course materials, to prepare safe and competent physical therapist assistants, to produce graduates with the work ethics expected in the healthcare marketplace and to uphold the public trust in thoroughly educating the student in all procedures, interventions and program expectations.

Student Procedure:

1. You are responsible for attending and participating in all lectures and labs. Attendance is mandatory.
2. You are expected to be in class, prepared (e.g. dressed in lab clothes, reading assignments complete) and on time unless a legitimate reason prevents you from doing so. Treat this class as you would your job.
3. It is your responsibility to notify the instructor prior to missing class.
4. Documentation by a medical provider of an illness or death in the immediate family are examples of legitimate reasons for an absence.
5. Any unexcused absence will have a bearing on your final grade. For each unexcused hourly absence, one point will be deducted from your final grade. This means that if you miss a 3 hour class, 3 points will be subtracted from your grade. Tardy attendance will count as a ½ hour absence. Impact for student with 5 hours absence: final grade 83 (B) for class work, tests, etc. minus 5 for absences would result in a final grade of 78 or C+.
6. You are responsible for seeing the instructor as soon as possible following any absence to make up coursework.
7. Any student who misses 20% of scheduled lectures/labs will receive an automatic failing grade.
8. A faculty member may perform an administrative withdrawal for a student who has missed 20% of the class meetings in a course.

Faculty Procedure:

1. Record attendance or tardy attendance.
2. Collect documentation of excused absence.
3. Meet with the student during office hour to make up coursework.

Faculty Responsible: All

GRADE DETERMINATION POLICY

Purpose: To inform students enrolled in the program of the grading mechanism used to determine final course grades in the technical component of the PTA program.

Procedure: Final grading in all technical courses will be based on the following percentages:

A+	=	98 – 100
A	=	94 – 97
A-	=	90 – 93
B+	=	88 – 89
B	=	84 – 87
B-	=	80 – 83
C+	=	78 – 79
C	=	74 - 77
C-	=	70 – 73
D+	=	68 – 69
D	=	64 - 67
D-	=	60 – 63
F	=	below 60

Faculty Responsible: All

EXAMINATION POLICY

Purpose: To inform all students in the PTA program of how examinations, unit tests and quizzes will be handled by the PTA Program faculty.

Procedure:

1. Final, midterm and unit tests will be announced in advance in each class syllabus. Quizzes may or may not be announced.
2. All testing is to be done on the day and time scheduled. Make up tests will only be allowed if the student, having a legitimate reason, contacts the instructor prior to the scheduled test. Failure to do so forfeits the student's opportunity to take a makeup test.
3. Unless a quiz, test or final exam has been announced as "open book", whether in class or online, no outside assistance is permitted
4. No materials that can assist a student to cheat (violation of the Herkimer College Academic Honesty Policy page 18 in the Student Handbook) are allowed in the testing environment. These materials include crib sheets, notes on any clothing or body part, cell phones, or any other tool that could potentially assist a student. Any of these materials found on or near a student during such testing will result in an automatic failure of the quiz, test or exam with a grade of 0, no questions asked. It is suggested that you bring your cell phone to the instructor's desk prior to beginning.

Faculty Responsible: All

TIME MANAGEMENT POLICY

Purpose: Students in the Physical Therapist Assistant curriculum are expected to demonstrate excellent time management skills. You are entering a health care field that necessitates timeliness in all aspects of your professional life. You will be held to those standards as a student in this curriculum.

Procedure:

1. All assignments are due on the assigned date. Tardiness will result in the lowering of your grade per instructor's policy.
2. All assignments must be typed unless otherwise specified by the instructor.
3. All assignments must be turned in, in order to successfully complete a PTA course. Failure to submit all work by the last scheduled class will result in the automatic assignment of a failing grade (F).
4. It is the student's responsibility to notify the instructor of any absence before missing that class.
5. It is the student's responsibility to see the instructor as soon as possible after any absence to make up missed coursework. Missed labs must be made up.
6. It is the student's responsibility to balance the demands outside of the classroom and to meet all due dates and expectations of the program.

Faculty Responsible: All

MANDATORY STUDY GROUP POLICY

Purpose: You are expected to study and retain the information in this class. Students who fail to achieve a grade of B or better in quizzes or tests have a mandatory requirement to spend additional verified study time with the PTA mentor.

Procedure:

1. The student will receive a referral to the PTA Mentor either paper or email depending on the instructor's policy in the syllabus.
2. The PTA Mentor will sign the sheet or email the instructor the number of completed visits depending on the instructor's policy.
3. The student must return the referral sheet to the instructor if a paper referral is used.
4. Referrals cannot be combined into one mentor visit.
5. Failure to complete the assignment may result in a point deduction as per instructor's policy in the syllabus.

Faculty Responsible: All

STUDENT PERSEVERANCE POLICY

Purpose: In order to complete the program and graduate as an employable PTA, students must adhere to all attendance and timeliness policies, submission of all assignments policy, and the minimal required grade (class, lab practicals, program GPA) to continue in the program policy.

Procedure:

Mandatory Orientation and Handbook

1. Mandatory Orientation is held prior to class start to inform students of all program requirements.
2. Students receive, read and sign the agreement to accept handbook.

Attendance and Timeliness

1. Attendance is mandatory.
2. If a student is unable to be in class due to a significant medical issue, e.g. emergency appendectomy, the student must inform the instructor by phone or email.
3. Missed labs must be made up.
4. Students will be referred to the PTA Mentor for absences.
5. Timeliness is essential. A student who is tardy impacts the whole class's ability to learn. Students that are tardy three (3) times will be referred to counseling for time management assistance. The student must provide the instructor with evidence of this appointment.
6. Missed classes impact your grades unless it's a medical emergency. Tardy attendance affects your grade. Refer to the attendance policy and class syllabi for specific details on attendance and tardiness.
7. All assignments must be submitted on time. Refer to Time Management Policy for details.

Minimal Grades to Continue in Program

1. The student must achieve a minimal grade of C+ in all PTA classes, a B in all lab examinations and a C in all Anatomy and Physiology classes.
2. Students who receive less than a B in PTA classes will be referred to the PTA Mentor (see Mandatory Study Group Policy).
3. Students are advised to see the Anatomy and Physiology instructor and to seek extra assistance from the Anatomy and Physiology tutor if they are struggling to achieve the minimal grade of C. Note: students who achieve a B in the Anatomy and Physiology courses do better in Kinesiology.
4. The student must maintain a minimal GPA of 2.5 to go out on their final clinical rotation.
5. Students who do not maintain the required grades will be dismissed from the program. Refer to retention and second chance policy.

Faculty Responsible: All

ADVISEMENT FOR PTA MAJOR POLICY

Purpose: To ensure PTA Majors are properly advised for progression through the program.

Procedure:

1. The preferred advisor for the PTA major is one of the PTA program faculty members.
2. Advisor allocation is checked during the Mandatory Orientation to the program.
3. If a student has been incorrectly assigned to a non PTA faculty advisor the student is sent to the Advisement center to correct the advisor assignment to one of the PTA program faculty members.
4. The PTA major meets with the faculty prior to Advisement Day.
5. The faculty advisor reviews the student's curriculum, grades for previously taken courses and plans the next classes for the coming semester.
6. The advisor releases the "Advisement Hold" in Banner.
7. The PTA major registers for the classes when registration opens in the Student Online Services link in the MyHerkimer portal.

Responsible: PTA Faculty, PTA Majors

STUDENT PRIVACY POLICY

Purpose: Students records and concerns are private. Students have the opportunity for private meetings with faculty.

Procedure:

Advising:

1. Students may see their advisor during office hours or by appointment in the private faculty offices.
2. The student may request that no one else comes in during the meeting or to have the office door closed.
3. When students are receiving grade information as a class they are requested to line up outside of the office door until it is their turn and to stay on the door side of the instructor's desk during their turn so that other student's grades are not visible.

Counseling:

1. If a student is referred to counseling, it will be done in private in the faculty offices. Depending on the circumstances, more than one faculty member may be present to suggest the referral to the student.
2. The referral may involve an immediate phone referral to counseling if the need for immediacy is evident. A paper referral may be sent to counseling.

Program Issue:

1. In the event a significant program issue arises in either the classroom or during a clinical, both faculty members will meet with the student in one of the program offices or in the Division conference room.
2. The Associate Dean may be requested to either be available or attend the meeting.

Clinical Records:

1. The DCE maintains individual health records and clinical records in a locked drawer in her office.
2. Health records are shredded after the student leaves the program.
3. Clinical records are maintained for two (2) years and then shredded.

Additional information on confidentiality is located in the PTA Program Student Confidentiality Agreement.

Faculty Responsible: All

SELF-ASSESSMENT POLICY

Purpose: To produce PTA graduates who are competent in the areas of practice and are able to direct future educational needs through self-assessment. Students in the Physical Therapist Assistant curriculum are expected to reflect on their performance in the laboratory and during practical examinations. Students will also use the Generic Abilities to help in the self-assessment process.

Procedure:

1. You may be asked to self-assess your level of participation in a class.
2. At other times you may be asked to critique your own performance and to suggest alternative actions that you could have or should have used.
3. After receiving practical examination feedback from the instructor and self-evaluating through reflection, you are expected to demonstrate a change in your skill performance.
4. You will complete the Generic Abilities form each semester and document your personal growth towards entry level competence.

Faculty Responsible: All

ESSENTIAL FUNCTIONS POLICY

Purpose: The field of Physical Therapy is demanding. Physical Therapist Assistant students are required to fulfill all program requirements. The PTA Program has identified the following listed skills as essential to functioning as a PTA student and graduate PTA. Essential Functions are defined as those skills (with or without accommodation) that the student brings into the program in order to be successful as a PTA student and after graduation employable as a PTA.

1. HERKIMER COLLEGE PTA program expects students to self-evaluate the skills they bring into the program.
2. If the student needs accommodation in order to achieve a certain essential function, it is up to the student to identify the necessary accommodations.
3. Program expectations are not changed but reasonable accommodations will be provided when identified by the student.

Faculty Procedure: Essential Functions

1. Essential Functions are listed on the web page as a PDF file for potential students to use as “a mirror” to help them assess their abilities with the field’s demands.
2. The admissions advisor has the Essential Functions mirror to provide potential students prior to enrolling in the PTA program.
3. Essential Functions are listed in the student handbook and in the clinical education handbook.
4. The Program Director will have the students complete the self-assessment on admission to the program.
5. The self-assessments and requests for accommodation will be placed in each student’s clinical file.
6. Reasonable accommodations will be provided within the program.
7. The DCE will inform clinical faculty of the Essential Functions policy and the reasonable accommodations that have been requested.

Clinical Faculty Procedure: Essential Functions

1. The DCE will collect permission to reveal requested reasonable accommodations to the student’s clinical assignments.
2. The DCE will include information on specific student applicable reasonable accommodations with the clinical mailings prior to each clinical.

Student Procedure: Essential Functions

1. Read the description and definitions of each Essential Function.
2. Complete an initial self-assessment at the beginning of the Fall freshman semester.
3. Develop a list of specific accommodations for each area that will allow the individual to meet each Essential Function.
4. Disclose the nature of a documented disability and provide documentation to the appropriate HERKIMER COLLEGE designee (depending on the type of disability).
5. Give permission to the DCE to disclose the requested reasonable accommodations to each of your clinical sites.

Potential Student Procedure: Essential Functions

1. Read the description and definitions of each essential function either on the web page or in the materials that the admissions office sends in each admissions packet.
2. Complete an initial self-assessment at the beginning of the fall freshman semester.
3. Answer the question “am I able to do this skill, and if not what accommodation do I need to accomplish this task”.

Faculty Responsible: All

ESSENTIAL FUNCTIONS

The field of Physical Therapy is demanding. Physical Therapist Assistant students are required to fulfill all program requirements. The HERKIMER COLLEGE Physical Therapist Assistant Program has identified the following listed skills as essential to functioning as a PTA student and graduate PTA. Essential Functions are defined as skills that you need to bring into the program in order to be successful as a PTA student and after graduation employable as a PTA. These skills are different from those that you acquire through your learning objectives during your course of studies at HERKIMER COLLEGE. An inability to perform any of the functions listed below (with or without accommodation) indicates that you do not have the prerequisite skills to be successful in this profession and that Physical Therapist Assistant should not be your field of choice.

You will be asked to examine yourself in five significant areas. This list is not all-inclusive and may not reflect all that is required to work as a graduate PTA. A brief summary of each area follows:

Sensory/Observation Skills: you need to have the ability to see, hear and touch in order to perform program expectations.

Communication Skills: you need to have the ability to communicate in English both orally and in writing in order to perform program expectations. You must have sufficient communication skills (nonverbal, speech, reading and writing) to interact with individuals and communicate their needs promptly and effectively.

Motor Skills: you must have motor control to allow you to lift, carry, adjust and use equipment, obtain and maintain CPR & First Aid certification, motor control to provide for patients safety, and the physical endurance to work a 40-hour work week.

Intellectual Conceptual Skills: you must have the ability to pass courses in a rigorous program, be able to attain a grade of C+ (76%) or better in all of your PTA classes and attain a grade of C (70%) in science classes, to be able to manage your time, attend to classes and functions for 60 minutes, the ability to concentrate with distractions, demonstrate critical thinking skills and problem solving skills, prioritize, collect, analyze and assess data, perform complex tasks or follow complex instructions.

Behavioral Social Skills: you must interact appropriately with all individuals regardless of age, sex, race, socioeconomic, religious, cultural backgrounds or body odors and you must demonstrate good judgment, maturity, maintain confidentiality and possess the emotional health and stability and recognize and project appropriate body language.

Now take a look in “your mirror” and honestly answer the following questions. Please check the appropriate box for your ability to perform the following functions. If you indicate that you can do an activity with accommodation, please specify the accommodation that you require to perform each task.

ESSENTIAL FUNCTIONS REQUIRED FOR INCOMING HERKIMER COLLEGE PHYSICAL THERAPIST ASSISTANT STUDENTS

Function: Sensory /Observation Skills	Yes	No	With accommodation
Visual acuity: Student must possess the visual ability to observe a patient’s response to treatment, read or set parameters on equipment, observe and assess the environment, gather information from medical records or professional literature.			
Hearing acuity: Student must possess the auditory ability to hear normal conversation, hear telephone conversation, hear sounds with stethoscope, and hear equipment timers or alarms.			
Tactile ability: Student must be comfortable with tactile contact, discriminate objects/textures by touch, palpate surface anatomy, palpate pulses, and detect skin temperature.			
Student must be comfortable with tactile contact.			
Examples of Use in program: <ul style="list-style-type: none"> • Equipment: student must be able to use equipment to take a blood pressure, pulse rate and breath sounds; must be able to adjust equipment, read goniometer. • Touch: Student must touch and be touched, e.g. palpation, massage by other students, patients, therapists. 			
Function: Communication Skills	Yes	No	With accommodation
Student must speak English.			
Student must read English.			
Student must write in English (good knowledge of grammar, spelling).			
Student must be able to observe and recognize body language.			
Examples of Use in program: <ul style="list-style-type: none"> • Students must complete extensive reading assignments, write reports, document treatments, interact with peers, faculty, clinical faculty. • Students must react to body language and demonstrate awareness of their own body language. 			

Function: Motor Skills	Yes	No	With accommodation
Student must stand (with good balance).			
Student must walk (with good balance).			
Student must sit (with good balance).			
Student must carry 25+ lbs.			
Student must push/pull 100+ lbs.			
Student must bend (with good balance).			
Student must crouch (with good balance).			
Student must kneel (with good balance).			
Student must crawl (with good balance).			
Student must be able to floor sit (with good balance).			
Student must be able to grasp: firm/strong and lightly.			
Student must possess finger dexterity to adjust equipment knobs, adjust wheel chairs.			
Student must be able to reach forward.			
Student must be able to reach overhead.			
Student must have coordination of hand, wrist and fingers; eye-hand coordination; eye-foot coordination.			
<p>Examples of Use in program:</p> <ul style="list-style-type: none"> • Student must have the motor control necessary to safely transfer a 150 lb. Patient from bed to chair with maximum assist. • Student must have the motor control to safely walk with patients and provide gait training; protect patient at all times. • Student must be able to obtain and maintain CPR and first aid certification. • Student must be able to use good body mechanics for all Physical Therapy Skills. • Student needs the physical endurance to work a 40-hour week on clinical affiliations. • Student must be able to apply manual resistance to manually muscle test strength. 			

Function: Intellectual Conceptual Skills	Yes	No	With accommodation
Reasoning – Student must deal with abstract and concrete variables, define problems, collect data, establish facts, draw valid conclusions.			
Student must interpret instructions provided orally, written or schedule format.			
Student must use problem solving skills to solve/deal with unexpected situations.			
Student must carry out written or oral one- to two-step instructions and carry out tasks over time.			
Student must be able to generalize instructions from one situation to another.			
Student must be able to perform simple mathematic techniques: add, subtract, multiply and divide whole numbers and fractions, calculate time, make simple measurements.			
Student must comprehend manuals, instructions for equipment maintenance, safety rules and procedures, medical and educational charts, technical literature and articles, and textbook reading assignments.			
Student must be able to proofread words and numbers and make observations of differences in copy.			
Student must prepare reports using prescribed format and make entry in medical and educational charts.			
Student must conform to all rules of punctuation, spelling and grammar.			
Student must demonstrate the ability to maintain a work pace appropriate to a given workload.			
<p>Examples of Use in program:</p> <ul style="list-style-type: none"> • Must attain 76% or a “C+” or better in all PTA core classes and a “C” or better in all science classes. • Must maintain a 2.5 GPA to go out on your final clinical rotation. • Prioritize tasks, integrate information, make decisions. • Collect, interpret, assesses data about patients. 			

Function: Behavioral Social Skills	Yes	No	With accommodation
Student must demonstrate social skills: ability to engage in face to face conversation, making eye contact and using appropriate body language.			
Student must demonstrate dependability, manage time effectively, follow through with commitments and responsibilities.			
Student must have a professional presentation (dress, body language, verbal style) that is accepted by peers, faculty, clients, and employers.			
Student must demonstrate initiative: be a self-starter with projects and tasks, communication and in searching out resources.			
Student must demonstrate empathy, i.e. being sensitive and responding to the feelings and behaviors of others.			
Student must demonstrate cooperation and be able to work effectively with others.			
Student must demonstrate organization skills: prioritize needs, tasks, responsibilities and working space.			
Student must accept supervision and have the ability to give and receive constructive feedback and modify behavior accordingly.			
<p>Examples of Use in program:</p> <ul style="list-style-type: none"> • Working effectively in groups, group projects, assignments, activities. • Working with others in a culturally diverse society. • Complete all assignments in a timely fashion. • Recognize and respond to potentially dangerous situations. • Maintain patient confidentiality. • Possess and demonstrate emotional health and stability to fully use intellectual capabilities, use good judgment. • Adhere to the HERKIMER COLLEGE program expectations in class and clinical settings as described in the orientation handbook and fieldwork manual. 			

I have reviewed the essential functions specific to the role of Physical Therapist Assistant student at Herkimer College. I understand that if I have a documented disability and would like to have the reasonable accommodations that I have listed above, I will need to disclose the nature of the disability and provide documentation to the appropriate HERKIMER COLLEGE designee (depending on the type of disability).

Signature

Date

Print Name

GENERIC ABILITIES

Throughout the students' education at Herkimer College Physical Therapist Assistant Program the faculty utilize the generic abilities to help guide the student in developing competence in the area of Professional Behavior. Students will be asked to reflect on and self-evaluate these areas. Faculty will provide feedback. It is also the expectation that students seek feedback from other sources such as fellow students and clinical instructors.

The skills and abilities known as "generic abilities" are being adopted nationally by PT and PTA programs as educational outcomes for graduates. These skills are expected in both the clinical and classroom settings. Generic abilities are attributes, characteristics or behaviors that are not explicitly part of the profession's core of knowledge and technical skills but are needed for success in the profession. Ten generic abilities and definitions were identified by a study at UW-Madison in 1991-92.

(Adopted from SUNY Upstate Medical University, Department of Physical Therapy Education)

1. Commitment to Learning – The ability to self-assess, self-correct, self-direct; to identify needs and sources of learning; to continually seek new knowledge and understanding.
2. Interpersonal Skills – The ability to interact effectively with patients, families, colleagues, other health-care professionals, and the community; to deal effectively with cultural and ethnic diversity issues.
3. Communication Skills – The ability to communicate effectively (speaking, body language, reading, writing, listening) for varied audiences and purposes.
4. Effective Use of Time and Resources – The ability to obtain the maximum benefit from minimum investment of time and resources.
5. Use of Constructive Feedback – The ability to identify sources of and seek out feedback and to effectively use and provide feedback improving personal interaction.
6. Problem Solving – The ability to recognize and to find problems, analyze data in common, develop and implement solutions, and evaluate outcomes.
7. Professionalism – The ability to exhibit appropriate professional conduct and to represent the profession effectively.
8. Responsibility – The ability to a few commitments and to be accountable for actions and outcomes.
9. Critical Thinking – The ability to question logically; to identify, generate, and evaluate elements of logical argument, to recognize and differentiate facts, illusions, assumptions, and hidden assumption; to distinguish the relevant from the irrelevant.
10. Stress Management – The ability to identify sources of stress and to develop effective coping behaviors.

(Developed by the Physical Therapy Program, University of Wisconsin-Madison, May et al Journal of Physical Therapy Education. 9.1 Spring 1995.)

GENERIC ABILITIES DESCRIPTIONS

Generic Ability	Beginning Level	Developing Level	Entry Level
Commitment to Learning	<ul style="list-style-type: none"> • Identifies problems • Formulates appropriate questions • Identifies and locates appropriate resources • Demonstrates a positive attitude (motivation) toward learning • Offers own thoughts and ideas • Identifies need for further information 	<ul style="list-style-type: none"> • Prioritizes information needs • Analyzes and subdivides large questions into components • Seeks out professional literature • Effects personal and professional goals • Identifies own learning needs based on previous experiences • Plans and presents an in-service, or research or case studies • Welcomes and/or seeks new learning opportunities 	<ul style="list-style-type: none"> • Applies new information and reevaluates performance • Accepts that there may be more than one answer to a problem • Recognizes the need to and is able to verify solutions to problems • Reads articles critically and understands the limits of application to professional practice • Researches and studies areas where knowledge base is lacking

Generic Ability	Beginning Level	Developing Level	Entry Level
Interpersonal Skills	<ul style="list-style-type: none"> • Maintains professional demeanor in all clinical and academic interactions • Demonstrates interest in patients as individuals • Respects cultural and personal differences of others; is nonjudgmental about patients' lifestyles • Communicates with others in a respectful, confident manner • Respects personal space of patients and others • Maintains confidentiality in all clinical interactions • Demonstrates acceptance of limited knowledge and experience 	<ul style="list-style-type: none"> • Recognizes impact of nonverbal communication and modifies accordingly • Assumes responsibility for own actions • Motivates others to achieve • Establishes trust • Seeks to gain knowledge and input from others • Respectful of support staff 	<ul style="list-style-type: none"> • Listens to patient but reflects back to original concern • Works effectively with challenging patients in challenging situations • Responds effectively to unexpected experiences • Talks about difficult issues with sensitivity and objectivity • Delegates to support staff as needed • Approaches others to discuss differences of opinion • Accommodates differences in learning styles

Generic Ability	Beginning Level	Developing Level	Entry Level
Communication Skills	<ul style="list-style-type: none"> • Demonstrates understanding basic English (verbal and written): uses correct grammar, accurate spelling and expression • Writes legibly • Recognizes impact of nonverbal communication: maintains eye contact, listens actively • Maintains eye contact 	<ul style="list-style-type: none"> • Utilizes nonverbal communication to augment verbal message • Restates, reflects and clarifies message • Collects necessary information from the patient interview 	<ul style="list-style-type: none"> • Modifies communication (verbal and written) to meet the needs of different audiences • Presents verbal or written message with logical organization and sequencing • Maintains open and constructive communication • Utilizes communication technology effectively • Dictates clearly and concisely
Effective Use of Time	<ul style="list-style-type: none"> • Focuses on tasks at hand without dwelling on past mistakes • Recognizes own resource limitations • Uses existing resources effectively • Uses unscheduled time efficiently • Completes assignments in timely fashion 	<ul style="list-style-type: none"> • Sets up own schedule • Coordinates schedule with others • Demonstrates flexibility • Plans ahead 	<ul style="list-style-type: none"> • Sets priorities and reorganizes as needed • Considers patient's goals in context of patient, clinic, and third party resources • Has ability to say "no" • Performs multiple tasks simultaneously and delegates when appropriate • Uses scheduled time with each patient efficiently

Generic Ability	Beginning Level	Developing Level	Entry Level
Use of Constructive Feedback	<ul style="list-style-type: none"> • Demonstrates active listening skills • Actively seeks feedback and help • Demonstrates a positive attitude toward feedback • Critiques own performance • Maintains two-way communication 	<ul style="list-style-type: none"> • Assesses own performance accurately • Utilizes feedback when establishing pre-professional goals • Provides constructive and timely feedback when establishing pre-professional goals • Develops plans of action in response to feedback 	<ul style="list-style-type: none"> • Seeks feedback from clients • Modifies feedback given to clients according to their learning styles • Reconciles differences with sensitivity • Considers multiple plans of action when responding to feedback
Problem Solving	<ul style="list-style-type: none"> • Recognizes problems • States problems clearly • Describes known solutions to problem • Identifies resources needed to develop solutions • Begins to examine multiple solutions to problems 	<ul style="list-style-type: none"> • Prioritize problems • Identifies contributors to problem • Considers consequences of possible solutions • Consults with others to clarify problem 	<ul style="list-style-type: none"> • Implements solutions • Reassesses solutions • Evaluates outcomes • Updates solutions to problems based on current research • Accepts responsibility for implementing solutions

Generic Ability	Beginning Level	Developing Level	Entry Level
Professionalism	<ul style="list-style-type: none"> • Abides by APTA Code of Ethics • Demonstrates awareness of state licensure regulations • Abides by facility policies and procedures • Projects professional image • Attends professional meetings • Demonstrates honesty, compassion, and continuous regard for all 	<ul style="list-style-type: none"> • Identifies positive professional role models • Discusses societal expectations of the profession • Acts on moral commitment • Involves other health-care professionals in decision-making • Seeks informed consent from patients 	<ul style="list-style-type: none"> • Demonstrates accountability for professional decisions • Treats patients within scope of expertise • Discusses role of physical therapy and health-care • Keeps patient as priority
Responsibility	<ul style="list-style-type: none"> • Demonstrates dependability • Demonstrates punctuality • Follows through on commitments • Recognizes own limits 	<ul style="list-style-type: none"> • Accepts responsibility for actions and outcomes • Provides safe and the secure environment for patients and peers • Offers and accepts help • Completes projects without prompting 	<ul style="list-style-type: none"> • Discusses with therapist about the need to direct patients to other health-care professionals when needed • Delegates to support staff as needed • Encourage patients accountability

Generic Ability	Beginning Level	Developing Level	Entry Level
Critical Thinking	<ul style="list-style-type: none"> • Raises relevant questions • Considers all available information • States results of scientific literature • Recognizes "holes" in knowledge base • Articulates ideas 	<ul style="list-style-type: none"> • Feels challenged to examine ideas • Understands scientific method • Formulates new ideas • Seeks alternative ideas • Formulates alternative hypotheses • Critiques hypotheses and ideas 	<ul style="list-style-type: none"> • Exhibits openness to contradictory ideas • Justifies solutions selected • Determines effectiveness of applied solutions
Stress Management	<ul style="list-style-type: none"> • Recognizes own stressors or problems • Recognizes distress or problems in others • Seeks assistance as needed • Maintains professional demeanor in all situations 	<ul style="list-style-type: none"> • Maintains a balance between professional and personal life • Demonstrates effective responses in all situations • Accepts constructive feedback • Establishes outlets to cope with stressors 	<ul style="list-style-type: none"> • Prioritizes multiple commitments • Responds calmly to urgent situations • Tolerates inconsistencies in health-care environment

Developed by the Physical Therapy Program, University of Wisconsin-Madison, May et al
Journal of Physical Therapy Education. 9.1 Spring 1995.

GENERIC ABILITIES POLICY

Purpose: HERKIMER COLLEGE PTA program expects the students to demonstrate progress towards developing generic abilities in 10 areas: commitment to learning, interpersonal skills, communication skills, effective use of time and resources, use of constructive feedback, problem solving, professionalism, responsibility, and critical thinking. The student is expected to demonstrate progress throughout the program and be at the entry level stage by the time they are ready to graduate. Student failure to achieve entry-level stage may delay graduation and require remedial coursework.

Policy: Generic Abilities

1. HERKIMER COLLEGE PTA program expects the students to demonstrate progress towards developing generic abilities in 10 areas: commitment to learning, interpersonal skills, communication skills, effective use of time and resources, use of constructive feedback, problem solving, professionalism, responsibility, and critical thinking.
2. Progress is expected throughout the program.
3. It is expected that the student will be at the entry level stage by the time they are ready to graduate.
4. Failure to achieve entry-level stage may delay graduation and require remedial coursework.

Faculty Procedure: Generic Abilities

1. Generic abilities will be listed in the student handbook and in the clinical education handbook.
2. The DCE will inform clinical faculty of program expectations on generic abilities.
3. The DCE will have the student complete an initial self-assessment when beginning the program.
4. Faculty will incorporate generic abilities goals into course objectives.
5. Each semester faculty will provide the student with feedback on their self-assessment.
6. Self-assessment forms will be stored in the students' clinical file maintained by the DCE.

Clinical Faculty Procedure: Generic Abilities

1. DCE will include information on the generic abilities with the clinical mailings.
2. Clinical faculty will assess student performance while on clinical affiliation.
3. CI assessment will be returned with other clinical materials.
4. The DCE will discuss the CI feedback during post-clinical conferences.
5. CI assessment forms will be stored in the students' clinical file maintained by the DCE.

Student Procedure: Generic Abilities

1. Read the description and definitions of generic abilities.
2. Complete an initial self-assessment at the beginning of the Fall freshman semester.
3. Become familiar with behavioral criteria for each level.
4. Self-assess your performance continually relative to the generic abilities using the behavioral criteria.
5. Self-assess your performance in each semester and during each clinical rotation.
6. General instructions for each self-assessment:
Each semester the student will self-assess based on the ten generic abilities.
 - i) Review the description and definitions of generic abilities.
 - ii) Self-assess using the behavioral criteria for each level.
 - iii) Note: If you rate yourself as high in a particular area you should give examples as to why you feel that way.
 - iv) You will identify actions to be taken to help yourself develop these generic abilities.
 - v) Return the self-assessment to your class instructor or to your DCE.
 - vi) The DCE will store the generic abilities self-assessment forms in your clinical file.
 - vii) It is the expectation of the HERKIMER COLLEGE PTA program that you will reach the entry level stage by the time you are ready to graduate; failure to achieve this level may delay your graduation.

(Based on the Generic Abilities Developed by the Physical Therapy Program, University of Wisconsin-Madison, May et al Journal of Physical Therapy Education. 9.1 Spring 1995.)

Student Self-Assessment/Instructor Generic Abilities Evaluation Rubric

Name: _____

Date: _____

Generic Abilities	Definition	Beginning Level	Developing Level	Entry Level	Justification	Actions to be taken to develop this generic ability
Commitment to Learning	Ability to self assess, self correct, self-direct; to identify needs and sources of learning; to continually seek new knowledge and understanding					
Interpersonal Skills	Ability to interact effectively with patients, families, colleagues, other health-care professionals, and the community; to deal effectively with cultural and ethnic diversity issues					
Communication Skills	Ability to communicate effectively (speaking, body language, reading, writing, listening) for varied audiences and purposes					
Effective Use of Time and Resources	Ability to obtain the maximum benefit from minimum investment of time and resources					
Use of Constructive Feedback	Ability to identify sources of and seek out feedback and to effectively use and provide feedback improving personal interaction					

Generic Abilities	Definition	Beginning Level	Developing Level	Entry Level	Justification	Actions to be taken to develop this generic ability
Problem Solving	Ability to recognize and to find problems, analyze data in common, develop and implement solutions, and evaluate outcomes					
Professionalism	Ability to exhibit appropriate professional conduct and to represent the profession effectively					
Responsibility	Ability to fulfill commitments and to be accountable for actions and outcomes					
Critical Thinking	Ability to question logically; to identify, generate, and evaluate elements of logical argument, to recognize and differentiate facts, illusions, assumptions, and hidden assumption; to distinguish the relevant from the irrelevant					
Stress Management	The ability to identify sources of stress and to develop effective coping behaviors					

(Developed by the Physical Therapy Program, University of Wisconsin-Madison, May et al Journal of Physical Therapy Education. 9.1 Spring 1995.)

Comments:

CLINICAL PREPAREDNESS PRIOR TO CLINICAL AFFILIATION POLICY

Purpose: to ensure students are adequately and safely prepared to participate in clinical education.

Program Statement: No student will go to a clinical assignment who has not completed all coursework and passed all competencies and lab practical exams with a “B” or better.

1. All program courses that have a lab component have competency and lab practical exam rubrics that delineate what constitutes a “pass” and refers the student to the Absolute Failure Policy.
2. No student is able to pass a lab course with exams, quizzes or assignments without passing all of the competencies and lab practical exams in the course with a minimal grade of “B”.
3. The initial score less than a “B” remains as the competency or practical grade and subsequent attempts are graded as pass/fail. The student must achieve a “B” or better to receive the pass grade.
4. Progression within each course is documented in the students Competency and Practical Record.
5. Further details on passing competency and practical examinations are found in the Competency and practical examination policy.

For PT 206 – Clinical Fieldwork I

1. The student must have taken and completed with a minimal grade of “C+”: PT 121, PT 131, PT 132, PT 141, PT 142 and PT 143
2. All of the competencies and lab practical exams in these courses must have been successfully completed with a minimal grade of “B”
3. The student must have taken and completed with a minimal grade of “C”: SC 253 and SC 254

For PT 255 – Clinical Fieldwork II

1. The student must have taken and completed with a minimal grade of “C+”: PT 251 and PT 252 and successfully passed PT 206
2. All of the competencies and lab practical exams in these courses must have been successfully completed with a minimal grade of “B”

For PT 280 – Clinical Fieldwork III

1. The student must have taken and completed with a minimal grade of “C+”: PT 260 and PT 275 and successfully passed PT 255
2. All of the competencies and lab practical exams in these courses must have been successfully completed with a minimal grade of “B”

In order to Graduate

1. The student must have successfully have completed the final clinical using the criteria determined by the DCE that establishes the student has achieved entry level.
2. The DCE’s determination is based on the student’s CPI performance, clinical observation and interviews with the CI and student during the site visit and any other communications with the CI as determined by the CI.

Responsible: DCE, all faculty

STATEMENT ON ACADEMIC STANDARDS AND PROFESSIONAL BEHAVIOR

Students enrolled in the HERKIMER COLLEGE PTA Curriculum must be aware that satisfactory academic progress includes demonstrating positive interpersonal skills, professional behavior, ethical behavior, and safe clinical practice at all times. You will be graded in each of your PTA classes for each of the following skills. Unsatisfactory behavior in any of these areas may be reason for course failure, denial of fieldwork placement, and possible academic dismissal.

The student adequately demonstrates:

Interpersonal Behavior:

- PT 121 Introduction to Rehabilitation
- PT 131 Clinical Procedures I – Basic Procedures
- PT 132 Clinical Procedures I – Physical Agents
- PT 141 Clinical Kinesiology
- PT 142 Clinical Procedures II – Data Collection
- PT 143 Clinical Procedures II – Advanced Procedures
- PT 251 Clinical Procedures III – Ortho
- PT 252 Clinical Procedures III – Neuro
- PT 260 Clinical Procedures IV
- PT 275 Contemporary Issues in Physical Therapy

Professional Behaviors, Ethical Behaviors, Safe Practice:

- PT 121 Introduction to Rehabilitation
- PT 131 Clinical Procedures I – Basic Procedures
- PT 132 Clinical Procedures I – Physical Agents
- PT 141 Clinical Kinesiology
- PT 142 Clinical Procedures II – Data Collection
- PT 143 Clinical Procedures II – Advanced Procedures
- PT 251 Clinical Procedures III – Ortho
- PT 252 Clinical Procedures III – Neuro
- PT 260 Clinical Procedures IV
- PT 275 Contemporary Issues in Physical Therapy

SAMPLES OF PROFESSIONAL BEHAVIOR

Demonstration of Professional Behavior would include but would not be limited to the following examples:

- positive attitude toward peers and instructors
- takes initiative to enhance own knowledge
 - reads assigned material
 - discuss relevant subject matter from periodicals, television, and other sources
 - submits own work
- treats others with respect
- works effectively in a group, shares responsibilities
- manages time and material wisely
 - is on time for class, meetings, fieldwork, field trips and observations
 - hands in assignments on time
- takes advantage of available resources
- seeks assistance when needed
- uses proper body mechanics
- demonstrates safe procedures at all times
- wears appropriate dress for all occasions, i.e. lab clothes at the beginning of each lab, professional dress for all observations, workshops, practical exams or competencies, and fieldwork
- offers opposing opinions in a constructive manner
- verbally communicates ideas in a clear, organized manner
- writes clear sentences, is able to express thoughts intelligently
- respects privacy of others
- respects dignity of others
- is of good moral character as defined by the New York State Department of Education
- refrains from use of profanity
- refrains from discussing personal issues with patients
- keeps in-class discussion limited to relevant topics
- observes PTA Student Code of Ethics

PTA PROGRAM & PATIENT CONFIDENTIALITY STATEMENT IN REGARDS TO HIPAA

Topic: Confidentiality of Health Information

Statement of

Policy: Herkimer College as a part of the State University of New York is committed to protecting the privacy and confidentiality of health information of the population it serves. The PTA program obtains health information on its students and students are exposed to patient health information during their clinical affiliations. Health Information is strictly confidential and should never be disclosed, nor confirmed to anyone who is not specifically authorized under the institution's policies or applicable law to receive the information. The basic intent of HIPAA is to protect the confidentiality of individually identifiable health information (IIHI). IIHI is information in any form (whether oral or recorded) relating to an individual's past, present or future physical or mental health that is reasonably likely to identify the individual.

Scope: This policy applies to all members of the PTA program. It shall include, but is not limited to:

- Faculty
- Clinical Faculty
- All students participating in a health related program
- Program work study students

Education And

Training: The PTA program faculty is responsible for providing appropriate HIPAA training to its work study students and program students regarding:

- The need for confidentiality;
- Types of information that are considered confidential;
- Sanctions associated with a breach of confidentiality; and
- The institution's confidentiality agreement and the need for annual signature.

Confidentiality

Agreement: Each work study student and PTA program student will be expected to review and sign the PTA program's confidentiality agreement. This should occur upon hire of the work study student and prior to each PTA program student's first affiliation and on an annual basis thereafter. This signed statement will be maintained in the appropriate work study employee file or student clinical file.

Suspected

Breach: Any and all breaches of confidentiality should be reported to the DCE, Karen Jones, and/or PTA Program Director, Cathy Delorme. Failure to report a breach will be considered a violation of this policy.

Sanctions: Upon a finding of a breach of confidentiality by a work study employee, the work study employee shall receive an appropriate disciplinary penalty. This penalty will be:

- termination as PTA program work study
- a letter will be sent to the financial aid student work study coordinator regarding the confidentiality breach

Upon a finding of a breach of confidentiality by a PTA program student, the student shall receive an appropriate disciplinary penalty. Such penalty may include, but is not limited to, the following:

- removal from assigned clinical affiliation
- notification to Dean of Students regarding confidentiality breach
- automatic assignment of a “U” unsatisfactory grade for the clinical affiliation
- letter of reprimand placed in clinical file
- assignment of an Ethics paper and other appropriate remedial education
- cancellation of future clinical affiliations
- academic removal from the PTA curriculum

PTA PROGRAM STUDENT CONFIDENTIALITY AGREEMENT

IMPORTANT: Please read all sections. If you have any questions, please seek clarification before signing.

1. Confidentiality of individually identifiable health information (IIHI):

I understand and acknowledge that:

- a. Health related services provided to individuals are private and confidential;
- b. Students provide personal health related information with the expectation that it will be kept confidential and only be used by authorized persons as necessary;
- c. Patients provide personal health related information with the expectation that it will be kept confidential and only be used by authorized persons as necessary;
- d. All personally identifiable information provided by a student to the DCE or a student's services provided to patients during any clinical affiliation, in whatever form such information exists, including oral, written, printed, photographic and electronic is strictly confidential and is protected by federal and state laws and regulations that prohibit its unauthorized use or disclosure; and
- e. In my course of employment or clinical education experiences with Herkimer College, I may be given access to certain Confidential Information.

2. Disclosure, Use and Access

I agree that, except as authorized in connection with my assigned duties, I will not at any time use, access or disclose any Confidential Information to any person (including, but not limited to other students, DCE, co-workers, friends and family members). I understand that this obligation remains in full force during the entire term of my employment as a work study or clinical affiliation and continues in affect after such employment/affiliation terminates.

3. Confidentiality Policy

I agree that I will comply with confidentiality policies that apply to me as a result of my employment/clinical affiliation.

4. Return of Confidential Information

Upon termination of my employment/clinical affiliation for any reason, or at any other time upon request, I agree to promptly return to HERKIMER COLLEGE any copies of confidential information then in my possession or under my control (including all printed and electronic copies).

5. Period Certification

I understand that I will be required to periodically certify that I have complied in all respects with this Agreement, and I agree to so certify upon request.

6. Remedies

I understand and acknowledge that:

- a. the restrictions and obligations I have accepted under this Agreement are responsible and necessary in order to protect the interests of individuals and their protected health information (PHI), and Herkimer College. And;
- b. my failure to comply with this Agreement in any respect could cause irreparable harm to certain individuals (those with protected health information), my clinical affiliation and to my school and program.

I understand that Herkimer College may prevent me from violating this Agreement by any legal means available, in addition to disciplinary measures which may result in sanctions, e.g. refusing to assign any other clinical affiliation which may prevent me from completing my education in the PTA program.

Signature: _____

Date: _____

Printed Name: _____

PROFESSIONAL INVOLVEMENT POLICY

Purpose: Students in the Physical Therapist Assistant curriculum are expected to practice a certain level of social responsibility and a professional commitment to the field of physical therapy. You should plan to contribute your time and energy to participating in certain activities that support the physical therapy profession and social involvement. Do this by voluntarily attending as many of the following activities as possible to demonstrate your commitment.

Student Membership: Enroll as a student affiliate member in both the APTA (American Physical Therapy Association) and the NYPTA (New York Physical Therapy Association). You will receive publications and other benefits from participation. You also have access to “members only” documents, research and some free courses. Membership also allows you to participate in educational conferences with the PTA club.

Examples of Activities Demonstrating Commitment:

Activity	Support of PT Profession and Promotion of PT Profession	Social Responsibility
Enrollment as student member in APTA and NYPTA	X	
Attend NYPTA section meetings	X	
Attend Student Delegate Assembly	X	
Attend a conference or workshop off campus	X	
Participate in PT Month Promotion (October)	X	
Be an active elected club officer	X	
Attend PTA Club Meetings	X	
Participate in “Mocktail” Event (October)		X
Abilities Awareness Week participation (October)	X	X
Daffodil Sale (Spring)	X	X
Participate in Other Club Activities	X	
Participate in Allied Health Day (Fall)	X	
Participate in Program Promotion or Career Day Activities	X	
Heart Run (Spring)		X

Faculty Responsible: All

PROFESSIONAL APPEARANCE STANDARDS POLICY

Purpose: As a future health care provider, the Herkimer College PTA program strives at all times to maintain a professional atmosphere and an infection-free environment. A high standard of neatness, cleanliness and good grooming is essential since you will have contact with other students and patient volunteers while on campus and contact with patients, other staff, physicians and the public when on clinical fieldwork.

All students and future healthcare employees are expected to present themselves in a neat and professional manner at all times while at class or work. As a PTA student you will have dress expectations for the classroom, for lab and for clinical visitations and clinical affiliations.

DRESS CODE POLICY

It is the policy of the PTA Program that students observe a dress code while on campus and during clinical rotations. When attending lecture classes, special programs or clinical affiliations, the student should be neatly and professionally dressed. For all lab classes, the student should be in lab attire prior to the start of the class.

Classroom Dress Code	
What is <u>appropriate</u> dress for lecture class or special programs?	What is <u>inappropriate</u> dress for lecture class or special programs?
Appropriate dress includes: neat, clean, properly fitted clothing.	Inappropriate dress includes: bare mid-riffs, exposed underwear or underwear lines, holes or tears in clothing, hats, doo-rags, etc.
Perfumes or after shave, light scents only, used sparingly.	Cigarette odor on clothing, breath, hands, face
General Hygiene – you must be neat and clean, including oral hygiene.	Gum chewing.
Beards and mustaches should be clean and neatly trimmed, or clean shaven (i.e. no 5 o'clock shadow).	

Laboratory Dress Code	
What is <u>appropriate</u> dress for lab?	What is <u>inappropriate</u> dress for lab?
<p>Must wear : shorts, tank top or halter-top, sports bra or camisole with back cut out</p> <p>Short white lab jacket (optional for use in competencies and practical examinations, some jackets are available in the classroom for use by students).</p>	<p>Inappropriate clothing includes: sweaters, sweatshirts, Capri pants, long pants, sweatpants, jackets, exposed underwear or underwear lines, hats, doo-rags, etc.</p> <p>Hospital gowns will be provided when dress is inappropriate.</p>
Sneakers (or slip-on boat shoes).	Inappropriate footwear includes: sandals, shoes with heels or flip flops, boots.
Long hair is to be tied back.	Unrestrained hair.
Fingernails should be short and clean. No artificial substances on nails other than un-chipped, neutral colored, fresh nail polish. No extreme colors.	Artificially long nails, chipped nail polish, extreme colors.
Perfumes or after shave, light scents only, used sparingly.	Cigarette odor on clothing, breath, hands, face.
Beards and mustaches should be clean and neatly trimmed, or clean shaven (i.e. no 5 o'clock shadow).	
General Hygiene – you must be neat and clean, including oral hygiene.	Gum chewing.

HYGIENE POLICY

It is the policy of the PTA Program that students observe personal cleanliness guidelines while on campus and during clinical rotations. When attending lecture classes, special programs or clinical affiliations, the student should wear clean clothes, use deodorant, keep fingernails clean, short and natural (no artificial nails), use minimal light fragrances or after shave lotions.

Procedure: The faculty and advisory committee have prepared an outline of dress expectations in terms of what is considered to be appropriate and not appropriate in lecture or special programs, in lab class, and during clinical observations and affiliations. You must also abide by the dress and hygiene guidelines of the facility you will be working with, which may be slightly different than the guidelines the faculty is setting forth.

Students will be asked to wear a patient gown in lab class if dress is inappropriate. In the clinical setting, not abiding by the dress and hygiene guidelines are grounds for a clinical site to dismiss you for the day or send you home to change. Any missed time must be made up. Continual improper dress is a red flag and may be grounds for dismissal from a site if CI requests.

As you know, hygiene is important when you interact with patients and other healthcare professions. We have been receiving complaints from clinical instructors and their patients that some PTA students have a smoke smell on them. This is an intolerable situation. Some facilities are mandating employees and students who smell of smoke leave the facility, shower, and return in clean clothing.

If you are a smoker, the smell clings to your body and your breath. If you smoke in your home or vehicle, you will smell when you enter a classroom or a clinic. Clean air is the right of the majority of the population.

If you smell of smoke entering the classroom, you will be asked to leave and “air” yourself. If you smell of smoke in a clinical setting, you will be removed from the clinical site and receive a failing grade for the clinical.

Additionally, covering the smell with perfumes and colognes will not help the situation. The strong smell of cologne and perfumes/lotions is sometimes aggravating to patients as well and must be avoided.

Faculty Responsible: All

SUSPECTED SUBSTANCE ABUSE POLICY

Purpose: Students must be unimpaired in the classroom and in the clinical setting. Safety of fellow classmates and patients are of utmost importance.

Procedure:

On Campus:

1. If a student appears to be impaired or smells of alcohol, they will be asked to leave class and visit the nurse and the Associate Dean.
2. If you suspect drug or alcohol impairment in a classmate, you are to immediately inform your instructor.
3. If this occurs a second time, the student will be removed from the program.
4. It is the student's responsibility to inform the instructor if they have had a medical procedure, are taking pain medication post procedure or if they have started a new medication regime prior to attending class.

On Clinical Affiliation:

1. It is the student's responsibility to inform the DCE and clinical instructor if they have had a medical procedure, are taking pain medication post procedure or if they have started a new medication regime prior to attending the clinical.
2. If a student appears to be impaired or smells of alcohol, they will be asked to leave the clinical site.
3. The clinical instructor will contact the DCE.
4. The student will be required to return to campus and meet with the DCE and Program Director within 24 hours of being dismissed. If the dismissal occurs on a Friday, the student will be seen on the following Monday.
5. The impaired student:
 - Will be removed from the clinical site.
 - Will fail the clinical rotation.
 - May be out of the program immediately if this has occurred previously in the classroom.

Faculty Responsible: All

DRUG TESTING AND BACKGROUND CHECK POLICY

Purpose: Students must be prepared to be drug tested and/or have a background check performed prior to attending selected clinical affiliations.

Procedure:

Prior to a Clinical Affiliation that Requires Either Drug or Background Checks:

1. The DCE will inform the student of the clinical sites requirements for drug and/or background check and the manner the testing will be completed.
2. The student will arrange for, pay for and obtain the necessary clearance by the time the DCE sets.
3. The student will submit the testing results to the DCE and to the clinical setting.
4. The student may be refused by the clinical setting depending on the results of the testing.
5. The student will be referred for drug and alcohol counseling if drugs or alcohol are identified.
6. A clean drug and alcohol screen and release from counseling are required before any clinical will be rescheduled.
7. The DCE will reschedule the clinical, if possible. The DCE will attempt to reschedule the clinical two times maximum, if she is unsuccessful in securing a clinical placement the student must withdraw from the program as they will be unable to complete the curriculum.
8. A second drug test failure will cause the student to be dismissed from the program.

Faculty Responsible: DCE

IDENTIFICATION AND PATIENT CHOICE POLICY

Purpose: Students must identify themselves as a student whenever in contact with patients, patient family members, and other health care professionals. Students in the Physical Therapist Assistant Program must provide a patient with the opportunity to accept or reject treatment interventions that are provided by a student.

Procedure:

1. The student will practice identifying themselves to a classmate during every competency or practical examination clearly as a “Herkimer College Physical Therapist Assistant Student”.
2. The student will obtain patient consent prior to starting any component of an intervention in class, during a competency or practical examination prior to entering the patient’s personal space.
3. The student will sign all documentation and bills with his/her full legal name, title and student status.
4. The student on clinical assignment will:
 - Greet the patient in a formal manner using their title and last name unless directed otherwise or if inappropriate to the clinical setting, e.g. a child in a school setting.
 - Wear a name tag that clearly indicates their student status.
 - Introduce and identify himself/herself as a student prior to treating or interacting with a patient.
 - Correct or clarify any misconception of who the student is immediately. For example, if the patients call you “doctor...” immediately inform them of who you are and your student status.
 - Respectfully accept a patient’s refusal to be treated by a student.
 - Identify himself/herself to a patient’s family as a student using name, title and student status.
 - Identify himself/herself to other healthcare practitioners as a student using name, title and student status.
 - Never assume that previous consent implies continued consent.
 - Sign all documentation and bills with his/her full legal name, title and student status.

Faculty Responsible: All

OPEN LAB POLICY

Description:

Open Lab is time (made by appointment) when the lab room and equipment are made available for the student's independent use outside of scheduled classes. Open Lab is *not* a tutoring session with the supervising faculty member. A faculty member must be present for students to have access to the lab. You may make arrangements to use the open lab if there is not a class in session and an instructor is available. Check lab availability by contacting your instructors – Dr. Delorme, ext. 8340 or Dr. Jones, ext. 8740. You may use the open lab when supervised by PTA Mentor – check posted hours. Use of labs and/or equipment requires a valid I.D.

Purpose:

Open Labs are to be used by students as time to independently practice skills taught in class, to identify, understand and become comfortable with different varieties of machinery and equipment, to problem solve various patient scenarios for practical exams, or for time to review skills prior to going out on affiliation. All PTA students are encouraged to make use of Open Labs for these purposes. Open Lab is *not* intended to be a tutoring session or lab review directed by the supervising faculty member.

Procedure:

- a) Contact faculty member and arrange open lab supervision.
- b) Sign in with the lab supervisor and drop off I.D. to gain access to storage closet.
- c) Students must restore order to the lab area and closet after use.
- d) Students sign out.

Open Lab Rules:

- ✓ One faculty member must be present (if in office, the blinds must be open) for supervision of students utilizing Open Lab.
- ✓ Fellow students and general public are not allowed in open lab, only students in the PTA program.
- ✓ No eating or drinking (includes gum, candy and coffee).
- ✓ Appropriate lab clothing must be worn (shorts, sneakers, tank top or halter-top, sports bra, etc.).
- ✓ No running or horseplay is allowed in the lab.
- ✓ Report damaged or malfunctioning equipment immediately to faculty member.
- ✓ Safety first – observe all precautions: proper body mechanics, gait belts, instructions to patients, etc.
- ✓ Students may use all of the equipment that they have been competency checked on.
- ✓ Students may not plug in electrical equipment without faculty permission.
- ✓ Students may not leave until order is restored in both lab and storage closet.
- ✓ In case of emergency: Notify faculty member immediately - if emergency involves faculty member, follow posted emergency procedures to summon help. You may use the office phone to contact **Campus Safety at 911**.
- ✓ All general College rules apply to open lab.

Faculty Responsible: All

PTA PROGRAM LABORATORY RULES

1. There is no eating allowed in the lab (Room TC 417) at any time. This includes gum chewing, coffee, candy, etc.
2. Students are to arrive for lab sessions on time and prepared. You are to be dressed in lab clothes for **all** labs. Appropriate lab appearance and clothes include: a short white lab jacket, shorts, sneakers or slip on boat shoes, and tank top or halter top, sports bra; hair is to be tied back; nails short and clean. Inappropriate lab appearance and clothes include: sandals, shoes with heels or flip flops; artificially long nails; long hair. Hospital gowns will be provided when appropriate.
3. Bring your text book or lab manual to class.
4. Work in pairs or groups of three as assigned.
5. Utilize standard precautions as discussed in PT 121.
6. Wash your hands between patients. Use the hand sanitizer when hands are lightly soiled, water when dirty.
7. Laboratory equipment is expensive. You are to use only that equipment that you have been instructed in the use of. Any damaged or malfunctioning equipment is to be reported to your lab instructor immediately. There is to be no “horseplay” in the laboratory at any time. Use of laboratory equipment is a privilege that may be revoked if it is deemed that your activity presents a danger to the equipment, yourself or other students or faculty.
8. Safety precautions must be observed at all times. This includes proper body mechanics, instructions to treatment subjects, use of gait belts when appropriate, etc.
9. In the event of an accidental spill (such as fluid or blood) wait for your instructor’s instructions on how to manage it or until campus maintenance has cleaned the area. Follow standard precautions as taught in PT 121.
10. This is your lab – **no one** may leave before everything is put away. This includes both the lab and storage closet. It is the responsibility of every class member to clean the lab prior to packing your personal belongings or changing.
11. Lab reports may be required at the discretion of the lab instructor. Lab reports are to be typed or neatly printed on good paper (no torn edges from spiral notebooks).
12. No one is allowed into the lab during scheduled classes other than the instructors, students enrolled in that class and the PTA program work-study students. Do not “visit” the work-study student or bring in lunch or other food to eat in the classroom.
13. Open labs may be requested. See Open Lab Policy.
14. In case of an emergency in the lab, you are to notify an instructor immediately. The instructor will summon help if necessary. If the emergency involves the instructor, you are to use the phone in the office and follow the emergency procedures on this page to summon help. A copy of the College’s procedure for on-campus emergencies and a list of emergency phone numbers is included in this booklet, and is posted in the lab near the chalkboard and in the office. Other resource emergency numbers are listed in your College Student Handbook page 135.
15. Use of labs or equipment requires valid ID.

SAFETY POLICY

Purpose: To ensure instructor, student and volunteer safety in the lab, DCE on the road and student safety on clinical affiliations or observations.

Procedure:

A. Equipment: Safety and Inspection

1. Every year, in preparing the budget, an equipment safety line is inserted into the program request.
2. The Program Director is responsible to contact and set up the equipment safety and calibration with a service company every Fall semester. Currently we have been contracting with PMR to provide this service.
3. The company performing calibration and safety checks appropriately labels the equipment with the date of the inspection.
4. The Program Director maintains the records of these annual calibration and safety checks.
5. Equipment that is loaned to the program must have safety labels in place in order to be used in the lab.

B. Equipment: Safety and Student Use

1. Electrical equipment is stored in the locked cabinets in the lab and brought out for student instruction in class.
2. Students may only use equipment that they have been trained on during a supervised lab.
3. Students may continue practice with equipment in an open lab with a faculty member present.
4. Students are thoroughly taught contraindications before being allowed to use equipment on their fellow students.
5. Students have mastered competencies prior to using techniques on patient volunteers.
6. Lab competency rubrics include safety (knowledge of) contraindications and safety in application techniques. No student is able to pass a competency who hasn't mastered safety and or techniques.

C. Safety: Personal

1. Hand washing techniques are taught in PT 131 Basic Procedures and competency tested in the first semester prior to any off campus observation.
2. Appropriate use of personal protective devices for use with exposure to blood and body fluids is taught in PT 121 Introduction to Rehabilitation in the first semester prior to any off campus observation.
3. Students are taught the appropriate application of personal protective devices in PT 143 Advanced Procedures and competency tested in the second semester prior to any off campus observation.

4. An introduction to blood borne pathogens is taught in PT 121 Introduction to Rehabilitation in the first semester prior to any off campus observation.
5. Students are asked to acknowledge the training on exposure to blood borne pathogens and also to make an informed decision regarding having the HBV vaccination.
6. Students receive instruction and competency testing in correct body mechanics, safe lifting and transfer techniques in PT 131 Basic Procedures.

D. Emergency in Lab: Student or Instructor

1. Introduction to safety in the lab begins with the student orientation to the program.
2. In the Student Handbook, students are instructed to notify the instructor of an emergency immediately and the instructor is to notify Campus Safety at 911.
3. If the emergency involves the instructor, the student is to use the classroom phone to call Campus Safety at 911.
4. A copy of the emergency procedures is posted in the lab and in the faculty office.

E. MSDS

1. The program collects MSDS sheets on materials stored in the lab.
2. MSDS sheets are kept in the faculty office.
3. Safe handling of chemicals and water additives is taught using appropriate personal protective devices.

F. Clinical Safety: DCE

1. The DCE files a travel request for an off campus activity.
2. If the DCE uses a College vehicle for the site visits, the College policy provides coverage in the event there is an accident.
3. If the DCE uses her own vehicle, the primary coverage is the car owner's own policy (as per NYS insurance laws) and the College policy provides excess coverage.
4. The College also has comprehensive general liability coverage. It covers bodily injury and/or property damage claims on or off campus if on College-related business.

G. Clinical Safety: Student Clinical Affiliation

1. By contract, the clinical facility agrees to advise the student as to how he/she should obtain emergency medical care if it were necessary during the affiliation.
2. Each student must practice hand washing, use personal protective devices and take all safety precautions as taught in the program to ensure their personal safety on a clinical affiliation.
3. Each student must follow the procedures for clinical safety (first aid, eyewash station, fire) as directed by their clinical faculty.

H. Clinical Safety: Student Clinical Observation

1. It is not expected that the student will have direct patient contact during an observation. However, each student must at all times be aware of and practice hand washing, use personal protective devices and take all safety precautions as taught in the program to ensure their personal safety on a clinical observation.
2. Each student must follow the procedures for clinical safety (first aid, eyewash station, fire) as directed on their clinical observation.

Faculty Responsible: All

EMERGENCY PROCEDURES

On-Campus (Days, Evening, Weekends)

EMERGENCY CONTACT CAMPUS SAFETY, 911

NON EMERGENCY CONTACT CAMPUS SAFETY, EXTENSION 8616

Fire Alarm

Proceed To Nearest Exit

Emergency Siren/Public Address

Shelter in Place until "All Clear"

NY Alert System

Sign up to receive emergency notifications via text, email, telephone

"OFF STEP" STUDENT AND CLINICAL EDUCATION POLICY

Purpose: In the event that the off step student has no scheduled clinical classes in the semester preceding a scheduled clinical affiliation, the student must enroll in all clinical classes. This policy is designed to produce safe practitioners who are prepared to meet the challenges and effectively provide treatment interventions while on clinical affiliations.

Procedure: The student enrolls in all classes in the semester that precedes the clinical affiliation.

1. The student must enroll in the clinical class(es) held in the semester, which precedes the clinical affiliation.
2. The student must pass all competencies and submit all course assignments.
3. The student may go on affiliation.

Faculty Responsible: All

CLINICAL OBSERVATION POLICY

Purpose: The student is required in some PTA classes to arrange for off-campus observations as part of the learning activities in that class. These off-campus activities are used to facilitate learning and comprehension of techniques taught during the curriculum.

Procedure:

1. Each student is to schedule their observation during the appropriate time frame.
2. It is the responsibility of the student to arrange for transportation to the observation.
3. Each student must maintain the code of ethics while on the observation. This includes using professional behaviors, dress, body and verbal language, decorum, wearing a name tag which identifies each student as a student, refraining from the use of all illegal substances, etc.
4. Each student must attend the observation and have it documented by the clinical facilitator.
5. Each student must submit their own report on the observation.

Responsible: All

SKILL CHECKLIST POLICY

Purpose: To develop student skill checklists that cover all of the components of data collection and the components of interventions to guide and assist the student in practicing and performing the skill sets safely, correctly and effectively.

Procedure:

1. The faculty will develop skill checklists for each competency area in their respective teaching assignments.
2. Each faculty member teaching the class in which the competency is tested identifies the critical safety components.
3. Each checklist will include:
 - A patient orientation section
 - A professional behavior section
 - A safety section
 - A technique section
4. The faculty members review the checklists in the department meetings.
5. The faculty members consult with the Advisory Committee at least annually for clinical input.
6. The checklist is given to the students when the data collection or the intervention techniques are taught.
7. The student is judged to be competent when able to perform components of data collection and components of interventions safely, correctly, effectively, with knowledge of indications, contraindications, precautions, and the effects of the physical therapy interventions.
8. The checklist is used to develop the competency-grading rubric.
9. The safety component of the intervention rubric must be passed or the student fails the competency.
10. The competency must be passed with the minimum grade of a “B” (4.2/5 or 8.4/10).

Responsible: All

ENTRY LEVEL EXPECTATIONS POLICY

Purpose: to define the term “entry level” so the student is aware of program and professional expectations.

Program Statement: The student has successfully completed all PT technical didactic classes with a grade of “C+” or better, passed all competencies and practical exams with a grade of “B” or better and passed all clinical fieldwork experiences as delineated in the Clinical Grading Policy. Upon completion of the final clinical the soon to be program graduate demonstrates a series of skills in a predictable fashion:

- The entry level graduate is able to work safely, independently, skillfully and deliver quality care to the patients they are assigned.
- The entry level graduate is efficient and exhibits good time management skills.
- The entry level graduate is able to perform complex tasks in patient related activities.
- The entry level graduate is able to perform all aspects of an intervention as directed by their clinical instructor.
- The entry level graduate seeks guidance and supervision from their instructor appropriate to the individual case.

Entry Level Performance Dimensions: (definitions excerpted from the APTA document Physical Therapist Assistant Clinical Performance Instrument, August 2009 page 11)

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

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

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

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

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

Process: Student is Entry Level

1. The student demonstrates successful completion on all of the PTA CPI criteria as rated by their Clinical Instructor.
 - The student must have a performance rating of “Entry Level” on safety.

- On all other CPI criteria the student must have a performance rating that falls between “Advanced Intermediate” and “Entry Level”.
 - The DCE also takes into account the written information in the CPI provided by the Clinical Instructor to make the determination that the student has achieved entry level.
2. Once the DCE determines the student has achieved entry level she submits the final clinical grades.
 3. The registrar verifies the student is eligible for graduation.

Process: Student is not Entry Level

1. Failure to achieve a performance rating on safety as Entry Level as rated by the Clinical Instructor and reviewed by the DCE results in failure of the final clinical.
2. Failure to achieve performance rating that falls between “Advanced Intermediate” and “Entry Level” as rated by the Clinical Instructor and reviewed by the DCE results in failure of the final clinical.
3. The DCE determines if remediation is required in consultation with the Program Director.
4. The DCE designs and supervises the remediation requirements.
5. After remediation has been completed the student is rescheduled for the final clinical experience at a different location. This is a one-time opportunity to repeat and pass the final clinical.
 - Once the DCE determines the student has achieved entry level she submits the final clinical grades.
 - The registrar verifies the student is eligible for graduation.
6. If the student is unable to demonstrate entry level performance on the second final clinical, the DCE informs the Program Director and the Associate Dean that the student has failed and may not graduate as a PTA.
 - The unsuccessful student is informed of their failure and inability to continue by the DCE and Program Director.
 - The unsuccessful student is counseled during this meeting to change their curriculum and is sent to the counseling office to pursue other career options.

Responsible: DCE, Program Director, Associate Dean of Academic Affairs, Registrar

COMPETENCY AND PRACTICAL EXAMINATION POLICY

Purpose: The intent of a practical examination is to help the student by simulating “real” patient encounters while performing a task. Practical examinations are designed to be additional learning experiences. Suggestions for improvement of performance are made after the demonstration to:

1. Enhance the individual’s performance competence
2. Ensure patient safety
3. Improve student technique
4. Inspire confidence in their capabilities when they encounter a real patient

It must be stressed that the utilization of more realistic practical exams is one of the strongest messages that our Advisory Committee has sent to this program. In their opinion, your future success in the field is aided through the use of these practical examinations.

1. All Physical Therapist Assistant courses that have a lab skill component must document successful completion of the skills that were learned.
2. Successful completion on all practical examinations, competencies, checklists or final exams defined as:
 - a) Meeting all safety standards
 - b) Having a minimum grade of “B”
3. The instructor documents each successfully mastered skill on the individual student record card.
4. Each student may have three chances to successfully pass each practical examination. If a student is unable to pass the practical examination at this point, the second chance policy will take effect.
5. Your Clinical Instructor (CI) knows the topics, the assessment/data collection and procedural interventions we have covered in the curriculum. They can access the Program and Clinical Education handbook for Students and Clinicians on the program website.
6. Your CI and you will update the CPI checklist during each clinical affiliation.

Procedure: Faculty initial and date the Competency and Practical Record when the student completes a competency or practical examination.

Faculty Responsible: All

COMPETENCY PRIOR TO CLINICAL AFFILIATION POLICY

Purpose: To ensure an adequate knowledge base, and clinical base to ensure patient safety prior to student clinical affiliations.

A. Competency Prior to Clinical Affiliation Procedure:

1. Students will be evaluated in each clinical laboratory classes (PT 131, PT 132, PT 141, PT 142, PT 143, PT 251, PT 252, PT 260, PT 275) using competency and practical examination rubrics developed by the faculty.
2. Students must pass all practical exams and competencies in order to pass a course in the curriculum.
 - a) Students always practice skills in a supervised lab prior to testing out in competencies in lab.
 - b) Students have the ability to continue to practice skills in the open lab when the faculty member is available to assist in skill acquisition or with the PTA mentor during scheduled hours.
 - c) All competencies and lab practical exams must be successfully completed with a grade of B to pass a clinical course (maximum of three attempts).
 - d) No student may participate in a clinical experience that has not completed the prerequisite clinical classes prior to the affiliation.

B. Competency Prior to Clinical Affiliation Procedure for the Unsuccessful Student

- a) The student is required to repeat classes as delineated in the document "Implementation of Retention/Second Chance Policy".
- b) The student may only participate in a clinical affiliation if they successfully repeat the required courses.

C. When a student is taught something outside of the lab setting, e.g. during a clinical affiliation, it is the responsibility of the clinical instructor to ensure the student is competent in the skill before it is performed on a patient.

Responsible: All faculty

ABSOLUTE FAILURE POLICY

Purpose: To delineate situations, behaviors or omissions that will always result in a failure of a lab competency, lab practical examination or clinical affiliation.

Procedures:

Lab Competency and Lab Practical Examination

1. The faculty will include in all lab competency, and lab practical examination rubrics a listing of safety precautions and expected PTA behaviors.
2. Students must maintain all safety precautions.
3. Students must provide the treatment only as prescribed by the PT.
4. Students must communicate effectively.
5. Students must collect data appropriately.
6. Students must maintain professionalism.
7. Students who do not observe these areas will fail the lab competency or lab practical examination.

Clinical Affiliation

1. The faculty will include a copy of the CPI in the PTA program Fieldwork Handbook.
2. Students must maintain all safety precautions.
3. Students must provide the treatment only as prescribed by the PT.
4. Students must communicate effectively.
5. Students must collect data appropriately.
6. Students must maintain professionalism.
7. Students must use critical thinking skills in the clinical setting.
8. The CI will inform the DCE if the student is not performing to the expectation standard, using the phone call reminder icon on the CPI as a trigger.
9. Students who do not observe these areas will fail the clinical fieldwork.

Students

1. Review the program expectations for safety precautions, providing the treatment only as prescribed by the PT, effective communication, appropriate data collection, professionalism and using critical thinking skills in the clinical setting.
2. Practice techniques during lab class, during available open lab time and at home prior to taking a competency or lab practical.
3. Familiarize yourselves with the examples of situations, behaviors or omissions that will always result in a failure of a lab competency, lab practical examination or clinical affiliation.

Responsible: All Faculty and Students

ABSOLUTE FAILURE EXAMPLES

The following are examples of situations, behaviors or omissions that will always result in a failure of a lab competency, lab practical examination or clinical affiliation.

LABORATORY AND CLINICAL PROGRAM EXPECTATION: STUDENTS MUST MAINTAIN ALL SAFETY PRECAUTIONS.

Failure to perform any of the tasks listed below is an absolute failure of a lab competency, lab practical examination or clinical affiliation.

- Lock the wheelchair or other device.
- Secure the patient in a transfer device (e.g. using a Hoyer Lift).
- Puts shoes on patient prior to transfer.
- Apply a gait belt before transfer activities.
- Transfer patients between surfaces to the correct side.
- Guard using a gait belt on the correct side, with the correct amount of assistance (from maximal assistance to independent) for all activities.
- Maintain weight-bearing status throughout intervention.
- Maintain precautions for the diagnosis (e.g. total hip precautions).
- Check the machinery for broken parts/wires.
- Avoid contamination of patient and self.
- Test for temperature sensation prior to a thermal modality.
- Apply the proper dosage of a modality to a patient.
- Maintain the prescribed ROM (e.g. Stretches patient beyond the end of the ROM causing excessive pain).

PROGRAM EXPECTATION: STUDENTS MUST PROVIDE THE TREATMENT ONLY AS PRESCRIBED BY THE PT.

Failure to provide the treatment prescribed by the PT is an absolute failure of a lab competency, lab practical examination or clinical affiliation.

- Treat the involved body part (e.g. right vs. left, thoracic vs. cervical, placing electrodes on an incorrect muscle group, etc.)
- Position the patient for gravity resisted and minimized muscle contractions.
- Ensure that the patient performs the correct gait pattern.
- Measure joint ROM within 10° of the instructor and/or align the goniometer properly.
- Plug in and turn on the machinery before treating the patient.
- Accurately measure vital signs.
- Providing anything beyond the scope of the prescribed treatment or using an improper technique.

PROGRAM EXPECTATION: STUDENTS MUST COMMUNICATE EFFECTIVELY

Failure to communicate effectively is an absolute failure of a lab competency, lab practical examination or clinical affiliation.

- Produce clear, concise, timely commands with adequate voice volume.

PROGRAM EXPECTATION: STUDENTS MUST COLLECT DATA APPROPRIATELY

Failure to collect data appropriately is an absolute failure of a lab competency, lab practical examination or clinical affiliation.

- Read the patient's chart and collecting data that may influence the PT treatment.
- Be well versed with the PT evaluation and plan of care.
- Recognize indications, contraindications and precautions to physical therapy treatment and reporting any contraindications to the physical therapist.
- Understand the disease processes and rationale for treatment.

PROGRAM EXPECTATION: STUDENTS MUST MAINTAIN PROFESSIONALISM

Failure to maintain professionalism appropriately is an absolute failure of a lab competency, lab practical examination or clinical affiliation.

- Treat the patient with dignity and respect.
- Dress in a professional manner, without underwear showing or excessive cleavage displayed.

IN ADDITION TO ALL ITEMS COVERED IN THE PRECEEDING SECTION – AUTOMATIC FAILURE ITEMS SPECIFIC TO CLINIC

(Cannot be tested on the practical)

FAILURE TO MAINTAIN SAFETY PRECAUTIONS

Failure to:

- Reapply restraints.
- Maintain environmental safety (e.g. Remove obstacles from gait path).
- Identify and respond to a physiological response to treatment.

FAILURE TO PROVIDE THE TREATMENT PRESCRIBED

Failure to:

- Administer treatment as instructed by the physical therapist.
- Progress interventions within the plan of care in response to the patient's age, discomfort, diagnosis, comprehension and cooperativeness.

FAILURE TO MAINTAIN PROFESSIONALISM

Failure to:

- Treat the patient with dignity and respect.
- Recognize a patient's demonstration of emotional distress and interact effectively with the patient for the desired support.
- Maintain confidentiality of information.
- Seek assistance with patient care when unsure of the procedure.
- Initiate and complete assigned tasks without prompting.
- Comply with departmental policies and procedures.
- Adhere to ethical and legal standards of practice.
- Dress appropriately for the practice location.
- Wear name tag.
- Utilize "down time" in an educational manner (e.g. review anatomy, specific patient charts, protocols or research pathology relating to patient not reading a magazine from the waiting room).

FAILURE TO USE CRITICAL THINKING SKILLS

Failure to:

- Individualize treatment for patient needs.
- Report back to the supervising therapist when changes in the patient's condition and response to treatment occur.
- Progress the patient within the plan of care.
- Request that the PT reevaluate, discharge and/or modify the short term goals according to patient needs when appropriate.

PTA Program Competency and Practical Examination Record

Student Name _____ H # _____

<i>Class</i>	<i>Classroom Instruction/Attended Classes</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 121	Standard and Transmission Based Precautions and Bloodborne Pathogens		

<i>Class</i>	<i>Competency/Practical Items</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 131	Hand Washing Competency		
	Safety, Positioning and Draping Competency		
	Safety Wheelchair Competency		
	Transfer Competency		
	Ambulation, Gait Training, Safety, Balance Competency		
	Standardized Questionnaire Competency		
	Paper: Architectural Barriers		
	Comprehensive Lab Final		

Comprehensive Lab Final Grade _____

<i>Class</i>	<i>Competency/Practical Items</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 132	Superficial Heat Competency		
	Cryotherapy Competency		
	Ultrasound Competency		
	Laser Competency		
	ES Competency		
	Biofeedback Competency		
	Traction Competency		
	Deep Heat Competency		
	Hydro & UVL Competency		
	Comprehensive Lab Final		

Comprehensive Lab Final Grade _____

<i>Class</i>	<i>Competency/Practical Items</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 141	Posture and Body Mechanics Final		

Comprehensive Lab Final Grade _____

<i>Class</i>	<i>Competency/Practical Items</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 142	Vital Signs Competency		
	Anthropometric Competency		
	Goniometry – UE Competency		
	Goniometry – LE Competency		
	MMT – UE Competency		
	MMT – LE Competency		
	Goniometry and MMT neck and Trunk		
	Sensation, Reflex, Balance, Coordination Testing Competency		
	Chart Review/ Determination of Patient’s Ability to Engage in Exercise		
	Comprehensive Lab Final		

Comprehensive Lab Final Grade _____

<i>Class</i>	<i>Competency/Practical Items</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 143	Massage Competency		
	Wound Care & Dressing Application Competency		
	Wound Care Documentation Competency		
	Compression Bandaging & Unna boot Application Competency		
	Intermittent Compression Pump Competency		
	Exercise Competency		
	Comprehensive Lab Final		

Comprehensive Lab Final Grade _____

Successful completion – Student is eligible for Clinical Fieldwork I (PT 206)

PT 206 Grade _____

<i>Class</i>	<i>Competency/Practical Items</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 251	<u>Practical I</u> – Management Of Cervical, TMJ, Thoracic, Lumbar, SI Joint, Posture Conditions		
	<u>Practical II</u> – Management Of Hip, Knee, Ankle, Plantar Fasciitis, Gait Conditions		
	Comprehensive Lab Final – includes all of previously tested materials plus Management Of Shoulder, Elbow, Wrist And Hand Conditions		

Comprehensive Lab Final Grade _____

<i>Class</i>	<i>Competency/Practical Items</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 252	<u>Practical I</u> – Pediatric Reflexes, developmental sequence, cranial nerves		
	<u>Practical II</u> – Management of Neurological Conditions: Cerebral Palsy, CVA, Down Syndrome, Muscular Dystrophy, Spina Bifida, Osteogenesis Imperfecta		
	Comprehensive Lab Final – includes all of previously tested materials plus Management of Spinal Cord Injury, Traumatic Brain Injury, Post Polio Syndrome, Parkinson’s Disease, Guillain Barre Syndrome, Multiple Sclerosis, and Amyotrophic Lateral Sclerosis		

Comprehensive Lab Final Grade _____

Successful completion – student is eligible for Clinical Fieldwork II (PT 255)

PT 255 Grade _____

<i>Class</i>	<i>Competency/Practical Items</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 260	Practical I – Management of Cardiac Conditions		
	Practical II – Management of Amputations and Special Conditions		
	Practical III – Management of Burns and Pulmonary Conditions		
	Comprehensive Lab Final		

Comprehensive Lab Final Grade _____

Successful completion – Student is eligible for Clinical Fieldwork III (PT 280)

<i>Class</i>	<i>Competency/Practical Items</i>	<i>Date</i>	<i>Instructor Initials</i>
PT 275	Obstetric/Women’s and Men’s Health Competency		

Successful completion – Student is eligible for Graduation

(Revised 10/22/2014)

RETENTION AND SECOND CHANCE POLICY

Purpose: Recognizing the demanding nature of the PTA program and to give students the opportunity to succeed in the program while protecting the healthcare field with adequately prepared safe healthcare providers. Students must earn a minimal grade to continue in the program.

Procedure:

1. Only students matriculated in the PTA may enroll in PTA courses.
2. Students enrolled in the Physical Therapist Assistant program are required to pass the following courses with a grade of “C+” or better to maintain their status in the PTA program:

PT 121	PT 142	PT 252
PT 131	PT 143	PT 260
PT 132	PT 251	PT 275
PT 141		

3. Students enrolled in the Physical Therapist Assistant program are required to pass the following courses with a grade of “C” or better to maintain their status in the PTA program:

SC 253	SC 254
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4. Students should recognize that obtaining a grade of “C+” will give you a minimal chance to pass your National Board Examination. You should strive to attain higher grades in all science and technical studies.
5. In order to help recognize students who may be in jeopardy of falling behind, if you get less than a “B” on any unit test or if you fall behind in submitting your assignments, your instructor will require you to make an appointment and meet with the PTA Program Mentor during his scheduled hours on campus (times are posted and vary by semester).
6. Students must pass all practical examinations with a “B” or higher to pass a PTA Program class.
7. Students enrolled in these required courses earning less than a “C+” in PTA classes or “C” in science classes will be dropped from the PTA program.
8. The Program Director notifies the Associate Dean of Academic Affairs with a list of students who fail to obtain the required grade in either PTA classes or anatomy.
9. The Program Director sends a letter to the students dismissing them from the program.
10. Students failing to obtain the required grade during either the first or second semester **or** who don’t immediately return after a third or fourth semester failure **or** who willingly drop who wish to return to the program must reapply to the program through admissions by completing an application to the program. You enter the pool of new applicants and compete for a seat in the program with other incoming students. *There is no guarantee of a seat in the next class.
11. Students failing to obtain the required grade during either the third or fourth semester who wish to return to the program must send a letter to the Program Director requesting readmission. The program faculty will review the academic record of the student. Readmission will be based on seat availability and prior academic performance. The applicant will have a special learning contract designed to facilitate success.
12. Students must pass all clinical affiliations with a grade of “PASS” Failure of a clinical course is the same as failure of a didactic course; it must be immediately addressed. The

DCE may elect to have them scheduled for an “off step” clinical sequence. Based on the areas of clinical deficiency, the student receives and signs a learning contract for remediation. Once the remediation is completed, the DCE will reschedule the clinical affiliation.

13. At no time can the program be attempted more than two times. However the Provost may consider extraordinary circumstances (e.g. medical leave) in granting a student one additional attempt at the program.

Faculty Responsible: All

IMPLEMENTATION OF RETENTION/SECOND CHANCE POLICY
STUDENT RESPONSIBILITIES
PTA MAJOR

I. If a student is dismissed and wishes to return to the program in any of the following instances:

- after failing to obtain the required grade (C+ in PTA Program classes, C in Anatomy and Physiology classes) during either the first or second semester
- not immediately returning after a third or fourth dismissal
- who willingly drops the program who wish to return to the program

The student proceeds as follows:

- A. Are not eligible to enroll in the PTA courses for the next semester.
- B. Must reapply to the program and compete with the incoming class.
- C. Anatomy and Physiology I and II must be completed before this application is made.
- D. Readmission is not guaranteed. The student will register for and repeat the entire first year of PTA classes before proceeding in the program.
- E. If readmitted, this is a one-time opportunity.

II. If student is in the third, or fourth semester and have failed to obtain the required grade of C+ in PTA Program classes, they:

- A. Must write a letter to the Program Director indicating their intent to return to the program.
- B. After reviewing the letter and academic history and if there is a seat available, the student may be asked to interview with the PTA Advisory Committee.
- C. If readmitted, the student will sign a learning contract. In any case there will be no time between failure and return. The student will register for and repeat the previous semester's classes before proceeding.
- D. Readmission is not guaranteed.
- E. If readmitted, this is a one-time opportunity.

III. If the student has not successfully completed a fieldwork experience (failed to receive a grade of "S"), they are informed that:

- A. They must repeat the fieldwork experience.
- B. Based on the areas of clinical deficiency, the student receives and signs a learning contract for remediation.
- C. The student must acknowledge and accept personal responsibility for the failure.
- D. The student may enroll in the next courses within the didactic portion of the curriculum.
- E. The student must complete remediation as determined by the DCE based on clinical performances.
- F. The student must complete the missed fieldwork prior to beginning additional fieldwork.

- G. The student must accept the location of the rescheduled fieldwork as determined by the DCE.
- H. The student acknowledges that this is a one-time opportunity.

APPEAL PROCESS

Intent: As previously stated, students may reapply and restart the program after a course failure if there is room in the incoming class or return from a second year failure following the stipulations in the “Implementation of Retention/Second Chance Policy Student Responsibilities.” This is a one-time opportunity. In the advent that a student fails an additional course within the curriculum, they will automatically be dismissed. The student may make a one-time appeal for reconsideration in writing to the Appeals Committee.

The Appeal: This is written justification that the student must submit. The appeal must outline the reasons that you feel your appeal is worth consideration by the Committee. It must also contain the personal strategies that you intend to use to remain in good standing throughout the rest of your student career.

The Appeals Committee: May consist of the Dean of Academic Affairs, Associate Dean of Academic Affairs, PTA Program Director, PTA Program DCE and by invitation, any faculty in whose course the student fails to pass with a “C” (in science classes) or a “C+” (in PTA classes).

The Process: The Appeal Committee will review the student’s appeal letter, examine the past academic history and render a decision, which may not be appealed regarding a last chance re-entry into the PTA program. Readmission would only occur if there is room in the incoming class. If readmitted the readmission is probationary. The student must demonstrate discernible progress. Special conditions may be imposed, e.g. frequent appointments with the Advisor, the PTA Program Mentor, referral to the Academic Coach, or enrollment in structured study opportunities. The student will be notified in writing of the Committee’s decision.

COMPLAINT POLICY

Purpose: The PTA program collects information regarding complaints lodged against the program, faculty and DCE, and the Program Director. Possible complainants may include: current students, graduates, clinical educators, employers, and the general public, e.g. patients or individuals wanting to be admitted to the program who do not meet admissions criteria. Complaints will be addressed confidentially, in a nonjudgmental manner and without fear of retaliation.

Procedure:

1. **Provision of Access to Lodge a Complaint about the PTA Program:** A link has been placed on the PTA program's web page to allow comments/complaints regarding the program. Clinical faculty will be provided the web address for comments/complaint about the program. Current students will receive information in their PTA Student Handbook.

2. **Process:** All complaints that are received about the program should be directed to the Program Director. Exception: if the complaint regards the Program Director, then it is appropriate to send such complaints to the Associate Dean of Academic Affairs.
 - a) Complaints received about the program regarding curricular content or lack of graduate competency will be placed on the agenda of the next departmental meeting. The process used includes: discussion of the complaint and possible implementation of PTA Program Evaluation Tracking Form if deemed appropriate to develop a plan of action. The faculty implement an appropriate correction plan where indicated. Feedback to the complainant would be by phone, letter or email.
 - b) Complaints regarding clinical education, preparedness, competence, safety, etc. will be forwarded by the Program Director to the Director of Clinical Education (DCE) to investigate. If indicated, the DCE employs the PTA Program Evaluation Tracking Form. The DCE will make a formal report back to the Program Director at the department meeting. Changes are implemented as deemed appropriate. Feedback to the complainant would be by phone, letter or email.
 - c) Complaints regarding sexual harassment or discrimination will be referred to the campus official responsible for overseeing these complaints (Director of Human Resources) by the Program Director. The complaint would be addressed by institutional protocol with records maintained by the Director of Human Resources.
 - d) The Associate Dean of Academic Affairs will address complaints regarding the Program Director.
 - e) Complaints received by the program will be brought to the Advisory Committee when appropriate. Committee recommendations are incorporated into the plan.

3. **Resolution:** The complainant's issue may be addressed by phone, email, letter, or in person depending on the nature of the complaint.

4. A record is maintained of the disposition of those complaints in the Program Director's office. Exception: complaints regarding the Program Director will be maintained in the Associate Dean of Academic Affairs office.

5. The complaint tracking form is used to keep track of complaints and program response to those complaints.

6. **Complaints Not Covered by this Procedure:** Students are advised of the campus complaint procedure in the College's Student Handbook regarding discrimination. This procedure is not intended for complaints of this nature and students should follow the College guidelines.

Responsible: Program Director, Other Individuals Involved: DCE, Associate Dean of Academic Affairs, Advisory Committee

NONDISCRIMINATION POLICY

Purpose: To inform students and clinicians that the PTA Program, faculty, clinical faculty and students must follow the nondiscrimination policy of Herkimer College in all areas of operation.

College Policy: Discrimination and Harassment Policy

Herkimer College expressly prohibits any act of discrimination or harassment that is based on race, color, gender, age, creed, religion, national origin, marital status, disability, or any other characteristic protected by federal or state law.

Harassment is a form of discrimination and is defined as any repeated or unwanted words, gestures, or actions toward another person that are derogatory in nature, that call attention inappropriately to any of the characteristics listed above, that are offensive or objectionable to the recipient, that cause the recipient discomfort or humiliation, are intimidating, hostile or offensive or that unreasonably interfere with the recipient's educational or job performance.

Harassment and discrimination are behaviors that are unethical, unprofessional and unacceptable; Herkimer College will not tolerate discrimination or harassment of any kind. Herkimer College has the duty to protect its students and employees from intimidating behaviors that may constitute illegal forms of discrimination or harassment and detract from the quality of work and study at the College.

Program Statement: the Herkimer College PTA Program and faculty adhere to the College's Discrimination and Harassment Policy. Discrimination or harassment is unethical, unprofessional and unacceptable. In this program, all communities (educators and students), must behave with respect and in a nonjudgmental manner with all persons in and out of class and while on clinical assignments.

Procedure:

1. Students: Familiarize yourself with the College's nondiscrimination policies, which can be found in the student handbook. The college has the nondiscrimination statement on the front cover of the printed catalog and on the web version of the catalog..
2. Clinicians: The nondiscrimination policy statement is on the working agreement between your facility and the College.
3. Program Applicants: The nondiscrimination policy statement appears on the program web page above the catalog link.
4. The DCE has the nondiscrimination discussion in FS 135 – First Year Seminar for the PTA.
5. Program faculty include the nondiscrimination statement in all course syllabi.
6. The DCE has this nondiscrimination statement in the working agreements with her clinical sites "By this agreement, both the host agency and Herkimer County Community College assure that students will be accepted, assigned to jobs and otherwise treated without regard to sex, race, color, national origin and handicap."
7. The DCE completes and signs the "Practicum/Internship Nondiscrimination Agreement, has the student sign and the off-site supervisor sign the "Practicum/Internship Nondiscrimination Agreement".

8. Students should notify the DCE if they think they've been discriminated against while on a clinical. Notification must be made in writing and on a timely basis. In addition to making proper notification, students need to follow College procedure as delineated in the Student Handbook to pursue their claim of discrimination further.
9. Students should follow the process delineated in the College student handbook if they think they've been discriminated against or think they've witnessed a hate crime on campus.

Responsible: All

NPTE-PTA Test Content Outline, effective January 2013

This test is designed to measure whether or not an examinee has the requisite knowledge required of entry-level physical therapist assistants working under the supervision of a physical therapist. The focus is on the **clinical application** of knowledge, concepts, and principles necessary for the provision of **safe and effective patient care** consistent with the principles of best practice.

	# Items Target (Acceptable Range)	Cardiovascular/ Pulmonary & Lymphatic Systems 16.7% Target (Acceptable Range)	Musculo-skeletal System 26.0% Target (Acceptable Range)	Neuro-muscular & Nervous Systems 22.0% Target (Acceptable Range)	Other Systems (14.7%)					
					Integu-mentary System 4.7% Target (Acceptable Range)	Metabolic & Endocrine Systems 4.0% Target (Acceptable Range)	Gastro-intestinal System 1.3% Target (Acceptable Range)	Genito-urinary System 1.3% Target (Acceptable Range)	System Interactions 3.3% Target (Acceptable Range)	
Physical Therapy Data Collection (20.7%)	31 (28-33)	7 (6-7)	13 (12-13)	9 (8-10)	2 (2-3)	0	0	0	0	
Diseases/Conditions that Impact Effective Treatment (28.0%)	42 (39-48)	8 (7-8)	11 (10-11)	10 (10-11)	2 (2-3)	4 (4-5)	1 (1-2)	1 (1-2)	5 (4-6)	
Interventions (30.7%)	46 (43-51)	10 (10-11)	15 (15-17)	14 (13-14)	3 (2-3)	2 (1-2)	1 (1-2)	1 (1-2)	0	
		25 (23-26)	39 (37-41)	33 (31-35)	22 (19-30)					
Non-System Domains (20.7%)										
Equipment & Devices; Therapeutic Modalities (14.7%)		<p>Note that this blueprint covers important entry-level knowledge areas that are reasonably tested using well-constructed multiple-choice items; some important areas are excluded because they cannot be adequately assessed in a multiple-choice format, are better assessed through other elements of the licensing process, are not specific to the scope of work of physical therapist assistants, or assess standards that might vary substantially across situations or practice locations. In addition, some important knowledge areas that are not linked to specific body systems and are not explicitly mentioned in the content outline (e.g., communications skills, teaching and learning techniques) are encompassed by multiple knowledge areas that are included in the content outline and are represented in test content to a greater extent than is apparent from this outline. Feedback on the candidates' performance will be provided for each knowledge area shown in boldface type. Percentages reflect the relative weights within knowledge areas.</p>								
Equipment & Devices	10 (9-11)									22 (20-24)
Therapeutic Modalities	12 (11-13)									
Safety & Protection; Professional Responsibilities; Research (6.0%)		<p>Note that this blueprint covers important entry-level knowledge areas that are reasonably tested using well-constructed multiple-choice items; some important areas are excluded because they cannot be adequately assessed in a multiple-choice format, are better assessed through other elements of the licensing process, are not specific to the scope of work of physical therapist assistants, or assess standards that might vary substantially across situations or practice locations. In addition, some important knowledge areas that are not linked to specific body systems and are not explicitly mentioned in the content outline (e.g., communications skills, teaching and learning techniques) are encompassed by multiple knowledge areas that are included in the content outline and are represented in test content to a greater extent than is apparent from this outline. Feedback on the candidates' performance will be provided for each knowledge area shown in boldface type. Percentages reflect the relative weights within knowledge areas.</p>								
Safety & Protection	4 (3-4)									9 (7-10)
Professional Responsibilities	3 (2-3)									
Research & Evidence-Based Practice	2 (2-3)									
Total		150								

**NPTE-PTA Content Outline
(List View)**

Domains of Practice (Organized by Content Areas)	# Items Target (Acceptable Range)
Physical Therapy Data Collection	31 (28-33)
Cardiovascular/Pulmonary & Lymphatic Systems	7 (6-7)
Musculoskeletal System	13 (12-13)
Neuromuscular & Nervous Systems	9 (8-10)
Integumentary System	2 (2-3)
Diseases/Conditions the Impact Effective Treatment	42 (39-48)
Cardiovascular/Pulmonary & Lymphatic Systems	8 (7-8)
Musculoskeletal System	11 (10-11)
Neuromuscular & Nervous Systems	10 (10-11)
Integumentary System	2 (2-3)
Metabolic & Endocrine Systems	4 (4-5)
Gastrointestinal System	1 (1-2)
Genitourinary System	1 (1-2)
System Interactions	5 (4-6)
Interventions	46 (43-51)
Cardiovascular/Pulmonary & Lymphatic Systems	10 (10-11)
Musculoskeletal System	15 (15-17)
Neuromuscular & Nervous Systems	14 (13-14)
Integumentary System	3 (2-3)

Domains of Practice (Organized by Content Areas)	# Items Target (Acceptable Range)
Interventions (continued)	
Metabolic & Endocrine Systems	2 (1-2)
Gastrointestinal System	1 (1-2)
Genitourinary System	1 (1-2)
Equipment & Devices; Therapeutic Modalities	22 (20-24)
Equipment & Devices	10 (9-11)
Therapeutic Modalities	12 (11-13)
Safety & Protection; Professional Responsibilities; Research	9 (7-10)
Safety & Protection	4 (3-4)
Professional Responsibilities	3 (2-3)
Research & Evidence-Based Practice	2 (2-3)

Domains of Practice (Organized by Systems)	# Items Target (Acceptable Range)
Cardiovascular/Pulmonary & Lymphatic Systems	25 (23-26)
Musculoskeletal System	39 (37-41)
Neuromuscular & Nervous Systems	33 (31-35)
Other Systems (Integumentary, Metabolic & Endocrine Systems, Gastrointestinal System, Genitourinary System, System Interactions)	22 (19-30)

**PHYSICAL THERAPIST ASSISTANT
LICENSURE/CERTIFICATION EXAMINATION
DETAILED EXAMINATION BLUEPRINT DESCRIPTIONS**

CARDIOVASCULAR/PULMONARY & LYMPHATIC SYSTEMS

Physical Therapy Data Collection. This category refers to knowledge of the types and applications of cardiovascular/pulmonary and lymphatic systems tests/measures, including outcome measures, according to current best evidence. The category includes the reaction of the cardiovascular/pulmonary and lymphatic systems to tests/measures and the mechanics of body movement as related to the cardiovascular/pulmonary and lymphatic systems. Information covered in these areas supports appropriate and effective patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Cardiovascular/pulmonary systems tests/measures, including outcome measures, and their applications according to current best evidence
- Anatomy and physiology of the cardiovascular/pulmonary systems as related to tests/measures
- Movement analysis as related to the cardiovascular/pulmonary systems (e.g., rib cage excursion)

Diseases/Conditions that Impact Effective Treatment. This category refers to the essential scientific principles and knowledge of diseases/conditions that serve as the foundation for understanding the involvement of the cardiovascular/pulmonary and lymphatic systems in the treatment of patients/clients for rehabilitation, health promotion, and performance across the lifespan.

- Cardiovascular/pulmonary systems diseases/conditions and their pathophysiology to carry out the established plan of care
- Lymphatic system diseases/conditions and their pathophysiology to carry out the established plan of care
- Nonpharmacological medical management of the cardiovascular/pulmonary systems (e.g., diagnostic imaging, laboratory test values, other medical tests, surgical procedures)
- Pharmacological management of the cardiovascular/pulmonary systems
- Nonpharmacological medical management of the lymphatic system (e.g., diagnostic imaging, laboratory test values, other medical tests, surgical procedures)

Interventions. This category refers to cardiovascular/pulmonary and lymphatic systems interventions (including types, applications, responses, and potential complications), according to current best evidence, as well as the impact on the cardiovascular/pulmonary and lymphatic systems of interventions performed on other systems in order to support patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Cardiovascular/pulmonary systems physical therapy interventions and their applications for rehabilitation, health promotion, and performance according to current best evidence
- Anatomy and physiology of the cardiovascular/pulmonary systems as related to physical therapy interventions, daily activities, and environmental factors
- Secondary effects or complications from physical therapy and medical interventions on the cardiovascular/pulmonary systems

- Secondary effects or complications on the cardiovascular/pulmonary systems from physical therapy and medical interventions used on other systems
- Lymphatic system physical therapy interventions and their applications for rehabilitation, health promotion, and performance according to current best evidence
- Anatomy and physiology of the lymphatic system as related to physical therapy interventions, daily activities, and environmental factors
- Secondary effects or complications from physical therapy and medical interventions on the lymphatic system
- Secondary effects or complications on the lymphatic system from physical therapy and medical interventions used on other systems

MUSCULOSKELETAL SYSTEM

Physical Therapy Data Collection. This category refers to knowledge of the types and applications of musculoskeletal system tests/measures, including outcome measures, according to current best evidence. The category includes the reaction of the musculoskeletal system to tests/measures and the mechanics of body movement as related to the musculoskeletal system. Information covered in these areas supports appropriate and effective patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Musculoskeletal system tests/measures, including outcome measures, and their applications according to current best evidence
- Anatomy and physiology of the musculoskeletal system as related to tests/measures
- Movement analysis as related to the musculoskeletal system
- Joint biomechanics and their applications

Diseases/Conditions that Impact Effective Treatment. This category refers to the essential scientific principles and knowledge of diseases/conditions that serve as the foundation for understanding the involvement of the musculoskeletal system in the treatment of patients/clients for rehabilitation, health promotion, and performance across the lifespan.

- Muscular and skeletal diseases/conditions and their pathophysiology to carry out the established plan of care
- Connective tissue diseases/conditions and their pathophysiology to carry out the established plan of care
- Nonpharmacological medical management of the musculoskeletal system (e.g., diagnostic imaging, laboratory test values, other medical tests, surgical procedures)
- Pharmacological management of the musculoskeletal system

Interventions. This category refers to musculoskeletal system interventions (including types, applications, responses, and potential complications), according to current best evidence, as well as the impact on the musculoskeletal system of interventions performed on other systems in order to support patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Musculoskeletal system physical therapy interventions and their applications for rehabilitation, health promotion, and performance according to current best evidence
- Anatomy and physiology of the musculoskeletal system as related to physical therapy interventions, daily activities, and environmental factors
- Secondary effects or complications from physical therapy and medical interventions on the musculoskeletal system
- Secondary effects or complications on the musculoskeletal system from physical therapy and medical interventions used on other systems

NEUROMUSCULAR & NERVOUS SYSTEMS

Physical Therapy Data Collection. This category refers to knowledge of the types and applications of neuromuscular/nervous systems tests/measures, including outcome measures, according to current best evidence. The category includes the reaction of the neuromuscular/nervous systems to tests/measures and the mechanics of body movement as related to the neuromuscular/nervous systems. Information covered in these areas supports appropriate and effective patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Neuromuscular/nervous systems tests/measures, including outcome measures, and their applications according to current best evidence
- Anatomy and physiology of the neuromuscular/nervous systems as related to tests/measures
- Movement analysis as related to the neuromuscular/nervous systems

Diseases/Conditions that Impact Effective Treatment. This category refers to the essential scientific principles and knowledge of diseases/conditions that serve as the foundation for understanding the involvement of the neuromuscular/nervous systems in the treatment of patients/clients for rehabilitation, health promotion, and performance across the lifespan.

- Neuromuscular/nervous systems (CNS, PNS, ANS) diseases/conditions and their pathophysiology to carry out the established plan of care
- Nonpharmacological medical management of the neuromuscular/nervous systems (e.g., diagnostic imaging, laboratory test values, other medical tests, surgical procedures)
- Pharmacological management of the neuromuscular/nervous systems

Interventions. This category refers to neuromuscular/nervous systems interventions (including types, applications, responses, and potential complications), according to current best evidence, as well as the impact on the neuromuscular/nervous systems of interventions performed on other systems in order to support patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Neuromuscular/nervous systems physical therapy interventions and their applications for rehabilitation, health promotion, and performance according to current best evidence
- Anatomy and physiology of the neuromuscular/nervous systems as related to physical therapy interventions, daily activities, and environmental factors
- Secondary effects or complications from physical therapy and medical interventions on the neuromuscular/nervous systems
- Secondary effects or complications on the neuromuscular/nervous systems from physical therapy and medical interventions used on other systems
- Motor control as related to neuromuscular/nervous systems physical therapy interventions
- Motor learning as related to neuromuscular/nervous systems physical therapy interventions

INTEGUMENTARY SYSTEM

Physical Therapy Data Collection. This category refers to knowledge of the types and applications of integumentary system tests/measures, including outcome measures, according to current best evidence. The category includes the reaction of the integumentary system to tests/measures and the mechanics of body movement as related to the integumentary system. Information covered in these areas supports appropriate and effective patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Integumentary system tests/measures, including outcome measures, and their applications according to current best evidence
- Anatomy and physiology of the integumentary system as related to tests/measures
- Movement analysis as related to the integumentary system (e.g., friction, shear, pressure, and scar mobility)

Diseases/Conditions that Impact Effective Treatment. This category refers to the essential scientific principles and knowledge of diseases/conditions that serve as the foundation for understanding the involvement of the integumentary system in the treatment of patients/clients for rehabilitation, health promotion, and performance across the lifespan.

- Integumentary system diseases/conditions and their pathophysiology to carry out the established plan of care
- Nonpharmacological medical management of the integumentary system (e.g., diagnostic imaging, laboratory test values, other medical tests, surgical procedures)
- Pharmacological management of the integumentary system

Interventions. This category refers to integumentary system interventions (including types, applications, responses, and potential complications), according to current best evidence, as well as the impact on the integumentary system of interventions performed on other systems in order to support patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Integumentary system physical therapy interventions and their applications for rehabilitation, health promotion, and performance according to current best evidence
- Anatomy and physiology of the integumentary system as related to physical therapy interventions, daily activities, and environmental factors
- Secondary effects or complications from physical therapy and medical interventions on the integumentary system
- Secondary effects or complications on the integumentary system from physical therapy and medical interventions used on other systems

METABOLIC & ENDOCRINE SYSTEMS

Diseases/Conditions that Impact Effective Treatment. This category refers to the essential scientific principles and knowledge of diseases/conditions that serve as the foundation for understanding the involvement of the metabolic and endocrine systems in the treatment of patients/clients for rehabilitation, health promotion, and performance across the lifespan.

- Metabolic and endocrine systems diseases/conditions and their pathophysiology to carry out the established plan of care
- Nonpharmacological medical management of the metabolic and endocrine systems (e.g., diagnostic imaging, laboratory test values, other medical tests, surgical procedures)
- Pharmacological management of the metabolic and endocrine systems

Interventions. This category refers to metabolic and endocrine systems interventions (including types, applications, responses, and potential complications), according to current best evidence, as well as the impact on the metabolic and endocrine systems of interventions performed on other systems in order to support patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Metabolic and endocrine systems physical therapy interventions and their applications for rehabilitation, health promotion, and performance according to current best evidence
- Anatomy and physiology of the metabolic and endocrine systems as related to physical therapy interventions, daily activities, and environmental factors
- Secondary effects or complications from physical therapy and medical interventions on the metabolic and endocrine systems
- Secondary effects or complications on the metabolic and endocrine systems from physical therapy and medical interventions used on other systems

GASTROINTESTINAL SYSTEM

Diseases/Conditions that Impact Effective Treatment. This category refers to the essential scientific principles and knowledge of diseases/conditions that serve as the foundation for understanding the involvement of the gastrointestinal system in the treatment of patients/clients for rehabilitation, health promotion, and performance across the lifespan.

- Gastrointestinal system diseases/conditions and their pathophysiology to carry out the established plan of care
- Nonpharmacological medical management of the gastrointestinal system (e.g., diagnostic imaging, laboratory test values, other medical tests, surgical procedures)
- Pharmacological management of the gastrointestinal system

Interventions. This category refers to gastrointestinal system interventions (including types, applications, responses, and potential complications), according to current best evidence, as well as the impact on the gastrointestinal system of interventions performed on other systems in order to support patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Gastrointestinal system physical therapy interventions and their applications for rehabilitation and health promotion according to current best evidence (e.g., positioning for reflux prevention, bowel programs)
- Anatomy and physiology of the gastrointestinal system as related to physical therapy interventions, daily activities, and environmental factors
- Secondary effects or complications from physical therapy and medical interventions on the gastrointestinal system
- Secondary effects or complications on the gastrointestinal system from physical therapy and medical interventions used on other systems

GENITOURINARY SYSTEM

Diseases/Conditions that Impact Effective Treatment. This category refers to the essential scientific principles and knowledge of diseases/conditions that serve as the foundation for understanding the involvement of the genitourinary system in the treatment of patients/clients for rehabilitation, health promotion, and performance across the lifespan.

- Genitourinary system diseases/conditions and their pathophysiology to carry out the established plan of care
- Nonpharmacological medical management of the genitourinary system (e.g., diagnostic imaging, laboratory test values, other medical tests, surgical procedures)
- Pharmacological management of the genitourinary system

Interventions. This category refers to genitourinary system interventions (including types, applications, responses, and potential complications), according to current best evidence, as well as the impact on the genitourinary system of interventions performed on other systems in order to support patient/client management for rehabilitation, health promotion, and performance across the lifespan.

- Genitourinary system physical therapy interventions and their applications for rehabilitation and health promotion according to current best evidence (e.g., bladder programs, biofeedback, pelvic floor retraining)
- Anatomy and physiology of the genitourinary system as related to physical therapy interventions, daily activities, and environmental factors
- Secondary effects or complications from physical therapy and medical interventions on the genitourinary system
- Secondary effects or complications on the genitourinary system from physical therapy and medical interventions used on other systems

SYSTEM INTERACTIONS

Diseases/Conditions that Impact Effective Treatment. This category refers to the essential scientific principles and knowledge of diseases/conditions that serve as the foundation for understanding system interactions in the treatment of patients/clients for rehabilitation, health promotion, and performance across the lifespan.

- Diseases/conditions where the primary impact is on more than one system to carry out the established plan of care
- Impact of comorbidities/coexisting conditions on patient/client management (e.g., diabetes and hypertension, obesity and arthritis, hip fracture and dementia)
- Psychological and psychiatric conditions that impact patient/client management (e.g., depression, schizophrenia)
- Nonpharmacological medical management of multiple systems (e.g., diagnostic imaging and other medical tests, surgical procedures)
- Pharmacological management of multiple systems, including polypharmacy

EQUIPMENT & DEVICES

This category refers to the different types of equipment and devices, use requirements, and/or contextual determinants, according to current best evidence, as well as any other influencing factors involved in the application of equipment and devices, in order to support patient/client treatment and management decisions for rehabilitation, health promotion, and performance across the lifespan.

- Assistive and adaptive devices
- Prosthetic devices
- Protective, supportive, and orthotic devices

THERAPEUTIC MODALITIES

This category refers to the different types of therapeutic modalities, use requirements, and/or contextual determinants, according to current best evidence, as well as any other influencing factors involved in the application of therapeutic modalities, in order to support patient/client treatment and management decisions for rehabilitation, health promotion, and performance across the lifespan.

- Thermal modalities
- Iontophoresis
- Electrotherapy modalities, excluding iontophoresis
- Phonophoresis
- Ultrasound modalities, excluding phonophoresis
- Mechanical modalities (e.g., mechanical motion devices, traction devices)
- Biofeedback
- Electromagnetic radiation (e.g., diathermy)
- Pneumatic compression modalities

SAFETY & PROTECTION

This category refers to the critical issues involved in patient/client safety and protection and the responsibilities of health-care providers to ensure that patient/client management and health-care decisions take place in a secure environment.

- Factors influencing safety and injury prevention
- Function, implications, and precautions related to intravenous lines, tubes, catheters, and monitoring devices
- Emergency preparedness (e.g., CPR, first aid, disaster response)
- Infection control procedures (e.g., standard/universal precautions, isolation techniques, sterile technique)
- Signs/symptoms of physical, sexual, and psychological abuse and neglect

PROFESSIONAL RESPONSIBILITIES

This category refers to the responsibilities of health-care providers to ensure that patient/client management and health-care decisions take place in a trustworthy environment.

- Standards of documentation
- Patient/client rights (e.g., ADA, IDEA, HIPAA)
- Human resource legal issues (e.g., OSHA, sexual harassment)
- Roles and responsibilities of physical therapist assistants in relation to physical therapists and other health-care professionals
- Roles and responsibilities of other health-care professionals and support staff

RESEARCH & EVIDENCE-BASED PRACTICE

This category refers to the knowledge of basic research methodology and data collection techniques necessary for interpretation of information sources and practice research to support patient/client management fundamental to evidence-based practice.

- Knowledge of basic research concepts
- Knowledge of data collection techniques (e.g., surveys, direct observation)

Informed Consent

Assumption of Risk and Release

(Page 1 of 4)

Informed consent and release executed by _____, residing at _____

_____, to Herkimer College, Herkimer, New York.

I wish to be a participant in the Physical Therapist Assistant Program of Herkimer College.

I understand that the Physical Therapist Assistant Program will include academic, laboratory and clinical work performed in the classroom, laboratory, hospital and other clinical facilities including clinical observations and will include direct care or exposure to clients with a variety of illnesses and diseases and will include the handling of and/or contact with human bodily fluids and tissues. I, therefore, understand that I may or will be exposed to disease-carrying bacteria and microorganisms. I understand that I may or will be exposed to various chemicals in the classroom, laboratory, hospital and other clinical facilities including clinical observations. Students will be taught personal safety practices and procedures to minimize their exposure to harmful pathogens or other agents. I understand that failure to observe the safety precautions that are taught during class when on clinical affiliations or observations could cause me to be exposed to potentially harmful pathogens or other agents.

I understand that I will be required to attend several fieldtrips/workshops that will be arranged for by the faculty. I may be required to pay a registration fee for some of these fieldtrips/workshops. I understand that I will be required to set up and attend several off-campus observations at clinical facilities in the communities surrounding Herkimer College. It will be my responsibility to arrange transportation for these activities.

I also understand that as a student in the Physical Therapist Assistant program, I consent to participate in human subject demonstrations and studies in the classroom, laboratory and clinical facilities as part of the educational process. As a student in this program I understand and consent to having my photograph taken, videotaping or audio taping while in the classroom, laboratory, hospital and other clinical facilities including clinical observations.

Participation in said activities in the Physical Therapist Assistant program necessitates the wearing of appropriate and specific clothing. Laboratory clothing for males includes shorts, T-shirts and sneakers; females include shorts, halter or bathing suits and sneakers. Clinical clothing may include laboratory jacket, shirts, identification tags, professional slacks and shoes.

Informed Consent

(Page 2 of 4)

I acknowledge that the profession of physical therapist assistant involves the transferring and lifting of patients. Students will be taught proper body mechanics during their course of instruction. I understand that incorrect use of body mechanics could result in injury to my back or cause an aggravation of a pre-existing condition.

As a physical therapist assistant student, I will be required to provide immunization and health information to the DCE prior to each clinical affiliation. Some clinical facilities may make additional demands for testing which could include two or more mantoux tests, drug testing and background investigation. In order to become certified as a physical therapist assistant in New York State, I acknowledge that I must be of good moral character as determined by the State Education Department.

In consideration of being permitted to participate in the Herkimer College Program, I, the undersigned, in full recognition and appreciation of the dangers and hazards inherent in the health care field and in particular in the medical facilities where I may be present during my participation in the program, do hereby agree to assume all the risks and responsibilities surrounding my participation in this program or any independent activities undertaken as an adjunct thereto; and further, I do for myself, my heirs, and personal representatives hereby agree to defend, hold harmless, indemnify, and release, and forever discharge Herkimer College and any and all of its officers, agents and employees from and against any and all claims, demands, and actions, or causes of action, on account of damage to personal property, or personal injury, disease, or death which may result to me from my participation in this program and my exposure to the risks inherent in the program.

Informed Consent Student Page

(Page 3 of 4)

I hereby certify that I have read the preceding two pages of this document, that I am fully familiar with the contents of this document, and that I fully understand its terms and provisions. Any questions that I have about the Physical Therapist Assistant Program and the contents of this document have been fully explained to my satisfaction.

In witness whereof, I have caused this release to be executed this

_____ day of _____, 20____.

Signature of Parent/Guardian
(if student is under 18 years of age)

Student Signature

Subscribed to and sworn before me on the day and year written above.

_____, Notary Public

(Seal)

Informed Consent Faculty Page

(Page 4 of 4)

I, _____, a faculty member of the Business, Health, Science, & Technology Division of Herkimer College, do hereby certify that I reviewed and discussed the Physical Therapist Assistant Program and the contents of this document with

_____ the student named in the previous page. I am satisfied that said student understands the risks inherent in the program, that said student has been informed and consented to participate in human subject demonstrations and studies in the classroom, laboratory and clinical facilities, and that said student knowingly and voluntarily signed this document, which was done in my presence.

_____, Faculty Signature

Subscribed to and sworn before me on the day and year written above.

_____, Notary Public

(Seal)

SECTION II: FIELDWORK

NEW TERMINOLOGY

APTA - American Physical Therapy Association

DCE - Director of clinical education

The individual at the academic institution (HERKIMER COLLEGE), who is responsible for managing and coordinating the clinical education program.

CCCE - Center Coordinator of Clinical Education

The individual who administers, manages, and coordinates clinical instructor assignments and learning activities at the clinical education (fieldwork) site.

CI - Clinical Instructor

An individual at the clinical education (fieldwork) site, who directly instructs and supervises the student during their clinical learning experience.

CPI - Clinical Performance Instrument

The evaluation tool consisting of 20 criteria that was developed by the APTA and is used to assess the PTA student's performance.

PT 206 - Clinical Fieldwork I

Clinical Fieldwork I begins the fieldwork series for the PTA student. Five weeks (200 hours) of full-time clinical experience are required. The student now has the opportunity to interact with patients and professional staff in a health care facility. This placement allows the student to gain experience in the skilled application of techniques learned in PT 121, PT 131, PT 132, PT 141, PT 142 and PT 143, including ambulation and transfer training, modality application and therapeutic exercise. Prerequisites: PT 121, PT 131, PT 132, PT 141, PT 142, PT 143, SC 253 and SC 254. Student must be First Aid and CPR certified and provide all required CPR, First Aid, and health record documentation.

PT 255 - Clinical Fieldwork II

Five weeks (200 hours) of full-time clinical experience are included in Clinical Fieldwork II. During this second affiliation, the student is given the opportunity to refine treatment skills and, depending on the facility assigned, acquire alternate treatment protocols. This level allows the student to gain experience in the application of skills and techniques learned in PT 251 and PT 252 for the Neuromuscular and Musculoskeletal practice patterns. Prerequisite: successful completion PT 251, and PT 252. Student must be First Aid and CPR certified and provide all required CPR, First Aid, and health record documentation.

PT 280 - Clinical Fieldwork III

The student has now gained the academic background to complete his/her degree. Six weeks (240 hours) of full-time clinical experience are included in Clinical Fieldwork III. During this final affiliation, the student is given more exposure to alternate treatment protocols. They will refine treatment skills learned in the final semester, as well as become more efficient with documentation and interventions. Prerequisite: successful completion of all other degree requirements and a minimum of 2.5 GPA. Student must be CPR certified and provide all required CPR, First Aid, and health record documentation.

WELCOME

Clinical Fieldwork

What is it?

Supervised clinical fieldwork is a very vital part of the PTA Program at Herkimer College. Fieldwork is designed to provide you with the unique experience of working in a clinical facility, under close supervision of a Physical Therapist and/or Physical Therapist Assistant.

There are three (3) levels of fieldwork experience that are incorporated into the PTA Program at HERKIMER COLLEGE. Participation in each level of fieldwork is dependent on the student successfully completing the prerequisites.

PT 206 follows the completion of your freshman courses

PT 255 is during your senior year

PT 280 follows the completion of all academic requirements

Each course is a minimum of five weeks of full-time (40 hours a week) fieldwork and must total 200 hours (six weeks/240 hours for PT 280).

- * **The student is responsible for registering for the proper courses and for fulfilling all degree requirements as outlined in the College Catalog.**
- * **Prerequisites must be successfully completed PRIOR to registering for any of the fieldwork experiences.**

Why?

This allows you:

- To apply skills you have learned in the lab at the College
- To interact with professionals and patients
- To learn new techniques and theories that are continually being developed in the health care field

What is expected?

To gain the most from your fieldwork experiences, you need to demonstrate enthusiasm and initiative. Regard these experiences as an important, critical component of your education and act responsibly.

Behaviors that can cause CI's to question clinical competence:

Inadequate Knowledge and Skills - Behaviors that demonstrates inadequate command of the scientific basis of physical therapy, the inability to perform physical therapy procedures, or the inability to apply the knowledge and skills to the safe and effective identification and management of patient problems.

Poor Communication - Verbal and nonverbal behaviors that interfere with the transmission or reception of information between the student and the CIs, patients, or others.

Unprofessional Behavior - Behaviors and characteristics that disrupt the delivery of services or demonstrate an inability to meet the demands and expectations of the work environment. This includes personal behaviors to the extent that they interfere with the student's ability to self-evaluate and perform his/her work responsibilities.

GETTING STARTED

Things you will need:

Folder

Each student will give the DCE a firm cardboard folder with 2 horizontal pockets (not a five-star folder) labeled clearly with the student's name by the due date.

Name Tag

Students are responsible for obtaining his/her own name tag prior to beginning their fieldwork experience. Name tags are to be shown to the DCE by the given deadline.

Sample tags follow:

EITHER

FIRST NAME, LAST NAME
Physical Therapist Assistant Student

Jane Doe
Physical Therapist Assistant Student

OR

FIRST NAME, LAST NAME
PTA Student

Bill Smith
PTA Student

CPR Certification & First Aid

Students are responsible for getting and maintaining valid CPR certification throughout their clinical fieldwork. Each student will give the DCE a copy of his/her cards (front and back) showing the expiration date to keep on file.

It is the student's individual responsibility to provide proof of current certification to the DCE prior to fieldwork.

Basic Evaluation Kit

Students must purchase and show DCE the Basic Evaluation Kit for Students of Physical Therapy.

MEDICAL INFORMATION

Herkimer County Community College PTA Program Required Information for Fieldwork Participation

E-mail Address: _____ Name: _____

Folder: _____ Tag: _____ Handbag: _____ Generic Abilities: _____

Home Address: _____ Alternate/Temporary Address: _____

Home Phone #: _____ Alternate/Temporary Phone #: _____

OSHA Training Date: _____

Hepatitis B: Consent / Refusal Dates: _____

Chicken Pox: YES / NO Vaccine Date: _____

Immunizations: MMR (Need 2): _____ Peds records: OPV/IPV: _____
 Flu shot _____ Tdap: _____

	PT 206 Dates	PT 207 Dates	PT 208 Dates
General information form			
Student profile form			
First Aid Card			
CPR Card			
Physical Exam (yearly)			
PPD/Mantoux (yearly)			
Tetanus (good for 10 yrs)			
Insurance Card			
Cleared for Fieldwork			
Site Placement			
Letter of Introduction			
Clinical Instructor			
CPI – Site			
CPI – Student			
Clinical Exp. Assessment			
Orientation/non discrim			
Assignment			
Journal			
Final Grade			

CPR and FIRST AID POLICY

Purpose: To ensure that students are CPR and First Aid certified for the duration of each clinical experience.

Procedure: The student must provide evidence of his or her CPR and First Aid certification to the DCE prior to commencing each clinical affiliation. The DCE sets a due date prior to the clinical experience and determines when to receive a copy of the cards. The DCE notifies the students of the due date.

Not sure what you need?

You are responsible for providing the DCE with documentation of the following:

CPR/FIRST AID

Emergency action steps, rescue breathing, first aid for choking, recognition and prevention of heart attacks and CPR for ADULT, CHILD AND INFANT victims.

Provides the participant with the knowledge and skills necessary in an emergency to help sustain life, reduce pain and minimize the consequences of injury or sudden illness until professional help arrives. This must be American Heart Association.

PHYSICAL

Get the proper form from the DCE for your regular health care provider to complete. This must be done after July 1st each year.

IMMUNIZATIONS

Include documentation of: MMR, Rubella, Rubeola, Tetanus, Hepatitis B, Influenza, Chicken Pox or Varicella vaccination, OPV/IPV/DTP. If documentation is not available, Titer may be required. Check with DCE and specific site requirements.

PPD/MANTOUX TEST

You must have a prescription for this test. Check the rolling files to find out the requirements of your particular site. Some require within 3 months maximum.

INSURANCE

You must have health insurance coverage while completing your clinical affiliation. It does not matter whose policy you are under (your own, your parents, spouse). Ask the DCE about the Student Policy Flyer if you need coverage.

Malpractice insurance will be charged on your account any semester you go on clinical fieldwork.

A copy of all documentation and cards must be on file with the DCE and they must be valid through the completion of your clinical affiliations for that year.

Remember to recertify before expiration date to avoid further time & expense.

**Herkimer College
PTA Program**

GENERAL INFORMATION

Student Name:

Permanent Address:

Temporary Address:

Permanent Phone #:

Temporary Phone #:

Email Address:

Previous Colleges or Universities Attended:

Degree:

Year:

Are you working while in school?
Where?

Yes / No
Doing what?

What are your hours?

How did you become interested in Physical Therapy?

What do you plan to do with your PTA degree?

Additional Comments:

**Herkimer College
PTA Program**

STUDENT PROFILE

Student Name: _____

Dates of Affiliation: _____

Address During Affiliation: _____

Phone Number During Affiliation: _____

Emergency Contact:

Name: _____

Relationship: _____

Address: _____

Phone: _____

Current Health Insurance: _____

Plan Number: _____

Describe any conditions (medical or otherwise) that may affect your ability to perform in the clinical that we need to be aware of:

Previous Work Experience:

Related to PT -

Unrelated to PT -

How many semesters have you completed in the PTA Program?

How do you learn best or how would you describe your learning style?

Briefly describe yourself - what would you like the clinical coordinator and/or CI to know about you as a person:

How many full time clinical affiliations have you had? (Please list including specialty and number of weeks).

Areas of special interest:

What are your specific objectives for this clinical education?

What are your clinical strengths?

What clinical skills would you like to upgrade during this affiliation?

How often do you prefer meeting with your clinical supervisor?

_____ Daily

_____ Scheduled or Needed

_____ Weekly

_____ Impromptu

How much outside reading and preparation for evaluation, Rx and progress do you expect to do?

_____ None

_____ 1-2 hours/evening

_____ During working hours

_____ 3 or more/week

_____ Other, please explain

CLINICAL AFFILIATION DRESS CODE

What is **appropriate** dress for my my clinical affiliation?

- ✓ You should wear professional dress; remember you are representing both your school and yourself.
- ✓ Nice shirts with collars, khakis, sneakers, if approved, scrubs, if applicable. Lab coats, if site requests you wear them. Always wear your name tag.
- ✓ Hair must be neat and clean, long hair should be restrained and away from the face in patient care areas. No extreme hair color.
- ✓ Beards and mustaches should be clean and neatly trimmed, or clean shaven (i.e. no 5 o'clock shadow).
- ✓ Fingernails should be clean and short in length. No artificial substances on nails other than unchipped clear, fresh nail polish. No extreme colors.
- ✓ Tattoos must be covered at all times.
- ✓ Jewelry: two pairs of small stud earrings, wedding ring set is ok.
- ✓ Perfumes/after shave should be light scents and used sparingly.
- ✓ General Hygiene – you must be professionally neat and clean, including oral hygiene.

What is **inappropriate** dress for my clinical affiliation?

- ✗ Any shirt with printed messages, logos or pictures/transfers that detract from a professional appearance, denim shirts, cropped (not full length) shirts, tank tops.
- ✗ Jeans, sweat pants, tight fitting or revealing slacks or pants, shorts, Capri pants, pants should fit around waist, not lower; no bright-colored or print-patterned pants.
- ✗ Exposed underwear or underwear lines.
- ✗ Mini skirts or short skirts, denim skirts.
- ✗ Footwear: open toe shoes, or heels, wooden clogs or platform sneakers.
- ✗ Hats, doo-rags.
- ✗ Underwear showing.
- ✗ Multiple rings.
- ✗ Obvious body piercing other than earrings.
- ✗ Exposed tattoos.
- ✗ Long or dangling earrings.
- ✗ Bracelets.
- ✗ Gum chewing.
- ✗ Cigarette odor on clothing, breath, hands, face.

Please abide by these rules. You must abide by guidelines of the facility you will be working with. Not abiding is grounds for a site to dismiss you for the day or send you home to change. Any missed time must be made up. Continual improper dress is a red flag and may be grounds for dismissal from a site if CI requests.

Additional Student Responsibilities

- 1)** Student must identify themselves to all patients as a Student Physical Therapist Assistant and wear their nametags. The patient has the ability to refuse to be treated by the Student PTA as per ethics in PT 121 Introduction to Rehabilitation, the APTA Standards of Ethical Conduct for the PTA, and in the Guide of Conduct of the PTA.
- 2)** Student must have sent their letter and called the facility in the timeline made by DCE.
- 3)** Student must do given assignments from DCE and student must do any additional assignments and in-services required by the site.
- 4)** Student must abide by dress code at facility.
- 5)** Student must maintain HIPAA confidentiality at all times.
- 6)** By contract, the clinical facility agrees to advise student as to how he/she should obtain emergency medical care if it is necessary during the affiliation.
- 7)** Each student must practice hand washing, use personal protective devices and use all safety precautions as taught in the program to ensure their personal safety on a clinical affiliation.
- 8)** Each student must follow the procedures for clinical safety (first aid, eyewash station, fire) as directed by their clinical facility.
- 9)** The student must bring with them their student medical handbag.

American Physical Therapy Association

TriAlliance Meeting with HCFA: SNF-PPS and Student Participation

9/13/99

On July 30, 1999, the Health Care Financing Administration (HCFA) issues a ruling that reads:

“A therapy student who is participating in field experience must also be under the “line of sight” level of supervision of the professional therapist. Even though these students may become licensed therapists within months of the field training portion of their school program, they are not licensed or certified for practice in an unsupervised status. Further, none of the minutes of therapy services provided by the students may be recorded on the MDS (minimum data set) as minutes of therapy received by the beneficiary. Medicare recognizes the cost associated with approved educational activities as a pass-through (see section 413.85).”

PART B and Student Reimbursement

On April 11, 2001 HCFA issued an official program memorandum to respond to inquiries regarding payment for the services rendered by students under Medicare Part B. The memorandum states that, “services performed by a student are not reimbursed under Medicare Part B.” Medicare has determined that students do not meet their definition of qualified practitioner. This policy affects clinical sites located in rehabilitation agencies, comprehensive outpatient rehabilitation facilities, private practice physical therapy offices, outpatient hospital departments, skilled nursing facilities Part B services and home health agencies Part B services. There has also been much discussion about the level of supervision required when a student is involved in providing services. It should be noted that under the Part A, the skilled nursing facilities Prospective Payment System allows student services to be counted toward rehabilitation minutes if provided under “line of sight” supervision. “Line of sight” supervision does not apply to Medicare Part B services, nor can minutes of treatment provided by the student be reimbursed. In private practice, Medicare requires that services be furnished by “employees of the therapy office and that those employees be supervised by the physical therapist.” Students are not usually employees, thus their services would not be reimbursed. APTA urged CMS (Centers for Medicare and Medicaid Services), formerly HCFA, to cover services provided by students in rehabilitation hospitals, but CMS has yet to issue their final regulations on the rehabilitation hospital prospective payment system. The essential message of the April 11 memorandum is that: NO services provided by a student are reimbursed under Medicare Part B regardless of the level of supervision, expertise, amount of didactic education, or any other circumstance. Why? It’s the law! Student health providers of *all* professions are excluded from Medicare’s definition of a qualified practitioner. Medicare will not make an exception for the physical therapist student.

Herkimer College

PTA Program Position Statement

Issue: Release of Annual Physical and Immunization Records

Description: The DCE of the PTA Program at Herkimer College must provide each clinical site that a student is scheduled to affiliate at a copy of the student's medical record (annual physical) and immunization record.

Position: The medical information is collected and updated annually. The DCE keeps the information locked in her file cabinet. Prior to each affiliation, the DCE/PTA Program Work Study photocopies the physical and immunization record (the individuals protected health information, PHI) and mail it with other forms to the student's assigned clinical site. Reasonable measures must be taken to protect the confidentiality of this information.

Recommendations:

1. The DCE will place a HIPAA policy statement in the Student Fieldwork Handbook.
2. The DCE will inform each student that access to their PHI will be necessary to allow the student to participate in clinical affiliations.
3. The DCE will ask each student to sign the Authorization for Release of Protected Health Information (PHI). If the student refuses to sign the Authorization form, the DCE will not place the student in a clinical affiliation nor release their PHI.
4. The DCE/Program Director/Student also recognizes that clinical affiliation requires the student to maintain confidential all information acquired during the clinical affiliation.
5. The DCE/Program Director/Work Study Student will take reasonable safeguards to protect the confidentiality of the individual's PHI (e.g. all files should be maintained in a confidential manner, in a locked drawer with restricted access).
6. Upon conclusion of the clinical affiliations, the DCE/Work Study Student should either return all PHI to the individual or appropriately dispose of such PHI (e.g. by shredding).

Date: May 6, 2004

**Herkimer College
PTA Program**

Authorization for Release of Protected Health Information

Information about you and your health is personal and Herkimer College is committed to protecting the privacy of such information. In addition, your personal health information (PHI) is, in many cases, protected from use and disclosure by both State and Federal law. As a result, the DCE will not send your PHI to a clinical affiliation unless you sign this form permitting the DCE to use your PHI for this purpose. Please carefully read this form and the information set forth below before signing. If you have any questions regarding what is set forth on this document, please contact the campus privacy official at salamyjr@herkimer.edu or the State University Privacy Officer at privacy@sunyadm.suny.edu.

Student Name: _____

Address: _____

Telephone #: _____(day) _____(eve)

_____ (cell)

I hereby authorize the DCE to collect, store and release information related to my medical record (annual physical and immunization record). By providing this authorization, I give permission to the DCE to send a copy of my medical record to each CCCE at every clinical affiliation that I am assigned to during the course of my enrollment in the Herkimer College PTA program. This authorization includes scheduled clinical affiliations during PT 206, PT 255 and PT 280 assignments and any special requests for health information from facilities for student field trips. I understand that I can rescind this authorization at any time thereby affecting future (but not past) affiliations and/or field trips. If not earlier rescinded by me, this authorization shall expire upon graduation from the PTA program.

Print Name of Student

Signature of Student

Date

**Herkimer College
PTA Program**

Refusal to Release Protected Health Information

Information about you and your health is personal and Herkimer College is committed to protecting the privacy of such information. In addition, your personal health information (PHI) is, in many cases, protected from use and disclosure by both State and Federal law. As a result, the DCE will not send your PHI to a clinical affiliation unless you sign the form which permits the DCE to use your PHI for this purpose.

Please carefully read this form and the information set forth below before signing.

Student Name: _____

Address: _____

Telephone #: _____(day) _____(eve)

_____ (cell)

I hereby **do not authorize** the DCE to collect, store or release information related to my medical record (annual physical and immunization record). By signing this refusal:

I understand that the DCE will not assign me to a clinical affiliation.

I understand that I will not be able to complete the PTA program at Herkimer College.

Print Name of Student

Signature of Student

Date

FIELDWORK PLACEMENT

Placement Considerations

All Students

All students are required to present proof of successful completion of prerequisites. Students who have not successfully completed prerequisites for Clinical Fieldwork will not be eligible to go out on their fieldwork assignments.

Clinical Fieldwork will include a variety of sites. An acute care, subacute care, or rehab hospital is *required* for at least one placement.

Due to the limited availability of local clinical sites, students enrolled in the PTA Program MUST be prepared to travel to participating facilities regardless of location. Be prepared to travel (drive greater than ½ hour from your home, or have a place to stay out of town) at least once and possibly twice for your fieldwork placements.

The student is responsible for securing transportation, room and board, as well as their related costs, during fieldwork.

It is to your benefit to vary your clinical experience to have a well-rounded resume.

You may want to plan your choices so that your final placement (PT 280) can be at a facility that is similar in type to that in which you see yourself employed. A number of our prior graduates have been hired for their first job at the site of their final Clinical Fieldwork.

Placements will not be made until all requirements are met. Students that do not have health/accident insurance in force on the due date of the preference sheets may submit their other completed information. They will be considered “on time”. However, it remains their responsibility to provide the DCE with their coverage no later than 8 weeks prior to their scheduled fieldwork.

“Off Step” Students

Students who do not complete degree requirements within the normal four (4) semester academic time frame are considered “off step” in the PTA Program. It is the off step student’s sole responsibility to secure completed prerequisite information from the Registrar’s Office in addition to the other required information and forward it to the DCE before clinical fieldwork will be arranged.

Postponing Fieldwork

If a student elects to postpone their fieldwork, a signed waiver must be completed and submitted to the DCE within one week of making the decision.

CLINICAL TIME OFF POLICY

Purpose:

If a clinical site is closed for any reason during a student's clinical fieldwork, the day/ hours will need to be made up. This includes holidays and other miscellaneous reasons for closing. Some sites have holidays they observe, while others may be open. This policy makes it fair and just across the board. Each student must complete a minimum of 200 hours for PT 206 and PT 255 and a minimum of 240 hours for PT 280. This also applies to any hours a student misses for any reason on their own accord during clinical fieldwork. The minimum hour requirement is needed to complete and pass the clinical fieldwork.

Procedure:

Any time missed during clinical must be made up. If a student is aware in advance of a holiday, with clinician's understanding and agreement, the student may begin clinical early or finish clinical late to make up hours. Additionally, if there are later hours available or weekend hours, the student may make up hours during those times with the agreement of the clinical instructor. The clinical will not be considered complete until the hours have been completed. The student must keep a journal during clinical. They must have the first page of the journal for the clinical listing days worked and hours with a total number of hours added up at the end of the page. The hours must have a minimum of 200 for PT 206 and PT 255, and a minimum of 240 hours for PT 280.

Responsible:

The student will be responsible for keeping track of hours in their journal. The clinical instructor will be responsible by verifying all time requirements were met by completion of the final Clinical Performance Instrument. The DCE will verify that the student has met all clinical hours by looking at the journal hours listed and the fact that the CI has completed the final Clinical Performance Instrument.

SELECTING A SITE

How Do I Choose?

Site List

HERKIMER COLLEGE/PTA program maintains contracts with many local and statewide facilities. There are several additional “out of state” contracts as well.

The list of available facilities to choose from will be given to you by the DCE. This is a list of available reservations (sites who have accepted a HERKIMER COLLEGE student for that specific time period) and *this list will change* for each session of fieldwork.

In the PTA Faculty Office (TC 412) there is a rolling file that contains Clinical Site Information Forms and any additional information provided by a facility. Exceptions exist when a facility has not yet provided information. Students may examine these files to aid them in their fieldwork selection. Students may look through the folders during available office hours or open lab hours. Folders are not to be removed from TC 412. Please be considerate and maintain the files in order after you are finished.

Preference Sheet

After reviewing the folders of each site on the reservation list, the student will choose up to 10 clinical sites where they would like to be placed and submit them to the DCE on the Preference Sheet. Not everyone will get his or her top choice. You may have to travel, so pick one distant site (greater than ½ hour drive from your home) that would be acceptable to you.

DO NOT write any site name on your preference sheet that does not appear on the list!

You may only select from the list. This applies even if I am looking into another contract on your behalf. You may place an asterisk and note at the bottom of the form to remind me that we are working on a new contract.

The Lottery

A lottery format is used to match students and sites. Once all Preference Sheets are submitted, each student will draw a number. This number designates the order in which the student will choose his/her fieldwork site from the list. Immediately following the draw, the DCE will post the Student Preferences in the order of the numbers drawn. At that time student #1 will choose their site, then student #2 will choose from the remaining list, student #3 will choose from the remaining list and so on....

Students are able to see all preferences prior to choosing in order to research other options if it appears certain sites will not be available by the time it is their turn to choose. There is a chance that you will have to choose a site that was not initially selected by you on your Preference Sheet. Be prepared to go where you are assigned. All students are treated the same. Do not request or expect special consideration. Third party calls will not influence placement.

For the second fieldwork, the order of choosing your site will be determined by the DCE by the order in which all documents needed are given to her. Example, first one to turn in all necessary information will get first pick of sites for the next fieldwork. The last one to turn in necessary documents will have the last pick with whatever choices are remaining. This should encourage you to submit necessary documents in a timely manner.

There will always remain the possibility that a placement may be lost or cancelled, through no fault on the part of the College. When placements are cancelled, despite reservations, it is the result of unforeseen changes at a facility. Priority is given to a student that has lost a placement through no fault of his/her own.

HOW WILL I BE GRADED?

Clinical Affiliation Grading Criteria

- 1) Attendance is mandatory during the affiliation and students will abide by the facility's schedule.
- 2) **Clinical Performance Instrument (CPI)** - the white copy is the grading tool to be completed by the CI but sources of information may include PT's, PTA's, other professionals, office staff, patients and students. The CI reviews the completed CPI formally with the student at both mid-term evaluation and at the end of the clinical experience and signs the signature page following each evaluation.
- 3) The students will assess their own performance on a separate copy of the **CPI**, which is ivory in color. The student reviews the completed form with the CI at the midterm evaluation and at the end of the clinical experience and signs the signature page following each evaluation.
- 4) The student will complete the **Fieldwork Experience Assessment** (also ivory in color). The student reviews the completed form with the CI at the end of the clinical experience and both sign the last page of the form.
- 5) Student will complete the **Clinical Skills Checklist** with input from the CI in an ongoing fashion indicating experiences obtained during each affiliation.
- 6) The CI will submit the following items by mail, in the envelope provided, to be received by the DCE within one week following completion of the clinical experience:
 - _____ Nondiscrimination Form
 - _____ Orientation Checklist
 - _____ 2 CPI's (1 completed by student, 1 completed by CI)
 - _____ Fieldwork Experience Assessment (completed by student)
 - _____ Clinical Skills Checklist
 - _____ Journal
 - _____ Assignments
 - _____ In-service Paperwork
- 7) Individual assignments are the responsibility of the student.
- 8) All paperwork must be completed and received by the DCE before a grade will be assigned.

Fieldwork is graded on a Pass/Fail basis.

The grade is based on a combination of the CPI (completed by the Clinical Instructor), the Fieldwork Experience Assessment and your assignment (completed by the student for the DCE).

*A flag to the left of performance criteria numbers 1-5 on the CPI indicates “Red Flag” items, which are considered foundational elements in clinical practice. Difficulty with these areas warrants an immediate telephone call to the DCE and may result in dismissal from the clinical experience or failure. Failure will be determined by the DCE with input from the clinical instructor.

FRESHMAN FIELDWORK TIMELINE

<p>September</p>	<p>Introduction to Fieldwork by DCE in PT 121</p> <p>Completion of: Clinical Fieldwork Agreement Medical Information Release General Information Sheet</p> <p>All required student information due to DCE (Medical, CPR, First Aid, Insurance, etc.) Students without health insurance must arrange for it</p> <p>Return Preference List and Information Sheet to DCE by due date</p>
<p>October</p>	<p>DCE posts clinical placements for PT 206</p>
<p>November- February</p>	<p>Review Fieldwork Handbook and CPI - ask questions of DCE, if any USE OPEN LABS!!!</p>
<p>April</p>	<p>Students receive name of contact person and PT 206 assignment from DCE</p> <p>Make Contact: Student contacts PT 206 site in writing four (4) weeks prior to start day DCE must approve letter prior to sending Copy of letter and Profile Sheet to DCE</p>
<p>May</p>	<p>Student contacts site by phone one (1) week prior to start day</p> <p>PT 206 Begins (5 weeks - 200 hours)</p> <p>Be professional and enthusiastic, ask questions, and be ready to learn! When you are not busy, ask “how can I help?” or “what else can I learn here?” <u>DO NOT</u> just put in your time and take up space!</p>

June	<p>Student prepares their copy of CPI and reviews with CI at midterm conference</p> <p>Midterm Site Visit with DCE</p> <p>Student prepares Fieldwork Experience Assessment, completes Skills Checklist and CPI and reviews all with CI at final conference</p> <p>Assignment for PT 206 due to DCE prior to or postmarked on last day of Fieldwork</p> <p>PT 206 Ends Send CI a Thank You note to be received no later than one week after your last day Make copy of Thank You and send to DCE with final paperwork</p>
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Have a Great Summer!

SENIOR FIELDWORK TIMELINE

September	<p>Post conference on PT 206 with DCE Students receive senior packet including Site Lists Preference Sheet and due date DCE posts Clinical Placements for PT 255, PT 280</p> <p>All <u>updated</u> student information due to DCE (Medical, CPR, First Aid, Insurance, etc.) Students without health insurance must arrange for it</p>
October	<p>Review Fieldwork Handbook and CPI - ask questions of DCE, if you have any USE OPEN LABS!!!</p>
November	<p>Students receive names of contacts for PT 255 and PT 280</p>
December	<p>Make Contact: Student contacts PT 255 site in writing four (4) weeks prior to start day DCE must approve letter prior to sending Copy of letter and Profile Sheet to DCE</p>
January	<p>Student contacts PT 255 site by phone one (1) week prior to start day</p> <p>PT 255 Begins (5 weeks - 200 hours)</p> <p>Student prepares their copy of CPI and reviews with CI at midterm conference</p> <p>Midterm Site Visit with DCE</p>
February	<p>Student prepares Fieldwork Experience Assessment, adds to Skills Checklist and CPI and reviews all with CI at final conference</p> <p>Assignment for PT 255 due to DCE prior to or postmarked on last day of Fieldwork</p> <p>PT 255 Ends Send CI a Thank You note to be received no later than one week after your last day</p>
March	<p>Make Contact: Student contacts PT 280 site in writing four (4) weeks prior to start day DCE must approve letter prior to sending Copy of Letter and Profile Sheet to DCE</p>
April	<p>Student contacts PT 280 site by phone one (1) week prior to start day</p> <p>PT 280 Begins (6 weeks - 240 hours)</p>

May	<p>Student prepares their copy of CPI and reviews with CI at midterm conference</p> <p>Midterm Site Visit with DCE</p> <p>Student prepares Fieldwork Experience Assessment, completes Skills Checklist and CPI and reviews all with CI at final conference</p> <p>Assignment for PT 280 due to DCE prior to or postmarked on last day of Fieldwork</p> <p>PT 280 Ends Send CI a Thank You note to be received no later than one week after your last day Make copy of Thank You and send to DCE with final paperwork</p>
GRADUATION!	

FACILITY CONTACT

Yes, Fieldwork has assignments!

In Writing:

Four weeks prior to starting your clinical fieldwork you will write a letter of introduction.

Similar to the cover letter on a resume, this will be your chosen facility's first impression of you and how you represent yourself on paper. Your letter should be typed neatly in a business format. This means:

- At the top, as in business format, include your name, address, phone number, and an *APPROPRIATE* email contact. If yours is not appropriate for the professional world, make a new one. Also include the date.
- Since you do not know who your CI will be yet, please address this as: Dear Clinical Instructor, ...
- **There will be a minimum of 3 paragraphs.**
- In the first paragraph, state the reason that you are writing (to introduce yourself). Include such information as your full name, which school you are from, where you are in the program ("I am finishing up my 2nd semester as a freshman"; "I am finishing up my 3rd semester as a senior"; or "I am currently completing my final semester in the PTA program"). Include the dates you will be at the clinical site to avoid any confusion.
- In the body of the letter tell them what you already know about the facility. You have access to computers - As if this was a resume, you should find out as much as you can about the facility and be prepared to go on this clinical. Look up things online, look at Fieldwork Experience Assessments from past students, and look at Clinical Site Information Forms. Include information of your prior experience. If you are a senior, this should be information about past clinical fieldwork. If you are a freshman, you can include observational hours here. Next, let the clinician know what you hope to gain out of the fieldwork experience. If you want to practice goniometry, MMT, progression of exercise, or practice SOAP notes, this is the place to put this in. Pay attention to the type of facility you are going to; if you are going to a hospital, you may not necessarily be practicing modalities, but you should plan to work on transfer skills and gait training. Write your letter accordingly.

- In the last paragraph, close the letter by telling them how much you are looking forward to this experience and that you will be contacting them by phone closer to the date you will be starting your fieldwork for more information.
- You will SAVE this letter to your **Herkimer** computer account, print it up, and give it to the DCE. The DCE will review the letter, and if appropriate, will have you send it to your clinical site. If revisions are necessary, having it on your Herkimer account will allow for simple changes to be made the same day and re-printed for the DCE to further review.

By Phone:

One week prior to starting your clinical fieldwork you will call the CCCE (your contact person) at the facility. This conversation is their first impression of you personally, how you present yourself over the phone will give them an idea of your communication skills and style.

The number you were given may be that of the receptionist, so ask if there is a good time to call when it would be convenient for the CCCE to speak with you.

This conversation is to confirm your fieldwork arrangements and if you asked questions in your letter, now is when you can get the answers. Please be sure to confirm the following information:

- What are your hours of operation?
- What hours will I be working?
- Who will I report to? Who will be my CI be?
- Where should I park?
- Is lunch available onsite? Refrigerator?
- What is your dress code?
- Do you have a list of abbreviations that you typically use?
- Do you use SOAP notes?
- Are there any topics I should study for prior to coming? (Based on typical diagnosis seen.)
- Any other information needed.

***After speaking with Clinician, write down & tell Dr. Jones:

Name of CI: _____

Best phone number to reach CI: _____

CI email: _____

(for Dr. Jones to set up a site visit)

Before Your First Day:

If you have never been to that facility, drive there before your fieldwork begins to ensure that you don't get lost and you know how long it will take.

Review your terminology and documentation texts.

Review your CPI so that you know how you will be evaluated.

On Your Last Day:

Send a Thank You note to your CI and the facility for allowing you to have this opportunity. Make sure DCE receives a copy of this Thank You.

HERKIMER COUNTY COMMUNITY COLLEGE
COURSE SYLLABUS

DIVISION: Business, Health, Science, and Technology
COURSE TITLE: Clinical Fieldwork I
COURSE NUMBER: PT 206
CREDITS: 3 Credits
DATE: Revised Fall 2016
GRADE TYPE: Pass/Fail
PREPARED/REVIEWED BY: Karen Jones, PT, DPT

COURSE DESCRIPTION

Clinical Fieldwork I begins the fieldwork series for the PTA student. Five weeks (200 hours) of full-time clinical experience are required. The student now has the opportunity to interact with patients and professional staff in a health care facility. This placement allows the student to gain experience in the skilled application of techniques learned in PT 121, PT 131, PT 132, PT 141, PT 142 and PT 143, including ambulation and transfer training, modality application and therapeutic exercise. Prerequisites: PT 121, PT 131, PT 132, PT 141, PT 142, PT 143, SC 253 and SC 254.

Student must be First Aid and CPR certified and provide all required CPR, First Aid and health record documentation.

COURSE OBJECTIVES

This course is designed to:

1. Provide the student with 5 weeks (200) hours of full time clinical experience engaging the student in interaction with patients and staff in a health care facility with services specified within the physical therapists plan of care.
2. Engage the student in working with other healthcare providers, patients, and families to interact with appropriate communication and to demonstrate a good understanding of safe, ethical, and legal practice.
3. Involve the student in direct patient care carrying out a treatment plan of a physical therapist, documenting, and billing, while realizing their own limitations, scope of practice, and function within the facility.
4. Apply principles with patient's and patient's family members or guests showing identification, respect, and ability to interact with consideration of patient's differences, preferences, and expressed needs in any area involving the patient.

STUDENT LEARNING OUTCOMES

The student who successfully completes this course will be able to:

1. Demonstrate safety and competency with the fieldwork experience as measured in the Clinical Performance Instrument completed by the clinical instructor.
2. Communicate appropriately with other health care providers, the patient, and the family to discuss and review necessary information and identify any patient needs.
3. Apply treatments in the plan of care of the physical therapist, prepare the treatment areas, explain and

demonstrate procedures they are doing, demonstrate safety, respond to any acute changes in physiologic state, modify treatment techniques as in the plan of care, implement treatment programs, report patient status changes to the PT, identify and compile appropriate data, document data, and participate in discharge planning while working within the PTA's scope of practice.

4. Apply principles with patient's and patient's family members or guests showing identification, respect, and ability to interact with consideration of patient's differences, preferences, and expressed needs in any area involving the patient.

Student Learning Objectives

- A. The student who successfully completes this course will demonstrate that they performed ***at minimum*** as between '**Beginner**' and '**Advanced Beginner**' on the Clinical Performance Instrument (CPI Web) for all of the following 14 Criterion as determined by the clinical instructor:
 1. Demonstrates safety: Performs in a safe manner that minimizes the risk to patient, self, and others.
 2. Clinical Behavior: Demonstrates expected clinical behaviors in a professional manner in all situations.
 3. Accountability: Performs in a manner consistent with established legal standards, standards of the profession, and ethical guidelines.
 4. Cultural Competence: Adapts delivery of physical therapy services with consideration for patient's differences, values, preferences, and needs.
 5. Communication: Communicates in ways that are congruent with situational needs including: with other health care providers, the patient, and the family to discuss and review necessary information and identify any patient needs.
 6. Self-Assessment and Lifelong Learning: Participates in self-assessment and develops plans to improve knowledge, skills, and behaviors.
 7. Clinical Problem Solving: Demonstrates clinical problem solving.
 8. Interventions: Therapeutic Exercise: Performs selected therapeutic exercises in a competent manner.
 9. Interventions: Therapeutic Techniques: Applies selected manual therapy, airway clearance, and integumentary repair and protection techniques in a competent manner.
 10. Interventions: Physical Agents and Mechanical Modalities: Applies selected physical agents and mechanical modalities in a competent manner.
 11. Interventions: Electrotherapeutic Modalities: Applies selected electrotherapeutic modalities in a competent manner.
 12. Interventions: Functional Training and Application of Devices and Equipment: Performs functional training in self-care and home management and application and adjustment of devices and equipment in a competent manner.
 13. Documentation: Produces quality documentation in a timely manner to support the delivery of physical therapy services.
 14. Resource Management: Participates in the efficient delivery of physical therapy services.
- B. Student will summarize their inpatient or outpatient clinical experience with a team by composing a paper.
- C. Student will relate their clinical experience by composing a journal daily.
- D. Student will accept constructive feedback without defensiveness from the clinical instructor.

MAJOR DIVISIONS OF SUBJECT MATTER

- I. Patient care

- A. Observation and supervised participation in patient care.
- B. Educates patient, caregivers, and members of the healthcare team using effective methods
- C. Demonstrates safety.
- D. Performs physical therapy interventions in a technically competent manner
- E. Shows respect with patients and other members of the healthcare team
- F. Communicates well with patients, family members/ caregivers, and staff
- G. Discusses need for modification of plan of care established by the PT.
- H. Identifies patient status changes based on the PT's plan of care.
- I. Participation in Team, Discharge, or Care Plan meeting.
- J. Observation of other health care providers, services, and procedures.

II. Documentation

- A. Provides timely, concise, and legible documentation to support the delivery of physical therapy services.
- B. Obtains accurate information by performing data collection consistent with the physical therapist's plan of care.
- C. Demonstrates time management and effective use of resources for billing purposes.

GRADE DETERMINANTS

By the end of this fieldwork experience:

The individual CI of each student will complete necessary paperwork including the Clinical Performance Instrument. The information provided on this document, along with information provided to the DCE during phone or site visits will allow the DCE to make a determination of Pass or Fail for this clinical fieldwork experience.

At the completion of this clinical rotation, students must complete on-line or submit the following to the DCE:

1. Sign off on all CPI evaluations by student and CI (midterm and final)
2. Completed fieldwork experience assessment. Make a copy of this as one will go in a folder and the other in the files in TC 411 for other students to view.
3. Assignment for clinical: Typed and double spaced.
4. Journal: include daily hour log on the front page, daily summary, one SOAP note per day
5. Non-discrimination form
6. Student orientation checklist
7. CI questionnaire: Biannual accreditation report letter
8. Post cards are to be handed out and either mailed back or put in the return to DCE files
9. Copy of any in-service/handouts if you are required to give one by the clinical site.

By the end of this fieldwork experience:

This class is graded on a Pass/Fail. The individual CI of each student will complete necessary paperwork including the Clinical Performance Instrument. The information provided on this document, along with information provided to the DCE during phone or site visits will allow the DCE to make a determination of Pass or Fail for this clinical fieldwork experience.

The following rubric will be used to assess the Student Learning Outcomes for this course:

- The DCE will determine whether the student has met the criteria on the CPI of being between Beginner and Advanced Beginner Performance as rated by the Clinical Instructor.
- The DCE will also take into account the written information in the CPI provided by the Clinical Instructor.

COURSE ASSESSMENT

The student will demonstrate competency with all activities covered in didactic component and appropriate for the selected fieldwork experience as measured by the Clinical Performance Instrument completed by the Clinical Instructor(s).

Nondiscrimination Program policy Statement: the Herkimer College PTA Program and faculty adhere to the College's Discrimination and Harassment Policy. Discrimination or harassment is unethical, unprofessional and unacceptable. In this program, all communities (educators and students), must behave with respect and in a nonjudgmental manner with all persons in and out of class and while on clinical assignments.

Personal Counseling is available on campus. It is free and confidential. You can make an appointment to meet with a counselor by calling 315-574-4034 or you can make an appointment in person by going to RMCC 302. Anyone on campus with a Mental Health Emergency should contact Campus Safety by calling 911.

Students with Disabilities: Students with disabilities who are seeking academic accommodations should contact Leslie Cornish in the Services for Students with Disabilities office at 866-0300 ext 8331. The SSD office is located in the Academic Support Center in room 115.

PT 206 Addendum

Department: BHST: Business Health Science Technology

Credit hours: 4

Clock hours: 5 week 40 hours/week for a total of 200 hours Teaching Methods:

Hands-on, Research Assignments, Observations

Assignments

Return to the DCE at your scheduled meeting time immediately upon completion of your fieldwork. Typically this is the Monday following the last day of your clinical.

Inpatient Clinical: See Initial inpatient (interdisciplinary team) clinical assignment **Outpatient Clinical:** See Initial outpatient (PT/PTA team) clinical assignment **Second Inpatient, Second Outpatient, or Specialty Clinical:** Case study

- ***JOURNAL - During each Fieldwork (PT 206, PT 255, and PT 280) all students are required to keep a Journal of their Clinical Fieldwork Experience. In this journal, the student must write daily summaries of their experience in the clinic that day. This will not be read by the clinical instructor, only the DCE. Please feel free to write your thoughts, the things you worried about, the achievements you make, and anything else you want to write about your day. It will help me get a better idea of your clinical experience at that facility. Additionally, include the number of hours that you worked at the facility on that particular day. Please keep track of all hours on one sheet in the beginning. It makes it easier to add up. This will ensure you met your 200 or 240 hours needed for the clinical experience. The journal must be submitted to the DCE with all of the final paperwork in order to pass the clinical.***

- ***Students are required to give an in-service on a topic chosen by either the CI or the student during the final fieldwork PT 280 and submit copies of any information presented to the DCE. If the CI requires an in-service in PT 206 or PT 255, the student must complete this for the CI and send copies to the DCE.***

- ***Following the completion of PT 280, or Fieldwork PT 255 if a student is off-step, all senior PTA students are required to attend a two-day board review class to be held on campus. This class is typically the weekend after the last day of PT 280. In order to complete and pass the PT 280 clinical, the students must attend both days of the review class in its entirety. Not attending this class for both days in its entirety will result in a U (unsatisfactory) for a grade, which will result in failing out of the program. This board review class is the significant step in preparation for your board examination, which you will need to pass to practice as a PTA. At this board review class you must also submit all of your paperwork needed from your final PT 280 clinical fieldwork.***

A. Initial Inpatient Clinical Experience:

- You are in an inpatient setting. While you are there, please look around you and notice all of the other disciplines working within the facility. You may notice OT, nursing, speech, doctors, orthopedic surgeons, social workers, activities, orthotists, prosthetists, and many other disciplines. Realize you are part of a team approach to getting your patients better. Take some time to interact with these individuals. See what they are doing when they are working with some of the same patients you are working with.
- Write a minimum of a 3-5 page paper describing the opportunities you have had or could have to interact with other members of the healthcare team. Describe how they worked with the same patients you worked with and what their job with the patient was. Did you work as a team approach with your patients? Please describe this in detail. Were you able to attend any interdisciplinary (ID) meetings, family meetings, discharge meetings, or other types of meetings regarding your patients? Please discuss the meetings and what you observed and/or your role at these meetings. Discuss the importance of working as a team in healthcare. Discuss positives and negatives of working with other healthcare team members.

B. Initial Outpatient Clinical Experience:

- As a PTA in outpatient, your team is the PT/PTA. Please write a minimum of a 3-5 page paper to discuss PT/PTA interaction. Consider your interaction while you were on clinical with the CI you were working with, discuss if they were a PT or PTA. Discuss the PT/PTA interaction within your

clinical site. Please describe in detail how often they communicated with each other regarding patient care, discussion of cases, evaluations, goals, discharge plans. This may vary between different therapists based on the experience level they have. If there are more PTA's there, please discuss this, if not please describe your thoughts on PT/PTA interaction based on level of experience in a facility. If there are aides, technicians, or other members of the healthcare team at your facility, discuss the interaction between the PT, PTA and the other members of the team.

- C. Case study:** Using The Guide to Physical Therapy Practice for your format, complete a case study on a patient you worked with that interests you.
- If you are targeting a specific disease or condition, please research and include information about the disease and then describe this patient's case. Remember to maintain patient confidentiality. Include: Examination - (history, systems review, tests and measures), Evaluation, Diagnosis - (impairments, functional limitations, disability), Practice Pattern, Prognosis - (optimum level of function obtainable, time to get there, factors that modify), Plan of Care, Goals, Interventions - (every direct intervention should have an anticipated goal), Outcomes, Re-examination, Discharge planning. Include ICD 10 codes for your patient diagnosis.
 - What surprised you about the case of patient?
 - Reflect on the actions you took with this particular patient. Explain how what you did or said may have influenced the situation. Describe what you did to try to help the situation (i.e. discussed treatment suggestions with PT, reviewed text books, spoke to other therapists [PT, OT, SLP, assistants, other students] regarding patient, etc.)
 - Discuss how therapy did or did not achieve the desired result for all involved: Patient, Family, Student, Therapist, and Physician.
 - Finally, reflect upon the case as a whole. What could have been done differently that may have worked better? What were some self-weaknesses that you observed while dealing with this case? What did you learn from this case?

HERKIMER COUNTY COMMUNITY COLLEGE
COURSE SYLLABUS

DIVISION: Business, Health, Science, and Technology
COURSE TITLE: Clinical Fieldwork II
COURSE NUMBER: PT 255
CREDITS: 4 Credits
DATE: Revised Fall 2016
GRADE TYPE: Pass/Fail
PREPARED/REVIEWED BY: Karen Jones, PT, DPT

COURSE DESCRIPTION

Five weeks (200 hours) of full-time clinical experience are included in Clinical Fieldwork II. During this second affiliation, the student is given the opportunity to refine treatment skills and, depending on the facility assigned, acquire alternate treatment protocols. This level allows the student to gain experience in the application of skills and techniques learned in PT 251 and PT 252 for the Neuromuscular and Musculoskeletal practice patterns. Prerequisite: Successful completion of PT 251 and PT 252. Student must be First Aid and CPR certified and provide all required CPR, First Aid and health record documentation.

COURSE OBJECTIVES

This course is designed to:

1. Provide the student with 5 weeks (200) hours of full time clinical experience engaging the student in interaction with patients and staff in a health care facility with services specified within the physical therapists plan of care.
2. Engage the student in working with other healthcare providers, patients, and families to interact with appropriate communication and to demonstrate a good understanding of safe, ethical, and legal practice.
3. Involve the student in direct patient care carrying out a treatment plan of a physical therapist, documenting, and billing, while realizing their own limitations, scope of practice, and function within the facility.

STUDENT LEARNING OUTCOMES

The student who successfully completes this course will be able to:

5. Demonstrate safety and competency with the fieldwork experience as measured in the Clinical Performance Instrument completed by the clinical instructor.
6. Communicate appropriately with other health care providers, the patient, and the family to discuss and review necessary information and identify any patient needs.
7. Apply treatments in the plan of care of the physical therapist, prepare the treatment areas, explain and demonstrate procedures they are doing, demonstrate safety, respond to any acute changes in physiologic state, modify treatment techniques as in the plan of care, implement treatment programs, report patient status changes to the PT, compile appropriate data, document data, and participate in discharge planning while working within the PTA's scope of practice.

8. Apply principles with patient's and patient's family members or guests showing identification, respect, and ability to interact with consideration of patient's differences, preferences, and expressed needs in any area involving the patient.

STUDENT LEARNING OBJECTIVES

- A. The student who successfully completes this course will demonstrate that they performed ***at minimum*** as between **“Advanced Beginner”** and **“Advanced Intermediate”** on the Clinical Performance Instrument (CPI Web) for all of the following 14 Criterion as determined by the clinical instructor:
 1. Demonstrate safety: Performs in a safe manner that minimizes the risk to patient, self, and others.
 2. Clinical Behavior: Demonstrates expected clinical behavior in a professional manner in all situations.
 3. Accountability: Performs in a manner consistent with established legal standards, standards of the profession, and ethical guidelines.
 4. Cultural Competence: Adapts delivery of physical therapy service with consideration for patients differences, values, preferences, and needs
 5. Communication: Communicated in ways that are congruent with situational needs including: with other health care providers, the patient, and the family to discuss and review necessary information and identify any patient needs
 6. Self-Assessment and Lifelong Learning: Participates in self-assessment and develops plans to improve knowledge, skills, and behaviors
 7. Clinical Problem Solving: Demonstrates clinical problem solving
 8. Interventions: Therapeutic Exercises: Performs selected therapeutic exercise in a competent manner
 9. Interventions: Therapeutic Technique: Applies selected manual therapy, airway clearance and integumentary repair and protection techniques in a competent manner
 10. Interventions: Physical Agents and Mechanical Modalities: Applies selected physical agents and mechanical modalities in a competent manner.
 11. Interventions: Electrotherapeutic Modalities: Applies selected electrotherapeutic modalities in a competent manner.
 12. Interventions: Functional Training and Application of Devices and Equipment: Performs functional training in self-care and home management and application and adjustment of devices and equipment in a competent manner
 13. Documentation: Provides quality documentation in a timely manner to support the delivery of physical therapy services.
 14. Resource Management: Participates in the efficient delivery of physical therapy services.
- B. Student will analyze their inpatient or outpatient clinical experience with a team by composing a paper.
- C. Student will examine their clinical experience by composing a journal daily.
- D. Student will apply constructive feedback without defensiveness from the clinical instructor.

MAJOR DIVISIONS OF SUBJECT MATTER

- III. Patient care
 - A. Observation and supervised participation in patient care
 - B. Educates patient, caregivers, and members of the healthcare team using effective methods.
 - C. Demonstrates safety

- D. Performs physical therapy interventions in a technically competent manner
- E. Shows respect with patients and other members of the healthcare team
- F. Communicates well with patients, family members/ caregivers, and staff
- G. Discusses need for modification of plan of care established by the PT.
- H. Identifies patient status changes based on the PT's plan of care.
- I. Participation in Team, Discharge, or Care Plan meeting
- J. Observation of other health care providers, services, and procedures.

IV. Documentation

- A. Provides timely, concise, and legible documentation to support the delivery of physical therapy services.
- B. Obtains accurate information by performing data collection consistent with the physical therapist's plan of care.
- C. Demonstrates time management and effective use of resources for billing purposes.

GRADE DETERMINANTS

GRADE DETERMINANTS: PT 255

By the end of this fieldwork experience:

This class is graded on a Pass/Fail. The individual CI of each student will complete necessary paperwork including the Clinical Performance Instrument. The information provided on this document, along with information provided to the DCE during phone or site visits will allow the DCE to make a determination of Pass or Fail for this clinical fieldwork experience.

The following rubric will be used to assess the Student Learning Outcomes for this course:

- The DCE will determine whether the student has met the criteria on the CPI of being between Advanced Beginner and Advanced Intermediate Performance as rated by the Clinical Instructor.
- The DCE will also take into account the written information in the CPI provided by the Clinical Instructor.

At the completion of this clinical rotation, students must complete on-line or submit the following to the DCE:

1. Sign off on all CPI evaluations by student and CI (midterm and final)
2. Completed Fieldwork experience assessment. Make a copy of this, as one will go in a folder and the other in the files in TC 411, for other students to view.
3. Assignment for clinical: Typed and double spaced.
4. Journal: include daily hour log on front page, daily summary, and one SOAP note per day
5. Non-discrimination form
6. Student Orientation Checklist
7. CI questionnaire: Biannual accreditation report letter
8. Post cards are to be handed out and either mailed back or put in the return to DCE files
9. Copy of any in-service/handouts if you are required to give one by the clinical site

COURSE ASSESSMENT

The student will demonstrate safety and competency with all activities covered in didactic component and appropriate for the selected fieldwork experience as measured by the Clinical Performance Instrument completed by the Clinical Instructor(s).

Nondiscrimination Program policy Statement: the Herkimer College PTA Program and faculty adhere to the College's Discrimination and Harassment Policy. Discrimination or harassment is unethical, unprofessional and unacceptable. In this program, all communities (educators and students), must behave with respect and in a nonjudgmental manner with all persons in and out of class and while on clinical assignments.

Personal Counseling is available on campus. It is free and confidential. You can make an appointment to meet with a counselor by calling 315-574-4034 or you can make an appointment in person by going to RMCC 302. Anyone on campus with a Mental Health Emergency should contact Campus Safety by calling 911.

Students with Disabilities: Students with disabilities who are seeking academic accommodations should contact Leslie Cornish in the Services for Students with Disabilities office at 866-0300 ext 8331. The SSD office is located in the Academic Support Center in room 115.

PT 255 Addendum

Department: BHST: Business Health Science Technology

Credit hours: 4

Clock hours: 5 week 40 hours/week for a total of 200 hours

Teaching Methods: Hands-on, Research Assignments, Observations

Assignments

Return to the DCE at your scheduled meeting time immediately upon completion of your fieldwork. Typically this is the Monday following the last day of your clinical.

Inpatient Clinical: See Initial inpatient (interdisciplinary team) clinical assignment

Outpatient Clinical: See Initial outpatient (PT/PTA team) clinical assignment

Second Inpatient, Second Outpatient, or Specialty Clinical: Case study

- ***JOURNAL - During each Fieldwork (PT 206, PT 255, and PT 280) all students are required to keep a Journal of their Clinical Fieldwork Experience. In this journal, the student must write daily summaries of their experience in the clinic that day. This will not be read by the clinical instructor, only the DCE. Please feel free to write your thoughts, the things you worried about, the achievements you make, and anything else you want to write about your day. It will help me get a better idea of your clinical experience at that facility. Additionally, include the number of hours that you worked at the facility on that particular day. Please keep track of all hours on one sheet in the beginning. It makes it easier to add up. This will ensure you met your 200 or 240 hours needed for the clinical experience. The journal must be submitted to the DCE with all of the final paperwork in order to pass the clinical.***
- ***Students are required to give an in-service on a topic chosen by either the CI or the student during the final fieldwork PT 280 and submit copies of any information presented to the DCE. If the CI requires an in-service in PT 206 or PT 255, the student must complete this for the CI and send copies to the DCE.***
- ***Following the completion of PT 280, or Fieldwork PT 255 if a student is off-step, all senior PTA students are required to attend a two-day board review class to be held on campus. This class is typically the***

weekend after the last day of PT 280. In order to complete and pass the PT 280 clinical, the students must attend both days of the review class in its entirety. Not attending this class for both days in its entirety will result in a U (unsatisfactory) for a grade, which will result in failing out of the program. This board review class is the significant step in preparation for your board examination, which you will need to pass to practice as a PTA. At this board review class you must also submit all of your paperwork needed from your final PT 280 clinical fieldwork.

A. Initial Inpatient Clinical Experience:

- You are in an inpatient setting. While you are there, please look around you and notice all of the other disciplines working within the facility. You may notice OT, nursing, speech, doctors, orthopedic surgeons, social workers, activities, orthotists, prosthetists, and many other disciplines. Realize you are part of a team approach to getting your patients better. Take some time to interact with these individuals. See what they are doing when they are working with some of the same patients you are working with.
- Write a minimum of a 3-5 page paper describing the opportunities you have had or could have to interact with other members of the healthcare team. Describe how they worked with the same patients you worked with and what their job with the patient was. Did you work as a team approach with your patients? Please describe this in detail. Were you able to attend any interdisciplinary (ID) meetings, family meetings, discharge meetings, or other types of meetings regarding your patients? Please discuss the meetings and what you observed and/or your role at these meetings. Discuss the importance of working as a team in healthcare. Discuss positives and negatives of working with other healthcare team members.

B. Initial Outpatient Clinical Experience:

- As a PTA in outpatient, your team is the PT/PTA. Please write a minimum of a 3-5 page paper to discuss PT/PTA interaction. Consider your interaction while you were on clinical with the CI you were working with, discuss if they were a PT or PTA. Discuss the PT/PTA interaction within your clinical site. Please describe in detail how often they communicated with each other regarding patient care, discussion of cases, evaluations, goals, discharge plans. This may vary between different therapists based on the experience level they have. If there are more PTA's there, please discuss this, if not please describe your thoughts on PT/PTA interaction based on level of experience in a facility. If there are aides, technicians, or other members of the healthcare team at your facility, discuss the interaction between the PT, PTA and the other members of the team.

C. Case study: Using The Guide to Physical Therapy Practice for your format, complete a case study on a patient you worked with that interests you.

- If you are targeting a specific disease or condition, please research and include information about the disease and then describe this patient's case. Remember to maintain patient confidentiality. Include: Examination - (history, systems review, tests and measures), Evaluation, Diagnosis - (impairments, functional limitations, disability), Practice Pattern, Prognosis - (optimum level of function obtainable, time to get there, factors that modify), Plan of Care, Goals, Interventions - (every direct intervention should have an anticipated goal), Outcomes, Re-examination, Discharge planning. Include ICD 10 codes for your patient diagnosis.
- What surprised you about the case of patient?

- Reflect on the actions you took with this particular patient. Explain how what you did or said may have influenced the situation. Describe what you did to try to help the situation (i.e. discussed treatment suggestions with PT, reviewed text books, spoke to other therapists [PT, OT, SLP, assistants, other students] regarding patient, etc.)
- Discuss how therapy did or did not achieve the desired result for all involved: Patient, Family, Student, Therapist, and Physician.
- Finally, reflect upon the case as a whole. What could have been done differently that may have worked better? What were some self-weaknesses that you observed while dealing with this case? What did you learn from this case?

HERKIMER COUNTY COMMUNITY COLLEGE
COURSE SYLLABUS

DIVISION: Business, Health, Science, and Technology **COURSE TITLE:**
Clinical Fieldwork III

COURSE NUMBER: PT 280

CREDITS: 5 Credits

DATE: Revised Spring 2016

GRADE TYPE: Pass/Fail **PREPARED/REVIEWED BY:**
Karen Jones, PT, DPT

COURSE DESCRIPTION

The student has now gained the academic background to complete his/her degree. Six weeks (240 hours) of full-time clinical experience are included in Clinical Fieldwork III. During this final affiliation, the student is given more exposure to alternate treatment protocols. They will refine treatment skills learned in the final semester, as well as become more efficient with documentation and interventions. Prerequisite: successful completion of all other degree requirements and a minimum of 2.5 GPA. Student must be CPR certified and provide all required CPR, First Aid and health record documentation.

COURSE OBJECTIVES

This course is designed to:

1. Provide the student with 6 weeks (240) hours of full time clinical experience engaging the student in interaction with patients and staff in a health care facility with services specified within the physical therapists plan of care.
2. Engage the student in working with other healthcare providers, patients, and families to interact with appropriate communication and to demonstrate a good understanding of safe, ethical, and legal practice.
3. Involve the student in direct patient care carrying out a treatment plan of a physical therapist, documenting, and billing, while realizing their own limitations, scope of practice, and function within the facility.

4. Apply principles with patient's and patient's family members or guests showing identification, respect, and ability to interact with consideration of patient's differences, preferences, and expressed needs in any area involving the patient.

STUDENT LEARNING OUTCOMES

The student who successfully completes this course will be able to:

9. Demonstrate safety and competency with the fieldwork experience as measured in the Clinical Performance Instrument completed by the clinical instructor.
10. Communicate appropriately with other health care providers, the patient, and the family to discuss and review necessary information and identify any patient needs.
11. Apply treatments in the plan of care of the physical therapist, prepare the treatment areas, explain and demonstrate procedures they are doing, demonstrate safety, respond to any acute changes in physiologic state, modify treatment techniques as in the plan of care, implement treatment programs, report patient status changes to the PT, compile appropriate data, document data, and participate in discharge planning while working within the PTA's scope of practice.
12. Apply principles with patient's and patient's family members or guests showing identification, respect, and ability to interact with consideration of patient's differences, preferences, and expressed needs in any area involving the patient.
13. Apply research techniques to complete a case study discussing diagnosis and treatment including statistical significance, validity, and reliability.

STUDENT LEARNING OBJECTIVES

- A. The student who successfully completes this course will demonstrate that they performed at **'Entry Level'** on the Clinical Performance Instrument (CPI Web) for:
 1. Demonstrate safety: Performs in a safe manner that minimizes the risk to patient, self, and others.
- B. The student will perform at a minimum of as between **"Advanced Intermediate" and "Entry Level"** on the Clinical Performance Instrument (CPI Web) for all of the following 13 Criterion as determined by the clinical instructor:
 1. Clinical Behavior: Demonstrates expected clinical behavior in a professional manner in all situations.
 2. Accountability: Performs in a manner consistent with established legal standards, standards of the profession, and ethical guidelines.
 3. Cultural Competence: Adapts delivery of physical therapy service with consideration for patients differences, values, preferences, and needs
 4. Communication: Communicated in ways that are congruent with situational needs including: with other health care providers, the patient, and the family to discuss and review necessary information and identify any patient needs. This will also

- include presentation of an in-service during this clinical experience.
5. Self-Assessment and Lifelong Learning: Participates in self-assessment and develops plans to improve knowledge, skills, and behaviors
 6. Clinical Problem Solving: Demonstrates clinical problem solving
 7. Interventions: Therapeutic Exercises: Performs selected therapeutic exercise in a competent manner
 8. Interventions: Therapeutic Technique: Applies selected manual therapy, airway clearance and integumentary repair and protection techniques in a competent manner
 9. Interventions: Physical Agents and Mechanical Modalities: Applies selected physical agents and mechanical modalities in a competent manner.
 10. Interventions: Electrotherapeutic Modalities: Applies selected electrotherapeutic modalities in a competent manner.
 11. Interventions: Functional Training and Application of Devices and Equipment: Performs functional training in self-care and home management and application and adjustment of devices and equipment in a competent manner
 12. Documentation: Provides quality documentation in a timely manner to support the delivery of physical therapy services.
 13. Resource Management: Participates in the efficient delivery of physical therapy services.
14. Student will analyze their inpatient or outpatient clinical experience with a team by composing a paper.
 15. Student will examine their clinical experience by composing a journal daily.
 16. Student will apply constructive feedback without defensiveness from the clinical instructor.
- C. Student will elaborate on their inpatient or outpatient clinical experience with a team by composing a paper if they have not already completed one for both inpatient and outpatient; or complete a relevant case study to elaborate on the case and how things could have been done better.
- D. Student will appraise their clinical experience by composing a journal daily.
- E. Student will adapt and improve themselves after having been given constructive feedback without showing defensiveness with the clinical instructor.
- F. Students will propose a topic and compose an in-service to present to the clinical staff at the facility.

MAJOR DIVISIONS OF SUBJECT MATTER

- I. Patient care
 - A. Observation and supervised participation in patient care
 - B. Educates patient, caregivers, and members of the healthcare team using effective methods.
 - C. Demonstrates safety

- D. Performs physical therapy interventions in a technically competent manner
 - E. Shows respect with patients and other members of the healthcare team
 - F. Communicates well with patients, family members/ caregivers, and staff
 - G. Discusses need for modification of plan of care established by the PT.
 - H. Identifies patient status changes based on the PT's plan of care.
 - I. Participation in Team, Discharge, or Care Plan meeting
 - J. Observation of other health care providers, services, and procedures.
- II. Documentation
- A. Provides timely, concise, and legible documentation to support the delivery of physical therapy services.
 - B. Obtains accurate information by performing data collection consistent with the physical therapist's plan of care.

GRADE DETERMINANTS

By the end of this fieldwork experience:

The individual CI of each student will complete necessary paperwork including the Clinical Performance Instrument. The information provided on this document, along with information provided to the DCE during phone or site visits will allow the DCE to make a determination of Pass or Fail for this clinical fieldwork experience.

This class is graded on a Pass/Fail. The individual CI of each student will complete necessary paperwork including the Clinical Performance Instrument. The information provided on this document, along with information provided to the DCE during phone or site visits will allow the DCE to make a determination of Pass or Fail for this clinical fieldwork experience.

The following rubric will be used to assess the Student Learning Outcomes for this course:

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- The student must meet the requirement of being entry level in safety skills to pass this clinical.
- The DCE will determine whether the student has met all other criteria on the CPI of being between Advanced Intermediate Performance and Entry Level as rated by the Clinical Instructor.
- The DCE will also take into account the written information in the CPI provided by the Clinical Instructor.

At the completion of this clinical rotation, students must complete on-line or submit the following to the DCE:

1. Sign off on all CPI evaluations by student and CI (midterm and final)
2. Completed Fieldwork experience assessment. Make a copy of this, as one will go in a folder and the other in the files in TC 411, for other students to view.
3. Assignment for clinical: Typed and double spaced.
4. Journal: include daily hour log on front page, daily summary, and one SOAP note per day
5. Non-discrimination form

6. Student Orientation Checklist
7. CI questionnaire: Biannual accreditation report letter
8. Post cards are to be handed out and either mailed back or put in the return to DCE files
9. Copy of in-service/handouts

COURSE ASSESSMENT

The student will demonstrate safety and competency with all activities covered in didactic component and appropriate for the selected fieldwork experience as measured by the Clinical Performance Instrument completed by the Clinical Instructor(s).

Nondiscrimination Program policy Statement: the Herkimer College PTA Program and faculty adhere to the College's Discrimination and Harassment Policy. Discrimination or harassment is unethical, unprofessional and unacceptable. In this program, all communities (educators and students), must behave with respect and in a nonjudgmental manner with all persons in and out of class and while on clinical assignments.

Personal Counseling is available on campus. It is free and confidential. You can make an appointment to meet with a counselor by calling 315-574-4034 or you can make an appointment in person by going to RMCC 302. Anyone on campus with a Mental Health Emergency should contact Campus Safety by calling 911.

Students with Disabilities: Students with disabilities who are seeking academic accommodations should contact Leslie Cornish in the Services for Students with Disabilities office at 866-0300 ext 8331. The SSD office is located in the Academic Support Center in room 115.

PT 280 Addendum

Department: BHST: Business Health Science Technology

Credit hours: 5

Clock hours: 6 week 40 hours/week for a total of 280 hours

Teaching Methods: Hands-on, Research Assignments,
Observations

Assignments

Return to the DCE at your scheduled meeting time immediately upon completion of your fieldwork. Typically this is the Monday following the last day of your clinical.

Inpatient Clinical: See Initial inpatient (interdisciplinary team) clinical assignment **Outpatient Clinical:** See Initial outpatient (PT/PTA team) clinical assignment **Second Inpatient, Second Outpatient, or Specialty Clinical:** Case

- ***JOURNAL - During each Fieldwork (PT 206, PT 255, and PT 280) all students are required to keep a Journal of their Clinical Fieldwork Experience. In this journal, the student must write daily summaries of their experience in the clinic that day. This will not be read by the clinical instructor, only the DCE. Please feel free to write your thoughts, the things you worried about, the achievements you make, and anything else you want to write about your day. It will help me get a better idea of your clinical experience at that facility. Additionally, include the number of hours that you worked at the facility on that particular day. Please keep track of all hours on one sheet in the beginning. It makes it easier to add up. This will ensure you met your 200 or 240 hours needed for the clinical experience. The journal must be submitted to the DCE with all of the final paperwork in order to pass the clinical.***

- ***Students are required to give an in-service on a topic chosen by either the CI or the student during the final fieldwork PT 280 and submit copies of any information presented to the DCE. If the CI requires an in-service in PT 206 or PT 255, the student must complete this for the CI and send copies to the DCE.***

- ***Following the completion of PT 280, or Fieldwork PT 255 if a student is off-step, all senior PTA students are required to attend a two-day board review class to be held on campus. This class is typically the weekend after the last day of PT 280. In order to complete and pass the PT 280 clinical, the students must attend both days of the review class in its entirety. Not attending this class for both days in its entirety will result in a U (unsatisfactory) for a grade, which will result in failing out of the program. This board review class is the significant step in preparation for your board examination, which you will need to pass to practice as a PTA. At this board review class you must also submit all of your paperwork needed from your final PT 280 clinical fieldwork.***

A. Initial Inpatient Clinical Experience:

- You are in an inpatient setting. While you are there, please look around you and notice all of the other disciplines working within the facility. You may notice OT, nursing, speech, doctors, orthopedic surgeons, social workers, activities, orthotists, prosthetists, and many other disciplines. Realize you are part of a team approach to getting your patients better. Take some time to interact with these individuals. See what they are doing when they are working with some of the same patients you are working with.
- Write a minimum of a 3-5 page paper describing the opportunities you have had or could have to interact with other members of the healthcare team. Describe how they worked with the same patients you worked with and what their job with the patient was. Did you work as a team approach with your patients? Please describe this in detail. Were you able to attend any interdisciplinary (ID) meetings, family meetings, discharge meetings, or other types of meetings regarding your patients? Please discuss the meetings and what you observed and/or your role at these meetings. Discuss the

importance of working as a team in healthcare. Discuss positives and negatives of working with other healthcare team members.

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- As a PTA in outpatient, your team is the PT/PTA. Please write a minimum of a 3-5 page paper to discuss PT/PTA interaction. Consider your interaction while you were on clinical with the CI you were working with, discuss if they were a PT or PTA. Discuss the PT/PTA interaction within your clinical site. Please describe in detail how often they communicated with each other regarding patient care, discussion of cases, evaluations, goals, discharge plans. This may vary between different therapists based on the experience level they have. If there are more PTA's there, please discuss this, if not please describe your thoughts on PT/PTA interaction based on level of experience in a facility. If there are aides, technicians, or other members of the healthcare team at your facility, discuss the interaction between the PT, PTA and the other members of the team.

C. Case study: Using The Guide to Physical Therapy Practice for your format, complete a case study on a patient you worked with that interests you.

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- Reflect on the actions you took with this particular patient. Explain how what you did or said may have influenced the situation. Describe what you did to try to help the situation (i.e. discussed treatment suggestions with PT, reviewed text books, spoke to other therapists [PT, OT, SLP, assistants, other students] regarding patient, etc.)
- Discuss how therapy did or did not achieve the desired result for all involved: Patient, Family, Student, Therapist, and Physician.
- Finally, reflect upon the case as a whole. What could have been done differently that may have worked better? What were some self-weaknesses that you observed while dealing with this case? What did you learn from this case?

ASSIGNMENTS

Due to the DCE postmarked by (or any time prior to) the last day of Fieldwork.

PT 206: (Student may choose A or B)

PT 255: (Student may choose B or C)

PT 280: (NO CHOICE - Student must do C)

- ***JOURNAL*** - During each Fieldwork (PT 206, PT 255, and PT 280) all students are required to keep a Journal of their Clinical Fieldwork Experience. In this journal, the student must write daily summaries of their experience in the clinic that day. This will not be read by the clinical instructor, only the ACCE. Please feel free to write your thoughts, the things you worried about, the achievements you make, and anything else you want to write about your day. It will help me get a better idea of your clinical experience at that facility. Additionally, include the number of hours that you worked at the facility on that particular day. Please keep track of all hours on one sheet in the beginning. It makes it easier to add up. This will ensure you met your 200 or 240 hours needed for the clinical experience. The journal must be submitted to the ACCE with all of the final paperwork in order to pass the clinical.
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the patient was. Did you work as a team approach with your patients? Please describe this in detail. Were you able to attend any interdisciplinary (ID) meetings, family meetings, discharge meetings, or other types of meetings regarding your patients? Please discuss the meetings and what you observed and/or your role at these meetings. Discuss the importance of working as a team in healthcare. Discuss positives and negatives of working with other healthcare team members.

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As of October 28, 2015:

Mandatory Assignment to pass Clinical Fieldwork

TWO TASKS:

In order to pass clinical you must be sure that:

1. The CI updates all information on the CPI regarding their clinical site and themselves under CI or site in CPI web.
2. CSIF must be updated. You can input this information yourself for your CI and have them sign off on it or make sure the CI has completed the CSIF on CPI web before the last day of clinical. You can ask the CI the information and put it in for them if they do not have the time. It **MUST** be completed in order to pass this clinical and for our program to maintain accreditation, thus making you employable.

IF this is not completed, you have not finished your clinical and you will receive an incomplete for your grade.

You must complete all of your clinical fieldwork in order to pass the program and graduate in May.

FIELDWORK POSTCARDS

Each of you will be given five (5) postage prepaid postcards. You are to bring these to your clinical site. This will help us to get a better idea of how the patient's view you for quality assurance purposes.

- **Two (2)** of these are to be *distributed by you* to two patients of your choice. These cards will have the initial **S at the top**. The cards are to be filled out with your name on the top and the patient is to confidentially fill out the rest. Please ask them to fill it out and put it in a mailbox.
- **Three (3)** of these are to be *given to your Clinical Instructor*. These will have the **CI at the top**. These are to be distributed to three patients of the **Clinician's** choice and put in the mail to come back to me.
- **You are to inform your CI as to whom you are giving these postcards to so that they do not duplicate and give a card to the same person.**
- ***The patient is NOT to put their name on it for HIPAA compliance and confidentiality reasons.***
- *Please give the CI a copy of this letter to enable them to know what you are asking the patients to do.*
- If there are questions regarding this, please call me at 866-0300, X8740 and I will get back to you. Thank you.

EXAMPLE OF POSTCARD INFORMATION

Student's Name _____	
Was this PTA student:	
Professional?	Yes / No
Knowledgeable about your condition?	Yes / No
Were you able to follow their instructions?	Yes / No
Were their communication skills adequate?	Yes / No
Was the student pleasant and friendly?	Yes / No
Comments: _____	

SAMPLE LETTER SENT WITH CI PACKET

Dear Clinical Instructor:

Enclosed in the packet you will find all the grading information you will need. You have two copies of the Clinical Performance Instrument (CPI), a student copy and your copy. I have included instructions for use of the CPI. Please review this document prior to using the CPI. You will find a student orientation checklist that may help on your first day with the student along with a Fieldwork Assessment Form, Skills Checklist, Fieldwork Postcards, and a CI questionnaire. I have provided you with some other information that you may find useful.

Please complete the following during the fieldwork experience:

At Midterm: The Student and CI should each complete the CPI mid-term component *individually and review them together.*

At Final: The Student and CI should each complete the *CPI final component individually.* After these forms have been completed, you should review them together. You should also complete the Skills Checklist together. The Student should complete the Fieldwork Experience Assessment, their assignment, along with any assignment given by the CI.

*****Please see the notice regarding fieldwork postcards.**

As a reminder: The CI and the student are responsible for informing each patient that it is a student that will be working with them and obtaining the necessary verbal permission. A patient can refuse to be seen by a student. If there are ever any complaints regarding a student or the program, please feel free to contact us to assist you.

We welcome all CI's to add or require students to do additional learning experiences, such as an in-service or additional assignments.

Please then return the following completed forms in the self-addressed envelope:

<input type="checkbox"/> Student copy of CPI	<input type="checkbox"/> Fieldwork Assessment Form	
<input type="checkbox"/> CI copy of CPI	<input type="checkbox"/> Skills Checklist	<input type="checkbox"/> CSIF (if requested)
<input type="checkbox"/> CI questionnaire	<input type="checkbox"/> Student Assignments	

In addition, **please note** ***When the CI teaches a treatment method that has not been presented in the academic setting, it is the responsibility of the CI to define the level of competence for that particular technique. It is also the responsibility of the CI to determine if and when the student should apply the technique to a patient. If the student has learned the additional technique, please state it in the CPI under 19: Implements a self-directed plan for career development and lifelong learning.*

(continued)

One additional form may be added in your packet. If you have not filled out a Clinical Site Information form (CSIF) in the past 2 years or more, we will send you one to update your information for our files. I know this is a tedious form, but it is very important for accreditation of our program. The CSIF may be completed on these forms and returned to my attention. If you prefer, the CSIF is available online. You may go to the APTA website: www.apta.org . Here, you can search CSIF and follow instructions for downloading the forms. The form can be mailed to me or emailed to jonesks@herkimer.edu . If you choose to do this online, I suggest saving it and simply updating it when you are asked for a new one or another college is asking for one.

Thank you for your time.

Sincerely,

Karen S. Jones, PT, DPT, DCE

CLINICAL AFFILIATION SELECTION OF SITES POLICY

Purpose: To ensure each student has met the criteria and had a well-rounded experience of clinical fieldwork.

Procedure:

1. All students are required to present proof of successful completion of prerequisites. Students who have not successfully completed prerequisites for Clinical Fieldwork will not be eligible to go out on their fieldwork assignments. Students that do not have health/accident insurance in force on the due date of the preference sheets may submit their other completed information. They will be considered “on time”. However, it remains their responsibility to provide the DCE with their coverage no later than 8 weeks prior to their scheduled fieldwork.
2. Placements are made by the DCE when all requirements are met.
3. Each student’s Clinical Fieldwork experiences will include a variety of sites. It is to the students benefit to vary clinical experience to have a well-rounded resume. Every student will be required to have at least one placement at one of the following clinical affiliations: acute care, sub acute care, or rehabilitation hospital.
4. The students are given a list of sites to choose from based on Facility Commitment forms which each site has filled out and determined how many students they will take and at what time frame.
5. The students can only choose from this list. If they want another site that is not on this list, the DCE needs to speak with the site and develop a contract prior to this being an option for the student. This ensures the sites the students are picking are suitable sites.
6. The DCE maintains a grid that charts each student’s fieldwork experiences in their clinical folders. The student cannot go to the same site twice, but they can go to two similar sites if that is their area of interest, provided one of the three sites is acute/sub acute or rehab.
7. The students meet with the DCE to discuss the first clinical and suggestions may be given as to what type of site they might look to choose for their next fieldwork.
8. The student’s first clinical experience is generally determined by a “lottery” type of system. The students choose their top 10 choices with the above criteria in mind and the DCE compares them. Any person choosing a site for #1 that no one else has chosen for #1 gets the site. If more than one person selects a certain site, then a name is drawn and this continues until each person has a site, moving on to number 2, 3, 4, and down the list.

9. The student's second clinical experience is chosen by the order in which they brought all of the necessary information to the DCE. The first person to have all information provided chooses the second fieldwork site first and so on. Again, the students need to keep the above criteria in mind.
10. The students meet with the DCE to discuss the second clinical and suggestions may be given as to what type of site they might look to choose for their final fieldwork.
11. The final fieldwork is a lottery similar to the first one, except that anyone needing acute, sub acute, or rehabilitation is given top priority to choose one of the sites that would fulfill this criteria prior to the other students choosing.
12. Due to the limited availability of local clinical sites, students enrolled in the PTA Program are informed that they must be prepared to travel to participating facilities regardless of location.
13. The student is responsible for securing transportation, room and board, as well as their related costs, during fieldwork.
14. It is suggested that the student may want to plan their choices so that their final placement (PT 280) can be at a facility that is similar in type to that in which they see themselves employed. A number of our prior graduates have been hired for their first job at the site of their final Clinical Fieldwork.

Responsible: DCE, Student

CLINICAL AFFILIATION FAILURE/STUDENT MUST REESTABLISH COMPETENCY POLICY

Purpose: To ensure an adequate knowledge base, and clinical base to ensure patient safety prior to student repeating a previously failed clinical affiliation.

Procedures:

A. Competency Prior to Repeated Clinical Affiliation Procedure

Depending on the reason for the student's failure, the faculty will determine an appropriate remediation for the student.

1. A student who failed a clinical affiliation will be given additional cognitive assignments (written, reading) and psychomotor assignments prior to being allowed to retest in clinical competencies.
2. A student who failed a clinical affiliation must retest in all program competencies by all faculty prior to being allowed to return to a clinical in which they were deemed to have failed.

B. A student who is not competent will not be allowed to participate in a clinical situation and will be counseled in another career option.

Faculty may determine that repeated coursework and/or repeated classes may need to occur when it has been determined through Clinical Instructor feedback that a student has not retained enough information to complete the clinical fieldwork. The DCE and the Program Director will then determine which classes the student must repeat prior to going back out on a clinical fieldwork. As stated in the Student Handbook, "In the event that the off-step student has no scheduled clinical classes in the semester preceding a scheduled clinical affiliation, the student must enroll in a clinical class. This policy is designed to produce safe practitioners who are prepared to meet the challenges and effectively provide treatment interventions while on clinical affiliations." The new fieldwork will be scheduled at a regularly scheduled fieldwork time slot.

Faculty Responsible: Program Director, DCE

CLINICAL GRADING POLICY

Purpose: To delineate the individual who maintains the responsibility for determining that the objectives of the clinical affiliations have been met or exceeded and to assign the grade of “Pass” or “Fail” and to submit that grade to the Registrar.

Procedure:

1. The DCE sends all information and materials regarding the student’s clinical objectives, Clinical Performance Instrument to the CCCE in the clinical packet.
2. The DCE instructs the new CCCE or the new CI about the significance of the “significant concerns box” and they are advised to contact the DCE immediately with concerns.
3. The DCE makes mid-affiliation phone visit to each site and speaks with both the CI and the student.
4. The DCE will attempt to visit at least one of the student’s three clinical affiliations dependent on location.
5. The DCE collects input on the student’s performance including verbal and written feedback from the CI including the CI’s impression of the student’s performance in terms of meeting the affiliation’s objectives.
6. The DCE observes and meets with the student DCE on site visits.
7. The DCE discusses the clinical affiliation with the student.
8. The DCE reviews patient satisfaction postcards.
9. The DCE reviews the Clinical Performance.
10. The DCE grades the student’s written assignment.
11. The DCE uses all of the input and considers the CI’s assessment and comments on the CPI and decides on if the student has or has not met the learning objectives of the clinical.
12. The DCE may consult the program director if she has concerns and discuss a student’s progress.
13. The DCE is solely responsible for grading the student’s clinical affiliation and submitting the grade to the Registrar.

GRADE DETERMINANTS: PT 206

By the end of this fieldwork experience:

This class is graded on a Pass/Fail. The individual CI of each student will complete necessary paperwork including the Clinical Performance Instrument. The information provided on this document, along with information provided to the DCE during phone or site visits will allow the DCE to make a determination of Pass or Fail for this clinical fieldwork experience.

The following rubric will be used to assess the Student Learning Outcomes for this course:

- The DCE will determine whether the student has met the criteria on the CPI of being between Beginner and Advanced Beginner Performance as rated by the Clinical Instructor.
- The DCE will also take into account the written information in the CPI provided by the Clinical Instructor.

GRADE DETERMINANTS: PT 255

By the end of this fieldwork experience:

This class is graded on a Pass/Fail. The individual CI of each student will complete necessary paperwork including the Clinical Performance Instrument. The information provided on this document, along with information provided to the DCE during phone or site visits will allow the DCE to make a determination of Pass or Fail for this clinical fieldwork experience.

The following rubric will be used to assess the Student Learning Outcomes for this course:

- The DCE will determine whether the student has met the criteria on the CPI of being between Advanced Beginner and Advanced Intermediate Performance as rated by the Clinical Instructor.
- The DCE will also take into account the written information in the CPI provided by the Clinical Instructor.

GRADE DETERMINANTS: PT 280

By the end of this fieldwork experience:

This class is graded on a Pass/Fail. The individual CI of each student will complete necessary paperwork including the Clinical Performance Instrument. The information provided on this document, along with information provided to the DCE during phone or site visits will allow the DCE to make a determination of Pass or Fail for this clinical fieldwork experience.

The following rubric will be used to assess the Student Learning Outcomes for this course:

- The DCE will determine whether the student has met the criteria on the CPI of being between Advanced Intermediate Performance and Entry Level as rated by the Clinical Instructor.
- The DCE will also take into account the written information in the CPI provided by the Clinical Instructor.

Responsible: DCE

CLINICAL INSTRUCTOR EDUCATION AND DEVELOPMENT POLICY

Purpose: To ensure that the clinical instructors who work with our students have adequate knowledge/skills, that they demonstrate both the professional and ethical behaviors expected of the profession and seek lifelong learning opportunities as part of their professional growth to be effective role models as they work with our students.

Procedures:

1. The DCE sends out Clinical Site Information Forms developed by the APTA. The sites are instructed to complete this information and return it to the DCE. This form contains information as to the background of each of the PT employees at a facility and their credentials.
2. The DCE reviews the completed CPI.
3. All Clinical Instructors are expected to have at least one year of clinical experience prior to taking a student.
4. The DCE discusses the CI clinical experience requirement with the CCCE at each clinical site prior to the student working with a clinician.
5. The DCE makes observations of the clinical faculty during site visits and phone visits with the clinical faculty.
6. The DCE collects student feedback regarding the clinical instructor and the clinical facility by using the Fieldwork Experience Assessment form and through discussion with the student during the one to one post Fieldwork conferences.
7. The DCE uses the information from the CPI, personal observations and student feedback to develop educational offerings for the clinical faculty.
8. The DCE will make a site visit for onsite training if this is the most appropriate action for a single site or local issue.
9. The DCE has a Training Program Manual for Clinical Instructors which she will use to discuss issues that may arise with students or help to prepare a new clinician for taking students.
10. The DCE will research a question for a clinician and provide a response or information quickly as possible and address any concerns they might have.
11. If, for any reason, the DCE determines the CI is not meeting the needs of students, the DCE will discuss any concerns with the CI and provide the CI with any clinical training educational material necessary to help the CI.
12. If concerns regarding a CI continue following the discussion and training by the DCE, the DCE can determine that the CI will not be eligible to work with students in the future unless all issues are resolved.

13. The DCE holds yearly Clinical Council meetings.
14. The DCE will select a topic and speaker for the Clinical Council meeting based on assessment of the clinical education program, suggestions from our Advisory Committee, from questions or issues raised by several clinicians to the DCE or ideas suggested by the clinicians who attended previous meetings.
15. The general Clinical Council meeting format will consist of a speaker coming in to discuss current issues and hot topics in the PT world.
16. The DCE determines the area of interest based on this feedback and searches to find speakers to best portray the information that is needed. Often times, speakers may be other clinicians who are “experts” in a certain area that they are interested in speaking on.
17. The DCE reports on clinical faculty education, needs and development at the department meetings.

Responsible: DCE

CLINICAL SITE DEVELOPMENT POLICY

Purpose: To ensure our PTA program has an adequate number of sites and reservations for each clinical fieldwork in relation to the number of students.

Procedure:

1. The DCE sends out the fieldwork reservation forms for the following year.
2. The DCE keeps a list on the computer of sites taking students for each clinical rotation.
3. If the DCE sees that there are more students needing sites than sites available for a particular rotation, the DCE calls sites to see if they might be able to take a student for that particular time slot.
4. If there is still a lack of sites, the DCE would then call additional sites to set up a new contract. This may be a site closer to a student's home, or one developed by the DCE networking amongst other Physical Therapists.

Responsible: DCE

CLINICAL SITE/STUDENT WHO NEEDS TO BE REMOVED POLICY

Purpose: To ensure an adequate knowledge base and clinical base to ensure patient safety while a student is participating in a clinical affiliation.

Procedures:

Whether it is due to student incompetence, a safety concern of patients and staff, or safety concern of the student, a CI can choose to speak with the DCE at any time during the clinical fieldwork to have the student removed from the clinical site. It is our expectation that the CI would give the DCE full detail of the reason for removal so that it can be discussed with the student. If the student is lacking skills that need to be addressed, please refer to Clinical Affiliation Failure/Student Must Reestablish Competency Policy. If a safety issue is addressed, the student needs to prove competence in that area prior to being sent on any further clinical fieldwork. This will be done as a clinical competency examination in which both the Program Director and the DCE will establish a scenario to resemble that of the areas the student is weak in and the student must pass this competency with an 8 or better on a 0-10 scale.

Faculty Responsible: Program Director, DCE, Clinical Faculty

FERPA POLICY

Purpose: to make students and clinicians aware of College policy and how it applies on clinical fieldwork.

Law: FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974 (BUCKLEY PELL AMENDMENT)

Pursuant to this law, the following directive regarding FERPA should be strictly construed. Once a student reaches the age of eighteen, or is attending an institution of post-secondary education (regardless of age), all of the rights previously accorded to the parents are transferred to the student. No personally identifiable student information may be released to third parties without the student's written request. Exceptions are:

- Federal or State educational program audit
- Court order or subpoena
- Other college officials and faculty who have legitimate educational interests
- Certain Federal and State officials
- Organizations conducting studies for educational agencies
- Accrediting agencies
- In connection with student's applications for or receipt of financial aid
- Officials of other schools to which the student is transferring

Parents may obtain personally identifiable information only if the student is proven to be an IRS dependent, or if the student provides a written release for the same. Parental requests must be made in writing and must specify what information is requested and why. The following is an exception to this rule:

- Students have the right to request in writing that personally identifiable information not be released to specific parties or to classes of parties, including the parents.

Colleges are obligated to maintain a list of parties who have requested or gained access to the records, what records were released, and the interest the parties may have in examining them.

The Act permits the College to release the following directory information without the student's written permission:

Name	Major
Home/Campus Address	Dates of Attendance
Telephone numbers	Degrees Conferred
Date of Birth	Previous Institutions
Place of Birth	Past and present participation in
Physical Factors (height, weight)	sports and activities

Administrators, faculty and staff should not release any personally identifiable student information to third parties (parents included) including information regarding student grades and/or attendance. Release of this information without the student's written approval constitutes a violation of the law.

All requests for personally identifiable student information by third parties should be directed to the Dean of Students' office.

Procedure:

1. On clinical, if a student's family member or friend asks questions about a student, the clinical instructor (CI) may not reveal any information.
2. The CI should contact the DCE if further questions arise.
3. The DCE will contact the Dean of Students and explain the situation.
4. The Dean of Students is the only person who may reveal information to family members about a student.
5. Friends are never at liberty to have any information about a student's clinical performance.

Responsible: CI, DCE, Dean of Students

SEXUAL HARASSMENT ON CLINICAL AFFILIATION POLICY

Statement: The student will not sexually harass a patient and the student will not become a victim of sexual harassment while on clinical affiliation. It is imperative that the student understand what constitutes sexual harassment and what to do about it if it occurs. For example it can take many forms, including: unwanted physical contact like touching and grabbing, rude jokes or suggestive remarks, inappropriate staring, embarrassing whistles or similar sounds or insulting remarks about sexual orientation. If you are uncomfortable it is inappropriate. Reporting a situation that makes you uncomfortable will not negatively affect your clinical or how you are graded.

Purpose: to identify the students responsibility if sexual harassment should occur when you are on clinical.

Procedure:

1. Don't wait until the patient leaves excuse yourself e.g. say you need a piece of equipment and leave the patient.
2. Go to your CI and explain what happened.
3. Your CI will take over the session and not reschedule the patient to you in the future or allow the situation to reoccur.
4. If you feel the situation has not resolved call the DCE immediately.

Responsible: DCE, Students, CI

NEW CLINICAL SITE/NEW CLINICAL INSTRUCTOR POLICY

Purpose: To explain the procedure that occurs when a new clinical site is being added and or a new clinical instructor is going to start working with students.

Procedure:

A. For a new clinical site

3. The clinical site information is provided to the DCE. This information includes Site Name, CCCE, site address, phone number, fax number, and a valid email for the CCCE.
4. The DCE makes a phone contact and speaks with the CCCE or person at the site that has determined that a contract can be set up. The confirmation is made between the site and the DCE.
5. The DCE enters the information into the contact list.
6. The DCE emails the division secretary and asks her to mail a new contract to the site.
7. The division secretary mails or emails out the contract to the site and asks the CI to mail back two signed copies of the contract. Along with the contract, the secretary will mail a commitment form to the site to see what clinical placements they can offer and information on how to enter the CSIF in CPI web.
8. The contract is then signed by the Provost and the division secretary mails one copy back to the clinical site for their records and one is put in the contract binder in the division secretary's office.
9. Once the contract is in place, the site can be available for placement of a student.

B. For a new clinical instructor

1. The DCE speaks directly with the new clinical instructor regarding taking a student and their level of comfort.
2. The DCE emails or sends in the mail instructions on CPI web training. The clinician is told that if they have any technical issues they should contact CPI web and are given the phone number and email. The clinician is told that if they have any specific CPI questions, to contact the DCE.
3. The DCE mails all clinical information to the clinician prior to the start of the clinical. The CI is instructed to contact the DCE if any questions arise.
4. The clinician is instructed of how to access the program handbook, which includes fieldwork information.
5. The clinician is made aware the DCE is available by email or phone should they want any specific information.
6. The CI is sent mailings regarding clinical council meetings and at all meetings, the DCE is available to go over clinical questions to the group present or go over individual questions.
7. The DCE offers to go over ideas with the clinician prior to the clinical and at the midterm during the site visit.
8. The DCE suggests the clinicians consider taking the CI credentialing class and may offer suggestions from the Credentialed Clinical Instructor program such as weekly planning with the student and CI. Other suggestions are offered as needed and are sometimes from the Curtis Training program for Clinical Instructors.
9. The DCE at all times keeps an open line of communication with the CI for emails or phone calls. When possible, the site visit will be on site instead of a phone call, unless it is not possible to arrange based on distance or time constraints of the site. In the case of a phone call Skype can be offered if needed or a phone call can simply be made. The clinician is asked if they have any concerns.
10. The DCE reviews the CPI data from the clinician and the student and provides feedback at midterm and at the final evaluation.

11. If the CI is incorrectly filling out the CPI, the DCE will have a conversation with the CI to better explain the correct procedure.
12. The DCE reviews the fieldwork experience assessment and provides feedback to the clinician if necessary.

Responsible: DCE

APPENDIX

APPENDIX A

PHYSICAL THERAPIST ASSISTANT COURSE DESCRIPTIONS

PT 121 Introduction to Rehabilitation

3 Credits (3,0)

This course defines for the student the role of the physical therapist assistant and his/her place as a member of the rehabilitation team. The student learns the history of the profession of physical therapy and is introduced to its professional association, the American Physical Therapy Association (A.P.T.A.). The rehabilitation philosophy, therapeutic communication, medical and professional conduct, ethics, New York State Education Law, federal and state laws impacting physical therapy, the referral process, patient dignity, patient rights, domestic violence and individual and cultural differences are discussed. The Disablement model, International Classification of Functioning, Disability and Health (ICF) model, the elements of effective patient/client management, plan of care, participation in the operation of a physical therapy service, infection control, clinical problem solving and judgment making, interventions and outcomes are discussed utilizing the Guide to Physical Therapist Practice. The student is introduced to infectious diseases and immune system conditions and discusses the therapy implications for the physical therapist assistant. The student learns the basics of medical terminology and documentation. Co-requisites: PT 131 and PT 132.

PT 131 Clinical Procedures I – Basic Procedures

1 Credit (0,3)

This lab course is designed to introduce the physical therapist assistant to a variety of basic skills and techniques which make up the patient's plan of care. Basic patient care skills are learned with consideration for safety and patient comfort. Students are introduced to safety, body mechanics, positioning, patient transfers, gait training with a variety of ambulatory aids and activities of daily living. Students also study architectural barriers and are presented with physical challenges within the environment. Co-requisites: PT 121 and PT 132.

PT 132 Clinical Procedures I – Physical Agents

3 Credits (2,3)

This course is designed to introduce the physical therapist assistant to a variety of basic skills and techniques which make up the patient's plan of care. Students are introduced to the application of physical therapy physical agent interventions including specific physics concepts as they apply to the application of physical agents. Students are expected to demonstrate competency in the application of these skills. Co-requisites: PT 121 and PT 131.

PT 141 Clinical Kinesiology for Physical Therapist Assistants

4 Credits (3,3)

This detailed study of the human body focuses on the internal and external forces acting on the body to produce movement. Students will study the structure of specific joints and how the structure affects their movement and the function of muscles when acting individually and in

combination with other muscles. Practical experience will include analysis of the components of human motion, including palpation of bones and ligaments and muscles on the human body. In addition, students will learn to perform posture and gait analysis. Prerequisite: SC 253. Co-requisites: PT 142 and PT 143.

PT 142 Clinical Procedures II – Data Collection

3 Credits (2,3)

This course builds the students' repertoire of clinical skills and techniques and continues to prepare the physical therapist assistant student for implementing the physical therapist's plan of care. The student learns data-collection skills including measuring joint range of motion using a goniometer or other tools, muscle length testing, sensory, reflex, balance and coordination testing, cranial nerve testing and manual muscle testing, vital sign collection, anthropometric data collection and blood chemistry review. The student is expected to demonstrate competency in all data collection skills. Prerequisites: PT 121, PT 131, PT 132 and SC 253. Co-requisites: PT 141 and PT 143.

PT 143 Clinical Procedures II – Advanced Procedures

2 Credits (1,2)

This course builds the students' repertoire of clinical skills and techniques and continues to prepare the physical therapist assistant student for implementing the physical therapist's plan of care. The student is introduced to the intervention of therapeutic exercise including passive range of motion, stretching, strengthening, PNF, balance, aerobic, aquatic and other exercise techniques. The student learns the principles and application of massage. The student is introduced to integumentary system, wounds, wound care, bandaging and compression techniques including the clinical implications for physical therapist assistant. The student is introduced to the hematological system disease pathology including the clinical implications for physical therapist assistant. The student is expected to demonstrate competency in the application of components of the physical therapists plan of care including the interventions of therapeutic exercise, massage and wound care. Prerequisites: PT 121, PT 131, PT 132 and SC 253. Co-requisites: PT 141 and 142.

PT 206 Clinical Fieldwork I

3 Credits

Clinical Fieldwork I begins the fieldwork series for the PTA student. Five weeks (200 hours) of full-time clinical experience are required. The student now has the opportunity to interact with patients and professional staff in a health care facility. This placement allows the student to gain experience in the skilled application of techniques learned in PT 121, PT 131, PT 132, PT 141, PT 142 and PT 143, including ambulation and transfer training, modality application and therapeutic exercise. Prerequisites: PT 121, PT 131, PT 132, PT 141, PT 142, PT 143, SC 253 and SC 254. Student must be First Aid and CPR certified and provide all required CPR, First Aid and health record documentation.

PT 251 Clinical Procedures III – Orthopedic

3 Credits (2,3)

The student will study physical therapy interventions for musculoskeletal conditions. Pathology related to these conditions will be discussed. Orthopedic musculoskeletal, soft-tissue and connective tissue conditions are covered. This course also discusses orthopedic pediatric and geriatrics. Each joint is discussed in lecture with progression treatment techniques covered in lab. Wellness, obesity, pharmacology, and diagnostic imaging are discussed. This course is taken simultaneously with PT 252 (Neurological). Prerequisites: PT 121, PT 131, PT 132, PT 141, PT 142, PT 143, SC 253 and SC 254.

PT 252 Clinical Procedures III – Neurological

4 Credits (3,3)

The student will study physical therapy direct interventions for neuromuscular conditions. Normal developmental sequences and reflexes are covered. Pathologies relating to neuromuscular conditions will be discussed. Congenital and early childhood disorders covered in this course include cerebral palsy, Down's syndrome, spina bifida, spinal muscular atrophy, autism, Asperger's Disorder, and muscular dystrophy. Acquired disabilities covered in this course include cerebral vascular accident, traumatic brain injury, spinal cord injury, multiple sclerosis, Parkinson's disease, amyotrophic lateral sclerosis, muscular dystrophy, along with other neuromuscular diseases and peripheral nerve injuries. This course is taken simultaneously with PT 251 (Orthopedic). Prerequisites: PT 121, PT 131, PT 132, PT 141, PT 142, PT 143, SC 253 and SC 254.

PT 255 Clinical Fieldwork II

4 Credits

Five weeks (200 hours) of full-time clinical experience are included in Clinical Fieldwork II. During this second affiliation, the student is given the opportunity to refine treatment skills and, depending on the facility assigned, acquire alternate treatment protocols. This level allows the student to gain experience in the application of skills and techniques learned in PT 251 and PT 252 for the Neuromuscular and Musculoskeletal practice patterns. Prerequisite: Successful completion of PT 251 and PT 252. Student must be First Aid and CPR certified and provide all required CPR, First Aid and health record documentation.

PT 260 Clinical Procedures IV – Complex Interventions**2 Credits (1,3)**

This course is designed to allow the student to study the disease processes and rehabilitation concepts of cardiopulmonary disorders, pulmonary disease, burns, diabetes, peripheral vascular disease, cancer, visual and auditory impairments, amputations, prosthetics and orthotics, along with death and dying. The student will gain hands-on practice in rehabilitation of these disorders and the psychological considerations of each. Prerequisites: PT 121, PT 131, PT 132, PT 141, PT 142, PT 143, PT 251, PT 252, SC 253 and SC 254.

PT 275 Clinical Procedures IV – Other Systems**1 Credit (0,2)**

This course continues to build the students' repertoire of clinical skills and techniques and continues to prepare the physical therapist assistant student for implementing the physical therapist's plan of care. This course introduces the student to women's health issues, men's health issues and other systems (endocrine, metabolic, gastrointestinal, urinary and renal) disease pathology including the clinical implications for physical therapist assistant. The student also discusses pharmacology and the implications for patient care. The student is prepared to take a Comprehensive Program Final Examination. Current professional topics are discussed as appropriate. Co-requisite: PT 260.

PT 280 Clinical Fieldwork III**5 Credits**

The student has now gained the academic background to complete his/her degree. Six weeks (240 hours) of full-time clinical experience are included in Clinical Fieldwork III. During this final affiliation, the student is given more exposure to alternate treatment protocols. They will refine treatment skills learned in the final semester, as well as become more efficient with documentation and interventions. Prerequisite: successful completion of all other degree requirements and a minimum 2.5 GPA. Student must be CPR certified and provide all required CPR, First Aid and health record documentation.

APPENDIX B

ADDITIONAL PROGRAM COSTS

- **Yearly Physical and ppd**
- **CPR/First Aid**
- **Clinical Handbag**
- **APTA Membership**
- **Malpractice Insurance**
- **Exam Prep Fee (senior year) Board Review**
- **Physical Therapy Licensing Fee – per semester (used to help pay for board exam upon completion of program)**
- **Medical Textbooks are expensive but students are expected to keep these throughout the program**
- **PT 206 (summer) Clinical Fieldwork**

APPENDIX C

PT 206 Clinical Fieldwork I 3 Credits

COURSE DESCRIPTION

Clinical Fieldwork I begins the fieldwork series for the PTA student. Five weeks (200 hours) of full-time clinical experience are required. The student now has the opportunity to interact with patients and professional staff in a health care facility. This placement allows the student to gain experience in the skilled application of techniques learned in PT 121, PT 131, PT 132, PT 141, PT 142 and PT 143, including ambulation and transfer training, modality application and therapeutic exercise. Prerequisites: PT 121, PT 131, PT 132, PT 141, PT 142, PT 143, SC 253 and SC 254. Student must be First Aid and CPR certified and provide all required CPR, First Aid and health record documentation.

COURSE OBJECTIVES

This course is designed to:

4. Provide the student with 5 weeks (200) hours of full time clinical experience engaging the student in interaction with patients and staff in a health care facility with services specified within the physical therapists plan of care.
5. Engage the student in working with other healthcare providers, patients, and families to interact with appropriate communication and to demonstrate a good understanding of safe, ethical, and legal practice.
6. Involve the student in direct patient care carrying out a treatment plan of a physical therapist, documenting, and billing, while realizing their own limitations, scope of practice, and function within the facility.

APPENDIX D

PT 255 Clinical Fieldwork II 4 Credits

COURSE DESCRIPTION

Five weeks (200 hours) of full-time clinical experience are included in Clinical Fieldwork II. During this second affiliation, the student is given the opportunity to refine treatment skills and, depending on the facility assigned, acquire alternate treatment protocols. This level allows the student to gain experience in the application of skills and techniques learned in PT 251 and PT 252 for the Neuromuscular and Musculoskeletal practice patterns. Prerequisite: Successful completion of PT 251 and PT 252. Student must be First Aid and CPR certified and provide all required CPR, First Aid and health record documentation.

COURSE OBJECTIVES

This course is designed to:

1. Provide the student with 5 weeks (200) hours of full time clinical experience engaging the student in interaction with patients and staff in a health care facility with services specified within the physical therapists plan of care.
2. Engage the student in working with other healthcare providers, patients, and families to interact with appropriate communication and to demonstrate a good understanding of safe, ethical, and legal practice.
3. Involve the student in direct patient care carrying out a treatment plan of a physical therapist, documenting, and billing, while realizing their own limitations, scope of practice, and function within the facility.

APPENDIX E

PT 280 Clinical Fieldwork III

5 Credits

COURSE DESCRIPTION

- Prerequisites:** Successful completion of all other degree requirements and a minimum 2.5 GPA
Student must be CPR certified and provide all required CPR, First Aid, and health record documentation
- Text Required:** Fieldwork Handbook
- Assignment:** Paper required by DCE
Other assignments as required by clinical facility

The student has now gained the academic background to complete his/her degree. Six weeks (240 hours) of full-time clinical experience are included in Clinical Fieldwork III. During this final affiliation, the student is given more exposure to alternate treatment protocols. They will refine treatment skills learned in the final semester, as well as become more efficient with documentation and interventions. Prerequisite: successful completion of all other degree requirements and a minimum 2.5 GPA. Student must be CPR certified and provide all required CPR, First Aid and health record documentation.

COURSE OBJECTIVES

This course is designed to:

1. Provide the student with 6 weeks (240) hours of full time clinical experience engaging the student in interaction with patients and staff in a health care facility with services specified within the physical therapists plan of care.
2. Engage the student in working with other healthcare providers, patients, and families to interact with appropriate communication and to demonstrate a good understanding of safe, ethical, and legal practice.
3. Involve the student in direct patient care carrying out a treatment plan of a physical therapist, documenting, and billing, while realizing their own limitations, scope of practice, and function within the facility.

APPENDIX F

**HERKIMER COLLEGE
PRACTICUM/INTERNSHIP NONDISCRIMINATION AGREEMENT**

Internship/practicum site	_____
	(please print)
Faculty member	_____
Internship supervisor	_____
Student	_____
Course number and title	_____
Semester	_____

The internship or practicum site listed above agrees to accept students for assignment to jobs without regard to race, color, gender, age, creed, religion, national origin, marital status, disability, or any other characteristic protected by federal or state law and to maintain nondiscriminatory treatment throughout the course of that assignment.

Faculty member's signature	Date
_____	_____

Internship/practicum supervisor's signature	Date
_____	_____

Student's signature	Date
_____	_____

APPENDIX G

HERKIMER COLLEGE PTA Program

STUDENT ORIENTATION CHECKLIST

- ✓=YES
1. Has the student's duties and their relationships to the overall function of the Department been explained? _____
 2. Has the student been advised to whom to report? _____
 3. Have the rules and regulations of the Department, hours of work, lunch break, use of telephone, parking, physician contact and use of the library been explained? _____
 4. Has the internal disaster (Fire/Code Red), external disaster, Code Yellow and Code Blue been explained, and the student's function been explained? _____
 5. Has the fire extinguishers' location and use been reviewed? _____
 6. Has the Patient/Visitor Incident Reporting procedure and proper method to report on-the-job injuries been explained? _____
 7. Has the importance of working steadily and the proper procedure to follow in reporting absences and tardiness been explained? _____
 8. Has the student met health examinations? _____
 9. Have professional ethics and confidentiality been explained? _____
 10. Has the Hazards/Right to Know Act been explained? _____
 11. Have the hazardous chemicals and MSDS in the Department been identified and their location pointed out? _____
 12. Has the student been on a tour of the Department and shown the location of equipment and supplies? _____
 13. Has the student been on a tour of the Hospital/Facility? _____
 14. Has the student been introduced to the entire staff? _____

(Student's Signature and Date)

(Supervisor's Signature and Date)

APPENDIX H
HERKIMER COLLEGE
PTA PROGRAM
CLINICAL SITE VISIT REPORT

STUDENT: _____ CI: _____

COURSE #: _____ DATE: _____ PERFORMED BY: _____

WEEK OF AFFIL: _____ PHONE VISIT _____ ON-SITE VISIT _____

<p style="text-align: center;">Clinical Instructor:</p> <p>A. Types of Patients treated (diagnosis/how often treated)</p> <p>B. Quality of Care delivered Type of Supervision required Safety Note writing Problem solving skills/Assimilation of New Skills Ability to Progress Patients</p> <p>C. Professionalism/Interpersonal Skills Organizational Skills/Use of Free Time/Adaptability Ability to Evaluate Self Accepting Criticism/Input Communication Skills</p> <p>D. Additional Learning Experiences</p> <p>E. Clinical Skills Assessment: Treatment:</p> <p>F. Overall Strengths</p> <p>G. Identified Areas Needing Improvement (Have these areas been discussed with Student? Yes___ No___)</p> <p>H. Any specific gaps in student's academic preparation for this rotation?</p> <p>I. Other Comments</p>	<p style="text-align: center;">Student discussion: Evaluation of Self and Clinic</p> <p>A. Strengths: of Student of Clinic</p> <p>B. Identified areas needing improvement of Student of Clinic</p> <p>C. Patient Case Load/Variety of Diagnoses</p> <p>D. Feedback from CI (Frequency, type, etc.)</p> <p>E. Type of Supervision received</p> <p>F. Topic of In-service/Case Study/Additional Learning Experiences</p> <p>G. Three goals established by student to be met by final day of affiliation</p> <p>H. Any specific gaps in your academic preparation</p> <p>I. Other Comments</p>
<p style="text-align: center;">PTA FACULTY SUMMARY:</p> <p>_____ Progressing very well;</p> <p>_____ Superb performance; No concerns</p> <p>_____ Progressing well;</p> <p>_____ Will complete with good clinical experience Gained; No concerns</p> <p>_____ CI expressed minor concerns; Counseled student</p> <p>_____ Counseled at length with CI and student (Additional narrative required)</p>	

On a scale from 1 to 10 (with 10 representing Entry Level PTA for this facility), please indicate on the scale below the **CLINICAL SKILL** level of the student at the time of the Midterm Evaluation:

1 _____ 5 _____ 10 _____

On a scale from 1 to 10 (with 10 representing Entry Level PTA for this facility), please indicate on the scale below the **PROFESSIONALISM** level of this student at the time of the Midterm Evaluation:

1 _____ 5 _____ 10 _____

RECOMMENDATION:

_____ No further action needed

_____ Follow-up phone call needed, scheduled for _____

_____ Requires immediate action (specify current plan)

APPENDIX I
HERKIMER COLLEGE
PTA PROGRAM

FIELDWORK EXPERIENCE ASSESSMENT

Clinical Education Site

Date of Clinical Education Experience

Please indicate which Clinical Education Experience this was for you by circling:

1st Experience
PT 206
(initial placement)

2nd Experience
PT 255
(intermediate placement)

3rd Experience
PT 280
(final placement)

Purpose of Evaluation Form

To gain the student's opinions concerning their clinical education. Your comments, both positive as well as negative, are very helpful in our attempt to provide the best clinical experience possible.

Instructions

Please complete this evaluation at the end of your clinical education experience at this site. Place a check in all appropriate spaces. Some questions may not apply to your clinical education experience because of the type of site or the length of time you spent at the site. In these instances, please use the not applicable (NA) response.

Please check the following information obtained by your initial phone contact with your CCCE or CI prior to your clinical experience.

	Not available, would not have helped.	Not available, would have helped.	Available, not helpful.	Available and helpful.
Directions to center				
Person to contact if any assistance is needed				
Schedule of working hours				
Dress Code				
Cars and Parking				
Special meetings or programs				
Optional learning experiences				
Personnel policies				
Rules & regulations				
Room and Board				
Other _____ _____				

ORIENTATION

Please check the items below that were covered during your orientation:

	Yes	No
Administrative structure of department	_____	_____
Introduction of Staff	_____	_____
Tour of the department/facility	_____	_____
Procedure Manual of clinical education	_____	_____
Nature of physical therapy services available	_____	_____
Objectives of clinical experience	_____	_____
Student responsibilities and privileges	_____	_____
Department policy and procedures	_____	_____
Lockers or space to secure personal belongings	_____	_____
Other _____	_____	_____

Were you given adequate orientation to individual patients and responsibilities prior to having the responsibility delegated to you? Yes _____ No _____

Comment:

After the orientation did you have a clear understanding as to what was expected of you?
Yes _____ No _____

Comment:

How would you describe the orientation you received?

Adequate _____ Somewhat Lacking _____ Totally Inadequate _____

Comment: (If not adequate, please give suggestions for improvement)

LEARNING EXPERIENCES

Did you feel that the learning experiences at this center were:

- A. Routine for every student who affiliated with this Physical Therapy service?
 Yes_____ No_____
- B. Modified for each student after considering the student's own previous experience and objectives? Yes_____ No_____

Were on-going changes made in your learning experiences based on the level of competency you demonstrated? Yes_____ No_____

How would you describe your patient load during the majority of your clinical education experience?

_____ Appropriate for your level of education
 _____ Too high _____ Too low

Please comment if too high or too low:

Approximately how many patients do you treat independently per day, if any?

Were the variety of patients adequate for you to meet the objectives of the clinical education experience? Yes_____ No_____

If no, please comment:

Was the equipment of the Physical Therapy Department adequate to meet the objectives of the clinical education experience? Yes_____ No_____

If no, please comment:

Did you participate in preparing the following records or reports:

	Yes	No	N.A.
initial notes (including evaluation notes)			
progress notes			
development of patient goals			
discharge notes			
referral to other services			
referral to other centers			
home care programs			
problem oriented records			
internal audit or records			
external peer review			
attendance or ledger records			
other _____			

Did you have an opportunity to interact with members of other services for consultation, discussion, conferences, rounds, or lectures:

	Yes	No	N.A.
dietetics			
medical records			
nursing service			
occupational therapy			
orthotics and prosthetics			
patient education			
medicine/surgery			
radiology			
social services			
speech therapy			
vocational counseling			
psychology/mental health			
other: _____			

While you were affiliating with this clinical education site, did you have an opportunity to interact with:

A. Students affiliating from other physical therapist or physical therapist assistant programs.
Yes _____ No _____

If yes, please identify the program:

B. Students who were affiliating with other departments within the clinical site?
Yes _____ No _____

If yes, please identify by discipline:

Did you attend or present inservice education programs to the physical therapy staff?

Yes: _____ Attended Subject(s): _____
 _____ Presented Subject(s): _____

No: _____

SUPERVISION

Did you have a clear understanding as to whom you were directly responsible to?

Yes _____ No _____

Did you have adequate opportunity for communication with the clinical instructor to whom you were responsible? Yes _____ No _____

Please describe your opportunities for discussion with your clinical instructor by checking as many responses as are appropriate:

Daily _____ Once per week _____ Whenever necessary _____ Whenever requested _____
 Had to be scheduled in advance _____ Impromptu _____ Seldom _____ Never _____

Comments:

After the clinical instructor became familiar with your level of proficiency, were you given adequate opportunity to “try your wings”? Yes_____ No_____

Based on your experience and skill, how would you describe the degree of supervision you received?

Too close_____ Commensurate with need_____ Not close enough_____

If not commensurate with your need, please comment:

EVALUATION PROCESS

How frequently did you receive feedback on your clinical performance?

Daily or whenever appropriate_____ Midway_____ Final_____

Please comment on how you felt about the type and frequency of feedback given to you during this affiliation:

Were you provided with a private area for meetings with clinical instructors?

Yes_____ No_____

How would you describe the final evaluation of your performance?

Discussed with you prior to completion in writing so that you had an opportunity for discussion before it was finalized. Yes_____ No_____

Discussed before completion in writing, with no opportunity to see the final form. Yes_____ No_____

Discussed after completion in writing. Yes_____ No_____

Not discussed. Yes_____ No_____

AFFIRMATIVE ACTION

Did this clinical site comply with the principles of equal opportunity and affirmative action as required by Federal legislation? Yes_____ No_____ Do not know_____

If no, please cite examples of compliance:

PRIOR PREPARATION

What do you believe were the strengths and weaknesses of your academic preparation for this clinical experience?

Strengths:

Weaknesses:

Identify any new subject matter to which you were exposed during this clinical education experience and indicate if it should be included in the physical therapy education program.

SUMMARY

Based on your past experience in clinical education and your concept of the “ideal” clinical education experience, how would you rate the clinical education experience at this clinical center?

1	2	3	4
A very negative experience; would not recommend to other students	Somewhat negative, and disorganized	Positive, but not a big challenge	A very positive experience; would recommend to any student

Please summarize your comments and make recommendations for this clinical education site.


Summary:

Recommendations:



Student Signature

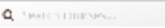


APPENDIX J

Quick Start Guide for the APTA Learning Center

1. Navigate to <http://learningcenter.apta.org> and click 
 - a. Enter your APTA username and password.
 - b. Select "Click here to Continue:"

FORGOTTEN PASSWORD:
Do not purchase or register for courses in the APTA Learning Center using more than one account number. If you've forgotten your password, use the "Forgot your password?" link on the login page to have it emailed to your email address on file.

NEW USER:
Use the buttons  or  on the APTA login page to set up an account prior to purchasing the course.

Once you have set up an account as a New User, please logout and then continue from Step #1 to search and access the PT CPI or PTA CPI online course.
2. Find and "Purchase" the free PT CPI or PTA CPI online course.
 - a. Enter "PT CPI" or "PTA CPI" in the top right Search courses box  to find the course.
 - b. Locate *LMS-120: 2012 PTA CPI* or *LMS-521: 2013 PT CPI* to purchase the correct course on the right side of the page or by scrolling down the page past the filters to view your search results.
 - c. Once you find the correct course, click , click "Add to Cart", click "Shopping Cart", click "Proceed", and then click "OK" to enroll in the free course through the online shopping cart.
 - d. You will be required to login to the APTA website with your username and password prior to being able to purchase the course.
3. Take the PT CPI or PTA CPI online course
 - a. After purchasing the CPI course, return to <http://learningcenter.apta.org> and locate the heading "My Learning Activities" on the top of the APTA Learning Center Home page.
 - b. Click on "My Learning Activities" and then click on the drop down menu "My Courses" page.
 - c. Locate the course purchased "2013 PT CPI" or "2012 PTA CPI".
 - d. Click on  to take the course by reviewing the power point slides and resource attachments.
 - e. Complete the posttest assessment with a score of 70% or higher to pass the course.
 - f. Once you have passed the posttest assessment you can print your CEU certificate.

POP-UPS:
You may need to enable pop-ups for <http://learningcenter.apta.org>, in order to view the course, [learn how](#) on the APTA Learning Center.

LMS-120: 2012 PTA CPI contains material that uses Flash player. Chrome and Internet Explorer still natively play Flash. Firefox requires an add-in. You can find a link to download Flash play on the [System Specs](#) page.
4. Access the PT CPI or PTA CPI Web site
 - a. The academic program with whom you affiliate can provide you with your username (the email address provided to them) to login to CPI Web. If you do not have a password, you will need to use the "I forgot or do not have a password" link to establish a password. The password to login to CPI Web is NOT the same as the password used to login to the APTA Web site.

APPENDIX K

Dear Clinical Instructors,

Please work on completing the PTA CPI training. If you are not aware, you do not need to do this in one sitting. We are trying to work towards using the CPI online rather than all of the paper copies. Many clinicians, who have used this system, have also stated that it is much easier and quicker than the paper version. The course is located on the APTA Learning Center at <http://learningcenter.apta.org>.

You will receive CEU's for completing it as well. If there are any issues with the PTA CPI training, receiving CEU's or receiving the Certificate of Completion, contact the APTA at 1-800-999-2782 x3395 or at learningcenteradmin@apta.org.

Additionally, you can now access the Clinical Site Information Form (CSIF) online through the following link: https://csifweb.amsapps.com/user_session/new OR find CSIF on the CPI web.

You will need an e-mail address and password to log into the site. Once you have completed the CSIF form, please send me an e-mail at jonesks@herkimer.edu to let me know it has been submitted. For the accreditation of the program, we need to show that our clinical sites have completed these forms.

If you have any questions feel free to contact me at the above email. As always, we sincerely appreciate you taking the time to work with our students.

Sincerely,

Karen Jones

APPENDIX L

APTA CSIF Web Instructions for a CCCE

Login to APTA CSIF Web at <https://csifweb.amsapps.com>

1. To access CSIF Web you will need to **login using your username and password from CPI Web.**
2. If you do not recall your username and password, please contact CSIF Web Support at: csifwebsupport@academicsoftwareplus.com

To Start Completing Your CSIF:

1. Click on the **'2011 CSIF Web Surveys'** tab on your home page. It is located near the top of the screen.
2. You will then be brought over to the **'Current Site Surveys'** page. Please select your clinical site from the drop-down menu.
 - a. Once you click on your clinical site, the name of your site will be displayed. You will see the statement: "There is no currently active survey for (the name of your specific site). Who do you wish to work on this survey?" All CCCEs that are registered in CPI Web will have access to edit the CSIFs. If you would like to designate one or more of your CIs to have access to fill out the CSIF, please check the box next to their name.

PLEASE NOTE: If you do not see your particular clinical site in the drop-down menu, please contact CSIF Web Support at: csifwebsupport@academicsoftwareplus.com

3. Click on **'Create Site Survey'** button to begin completing the CSIF.
4. You will see a screen with an overview of all the Topic categories and their associated Sections for the CSIF. **Click on one of the red Topic** names to access the Sections that need to be completed or edited.
5. On the last column on the right, you can click on **'Edit All'** to edit the entire Topic or click on **'Edit Now'** to revise information associated with a particular Section.
6. To complete the CSIF, you will need to type information into the appropriate fields, and select check boxes, radio buttons, and options from a drop-down menu.

Last Updated 7/8/11

APPENDIX L

7. When you are finished editing a particular Section, look for the **Section Sign Off** message. Click the box that says: **'This section has been completed.'**

PLEASE NOTE: If you do not click on the 'This section has been completed' box for each Section, those Sections will be considered still "In Progress".

8. When you are finished editing a Topic, be sure to click on one of the **'Save'** buttons to keep your work for that Topic.
9. Once you click on one of the **'Save'** buttons, all of your work will be saved, and the status for all Sections will show as being **'Completed'** in green lettering. The Last Update column will show the Date and Time that the information was last updated.
10. Click on another **'Topic'** tab on the top of the page to continue completing the CSIF or Log Out if you are finished.
11. To download, save, or print out a copy of your completed CSIF, please follow the below instructions:
 - a. Log into CPI Web using your same username and password for CSIF Web.
 - b. After you have logged into CPI Web, please click on the **'Sites'** tab on your home page.
 - c. On the **'Sites'** tab, you will see the name of your site, and your 100% complete CSIF.
 - d. Click on the **'Export to PDF'** icon.
 - e. Click on the **'Downloads'** tab. **(Please be advised that it could take anywhere from a few seconds or longer to generate your CSIF depending on how much information is contained in your document.) In the event that your CSIF takes a bit longer than expected to generate, please click on the 'Refresh' button in your Internet browser. Your CSIF should then show up as being ready to download.**
 - f. After your CSIF has been generated, please click on the **'Download'** link. Once your CSIF downloads, it will display in a PDF format on your system.
 - g. Please **'Save'** the PDF to your computer. To do this, drag your mouse to the bottom of the page and click on the **'Disk'** icon. This will prompt a **'Save As'** box to appear on your screen. Please **'Save'** your CSIF to an appropriate place on your computer.

Last Updated 7/8/11

APPENDIX L

h. To **'Print'** out a copy of your CSIF, drag your mouse to the bottom of the page and click on the **'Printer'** icon. This will prompt a **'Print'** box to appear on your screen. Please **'Print'** your CSIF to the designated printer connected to your computer.

12. If you decide that you would like to complete part of the CSIF at a given time, but want to finish at a later date, please make sure that you **'Save'** all of the information that you entered in, and then Log Out.

PLEASE NOTE: The 'Log Out' button is located in the upper right hand corner of the screen.

13. To access CSIF Web at a later time to complete your CSIF, please use your same **username and password from CPI Web.**

If you have any questions, comments or encounter any issues using APTA CSIF Web, please contact Support at:

csifwebsupport@academicsoftwareplus.com

Last Updated 7/8/11