



Missouri Western State University
Physical Therapist Assistant Program

CLINICAL EDUCATION HANDBOOK

Academic Year 2022 – 2023
Clinical Dates: March – July 2023



This handbook is written and distributed to clinical education sites for physical therapist assistant students from Missouri Western State University. It is meant to provide additional information that will be helpful in your important role as a partner in educating our PTA students. The faculty of MWSU PTA program appreciate you and value the role you play in shaping our future physical therapy practitioners. We are readily available to assist you if needed. We hope that this handbook is a step toward providing you with resources to support you. Thank you!



TABLE OF CONTENTS

I. PTA Program Information	
University Mission, Vision, Values	5
University Diversity Commitment	5
University Non-Discrimination Statement	5
Program Mission and Philosophy	6
Program Goals and Objectives	7
Program Curriculum	9
II. PTA Clinical Education	
Clinical Education Philosophy	13
Rights and Privileges of Clinical Instructors	13
Clinical Education Timetables	14
Clinical Education Standards	17
Professional Behavior Policy	24
Clinical Course Grading Policy	25
Clinical Course Competency Requirements	28
Student Orientation to Clinical Sites	30
Direction and Supervision of the Physical Therapist Assistant	31
III. Clinical Education Forms	
Clinical Informed Consent	33
Confidentiality Statement	34
Student Health Report	35



I. PTA PROGRAM INFORMATION

- A. University Mission, Vision, and Values
- B. University Diversity Commitment
- C. University Non-Discrimination Statement
- D. Program Mission and Philosophy
- E. Program Goals and Objectives
- F. Program Curriculum



A. UNIVERSITY MISSION, VISION, AND VALUES

MISSION OF MWSU

Missouri Western State University is a student-centered learning community preparing individuals for lives of excellence through applied learning.

VISION OF MWSU

Missouri Western will be the premier open access regional university, known for transforming the lives of our students and the communities we serve.

VALUES OF MWSU

Service – We share the common purpose of serving students, one another, and the people of the region.

Quality – We are committed to the quality of our programs, our students, and our partnership with the people of the region.

Enthusiasm – We are enthusiastic about learning and confident that we can make a difference in the lives of students through their learning.

Freedom – We promote the free exchange of ideas that makes education liberating and democracy unique.

Respect – We act as individuals and as a campus community with respect for diversity and for the best in human potential.

Courage – We seek the challenge and adventure of shaping the future with an increasingly global perspective.

B. UNIVERSITY DIVERSITY COMMITMENT

As a student-centered learning community Missouri Western is dedicated to inclusion and the promotion of diversity as essential to our mission as a public university. This commitment contributes to transforming lives and demonstrates our values of freedom, respect and courage

C. UNIVERSITY NON-DISCRIMINATION STATEMENT

Missouri Western State University actively follows a policy of nondiscrimination in regard to age, race, color, religion, sex, sexual orientation, gender identity or expression, marital status, pregnancy or parental status, national origin, veteran status, genetic information, disability, and all other legally protected classes. This policy applies to educational programs and activities including athletics, instruction, grading, awarding of student financial aid, recruitment, admission, employment, housing, placement and retention of students, faculty and staff. Missouri Western State University pledges continued compliance with all relevant state and federal laws and cooperation with governmental organizations in ensuring equal employment and educational opportunity.



D. PTA PROGRAM MISSION & PHILOSOPHY

MISSION

The PTA program at Missouri Western State University embraces the institution's mission and vision, and is focused on providing a quality educational program that encourages life-long learning and professional growth, enabling its graduates to initiate successful careers, function as a valuable member of the health care team, and be leaders in the profession and the community.

PHILOSOPHY

In keeping with the mission of Missouri Western State University and the PTA program, the philosophy of the PTA program is to provide a curriculum that integrates theoretical and practical knowledge, and clinical experiences to develop skills that physical therapist assistants need to begin practice at entry level and to respond to trends in practice and future physical therapy needs of society. Basic to this is a curriculum that reflects the best current practice.

In order to remain an asset to the profession, we encourage students to become critical thinkers with a commitment to continued learning throughout their lifetime. Students are encouraged to become active learners, capable of analytical thinking. Faculty model ongoing professional development and a sense of renewal in the profession.

The faculty value professionalism through the development of the seven core values that emphasize accountability, altruism, compassion, excellence, integrity, professional duty, and social responsibility. Students are encouraged throughout the two-year, integrated curriculum, to develop these core values, using institutional and clinical faculty as mentors. Pride in the physical therapy profession and involvement in the American Physical Therapy Association are fostered.

In all program activities, strict adherence to equal opportunity regardless of race, gender, sexual orientation, marriage status, creed, religion, national origin, disability or culture will be observed.



E. GOALS & OBJECTIVES OF THE MWSU PTA PROGRAM

PROGRAM GOAL #1

To graduate physical therapist assistants who are sensitive and responsive to the unique needs of each individual patient; and who are competent, safe, skilled, and ethical in the provision of physical therapy services within the scope of practice as defined by professional and licensure requirements, and under the direction and supervision of a licensed physical therapist.

Student Learning Goals [CAPTE Standard 1C5]:

Upon completion of the PTA program, students will be competent in the areas that are required by the Commission on Accreditation of Physical Therapy Education (CAPTE), including:

1. Clinical Decision Making

Student Outcome: *Evaluate a patient situation and take appropriate steps within PTA scope of practice.*

2. Data Collection

Student Outcome: *Select and perform appropriate data collection techniques.*

3. Interventions

Student Outcome: *Develop an intervention based on the physical therapy plan of care and within PTA scope of practice.*

4. Communication

Student Outcome: *Communicate successfully through verbal and written methods with patients, PTs, and other healthcare providers.*

5. Initiative (Lifelong Learning)

Student Outcome: *Develop a plan for lifelong learning and career development.*

PROGRAM GOAL #2

To graduate physical therapist assistants who initiate successful careers, functioning as valuable members of a healthcare team and community.

Graduate Outcomes

1. The program will graduate at least 70% of students, averaged over two years. [CAPTE 1C1]
2. Ultimate licensure pass rates of program graduates are at least 85%, averaged over two years. [CAPTE 1C2]
3. Employment rates of program graduates are at least 90%, averaged over two years. [CAPTE 1C3]
4. Employers of program graduates will report that at least 90% graduates are “adequately prepared” or “very well prepared” for practice upon initial hire.
5. 100% of program graduates will state that they participate in activities that enhance their professional growth at 18 months post-graduation from the program. [CAPTE 7D14]



PROGRAM GOAL #3

To ensure that program content is reflective of best practices in the profession of physical therapy.

Faculty Outcomes [CAPTE 4A]

1. All academic faculty will attend at least 15 hours of continuing education every two years in content areas aligned with their professional development plan.

PROGRAM GOAL #4

To provide a curriculum that includes effective didactic, laboratory, behavioral, and clinical instruction with delivery methods that address various learning styles.

Curriculum Outcomes [CAPTE 6G]

1. All clinical and academic faculty will receive “above average” to “excellent” ratings at least 80% of the time on student evaluations.
2. The PTA program’s classroom and lab equipment is rated as “adequate” or better by at least 85% of students.



F. SAMPLE CURRICULUM PLAN

<u>YEAR 1 – FALL SEMESTER</u>	<u>CREDITS</u>
BIO 101 - General Biology	4
COM 104 - Oral Communication	3
PTA 100 - Introduction to Physical Therapy	1
PTA 110 - Patient Care Skills	3
PTA 120 - Modalities	3
PTA 130 - Functional Anatomy	2
 <u>YEAR 1 – SPRING SEMESTER</u>	
BIO 250 - Anatomy and Physiology	5
PSY 101 - General Psychology	3
PTA 140 - Measurements and Procedures	3
PTA 160 - Clinical Kinesiology	2
PTA 165 - Therapeutic Exercise	2
 <u>YEAR 1 – SUMMER SESSION</u>	
MAT 110/111/112/116 - Mathematics	3
PTA 185 - Clinical Education I	3
 <u>YEAR 2 – FALL SEMESTER</u>	
PED 304 - Physiology of Exercise	3
PTA 210 - Professional Issues	2
PTA 251 - Cardiopulmonary Rehabilitation	2
PTA 255 - Clinical Orthopedics	3
PTA 260 - Clinical Neurology	4
 <u>YEAR 2 – SPRING SEMESTER</u>	
ENG 104 - College Writing and Rhetoric	3
PTA 265 - Diseases and Dysfunction	3
PTA 270 - Psychosocial Aspects of Physical Therapy	1
PTA 280 - Clinical Rehabilitation	3
PTA 285 - Clinical Education II	5
 <u>YEAR 2 – SUMMER SESSION</u>	
PTA 290 - Clinical Education III	5
PTA 295 - Clinical Seminar	1



COURSE DESCRIPTIONS

PTA 100 Introduction to Physical Therapy (1) F. Introduction to physical therapy and to the role of the physical therapist assistant, including function of the PTA and of the health care team, history of medical care and physical therapy, legal and ethical standards, culturally sensitive care and communication.

PTA 110 Patient Care Skills (3) F. Introduction to basic clinical skills, progressing from bedside management to community mobility. Includes vital signs, aseptic technique, patient transfers and gait training. Health and safety issues, including universal (standard) precautions, electrical and hospital safety, and emergency and first aid procedures. Introduction to documentation. To be taken concurrently with PTA 120 and PTA 130. Prerequisite: Admission into the PTA program.

PTA 120 Modalities (3) F. Clinical modality interventions, including thermal modalities, electrical modalities, hydrotherapy and compressive modalities. Soft tissue interventions for patients with edema, wounds, burns, and vascular pathologies. To be taken concurrently with PTA 110 and PTA 130. Prerequisite: Admission into the PTA program.

PTA 130 Functional Anatomy (2) F. Introduction to the principles of physics as they relate to movement, including levers and force vectors. Surface anatomy, introduction to musculoskeletal structure and function. Introduction to medical terminology. To be taken concurrently with PTA 110 and PTA 120. Prerequisite: Admission into the PTA program.

PTA 140 Measurements and Procedures (3) Sp. Methods of data collection including joint range of motion (goniometry), manual muscle testing, anthropometric measurement, and gait analysis. Review and continuation of physical therapy documentation. To be taken concurrently with PTA 160 and PTA 165. Prerequisite: a grade of C or better in PTA 100, PTA 110, PTA 120 and PTA 130.

PTA 160 Clinical Kinesiology (2) Sp. The study of the muscular forces acting on anatomical structures to create movement, including normal and pathological biomechanics. To be taken concurrently with PTA 140 and PTA 165. Prerequisite: a grade of C or better in PTA 100, PTA 110, PTA 120 and PTA 130.

PTA 165 Therapeutic Exercise (2) Sp. Study of the physiological effect of basic and advanced exercises commonly used in physical therapy, including ROM and stretching, strengthening, aerobic exercise, balance and coordination exercises, proprioceptive exercise, endurance training and aquatic exercise. Common therapeutic exercise protocols used in physical therapy will be presented. Concepts include exercise progression and documentation of exercise as a therapeutic intervention. To be taken concurrently with PTA 140 and PTA 160. Prerequisite: a grade of C or better in PTA 100, PTA 110, PTA 120 and PTA 130.

PTA 185 Clinical Education I (3) Su. First of three practicums in a physical therapy setting. Areas of emphasis include PTA relationships with patients and staff, clinic organization, beginning awareness of patient disorders, initial application of physical therapy techniques, and introduction to documentation. Three weeks of full-time supervised clinical practice. Prerequisite: a grade of C or better in PTA 140, PTA 160, and PTA 165.

PTA 210 Professional Issues (2) F. Development of the student as a health care professional. Includes analysis and creation of electronic health records, basic medical coding and billing practice, scope of PTA practice in the state of Missouri, clinical self-assessment skills, patient interview skills, and review of Standards of Conduct for PTAs. To be taken concurrently with PTA 255 and PTA 260. Prerequisite: a grade of C or higher in PTA 185.



PTA 251 Cardiopulmonary Rehabilitation (2) F. An overview of physical therapy management of cardiac, vascular, and pulmonary conditions. Includes exercise-induced symptom recognition, and therapeutic interventions including application of warm up/cool down principles, application of exercise prescription, deep breathing and breath control exercises, effective cough clearance, and chest physical therapy. Clinical skill development including chest auscultation (rales/rhonchi, wheezes, and E to A change, apical heart rate and rhythm), oxygen saturation, exercise vital signs, exercise intolerance recognition, and emergency life-saving measures (BLS and Code Blue decisions). To be taken concurrently with PTA 210, 255 and PTA 260. Prerequisite: a grade of C or higher in PTA 185.

PTA 255 Clinical Orthopedics (3) F. Description, causes, symptoms, tests and physical therapy intervention in orthopedic pathology. The musculoskeletal system and normal biomechanics are reviewed. To be taken concurrently with PTA 260. Prerequisite: a grade of C or better in PTA 185.

PTA 260 Clinical Neurology (4) F. Neuroanatomy and how damage to this body system is managed by physical therapy intervention. To be taken concurrently with PTA 255. Prerequisite: a grade of C or better in PTA 185.

PTA 265 Diseases and Dysfunctions (3) Sp. Diseases and dysfunction encountered in physical therapy across the lifespan, including disorders of the musculoskeletal, cardiovascular, pulmonary, genitourinary, and endocrine systems. Includes pregnancy, arthritis and cancerous conditions. To be taken concurrently with PTA 270 and PTA 280. Prerequisite: a grade of C or better in PTA 255 and PTA 260.

PTA 270 Psychosocial Aspects of Physical Therapy (1) Sp. Psychosocial issues in health care as related to physical therapy. To be taken concurrently with PTA 265 and PTA 280. Prerequisite: a grade of C or better in PTA 255 and PTA 260.

PTA 280 Clinical Rehabilitation (3) Sp. Physical therapy rehabilitation principles for patients following amputation, total joint surgery, fractures, and spinal cord injury. Proprioceptive neuromuscular facilitation in rehabilitation. Physical therapy interventions with chronic illness, the elderly, and dying patients. To be taken concurrently with PTA 265 and PTA 270. Prerequisite: a grade of C or better in PTA 255 and PTA 260.

PTA 285 Clinical Education II (5) Sp. Second of three clinical practicums. Application of physical therapy procedures, appropriate professional behavior and communication. Participation in physical therapy clinic activities in addition to patient care. Six weeks of full-time supervised clinical practice. Taken following the successful completion, with a grade of C or better, of PTA 265, PTA 270 and PTA 280.

PTA 290 Clinical Education III (5) Su. Third of three clinical practicums. Physical therapy principles and practice with emphasis on achievement of integration, application, communication, and participation at levels consistent with an entry-level PTA practitioner. Six weeks of full-time supervised clinical practice. Prerequisite: a grade of C or better in PTA 265, PTA 270 and PTA 280.

PTA 295 Clinical Seminar (1) Su. Review and evaluation of clinical affiliation experiences, board exam preparation, resume writing and interview skills. Prerequisite: a grade of C or better in PTA 265, PTA 270, and PTA 280.



II. PTA CLINICAL EDUCATION

- A. Clinical Education Philosophy
- B. Rights and Privileges of Clinical Instructors
- C. Clinical Education Timetables
- D. Clinical Education Standards
- E. Professional Behavior Policy
- F. Clinical Course Grading Policy
- G. Clinical Course Competency Requirements
- H. Student Orientation to Clinical Sites
- I. Direction and Supervision of the Physical Therapist Assistant



A. CLINICAL EDUCATION PHILOSOPHY

Clinical education is an integral part of the curriculum. We believe that educational experiences in a clinical setting, with the guidance of knowledgeable clinical instructors, will allow the students to integrate and apply their technical skills and knowledge, professional behaviors, communication skills, and problem solving and critical thinking skills, to develop into competent physical therapist assistants.

To facilitate this growth, we feel it is important for the students to learn in a variety of settings, including inpatient, outpatient and specialty settings. The students will complete 15 weeks of full-time affiliations. The students will work with a clinical instructor to establish specific learning objectives and experiences. The students will maintain contact with the academic program through on-line course work that will include, but is not limited to journaling, group discussion and case study models. The students will be expected to demonstrate technical knowledge, but also the ability to self-reflect on their activities and behaviors and those of the people around them and use that reflection to set goals for themselves.

B. RIGHTS AND PRIVILEGES OF CLINICAL INSTRUCTORS

Clinical instructors are vital to the success of Missouri Western's PTA program. While clinical faculty are not granted the same rights and privileges of core faculty of the PTA program, their service is greatly valued. We extend the promise to provide mentorship and resources in your growth as a clinical instructor.

CIs have the right to expect:

- Students to arrive at their site ready for the clinical experience
- Support for development through clinical educator credentialing and in-services
- Open communication with Missouri Western faculty including:
 - Provision of the Clinical Education Handbook, clinical course syllabus, and information for use of Exxat and the CIET.
 - Timely responses from the ACCE when questions, concerns, or issues arise
- A certificate that verifies time spent as a clinical instructor as evidence for CEU credit if applicable by state practice act.

We continually strive to assist clinical faculty in order to make clinical instruction a mutually beneficial experience for the student and the clinical site. A variety of resources are available on our website at <https://www.missouriwestern.edu/pta/clinical-educator-resources/>



C. CLINICAL EDUCATION TIMETABLES

The purpose of clinical education is to provide opportunities for students to apply and refine what they have learned in the classroom. With supervision and assistance from a physical therapist/physical therapist assistant clinical instructor (CI), students will work directly with patients, their families, and other members of the health care team in a variety of clinical settings. Each clinical course will require more independence in patient care, communication, and decision-making than the course before. By the end of the final clinical course, students will be functioning on the level of a graduate physical therapist assistant.

Clinical Education Course Timetable

The PTA program at MWSU includes one 3-week and two 6-week clinical experiences. They are arranged as follows:

Course	Time	Purpose
PTA 185 Clinical Education I	Three weeks in Summer semester between the first and second year (June-July)	Begin utilizing knowledge, skills and awareness gained in class. Provide treatment to patients with general medical and musculoskeletal problems according to plan of care set by the physical therapist and under the direction of CI.
PTA 285 Clinical Education II	Last six weeks of the 2 nd year Spring semester (April – May)	Participate as a member of the health care team. Take responsibility of a patient load, and implement treatment from a plan of care developed by a physical therapist for any patient problem, under the guidance of a clinical instructor.
PTA 290 Clinical Education III	First six weeks of Summer semester following 2 nd year (May – June)	Assume responsibilities of an entry-level PTA. Demonstrate competent communication skills, treatment techniques, and problem-solving skills for effective entry-level practice as a physical therapist assistant under the supervision of a clinical instructor.



Students' Clinical Requirement Timetable

Student will receive access to their Exxat profile during the first month of the program. All "Compliance" items listed below are to be uploaded to Exxat by the student.

Due Date	Items Due
PTA 185: Clinical Education I	
Before Fall Break of 1 st Year	<ul style="list-style-type: none"> ✓ Provided evidence of current immunizations or titers including, but not limited to: <ul style="list-style-type: none"> ▪ MMR ▪ Polio ▪ DPT ▪ HEP B ▪ Varicella (or evidence of chicken pox on official record and/or titer) ▪ Proof of annual flu shot ▪ Covid-19 vaccine (or approved exemption through MWSU) ✓ Signed yearly confidentiality statement ✓ Signed yearly clinical informed consent ✓ Completed "Wishlist" with site requests for PTA 185 on Exxat
January 31 st	<ul style="list-style-type: none"> ✓ 2-step TB test ✓ Health Report ✓ CPR certification ✓ First Aid certification ✓ Completed Exxat profile
May 1 st	<ul style="list-style-type: none"> ✓ Completed Drug Screen and Background check (Validity)
PTA 285: Clinical Education II & PTA 290: Clinical Education III	
First day of Fall Semester of 2 nd Year	<ul style="list-style-type: none"> ✓ Completed "Wishlist" with site requests for PTA 285 and PTA 290 on Exxat
Before Winter Break of 2 nd Year	<ul style="list-style-type: none"> ✓ Signed yearly confidentiality statement (resigned) ✓ Signed yearly clinical informed consent (resigned) ✓ Health Report (redone) <ul style="list-style-type: none"> ▪ TB test – check with ACCE to see if you need a 2-step ▪ Annual flu shot ▪ CPR/First Aid if it has expired or will expire before or during clinicals
January 31 st	<ul style="list-style-type: none"> ✓ Any other requirements specific to assigned site(s)



Timetable of Information Provided to Clinical Sites

	Information Sent to Clinical Sites	Clinical Dates
January	<ul style="list-style-type: none"> • Verification of student placements for PTA 285 • PTA 285 Student Information sent to CIs <ul style="list-style-type: none"> ✓ Link to student profiles for PTA 285 ✓ Information about Exxat and CIET ✓ Syllabus for PTA 285 	
February	<ul style="list-style-type: none"> • Notification of sites regarding student placements for PTA 185 	
March	<ul style="list-style-type: none"> • Annual slot request for following year • Malpractice insurance information • Verification of student placements for PTA 290 • PTA 290 Student Information sent to CIs <ul style="list-style-type: none"> ✓ Link to student profiles for PTA 290 ✓ Information about Exxat and CIET ✓ Syllabus for PTA 290 	March – April PTA 285 (6 weeks)
April	<ul style="list-style-type: none"> • Verification of student placements for PTA 185 • PTA 185 Student Information sent to CIs <ul style="list-style-type: none"> ✓ Link to student profiles for PTA 185 ✓ Information about Exxat and CIET ✓ Syllabus for PTA 185 	
May		May – June PTA 290 (6 weeks)
June		
July	<ul style="list-style-type: none"> • Slot commitments for following year due July 1st 	July PTA 185 (3 weeks)
August	<ul style="list-style-type: none"> • CEU letters sent to CIs 	
September		
October	<ul style="list-style-type: none"> • Student requests for PTA 285 and 290 due Oct. 1st 	
November	<ul style="list-style-type: none"> • Notification of sites regarding student placements for PTA 285 and 290 	
December	<ul style="list-style-type: none"> • Student requests for PTA 185 due Dec. 1st 	



D. CLINICAL EDUCATION STANDARDS

I. Requirements and Preparation

All clinical education courses are viewed by the faculty as being of equal importance with the didactic courses offered in the PTA program. Clinical education is a series of structured learning experiences designed to allow students to develop and improve clinical skills, to identify personal attitudes and feelings, and to be socialized into the profession.

All required PTA courses must be taken and passed successfully prior to clinical experience. An unsatisfactory grade in any clinical experience will result in the need for a remediation clinical experience. A student will be unable to participate in any succeeding clinical experience or graduate until remediation is completed.

The following is a list of items that are required for clinicals:

- Evidence of current immunizations or titers
 - Measles/mumps/rubella.
 - Varicella (or documentation/titer for chickenpox)
 - Hepatitis B series (can waive if documented; titer optional)
 - DPT or TDAP
 - Polio
 - Annual flu shot
 - Covid-19 vaccine or exemption waiver
- Signed Clinical Informed Consent. Completed yearly.
- Signed Confidentiality Statement. Completed yearly.
- A current American Heart Association CPR professional certification card that will not expire prior to or during the clinical experience
- A current First Aid certification card that will not expire prior to or during the clinical experience
- Annual Student Health Report.
- Current TB screen (within one year at time of clinical)
 - Must be a 2 step TB screening for PTA 185
- Criminal background check prior to first clinical experience.
- Drug screen prior to first clinical experience.
- Proof of current health insurance.
- Successful completion of all HIPAA and OSHA training provided during prior semesters.
- Reliable transportation for clinical experience.

All items need to be completed by deadlines established on the clinical requirement timeline. Failure to complete by date due may result in removal from the clinical placement and/or suspension from the program.

Some facilities have more restrictive requirements, including but not limited to: a more comprehensive drug screening, color blindness testing, on site HIPAA training, and annual two-step TB testing. It is **your** responsibility to check site information located on Exxat and to discuss any additional requirements with your clinical instructor to ensure that you meet those requirements prior to beginning the clinical rotation. Refusal of any documented clinical requirement prior to beginning a clinical once placement has occurred may result in dismissal from the program.



A clinical site has the authority to request documentation of completion of these activities or follow-up testing from the student at the onset of the clinical. Failure to comply with a clinical site's request after onset of the clinical will result in a grade of "F" for the clinical assignment, and possible dismissal from the program. If a clinical site makes a request that was not on file, the student should immediately contact the ACCE. A determination of clinical placement will be made at that time.

No less than two weeks prior to the clinical experience, the student must contact the Site Coordinator of Clinical Education (SCCE) and/or Clinical Instructor (CI) at the facility to get information on the following:

- housing (if needed) - *Securing housing is the student's responsibility.*
- directions to the facility
- where and to whom to report
- parking
- work hours
- dress code
- other pertinent information

II. Placement at Clinical Sites

The PTA program uses Exxat software for clinical education. Students will upload records into Exxat, and will obtain information about sites using this software. Matching of clinical assignments with student preferences will be done in advance of the clinical, with a goal of student assignment in November for the second year clinicals and in April for the first year clinical.

For each clinical the student will list first, second and third choices. While every effort will be made to accommodate the student's first choices, determination of assignments will primarily consider variety, depth, and breadth of clinical experiences. Therefore, students should strive for variety in their choice of affiliation sites. Student assignments are dependent on site availability and affiliation with MWSU.

Students should not pick a facility where they have been, or are, an employee of the physical therapy department. They should not pick a facility from which they are receiving financial assistance or have a work agreement. Students should avoid picking a facility where they would be supervised by family. Students may not pick the same facility for more than one affiliation, unless approved by the ACCE. Students may suggest clinical sites that are not under contract with MWSU. These sites may be investigated, but there is no guarantee that they can or will be developed.

Ultimately, the student is responsible for travel to and from the clinical site, housing if necessary, and requirements of the program or site including but not limited to criminal background check, CPR and first aid certification, immunizations and a health exam.

III. Medical Insurance

Because of the nature of the profession, PTA students may be exposed to certain health risks during the course of their clinical practice. The majority of these risks can be eliminated or minimized by following established standards.



Health insurance is the sole responsibility of the student to acquire. The student attests to health insurance coverage prior to clinical affiliations and must submit a copy of their current health insurance card. Students may access student health insurance as a plan dependent, as a student member through the American Physical Therapy Association (APTA), or as an individual on the health insurance marketplace. The Esry Student Health Center provides information on purchasing insurance as well.

Students must provide the policy number and insurance provider and must have a card available for the clinical site if they require a copy.

IV. Attendance/Tardiness

An **excused absence** is an absence that should be arranged prior to the event with the clinical instructor (CI) of the facility, or the result of an illness in which the CI is notified by 8:00 am. An **unexcused absence** is an absence in which the student has failed to notify his/her CI in a timely manner, or the result of a planned absence in which the student has failed to obtain permission from the CI prior to the absence.

The student is entitled to no more than one excused absence during PTA 185, and two excused absences during each PTA 285 and PTA 290 without making up the days missed. Any additional days missed must be made up. All unexcused absences must be made up.

Any unexcused absence must be reported by the CI to the ACCE immediately. More than two unexcused absences in any clinical affiliation period may result in a hearing before academic faculty. Discipline may range from oral warning to dismissal from the program.

If a student is absent (excused) for three consecutive days due to illness, he/she must provide written assurance from a physician that he/she is capable of returning to assigned duties. A copy must be furnished to the CI and the ACCE.

Students with sick children should make every attempt to find child care before deciding to take an absence. The student must notify the CI by 8:00 am, or the normal starting time for that clinical. Reported absences due to sick children will be considered excused and the student will be subject to the same makeup policy described above.

If a student is absent for three or more days and does not report in, it will be assumed that the student has voluntarily removed him- or herself from the program and will be dismissed as such. The student will be notified of this in writing, and may appeal.

The student must adhere to the schedule of the clinic at all times. If the student is unavoidably tardy, he/she must notify the clinical facility by phone. Tardiness should be reported by the student to the CI immediately upon arrival at the clinic. Tardiness that is not reported is considered unexcused tardiness. The CI must report more than two incidences of unexcused tardiness to the ACCE. More than two incidences of unexcused tardiness may result in a hearing before the academic faculty with possible action ranging from oral warning to dismissal from the program.

Students who need to travel more than 300 miles between affiliations, and who have met the requirements of the affiliation may take the final Friday as a travel day. Permission from the CI and the ACCE must be obtained.



V. Extended Absence Due to Illness or Military Service

In the event of an extended absence from clinical due to illness or military service, missed coursework must be completed. If the coursework can be made up prior to the end of the internship, attempts will be made to accommodate the student. The student cannot continue into the next semester until the clinical is satisfactorily completed. If it is not possible to complete the coursework prior to the next semester, the student must repeat the course. If the extended absence is due to medical reasons, prior to returning to clinical the student must have documentation of leave and a release form to return to school signed by their physician.

VI. Dress Code

During clinical courses, students are to adhere to the policy of the physical therapy department of the facility. If no facility policy is identified, the following guidelines will be followed:

- Polo, or dress blouse or shirt (no T-shirts with logos or writing permitted).
- Dress pants.
- Clean closed toe shoes with socks or stockings.

Students must adhere to the following program-specific dress code during all clinical experiences:

- PTA program name tag must be worn at all times.
- Proper undergarments must be worn at all times. This includes socks or hose.
- Hair must be clean and tied back if long. Facial hair on males must be well groomed.
- Clothes should be clean and neat.
- There should be no excessive use of makeup, perfumes or colognes.
- Nails should be kept short and neat with only light-colored polish permitted. No false nails are allowed on clinical affiliations, due to the risk of spread of infection.
- See item XII regarding tattoos, piercings, and jewelry

Because the expectation is to gain the confidence and respect of co-workers and patients, a professional appearance must be maintained at all times. Students are required to follow any additional dress code rules of their clinical site.

VII. Assignments

Assignments will be designated by the ACCE, and will be posted to Canvas. These may include, but not be limited to, answering journal prompts, writing case studies, providing an in-service, submitting a short essay, and participating in other online activities.

VIII. Evaluations

A. Student Evaluations

1. Both the student and the Clinical Instructor (CI) are responsible for completing the Clinical Internship Evaluation Tool (CIET).



- a. The CI will complete a formal midterm evaluation of the student's performance during the third or fourth week of Clinical Ed II and III. The midterm evaluation allows the student and CI to review the course objectives, see how the student is progressing, identify any immediate problems, and revise objectives if necessary. On Clinical Education I, the CI may wish to make this a less formal process, due to the shorter time-frame.
 - b. The student and CI will complete a formal final evaluation using the CIET during the last week of each clinical rotation. This will be discussed with the student on or near the last day of the affiliation. Both the midterm and final CIETs will be immediately accessible by the ACCE upon submission.
2. Information on use of the CIET may be found here:
- a. <https://exxat.force.com/v4Help/s/article/Completing-the-CIET-for-CI-s-STEPS-V4-PT-PTA>
 - b. <https://exxat.force.com/Forum/s/article/CIET-Training-Post-Test-PTA>
 - c. <https://academic.oup.com/ptj/article/87/7/844/2742164?login=true>

B. Facility Evaluations

1. The student must complete a Student Evaluation of the Clinical Experience and Student Evaluation of Clinical Instruction. Additionally, the student must complete a "CI Details" form. All three of these evaluations must be completed by the end of the clinical experience. If the facility has their own evaluation form that they request the student complete, the student should do so, though MWSU's form must also be completed.
2. Failure to submit or late submission of any of the above evaluations will be considered in the final grade for that clinical experience.

C. Site Visits

1. The purpose of site visits is to discuss any concerns about the student's progress toward entry level, maintain good communication between the facility and the school, and gain feedback from the student and the clinical staff regarding possible changes in the curriculum.
2. The Academic Coordinator of Clinical Education (ACCE) will complete either an in-person, phone, or virtual visit to all facilities during each clinical rotation. The ACCE will speak privately to both the clinical educator and the student. This is time that can be used for development of learning objectives for the student if it is determined that there is a need. This time can also be used for short facility in-service training if it is scheduled prior to the visit.
3. Site visits will be scheduled at the convenience of the SCCE, clinical instructor, and ACCE. Site visits during PTA 185 will occur during the final week of the clinical experience. Site visits during PTA 285 and PTA 290 will occur during the 3rd or 4th week of the clinical experience.

D. Grades

1. Clinical Education courses are graded A, B, C, or F, and follow the PTA program grading guidelines as previously identified in this handbook.
2. Expectations for CIET evaluation criteria are outlined on each respective syllabi.



3. If a student does not achieve the performance level required for specific objectives, their grade on the final CIET will be affected. If a student does not achieve the threshold “Global Rating of Student Clinical Competence” and “Performance at Expected Level,” a failing grade may be assigned.
4. In the event that a student has received a failing grade, he or she will have to repeat the clinical course at a time convenient to the clinical education program. The student may also be required to complete independent study in a specified area, gain additional clinical skills by taking leave from the program to work or volunteer at an appropriate clinical facility, repeat one or more units of the curriculum, and/or be retested in a practical or classroom setting.
5. Failure to satisfactorily complete a clinical course may lead to delayed graduation.
6. If a student fails a clinical course a second time or fails during remediation, the student will be subject to dismissal from the program.

E. Dismissal from the program – If a student is subject to dismissal from the program, he or she may be:

1. Suspended from the program with the option to return the following year under probation.
2. Dismissed without option to return. Option number two will be imposed if a student has failed to meet mastery after re-entry into the program.

IX. Impaired Student

Students who are taking prescribed medications that may impair thinking or physical performance are expected to notify their clinical instructor prior to clinical. A written note from the physician will be required. It is the responsibility of the Clinical Instructor to observe behaviors that could threaten the safety and well-being of others. Reasonable suspicion that a student is under the influence of alcohol or illicit drugs will be documented by the observing Clinical Instructor, and whenever possible corroborated by a second person. The student will be given the opportunity to discuss the behavior with the person(s) who witnessed the behavior and the ACCE. If evidence warrants, the student will be asked to leave the clinic for the day. Further episodes of substance abuse may result in dismissal from the program (see Procedures for Faculty Intervention with the Impaired Student). If behavior is disruptive or threatening, site policies will be followed to ensure the safety of others, and the ACCE will be contacted immediately.

X. Grievances

If problems arise during a clinical affiliation they should first be discussed with the CI. In the event that the problem cannot be resolved, or there is a conflict, it should then be taken to the SCCE of the facility, if one is available. Every effort should be made to resolve the issue internally. However, if a satisfactory outcome is still not achieved, the ACCE should be contacted as soon as possible. The clinical instructor should feel free to contact the ACCE at any time with questions or concerns.

XI. Phone Usage

Students may not use the departmental telephone except for emergencies. Students must seek permission from a Clinical Instructor to use the telephone for emergency situations.

Cell phones must be turned off or to silent, and put away during clinical time, unless permission of the Clinical Instructor has been obtained.



XII. Jewelry, piercings, and tattoos during clinicals

One ring per hand is allowed. Facial piercings will be limited to three piercings or buttons in each ear. Earrings or gauges will be round and no larger than 6 mm in diameter. Other piercings will be removed or covered by flesh colored tape or earring covers/caps. No necklaces or bracelets are permitted. Tattoos should be covered when possible, unless permission from the ACCE and CI is obtained.

XIII. Liability Insurance

All PTA students are provided with liability coverage during participation in assigned clinical coursework. MWSU retains a specified medical professional liability insurance policy on every PTA student. The representative of the policy is Mercer Consumer, a service of Mercer Health & Benefits Administration, LLC, PO Box 14576, Des Moines, IA 50306. The limits of professional liability are \$1,000,000/\$3,000,000. This policy pays up to \$1,000,000 for each claim, and a total of \$3,000,000 in any one year. Under this program any student who is participating in activities that are a part of and a requirement of the student's curriculum is insured. Student coverage terminates after graduation or when the student is no longer engaged in a course of study in the PTA program.

XV. Responsibilities of Clinical Site

The clinical site, upon request of MWSU and consent of the site, shall provide clinical internship for students through such site. Each Clinical Instructor (CI) shall be assigned no more than two students and shall be responsible for selecting patients for student experience and for providing clinical instruction/guidance.

The clinical site shall provide orientation to students assigned to the site. If the CI teaches a data collection or intervention technique that has not been presented and practiced in the academic setting, the CI is responsible for determining that the student is safe in applying the procedure in the clinical setting.

The clinical site shall complete a program-specific clinical site information form upon becoming a clinical site, and will be asked to update that information form every three to five years.

The CI shall participate in student evaluation. Evaluation shall be based on clinical objectives provided by MWSU Academic Coordinator of Clinical Education (ACCE). See Evaluations (VII).



E. PROFESSIONAL BEHAVIOR POLICY

The Physical Therapy profession is one in which a basic tenet is the value and respect of human worth. This is reflected in conduct which demonstrates professional behavior including maintenance of patient confidentiality, honesty, provisions for the physical safety of others, and demonstration of respect for the psychological welfare of others.

Students in the PTA Program are expected to exhibit conduct that gives evidence of ethical and safe practice of physical therapy.

It is expected that students will:

- provide a safe environment in class, lab and clinic
- maintain confidentiality with respect to patients and patient medical records
- respect individual differences
- respect modesty of patients
- be honest

Students in the PTA Program are expected to exhibit conduct that gives evidence of commitment to fulfilling professional responsibilities and continued professional growth.

It is expected that students will:

- adhere to MWSU, departmental, and clinical site/facility policies
- wear appropriate attire
- correct problems that interfere with clinical performance
- set priorities in the clinical setting
- recognize personal strengths and weaknesses

Student's placement at clinical facilities is dependent on the support of the clinic sites and their willingness to accept students at any given time. Students are to consider themselves guests of the facilities in which they are receiving clinical instruction, thus any unacceptable behaviors may lead to immediate withdrawal of support from that clinical site. Continued clinical support is essential to physical therapist assistant education and must be respected as such.

A student exhibiting any of the behaviors listed below may be subject to withdrawal from that facility and/or from the program.

- Acting in a manner that is unsafe to the patient.
- Violation of patient confidentiality.
- Any behaviors that may pose a threat to the facility, or to the relationship between the facility and the school.
- Failure to adhere to facility policy and procedures.
- Failure to follow student standards.
- Use of profane or abusive language.
- Arguing with the supervisor, or refusing to carry out assignments.
- Professional misrepresentation.



F. CLINICAL COURSE GRADING POLICY

Grading for Clinical Education courses is based on PTA-CIET results, and student experience in the clinic setting. Students are assigned additional activities through Canvas. *The Academic Coordinator of Clinical Education (ACCE) will determine the final grade for clinical placements.* See syllabi for each clinical course for additional information.

A drop of at least one letter grade may result from any of the following:

- The student completed all clinical requirements, but did not complete them on time.
- The student had difficulty mastering behaviors and skills expected during the clinical requiring a written learning contract with specific performance objectives to complete the clinical successfully.

Failure of the clinical results from the following:

- Failure to complete required paperwork and/or required assignments.
- Significant concerns noted by CI or ACCE that were not corrected satisfactorily by the student during the clinical experience.
- Any behavior that would result in failure of an on-campus class as noted in the PTA Program handbook or MWSU policy and procedures guide.

Other reasons for failure and/or termination of the experience may be determined at any time during the clinical experience by agreement of the CI, SCCE, and ACCE.

If, at the time of the midterm visit, the CI notes unacceptable performance on any criteria, the student will be responsible for writing performance objectives for each unacceptable criterion. These criteria should be e-mailed to the ACCE within one week of the visit if not shared with the ACCE at the visit.

If the student fails this clinical experience, remediation of the clinical will be arranged by the ACCE. The remediation experience will be determined by the ACCE based on the needs of the student, problems that were identified in the previous clinical experience and student input.

Clinical Education I (PTA 185) Grading

20% - Participation: This includes completion of pre- and post- clinical documentation and compliance activities. **Compliance paperwork not completed 4 weeks prior to first day of clinical experience may result in failure of the clinical.** Participation grade also includes turning in site evaluation form within one week of the end of clinical rotation, as well as involvement in on-line discussion boards (one original post and at least two responses to others' posts each week).

10% - Canvas Assignments: Students will answer a journal prompt each week; entries will be graded based on completion (ie. Did you answer all parts of the prompt/question? Was it completed on time?). Each entry is graded out of 10 points.

70% - Clinical Performance: Includes CIET results (based on behaviors in clinical setting), mid-term reviews, and comments from Clinical Instructor.

- The Clinical Instructor is responsible for on-site education. Student is expected to follow all rules of clinical site and take direction for clinical activities from clinical instructor or other clinical employees.
- Student is expected to adhere to all professional behaviors as outlined in the PTA Student Handbook.



- Expectations on the CIET (as indicated by CI) for PTA 185 are as follows:

Criteria	Expectation at End of PTA 285
Professional Behaviors: Safety (all items) Professional Ethics (all items) Initiative (all items)	Most of the time Most of the time Most of the time
Professional Behaviors: Communication (all items)	Sometimes
Patient Management: Data Collection (all items) Intervention (all items)	Below Below
Global Rating of Student Clinical Competence	At least 2/10
Performance at expected level	YES
Caseload Expectation	At least 50% of entry-level caseload

Clinical Education II (PTA 285) Grading

20% - Participation: This includes completion of pre- and post- clinical documentation and compliance activities. **Compliance paperwork not completed 4 weeks prior to first day of clinical experience may result in failure of the clinical.** Participation grade also includes turning in site evaluation form within one week of the end of clinical rotation, as well as involvement in on-line discussion boards.

10% - Canvas Assignments: Students will answer a journal prompt each week; entries will be graded based on completion (ie. Did you answer all parts of the prompt/question? Was it completed on time?). Each entry is graded out of 10 points.

70% - Clinical Performance: Includes CIET results (based on behaviors in clinical setting), mid-term and final reviews, comments from Clinical Instructor, as well as completion of an in-service project for clinical site.

- The Clinical Instructor is responsible for on-site education. Student is expected to follow all rules of clinical site and take direction for clinical activities from clinical instructor or other clinical employees.
- Student is expected to adhere to all professional behaviors as outlined in the PTA Student Handbook.
- Expectations on the Final CIET (as indicated by CI) for PTA 285 are as follows:

Criteria	Expectation at End of PTA 285
Professional Behaviors: Safety: (Items 1-3)	Always
Professional Ethics: (Items 1-7)	Always
Initiative: (Items 1, 3)	Most of the Time
(Items 2, 4)	Always
Communication: (Items 1-2)	Always
(Items 3-5)	Most of the Time



Patient Management: Data Collection: (Items 1-6) (Item 7) Intervention: (Item 1, 6-9) (Item 2-5)	At that level for all patients At that level for familiar patients At that level for familiar patients At that level for all patients
Global Rating of Student Clinical Competence	At least 5/10
Performance at expected level	YES
Caseload Expectation	60-80% (or as deemed appropriate for the clinical level by CI)

Clinical Education III (PTA 290) Grading

15% - Participation: This includes completion of pre- and post- clinical documentation and compliance activities. **Compliance paperwork not completed 4 weeks prior to first day of clinical experience may result in failure of the clinical.** Participation grade also includes turning in site evaluation form within one week of the end of clinical rotation, as well as involvement in on-line discussion boards.

10% - Canvas Assignments: Students will answer a journal prompt each week; entries will be graded based on completion (ie. Did you answer all parts of the prompt/question? Was it completed on time?). Each entry is graded out of 10 points.

75% - Clinical Performance: Includes CIET results (based on behaviors in clinical setting), mid-term and final reviews, comments from Clinical Instructor, as well as completion of an in-service project for clinical site.

- The Clinical Instructor is responsible for on-site education. Student is expected to follow all rules of clinical site and take direction for clinical activities from clinical instructor or other clinical employees.
- Student is expected to adhere to all professional behaviors as outlined in the PTA Student Handbook.
- Expectations on the Final CIET (as indicated by CI) for PTA 290 are as follows:

Criteria	Expectation at End of PTA 290
Professional Behaviors: Safety (Items 1-3) Professional Ethics (Items 1-7) Initiative (Items 1-4)	Always Always Always
Professional Behaviors: Communication (Items 1-5)	Always
Patient Management: Data Collection (Items 1-7) Intervention (Items 1-9)	At that level for all patients At that level for all patients
Global Rating of Student Clinical Competence	At least 7/10
Performance at expected level	YES
Caseload Expectation	At least 80% of entry-level caseload



G. CLINICAL COURSE COMPETENCY REQUIREMENTS

Competencies for PTA 185: Clinical Education I

The following technical classes have been successfully completed by the student prior to PTA 185: Clinical Education I:

- PTA 100 – Introduction to Physical Therapy
- PTA 110 – Patient Care Skills
- PTA 120 – Modalities
- PTA 130 – Functional Anatomy
- PTA 140 – Measurements and Procedures
- PTA 160 – Clinical Kinesiology
- PTA 165 – Therapeutic Exercise

The following is a list of competencies that the first-year students will be expected to master prior to PTA 185 – Clinical Education I:

1. **Professional Conduct** – including ability to follow policies and procedures of clinical facility, respond effectively in emergency situation, use spare time to enhance learning, maintain patient confidentiality, respect patient dignity and privacy, control emotions and accept criticism, show understanding of role of PT/PTA in health care delivery, show understanding of legal and ethical considerations.
2. **Communication** – including communicating effectively with other professionals, asking questions when unsure, adapting communication to patient's level, and appropriate use of medical terminology.
3. **Data Collection** – including basic gait recognition, goniometry, manual muscle testing, vital signs, anthropometric measurement, and basic posture observation.
4. **Patient Care** – including transfers, body mechanics, wheelchair handling, positioning, use of assistive devices, wound healing, sterile technique, universal precautions, range of motion, and basic therapeutic exercise.
5. **Modalities** – including ultrasound, heat, cold, phonophoresis, hydrotherapy, fluidotherapy, diathermy, massage, electrical stimulation, TENS, and paraffin.
6. **Documentation** – basic requirements of documentation, including SOAP format progress notes.
7. **Knowledge Base** – understanding of relevant anatomy, normal muscle function, and biomechanics.

Refer to course syllabus for more specific competencies.

If the Clinical Instructor (CI) teaches a data collection or an intervention technique that has not been presented and practiced in the academic setting, the CI is responsible for determining that the student is safe in applying the procedure in the clinical setting.



LIST OF COMPETENCIES for PTA 285 and PTA 290

Prior to PTA 285, students have completed all technical courses in the PTA program. The following is a list of competencies that the second-year students will be expected to master prior to Clinical Education II and III.

1. **Professional Conduct** – including ability to follow policies and procedures of clinical facility, respond effectively in emergency situation, use spare time to enhance learning, maintain patient confidentiality, respect patient dignity and privacy, control emotions and accept criticism, show understanding of role of PT/PTA in health care delivery, show understanding of legal and ethical considerations. In addition, student should convey appropriate level of self-confidence, initiate tasks within capabilities, and interact appropriately with patients and staff.
2. **Communication** – including communicating effectively with other professionals, asking questions when unsure, adapting communication to patient's level, appropriate use of medical terminology. In addition, student should recognize and use appropriate non-verbal communication, obtain preliminary information from the patient, respond appropriately to patient and/or caregiver questions and concerns during treatment, and use effective teaching skills during treatment. The student should demonstrate knowledge of how to educate patient and caregivers about interventions being provided. The student should demonstrate knowledge about timely communication with the physical therapist for reporting patient status, and requests for changes to plan of care.
3. **Data Collection Techniques** – including basic gait recognition, goniometry, manual muscle testing, vital signs, anthropometric measurement, and basic posture observation. In addition, student should demonstrate understanding of data collection techniques used by physical therapist and how it impacts delivery of interventions. Student should be able to collect data using standardized tests initially completed by the physical therapist, ie Berg, Tinetti, TUG, basic sensory testing, FIM.
4. **Patient Care** – including transfers, body mechanics, wheelchair handling, positioning, use of assistive devices, wound healing, sterile technique, universal precautions, orthotics, prosthetics, issues related to aging, and treatment of pediatric patients. In addition, students should be comfortable with therapeutic exercise including strengthening, balance, back exercises, and ROM. Students should be able to read the plan of care developed by the physical therapist and provide appropriate interventions based on the plan of care. Students should be able to make adjustments to intervention based on patient response and should understand that the adjustments that are made must be within plan of care and scope of practice.
5. **Modalities** – including ultrasound, heat, cold, phonophoresis, hydrotherapy, massage, electrical stimulation, TENS, paraffin, traction.
6. **Comprehension of Pathologies and Treatment** – including orthopedic, neurological, cardiovascular, integumentary, and amputation.
7. **Documentation** – including SOAP format progress notes, as well as use of EHR. In addition, the student should demonstrate understanding of the need for accurate and timely documentation of patient treatment, but also of information needed for billing purposes in format required by clinical site.

Refer to course syllabi for more specific competencies.

- ✓ **If the Clinical Instructor (CI) teaches a data collection or an intervention technique that has not been presented and practiced in the academic setting, the CI is responsible for determining that the student is safe in applying the procedure in the clinical setting.**



H. STUDENT ORIENTATION TO CLINICAL SITES

Students should be provided an orientation to their clinical site by their clinical instructor (CI) and/or the site coordinator of clinical education (SCCE). Orientation typically occurs on the first day of the clinical experience, but depending on the clinic schedule, may take place over a number of days at the beginning of the clinical experience. Sites are asked to complete student orientation within the first week of the clinical experience if possible. The list below provides suggestions for orientation topics, but is in no way all inclusive. Each clinical site may have their own policies and procedures for orienting students to the site.

Orientation topics should include, but are not limited to:

1. Tour of facility
2. Tour of department
3. Orientation to personal space (desk, lockers, etc.)
4. Initial meeting with clinical instructor
 - a. Discuss objectives and expectations
 - b. Plan learning experiences
 - c. Discuss student responsibilities
 - d. Discuss learning style of the student
 - e. Discuss teaching style of clinical instructor
5. Introduction to staff
6. Personnel policies regarding tardiness, absence
7. Discuss “student calendar” of daily activities
 - a. Clocking or logging in
 - b. Scheduled breaks
 - c. End of day procedures
8. Orientation to safety requirements
 - a. CPR (code blue if appropriate)
 - b. Procedures related to fire, tornado, or other disaster
 - c. OSHA guidelines
9. Orientation to communication system (phone, pagers, tablets, etc.)
10. Patient treatment (observation/expectations of student)
11. Orientation to paperwork (documentation system, charges/billing, etc.)
12. Orientation to departmental protocols (exercise, diagnosis, equipment, etc.)
13. Orientation to HIPAA policies and procedures
14. Orientation to any other pertinent clinic policies and procedures



I. DIRECTION & SUPERVISION OF THE PTA

Definition:

The physical therapist assistant is a technically educated health care provider who assists the physical therapist in the provision of physical therapy. The physical therapist assistant is a graduate of a physical therapist assistant associate degree program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE).

Utilization:

The physical therapist (PT) is directly responsible for the actions of the physical therapist assistant (PTA) related to patient/client management. The PTA may perform selected physical therapy interventions under the direction and at least general supervision of the PT. In general supervision, the PT is not required to be on-site for direction and supervision, but must be available at least by telecommunications. The ability of the PTA to perform the selected interventions as directed shall be assessed on an ongoing basis by the supervising PT. The PTA may modify an intervention in accordance with changes in patient/client status within the scope of the established plan of care.

The PTA must work under the direction and at least general supervision of the PT. In all practice settings, the performance of selected interventions by the PTA must be consistent with safe and legal physical therapist practice, and shall be predicated on the following factors: complexity and acuity of the patient/client's needs; proximity and accessibility to the physical therapist; supervision available in the event of emergencies or critical events; and type of setting in which the service is provided.

When supervising the PTA in any off-site setting, the following requirements must be observed:

1. A physical therapist must be accessible by telecommunications to the physical therapist assistant at all times while the physical therapist assistant is treating patients/clients.
2. There must be regularly scheduled and documented conferences with the physical therapist assistant regarding patients/clients, the frequency of which is determined by the needs of the patient/client and the needs of the physical therapist assistant.
3. In situations in which a physical therapist assistant is involved in the care of a patient/client, a supervisory visit by the physical therapist will be made:
 - a. Upon the physical therapist assistant's request for a reexamination, when a change in treatment plan of care is needed, prior to any planned discharge, and in response to a change in the patient/client's medical status.
 - b. At least once a month, or at a higher frequency when established by the physical therapist, in accordance with the needs of the patient.
4. A supervisory visit should include:
 - a. An on-site reexamination of the patient/client.
 - b. On-site review of the plan of care with appropriate revision or termination.
 - c. Evaluation of need and recommendation for utilization of outside resources.



III. CLINICAL PROGRAM FORMS*

- A. Clinical Informed Consent
- B. Confidentiality Statement
- C. Student Health Report

***Note About Program Forms**

Students are required to sign the Clinical Informed Consent and Confidentiality Forms during the first week of each fall semester. An electronic version of these forms is maintained by the ACCE in student files and may be sent to clinical sites upon request. Students are instructed to maintain the original copy for their records. The student health report is completed by the student's primary care provider each year.



MISSOURI WESTERN STATE UNIVERSITY:
Physical Therapist Assistant Program
Clinical Informed Consent

Clinical internships in physical therapy settings are regularly scheduled components of the Physical Therapist Assistant Program at Missouri Western State University. During these internships, students participate in, but are not solely responsible for, patient services rendered at the affiliating clinic. The clinical center and the preceptor, or clinical instructor, shall have sole primary responsibility for patient care and treatment. No student shall be considered to be acting as an agent or employee of the clinical center, nor shall a student be used in lieu of clinical center professional or non-professional staff. Students will represent themselves as a physical therapist assistant student, and will display their Missouri Western nametag while at the clinical site. Students will honor all patients' autonomy, and respect the risk-free right of patients to refuse to participate in clinical education.

In the course of a clinical experience there are risks of personal injury and/or damage to property. Neither Missouri Western State University nor any of the clinical facilities used for clinical practice assumes liability if a student is injured on the campus or in the clinical facility during training, unless the injury is the direct result of negligence by the university or clinical facility. In order to cover liability arising from negligent acts on the part of the affiliating student, Missouri Western State University purchases professional liability insurance each school year for currently enrolled students in the Physical Therapist Assistant Program.

Health insurance is the sole responsibility of the student to acquire. The student attests to health insurance coverage prior to clinical affiliations. Students may access student health insurance as a plan dependent, as a student member through the American Physical Therapy Association (APTA), or as an individual on the health insurance marketplace. The Esry Student Health Center provides information on purchasing insurance through EJ Smith and Associates, specialists in College Student Health Insurance.

Should emergency services be required during off-campus educational experiences, the policies of the off-campus site should be utilized for decisions regarding the provision of emergency care. In the absence of a policy at the site, if emergency care is needed, neither Missouri Western nor the off-campus site will be held accountable for the decisions made.

Students will be informed of the requirements of the clinical center prior to the internship. These requirements include, but are not limited to, a health exam, current immunizations and TB test, HIPAA and OSHA training, CPR and first aid certification, and a criminal background check. Lack of completion will result in removal from the PTA Program. Some clinical sites require drug screening, COVID vaccines, or more extensive background checks. Failure to comply with a clinical facility's requirements will result in removal from the program.

Any student with an infectious or communicable disease that cannot be contained (such as fever, secretions, or airborne pathogens) may not be permitted to participate in a clinical rotation. The determination of whether a student should be excluded from participation shall be made on a case-by-case basis in consultation with the student's physician and the appropriate university official. A physician's note provided to the program faculty may be required for continued placement in clinical training. It is the responsibility of the individual student to inform the clinical instructor, program director, and ACCE of any condition that may adversely affect patient care or the safety and health of other students in the program.

I have read the above, understand it, and am aware of the responsibilities and risks involved in participating in the clinical internship program of the Missouri Western State University Physical Therapist Assistant Program. This clinical informed consent shall be kept in my PTA program student file.

 Signature _____ Date _____



Confidentiality Statement

I understand that through my participation in the Physical Therapist Assistant Program at Missouri Western State University, I may have access to confidential patient health information. I further understand that patient information is private, must be kept confidential and that unauthorized release of information is punishable by a fine and/or imprisonment as well as immediate termination from the Physical Therapist Assistant Program.

I agree and understand the following:

- I will not inappropriately release confidential information.
- I agree to discuss confidential information only in the clinical setting as it pertains to patient care and not where it may be overheard by visitors and/or other patients.
- During each clinical rotation in the clinical education program, I agree to follow each agency's established procedures on maintaining confidentiality.
- I will adhere to the Standards of Ethical Conduct of the American Physical Therapy Association. (See page 25 in Student Handbook.)
- I understand that unauthorized release of patient information will result in immediate termination from the Physical Therapist Assistant Program at Missouri Western State University.
- I will participate in all HIPAA training required by the Physical Therapist Assistant Program at Missouri Western State University and my assigned clinical sites.

I, _____, the undersigned, hereby declare that the terms of this statement have been completely read and are fully understood and voluntarily accepted for the purpose of participation in the Physical Therapist Assistant Program.

Student Signature Date

Witness Date

Witness Date



STUDENT HEALTH REPORT

This is to certify that I have examined

_____ student name

and have determined that he/she is in good health and free of communicable diseases. He/she is capable of performing the required physical and mental duties for the clinical education component of his/her educational program.

_____ Primary Care Provider Signature

_____ Date

* Please attach student's complete immunization record to this form.

Other Tests/Screens	RESULT & DATE	RESULT & DATE
Two Step TB		
Color Blindness		

I agree to have this information released to program ACCE and potential clinical sites to fulfill the requirements for clinical education.

_____ Student signature

_____ Date