



DEPARTMENT OF PHYSICAL THERAPY

Physical Therapist Assistant Program
Class of 2022

POLICY AND PROCEDURE MANUAL FOR CLINICAL EDUCATION

Students are required to read the enclosed information and sign a form stating that they have read and will abide by the following policies and guidelines to complete their coursework in the Loma Linda University PTA program.

Policies and Procedure Manual for Clinical Education

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UNIVERSITY PRINCIPLES OF EDUCATION

University Mission:

The mission of Loma Linda University Health is to continue the healing ministry of Jesus Christ, “to make man whole,” in a setting of advancing medical science and to provide a stimulating clinical and research environment for the education of physicians, nurses, and other health professionals.

University Vision:

Transforming lives through education, healthcare, and research.

University Core Values:

The University affirms these values as central to its view of education: Compassion, Wholeness, Integrity, Teamwork, Humility, Justice, and Excellence.

SAHP Mission:

Loma Linda University School of Allied Health Professions is committed to creating a globally recognized, world-class learning environment where students are taught in the manner of Christ.

SAHP Vision:

We envision an environment that enables learners to lead, to heal, to serve, to touch the world in a way that transforms lives.

SAHP Purpose:

To prepare our graduates to be employees of choice for premier organizations around the world, by providing them with practical learning experiences through partnerships with those open to sharing our vision.

Department of Physical Therapy Clinical Education Mission Statement:

As part of a faith-based and diverse institution, we strive to improve the human movement experience and quality of life by advancing physical therapy practice through education, scholarship, and professional service.

Section 1: GENERAL POLICIES

ACADEMIC CONSIDERATIONS

Each student's record is reviewed quarterly by the faculty. Promotion is contingent on satisfactory academic and professional performance and on factors related to aptitude, proficiency, and responsiveness to the established aims of the school and of the profession. As an indication of satisfactory academic performance, the student is expected to maintain the following minimum grade point average: associate programs - 2.0; doctoral degree programs - 3.0.

Required Clinical Courses

Supervised clinical experience is obtained in a variety of settings, and at different times during each of the programs in the Department of Physical Therapy as follows:

- Physical Therapist Assistant Program – three [3] six-week clinical experiences (CE)
- Each clinical experience should average forty hours per week.

INTERNATIONAL CLINICAL EXPERIENCES

All clinical experiences are to be completed within the United States of America. Facilities that are in a USA commonwealth will be considered on a case-by-case basis by the Physical Therapy Department Clinical Education Committee.

PROFESSIONAL BEHAVIOR EXPECTATIONS

Student behavior reflects on the School of Allied Health Professions, Loma Linda University. Students are expected to follow ethical and professional standards. They must follow the Physical Therapy Department dress code unless directed otherwise by their Director of Clinical Education (DCE) (see Dress Code in Appendix One).

Tardiness is **NOT** acceptable behavior and will influence the student's evaluation in a negative manner.

Students are guests in the clinical facilities. They are expected to carry out assignments safely and competently according to procedures demonstrated in class and/or the clinic. If the student feels a procedure is unsafe, contraindicated, or if they are not prepared to perform it safely, they must report this to their clinical instructor (CI). A patient should not receive treatment until the physical therapist or physical therapist student has done an initial evaluation.

As an indication of satisfactory professional behavior, students are expected to demonstrate attributes, characteristics and behaviors that are not explicitly part of the professional core of knowledge and technical skills but are nevertheless required for success in the profession. The APTA has identified behaviors that are integral to the administration of physical therapy services. These behaviors are described below.

VALUES-BASED BEHAVIORS FOR THE PHYSICAL THERAPIST ASSISTANT HOD P06-18-26-34 [Position]

The values-based behaviors for the physical therapist assistant are altruism, compassion and caring, continuing competence, duty, integrity, physical therapist-physical therapist assistant collaboration, responsibility, and social responsibility. The values-based behaviors are defined as follows:

□ Altruism

Altruism is the primary regard for or devotion to the interest of patients and clients, thus assuming responsibility of placing the needs of patients and clients ahead of the physical therapist assistant's self-interest.

□ Compassion and Caring

Compassion is the desire to identify with or sense something of another's experience; a precursor of caring. Caring is the concern, empathy, and consideration for the needs and values of others.

□ Continuing Competence

Continuing competence is the lifelong process of maintaining and documenting competence through ongoing self-assessment, development, and implementation of a personal learning plan, and subsequent reassessment.¹

□ Duty

Duty is the commitment to meeting one's obligations to provide effective physical therapist services to individual patients and clients, to serve the profession, and to positively influence the health of society.

□ Integrity

Integrity is the steadfast adherence to high ethical principles or standards; truthfulness, fairness, doing what you say you will do, and "speaking forth" about why you do what you do.

□ Physical Therapist-Physical Therapist Assistant Collaboration

The physical therapist-physical therapist assistant team works together, within each partner's respective role, to achieve optimal patient and client care and to enhance the overall delivery of physical therapist services.

□ Responsibility

Responsibility is the active acceptance of the roles, obligations, and actions of the physical therapist assistant, including behaviors that positively influence patient and client outcomes, the profession, and the health needs of society.

□ Social Responsibility

Social responsibility is the promotion of a mutual trust between the physical therapist assistant, as a member of the profession, and the larger public that necessitates responding to societal needs for health and wellness.

REFERENCES:

1 Federation of State Boards of Physical Therapy. Continuing Competence Model.
<https://www.fsbpt.org/ForCandidatesAndLicensees/ContinuingCompetence/Model/>. Accessed July 2, 2010.

Explanation of Reference Numbers:

HOD P00-00-00-00 stands for House of Delegates/month/year/page/vote in the House of Delegates minutes; the "P" indicates that it is a position (see below). For example, HOD P06-17-05-04 means that this position can be found in the June 2017 House of Delegates minutes on Page 5 and that it was Vote 4.

P: Position | S: Standard | G: Guideline | Y: Policy | R: Procedure

Last updated: 8/30/2018

LEGAL AND ETHICAL PRACTICE

A description of professional behavior would not be complete without the *Standards of Ethical Conduct for the Physical Therapist Assistant* as outlined by the American Physical Therapy Association, hereafter referred to as the Association, considered binding on physical therapists/physical therapist assistants who are members of the Association. Student membership in this Association is required by the Department of Physical Therapy for both physical therapist and physical therapist assistant students. (See Appendix One for the Physical Therapist *Standards of Ethical Conduct for the Physical Therapist Assistant* and the *APTA Guide for Conduct of the Physical Therapist Assistant*).

ESSENTIAL FUNCTIONS

The practice of Physical Therapy is unique and requires the professional to possess skills and physical abilities that would allow effective participation in the didactic as well as clinical components of the education. These Essential Functions are delineated in program specific documents found in Appendix One.

Section 2: CLINICAL EDUCATION POLICIES

ASSIGNMENT OF CLINICAL EXPERIENCES

“The academic coordinator of clinical education or a designee plans and schedules all clinical assignments. Because of the limited number of local facilities available, assignments cannot be made on the basis of the student's family/marital status or personal preference. Although the department makes an effort to accommodate the student's preference, the student agrees to accept the clinical assignments made by the department at any of the affiliated facilities, whether local or out of state. Students should expect that at least one rotation will be beyond commuting distance from Loma Linda University. Many clinical sites will require the student to have a current flu vaccine if the rotation is during the flu season. Therefore, the University requires that all students receive the flu vaccine on a yearly basis.” *LLU Online Catalog, Physical Therapy, 2019-2020.*

The Physical Therapy Department uses a lottery system for student selection of pre-arranged clinical slots. Students also have the option of placing a Special Request for a site which is not a pre-arranged clinical slot. This may be an existing or new contract. **The DCE will make the decision as to whether a contract with a new site is pursued on this student's behalf.**

The *School of Allied Health Professions Policy Handbook* provides guidelines for clinical assignments when a question of fitness for duty or accommodation occurs, such as medical conditions, emotional instability, pregnancy, or incompetent immunological systems (see Appendix One).

Required Settings for Clinical Experiences

Program	Clinical Experiences	Length
PTA	One Outpatient Orthopedic One Inpatient One Elective (any setting)	6-weeks each

Each clinical experience should average 40 hours per week. Occasionally, the Clinical Education Committee may approve collaboration with a clinical facility that can only provide a minimum of 36 hours per week. The PTA student must satisfactorily pass all three clinical experiences to qualify for completion of the PTA Program. If a clinical experience occurs in two or more settings, a minimum of 75% time spent in one setting is required to classify it as that setting.

General Goals for clinical education experiences:

- To provide learning experiences for students in a wide variety of patient types and clinical settings representing a broad cross-section of current physical therapy specialties and practice.
- To prepare the student as a generalist in the profession, equipped to add specialization to a broad and solid foundation as entry-level professionals in any practice arena.

General Guidelines:

- PTA clinical experiences will include one inpatient setting and one outpatient orthopedic setting. One of the three clinical experiences may be in a specialty area such as, Acute, Geriatric, Neuro, Orthopedics, Pediatrics, Sports Medicine, Wound Care, Cardio-Pulmonary, etc.
- Students **may not** attend two clinical experiences at the same facility.
- LLUH facilities: Clinical experiences are limited to one clinical experience for PTA students.

- Students are NOT assigned to a clinical experience in a facility where there is any potential for conflict of interest. This may include but not be limited to a facility where a relative, faculty member or significant other is employed as a PT, PTA, or in an administrative position over the physical therapy department. Potential conflict of interest will be reviewed by the Clinical Education Committee as needed.
- Students are NOT assigned to facilities where they are either currently employed or have been employed in the last 5 years. Students will be held accountable for revealing such information to their DCE prior to the assignments. Failure to reveal this information will lead to disciplinary action by the Department of Physical Therapy Clinical Education Committee and may result in dismissal from the Program.
- Students are NOT to engage in fraternization with their CI or other staff at the facility during the time of the clinical experience.

STUDENT COMMUNICATION WITH CLINICAL FACILITIES AND PROGRAM

Unauthorized Contact:

Under **no circumstance** is a student, parent, family member or friend of a student **to contact** a Facility Director, Site Coordinator of Clinical Education (SCCE), Clinical Instructor (CI) or other staff in any facility with which LLU SAHP holds an affiliation agreement **for any reason without specific permission of the appropriate DCE. All communication to request placement for a clinical course with contracted facilities must be done by the DCE.** A student **WILL NOT** be placed in a facility if there is evidence that any person other than the DCE has contacted the facility to request clinical placement.

If a student makes unauthorized contact with a clinical facility, disciplinary action(s) will be taken which may include but are not limited to:

- Deferment of the clinical course to a later time.
 - Removal from the degree program due to unprofessional and unethical behavior.
- The disciplinary action will be decided upon by the Clinical Education Committee and presented in writing to the student.

Authorized Contact:

If a student is interested in a facility that is **not on the current contract list**, the student may discuss a Special Request for placement with the respective DCE. **Limited authorization may be granted for the student to make an initial inquiry to collect information regarding possible interest at the clinical site in accepting students for clinical education.**

Required Contact:

Unless directed otherwise by the DCE, each **student is required to contact the SCCE/CI for final details at least four weeks prior** to the beginning of any clinical rotation.

Critical Communication

In an emergency the student must:

- Notify the SCCE, CI, or Supervisor at the facility of the clinical experience.
- Notify the DCE or Program Director.

If the student is ill or unable to go to the clinic facility as assigned for any reason the student must:

- Call the CI or SCCE prior to the start time that day.
- Call the DCE or Program Office Secretary informing them of the absence on the same day as the absence. Report all serious illnesses to the LLU Risk Management Student Insurance Claims Examiner – James Mendez 909-558-1000 ext. 14010.
- Arrange for “make-up” time with the SCCE/CI and DCE.
- A physician’s note is required for absences of three or more consecutive business days or ER visits and must be given to the SCCE, CI and the DCE.
- In the event of injury to a patient or the student, the student must:
 - Report the incident to the SCCE and CI immediately and to the Program DCE.
 - The DCE will report any incident that involves injury to a patient to the LLU Risk Management Liability/Casualty Manager, 909-558-1000 ext. 14010.

If time is lost from the clinical experience or the experience was postponed due to a serious medical condition:

- **The student should give both the SCCE/CI and the DCE a physician’s note** before he/she can either return to the clinical facility or start the postponed clinical experience.

If unexpected clinical problems develop:

- For patient-related problems (e.g., treatment protocols, scheduling issues, incidents involving patients, institutional procedures), the student should communicate first with the CI to identify the problem and work together to resolve the situation.
- If the problem persists, the student will consult with the SCCE and the DCE.
- For interpersonal problems with the CI or other staff, the student may contact the DCE for help in addressing the problem. If the student is not able to solve the problem within the clinic, the DCE shall be contacted for consultation and an intervention from the school is appropriate.

Contact	PTA Clinical Experiences
Director of Clinical Education	Jenni Rae Rubio W: 909 558-4632 x47208 Email: jrubio@llu.edu
Program Director	R. Jeremy Hubbard W: 909 558-4632 x47254 Email: rjhubbard@llu.edu
Department Chair	Larry Chinnock W: 909 558-4632 x47251 Email: lchinnock@llu.edu

RESPONSIBILITIES OF THE UNIVERSITY AND PROGRAM

Students remain under the jurisdiction and responsibility of the University during clinical experiences. This includes but is not limited to:

- Require students to register for the clinical experiences. Registered students are therefore covered by a health insurance and liability insurance plan. (*Refer to the letter from Risk Management in Appendix One*).
- Require that each student has an annual background check
- Require all students have completed the required health screens.
- Require all students to abide by the policies and procedures of the clinical site while at the site and using its facilities. Providing final grade assignment for clinical experience.
- Provide all students with an identification badge and name tag.
- Provide a primary point of contact, i.e., the DCE or designee, for student assignment and planning for participation in and monitoring while on the clinical experience.

RIGHTS, PRIVILEGES, AND RESPONSIBILITIES OF THE CLINICAL EDUCATION SITE

Clinical Site

The clinical site is an environment in which physical therapy rendered is typical of the scope of practice. Loma Linda University (the University) negotiates legal affiliation agreements with each clinical facility or group whereby the students have access to clinical experiences. These contracts may vary slightly between each facility and organization but have the same basic premise of agreement.

Clinical Education Faculty (CEF)

The Clinical Education Faculty are the Site Coordinator of Clinical Education (SCCE) and Clinical Instructor (CI). The SCCE is the primary contact for the Program and coordinates and manages the student's learning experience in the clinical setting. The DCE relies on the SCCE to assign the student to the CI with consideration for achieving the most successful outcome. The SCCE maintains the Clinical Site Information Form (CSIF) which may be a source to the Program to provide current background and qualifications of the CI and general information related to the site. The primary CI is a licensed physical therapist/physical therapist assistant with a minimum of one year of clinical experience. The Program recognizes that in some clinical sites, the same individual may serve as SCCE and CI.

Clinical Education Faculty are expected to:

- Comply with regulations for practice as identified by the professional organization and governing agencies.
- Have a minimum of one year of clinical experience if acting in role of primary Clinical Instructor.
- Provide student orientation to setting and communicate expectations and responsibilities early in the clinical experience.
- Provide ongoing constructive feedback of student performance with consideration of students learning style and needs and which stimulates collaborative learning.
- Evaluate the student according to the guidelines and tools provided by the program and complete documentation in accordance with identified schedule.
- Communicate with the Program DCE in a timely manner regarding student issues.
- Provide clinical education learning experiences within a safe environment, with a caseload which is representative of the physical therapy/physical therapist assistant scope of practice and allows the student to practice skills learned in the Program.

- Demonstrate ongoing desire and skill in providing clinical instruction to students and continuing professional development.

Clinical Education Faculty Development

The CI is a licensed physical therapist/physical therapist assistant with a minimum of one year of clinical experience. The Program strongly encourages the ongoing pursuit of continuing education for SCCEs and CIs.

The Program recognizes that in some clinical sites, the same individual may serve as SCCE and CI.

SCCEs and CIs who remain current in their area of practice, knowledgeable regarding healthcare trends and avidly utilize resources for professional and personal development possess an advantage in being more effective teachers. In addition to participation in local PT clinical education forums, the Clinical Education faculty may benefit from reviewing APTA guidelines for development at:

<https://www.apta.org/search?q=development+of+clinical+education+programs>

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

Responsibilities of Clinical Education Site include the following:

- Provide suitable clinical learning experiences as prescribed by the Program curriculum and objectives.
- Designate appropriate personnel to coordinate the student's clinical learning experience.

This designate shall be called the Clinical Education Supervisor or Site Coordinator of Clinical Education (SCCE).

- Provide of all equipment and supplies needed for clinical instruction at the clinical site.
- Provide necessary emergency care or first aid by an accident occurring at the facility.

Rights and Privileges of the Clinical Education Faculty (CI/SCCE)

University Standard: The standard affiliation agreement signed by the facility and the University outlines rights and privileges of the clinical education faculty including, but not limited to:

- The right to designate the individual from their staff who will coordinate the student's clinical leaning experience at the facility.
- The right to receive assignment of only students who have satisfactorily completed the prerequisite didactic portion of the curriculum.
- The right to recommend withdrawal, and/or exclude, any student from its premises.

Program Standard: The faculty and staff of the Program recognize the contribution of CEF. With the goal of fostering a mutual relationship of professional development, several additional rights and privileges have been extended to them:

- Clinical education faculty are offered attendance to LLU PT hosted continuing education courses at a discounted rate.
- The Program provides documented verification of hours earned towards CEU credit (consistent with the licensing board criteria) for providing clinical instruction to the students.
- The Program provides sponsorship to a number of clinical education faculty to the APTA Clinical Instructor credentialing courses annually.
- Clinical education faculty have increased access to professional forums such as CEF and CEF-IACCC combined meetings via announcements and facilitated processes made by the Program. These forums offer additional opportunities for individual input to the development of the Profession as well as personal professional growth.
- The clinical education faculty has a right to provide feedback to the Program regarding program development and community perspectives related to the PT scope of practice.

COMMUNICATIION BETWEEN CLINICAL FACILITY AND ACADEMIC PROGRAM

Schedule of Communication between the DCE and SCCE/CI:

- The DCE sends an annual request form in March to the SCCE who may indicate a commitment to provide specific clinical experiences for the following year or to defer until slots are requested by the DCE as needed.
- Approximately 10-12 weeks prior to the start of the clinical experiences, the DCE forwards a written request for confirmation of the clinical slot offered by the SCCE.
- Approximately 5-6 weeks prior to the start of the clinical experience, the DCE sends a standard student information packet to the SCCE. *The Program expects the SCCE to use care in sharing the student's personal information on "need to know" only basis.*
- The student contacts the SCCE at least 4 weeks prior to the start of the clinical experience to introduce self and to discover specific expectations for practice at the site. The student then completes any additional requirements.
- If an offered clinical slot is not assigned to a student, the DCE sends a letter of cancellation to the SCCE 3-4 weeks before the start date.
- The DCE or faculty designee contacts the SCCE and/or CI 1-3 weeks prior to the midterm to schedule a midterm performance review session. The SCCE/CI is expected to contact the DCE for resolution of problems at any time during the clinical experience as needed.
- The student is responsible for returning the required completed documents to the DCE at the end of the clinical experience. The CI is expected to complete the documentation by the final day of the clinical experience.
- The Program provides documented verification of hours earned towards CEU credit (consistent with the licensing board criteria) for providing clinical instruction to the students. These are sent to the clinical sites approximately six weeks after the clinical experience.
- **Student Accommodations:** If a student is granted approval by the School for accommodations or needs special supervision, the DCE discusses these needs with the SCCE prior to confirmation of the clinical experience. If special needs are discovered or become necessary while in the clinic, the SCCE/CI is to notify the DCE immediately.

Feedback:

Feedback from the Clinical Education Faculty to the Program, includes the following:

- During the midterm visit of clinical experiences and at the end of clinical experiences. Feedback regarding the Program's preparation of the student for practice in the specific setting is discussed and documented.
- Completion of a brief survey regarding the Program's functions and processes at the end of the clinical experiences.
- During Community Advisory Council meetings and more detailed surveys distributed at other intervals as deemed necessary by the Program DCE and Program Director.

Feedback from the Program and Student to the SCCE/CI, includes the following:

- Students are expected to give formal feedback to the DCE and the CEF regarding the clinical experience via *The Physical Therapist Student Experience Evaluation Form and Clinical Instruction* form. It is recommended that the SCCE/CI keep a copy which may be used for self-assessment and development. The DCE may choose to follow-up on information provided via this tool at the time of the midterm visit or otherwise as appropriate.

- During the clinical experience midterm visit/review, the DCE or faculty designee observes the clinical environment and provides feedback which may enhance the teaching/learning experience.
- The Program provides, as deemed appropriate, general announcements and information regarding the University and Program to clinical education faculty via either written, verbal, or online communications.
- The DCE or designee present information accumulated through SIG meetings such as IACCC-CEF annual meeting.
- The DCE obtains information regarding post professional educational needs of the CIs via course evaluation surveys at Program sponsored continuing education events. Assessment and development of educational opportunities are communicated to the CEF via email and University website.

POLICY FOR COMPLAINTS

Complaints

Outside Complaints or Grievance Procedures

The Physical Therapist Assistant Program at Loma Linda University values comments and concerns from the outside public, in regard to the behavior of our students. We strive to graduate competent, compassionate, and ethical students. These behaviors should carry with the student past the clinic doors.

Any grievance made will be responded to and dealt with in a timely and appropriate manner.

Procedures and Responsibilities

Complaints can be made in writing through email or anonymously over the phone.

The Director of the Physical Therapist Assistant Program will manage the complaint and respond in a timely manner. Depending on the gravity of the complaint, a committee may be created to hear the complaint and a vote taken to decide the student's standing in the Physical Therapist Assistant Program. Legal counsel will be consulted when deemed appropriate.

Students with complaints are advised to follow the steps below, in consecutive order, to resolve any program-related complaints. If the complaint remains unresolved at any level, the student may proceed to the next level.

Responsible Party:

1. Instructor/coordinator of the course – Jenni Rae Rubio at jrubio@llu.edu 909-558-4632 ext. 47208
2. Program Director – Dr. Jeremy Hubbard at rjhubbard@llu.edu, ext. 47254
3. Chair of Department of Physical Therapy – Dr. Larry Chinnock at lchinnock@llu.edu, ext. 47251
4. Dean of the School of Allied Health Professions – Dr. Craig Jackson ext. 44545

ASSESSMENT OF STUDENT LEARNING IN CLINICAL SETTING

Clinical Experiences (LCEs)

Clinical Education is a critical component of a Physical Therapist Assistant Education. Like most healthcare and allied health professions is dynamic in nature. Professional task forces and special interest groups continue to provide input to develop models of clinical assessment which are more and more efficient and valid in representing student performance and program outcomes.

Assessment Tool:

APTA Physical Therapist Assistant Clinical Performance Instrument (CPI, version 2006):

The student completes a self-assessment

The CI completes an assessment of the student

The student receives instruction in the use of the assessment tool and is expected to collaborate with the CI in setting performance goals and to allow for self-reflection and self-development. The tool contains 14 criteria which are used to assess student performance at the midterm and final evaluations.

In addition to online resources, instructions for use of the CPI tool are located in the student's Clinical Education Handbook which should be available to the SCCE/CI throughout the clinical experience.

Clinical Instructors and students are instructed to complete the online APTA training as found on the APTA Online Learning Center prior to completion of the performance assessment:

https://help.liasonedu.com/Clinical_Assessment_Suite_Help_Center/Custom_Support_and_Resources/Webinars_and_Downloads/CPI_Training_Files

Midterm reviews: Key academic faculty are assigned to each student for review of the student's performance with the student and CI at midterm. Completion of the CPI for the midterm is highly encouraged to allow a more meaningful and efficient discussion and problem solving as needed.

Specific standards for satisfactory completion of each clinical experience.

See Appendix Two or Individual Course Outline included in the informational packet for the student.

While the expectations for student performance increases with successive clinical experiences, some students perform at a level above the required standard for the particular experience. The CPI provides a mechanism for indicating such performance described as "Beyond Entry-level Performance".

In addition to the summative discussion and documentation of the student's performance presented at midterm and final evaluation periods, the program highly recommends that the CI provides additional student feedback as needed to foster ongoing professional development.

Procedures for Final Assessment of Clinical Experiences:

1. Evaluation of student by the CI (includes documentation using the APTA CPI).
2. Student Self-assessment using the APTA CPI.
3. Student submission of other program assignments (see CI instruction letter or Course outline)
4. Documentation of midterm Reviews by academic faculty with the CI and the student.

Learning Objectives for Clinical Experiences:

The following objectives correspond with the CAPTE Standards & Required Elements.

At the completion of the course, CE I, CE II, or CE III, the student will demonstrate performance on all Physical Therapist Assistant APTA CPI criteria 1-14 at or above standard set by the program for the specific experience (See specific Course Outline, or Appendix Two for *Standards of Satisfactory Completion of Clinical Experience*).

Professional Practice (Foundational Elements)

1. Physical Therapist Assistant CPI criteria 1: Safety.
2. Physical Therapist Assistant CPI criteria 2: Clinical Behavior
3. Physical Therapist Assistant CPI criteria 3: Accountability
5. Physical Therapist Assistant CPI criteria 5: Communication
7. Physical Therapist Assistant CPI criteria 7: Clinical Problem Solving

Patient Management

4. Physical Therapist Assistant CPI criteria 4: Cultural Competence
6. Physical Therapist Assistant CPI criteria 6: Self-assessment and Lifelong Learning
8. Physical Therapist Assistant CPI criteria 8: Interventions: Therapeutic Exercise
9. Physical Therapist Assistant CPI criteria 9: Interventions: Therapeutic Technique
10. Physical Therapist Assistant CPI criteria 10: Interventions: Physical Agents and Mechanical Modalities
11. Physical Therapist Assistant CPI criteria 11: Interventions: Electrotherapeutic Modalities
12. Physical Therapist Assistant CPI criteria 12: Interventions: Functional Training and Application of Devices and Equipment
13. Physical Therapist Assistant CPI criteria 13: Documentation
14. Physical Therapist Assistant CPI criteria 14: Resource Management

CRITERIA AND PROCEDURES FOR SUCCESSFUL COMPLETION OF CLINICAL EXPERIENCES

Grading and Intervention (The entire PTA Grading Policy may be found in Appendix Two).

The following include resources for grading of the clinical experiences:

1. Physical Therapist Assistant Clinical Performance Instrument (CPI)
2. Interviews conducted by academic faculty reviewers with the Site Coordinator for Clinical Education (SCCE), Clinical Instructor (CI) and the student.
3. Student's *Self-Assessment* using *the Clinical Performance Instrument Form*.

Students are expected to demonstrate attributes, characteristics, and behaviors that are not explicitly part of the professional core of knowledge and technical skills but are nevertheless required for success in the profession. The APTA has identified behaviors [Core Values/Values-based behavior] that are integral to the satisfactory completion of a clinical experience. The CEC will reference these APTA sources to substantiate the decision for grading as deemed necessary.

Each student is expected to receive a satisfactory rating by the end of each clinical experience. Each rotation is independent of the others and must be satisfactorily completed.

Challenges with meeting expectations

If the clinical faculty (SCCE/CI) finds that the student is not meeting the requirements or expectations for the clinical experience, the SCCE/CI should contact the DCE to develop an agreeable plan of action for successful completion. The student is also encouraged to contact the DCE in this regard. Periodic review and specific feedback from the CEF should be provided to the student and the DCE. If the problem remains unresolved, the Clinical Education Committee (CEC) will review the case and provide input up to and including immediate termination of the clinical experience. A clinical facility also has the right to terminate an experience at the discretion of the CEF and/or administration. Errors in safety and/or judgment and unprofessional behavior may be grounds for the student to be removed from the facility. **A student who chooses to terminate any clinical experience without consultation and approval from the respective DCE will automatically receive an "Unsatisfactory" grade** for the clinical experience.

The Clinical Instructor does not determine the final grade for clinical experiences. If the student is at risk of receiving an unsatisfactory grade, the CEC will review the indicators listed above and will determine the final grade.

The *DPT Clinical Education Committee* is comprised of the following: DCE's from PT and PTA Programs, Program Directors of PT and PTA, and two additional faculty designates from the Academic Faculty who perform PT Midterm reviews, as representation of the PT faculty. The *PTA Clinical Education Committee* consists of the following: DCE from PTA, Program Directors of PT and PTA, and two PTA faculty members. The DCEs from the DPT program will be part of the PTA CEC as needed. The Clinical Education Committees have the right to obtain additional input from other faculty in assessing the overall student performance and assigning the grade.

Timely submission of clinical documents to the DCE by the student is critical to facilitate timely review and grade assignment. If the student fails to complete and submit the required documents including CPI, Student Evaluation of Clinical Experience (SECE) form, In-service/Project Report, Reflection Summaries, and all appropriate signatures and dates, by 5:00 p.m. on the MONDAY after the last scheduled date of the clinical experience, an **“Unsatisfactory” (U) grade will be submitted. A “U” grade entered under these conditions must be remediated by submission of completed documents and re-registration for the clinical experience.**

Scholastic Disqualification Policy

- The Program has a policy regarding disqualification based on scholastic performance throughout the program. If a student receives a "Failed" or an "Unsatisfactory" grade, he/she will receive “Disqualification Points” equal to the academic units of that course.
- A student who receives a cumulative total of 5 grade penalty points disqualifies himself/herself from the Program.
- A student who receives a second unsatisfactory grade in a clinical assignment disqualifies himself/herself from the Program.
- The disqualification points continue to accumulate even if the student has completed a remediation for the course and the grade was changed from “F” to “C”.
- When a student repeats a course in which he/she received an unsatisfactory grade, the points received by the student continue to be in effect.

Section 3: STUDENT RESPONSIBILITIES

STUDENT RIGHTS AND ACCESS TO BENEFITS

These resources are detailed in the University Student Handbook as well as the Student Handbook for the Physical Therapist Assistant Program.

STUDENT RESPONSIBILITIES

This section contains the individual responsibilities for the PTA student as they relate to the clinical setting. Compliance with these policies and responsibilities is necessary for satisfactory completion of each clinical experience.

Health Policies – All students must have the following on file with the DCE or designee:

TB Test – (Tuberculosis Screen)

Documentation of the TB test must be current within 1 year prior to starting a clinical experience. Some clinical sites may require a two-step test or a test within a shorter time. If the TB test is positive, a copy of the chest x-ray report must be on file.

Hepatitis B Vaccine – Documentation for 3 vaccinations or a report of a positive antibody titer.

MMR - (mumps, measles, and rubella vaccine) - Documentation of two immunizations or a report of a positive antibody titer.

TDAP – Tetanus, Diphtheria and Pertussis. Documentation of inoculation within the last ten years.

Varicella (chicken pox) – Proof of a positive varicella titer or a series of two vaccinations. Some clinical sites require a titer.

Seasonal Flu – Documentation of influenza vaccination for current flu season, October – March.

Site Specific – There may be other additional health records that are required by some clinical facilities. The student is to consult with the DCE or designee for any specific requirements. Facilities may require titers for Hepatitis B, MMR and Varicella (chicken pox), and proof of COVID-19 vaccination. Pre-clinical or random drug testing or physical examinations may be required, as well as required site-specific testing.

Cardio-Pulmonary Resuscitation – CPR

The student must carry a current BLS CPR certification for the Health Care Worker (for adult, child and infant) issued from the **American Heart Association** when in the clinic and a copy should be on file in the Program's clinical education office with the DCE.

Background Check

Background checks are currently part of registration preceding the student's enrollment into the Program and an updated background check may be required for the final two clinical experiences. This is to ensure that background checks are not more than 12 months old when the student begins a clinical experience. The

background check is completed via the student portal of the University and accessed by an administratively designated individual in the School.

As per the website “The background package has been designed to meet the clinical placement requirements for all Loma Linda University medical programs and their associated clinical placement facilities.” Some clinical facilities may require additional background checks done by the student or fingerprinting through their own vendor at the student’s expense.

The student is advised that while the result of background checks may allow entrance to particular clinical sites during the course of the program, there is no guarantee that this would allow satisfactory completion of the application for licensure. Each background check for application for state licensure is assessed individually by the state’s own licensing body.

Student Clinical Education Online Resources and Materials

Clinical Education Resources and Materials (CERM) is the internal online student resource and material site online on CANVAS for both PTA and DPT Clinical Education. It contains sections for announcements, organization information, facility listings, clinical site information forms (CSIF), electronic archives, online forms, paper documents, secure documents, external links, and communication as well as access for APTA instructions in use of the CPI. Instructions for using this website will be given during the clinical orientation classes by the DCE and support staff.

Biographical Form

The *biographical form* is a document with the student’s biographical information. This information is crucial for both the DCE and the clinical education faculty. It will be sent to each student’s clinical experience sites.

- The biographical form is available online in CANVAS under CERM.
- Each student must complete an electronic biographical form and submit it via CERM to the DCE by the date given.
- The student is responsible for updating and keeping current all information on the biographical form.

Confidentiality and Protected Information

The Department of Physical Therapy recognizes that information which promotes effective student education and patient/client care may be shared with appropriate individuals. Reasonable care is expected in the dissemination and use of this information in arranging for clinical experiences. Students document acknowledgement of this sharing of information with the Program.

Students receive instruction in the basics of Health Information Portability and Accountability Act (HIPAA) early in the program, but it is reasonable to expect some clinical sites to include additional training during their orientation.

Policies regarding patient/client rights within the clinical setting are established by that institution and should allow patient/client the right to refuse to participate in clinical education. Students are expected to adhere to these policies while at the clinical site.

TIMELINE OF STUDENT RESPONSIBILITIES

PRIOR TO THE CLINICAL EXPERIENCE, THE STUDENT WILL:

- Review instructions for use of electronic information in **CERM on CANVAS** and create the required Google Account using an LLU email as instructed on the main page.
- Attend all **Clinical Orientation classes** per program.
- Provide the DCE or designee documentation of all **health requirements** following the instructions posted on CERM's Required Documents section.
- Complete a **student Biographical form** and submit it in the format as instructed, by the deadline posted on CERM's Assignment Modules per cohort.
- Submit all **Special Requests** to the DCE/clinical education program by the deadline posted on CERM's Calendar and following all the instructions posted on CERM's Special Request section.
- Access all **pertinent information** needed for clinical experiences from the DCE/designee in a timely manner. Respond to emails in a timely fashion to ensure sufficient time for a successful on-boarding process.
- **Call the facility four weeks (or as otherwise directed by the DCE) in advance** to communicate with the SCCE/CI and to find out any additional requirements, such as work schedule, directions to the facility, dress code, etc.
- Complete any **additional requirements** as outlined in the information packets sent to the student by the clinical facility, staff, or the SCCE/CI. Failure to complete and/or submit requirements on time may be subject to disciplinary action up to and including a fee assignment or deferral of attendance to the current clinical experience.

PRIOR TO AND/OR DURING THE CLINICAL EXPERIENCE, THE STUDENT WILL:

- **Make arrangements for reliable transportation to the clinical facility.**
The student is responsible for housing as well as transportation to and from the facility, whether by his/her own transportation, carpooling, or public transportation. Some sites may offer stipends, but this is a privilege and not a right to be expected. Any hours lost due to absences and/or tardiness because of car trouble may need to be made up.
- **Arrive on time each day.**
Each student must clarify the work schedule with the SCCE/CI prior to starting the clinical experience. Clinic hours may vary throughout the clinical experience. Students are required to complete 40 hours per week with a minimum of 36 hours per week. The student is not to request an alternative work schedule with the facility. Exceptions to the assigned work schedule must be negotiated by the DCE.
- **Notify the SCCE/CI if student expects to be late.**

- **Notify the SCCE/CI and DCE if absent any length of time.**

Both the CI and the DCE must be notified and given the reason for the absence. The DCE will determine if the absence may be excused. **A maximum of two days only for Long Clinical Experiences will be allowed for illness per each clinical experience.** Absences beyond the stated days above must be made up at the discretion of the CI in conjunction with the DCE. The absences are for emergencies only. These are not personal days.

Request personal days in writing to the DCE prior to the clinical experience. The DCE will consult with the CEF to determine if the request can be approved.

- **Dress professionally and abide by the dress code of the academic program and the clinical facility.** (See Appendix One for Dress Code) The student must clarify any questions regarding the dress code with the SCCE/CI prior to starting the clinical experience. If there are any questions about the appropriateness of the attire, a lab coat should be worn.
- **Wear the name badge provided by the Program** and any additional identification required by the clinical facility.
- **Introduce self to the patient and clinical or hospital staff as PTA student, using first name.** Acknowledge the patients right to refuse treatment.
- **Prepare adequately for the clinical experience, including case studies, in-services, and any other additional assigned “homework”.** The clinical experience should NOT be considered a VACATION from school, but an advanced learning experience. Students are expected to complete all assignments given by the CEF and to prepare for in-services in a timely manner.
- **Present a minimum of one in-service/project during the clinical experiences.** The student may be required by the clinical facility to do additional in-services. An In-service Report Form should be submitted to the DCE with the other evaluation materials at the end of the clinical experience in which it was presented.
- **Establish access to resource material** while in the clinical setting to support and guide his/her clinical decision making, including texts, lecture materials, articles, and in-service materials.
- **Take responsibility for his/her clinical learning experience.** Make good use of “free time” by reading information pertaining to the clinical setting, preparing for his/her in-service, or with the permission of the CI, observe other clinicians and healthcare professionals involved with patient care.
- **Abide by the safety policy of the facility.** Safety policies should be covered during the student orientation of each facility. If safety polices are not covered the student is required to seek out this information.

- **Practice in a safe manner and adhere to legal and ethical standards.**

Under no circumstance is the student to treat a patient without a physical therapist in the building. If the physical therapist has stepped out of the building for any reason, the student is not to start or continue treatment of any patient, even if directed to do so by the CI. If this situation occurs the DCE should be notified immediately.

The student should be very careful to use safe techniques when treating patients. Good body mechanics are important and should be practiced in all situations.

The student should inform the DCE regarding any serious problems encountered during the clinical experience, such as errors in practice, unethical, or illegal practices. Problems that involve the CI and/or problems with a patient or patient's family member should be reported to the SCCE and the DCE.

- **Discuss the use of the evaluation forms for the Clinical Performance Instrument (CPI) with the CI at the beginning of the experience.** Complete the student's version of the evaluation documents and discuss CI's assessment and feedback at midterm and at final of clinical experience. Both student and the CI should be proactive in the completion of all assessment documentation, but it is the student's responsibility for timely completion and submission.

Fill out the **PTA Student Evaluation: Clinical Experience and Clinical Instruction (SECE)** form and review it with the CI at the midterm and final evaluations. Both the student and the CI **must sign** on the appropriate page of the form.

- **Communicate openly with CI regarding learning opportunities, questions or differences between CI and student, and learning style and format of feedback.** If the CI and student are not able to **resolve a conflict**, the SCCE should be notified for assistance. If unresolved, the DCE should be contacted. The student, the SCCE and/or CI may contact the DCE whenever needed.

AFTER THE COMPLETION OF THE CLINICAL EXPERIENCE, THE STUDENT WILL:

- **Create a copy of all evaluation materials for his/her records.**
- **Submit all required materials on CANVAS with necessary signatures to the DCE by the deadline given.** Materials submitted after the deadline will result in an "Unsatisfactory" grade and a delay in the transmission of completion notices. To remove an unsatisfactory grade, the student must re-register for the course, as noted previously.
- **Attend an Exit Interview with the DCE or designated Faculty Reviewer after the completion of the last clinical experience to provide overall feedback.** Onsite Exit Interviews are expected. Phone reviews may be accommodated on a case-by-case basis as approved by the DCE or Program Director.

Appendix One

Tab. 1 APTA Core Documents:

Code of Ethics for the Physical Therapist
Guide for Professional Conduct
Standards of Ethical Conduct for the Physical Therapist Assistant
Guide for Conduct of the Physical Therapist Assistant

Tab. 2 Dress Code

Tab. 3 Procedure for Evaluating Fitness for Duty – School of Allied Health Professions Policy

Tab. 4 Risk Management Letter/health plan

Tab. 5 Sexual Harassment Policy – Loma Linda University Policy

Tab. 6 Identification and Supervision of Physical Therapy, Physical Therapy Assistant Students

Tab. 7 Essential Functions for PT/PTA students

Tab. 8 Medicare Reimbursement and Student Services – APTA Chart (*rev. 10-15-13*)

Appendix Two

Tab. 9 Course Descriptions

Tab.10 Year-at-a-Glance

Tab.11 Grading Policy

Tab.12 Standards for Satisfactory Completion of Clinical Experiences

Tab.13 Signature Page

Student Signature Page

By signing below, I acknowledge receipt of the Loma Linda University Department of Physical Therapy Policy and Procedure Manual for Clinical Education. I agree to follow the expectations and guidelines as outlined. I understand the policies and procedures presented in the handbook are subject to change. I further understand that this handbook does not replace or mollify the contents of the School of Allied Health Professions Catalog or the Student Handbook.

Print Name

Signature

Date
