

FREED-HARDEMAN UNIVERSITY



PHYSICAL THERAPIST ASSISTANT PROGRAM

Freed-Hardeman University

Physical Therapist Assistant Program

Clinical Education Handbook

2022-2023

Accreditation Statement

Effective July 19, 2022, Freed-Hardeman University has been granted Candidate for Accreditation status by the Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; phone: 703-706-3245; email: accreditation@apta.org). If needing to contact the program/institution directly, please call Dr. Ashley Prentice, Program Director, at 731-989-6097 or email aprentice@fhu.edu.

Candidate for Accreditation is an accreditation status of affiliation with the Commission on Accreditation in Physical Therapy Education that indicates the program may matriculate students in technical/professional courses. Achievement of Candidate for Accreditation status does not assure that the program will be granted Initial Accreditation.

Welcome to Freed-Hardeman University's PTA Clinical Education Program!

Clinical education is a vital portion of the Physical Therapist Assistant curriculum. We hope this handbook will assist in providing a high-quality clinical education experience for both clinical faculty members and their students. Clinical education allows the student to fully integrate and implement the information and skills learned during basic science coursework, as well as the clinical classroom and laboratory portions of the program.

The purpose of this handbook is to provide information and guidelines as a common frame of reference for all who are involved in the clinical education process:

- The student
- The Clinical Instructor
- The site Coordinator of Clinical Education
- The faculty members of the PTA program at Freed-Hardeman University

If you have any questions or concerns, please do not hesitate to contact us.

Thank you,

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I. Program Information

1.1 Institutional History and Accreditation

Freed-Hardeman University traces its origin to the 1869 charter of a private high school and college in Henderson. FHU is a private, Christian university incorporated in the State of Tennessee in 1919. Freed-Hardeman University has the general authority to operate under the Tennessee Nonprofit Corporation Act (Tenn. Code Ann. § 48-53-102). The University is exempt from the oversight of the Tennessee Higher Education Commission (Tenn. Code Ann. § 49-7-2004).

The institution is governed by a 28-member board of trustees that oversees the adoption of fundamental principles related to the mission and strategic direction of the institution. FHU Policy 1.4.2 establishes that the FHU Board of Trustees has legal authority to approve new programs. On April 21, 2017, Mr. David R. Shannon was appointed by the Board of Trustees to serve as the President of Freed-Hardeman University. President Shannon began his duties on June 1, 2017, and continues to lead the University at this time.

The initiation of the Associates of Applied Science-Physical Therapist Assistant degree program emerges from the University's on-going planning and evaluation processes. In the academic year of 2018-2019, Freed-Hardeman University engaged in a comprehensive strategic planning process. This process involved the campus community (faculty, staff, students, and administration) and the Board of Trustees. The process included completing a gap analysis with peer and aspirant institutions and an analysis of the University's strengths, weaknesses, opportunities, and threats. From these analyses, emerged the University's Strategic Plan for 2019-2023. Dr. Brian Butterfield, chair of the Department of Biological, Physical and Human Sciences, along with Dr. LeAnn Davis, dean of the College of Arts and Sciences, submitted the proposal for the AAS-PTA degree program in Spring 2019, which migrated through Freed-Hardeman University's Academic Review Process. On April 26, 2019, the FHU Board of Trustees approved the implementation of the AAS-PTA degree program.

Freed-Hardeman University is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (SACS) to award associate, bachelor's, master's, specialist, and doctoral degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097, or call 404-679-4500 for questions about the accreditation of Freed-Hardeman University.

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program/institution directly, please call Dr. Ashley Prentice, Program Director, at 731-989-6097 or email aprentice@fhu.edu.

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1.2 Contingency Statement

Considering that the PTA program is in the development process, an accreditation contingency plan has been developed. The plan would come into play if candidacy were approved, and initial accreditation is denied. Should initial accreditation be denied, graduation of the first student cohort would be delayed until any deficiencies are remedied. If the program could not continue, University administration would facilitate the acceptance of students into other accredited college programs. Completed PTA coursework credits would be transferable at Freed-Hardeman University for the required elective hours for graduation but transfer of credits to another PTA program cannot be guaranteed. Students will not receive any monetary refund if the program were to not receive accreditation. The PTA core faculty are working diligently to ensure the success of the program.

1.3 Statement of Nondiscrimination

Freed-Hardeman University admits qualified students of any race, age, sex, religion, disability, color, creed, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Freed-Hardeman does not discriminate on the basis of age, sex, religion, disability, race, color, national or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

Based upon this commitment, FHU follows the principle of non-discrimination and operates within applicable federal and state laws. As a recipient of federal financial assistance, FHU is required by Title IX of the Educational Amendments of 1972, as amended, not to discriminate on the basis of sex in its admission policies, treatment of students, employment practice or educational programs, except as required by religious tenets of the churches of Christ.

1.4 University Mission Statement

The mission of Freed-Hardeman University is to help students develop their God-given talents for His glory by empowering them with an education that integrates Christian faith, scholarship, and service.

1.5 Program Mission Statement

The mission of Freed-Hardeman University's Physical Therapist Assistant program is to equip students with an education that integrates Christian faith, scholarship, and service in order to provide holistic healthcare services to individuals and communities throughout the world. By growing in knowledge through dedicated faculty and a comprehensive curriculum focused on contemporary practice, the program will prepare graduates to serve as competent and ethical physical therapist assistants able to work under the direction and supervision of a licensed physical therapist.

The mission of the PTA program supports the University's mission in that it exists to provide an excellent healthcare education permeated with Christian values whose graduates are morally and spiritually prepared to provide safe, evidence-based contemporary care and render professional services to individuals, churches, communities, and the world.

1.6 Program Goals

The PTA program supports the goals of Freed-Hardeman University by establishing the following program specific goals:

Goal 1: The program will prepare graduates to be competent and ethical physical therapist assistants able to serve their community by working under the direction and supervision of a licensed physical therapist.

Goal 2: Program students and graduates will demonstrate appropriate professionalism with patients, program faculty, and other healthcare providers.

Goal 3: Program graduates will be prepared to communicate in a culturally competent manner with patients and caregivers from diverse backgrounds.

Goal 4: Program faculty will provide a high-quality learning environment and a comprehensive curriculum based on contemporary, evidence-based physical therapy.

Goal 5: The program will integrate Christian faith, scholarship, and service to prepare students for a lifetime of service and achievement.

1.7 Program Curriculum

Fall: Semester I, General Education/Cognates	Semester credits	Lecture/Lab/OTJ
BIB121: Life of Christ	2 hrs.	2/0/0
ENG101: English Composition I	3 hrs.	3/0/0
BIO211: Human Anatomy and Physiology I	4 hrs.	3/1/0
PSY210: General Psychology	3 hrs.	3/0/0
COM140: Speech Communications	3 hrs.	3/0/0
Elective hours for non-residential students	2 hrs.	
	15-17 hrs.	
Spring: Semester II, General Education/Cognates	Semester credits	Lecture/Lab/OTJ
BIB122: Acts of the Apostles	2 hrs.	2/0/0
ENG102: English Composition II	3 hrs.	3/0/0
BIO212: Human Anatomy and Physiology II	4 hrs.	3/1/0
BIO115: Medical Terminology	2 hrs.	2/0/0
MAT101: College Algebra (or higher)	3 hrs.	3/0/0
HIS Gen Ed	<u>3 hrs.</u>	3/0/0
	17 hrs.	
Fall: Semester III, PTA Core	Semester credits	Lecture/Lab/OTJ
PTA101: Introduction to Physical Therapy Concepts	2 hrs.	2/0/0
PTA102: Pathophysiology for the PTA	3 hrs.	3/0/0
PTA103: PTA Procedures	4 hrs.	2/2/0
PTA104: Clinical Anatomy and Kinesiology	3 hrs.	2/1/0
PTA105: Therapeutic Exercise	4 hrs.	2/2/0
Approved BIB Course for residential students	<u>2 hrs.</u>	
	16-18 hrs.	
Spring: Semester IV, PTA Core	Semester credits	Lecture/Lab/OTJ
PTA201: Orthopedic Rehabilitation	2 hrs.	2/0/0
PTA202: Neuromuscular Rehabilitation Across the Lifespan	4 hrs.	2/2/0
PTA203: Physical Agents and Modalities	4 hrs.	2/2/0
PTA204: PTA Ethics and Issues	2 hrs.	2/0/0
PTA206: Integrated Clinical Education	<u>4 hrs.</u>	0/0/4
	16 hrs.	
Fall: Semester III, PTA Core	Semester credits	Lecture/Lab/OTJ
PTA205: Special Populations for the PTA	4 hrs.	2/2/0
PTA207: Terminal Clinical Education I	5 hrs.	0/0/5
PTA208: Terminal Clinical Education II	5 hrs.	0/0/5
PTA209: PTA Seminar	<u>2 hrs.</u>	2/0/0
	16 hrs.	

1.8 Course Descriptions

PTA 101: Introduction to Physical Therapy Concepts (Lecture)

This course will introduce students to the profession of physical therapy by discussing the scope of practice of the physical therapist and physical therapist assistant, legalities and ethical behavior, and current trends and practices in the physical therapy profession. Interpersonal communication among the healthcare

team, documentation in a medical record, and psychosocial implications of disease will be emphasized.

PTA 102: Pathophysiology for the PTA (Lecture)

This course will focus on common disorders and diseases affecting the major organ systems of the body. Etiology, signs and symptoms, red flags, diagnoses and prognoses, and implications for physical therapy will be discussed. Case studies will be provided for critical thinking and application of theory to practice for the physical therapist assistant. Heavy emphasis of pharmacological interventions will be included.

PTA 103: PTA Procedures (Lecture/Lab)

This course will introduce students to the basic physical therapy clinical skills, assessment techniques, and treatment interventions. Emphasis will be placed on gait and transfer training, body mechanics, positioning techniques, vital sign assessment, infection control, wheelchair training, and proper use of assistive devices. Students will have laboratory time to practice and demonstrate competence of technical skills.

PTA 104: Clinical Anatomy and Kinesiology (Lecture/Lab)

This course will cover human anatomy specific to the musculoskeletal system through the identification of anatomical structures and their relationship to function, normal and abnormal biomechanical principles of joint patterns, and gait. Introduction to surface anatomy, palpation skills, goniometry, and manual muscle testing will be provided during laboratory time.

PTA 105: Therapeutic Exercise (Lecture/Lab)

This course will introduce exercise as a preventative and treatment mechanism for pathological conditions that influence the strength, endurance, and flexibility of the human body. Emphasis will be placed upon the body's physiological response to exercise, design and application of exercise, the developmental sequence of exercise, types of exercise, and the use of exercise equipment. A hands-on introduction to the principles and procedures of physical therapy interventions will be provided during laboratory time.

PTA 201: Orthopedic Rehabilitation (Lecture)

This course will provide students with an overview of musculoskeletal and orthopedic conditions observed in physical therapy. Emphasis will be on the study of musculoskeletal pathologies, determination of appropriate physical therapy interventions, and a review of related anatomical structures.

PTA 202: Neuromuscular Rehabilitation Across the Lifespan (Lecture/Lab)

This course will introduce diagnoses common to the neurological system. Neurological interventions, exercise prescription, and treatment progression will be discussed and applied through hands-on lab practice. This course will also provide an overview of the neuroanatomy of the CNS and PNS as it relates to the treatment necessary for patients with dysfunctions of these systems. Emphasis includes the

structures and function of the nervous system, neurophysiological concepts, human growth and development across the lifespan, and neurologic dysfunctions. Pediatric and geriatric care will be covered in this course.

PTA 203: Physical Agents and Modalities (Lecture/Lab)

This course will provide the student with a theoretical basis for the safe and effective use of physical agents and modalities in physical therapy practice. Upon completion of the course, students will demonstrate knowledge of the physiological effects, indications, contraindications, and application techniques for thermal agents, ultrasound, electrotherapy, traction, and external compression. Pain management techniques will also be included. Laboratory time will be utilized to teach students the proper setup, application, and monitoring of physical agents to ensure safe patient care.

PTA204: PTA Ethics and Issues (Lecture)

This course is an extension of the ethical concepts presented in PTA101, taking a further look into the ethical and legal issues regarding physical therapy practice, supervisory processes between the physical therapist and physical therapist assistant, business concepts and healthcare reimbursement, and quality assurance principles such as chart audits. Students will discuss challenges in communication and ethical issues involving vulnerable populations. Students will begin an evidence-based research project to be completed and presented in PTA209 during the final semester of the program.

PTA 205: Special Populations for the PTA (Lecture/Lab)

This course will present students with a body systems approach to etiology, pathology, signs/symptoms, and treatment of conditions affecting the various organ systems of the body. Emphasis will be placed on conditions common to physical therapy practice including women's health, cardiac rehabilitation, oncology, orthotics and prosthetics, and amputee rehabilitation. Wound care management will also be addressed. Lab time will be allocated for hands-on practice of advanced intervention procedures for special populations.

PTA 206: Integrated Clinical Education (Clinical Education Experience)

An integrated clinical experience at the end of the second semester of PTA technical coursework designed to introduce the student to the practice of physical therapy through interactions in the healthcare environment. Under the supervision of a licensed physical therapist or physical therapist assistant, students will complete a minimum of 160 hours of clinical education while integrating knowledge and skills obtained in lecture and lab courses with patients in a clinical setting. This course entails ongoing interaction between the clinical instructor, student, and director of clinical education. At the end of this clinical education experience, students will be required to demonstrate all 14 performance criteria on the CPI at least at **beginner** level.

PTA 207: Terminal Clinical Education I (Clinical Education Experience)

Clinical education experience that will provide continued supervised physical therapy learning in a healthcare setting. Students integrate knowledge learned during previous course experiences with prior knowledge and skills to continue to develop competencies with a greater variety of patients and treatments in a clinical setting. Six weeks of full-time experience at one facility working under the supervision of a licensed physical therapist or physical therapist assistant serving as the clinical instructor. 40 hours per week, for a minimum 240 clinical hours. At the end of this clinical education experience, students will be required to demonstrate all 5 Red Flag Behaviors at least at **Advanced Intermediate** level and all remaining CPI categories at least at **Intermediate** level.

PTA 208: Terminal Clinical Education II (Clinical Education Experience)

Terminal clinical education experience that allows the student to practice in the healthcare environment with technical skills attained in previous classroom and clinical instruction. Upon completion of the clinical rotation, students must be able to demonstrate **Entry-level** clinical experience for all 14 Clinical Performance Indicator Criteria. Six weeks of full-time experience at one facility working under the supervision of a licensed physical therapist or physical therapist assistant serving as the clinical instructor. 40 hours per week, for a minimum 240 clinical hours.

PTA 209: PTA Seminar (Hybrid)

This course is designed to prepare the student for transition into the workforce as an independent clinician. The methodology includes a discussion of application for PTA licensure, state practice acts, professional development, employment opportunities, and community services. Students will be introduced to the National PTA Exam through learning methods including the establishment of comprehensive review plans and the provision of supplementary review lectures and materials. Students will participate in an on-site licensure preparation review course prior to graduation. At the conclusion of the seminar, students will present their evidence-based project begun in PTA204.

1.9 Clinical Education Learner Outcomes

PTA 206: Integrated Clinical Education

1. Demonstrate the ability to apply all PTA learned skills and knowledge by safely performing selected physical therapy data collection skills and treatment interventions from within the physical therapist's plan of care for routine patients with moderate supervision and guidance by a physical therapist or a physical therapist/physical therapist assistant team.
2. Given extra time and frequent guidance, demonstrate the ability to perform adequate documentation and communication with the physical therapist regarding all aspects of the patient treatment and patient response to physical therapy interventions.
3. Demonstrate the ability to assist in the teaching of patients and caregivers.

4. Compare the role of other allied health personnel with the role of physical therapy personnel.
5. Demonstrate the ability to participate in scheduling and other routine administrative procedures of the physical therapy department.
6. Recognize administrative roles and duties through attendance at departmental meetings, committee meetings, and case conferences as appropriate.
7. Compose a reflective journal regarding the clinical experience while maintaining appropriate patient confidentiality.
8. Consistently demonstrate technical skill performance and behaviors legally and ethically with occasional guidance for routine situations.
9. Display appropriate legal and ethical behavior during interactions with patients, family members, and other healthcare providers with occasional guidance from the supervising physical therapist.
10. Design and present an in-service on the role of the physical therapist assistant.

PTA 207: Terminal Clinical Education I

1. Demonstrate the ability to apply all PTA learned skills and knowledge by consistently providing safe, effective, and competent physical therapy data collection skills and treatment interventions from within the physical therapist's plan of care for routine patients with minimal supervision and guidance by a physical therapist or a physical therapist/physical therapist assistant team.
2. Demonstrate the ability to provide timely and relevant documentation and communication to the physical therapist regarding all aspects of the patient treatment and patient response to physical therapy treatment with occasional guidance.
3. Demonstrate the ability to participate in the teaching of other healthcare providers, consumers, patients and families, and physical therapy personnel with occasional guidance.
4. Demonstrate the ability to participate in routine administrative procedures of the physical therapy department, including billing and patient scheduling with occasional guidance.
5. Recognize administrative roles and duties through attendance at departmental meetings, committee meetings, and case conferences as appropriate.
6. Compose a reflective journal regarding the clinical experience while maintaining appropriate patient confidentiality.
7. Display appropriate legal and ethical behavior during interactions with patients, family members, and other healthcare providers with occasional guidance from the supervising physical therapist for new or unusual situations.

PTA 208: Terminal Clinical Education II

1. Demonstrate the ability to independently apply all PTA learned skills and knowledge by consistently and safely providing effective and competent physical therapy data collection skills and treatment interventions from within the physical therapist's plan of care for routine and complex patients with minimal supervision and guidance by a physical therapist or a physical therapist/physical therapist assistant team with possible guidance for new or unusual situations.
2. Consistently demonstrate entry-level professional behaviors in interactions with patients, family members/caregivers, physical therapy personnel, and other healthcare providers by displaying all Professional Behaviors at entry level.
3. Demonstrate the ability to independently provide timely and relevant documentation and communication to the physical therapist regarding all aspects of the patient treatment and patient response to physical therapy treatment.
4. Demonstrate the ability to independently provide effective education to other healthcare providers, consumers, patients and families, and physical therapy personnel.
5. Perform administrative procedures of the physical therapy department, including billing, insurance requirements, and quality assurance with guidance for new or unusual situations.
6. Recognize administrative roles and duties through attendance at departmental meetings, committee meetings, and case conferences as appropriate.
7. Compose a reflective journal regarding the clinical experience while maintaining appropriate patient confidentiality and compare the journal to the journals written in Integrated Clinical Education and Terminal Clinical Education I.
8. Display appropriate legal and ethical behavior consistently and independently during interactions with patients, family members, and other healthcare providers.
9. Demonstrate the ability to work with other allied health personnel.

II. GENERAL POLICIES AND PROCEDURES

2.1 Selection of Clinical Education Sites and Clinical Instructors

The “Guidelines for Clinical Education” endorsed by the APTA’s House of Delegates was used as a resource to select the following criteria for selection of clinical education sites and clinical instructors.

Criteria for Selection of Clinical Education Sites:

1. The clinical site’s clinical education program is planned to meet the specific objectives of the academic program, the physical therapy service, and the individual student.
2. The physical therapy staff practices ethically and legally.
3. The clinical site demonstrates administrative support for physical therapy clinical education.
4. The clinical site has a variety of learning experiences, appropriate to the setting, available to students.
5. The clinical site provides an active, stimulating environment appropriate for the learning needs of the student.
6. The physical therapy staff is adequate in number to provide an educational program for students.
7. Clinical sites with more than three physical therapists have a designated Clinical Coordinator of Clinical Education.
8. There is an active staff development program for the clinical site.
9. The clinical education site is committed to the principle of equal opportunity and affirmative action as required by federal law.

Criteria for Selection of Clinical Instructors (CI):

1. The CI is either a PT or PTA.
2. The CI graduated from an accredited program.
3. The CI is licensed, registered, or certified in those states where applicable.
4. The CI has at least one year of clinical experience.
5. The CI demonstrates clinical competence, professional skills, and ethical behavior.
6. The CI demonstrates effective communication skills.
7. The CI demonstrates effective instructional skills.
8. The CI demonstrates performance evaluation and supervisory skills.

2.2 Responsibilities of the Director of Clinical Education (DCE)

The Director of Clinical Education (DCE) works directly with the other program faculty, clinical faculty, and students to provide learning experiences which will help the student develop clinical competence. The DCE is responsible for the following:

1. Development of clinical education sites.
2. Coordinate and provide clinical instructor development activities.
3. Assessment and determination of student readiness for clinical experience in collaboration with program faculty.
4. Meet with students to discuss clinical site selection.
5. Set up and schedule clinical assignments for students.
6. Ensure that students get a variety of clinical experiences.
7. Meet with students to discuss goals related to clinical education.
8. Coordination of all clinical education experiences.
9. Maintain and update clinical site database.
10. Maintain and update Memorandum of Agreement database.
11. Update the Clinical Education Handbook.
12. Provide updated Clinical Education Handbook I to all clinical sites and students.
13. Provide all forms and information to the clinical site and clinical instructor.
14. Contact clinical sites by phone mid-way through clinical experiences.
15. Schedule site visits.
16. Complete and/or coordinate site visits for Integrated Clinical Education and Terminal Clinical Education I and II as needed.
17. Serve as a resource to the student and the clinical instructor.
18. Confer with student and clinical instructor regarding student learning needs and progress towards meeting objectives.
19. Keep students and clinical instructors informed on APTA and state specific regulations and rules that guide clinical practice.
20. Facilitate conflict resolution and problem-solving strategies.
21. Assess student overall clinical education performance based on methods of evaluation.
22. Contact and secure new clinical sites and complete all appropriate paperwork.
23. Ensure that Memorandum of Agreement between FHU and the clinical site is reviewed and renewed annually by academic and clinical faculty.
24. Ensure that clinical education sites receive a copy of FHU's liability insurance on an annual basis.
25. Ensure that clinical instructors meet selection criteria.
26. Assign final grade for each clinical education experience.

2.3 Responsibilities of the Center Coordinator of Clinical Education (CCCE)

Each clinical site with three or more PTs and PTAs should have a designated CCCE who is responsible for coordinating the clinical education assignments and student

activities. The CCCE is responsible for the following:

1. Coordinate and schedule potential clinical experiences for affiliating schools.
2. Provide orientation materials on the day of student arrival.
3. Delegate actual clinical supervision of students to a staff PT or to a PT/PTA team.
4. Serve as a resource for the CI for establishing goals and objectives, setting up learning experiences, and evaluating student performance.
5. Inform the CI of all pertinent information from the affiliating schools.
6. Monitor the supervision and learning experiences of students. Provide communication and problem-solving strategies for the student and CI, if needed.
7. Provide necessary documentation to the schools (clinical agreements, completed student CPIs).
8. The CCCE should contact the PTA Program Director with any complaints involving the PTA Program. * The CCCE should contact FHU's Dean of the College of Arts and Sciences with any complaints regarding the DCE, PTA Program Director, or PTA Program.**

Note: If there is no designated CCCE, then the departmental director is responsible for the items listed above.

*No retaliation will occur by the program or University to any individual filing a complaint regarding Freed-Hardeman University's Physical Therapist Assistant program or the faculty who staff the program.

**The FHU dean of the College of Arts and Sciences is Dr. LeAnn Davis, and her contact phone number is 731-989-6931.

2.4 Responsibilities of the Clinical Instructor (CI)

CIs are individuals who provide clinical instruction and supervision when students are engaged in the clinical education portion of the curriculum. CIs are considered PTA program clinical faculty members but are not employed by FHU. The CI demonstrates clinical competence and a willingness to share his/her insights and rationales related to patient care. The responsibilities of the CI are as follows:

1. Demonstrate an interest in teaching and in continuing education.
2. Orientate the student to the facility.
3. Facilitate student accomplishment of goals and objectives; assist with planning learning experiences with the student.
4. Supervise the student or arrange supervision by another qualified person.
5. Serve as a resource to the student.
6. Serve as a role model of professional behavior.
7. Encourage the student to take advantage of unique resources and learning

- experiences of the clinical setting and its staff.
8. Provide an opportunity for regularly scheduled review and discussion of student clinical performance and progress.
 9. Confer and consult with the DCE regarding student learning needs and progress toward meeting objectives.
 10. Consult with the DCE regarding unsatisfactory progress of the student.
 11. Assess and evaluate the student clinical experience. Set clear expectations and provide ongoing verbal and written feedback.
 12. Problem-solving needs are to be addressed through open communication between the student and CI. If problems cannot be solved to the satisfaction of the CI and the student, the CCCE and DCE should be contacted.
 13. The CI is responsible for being aware of which assessment or intervention techniques the student has demonstrated competence on during the PTA program prior to the clinical experience (See skill list located in the Appendix). If a CI teaches a student an assessment or treatment technique that has not been presented or practiced in the academic setting, the CI is responsible for determining if the student is safe in applying the procedure to the patient in the clinical setting. The student cannot be evaluated on that skill.
 14. The CI is expected to act in an ethical manner and maintain student confidentiality.
 15. The CI may contact the FHU dean of the College of Arts and Sciences with any complaints regarding the DCE or PTA program director. * The CI should contact the PTA program director with any complaints involving the FHU PTA program.
 16. When a patient or member of the public has a complaint* or concern regarding a PTA student or the FHU PTA program, the CI is responsible to give the individual the name, title, and phone number of the FHU dean of the College of Arts and Sciences. **

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**The FHU dean of the College of Arts and Sciences is Dr. LeAnn Davis, and her contact phone number is 731-989-6931.

2.5 Memorandum of Agreement

A Memorandum of Agreement must be signed by both the clinical facility and FHU prior to a student being assigned to the facility. This agreement includes a statement regarding general and professional liability and insurance. This agreement automatically rolls over from year to year within the agreement's timeline. Either FHU or a clinical site can terminate this agreement with a notice.

2.6 Arrangement of Clinical Rotations

Requests for dates of clinical experiences are mailed out to the Clinical Coordinators of Clinical Education (CCCE) on or after March 1st for all clinical rotations. The deadline to return clinical slots is March 31st. The CCCE receives clinical assignments for students by December 1st for spring rotations and March 1st for fall rotations. The CCCE is responsible for assigning students to each clinical instructor.

2.7 Placement Policy

The Director of Clinical Education (DCE) will oversee all clinical placements throughout the PTA program. The current curriculum model establishes three clinical education experiences as follows during the PTA program:

PTA Technical Core, Semester 2 (Spring): Integrated Clinical Education (4 weeks)

PTA Technical Core, Semester 3 (Fall): Terminal Clinical Education I (6 weeks)

Terminal Clinical Education II (6 weeks)

Over the course of the three clinical education experiences, it is expected that a student will complete a minimum of one outpatient clinical experience and one inpatient clinical experience. Inpatient clinical experiences may encompass the following healthcare settings: acute care rehabilitation, skilled nursing rehabilitation facilities, neurological inpatient rehabilitation facilities, and/or any hospital-based rehabilitation services that are not considered outpatient. Student requests for specialty areas during their terminal clinical education experiences will be considered and accommodated, if possible, if the outpatient and inpatient site requirements have been met or established.

A list of currently established clinical facilities accepting students will be provided to the PTA students at the beginning of the PTA program. Students will have the opportunity to work with the DCE to establish potential new clinical sites based on their geographical placement, if not already established. If a student wishes to establish a new clinical site, they must provide the DCE with contact information for the facility. Students may not directly contact the clinical facility prior to approval by the DCE. Please note, just because a student wishes to set up a clinical rotation in a particular area does not ensure placement with this facility.

Students may not rearrange clinical assignments or trade clinical assignments with a fellow classmate. Special circumstances may arise that would warrant relocation or reassignment; however, this requires approval from the PTA program director, PTA Director of Clinical Education, and both clinical sites.

Due to the geographic diversity of the PTA student cohort and availability of clinical sites, it may not be ensured that students will be able to continue living on campus during the clinical experiences. It is assumed that students will be required to find living accommodations that support their clinical placement. All expenses incurred over the course of the clinical experience (meals, transportation, lodging, etc.) will be the student's full responsibility, unless a stipend is offered by the clinical facility.

Students will not be placed at any clinical site where they have been employed within the PT setting within the past 2 years. Students may only be placed within NC-SARA states (<http://nc-sara.org/>).

Any questions regarding clinical placement or establishment of new clinical sites may be directed to Mr. Brian Vaughn, Director of Clinical Education.

2.8 COVID-19 Implications for Clinical Education Experiences

Due to the ongoing global pandemic, many clinical sites are requiring the COVID vaccination for any healthcare worker or student who will be in contact with patients, unless granted an exemption due to health or religious purposes. While Freed-Hardeman University's Physical Therapist Assistant program does not require the COVID vaccination for admission, we are unable to guarantee that a student will be able to complete the PTA program if they are not granted clinical site exemption for non-vaccination.

2.9 Readiness for Clinical Experiences

The DCE in consultation with other PTA program faculty will assess each student's readiness prior to each clinical experience. The student will either be placed or not be placed in the clinic based on this assessment. Considerations will include, but not be limited to, the following areas:

1. Skill competency demonstrated on skill checks and practical exams
2. Professional Behaviors status
3. Prior or current probationary status
4. Clinical evaluations and performance from completed clinical education experiences
5. Ability to perform in a safe manner

An important aspect of this readiness assessment is determining if the student is safe for clinical practice. Patient care safety is a priority of this program. PTA faculty will consider all the areas listed above to ensure that the student will be able to perform in a safe manner that minimizes risk to patient, self, and others. The PTA faculty will consider all the areas listed above. In addition, all skill checks and practical exams will be monitored for safety criteria, including retakes. The student will be notified in writing if they are placed on program probation or if they are denied a clinical placement.

2.10 Criteria for Passing PTA206: Integrated Clinical Education

For a student to pass PTA 206: Integrated Clinical Education, the student must:

1. Demonstrate all 14 performance criteria on the CPI at least at **beginner** level.
2. Complete a reflective journal detailing the diagnoses of the patients treated, as well as interventions performed by the student. The student must adhere to HIPAA guidelines and all confidentiality practices. The journal is due by the Monday of the last week of the clinical rotation.
3. Complete a minimum of 160 hours of clinical experience in an outpatient facility.
4. Successful completion of the Mid-Term and Final Clinical Performance Instrument with progress noted from midterm to final.
5. Successful completion of the Clinical Site and Clinical Instructor Assessments.
6. Present an in-service to the clinical staff regarding the role of the PTA. This must be completed by the last Wednesday of the clinical rotation in order to allow sufficient time for communication between the CI and DCE.

The student may earn a passing grade for the clinical experience but may still be placed on PTA program academic probation if there are safety issues with skills on the CPI. When a student is placed on PTA program academic probation, a plan of action will be developed. The plan of action will be designed and agreed upon by the student and program faculty and will describe a plan for the deficient criteria to be improved. This may include meeting individually with program faculty and may include independent study and working with other students. The student must demonstrate competency in any deficits prior to remediation of the clinical experience.

The student must pass Integrated Clinical Education before starting Terminal Clinical Education I. The student cannot be on PTA program probation when starting the terminal clinical experiences. When a “no pass” grade is earned in Integrated Clinical Education:

1. The student will be required to meet with the Director of Clinical Education immediately upon dismissal from the clinical education experience.
2. If the “no pass” grade was in relation to safety, a CPI performance criterion, or professionalism, and if an alternate clinical placement is able to be made, the student may be allowed to retake the clinical education experience during the summer prior to beginning the final semester of the technical phase of the program.

2.11: Criteria for Passing PTA207: Terminal Clinical Experience I

1. Demonstrate all 5 Red Flag criteria at least at **Advanced Intermediate** level and all remaining CPI criteria at **least at Intermediate** level. Professional behaviors are assessed by the student and faculty.

2. Complete a reflective journal detailing the diagnoses of the patients treated, as well as interventions performed by the student. The student must adhere to HIPAA guidelines and all confidentiality practices. The journal is due by the Monday of the last week of the clinical rotation.
3. Complete a minimum of 240 hours of clinical experience in an outpatient facility.
4. Successful completion of the Mid-Term and Final Clinical Performance Instrument with progress noted from midterm to final.
5. Successful completion of the Clinical Site and Clinical Instructor Assessments.

2.12: Criteria for Passing 208: Terminal Clinical Experience II

1. Students must be ranked at Entry Level on all 14 performance criteria on the CPI.
2. Complete a reflective journal detailing the diagnoses of the patients treated, as well as interventions performed by the student, comparing it to the first reflective journal written in PTA206. The student must adhere to HIPAA guidelines and all confidentiality practices. The journal is due by the Monday of the last week of the clinical rotation.
3. Complete a minimum of 240 hours of clinical experience in an outpatient facility.
4. Successful completion of the Mid-Term and Final Clinical Performance Instrument with progress noted from midterm to final.
5. Successful completion of the Clinical Site and Clinical Instructor Assessments.

2.13: Receiving a “No-Pass” Grade on Clinical Education Experiences

A “no pass” grade for a clinical education experience may still be given even if a student follows the attendance and absenteeism policy and obtains the minimal acceptable score on the Clinical Performance Instrument. This decision is a professional judgment based upon the following:

1. Whether any “Significant Concerns” boxes were checked on the final CPI form. If one or more “Significant Concerns” are checked on the final evaluation, it is unlikely the student’s performance would be considered satisfactory for the course.
2. Problems or concerns raised by the student and the clinical faculty during the clinical experience and whether these were effectively resolved.
3. How the problems in #2 affected patient care and safety as well as the student’s chances of performing at entry-level by graduation.
4. Whether the problems in #2 fit a pattern of problems that were evident during the student’s academic coursework.
5. DCE consultation with the student, CI, SCCE, and PTA program director.
6. The uniqueness or complexity of the clinical education site.
7. Whether or not all outcomes on the course syllabus have been met (Assignments and Expected Professional Behaviors levels).

8. The final decision as to whether the student passes the clinical experience is made by the DCE. If the DCE determines that there is a question about whether a student's performance is acceptable, the DCE will address the issue with the PTA program director and dean of the College of Arts and Sciences for consideration.

If a no-pass grade for the clinical experience is given:

1. The DCE meets with the student to discuss the grade and reason for the grade.
2. Failure of a clinical experience **may** result in dismissal from the program, readmission following the program's readmission policy, or the student may be provided an opportunity to retake the failed clinical education experience without losing their position in their cohort (such as during the summer or following Terminal Clinical Education II, which would result in a late graduation). The result will depend on the circumstances of the failure, if there were patient concerns, and availability of the clinical education sites for remediation.
3. Recommendations are made for remediation of the problem(s).
4. The student is reminded of Freed-Hardeman's policies regarding the student's right of appeal.
5. A Plan of Action is developed by the DCE, PTA program director, and the student.

2.14 School Holidays and Inclement Weather Policy

Not all clinical education sites recognize the same holidays as FHU. These sites may remain open for regular business although FHU may be closed. Students will follow the clinical education site schedule for holidays. If the site remains open for regularly scheduled business, the student will perform their clinical education duties during those holidays. If the clinical education site is closed during a holiday, the student will also have that day off.

If a clinical education facility closes for regular business due to inclement weather the student is to call or email the DCE as per the absenteeism policy. It will not be considered an absence if the clinical education site is closed due to inclement weather.

III. STUDENT POLICIES

In accordance with Tennessee law governing the practice of physical therapy, the following activities may not be delegated to a student Physical Therapist Assistant (SPTA): patient/client initial examination, intervention planning, initial intervention, and initial or final documentation. Any documentation written by the student must be signed with the student's full name followed by the title Student Physical Therapist Assistant (SPTA). All documentation must be read and co-signed by the physical therapist. PTA students are expected to be asked to perform only those duties that are routinely delegated to PTAs and within their scope of practice.

3.1 Student Responsibilities

Each student will have a variety of clinical education experiences throughout the PTA program. The student's responsibilities are as follows:

1. Once assigned, contact the clinical site to obtain information related to housing, parking, and departmental policies, and procedures at least one month prior to the start of the clinical experience.
2. Secure transportation and lodging arrangements and costs.
3. Wear professional attire (refer to section 3.4), including a lab coat if required by that clinical site.
4. Identify self as a student PTA during all patient interactions.
5. Adhere to all policies and procedures of the assigned clinical site.
6. Act in an ethical and legal manner at all times.
7. Identify and actively seek needed learning experiences to meet goals and objectives.
8. Confer and consult with the CI and DCE regarding learning needs, progress, and/or concerns.
9. Display professionalism and responsibility.

3.2 Attendance and Absenteeism

Attendance is required for the entire clinical education experience. All absences must be made up except for official closing of the clinical education site's physical therapy department. All effort should be made to avoid missing any clinical time. All make-up time must be made during the clinical rotation for time that was missed. If it is not possible to make up the missed time, the student, DCE, and clinical site will attempt arrangements based on the circumstances. All make-up time must be documented on the student's time record as time made up for a specific date. Each clinical rotation week is defined as 40 hours. Any week that a minimum of 40 hours is not reported requires CI and DCE approval.

Most clinical facilities do not close for the same holidays as Freed-Hardeman University (FHU). Clinical facilities may or may not close for heavy snow or other inclement weather. Students should document any time absent due to facility holiday closure or inclement weather.

Absences and tardiness will be monitored throughout communication between the student, CI, and DCE via email or phone call. The student must report any absences to the CI and the DCE prior to the time the student is due to arrive at the clinical experience site or 8:00 AM, whichever is later. If a student fails to notify the CI of an absence or tardiness the CI should notify the DCE. If any concerns arise regarding the professional behavior of the student (excessive absences or tardiness), the CI should contact the DCE immediately. The DCE will contact the student to discuss the absenteeism/tardiness problem and see how it can be fixed. If needed, independent study assignments or other ways to “make-up” missed time can be arranged.

3.3 Professional Behavior

Professional behavior by students is expected at all times. Students are expected to follow professional standards when in the classroom, laboratory, and clinical settings. Guidelines for these standards are as follows:

1. Professional Behaviors (Located in Appendix D)

Ten specific “Professional Behaviors” are assessed throughout the PTA program curriculum. Students will self-assess these professional abilities once per semester and review this assessment with their academic advisor.

Expected Professional Behaviors levels are:

- a. End of Semester I: All Professional Behaviors at least beginning level
- b. End of Semester II: All Professional Behaviors at least at intermediate level
- c. End of Semester III: All Professional Behaviors at entry level

Faculty will provide oral and written feedback regarding professional behaviors each semester. Information will be gathered from the CPI criteria to assist academic faculty in assessing the Professional Behaviors. Copies of this feedback will be placed in the student’s file. Students are expected to change unsatisfactory behaviors after receiving feedback from faculty. If a student is not demonstrating professional behaviors at an appropriate level, the student will develop a plan for improvement with academic faculty. Serious deficits in professional behavior with no improvement may result in program probation or program dismissal.

2. American Physical Therapy Association (APTA) Standards of Ethical Conduct for the Physical Therapist Assistant (Located in Appendix A)

3.4 Personal Appearance

A student is expected to set an example of cleanliness, tidiness, and professionalism in the clinical assignment area. Personal appearance is regarded as an important aspect of a student's overall effectiveness. Students are expected to always keep neat

and clean. Special attention should be given to personal hygiene and dress in the clinic areas.

Hair must be neat and clean at all times. Hair must be worn back away from and out of the face. Beards and mustaches must be short and neatly trimmed. Nails must be clean and short. Nails should be shorter than fingertips when viewed from the palm side. The only jewelry which should be worn in clinic areas are watches, wedding rings, and stud type earrings. This is for the safety of the student and the patients. Students are to avoid wearing perfume, colognes, or after shaves in their clinical experiences sites as patients and/or staff may be allergic to them.

Students are expected to comply with the dress code for each clinical facility. Unless otherwise noted by the facility's dress code, students should wear professional street clothes and comfortable closed-toe shoes. Professional street clothes typically will include a shirt with sleeves, dress slacks or khaki-type pants (no jeans), sturdy low-heeled shoes with a closed toe, socks, and a watch with a second hand. A white lab coat may be worn in some facilities. Athletic shoes are acceptable if they are neat and professional looking. Given today's fashions and the level of physical activity required in most PT settings, it is recommended that students check their appearance from all angles and positions to ensure that clothing ensures freedom of movement, remains in position, and does not expose undergarments at any time.

3.5 Name Tags

A FHU name tag identifying the individual as a PTA Student is to be worn by all students at all times while in clinical education sites. Wearing of the name tag assures proper identification for security purposes and entitles the student access to the premises. The name tag is also a necessary communication tool as the student meets a variety of people, including patients and staff. The facility may require that the student wear a facility name tag as well.

3.6 Student Preparedness

Students are expected to come to the clinic prepared for that day. Preparedness includes reading any assigned material, researching expected skills or diagnoses, preparing assignments on time, and bringing necessary books and materials to the clinic.

3.7 Confidentiality

Students are expected to always maintain confidentiality standards in the clinical setting. It is not ethical to share information with other individuals regarding patients/clients, facilities, clinical instructors, or classmates. This includes placing the patient's name or other identifying item on case study reports, class presentations; etc.; failing to obtain written permission to utilize pictures or videos

of a patient in presentations or talking about patients to classmates. Violation of this policy may result in probation or dismissal from the PTA program.

During the first semester of the PTA program, students are instructed in basic HIPAA (Health Insurance Portability and Accountability Act) policies and procedures for proper use and handling of confidential patient/client information. The CI should give the student instruction in site-specific HIPAA procedures at the start of the clinical experience.

Prior to the start of Integrated Clinical Education, students are required to sign a Confidentiality Agreement, this Agreement will be considered in force for the rest of the student's tenure in the PTA program.

3.8 CPR/Immunization Requirements

Each student must have a current CPR certification (Basic Life Support (BLS) for Health Care Providers or CPR for the Professional Rescuer) upon entering their first clinical experience. Students will be required to show proof of this certification prior to the start of the second semester of the program. The program offers a CPR certification course prior to the beginning of the spring semester for all currently enrolled students and faculty to ensure students receive certification that will remain effective throughout the clinical education experiences.

In addition, prior to the first clinical education experience, students must complete an online database showing proof of a negative TB skin test and/or negative chest x-ray within the previous year, immunization records, and proof of Hepatitis B immunization, Tetanus-Diphtheria (Td or Tdap); Measles, Mumps, and Rubella (MMR); Varicella (chicken pox); and Influenza (completed annually).

Although students are not required to have health insurance, it is highly encouraged. Students should be aware that some clinical education sites require students to have health insurance.

3.9 Accidents

All accidents occurring at a clinical facility which results in patient, hospital personnel, personal injury and/or damage to equipment must be reported to the clinical instructor immediately. Students may also be required to fill out a facility incident report. Students are required to understand the safest methods of properly performing treatment procedures and operation of equipment before undertaking them. Students are responsible for the cost of their individual medical care that may result from an accident while at clinicals.

3.10 Accommodation

FHU affirms the rights of students with disabilities to equal opportunity and treatment in all aspects of education. Reasonable accommodations will be made that will enable students with disabilities to enjoy equal educational opportunities. In order to receive accommodations, a student must:

1. Initiate a request for services through the Office of Student Accessibility.
2. Provide documentation verifying the disability.
3. Follow plan as determined after consultation with the Office of Student Accessibility.
4. The accommodation(s) will be implemented at the earliest possible date. If consultation with the student and the University does not identify an appropriate accommodation, the student shall be notified in writing of the program's inability to reasonably accommodate the student's special needs.

3.11 Student In-Services

Students are required to provide an in-service on a topic of their choice (with input from their clinical instructor) at the completion of PTA206: Integrated Clinical Education. When a student provides an in-service, they should have the clinical site staff evaluate and provide feedback using the Student In-service Feedback Form located in Appendix H.

3.12 Early Termination of the Clinical Experience

The DCE and the FHU PTA program faculty may remove the student from the clinical site if it appears that the student is performing incompetently or poses a safety threat to the patients/clients or staff of the clinical site. This decision will be made based on input from the CCCE and/or student's CI.

The DCE will meet with the student either in person or by phone within twenty-four hours to explain the reasons for removal from the clinical area and to inform the student that he/she is failing. Please keep the DCE informed of any potential problems. If you feel the student must be removed from the clinical education experience, contact the DCE or PTA program director immediately.

Following this action an informal meeting with the student, DCE, CI and/or CCCE, and PTA program director will be convened as soon as possible to discuss the student's status. If the removal from the clinical setting is upheld as a result of this meeting, the student receives a failing grade in the clinical component of the course and may be dismissed from the program.

Even if a student is not removed from a clinical experience, failure to meet the standard clinical objectives by the end of the semester may also result in failure of that clinical education course.

3.13 Due Process/Grievance Procedure

It is the policy of the FHU Physical Therapist Assistant program to work with students in finding a fair and just solution to problems that may arise, including grievances, questions, and misunderstandings. At all steps of the grievance procedure students should feel free to discuss the matters fully with clinical faculty, PTA program faculty, and FHU administration. Students are urged to first take their problems to their clinical instructor. Usually, the CI will have direct knowledge of the subject and is best qualified to work with the student in resolving the manner.

If the student and CI are unable to find a solution, the student should then bring up the situation to the CCCE, who may consult with the program's DCE. If the student, CI, and CCCE are unable to find a solution, the student should then bring up the matter to the DCE. Should the student feel an unsatisfactory solution was achieved after involving the DCE, the student should then bring up the matter to the PTA program director. If the student still feels an unsatisfactory solution was achieved, the student should bring up the matter with the Dean of the College of Arts and Sciences.

Student complaints involving clinical faculty or clinical facilities should be directed to the DCE.

3.14 Clinical Reassignment

When a student is on a clinical experience but is unable to complete the required hours, an alternative clinical may be provided. Possible reasons a student may be unable to complete these hours include but will not be limited to the following: (1) family crisis, (2) health status, (3) conflict with the Clinical Instructor, and (4) lack of patients at the clinical site. The DCE and PTA program director will decide on an individual basis whether the student will be provided a clinical reassignment.

A student will be allowed only one opportunity during the PTA program to be considered for a clinical reassignment. The student will not be allowed a clinical reassignment if they are on PTA program probation, and they must be off PTA program probation prior to clinical reassignment.

3.15 Background Checks

Tennessee State Law requires that any person who provides services that involve direct contact with patients and residents at a health-care facility licensed by the Tennessee Department of Health have a background study conducted by the state. An individual who is disqualified from having direct patient contact as a result of the background study, and whose disqualification is not set aside by the Commissioner of

Health, will not be permitted to participate in a clinical education placement. Inability to participate in a clinical education placement required by the academic program will result in ineligibility to qualify for a degree in this program. FHU health care students must pass both a national and state background study prior to starting clinical education experiences.

3.16 Knowledge of Program and College Policies and Procedures

The PTA program abides by Freed-Hardeman University policies. The most current college policies can be found at <https://www.fhu.edu/campuslife/studentservices/studenthandbook>.

Students are expected to have a working knowledge of the content of the FHU PTA Clinical Education Handbook, which is provided annually during the Spring semester. After reviewing the PTA Clinical Education Handbook, students will sign and date the “PTA Clinical Education Handbook Agreement”, which is an agreement where the student states they understand the content of the handbook and agree to abide by the policies and procedures set forth during their tenure as a Physical Therapist Assistant student. Students will also be able to access the PTA Clinical Education Handbook on the program website.

The PTA Clinical Education Handbook is reviewed and revised annually by program faculty. To ensure all program policies are consistent with those of the College, the handbook is reviewed annually by the dean of the College of Arts and Sciences. Program faculty will consider input for manual revisions from students, college administration, the PTA program advisory committee, and clinical faculty. When changes are made after the initial publication of each year’s PTA Clinical Education Handbook, PTA students and FHU administration will be notified of the updates. The Handbook available on the program website will also be updated.

3.17 Informed Consent

Patients will be informed by the CI, or by the student under the direction of the CI, when a student is involved in patient care. Students are required to identify themselves as a physical therapist assistant student and should obtain consent for treatment from the patient. Patients have the risk-free right to decline to receive care from a student participating in the clinical education program and can do so by informing either the student or the CI.

IV. RESPONSIBILITIES OF THE CLINICAL FACILITY

4.1 Memorandum of Agreement

Only clinical facilities with current, unexpired, written Memorandum of Agreement in place will be utilized for the placement of students. A Complete Memorandum of Agreement is sent when a facility is first utilized. The DCE reviews the list of clinical sites annually to make sure all sites have a current Memorandum of Agreement.

4.2 Equipment and Facility Safety

All clinical facilities are expected to have policies concerning safety regulations governing the use of equipment and the storage and use of any hazardous materials. These policies should be reviewed with students affiliating at that facility. Equipment should be inspected regularly, and safety regulations should be posted and reviewed periodically.

4.3 Confidentiality

All clinical facilities are expected to have policies on the confidentiality of records and other personal information. Additionally, there should be facility policies concerning the informed consent of patients seen by the student. Facility guidelines on the use of human subjects for educational purposes should also exist at each facility. These policies should be reviewed with the students affiliating at that facility.

4.4 Supervision

All clinical facilities are expected to provide direct supervision of students to ensure patient safety and to enable the successful completion of the program's educational objectives. All students require on-site supervision by a licensed physical therapist or a physical therapist/physical therapist assistant team. Preferably, this should be the student's assigned clinical instructor. If the clinical instructor is unavailable on-site, another licensed person who is on-site must be assigned to that student for that time period. The clinical instructor should have adequate release time to adequately supervise the student and be available for questions, assistance, and mentoring. All supervisory clinical faculty are expected to demonstrate positive role modeling for the students. If there is no PT in the building for part of a day when the student is on their clinical experience, the student may perform non-patient care clinic duties such as chart reviews, assignments on reference materials, documentation, in-service preparation, and observation of other health care practitioners. Students should contact the DCE immediately if supervision does not follow these guidelines.

4.5 Complaints

If a complaint occurs about a student while on a clinical education experience, complaints regarding the student should first be addressed to the Director of Clinical Education, Brian Vaughn. Mr. Vaughn may be contacted at bvaughn@fhu.edu. Or by phone at 731-989-6560.

Complaints regarding the program or the program graduates should be first addressed to the PTA program director, Dr. Ashley Prentice. Dr. Prentice's email is apretrice@fhu.edu and her phone number is 731-989-6097.

Unresolved complaints or complaints about the program director should be directed to Dr. LeAnn Davis, B.S., M.S., Ph.D., dean of the College of Arts and Sciences. Dr. Davis's e-mail address is ldavis@fhu.edu and her phone number is 731-989-6931.

All complaints will be documented, including the projected outcome, and kept on file at the program facility. Complaints about the program will be kept on file in a locked filing cabinet in the program director's office. Complaints regarding the program director will be kept in a locked filing cabinet by the dean of the College of Arts and Sciences in a secure location in the Office of Academics.

Complaints regarding Accreditation of this program should be addressed to the Commission on Accreditation in Physical Therapy Education. This Commission is located at 3030 Potomac Ave., Suite 100, Alexandria, VA 22314; phone 703-706-3245; accreditation@apta.org

4.6: Non-Retaliation Policy Regarding Complaints

No retaliation will occur by the program or University to any individual filing a complaint regarding Freed-Hardeman University's Physical Therapist Assistant program or the faculty that staff the program.

V. CLINICAL FACULTY RIGHTS AND PRIVILEGES

5.1 Clinical Faculty Rights and Privileges

The FHU PTA program values the clinical faculty who are involved with the clinical education of Freed-Hardeman students. CIs and CCCEs are entitled to rights and privileges as a result of their participation with the FHU PTA Clinical Education program. All CIs and CCCEs are invited annually to a Clinical Faculty Meeting. The agenda of this meeting will include reviewing any curricular changes in the PTA program, reviewing the CPI, and a question-and-answer session with the PTA program Faculty. A topic will also be discussed that has been identified as a need through the review of student evaluations, interviews and observations made by the DCE.

The FHU PTA program annually determines the professional development needs of the clinical faculty members. With this information, the PTA program will facilitate continued growth and development of clinical faculty in their role as clinical educators. Clinical faculty are encouraged to complete relevant Clinical Instructor Self-Assessments from the American Physical Therapy Association. These assessments are related to the Clinical Instructors, CCCEs and Clinical Education sites. The PTA program hopes clinical education sites will use these forms to complete a yearly assessment of needs. These assessments, along with a brief survey of professional development needs, will be given and collected to clinical faculty by the DCE during clinical education visits.

5.2 Education Tips for the Clinical Instructor

The Clinical Instructor should review the PTA Clinical Performance Instrument (CPI) with the student at the beginning of the clinical experience. This is done to familiarize the CI and the student with the individual skills and their objectives. The Clinical Instructor can then identify which skills the facility should be able to address. The CI and the student then design learning experiences to facilitate mastery of the identified skills.

Scheduling a formal meeting at least one time per week to review the student's progress and goals to be addressed the next week is recommended.

It is helpful to have a student information packet to mail to the student prior to the affiliation. Information that is helpful includes:

1. Confirmation of the dates of the clinical education experience.
2. The name of the Clinical Instructor and the CCCE.
3. The time the student should report to the clinic.
4. The dress code for the facility.
5. Directions to the PT department.

6. Parking information.
7. A direct phone number to the PT department
8. Medical forms, if needed.
9. Any orientation the student may need prior to seeing patients (HIPPA, Standard Precautions, etc.).
10. Meals - Is there a cafeteria or does the student need to bring their lunch?
11. Housing information, if applicable.
12. Any information on other requirements the student may require (background check, drug test, etc.).
13. Any additional orientation information you want the student to read prior to the start of the clinical rotation.

APPENDIX

- A. APTA Standards of Ethical Conduct for the Physical Therapist Assistant
- B. Skills Learned by 1st Year PTA Students
- C. Skills Learned by 2nd Year PTA Students
- D. Professional Behaviors Assessment Tool
- E. FHU PTA Clinical Orientation Checklist
- F. Clinical Instructor/Student Meeting Form
- G. Confidentiality Agreement
- H. Student In-Service Feedback Form
- I. Clinical Instructor Feedback Form
- J. PTA Essential Functions Checklist
- K. Clinical Handbook Agreement

Appendix A

American Physical Therapy Association (APTA) Standards of Ethical Conduct for the Physical Therapist Assistant

Preamble

The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients/clients to achieve greater independence, health and wellness, and enhanced quality of life. No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.

Standards

Standard #1: Physical therapist assistants shall respect the inherent dignity, and rights, of all individuals.

- 1A. Physical therapist assistants shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.
- 1B. Physical therapist assistants shall recognize their personal biases and shall not discriminate against others in the provision of physical therapy services.

Standard #2: Physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.

- 2A. Physical therapist assistants shall act in the best interests of patients/clients over the interests of the physical therapist assistant.
- 2B. Physical therapist assistants shall provide physical therapy interventions with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.
- 2C. Physical therapist assistants shall provide patients/clients with information regarding the interventions they provide.
- 2D. Physical therapist assistants shall protect confidential patient/client information and, in collaboration with the physical therapist, may disclose confidential information to appropriate authorities only when allowed or as required by law.

Standard #3: Physical therapist assistants shall make sound decisions in collaboration with the physical therapist and within the boundaries established by laws and regulations.

- 3A. Physical therapist assistants shall make objective decisions in the patient's/client's best interest in all practice settings.
- 3B. Physical therapist assistants shall be guided by information about best practice regarding physical therapy interventions.
- 3C. Physical therapist assistants shall make decisions based upon their level of competence and consistent with patient/client values.
- 3D. Physical therapist assistants shall not engage in conflicts of interest that interfere with making sound decisions.
- 3E. Physical therapist assistants shall provide physical therapy services under the direction and supervision of a physical therapist and shall communicate with the physical therapist when patient/client status requires modifications to the established plan of care.

Standard #4: Physical therapist assistants shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, other health care providers, employers, payers, and the public.

- 4A. Physical therapist assistants shall provide truthful, accurate, and relevant information and shall not make misleading representations.
- 4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative, or other authority (egg, patients/clients, students, supervisees, research participants, or employees).
- 4C. Physical therapist assistants shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.
- 4D. Physical therapist assistants shall report suspected cases of abuse involving children or vulnerable adults to the supervising physical therapist and the appropriate authority, subject to law.
- 4E. Physical therapist assistants shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.
- 4F. Physical therapist assistants shall not harass anyone verbally, physically, emotionally, or sexually.

Standard #5: Physical therapist assistants shall fulfill their legal and ethical obligations.

- 5A. Physical therapist assistants shall comply with applicable local, state, and federal laws and regulations.
- 5B. Physical therapist assistants shall support the supervisory role of the physical therapist to ensure quality care and promote patient/client safety.
- 5C. Physical therapist assistants involved in research shall abide by accepted standards governing protection of research participants.

- 5D. Physical therapist assistants shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance of counsel.
- 5E. Physical therapist assistants who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.

Standard #6: Physical therapist assistants shall enhance their competence through the lifelong acquisition and refinement of knowledge, skills, and abilities.

- 6A. Physical therapist assistants shall achieve and maintain clinical competence.
- 6B. Physical therapist assistants shall engage in lifelong learning consistent with changes in their roles and responsibilities and advances in the practice of physical therapy.
- 6C. Physical therapist assistants shall support practice environments that support career development and lifelong learning.

Standard #7: Physical therapist assistants shall support organizational behaviors and business practices that benefit patients/clients and society.

- 7A. Physical therapist assistants shall promote work environments that support ethical and accountable decision-making.
- 7B. Physical therapist assistants shall not accept gifts or other considerations that influence or give an appearance of influencing their decisions.
- 7C. Physical therapist assistants shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.
- 7D. Physical therapist assistants shall ensure that documentation for their interventions accurately reflects the nature and extent of the services provided.
- 7E. Physical therapist assistants shall refrain from employment arrangements, or other arrangements, that prevent physical therapist assistants from fulfilling ethical obligations to patients/clients.

Standard #8: Physical therapist assistants shall participate in efforts to meet the health needs of people locally, nationally, or globally.

- 8A. Physical therapist assistants shall support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.
- 8B. Physical therapist assistants shall advocate for people with impairments, activity limitations, participation restrictions, and disabilities in order to promote their participation in community and society.
- 8C. Physical therapist assistants shall be responsible stewards of health care resources by collaborating with physical therapists in order to avoid overutilization or underutilization of physical therapy services.

- 8D. Physical therapist assistants shall educate members of the public about the benefits of physical therapy.

Appendix B

Skills Learned by 1st Year FHU PTA Students

PTA103: PTA Procedures	PTA104: Clinical Anatomy and Kinesiology	PTA105: Therapeutic Exercise	PTA201: Neuromuscular Rehabilitation Across the Lifespan	PTA203: Physical Agents and Modalities
Bed Mobility	LE goniometry	Strengthening exercises	PNF diagonals	Therapeutic Massage
Wheelchair Mobility and Seating	UE goniometry	Stretching exercises	Neurodevelopmental Training (NDT)	Hot packs
Anthropometric Measurements	LE MMT	Balance and coordination exercises	SCI transfers, positioning, and pressure relief	Cryotherapy
Positioning and Draping	UT MMT	Peripheral joint mobilizations, grades I-II	Sensory and Cognition Assessment	Therapeutic Ultrasound (US)
UE ROM	Neck / Trunk goniometry	Vital Signs and Activity		Intermittent Compression
LE ROM	Neck / Trunk MMT			TENS
Bandaging and Sterile Dressing Change	Spinal nerve reflexes			Neuromuscular Electrical Stimulation (NMES)
Transfers	Dermatome			Interferential Current (IFC)
Gait training: stairs	Myotomes			Iontophoresis
Gait training: level surfaces	Bony prominence palpation			Spinal Traction
Aseptic Techniques	Muscle Identification			EMG Biofeedback

****All listed skills above denote skills the student has demonstrated competence in through skill checks and/or practical examinations.***

*****Clinical Instructors who teach skills not covered in the program are responsible for assessing the student's competence with the skill prior to the patient treatment.***

Appendix C

Skills Learned by 2nd year FHU PTA Students

Advanced Therapy Techniques	
Residual limb wrapping	Postural Drainage
Shaking	Breathing Exercises
Percussion	Coughing Techniques

**All listed skills above denote skills the student has demonstrated competence in through skill checks and/or practical examinations.*

***Clinical Instructors who teach skills not covered in the program are responsible for assessing the student's competence with the skill prior to the patient treatment.*


Appendix D
Professional Behaviors Assessment Tool

Student Name: _____ Date: _____

Directions:


1. Read the description of each professional behavior.
2. Become familiar with the behavioral criteria described in each of the levels.
3. 3. Self-assess your performance continually, relative to the professional behaviors, using the behavioral criteria.
4. 4. At the end of each semester:
 - a. Using a highlighter, highlight all criteria that describes behaviors you demonstrate in Beginning Level (column 1), Intermediate Level (column 2), or Entry Level (column 3).
 - b. Give at least one specific example of a time when you demonstrated a behavior from the highest level highlighted.
 - c. Place an “x” along the visual analog scale to indicate the level (B, I, or E) at which you primarily function in each ability. This should be based on your highlighted areas, the specific example, and feedback from your CI.
5. Sign and return to Program Director

1. **Critical Thinking:** The ability to question logically; identify, generate, and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision-making process.

<p>Beginning Level: Raises relevant questions; Considers all available information; Articulates ideas; Understands the scientific method; States the results of scientific literature but has not developed the consistent ability to critically appraise findings (i.e., methodology and conclusion); Recognizes holes in knowledge base; Demonstrates acceptance of limited knowledge and experience</p>	<p>Intermediate Level: Feels challenged to examine ideas; Critically analyzes the literature and applies it to patient management; Utilizes didactic knowledge, research evidence, and clinical experience to formulate new ideas; Seeks alternative ideas; Formulates alternative hypotheses; Critiques hypotheses and ideas at a level consistent with knowledge base; Acknowledges presence of contradictions</p>	<p>Entry Level: Distinguishes relevant from irrelevant patient data; Readily formulates and critiques alternative hypotheses and ideas; Infers applicability of information across populations; Exhibits openness to contradictory ideas; Identifies appropriate measures and determines effectiveness of applied solutions efficiently; Justifies solutions selected</p>
<p>Specific Example:</p>		<p>Place an “x” on the visual analog scale</p> <p style="text-align: center;">  </p>


2. **Communication:** The ability to communicate effectively (i.e., verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.

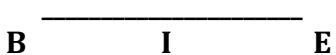
<p>Beginning Level: Demonstrates understanding of the English language (verbal and written): uses correct grammar, accurate spelling and expression, legible handwriting; Recognizes</p>	<p>Intermediate Level: Utilizes and modifies communication (verbal, non-verbal, written and electronic) to meet the needs of different audiences; Restates, reflects, and clarifies message(s);</p>	<p>Entry Level: Demonstrates the ability to maintain appropriate control of the communication exchange with individuals and groups; Presents persuasive and explanatory verbal, written or electronic messages with</p>
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<p>professional demeanor in all interactions; Demonstrates interest in patients as individuals; Communicates with others in a respectful and confident manner; Respects differences in personality, lifestyle and learning styles during interactions with all persons; Maintains confidentiality in all interactions; Recognizes the emotions and bias that one brings to all professional interactions</p>	<p>Recognizes the non-verbal communication and emotions that others bring to professional interactions; Establishes trust; Seeks to gain input from others; Respects role of others; Accommodates differences in learning styles as appropriate</p>	<p>Demonstrates active listening skills and reflects back to original concern to determine course of action; Responds effectively to unexpected situations; Demonstrates ability to build partnerships; Applies conflict management strategies when dealing with challenging interactions; Recognizes the impact of non-verbal communication and emotional responses during interactions and modifies own behaviors based on them</p>
<p>Specific Example:</p>		<p>Place an “x” on the visual analog scale</p> <p style="text-align: center;">  </p>

<p>5. Responsibility: The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community, and social responsibilities.</p>		
<p>Beginning Level: Demonstrates punctuality; Provides a safe and secure environment for patients; Assumes responsibility for actions; Follows through on commitments; Articulates limitations and readiness to learn; Abides by all policies of academic program and clinical facility</p>	<p>Intermediate Level: Displays awareness of and sensitivity to diverse populations; Completes projects without prompting; Delegates tasks as needed; Collaborates with team members, patients, and families; Provides evidence-based patient care</p>	<p>Entry Level: Educates patients as consumers of health care services; Encourages patient accountability; Directs patients to other health care professionals as needed; Acts as a patient advocate; Promotes evidence-based practice in health care settings; accepts responsibility for implementing solutions; Demonstrates accountability for all decisions and behaviors in academic and clinical settings</p>
<p>Specific Example:</p>		<p>Place an “x” on the visual analog scale</p>

	
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<p>6. Professionalism: The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.</p>		
<p><i>Beginning Level:</i> Abides by all aspects of the academic program policies and the APTA Code of Ethics; Demonstrates awareness of state licensure regulations; Projects professional image; Attends professional meetings; Demonstrates cultural/generational awareness, ethical values, respect, and continuous regard for all classmates, academic and clinical faculty/staff, patients, families, and other healthcare providers</p>	<p><i>Intermediate Level:</i> Identifies positive professional role models within the academic and clinical settings; Acts on moral commitment during all academic and clinical activities; Identifies when the input of classmates, co-workers and other healthcare professionals will result in optimal outcome and acts accordingly to attain such input and share decision making; Discusses societal expectations of the profession</p>	<p><i>Entry Level:</i> Demonstrates understanding of scope of practice as evidenced by treatment of patients within scope of practice, referring to other healthcare professionals as necessary; Provides patient & family centered care at all times as evidenced by provision of patient/family education, seeking patient input and informed consent for all aspects of care and maintenance of patient dignity; Seeks excellence in professional practice by participation in professional organizations and attendance at sessions or participation in activities that further education/professional development; Utilizes evidence to guide clinical decision making and the provision of patient care, following guidelines for best practices; Discusses role of physical therapy within the healthcare system and in population health; Demonstrates leadership in collaboration with both individuals and groups</p>
<p>Specific Example:</p>		<p>Place an “x” on the visual analog scale</p> 

<p>7. Use of Constructive Feedback: The ability to seek out and identify quality sources of feedback, reflect on, and integrate the feedback, and provide meaningful feedback to others.</p>		
<p>Beginning Level: Demonstrates active listening skills; Assesses own performance; Actively seeks feedback from appropriate sources; Demonstrates receptive behavior and positive attitude toward feedback; Incorporates specific feedback into behaviors; Maintains two-way communication without defensiveness</p>	<p>Intermediate Level: Critiques own performance accurately; Responds effectively to constructive feedback; Utilizes feedback when establishing professional and patient related goals; Develops and implements a plan of action in response to feedback; Provides constructive and timely feedback</p>	<p>Entry Level: Independently engages in a continual process of self-evaluation of skills, knowledge, and abilities; Seeks feedback from patients/clients and peers/mentors; Readily integrates feedback provided from a variety of sources to improve skills, knowledge, and abilities; Uses multiple approaches when responding to feedback; Reconciles differences with sensitivity; Modifies feedback given to patients/clients according to their learning styles</p>
<p>Specific Example:</p>		<p>Place an “x” on the visual analog scale</p> <p style="text-align: center;">  </p>

<p>8. Effective Use of Time and Resources: The ability to manage time and resources effectively to obtain the maximum possible benefit.</p>		
<p>Beginning Level: Comes prepared for the day’s activities & responsibilities; Identifies resource limitations (i.e., information, time, experience); Determines when and how much help/assistance is needed; assess current evidence in a timely manner; Verbalizes productivity standards and identifies</p>	<p>Intermediate Level: Utilizes effective methods of searching for evidence for practice decisions; Recognizes own resource contributions; Shares knowledge and collaborates with staff to utilize best current evidence; Discusses and implements strategies for meeting productivity</p>	<p>Entry Level: Uses current best evidence; Collaborates with members of the team to maximize the impact of treatment available; Has the ability to set boundaries, negotiate, compromise, and set realistic expectations; Gathers data and effectively interprets and assimilates the data to</p>

skills.		
<p>Beginning Level: Prioritizes information needs; Analyzes and subdivides large questions into components; Identifies own learning needs based on previous experiences; Welcomes and/or seeks new learning opportunities; Seeks out professional literature; Plans and presents an in-service, research, or cases studies</p>	<p>Intermediate Level: Research and studies areas where own knowledge base is lacking in order to augment learning and practice; Applies new information and re-evaluates performance; Accepts that there may be more than one answer to a problem; Recognizes the need to and is able to verify solutions to problems; Reads articles critically and understands limits of application to professional practice</p>	<p>Entry Level: Respectfully questions conventional wisdom; Formulates and re-evaluates position based on available evidence; Demonstrates confidence in sharing new knowledge with all staff levels; Modifies programs and treatments based on newly learned skills and considerations; Consults with other health professionals and physical therapists for treatment ideas</p>
<p>Specific Example:</p>		<p>Place an "x" on the visual analog scale</p> <p style="text-align: center;"> B I E </p>

**Based on my Professional Behaviors Assessment, I am setting the following Goals:
 To accomplish these goals, I will take the following specific actions:**

Student Name Printed: _____

Student Signature: _____ **Date:** _____

Student Name Printed: _____

Faculty Signature: _____ **Date:** _____

Appendix E

Freed-Hardeman University Physical Therapist Assistant Program Clinical Orientation Checklist

To verify completion, the Clinical Instructor initials when a task is accomplished.

- _____ Ensure that the student has the appropriate ID badge(s) and parking permit for the clinical site
- _____ Review Clinical Schedule (including weekend or evening coverage)
- _____ Review work week/hours of the CI, and student expectations
- _____ Review the professional appearance and behavior standards of the facility
- _____ Review any available library or educational resources
- _____ Review the organizational structure of the facility including the Physical Therapy or Rehabilitation Department
- _____ Tour of the facility
- _____ Review available supplies and equipment
- _____ Review facility Infection Control procedures
- _____ Review facility emergency procedures (Fire, Medical Emergency, Tornado, etc.)
- _____ Review Clinical Education requirements and expectations
- _____ Discuss student learning preferences
- _____ Review facility documentation procedures and process
- _____ Review facility billing procedures and process

Upon completion, please email to DCE, Brian Vaughn, at bvaughn@fhu.edu

Appendix G
Freed-Hardeman University Physical Therapist Assistant Program
Confidentiality Agreement

The faculty at Freed-Hardeman University acknowledges the extreme importance of confidentiality with respect to the affairs of all patients in all clinical agencies. In light of this acknowledgment, each student agrees to keep confidential all information acquired pertaining to any clinical agency and any related activities during clinical education. This commitment to confidentiality includes:

- Any information regarding the patient, the patient's family, or health issues related to the patient
- Information regarding the strategic plan, programs, and process toward meeting goals in the agency plan
- Issues related to legal, moral, and regulatory responsibility for the oversight of patient quality. This includes information regarding appointment and reappointment of professionals to the medical staff; information included in quality reports and statistical data regarding the agency's clinical services and patient care; risk management and malpractice information; and individual professional performance and reviews of attitudes and opinions from those who work for the agency
- Financial information including annual budgets, revenues, expenses, long-term capital expenditure plans and equipment purchases, and information regarding the agency's financial condition such as debt, liquidity, return on investment, profitability, and other financial data
- Employment information including employee salaries, employment agreements, and terms and conditions of employment

It is particularly important that the student recognizes the sensitivity of information regarding medical recruitment plans, capital decisions, real estate purchases, decisions regarding closures, mergers, and other strategic plans that may have an impact on the agency's competitive position relative to other health care providers (both institutional and individual) in the service area.

Student Signature _____

Date _____

Print Name: _____

Appendix H

Freed-Hardeman University Physical Therapist Assistant Program Student In-service Feedback Form

Instructions: Please have a minimum of two in-service audience members fill out the feedback form.

Topic of In-service: _____

Date of In-service: _____

Did the in-service cover a topic that is current with physical therapy practice?

Strengths of presentation:

What are some things that could improve this presentation if performed again in the future?

Other comments:

Appendix I

Freed-Hardeman University Physical Therapist Assistant Program Essential Functions for Physical Therapist Assistant Students

There are several important factors for you to consider when you are determining your future career directions. To be successful in the PTA classroom and in your job following graduation, you should be able to meet all the following expectations:

1. Attend class approximately 10-25 hours a week or perform 40 hours a week of clinical education, depending on the stage of the program curriculum.
2. Complete all assignments on time.
3. Participate in classroom discussions.
4. Perform or instruct others in the following procedures (learned in class) in a timely manner: transfers, gait training, physical agents, activities of daily living, therapeutic exercises or activities, and data collection procedures.
5. Use sound judgment and safety precautions (exposure to blood- borne pathogens and/or infectious disease may occur as part of the educational experience). Students are trained in safety/infection control and are expected to follow these guidelines to avoid contracting or transmitting disease.
6. Meet class standards for successful course completion.
7. Use critical thinking when making decisions.
8. Follow standards stated in PTA Student Handbook and the PTA Clinical Education Handbook.
9. Address problems or questions to the appropriate person at the appropriate time.
10. Maintain classroom, work area, equipment, supplies, personal appearance, and hygiene conducive to a professional setting as appropriate.
11. Behave in a competent, professional manner.

Physical requirements for the PTA Program include the need to occasionally, frequently, or continually:

1. Sit 2-5 hours per day with lecture blocks up to 3 hours.
2. Stand 1-6 hours with lab time blocks up to 3 hours.
3. Lift up to 60 pounds.
4. Push/pull up to 50 pounds of force exerted at waist level.
5. Squat or stoop.
6. Use auditory, tactile, and visual senses to assess physiological status of an Individual.
7. Demonstrate good standing and unsupported sitting balance.
8. Demonstrate good finger dexterity
9. Coordinate verbal and manual instructions
10. Communicate effectively with a variety of people through written verbal, and nonverbal methods.
11. Use hands repetitively
12. Shift weight in sitting or standing
13. Demonstrate the ability to use a firm grasp while using physical therapy equipment and while performing physical therapy interventions.

14. Reach above shoulder level.
15. Kneel, kneel-stand, and half kneel.
16. Use equipment that emits electrical, ultrasonic, and thermal energy.
17. Physically move and transfer patients

Students who have concerns about the ability to perform any of these functions should contact the PTA Program Director at (731) 989-6097.

Individuals with disabilities may request reasonable accommodations or information by calling the FHU Office of Student Accessibility at (731) 989-6029.

Appendix J

Freed-Hardeman University Physical Therapist Assistant Program

CLINICAL EDUCATION HANDBOOK AGREEMENT

I have received and read the Clinical Education Handbook for the Physical Therapist Assistant Program at Freed-Hardeman University. I understand its content and agree to abide by the policies and procedures set forth during my tenure as a Physical Therapist Assistant student. The Program reserves the right to alter policies, procedures, and content.

Student Name (Please Print)

Signature

Date