

# Physical Therapist Assistant Program Clinical Education Policy and Procedure

Manual

2023-2024

# **Welcome to MDCC's PTA Program**

Welcome to clinical education. We hope the contents of this handbook will assist in providing a high-quality clinical education experience for both clinical faculty members and their students. Clinical education is a vital portion of the physical therapist assistant curriculum. It 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 students
- The Clinical Instructor (CI)
- The Academic Coordinator of Clinical Education (ACCE)
- The faculty members of the PTA Program at Mississippi Delta CommunityCollege

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

## **Faculty and Staff**

Callie Bell, PT, DPT Program Director Office 231 Greenville Campus 662-332-0675 cbell@msdelta.edu

Caroline Strazi, PT, DPT Academic Coordinator of Clinical Education Office 233 Greenville Campus 662-332-0677 cstrazi@msdelta.edu

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#### I. Academic Information and Standards

#### INSTITUTIONAL HISTORY AND ACCREDITATION

Sunflower Junior College was founded in connection with the Sunflower Agricultural High School early in 1926 and the first freshman class was enrolled in September, 1926. The college was fully accredited as a two-year junior college in April, 1928, by the Accrediting Commission of the Senior Colleges of Mississippi. It was admitted to full membership in the Southern Association of Colleges and Schools in December, 1930, and is now a member of the American Association of Community and Junior Colleges. The name of the school was officially changed from Sunflower Junior College to Mississippi Delta Junior College at the beginning of the 1960-61 session. On July 1, 1989, the name was once again changed to Mississippi Delta Community College.

Until July 1, 1995, Mississippi Delta Community College was supported by Sunflower, Leflore, Humphreys, Washington, Issaquena, Sharkey, Bolivar, and Coahoma Counties. Coahoma County was excluded from the MDCC District during the 1995 session of the Mississippi Legislature. The college's students come not only from these counties, but from many areas, including other states and foreign countries. During the history of the institution, there have been twelve superintendents and presidents as follows: B. A. Brady (1911-1913), J. H. Sargent (1913-1918), J. S. Vandiver (1918-1935), P. M. West (1935-1944), W. B. Horton (1944-1966), J. T. Hall (1966-1989), David L. Powe (1989-1992), Bobby Garvin (1992-2001), Larry G. Bailey (2001-2012), Lynda A. Steele (Interim, 2012-2013), Larry J. Nabors (2013 - 2019), and Tyrone Jackson (2019 - present).

#### **Institutional Accreditation**

Mississippi Delta Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award the Associate of Arts Degree and the Associate of Applied Science Degree and Certificates. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Mississippi Delta Community College.

#### Memberships

The American Association of Community Colleges
The American Association of Community College Trustees
Mississippi Association of Colleges
The Mississippi Community/Junior College Association
The Mississippi Library Association

#### **MDCC PTA Program Accreditation Status**

The Physical Therapist Assistant program is approved by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC).

The Physical Therapist Assistant Program at Mississippi Delta Community College is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; telephone: 703-706-3245; email: accreditation@apta.org; website: http://www.capteonline.org. If needing to contact the program/institution directly, please call 662-332-0675 or email cbell@msdelta.edu.

Graduation from a Physical Therapist Assistant education program accredited by CAPTE is necessary for eligibility to sit for the PTA licensure examination which is required for practice in each state. The first licensure examination date for which PTA program graduates would be eligible to sit in Mississippi will be in July. Should the graduate choose to wait until the next quarter to take the licensure exam, the 2nd available opportunity will be in October. Graduates may opt to obtain a temporary 90-day licensure to practice in Mississippi to use until the licensure exam is taken. Again, temporary licenses are optional, and you can seek more information about Mississippi Board of Physical Therapy licensure regulations and about the licensure examination dates and process on these links: https://www.msbpt.ms.gov/secure/index.asp https://www.fsbpt.org.

CAPTE is an accrediting agency that is nationally recognized by the US Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). CAPTE grants specialized accreditation status to qualified entry-level education programs for physical therapists and physical therapist assistants. The process to file a complaint with CAPTE is located under the "Complaints" tab. The general contact information for

#### CAPTE is:

Commission on Accreditation in Physical Therapy Education 3030 Potomac Ave, Suite 100 Alexandria, VA 22305-3085 (703) 706-3245 accreditation@apta.org

#### **PROGRAM SUMMARY**

The Physical Therapist Assistant (PTA) Program at Mississippi Delta Community College is a twoyear (71 credit hours) program with A&P I and A&P II prerequisite course requirements. Graduates will receive an Associate of Applied Science in Physical Therapist Assistant. The Program curriculum includes courses in general education and basic science as well as technical physical therapy coursework. The program places a strong emphasis on integrating clinical education throughout the curriculum. Upon successful completion of all required PTA coursework (Fundamental Concepts of PT, Medical Conditions & Pathology, Fundamental Skills for PTAs, Kinesiology, Therapeutic Modalities, Electrotherapy and Therapeutic Exercise & Rehab I) taught the first three semesters of the program the student will enter into their first clinical education experience: Clinical Education I. This clinical education experience is conducted during the first four and ½ weeks of the semester; providing the student with their first basic experiences in a physical therapy setting. Once students have successfully completed Clinical Education I, they will move into the Therapeutic Exercise & Rehab II course. Upon successful completion of this course the students will progress into their final semester enrolling in Clinical Education II, III, and IV (each clinical education course will consist of a 4 ½ week experience) along with PTA 2524 Physical Therapy Seminar, integrated throughout the semester. PTA 2524 is aimed to provide students with professional development and license exam preparation.

#### **EOUAL OPPORTUNITY STATEMENT**

Mississippi Delta Community College does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The policies, procedures, and practices that affect the rights, responsibilities, safety, privacy, and dignity of program faculty reflect those set forth by the institution for all faculty and staff. They will be applied consistently and equitably to program faculty.

#### **Sexual Harassment:**

Sexual harassment, like harassment on the basis of race or religion, is a form of discrimination prohibited by Title VII of the Civil Rights Act of 1964. With the adoption of this policy on sexual harassment, Mississippi Delta Community College demonstrates its continued commitment to upholding the right of individuals- whether students, faculty or staff- to study and work in a place free of intimidation, fear, reprisal or coercion. Additional information can be found online in MDCC's policies and procedures Manual.

In compliance with Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972 of the Higher Education Act, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, the Pregnancy Discrimination Act of 1978 and other applicable Federal and State Acts, Mississippi Delta Community College offers equal education and employment opportunities and does not discriminate on the basis of age, race, color, national origin, religion, sex, sexual orientation, gender identity or expression, physical or mental disability, pregnancy, or veteran status in its educational programs and activities or in its employment practices. The following have been designated to handle inquiries regarding these policies: EEOC Compliance/Non-Discrimination: Dr. Steven Jones, Vice President of Administrative and Student Services; 662.246.6304 or EEOC@msdelta.edu. Title IX: Christopher Lee, Dean of Student Services, 662.246.6444 or titleIX@msdelta.edu. Disability Support Services: Darla Poole, Counselor, 662.246.6361 or ADAcompliance@msdelta.edu. The mailing address for the above-named representatives is P.O. Box 668, Moorhead, MS 38761.

#### **COLLEGE/PROGRAM MISSION STATEMENTS**

#### College Mission Statement

Mississippi Delta Community College (MDCC) provides quality education through academic, career, technical, health sciences, and workforce training programs. MDCC is dedicated to improving the community through intellectual, social, cultural, and recreational opportunities.

#### PTA Program Mission Statement

The mission of the MDCC Physical Therapist Assistant Program is to prepare graduates to be highly competent entry-level physical therapist assistants able to work under the direction and supervision of a physical therapist, and who can serve the community by improving the quality of life of a diverse patient population. The program has an unwavering commitment to evidence based contemporary practice, professionalism, ethical behavior, compassionate care, and life-long learning.

#### **PROGRAM PHILOSOPHY**

The MDCC PTA program values the physical therapist assistant (PTA), as an extension of the physical therapist, helping to carry out the physical therapist plan of care. We will strive to train the PTA as a generalist in the field of physical therapy, in which the PTA will work under the supervision of the physical therapist.

The MDCC PTA program strives to prepare student physical therapist assistants to be well suited to treat clients from a continuum of care and believe that the personal ethics of the physical therapist assistant and all healthcare workers require certain inherent elements of character which include honesty, loyalty, understanding, and the ability to respect the rights and dignity of others. We feel that personal ethics requires conscientious preparation during one's academic years for professional duties and responsibilities.

The MDCC PTA faculty are committed to providing a curriculum based upon a broad spectrum of research, theory, function and life skills. We will train and educate the PTA to communicate in ways that are consistent and appropriate within the program, clinical environment, and community. It is the MDCC PTA program philosophy that a cornerstone to the educational process is the ability to critically think and use sound judgment. The faculty strive to train the PTA to be client caregivers, educator, client advocates consistent with the governing state laws in which they practice. Students are assessed and evaluated on an ongoing basis to assure procedural knowledge, as well as completion of performance indicator (CPI) with regards to safety and technical competencies.

#### **PROGRAM GOALS**

- 1. The MDCC PTA Program will graduate competent and professional entry-level physical therapist assistants able to work under the direction and supervision of a physical therapist
- 2. The MDCC PTA Program will produce graduates who can exhibit effective critical thinking and problem-solving skills
- 3. The MDCC PTA Program will promote the importance lifelong learning and professional development through continued learning opportunities and membership in professional organizations.
- 4. The MDCC PTA Program faculty will provide comprehensive evidence-based curriculum based on contemporary physical therapy practice within an atmosphere of academic excellence
- 5. The MDCC PTA Program will prepare graduates to be culturally competent professionals able to effectively communicate with patients, caregivers, and other healthcare providers

#### **CLINICAL EDUCATION LEARNER OUTCOMES**

#### PTA 2414: Clinical Education I

- 1. Demonstrate safe performance of selected physical therapy assessment skills and treatment interventions from within the physical therapist's plan of care with routine patients at an Advanced Beginner level on the Clinical Performance Instrument
- 2. Demonstrate appropriate documentation and communication with the physical therapist regarding treatment interventions, data collection, and patient response to treatment with moderate guidance, displayed by achieving Advanced Beginner performance on the Clinical Performance Instrument
- 3. Display the ability to assist in the education of patients, family members, and caregivers with moderate supervision and guidance by the physicaltherapist
- 4. Demonstrate the ability to assist in routine administrative tasks of the department with moderate supervision and guidance, at the Advanced Beginner level on the Clinical Performance Instrument
- 5. Display appropriate legal and ethical behavior during skill performance and interactions with patients, family members, and other healthcare providers with moderate guidance from the supervising physicaltherapist
- 6. Demonstrate appropriate patient communication in a culturally competentmanner, with moderate guidance from the physical therapist

#### PTA 2424: Clinical Education II

- 1. Demonstrate safe performance of selected physical therapy assessment skills and treatment interventions from within the physical therapist's plan of care at an Intermediate level on the Clinical Performance Instrument
- 2. Demonstrate appropriate documentation and communication with the physical therapist regarding treatment interventions, data collection, and patient response to treatment with minimal guidance, shown by achieving Intermediate performance on the Clinical Performance Instrument
- 3. Display appropriate education of routine patients, family members, and caregivers with occasional guidance; displayed by achieving Intermediate performance on the Clinical

- Performance Instrument
- 4. Demonstrate the ability to participate in routine administrative tasks of the department including scheduling and billing at the intermediate level of the Clinical Performance Instrument
- 5. Display appropriate legal and ethical behavior during skill performance and interactions with patients, family members, and other healthcare providers with minimal guidance from the supervising physical therapist
- 6. Demonstrate appropriate patient communication in a culturally competent manner, with minimal guidance from the physical therapist

#### PTA 2434: Clinical Education III

- 1. Demonstrate safe and independent performance of selected physical therapy assessment skills and treatment interventions from within the physical therapist's plan of care for routine patients and with occasional guidance for complex patients, displayed by achieving Advanced Intermediate level on the Clinical Performance Instrument
- 2. Demonstrate independent documentation and communication with the physical regarding treatment interventions, data collection, and patient response to treatment for routine patients, and with occasional cueing with more complex patients, displayed by achieving Advanced Intermediate performance on the Clinical Performance Instrument
- 3. Display the ability to independently provide education to patients, family members, and caregiver in simple situations, with occasional cueing for complex situations; shown by achieving Advanced Intermediate performance on the CPI
- 4. Demonstrate the ability to participate in administrative functions of the department including attending departmental meetings, patient case conferences, and scheduling to meet patient needs at an Advanced Intermediate level on the Clinical Performance Instrument
- 5. Display appropriate legal and ethical behavior during skill performance and interactions with routine patients, family members, and other healthcare providers, and with occasional cuing with complex patients
- 6. Demonstrate appropriate patient communication in a culturally competent manner independently for routine patient and with occasional cueing from the physical therapistfor complex patients.

#### PTA 2444: Clinical Education IV

- 1. Demonstrate entry-level performance of selected physical therapy assessment skills and treatment interventions from within the physical therapist's plan of care
- 2. Demonstrate entry-level documentation and communication skills regarding all aspects of treatment and the patient's response to treatment
- 3. Display entry-level education skills for patients, family members, and caregivers
- 4. Demonstrate the ability to independently participate in administrative functions of the department including attending departmental meetings, patient case conferences, and scheduling to meet patient needs at entry-level on the Clinical PerformanceInstrument
- 5. Display entry-level legal and ethical behavior during skill performance and interactions with patients, family members, and other healthcare providers
- 6. Demonstrate entry-level patient communication in a culturally competent manner withroutine and complex patients

# PROGRAM CURRICULUM

A.A.S. in Physical Therapist Assistant

A.A.S. in Physical	Therapist	Assistant		
	Lecture	Lab	Contact	Credit Hours
	Hours	Hours	Hours	
<b>Prerequisites (Summer prior to entrance)</b>				
BIO 2513/2511 A&P I	3	2	60	4
BIO 2523/2521 A&P II	3	2	60	4
				8 Credits
Year 1 (Fall)				
ENG 1113 English Comp I	3		45	3
PTA 1123 Fundamental Concepts of PT	3		45	3
PTA 2513 Medical Conditions & Pathology	3		45	3
PTA 1213 Fundamental Skills for PTAs	2	2	60	3
				12 credits
Year 1 (Spring)				
PSY General Psychology	3		45	3
SPT 1113 Public Speaking	3		45	3
PTA 1314 Kinesiology	3	2	75	4
PTA 1224 Therapeutic Modalities	3	2	75	4
PTA 2233 Electrotherapy	2	2	60	3
		_		17 credits
Year 1 (Summer)				
MAT 1313 College Algebra	3		45	3
PTA 1324 Therapeutic Exercise & Rehab I	3	2	75	4
		_		7 credits
Year 2 (Fall)				
PTA 2414 Clinical Education I (first 4.5 weeks)		12-clinical	180	4
Humanities/fine Arts elective (online)	3			3
PTA 2335 Therapeutic Exercise & Rehab II	3	4	105	5
r				12 credits
Year 2 (Spring)				
PTA 2424 Clinical Education II (4.5 weeks)		12-clinical	180	4
PTA 2434 Clinical Education III (4.5 weeks)		12-clinical	180	4
PTA 2444 Clinical Education IV (4.5 weeks)		12-clinical	180	4
PTA 2524 Physical Therapy Seminar	4	12 chillean	60	4
111202 Tiljotom Thorapy Sommar	•			16 credits
Total				72 credits
10111				72 credits

#### PTA PROGRAM COURSE DESCRIPTIONS

#### PTA 1123: FUNDAMENTAL CONCEPTS OF PHYSICAL THERAPY

This course is an introduction to the field of physical therapy including role orientation, professional organizational structure, legal and ethical implications, and legislation. Historical patterns in the development of the profession will be explored and medical terminology introduced.

#### PTA 1213: FUNDAMENTAL SKILLS FOR PHYSICAL THERAPIST ASSISTANTS

This course provides knowledge of topics utilized in the practice of physical therapy. Topics covered will include positioning, draping, transfers, body mechanics, gait training, and standard precautions. Vital signs, first aid, and emergency techniques will also be covered.

#### PTA 1224: THERAPEUTIC MODALITIES

This course is an introduction to the theory and practical application of hydrotherapy, thermotherapy, cryotherapy, light therapy, and mechanotherapy. Emphasis will be placed on the technique of application, indications, and contraindications of modalities.

#### PTA 1314: KINESIOLOGY

This course studies individual muscles and muscle function, biomechanical principles of joint motion, gait analysis, goniometry, and postural assessment.

#### PTA 1324: THERAPEUTIC EXERCISE AND REHABILITATION I

This course provides an overview of the biochemical and neurophysiological basis and application of various therapeutic exercises. The basics of therapeutic exercises are correlated with specific conditions. This course focuses on rehabilitation techniques in the treatment of a variety of selected conditions. Specialized exercise procedures are emphasized.

#### PTA 2233: ELECTROTHERAPY

This course emphasizes theory and practical application of electrotherapy and other therapeutic procedures. Indications and contradictions of modalities are also discussed.

#### PTA 2335: THERAPEUTIC EXERCISE AND REHABILITATION II

This course presents theory, principles and techniques of therapeutic exercise and rehabilitation for primarily neurological conditions. Methods of functional, motor, and sensory assessment and intervention techniques are included. Principles of prosthetics and orthotics functional training and other techniques are covered.

#### PTA 2414: CLINICAL EDUCATION I

This course provides supervised clinical experiences in demonstrating the attributes and applying the skills for which students have been deemed competent for the clinical setting.

#### PTA 2424: CLINCIAL EDUCATON II

This is the first of three culminating clinical education experiences that provide supervised clinical experiences in demonstrating the attributes and applying the skills that prepare students for entry into the physical therapy profession.

#### PTA 2434: CLINCIAL EDUCATION III

This is the second of three culminating clinical education experiences that provide supervised clinical experiences in demonstrating the attributes and applying the skills that prepare students for entry into the Physical Therapy profession.

#### PTA 2444: CLINICAL EDUCATION IV

This is the third of three culminating clinical education experiences that provide supervised clinical experiences in demonstrating the attributes and applying the skills that prepare students for entry into the Physical Therapy profession.

#### PTA 2513: MEDICAL CONDITIONS AND RELATED PATHOLOGY

This course provides a basic knowledge of selected diseases and conditions encountered in physical therapy practice. Emphasis is on etiology, pathology, and clinical picture of diseases studied. Various physical therapy procedures in each disability are discussed.

#### PTA 2524: PHYSICAL THERAPY SEMINAR

This course represents a synthesis of previous didactic, laboratory, and clinical experiences. Students are directed to explore a topic or area of interest in physical therapy practice. Recognition of the importance of employability skills after graduation is included.

#### KNOWLEDGE OF PROGRAM AND COLLEGE POLICES AND PROCEDURES

The PTA program abides by Mississippi Delta Community College policies. The most current college policies can be found on the MDCC website at:

http://www.msdelta.edu/college-catalog/index.php.

Many, but not all, of these policies can also be found in the MDCC Student Policy Handbook found on the MDCC PTA website: <a href="https://www.msdelta.edu/programs/health-sciences/physical-therapist-assistant/physical-therapist-assistant.php">https://www.msdelta.edu/programs/health-sciences/physical-therapist-assistant.php</a>

Students are expected to have a working knowledge of the content of the MDCC PTA Student Handbook and the Clinical Education Handbook, which are provided annually at the start of

the fall semester. After reviewing the policy and procedure manual, students will sign and date the "Student Policy and Procedure Manual Agreement" and the "Clinical Education Handbook Agreement", which are agreements where the student states they understand the content of the handbooks and agree to abide by the policies and procedures set forth during their tenure as a Physical Therapist Assistant student.

The PTA Program Policy, Student Handbook, and Procedure Manual and Clinical Education Handbook are reviewed and revised annually by program faculty. To ensure all program policies are consistent with those of the College, the Dean of Health Sciences reviews both handbooks annually. When changes are made after the initial publication of each year's Policy and Procedure Manual and Clinical Education Handbook, PTA Program students and MDCC administration will be notified of the updates. The handbooks published on the program website will also be updated.

#### **CLINICAL EDUCATION ASSESSMENT TOOLS**

#### **Clinical Performance Indicator of Student's Progress**

The Clinical Performance Instrument (CPI) is the tool the PTA program expects the CI to complete at mid-term and the end of each clinical education experience. The program expects the CPI to be completed electronically at all times via CPI Web. Access to CPI Web will be issued via email to each CI on record just prior to students beginning the clinical education experience. The link will also contain instructions on how to complete the tool. The program reserves the right to issue the final grade for each clinical education course. The final grade will be based on a compilation of skill attainment as scored in the CPI as well as other course assignments for each clinical education course. An example of the non-electronic CPI tool can be issued (for reference) to the clinical site upon request.

#### **Student Evaluation of Clinical Education Experience**

After each clinical experience, the program student will complete an evaluation of the clinical education experience and clinical instructor. This evaluation is to be completed by the student and returned to the PTA program immediately following the last day of the affiliation. Students may either take paper copies of the assessment form with them to the clinical education site OR students may access the form online and transmit the results electronically (electronic submission is the preferred method). The ACCE will internally evaluate the clinical instructors based on the student evaluation, mid-term call and/or visit notes, and the completion of each student's CPI. This evaluation will be the basis of individual and aggregate clinical faculty professional development. An example of the student evaluation can be issued (for reference) to the clinical site upon request. It is available electronically:

 $\underline{https://www.apta.org/contentassets/7736d47f2ec642a3962276d9b02503d2/studentptaevaluationform-\underline{6.doc}$ 

#### CRITERIA FOR 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 philosophy regarding clinical education is compatible with the MDCC PTA program philosophy.
- 2. 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.
- 3. The physical therapy staff practices ethically and legally.
- 4. The clinical site demonstrates administrative support for physical therapy clinical education.
- 5. The clinical site has a variety of learning experiences, appropriate to the setting, available to students.
- 6. The clinical site provides an active, stimulating environment appropriate for the learning needs of the student.
- 7. The physical therapy staff is adequate in number to provide an educational program for students.
- 8. Clinical sites with more than three physical therapists have a designated Clinical Coordinator of Clinical Education.
- 9. There is an active staff development program for the clinical site.
- 10. 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 supervisoryskills.

#### RIGHTS AND PRIVILEGES OF CLINICAL INSTRUCTORS

The rights and privileges of the clinical education faculty will be commensurate with those with similar appointments within the institution. These include the following:

- The program encourages academic freedom of clinical teaching techniques during clinical experiences, all the while keeping the program objectives in mind
- The program encourages professional growth and development of the clinical education faculty. The clinical education faculty will have the opportunity to attend the annual clinical education workshop offered by the program.
- Regarding committee servitude, the program has already developed an advisory council on which several of the CCCEs agreed to serve. As the program develops, additional committees may be created or projects may be developed for which clinical education faculty may be asked to participate.
- With advance scheduling, clinical education faculty will have access to the college's conference rooms and other classrooms and laboratory facilities.

#### RESPONSIBILITIES OF THE CLINICAL 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 the Dean of Health Science with any complaints regarding the PTA Program Director, or PTA Program.\* No retaliation will occur by the PTA Program or MDCC due to a complaint being filed.

Note: If there is no designated CCCE, then the departmental director is responsible for the items listed above. \*The Dean of Health Sciences office is located on the main campus in Moorhead, MS; Horton office 223; email: <a href="mailto:pkelly@msdelta.edu">pkelly@msdelta.edu</a>; phone: 662-246-6417

#### 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 Mississippi Delta Community College. 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 thestudent.
- 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 ACCE regarding student learning needs and progress toward meeting objectives.
- 10. Consult with the ACCE 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 ACCE 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 MDCC Dean of Health Sciences with any complaints regarding the PTA Program Director.\*The CI should contact the PTA Program Director with any complaints involving the MDCC PTA Program.
- 16. When a patient or member of the public has a complaint or concern regarding a PTA student or the MDCC PTA Program, the CI is responsible to give the individual the contact information for the Dean of Health Sciences. The Dean of Health Sciences office is located on the main campus in Moorhead, MS; Horton office 223; email: <a href="mailto:pkelly@msdelta.edu">pkelly@msdelta.edu</a>; phone:

662-246-6417

#### MEMORANDUM OF AGREEMENT/CLINICAL EDUCATION CONTRACT

A Memorandum of Agreement must be signed by the both the clinical facility and MDCC 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 Mississippi Delta or clinical sites can terminate this agreement with a notice.

#### **ARRANGEMENT OF CLINICAL EXPERIENCES**

Requests for dates of clinical experiences are sent out to the Clinical Coordinators of Clinical Education (CCCE) annually during the first week of March for all clinical experiences. The CCCE is responsible for assigning students to each clinical instructor.

#### PLACEMENT POLICY

The PTA program ACCE makes all clinical assignments. Clinical education (CE) placements are designed to expose the student to different physical therapy settings. It is hoped this exposure will assist the student's attainment of the skills needed for entry level practice as a Physical Therapist Assistant.

The program requires that each student has a minimum of one outpatient and one inpatient (acute care, skilled nursing, or in-patient rehab) full time clinical education experience. Students are given an opportunity to state their preferences for placements before assignments are finalized, but it is up to the ACCE to ensure that all students have clinical education opportunities in a variety of settings with a variety of patient populations.

CE schedules are determined by the academic faculty in close collaboration with the CE faculty. Students may **NOT** rearrange clinical assignments. Special situations should be discussed with the ACCE. Students should not contact the CE facilities to obtain a clinical assignment. If a student contacts the CE facility directly to arrange a clinical placement, please contact the PTA Program ACCE. Students will be placed only at facilities in which there is a current, unexpired written CE contract in place.

For CE placements, all expenses incurred (transportation, meals, housing, etc.) are the student's responsibility unless they are provided 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 can only be placed within NC-SARA states (http://nc-sara.org/).

For Clinical Education I, students will have the educational background to perform either an inpatient, SNF, acute, or outpatient orthopedic clinical experience. For Clinical Education II, III, and IV, students will also have the background to perform a clinical experience in a more advanced clinical setting, such as pediatrics and inpatient rehab.

#### **GRIEVANCE/PETITIONS**

It is the policy of the Mississippi Delta Community College Physical Therapist Assistant Program to work with students in finding a fair and just solution to problems that may arise, including grievances, questions, misunderstandings, or discrimination. All students have the right to due process. Students are urged to first take their problems to the instructor of the course in which the problem occurred. If the student and instructor are unable to come to an agreement, the student can then take their issues through the program chain of command. Non-instructional grievances beyond the Health Science division must follow the MDCC Grievance policy found in the MDCC college catalog/student handbook.

Student complaints regarding the program should be first addressed to the PTA Program Director. Unresolved complaints or complaints about the PTA Program Director should be directed to the Dean of Health Sciences. The Dean of Health Sciences office is located on the main campus in Moorhead, MS; Horton office 223; email: <a href="mailto:pkelly@msdelta.edu">pkelly@msdelta.edu</a>; phone: 662-246-6417. All complaints will be documented, including the projected outcome, and kept on file at the program facility. No retaliation will occur by the college or PTA Program due to a complaint being filed.

Complaints regarding Accreditation of this program should be addressed to the Commission for Accreditation for Physical Therapy Education. This Commission is located at 3030 Potomac Ave., Suite 100, Alexandria, Virginia, 22305-3085.

#### Non-Instructional and Discrimination Complaint Process

If a student has a (non-instructional or discrimination) complaint, the student may submit a complaint in accordance with the following procedures:

1. Student must discuss complaint with staff member involved.

*If the matter is not resolved with the staff member:* 

2. Student must then meet with the department administrator and staff member to discuss complaint.

*If the matter is not resolved after meeting with the department administrator:* 

3. Student may submit a written appeal to the Dean of Student Services within three (3) working days of meeting with the department administrator. Within five (5) working days after receipt of the written appeal, the Dean of Student Services will render a written decision to the student or call a meeting of a Complaint Committee to hear and rule on the appeal. The Complaint Committee will render a written decision to the student within five (5) working days after the hearing.

If the student is unsatisfied with the decision of the Vice President of Student Services or the Complaint Committee:

4. Student may submit a written appeal to the President within three (3) working days of the decision in step 3. The President will render a written decision to the student within five (5) working days. The decision of the President is final.

A student has one academic year from the time of the alleged incident to file a complaint.

The Office of Instruction and the Office of Student Services will each maintain a log which records all written complaints that have been received from students, along with documentation on how the complaint was addressed. These records will be retained and made available for accreditation and regulatory purposes.

#### Academic/Grades Appeal

Student appeals concerning a course grade should be resolved by conference between the student and the instructor who assigned the grade within 7 calendar days from the day grades are posted in Canvas. If the concern is not resolved, the student may begin the formal grade appeal procedure following the process outlined in the MDCC College Catalog/Student Handbook.

#### Grounds for Grade Appeal

- 1. *Errors in calculation:* The student appeals an error made in the mathematical calculations of graded material.
- 2. *Errors in course practices:* The student contends that there is gross disparity between the course syllabus and the manner in which the course is conducted in regards to the treatment of the individual student.

#### <u>Instructional Complaint Process</u>

The instructor has authority over all matters affecting conduct of classes, including the assignment of grades. If a student has a complaint about instructional activities or a grade, the student may submit a complaint in accordance with the following procedures:

1. Student must discuss complaint with faculty member involved.

*If the matter is not resolved with the faculty member:* 

2. Student must meet with the program director and faculty member to discuss complaint.

*If the matter is not resolved with the program director member:* 

3. Student must meet with the Dean of Health Sciences and the program director to discuss complaint

*If the matter is not resolved after meeting with the program director:* 

4. Student may submit a written appeal to the Vice President of Instruction within three (3) working days of meeting with the Dean of Health Sciences. Within five (5) working days after receipt of the written appeal, the Vice President of Instruction will render a written

decision to the student or call a meeting of the Instructional Appeals Committee to hear and rule on the appeal. The Instructional Appeals Committee will hear from all parties involved and render an oral decision to the Vice President of Instruction. This decision will then be placed in written format to the student within five (5) working days after the hearing.

If the student is unsatisfied with the decision of the Vice President of Instruction or the Instructional Appeals Committee:

5. Student may submit a written appeal to the President within three (3) working days of the decision in step four. The President will render a written decision to the student within five (5) working days. The decision of the President is final.

Complaints regarding the program or the program graduates should be first addressed to the PTA Program Director. Unresolved complaints or complaints about the Program Director should be directed to Patricia Kelly, MBA. MT(AMT) (ASCP)BB, Dean of Health Sciences. Mrs. Kelly's email is <a href="mailto:pkelly@msdelta.edu">pkelly@msdelta.edu</a> and her phone number is 662-246-6417. All complaints will be documented, including the projected outcome, and kept on file at the program facility. 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 22305-3085. No retaliation will occur by MDCC or the PTA Program due to a complaint being filed.

#### **GRADUATION CRITERIA**

Upon successful completion of the following criteria, Mississippi Delta Community College will grant an Associate in Applied Science Degree with a major of Physical Therapist Assistant.

- 1. Credit Courses: Students are required to complete all program general education and technical coursework with a minimum grade of "C" (75%) for each technical course. Maintain a 2.0 cumulative quality point average on all credits applied toward degree to graduate from the PTA program. Students are required to maintain a "75" test average to be allowed to progress through the program.
- 2. Clinical Education: Students are required to pass all clinical education courses
- 3. Professional Behaviors: Students must be assessed as "Entry-Level" for all 10 Professional Behaviors by Program faculty prior tograduation

The graduation date will be defined as the month of graduation commencement or the end of clinical experiences, and academic requirements whichever comes later. In order to qualify for graduation, a student must have met all program requirements and be in good academic standing.

Students who complete the requirements must also be recommended by the PTA faculty for graduation. The Office of the Registrar may withhold graduation if a student has outstanding financial obligations to the college or has not returned any college property that has been borrowed.

It is the student's responsibility to apply for graduation by the published deadline and to complete any exit activities prior to graduation. Delays or neglect in this area may translate into delays of transcript/certificates of education and subsequent licensure application or processing.

#### **LICENSURE**

Graduates of the PTA Program are awarded the Associate of Applied Science Degree. Once the PTA Program is accredited, graduates will be eligible to sit for the national certification examination for the Physical Therapist Assistant which is administered by the Federation of State Boards of Physical Therapy (FSBPT).

FSBPT 124 West Street South, Alexandria, VA 22314 Phone: 703-299-3100

After successful completion of the exam, the individual will be eligible for licensure as a Physical Therapist Assistant (PTA). The state of Mississippi (as well as all other states in the United States) requires a license to practice as a PTA. A new graduate may be permitted to work as a Physical Therapist Assistant with a limited/temporary permit from the Mississippi State Board of Physical Therapy. This permit is considered valid until the results of the first national examination after graduation are received. If the graduate passes the examination, a permanent license is granted. If the graduate does not pass, the limited/temporary permit to work as a PTA is revoked until the graduate receives a passing grade on the national licensure examination.

#### READINESS FOR CLINICAL EXPERIENCES

The ACCE 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 successfully passing skill checks and practical exams
- 2. Professional Behaviors status
- 3. Prior or current probationary status
- 4. Clinical evaluations and performance from completed affiliations
- 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. Safety in regards to patient care is a priority of this program. In order 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 of the areas listed above. In addition, all skill checks and practical exams will be monitored in regards to 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.

#### **DETERMINATION OF SATISFACTORY PROGRESS OF CLINICAL EDUCATION**

There is a minimum criterion rating on the Clinical Performance Instrument which must be met to consider the clinical experience passed. The minimum acceptable rating for Clinical Education I is Advanced Beginner for all 14 criteria. For Clinical Education II, the minimal acceptable rating for all 14 criteria is Intermediate. For Clinical Education III the minimal acceptable rating for all 14 criteria is Advanced Intermediate. For Clinical Education IV, the student must be at entry-level for all 14 criteria. A student must also meet the program's clinical education attendance and absenteeism policy and complete and receive a passing grade on all clinical experience assignments (journal completion) to obtain a grade of an "A" for the clinical education experience. If these items are not successfully completed, the student will receive a failing grade of an "F" on the clinical education experience.

A failing 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 are 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 clinical faculty during the clinical experience and whether or not 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. ACCE consultation with the student, CI, CCCE, and PTA ProgramDirector.
- 6. The uniqueness or complexity of the clinical education site.
- 7. Whether or not all outcomes on the course syllabus have been met (Such as Expected Professional Behaviors levels).

The final decision as to whether or not the student passes the clinical experience is made by the ACCE. If the ACCE determines that there is a question about whether a student's performance is acceptable, the ACCE brings up the issue to the PTA program faculty for consideration.

#### FAILING GRADE FOR THE CLINICAL EXPERIENCE

- 1. The ACCE 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. The result will depend of the circumstances of the failure, if there were patient safety concerns, and availability of clinical education sites for remediation.

- 3. Recommendations are made for remediation of theproblem(s).
- 4. The student is reminded of MDCC's policies regarding the student's right of appeal.
- 5. A Plan of Action is developed by the ACCE, PTA Program Director, and the student.

#### SCHOOL HOLIDAY AND INCLEMENT WEATHER

Not all clinical education sites recognize the same holidays as MDCC. These sites may remain open for regular business although MDCC 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 ACCE as per the absenteeism policy. It will not be considered an absence if the clinical education site is closed due to inclement weather. If MDCC considers it unsafe for students to travel to campus, the student will not be expected to be present at the clinical site. This will be site dependent based on weather and decided upon by the ACCE.

#### **DISABILITIES**

It is the policy of Mississippi Delta Community College to provide reasonable accommodation for any qualified student with a disability, so long as it does not fundamentally alter the nature of the program offered, and does not impose an undue hardship upon the program, staff or other students.

All students admitted to the Physical Therapist Assistant Program are required to acknowledge that they have read and understand the Minimum Technical Standards for Admission, Progression, and Graduation of this program. The list of standards are no intended to be a complete listing of behaviors required, but is a sampling of types of abilities needed to meet program objectives and requirements. Mississippi Delta Community College reserves the right to amend this listing based on the identification of additional standards or criteria deemed essential to the program.

During PTA student orientation all students will be made aware of the Minimal Technical Standards for Admission, Promotion, and Graduation. The PTA Technical Standards are included in the handbook appendix, PTA application and on the PTA website. All students must sign at acknowledgment of understanding. The record of acknowledgement will remain confidential and keep in the student program file, not in Admissions/Records. The responsibility to perform these essential functions is placed onto the student.

IF A STUDENT CANNOT MEET OR DEMONSTRATE THE LISTED PTA TECHNICAL STANDARDS, IT IS THE RESPONSIBILITY OF THE STUDENT TO REQUEST REASONABLE ACCOMODATION (S).

The determination whether the accommodation is reasonable will be on an individual basis. This determination will be on an interactive basis with the program leader, in conjunction with the coordinator of disability services on campus. Advance notice is highly encouraged.

Students with documented disabilities may request reasonable accommodations. In order to receive accommodations, a student must:

- 1. Initiate a request for services through the campus Disabilities Coordinator, located in the Learning Center.
- 2. Provide documentation verifying the disability.
- 3. Follow the plan as determined after consultation with the campus Disabilities Coordinator.

Please refer to the MDCC college catalog/student handbook or the MDCC Disabilities Recourse Guide that can be found on the MDCC website: https://www.msdelta.edu/civilrights/docs/disability-request-form2023.pdf

#### **STUDENT RESPONSIBILITIES**

Each student will have a variety of clinical experiences throughout the two years of the PTA Program. The student will be involved in clinical site selection, placement, and is encouraged to consider the CI's area of expertise, and any special program and learning experiences available at the clinical site. The student's responsibilities are as follows:

- 1. 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. Transportation and lodging arrangements and costs.
- 3. Wear professional attire as required by the clinical site.
- 4. Adhere to all policies and procedures of the assigned clinical site.
- 5. Act in an ethical and legal manner at all times.
- 6. Identify and actively seek needed learning experiences to meet goals and objectives.
- 7. Confer and consult with the CI and ACCE regarding learning needs, progress, and/orconcerns.
- 8. Display professionalism and responsibility.

#### **ATTENDANCE AND ABSENTEEISM**

Attendance is required for the entire clinical education experience. 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, ACCE, 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 experience in the program will be 4.5 consecutive, 40-hour clinical work weeks which is equal to 180 contact hours. Any clinical experience that falls short of these contact hours requires CI and ACCE approval. All absences must be made up with the exception of official closing of

the clinical education site's physical therapy department. Most clinical facilities do not close for the same holidays as MDCC, nor do they close for inclement weather. Students should document any time absent due to facility holiday closure or inclement weather. Students must meet minimum clinical hours per CAPTE standards and to satisfy MDCC contact hour requirements. The student is responsible for reporting all absences to the ACCE. The ACCE will determine if hours need to be made up in the clinic or in simulated assignments.

Absences and tardiness will be monitored in two ways:

- 1. Communication between the student, clinical instructor and the ACCE
- 2. Time card/sheets

Students will receive time cards prior to entering a new rotation. Each time card is to be labeled with the student's name and the dates for which the card is used. Each student is to write down the total hours spent at the facility each day. Any time the student leaves the clinic, such as for lunch, cannot count for clinical experience time on the time card. These time cards are to be signed by the CI and the student must turn them in to the ACCE with the other required clinical paperwork at the end of the rotation.

The student must report any absences to the CI and the ACCE prior to the time the student is due to arrive to the clinical experience site or 8:00 AM, whichever is later. The student can contact the ACCE by either e-mail or by phone. If a student fails to notify the CI of an absence or tardiness the CI should notify the ACCE and make note of it on the student's time record. If you have any concerns regarding the professional behavior of the student (excessive absences or tardiness) please contact the ACCE as soon as you notice the problem. The PTA faculty will contact the student to discuss the absenteeism/tardiness problem and provide counseling. If needed, independent study assignments or other ways to "make-up" missed time can be arranged.

#### **PROFESSIONAL BEHAVIORS**

While enrolled in the program professional behaviors are expected in all settings, directly or indirectly related to the program. Students are expected to take ownership of their learning experience. This includes maintaining regular attendance, being prepared for class, completing all assignments in a timely manner, asking for clarification or assistance when needed, and being receptive to feedback provided by the faculty. Students are encouraged to participate in classroom discussions related to the lecture content. Discussion should remain professional; arguing and disruptive/unprofessional behavior will not be tolerated. Extraneous conversations in the classroom keep other students from listening to the instructor causing them to miss valuable lecture content and should be kept to a minimum. Sleeping will not be tolerated during classroom, laboratory, clinical education, or program activities. Breaks and lunches will vary due to course content,

college programs, and clinical education scheduling. Students are expected to follow the directions and/or schedule of the clinical education facility for lunch breaks. Family members (children, spouses, and significant other) are not allowed at any clinical site while the student is "on duty". Family members should not enter any setting unannounced.

Students must follow professional standards set forth by the program and in line with the APTA Standards of Ethical Conduct for the Physical Therapist Assistant when in the classroom, laboratory and clinical education settings and other program activities. A Professional Behaviors Assessment tool will be utilized to assess student professionalism throughout enrollment in the program. Guidelines for these standards are as follows:

#### **1. Professional Behaviors** (Appendix)

Ten specific "Professional Behaviors" are assessed throughout the PTA Program curriculum. PTA program faculty will assess the Professional Behaviors once per semester with students also performing a self-assessment once per semester.

#### **Expected Professional Behavior levels are:**

- a. End of Semester I: All Professional Behaviors at least beginninglevel
- b. End of Semester II: 50% of Professional Behaviors at intermediate level orhigher
- c. End of Semester IV: all Professional Behaviors at least intermediatelevel
- d. End of Semester V: all Professional Behaviors at entrylevel

Faculty will provide both oral and written feedback regarding professional behaviors each semester. Copies of this feedback will be placed in the student's file. Students are expected to change unsatisfactory behaviors after receiving feedback from faculty. Professional Behaviors reflect behaviors necessary for success as a physical therapist assistant in the clinical environment, failure to demonstrate progress in the Professional Behaviors, or failure to meet the specific behavior levels by the defined target dates will result in program probation or dismissal.

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

#### PROFESSIONAL APPEARANCE

Students' behavior, professionalism, and appearance are representative of themselves. MDCC, and the profession of physical therapy. Students are expected to arrive to clinical experiences clean and neat. For clinical education experiences and any off-campus activities, the students will be expected to purchase and wear scrubs that represent the MDCC PTA Program. These scrubs will be uniform in color and brand. The students will also be expected to have the scrub tops monogrammed with verbiage that identifies the PTA Program. However, any dress code that the clinical site requires of

the PTA Program student will supersede the requirements of the PTA Program. Please note that some clinical affiliates may hold more strict policies regarding dress and appearance. If the clinical site does not have specific requirements, then the student will be expected to default to the dress code requirements of the PTA Program. School photo identification must be worn. Exceptions to the PTA dress code may be made for religious, cultural, or medical reasons.

#### WORK POLICY WHILE ENROLLED IN PTA PROGRAM

Students are not to be paid employees of clinical facilities during clinical education experiences. If a student works in any facility while enrolled in the program, she/he may not legally function as a student PTA. A student employed under these conditions may only function as a PT Aide/ Tech according to regulations of the Mississippi State Board of Physical Therapy (MSBPT) under the Physical Therapy Practice Act.

Working while enrolled in the PTA Program is discouraged. Class schedules will vary greatly each semester and no attempt will be made to schedule classes around a student's work schedule. If work interferes with PTA Program success, the student will be referred to the career technical counselor.

#### **INSURANCE**

MDCC and clinical education sites do not provide health insurance to students. It is advised that students carry their own health insurance during the program including all full-time clinical education experiences. Some clinical sites require students to carry health insurance while performing a clinical experience at their facility.

All students annually purchase professionally liability and accident insurance through MDCC.

Medical Professional Liability Insurance--Medical professional liability insurance is required for each Health Science student enrolled in a clinical course with patient contact. This insurance is purchased automatically through and charged to the student account. This insurance covers unintended injury to patient or other students during off campus education experiences.

Accident Insurance-- MDCC students purchase Student Accident Insurance by paying applicable Insurance Fee when they register and pay for classes. The Student Accident Insurance pays for injuries occurring from school-sponsored activities related to the selected classes. The policy pays for reasonable and customary charges for treatment of injuries. It does not pay for illnesses such as allergies, influenza, or fainting or accidents due to travel. Student must obtain an incident report for the clinical affiliate in order to file a claim. MDCC incident report can be obtained from the Allied Health Office Manager is accident occurs at a MDCC campus.

#### BACKGROUND RECORD CHECK

Mississippi law Code 43-11-13 requires that any person who provides services that involve direct contact with patients and residents at a health care facility have a background check conducted. Background checks are done upon program admission. Students are responsible for the cost of the background checks.

Background checks are scheduled the day of orientation by MDCC staff. If, during the course of the program, a student has been convicted of a felony prior to attempting the national licensure examination for the Physical Therapist Assistant, it is the student's sole responsibility to notify the Federation of State Boards of Physical Therapy (FSBPT). The FSBPT can be found at <a href="https://www.fsbpt.org/">https://www.fsbpt.org/</a>. A felonious record may disqualify a candidate to become a Licensed Physical Therapist Assistant. During the course of the PTA program, a student found presenting felonious records will be immediately dismissed from the program.

Clinical agencies have the right to refuse employment or eligibility to participate in clinical experiences based on background. Students who have any eliminating background record will not be allowed admission to any health science program. A student may also be denied the ability to progress in a program of study based on eliminating background information.

If the student receives a letter deeming him/her as non-suitable for employment (receives a "RAP" sheet), the student will be required to meet with the Program Director and/or Dean of Health Sciences.

The PTA program will follow the MDCC Health Science Background Check policy at all times. Students are required to acknowledge compliance of this policy at time of application.

#### SUBSTANCE USE POLICY

It is the goal of Mississippi Delta Community College to maintain an environment that is free from the effects of intoxicants or other behavior affecting substances. It is our belief that a drug free environment is to the benefit of students and employees of Mississippi Delta Community College as well as the surrounding community. Therefore, the unlawful use, manufacture, possession, distribution or dispensing of alcohol or illegal drugs, the misuse of legally prescribed or "over-the-counter" drugs, or being under the influence of such substances while engaged in any portion of the physical therapist assistant program experience is strictly prohibited. For purposes of this policy, "being under the influence" is defined as meaning that the judgment or motor coordination is impaired due to the presence of use of any one of the substances mentioned above.

Due to the safety and security of patients, colleagues, clinical affiliates, students and the sensitive nature of allied health and nursing programs, it is not discriminatory for MDCC to require drug testing. Drug and Alcohol testing will be conducted following the MDCC Health Sciences' Substance Use policy.

The PTA program will follow the MDCC Health Science Substance Use policy at all times. Students are required to acknowledge compliance of this policy at time of application.

#### CPR. IMMUNIZATION AND HEALTH SCREENING REQUIREMENTS

Students enrolled in a Health Science program participate in clinical training and laboratory exercises that are essential elements of study. To protect the health of students, patients, employees, and others, and to comply with standards established by the affiliated healthcare providers Mississippi Delta Community College (MDCC) Health Science students are required to complete and submit the Pre- Entrance Health Forms and Immunization Records upon starting the program. The forms must be thoroughly completed by a healthcare provider (MD, DO, NP, ARNP, PA), up to date immunizations; conditions requiring treatment, and/or special accommodation needs. Students will become CPR-certified before attending Clinical Education I. AHA-BLS certification will be effective for two years which will encompass the entire length of program enrollment.

Complete documentation is necessary for assigning students to affiliated clinical agencies for the clinical component of the program. The student's continuation in the program requires the student to be able to perform every essential function of the student role as listed within the program's Core Technical Performance Standards. Applicants unable to meet the Core Performance Standards are responsible for discussing the possibility of reasonable accommodations with the designated institutional office. Before final admission into a health career program, applicants are responsible for providing medical and other documentation related to any disability and the appropriate accommodations needed to meet the Core Performance Standards. These materials must be submitted in accordance with the institution's ADA Policy. If the student, with reasonable accommodation, is unable to perform any essential function in a safe and successful manner, he/she will be required to withdraw from the program.

#### **Immunizations:**

MDCC requires incoming students in health care courses within the Health Sciences Division to be vaccinated or have titers as evidence of immunity to various potential pathogens; as required by the State of Mississippi and clinical affiliates.

All students must show proof of immunity ("proof" = vaccination records, Form 121 from the department of health or other medical record) and/or documentation of current vaccinations: varicella, hepatitis B, rubeola, mumps, rubella, tetanus, diphtheria and pertussis. If proving immunity by titers, lab reports documenting each titer must also be submitted. Evidence of influenza (flu) and/or COVID vaccination may also be required by the clinical facility.

**TB Skin Test** – The 2-step test is required. If positive TB test, CXR results are required.

The college will follow procedures for maintaining these immunization and health screening records as private educational data.

#### **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.

In the event of an accident, please have the student complete an incident form and notify the ACCE of the incident.

### **EARLY TERMINATION OF CLINICAL EXPERIENCE**

The PTA Program ACCE and the MDCC 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 ACCE 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 ACCE informed of any potential problems. If you feel the student must be removed from the clinical education experience, contact the ACCE or PTA Program Director immediately.

Following this action an informal meeting with the student, ACCE, 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.

#### **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 ACCE and PTA Program Director will decide on an individual basis whether the student will be provided with 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.

#### **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.

#### MEMORANDUM OF AGREEMENT/CLINICAL CONTRACT

Only clinical facilities with current, unexpired, written Memorandum of Agreements (MOA)/Clinical Education Contracts (CEC) in place will be utilized for the placement of students. A complete MOA or CEC is sent when a facility is first utilized. The ACCE reviews the list of clinical sites annually to make sure all sites have a current MOA or CEC.

#### **EOUIPMENT 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.

#### **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.

#### **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 in 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 ACCE immediately if supervision does not follow these guidelines.

#### **CLINICAL FACULTY RIGHTS AND PRIVILEGES**

The MDCC PTA Program values the clinical faculty who are involved with the clinical education of MDCC students. CIs and CCCEs are entitled to rights and privileges as a result of their participation with the MDCC PTA Clinical Education Program.

The MDCC PTA Program will annually determine the professional development needs of the clinical faculty members. With this information, the PTA Program hopes to facilitate continued growth and development in 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 ACCE during clinical education visits.

The PTA Program will also make an effort to host continuing education workshops on both clinical education and clinical practice topics. All area physical therapy clinicians will be invited to attend these workshops; however, those clinicians who have served as clinical faculty for the program will be offered reduced tuition.

MDCC PTA Program academic faculty members are available to provide in-services for any affiliating clinical facility on mutually agreed upon topics. This in-service could be on clinical

education topics or other physical therapy information. Contact the PTA Program Director if your facility is interested in arranging for an in-service.

The Mississippi State Board of Physical Therapy (MSBPT) allows clinical instructors licensed in Mississippi to receive continuing education credit for being a clinical instructor. Per MSBPT Rule 5.4 "Sources of Continuing Competence", continuing competence hours may be accrued from the following sources when the content of the programs relates to the profession of physical therapy. Hours related to earning credit for being a clinical instruction fall under "Approved Activities" which are activities that are approved but do not go through a formal certification process due to the fact that these activities would be difficult to verify. Approved activities are assigned a set CCU value as a group, based on the criteria, versus each individual activity being assigned a value and are limited to 15 CCUs per licensure period. Rule 5.4.2.i describes "Clinical Instructorship: Credit for 1 CCU is applied for each 40 hours of clinical supervision with the same student. A maximum of 3 CCUs per clinical rotation for a total of 6 CCUs per licensure period is allowed. Students must be enrolled in CAPTE accredited or eligible DPT or PTA program. Verification of the clinical supervision agreement with the student's educational program and a log reporting supervision hour is required as evidence of compliance. A certificate of completion from the educational program may also be used as evidence of compliance." Further details about MSBPT continuing competence rules can be found

at https://www.msbpt.ms.gov/secure/pdf/Part\_3103\_Chapter\_5\_CEU.pdf.

#### 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 is usually 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 clinical experience dates.
- 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.

- 10. Housing information, if applicable.
- 11. Any information on other tests the students may require by the institution (background checks, drug screenings)
- 12. Any additional orientation information you want the student to read prior to the clinical experience.

# Appendix

# 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 (eg, 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 or 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

Fundamentals Skills for PTA	Therapeutic Modalities & Electrotherapy	Kinesiology	Therapeutic Exercise & Rehablitation I
Handwashing*	Therapeutic massage*	L/E goniometry*	Strengthening exercises*
Anthropometric measurements*	Paraffin*	U/E goniometry*	Stretching exercises*
Positioning and Draping*	Cryotherapy*	L/E MMT*	Vital sign assessment with exercise*
Bed mobility*	Hot packs*	U/E MMT*	
Common transfer techniques*	Contrast baths/packs*	Neck/Trunk goniometry*	Home exercise programs
Body mechanics*	Ultrasound*	Neck/Trunk MMT*	Isotonic/isometric exercise*
Vital sign assessment*	Diathermy (theory only)	Spinal nerve reflexes*	Concentric/eccentric exercise*
Fitting Assistive Devices*	Intermittent Compression*	Dermatomes*	Reciprocal inhibition*
Gait training – level and stairs*	Laser (theory only)	Myotomes*	Open & closed chain exercises*
Standardized Questionnaires	Ultrasound*	Palpation*	Balance/coordination exercises*
Donning and Doffing of PPE*	Mechanical traction*	Muscle length assessment*	Post-surgical exercise programs/protocols
Wheelchair mobility*	Wound care	Functional ROM*	Common balance assessments*
AROM, AAROM	Hydrotherapy (theory only)	Posture Assessment*	
PROM*	TENS*	Gait Cycle	1
AROM, AAROM	Interferential Current* NMES* Iontophoresis*	Gait deviations	
	Biofeedback*		

Skills learned by PTA students after Clinical Education I, but before Clinical		
Education II and III		
Therapeutic Exercise and Rehab II		
Residual limb wrapping*		
NDT techniques*		
Gait training for amputees and rehab diagnoses		
SCI transfers, positioning and pressure relief*		
Pediatric assessment and treatment		
Cognition assessment*		
Coughing and breathing exercises*		
Postural drainage*		
Amputee assessment and treatment		

<sup>\*</sup>Denotes skills student has demonstrated competence in through skill checks and/or practical examinations

<sup>\*\*</sup>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

#### **Professional Behaviors Assessment Tool**

Date:

Student Name

## \*included for reference only, not to be completed by clinical instructor

Student I tuni	_	
Directions:	1. 2. 3.	Read the description of each professional behavior.  Become familiar with the behavioral criteria described in each ofthe levels.  Self-assess your performance continually, relative to the professional behaviors, using the behavioral criteria.  At the end of each semester:
		<ul> <li>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).</li> <li>b. Give at least one specific example of a time when you demonstrated a behavior from the</li> </ul>
		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. <u>Critical Thinking</u>: 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.

#### 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

#### 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

#### Entry Level:

selected

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

Specific Example:	Place an "x" on the visual analog scale		al analog
	B	I	

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

#### Beginning Level:

Demonstrates understanding of the English language (verbal and written): uses correct grammar, accurate spelling and expression, legible handwriting; Recognizes impact of non-verbal communication in self and others; Recognizes the verbal and non-verbal characteristics that portray confidence; Utilizes electronic communication appropriately

#### Intermediate Level:

Utilizes and modifies communication (verbal, nonverbal, written and electronic) to meet the needs of different audiences; Restates, reflects and clarifies message(s); Communicates collaboratively with both individuals and groups; Collects necessary information from all pertinent individuals in the patient/client management process; Provides effective education (verbal, non-verbal, written and electronic)

#### 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 logical organization and sequencing; Maintains open and constructive communication; Utilizes communication technology effectively and efficiently

Specific Example:	Place an "s	x" on the visu	al analog
	B	I	E

**3. <u>Problem Solving</u>**: The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.

#### Beginning Level:

Recognizes problems; States problems clearly; Describes known solutions to problems; Identifies resources needed to develop solutions; Uses technology to search for and locate resources; Identifies possible solutions and probable outcomes

#### Intermediate Level:

Prioritizes problems; Identifies contributors to problems; Consults with others to clarify problems; Appropriately seeks input or guidance; Prioritizes resources (analysis and critique of resources); Considers consequences of possible solutions

#### Entry Level:

uses resources to solve problems;
Accepts responsibility for
implementing solutions;
Implements solutions; Reassesses
solutions;
Evaluates outcomes; Modifies
solutions based on the outcome and
current evidence; Evaluates
generalizability of current evidence to
a particular problem

Independently locates, prioritizes and

Specific Example:	Place an "x" on the visual analog scale		
	В	I	E

**4. Interpersonal Skills**: The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.

#### Beginning Level:

Maintains 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

#### Intermediate Level:

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

#### Entry Level:

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

Specific Example:	Place an "x" on the visual analog scale		al analog
	В	I	E

5. **Responsibility**: The ability to be accountable for the outcomes of personal and professionalactions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.

#### 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

#### 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

#### 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

Specific Example:			x" on the visua	al analog
		В	I	E
The state of the s	xhibit appropriate professional conhile promoting the growth/develo			
Beginning Level: 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  Intermediate Level: 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		Entry Level:  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		y treatment E practice, re ; Provides care at all vision of seeking I consent for ntenance of ellence in articipation
providers	expectations of the profession	in activities education/j Utilizes evadecision me patient care best praction physical the system and Demonstration collaboration groups	at sessions or ps that further professional devidence to guide aking and the pe, following guides; Discusses rerapy within the lin population has leadership in on with both incompared to the session of	velopment; clinical rovision of delines for ole of e healthcare nealth; n
Specific Example:		Place an " scale	x" on the visua	al analog
7. Has of Construction Feed 1.	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.

D	T. T. T. T.	T . T . I			
Beginning Level:	Intermediate Level:	Entry Level:			
Demonstrates active listening	Critiques own performance	Independently engages in a continual			
skills; Assesses own performance;	accurately;	process of self evaluation of skills,			
Actively seeks feedback from	Responds effectively to	knowledge and abilities; Seeks			
appropriate sources; Demonstrates	constructive feedback; Utilizes	feedback from patients/clients and			
receptive behavior and positive	feedback when establishing	peers/mentors; Readily integrates			
attitude toward feedback;	professional and patient	feedback provided from a variety of			
Incorporates specific feedback into	related goals; Develops and	sources to improve skills, knowledge			
behaviors; Maintains two-way	implements a plan of action in	and abilities; Uses multiple approaches			
communication without response to feedback; Provides		when responding to feedback;			
defensiveness constructive and timely		Reconciles differences with sensitivity;			
feedback		Modifies feedback given to			
		patients/clients according to their			
		learning styles			
Specific Example:		Place an "x" on the visual analog			
		scale			
		B I E			

8. Effective Use of Timeand R	Resources: The ability to man	age time and resources effectively to
obtain the maximum possible ber	nefit.	
Beginning Level:	Intermediate Level:	Entry 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; Accesses current evidence in a timely manner; Verbalizes productivity standards and identifies barriers to meeting productivity standards; Self-identifies and initiates learning opportunities during unscheduled time	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 standards; Identifies need for and seeks referrals to other disciplines	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 determine plan of care; Utilizes community resources in discharge planning; Adjusts plans, schedule etc. as patient needs and circumstances dictate; Meets productivity standards of facility while providing quality care and completing non-productive work activities
Specific Example:		Place an "x" on the visual analog scale
		B I E

9. Stress Management: The	e ability to identify sources of s	tress and to developand imp	olement
effective coping behaviors; this applies for interactions for: self,			
patient/	clients and their families, mem	bers of the health care team	and in
work/li	fe scenarios.		
Beginning Level:	Intermediate Level:	Entry Level:	
Recognizes own stressors;	Actively employs stress	Demonstrates appropriate aff	fective
Recognizes distress or problems in	management techniques;	responses in all situations; Responds	
others; Seeks assistance as needed;	Reconciles inconsistencies in	calmly to urgent situations with	
Maintains professional demeanor	the educational process;	reflection and debriefing as r	needed;
in all situations	Maintains balance between	Prioritizes multiple commitm	
	professional and personal life;	Reconciles inconsistencies w	
	Accepts constructive feedback	professional, personal and w	ork/life
	and clarifies expectations;	environments;	
	Establishes outlets to cope	Demonstrates ability to defus	
	with stressors	potential stressors with self a	and others
		Place an "x" on the visual a	nalog
Specific Example:		scale	anaiog
		scale	
		B I	E
10 C	The abilities to a 16 diament learning	- 4- 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	C
10. Commitment to Learning: T			
	ds and sources of learning; and wledge, behaviors, and skills.	to continually seek and app	oly new
Beginning Level:	Intermediate Level:	Entry Level:	
Prioritizes information needs;	Researches and studies areas	Respectfully questions conve	entional
Analyzes and subdivides large	where own knowledge base is	wisdom;	
questions into components;	lacking in order to augment	Formulates and re-evaluates	position
Identifies own learning needs	learning and practice; Applies	based on available evidence;	
based on previous experiences;	new information and re-	Demonstrates confidence in	sharing
Welcomes and/or seeks new	evaluates performance;	new knowledge with all staff	f levels;
learning opportunities; Seeks out	Accepts that there may be	Modifies programs and treati	ments
professional literature; Plans and	more than one answer to a	based on newly-learned skill	s and
presents an in-service, research or	problem; Recognizes the need	considerations;	
cases studies	to and is able to verify	Consults with other health	
	solutions to problems; Reads	professionals and physical th	erapists
	articles critically and	for treatment ideas	
	understands limits of		
	application to professional		
	practice		
Specific Example:		Place an "x" on the visual a	analog
Specific Example.		scale	

E

I

В

Based on my Professional Behaviors Assessment, I am sett	ing the following Goals:
To accomplish these goals, I will take the following specific	c actions:
Student Signature:	Date:
Faculty Signature:	Date:

### Mississippi Delta Community College Physical Therapist Assistant Program

### **Clinical Experience 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 eveningcoverage)
Review work week/hours of the CI, and studentexpectations
Review the professional appearance and behavior standardsof 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 thefacility.
Review available supplies and equipment.
Review facility Infection Controlprocedures.
Review facility emergency procedures (Fire, Medical Emergency, Tornado, etc).
Review Clinical Education requirements and expectations.
Discuss student learningpreferences.
Review facility documentation procedures andprocess.
Review facility billing procedures and process.

### Mississippi Delta Community College Physical Therapist Assistant Program Clinical Instructor/Student Meeting Form

Check the Clinical Education Experience:  Clinical Education I  Clinical Education II  Clinical Education IV		
Week #: Dates:		
CLINICAL INSTRUCTOR COMMENTS:		
Student's Strengths:		
Areas/Skills Showing Improvement:		
Areas/Skills to Work on:		
STUDENT COMMENTS:		
GOALS FOR NEXT WEEK :		
Clinical Instructor Date	Student	Date

# MDCC PTA Program Student Clinical Education Handbook Agreement

I <u>,</u>	, have read and understand the PTA		
Program clinical education handbook and agree to	abide by the requirements set forth. I understand		
that failure to comply with the requirements stated	therein may result in dismissal from the PTA		
Program, even though I may be passing the course	work.		
I furthermore will agree to supply a forwarding add participate in any follow up surveys for up to 18 m			
I will ask the faculty for any further information th	at I may		
require. STUDENT'S			
SIGNATURE	DATE		
PROGRAM DIRECTOR'S			
SIGNATURE			