



Bay State College
Physical Therapist Assistant Program
Clinical Education Handbook



Bay State College

PTA Program Clinical Education Handbook

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Bay State College Physical Therapist Assistant Program

CLINICAL EDUCATION HANDBOOK INTRODUCTION

The purpose of this Clinical Education Handbook is to provide Center Coordinators of Clinical Education (CCCEs), Clinical Instructors (CIs) and students a reference guide to the Clinical Education Program at Bay State College. Included in this handbook are the College and PTA Program mission and philosophy along with a description of the PTA curriculum, and the clinical education policies and procedures.

The handbook is divided into the following sections:

- I. Contact Information and Glossary of Terms
- II. An overview of Bay State College and the PTA curriculum
- III. An overview of the Clinical Education Program
- IV. Student Requirements for Clinical Education
- V. Clinical Education Policies and Procedures
- VI. Resources and suggestions for Clinical Instructors

Understandably the Clinical Education Experiences are a time of great anticipation and anxiety for students. Notwithstanding are the questions and concerns of CCCEs, and CIs participating in these unique learning experiences. This handbook is intended to assist all parties in preparing for the Clinical Education Experience; referring to it can often answer most questions. However, please be assured that the ACCE and/or PTA Program Chair are available to answer any questions and/or discuss any aspect of clinical education that you may have. Any updates and/or additions will be sent by the PTA Program ACCE.

A note of appreciation to all CCCEs and CIs: Thank you for your commitment to the process of clinical education. We have a vested interest in building a strong and mutually supportive relationship with you to ensure the provision of quality clinical experiences. As a member of our Clinical Faculty, we value your expertise and interest in the instruction of our students. We encourage you to provide us with feedback, as well as attend our program meetings and faculty development offerings. All of the rights accorded to our clinical faculty are described in the Clinical Education Policies and Procedures section of this handbook. If there is anything we can do to assist you, please do not hesitate to contact us.

**Bay State College
PTA Program
Contact Information for Clinical Education**

The Academic Coordinator of Clinical Education should be the first person to contact for any question or concern related to clinical education. If there is an emergency situation and the ACCE cannot be reached, please contact either the assistant ACCE or the PTA Program Chair. In the unlikely event that these persons cannot be reached, contact the main college number for assistance.

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Clinical Education Glossary of Terms

The following is a list of some commonly encountered clinical education terms and abbreviations. Brief definitions are provided here which may be helpful for students and others who are unfamiliar with clinical education in the profession of Physical Therapy. These terms are explained in greater detail in the later sections of this Clinical Education Handbook.

Academic Coordinator of Clinical Education (ACCE): a full-time member of the PTA program faculty who is responsible for all aspects of the clinical education component of the program.

Affiliation: another common and synonymous term for Clinical Education Experience.

Center Coordinator of Clinical Education (CCCE): the staff member at a clinical site responsible for the clinical education program offered at that facility.

Clinical: abbreviated from “Clinical Education Experience”. Also used interchangeably with “affiliation” and sometimes abbreviated as “Clin. Ed.”

Clinical facility or clinical site: The healthcare setting where the Clinical Education Experience occurs.

Clinical Instructor (CI): the PT or PTA who supervises and to whom the PTA student reports to while on a clinical experience.

Student Clinical Education Experience Performance Evaluation: This tool was adapted from the NEC-ACCE PT Evaluation Form to evaluate student performance on clinical education.

Mid-term visit (or conference): At approximately the mid-point of each affiliation the meeting or phone conference the ACCE or other PTA Program faculty have with the affiliating student, the CI, and if appropriate or necessary the CCCE.

Bay State College

Physical Therapist Assistant Program Premises

Bay State College Mission Statement

Bay State College is a private college whose mission is to provide students with a quality education that prepares them for professional careers and increasing levels of higher education. Bay State College accomplishes this mission by providing a learning environment where teaching excellence and student services are blended to support the uniqueness of individual students, preparing them to achieve their full potential as ethically and socially aware citizens.

Bay State College Vision Statement

Bay State College will be the college of choice in our region for career-minded students and employers who seek well-educated graduates in our disciplines.

Bay State College Core Values

- Quality
- Respect
- Support

Overview of the PTA Program

The goals, objectives, philosophy, and curriculum design of the PTA Program are directed towards providing a quality education that is comprehensive, offering academic and clinical opportunities that support and enhance the educational experiences.

PTA Program Mission Statement

The Mission of the Bay State College Physical Therapist Assistant Program is to provide academic and clinical training leading to the associate of science degree in Physical Therapy for students who will practice as Physical Therapist Assistants under the direction and supervision of a licensed Physical Therapist.

PTA Program Learning Objectives

Graduate physical therapist assistants who, under the direction and supervision of a physical therapist

1. actively participate in the safe and effective prevention of and intervention for movement disorders, across the life-span and for those with life-long disabilities.
2. promote health and wellness across the life span and for those with life-long disabilities.
3. effectively use critical thinking skills and evidenced based practice to address the physical therapy needs of a diverse patient population in a variety of clinical settings.
4. demonstrate legal, ethical and professional behavior.
5. effectively and professionally interact and communicate with relevant stake holders in verbal, non-verbal and written formats
6. demonstrate attributes of effective self-assessment and lifelong learning.
7. demonstrate cultural awareness and sensitivity in the provision of physical therapy interventions.

PTA Program Goals

- Accept qualified students who have met admissions criteria, which identify potential for successful completion of the program.
- Provide academic and clinical faculty who meet the academic and experiential qualifications determined by the PTA Program and who ascribe to the PTA Program Mission and Goals.
- Provide a comprehensive curriculum, which includes an organized and sequential series of integrated learning experiences.
- Provide academic and clinical facilities that support and enhance the learning experience.
- Perform timely evaluation and review of student/graduate performance relative to the Physical Therapist Assistant Program Goals.
- Implement timely revisions to the PTA Program which are based on results obtained from ongoing PTA Program assessment and which are consistent with the PTA Program's mission statement, goals, objectives, curricular philosophy, and curricular design.
- Remain compliant with all CAPTE criteria.

PTA Program's Curricular Philosophy

The curricular philosophy of the Bay State College Physical Therapist Assistant Program is to:

- Organize curricular content in a specific, sequential manner allowing the student to build on past learning experiences in order to prepare for future ones.
- Reinforce and re-emphasize essential themes throughout the Physical Therapist Assistant curriculum.
- Integrate concurrent learning activities so that students benefit from being able to relate information across several courses that are being taught simultaneously.

Curriculum Design

- Instruction of cognitive content in the Physical Therapist Assistant Program is primarily lecture style format with supplemental discussion groups.
- Instruction of assessment and intervention skills in the Physical Therapist Assistant Program is primarily lab style, hands-on format.
- Faculty incorporates the essential curricular themes of ethics; communication including verbal, non-verbal and written; cultural sensitivity; use of *The Guide to Physical Therapist Practice*; evidence based practice; medical terminology; the role of the PTA; safety; billing/reimbursement; US medical systems; and professional core values including accountability, altruism, compassion/caring, integrity, professional duty, social responsibility and excellence.
- Faculty present individual course content in a logical sequence, building on past student learning experiences and integrating concurrent ones.
- Faculty facilitate learning through active problem solving and, where appropriate, group activities.

- Faculty foster student responsibility for learning, self-assessment and life-long learning.
- Faculty incorporates patient examples in lecture material, lab exercises and exams in order to facilitate the transfer of didactic material into the clinical setting.
- Clinical Faculty provides experiences which build upon and expand the knowledge and skills developed in the didactic curriculum.
- All faculty utilize a variety of teaching methodologies in keeping with current educational and pedagogical theory and practices.

Physical Therapist Assistant Program Course Sequence and Descriptions

Please note: Course sequence, numbers and descriptions are reviewed annually. Any changes can be found on the Bay State College web site at <http://www.baystate.edu>. All of the following courses are **required** for graduation. All PTA courses along with Anatomy and Physiology I and II must be passed with a C or better to progress in the PTA Program.

First Semester			Second Semester		
Course	Code	Cr	Course	Code	Cr
English II	ENG 102	3	Literature / English Elective	LIT ____	3
Anatomy & Physiology I with Lab	BIO 201	4	Anatomy & Physiology II with Lab	BIO 202	
PTA Freshman Seminar I	PTA 104	1	PT Assess & Measurement with Lab	PTA 121	4
Introduction to Physical Therapy with Lab	PTA 101	4	Soft Tissue Techniques & Modalities with Lab	PTA 212	3
Clinical Pathologies	PTA 122	3	Kinesiology with Lab	PTA 123	4
Psychology	PSY 101	3	PTA Freshman Seminar II	PTA 124	1
First Year Experience	FYE 101	1	Summer Session		
			Clinical Education	PTA 130	4

Third Semester			Fourth Semester		
Course	Code	Cr	Course	Code	Cr
Senior Seminar I	PTA 217	1	Senior Seminar II	PTA 221	4
Musculoskeletal PT Intervention with Lab	PTA 213	4	Clinical Education II	PTA 240	4
Cardiopulmonary PT Intervention with Lab	PTA 215	3	Clinical Education III	PTA 250	4
Neuromuscular PT Intervention with Lab	PTA 216	4			
Sociology	SOC 101	3			

Physical Therapist Assistant Program Course Descriptions

BIO 201 Anatomy and Physiology I with Lab

Anatomy and Physiology I begins with the most basic level of organization, the cell, and progresses through the study of tissues, then moves onto the study of organs and organ systems. Four organ systems that will be covered include: integumentary, skeletal, muscular and nervous. This course includes a two-and-a-half-hour lab
[Pre-Requisite: None Co-Requisite: None]

Credits 4

BIO 202 Anatomy and Physiology II with Lab

Anatomy and Physiology II covers the endocrine, immune, lymphatic, reproductive, digestive, cardiovascular, respiratory, and renal systems. This course includes a two-and-a-half-hour lab. All anatomical and physiological principles under study are emphasized in the laboratory component of this course through the use of scientific models, charts, and tissue specimens.

[Pre-Requisite: BIO 201 with min grade of C; Co-Requisite: None]

Credits 4

PTA 101 Introduction to Physical Therapy

This course introduces students to the history of physical therapy and its role in the health care system. Students are introduced to the physical therapy delivery system as well as discuss issues of insurance reimbursements, health care management, and professional ethics. Basic physical therapy skills such as communicating with patients, body mechanics, bed mobility and positioning, transfer training, basic gait training, and range of motion exercises are covered in lecture and lab sessions. Students are introduced to the basics of physical therapy documentation. This course includes a 2.5-hour lab.

[Pre-Requisite: None; Co-Requisites: BIO 201, PTA 104, PTA 122]

Credits 4

PTA 104 Freshman Seminar I

This seminar assists the PTA student in applying didactic knowledge presented in the first semester of the PTA program to the practice of physical therapy utilizing current models of health care practice. A problem-based learning approach will be used to guide the student in developing critical thinking skills to synthesize information from anatomy and physiology, pathology and the introduction of physical therapy courses. Students will identify areas of academic and professional need, develop, implement and assess their plan to meet those needs. All PTA first semester students are required to take this seminar course.

[Pre-Requisite: None; Co-Requisites: BIO 201, PTA101, PTA122]

Credits 1

PTA 122 Clinical Pathologies

This course introduces students to broad categories of diseases, disorders, and injuries within the framework of the Guide to Physical Therapist Practice and the WHO Classification of functioning, disability, and health. Students learn about disease processes and understand components of neuromuscular, musculoskeletal, integumentary, cardiopulmonary, immunological, and general medical pathologies through the lifespan. Consideration of culture, gender and age are discussed.

[Pre-Requisites: None; Co-Requisites: PTA 101, PTA 104 and BIO 201]

Credits 3

PTA 124 Freshman Seminar II

This seminar assists the PTA student in applying didactic knowledge presented in the second semester of the PTA program to the practice of physical therapy utilizing current models of health care practice. A problem-based learning approach will be used to guide the student in developing critical thinking skills to synthesize information from anatomy and physiology, Kinesiology, PT Assessment and Measurement and Soft Tissue Techniques and Modalities courses. Students will identify areas of academic and professional need, develop, implement and assess their plan to meet those needs. All PTA second semester students are required to take this seminar course.

[Pre-Requisite: BIO 201 with min grade of C, PTA 101, PTA 104, and PTA 122; Co-Requisites: BIO 202, PTA 121, PTA 123, PTA 212]

Credits 1

PTA 121 PT Assessment and Measurement

Students gain an understanding of the PT and PTA roles in patient assessment and its importance in guiding the provision of quality, cost effective care. Students learn to assess the following: segmental length, girth and volume, vital signs, edema, skin condition, joint range (goniometry), sensation, reflexes, balance, posture and pain. Assessment of home and work environments is also introduced. In addition, students gain further training and experience in documentation and prepare for the first clinical affiliation. Course content is closely coordinated with Anatomy and Physiology II and PTA 122. This course includes a 2.5-hour lab.

[Pre-Requisites: BIO 201 with min grade of C, PTA 101, PTA 104, PTA 122; Co-Requisites: BIO 202, PTA 123, PTA 124 and PTA 212]

Credits 4

PTA 123 Kinesiology

This course reviews anatomy of the extremities and spine with emphasis on muscle and nerve distributions. The course is designed to teach students joint and muscle function as they apply to human movement and musculoskeletal function. Kinesiology utilizes principles of mechanics, musculoskeletal physiology, and neuromuscular physiology. Students learn manual muscle testing as part of this course. This course includes a 2.5-hour lab.

[Pre-Requisites: PTA 101, PTA 104, PTA 122 and BIO 201 with min grade of C; Co-Requisites: PTA 121, PTA 124, PTA 212 and BIO 202]

Credits 4

PTA 130 Clinical Education I

This is the first of three six-week clinical affiliations required in the program. The Academic Coordinators of Clinical Education schedule students for a clinical experience location and time frame. The time frames for Clinical Education I normally occur anytime during the summer months. Students are given the opportunity to apply skills and knowledge learned in the first two semesters of class and lab to a clinical setting. Students begin treating patients under appropriate clinical supervision. [Pre-Requisites: PTA 101, PTA 104, PTA 121, PTA 122, PTA 123, PTA 124, PTA 212, BIO 201 and BIO 202 with min grades of C; Co-Requisite: None]

Credits 4

PTA 212 Soft Tissue Techniques and Modalities

Students learn soft tissue techniques such as massage and basic myofascial release. Wound and burn care concepts are explored. The course also covers the indications, contradictions, and application of modalities including ultrasound, electrical stimulation, thermal agents, traction, biofeedback, laser and hydrotherapy. Students gain skills in documentation related to the course content area. This course includes a 2.5-hour lab. [

Pre-Requisites: PTA 101, PTA 104, PTA 122, and BIO 201 with min grade of C; Co-Requisites: PTA 121, PTA 123, PTA 124, and BIO 202]

Credits 4

PTA 213 Musculoskeletal PT Intervention

This course covers the physical therapy treatment of musculoskeletal conditions. Students learn the principles of therapeutic exercise. Emphasis is placed on the integration of exercise regimes into patient care plans for a variety of patient populations, including geriatric and pediatric. Students also learn about different treatment strategies, such as group or tandem treatments. Concepts of orthotic and prosthetic use are explored in relationship to the patient with orthopedic, musculoskeletal conditions and lower extremity amputations. Documentation skills related to the course content areas are included. This course includes a 2.5-hour lab.

[Pre-Requisites: PTA 130 with min grade of C; Co-Requisites: PTA 215, PTA 216 and PTA 217]

Credits 4

PTA 215 Cardiopulmonary PT Intervention

This course covers physical therapy assessment and treatment of cardiac, vascular and pulmonary conditions. Students learn theories of clinical assessment and management and the major therapeutic strategies and skills used in the treatment of patients with cardiopulmonary conditions. Students also learn documentation skills related to the course content area. This course includes a 2-hour lab. [Pre-Requisites: PTA 130 with min grade of C; Co-Requisites: PTA 213, PTA 216, PTA 217]

Credits 3

PTA 216 Neuromuscular PT Intervention

This course covers physical therapy treatment of neuromuscular conditions across the lifespan. Students learn theories of motor control and the major therapeutic strategies and skills used in the assessment and treatment of patients with neuromuscular conditions. Basic pediatric neurological / development treatment techniques are also covered. Students learn appropriate intervention techniques for all age populations. Students also learn documentation skills related to the course content area. This course includes a 2.5-hour lab.

[Pre-Requisite: PTA 130 with min grade of C; Co-Requisites: PTA 213, PTA 215, PTA 217]

Credits 4

PTA 217 Senior Seminar I

This course is designed to assist students in understanding the connection between physical therapy interventions taught in each of the PT practice pattern courses. Students will assimilate information from each of their courses through case studies and the review of evidence based practice. Students will have the opportunities to practice and refine practical application techniques while exploring the rationale for chosen techniques.

[Pre-Requisite: PTA 130 with min grade of C; Co-Requisites: PTA 213, PTA 215, PTA 216]

Credits 1

PTA 221 Senior Seminar II

This seminar course is divided into three units: (1) Physical Therapy Management for Special Patient Populations: Students learn to integrate and adapt the knowledge and skills gained in previous coursework to the treatment of some special patient populations. The unit covers topics of special interest to the students including, but not limited to, women's health issues, wheelchair and seating fitting, geriatric, orthotic and prosthetic fitting. (2)

Comprehensive Physical Therapy Management: This unit challenges students to apply evidence-based practice, problem-solving and analytical thinking to answer questions and develop solutions to problems relating to specific patient scenarios. It requires students to integrate learning experiences from the entire curriculum and helps prepare them for Clinical Education III. (3) Professional Preparation: This unit assists students to prepare to enter the profession of physical therapy. The unit is taught jointly with the Career Service Department. Topics include resume and cover letter writing, interview skills, preparing professional presentations, licensure requirements, and a review of the legal aspects of physical therapy delivery. Units 1 and 2 include a lab component. This course is compressed into the 4 weeks between clinical education II and III.

[Pre-Requisites: PTA 240 with a min grade of C]

Credits 4

PTA 240 Clinical Education II

Students enter the second clinical affiliation after completing all practice pattern coursework. This experience provides them with the opportunity for additional experiential learning. Students apply and hone their new skills and knowledge in a clinical setting under appropriate supervision. By the end of this affiliation students demonstrate entry level skills in multiple areas but may still require some supervision and hands-on teaching. [Pre-Requisite:

PTA 213, PTA 215, PTA 216 and PTA 217 with min grade of C; Co-Requisite: None]

Credits 4

PTA 250 Clinical Education III

Students enter the third clinical affiliation with entry-level skills in the majority of categories. The purpose of the final clinical affiliation is to (1) ensure the achievement of entry-level skills, (2) ensure the safety of student interactions and activities while in the clinic, and (3) ensure that the student maintains a professional manner and demeanor in all clinical situations. As in previous clinical education courses, the student is provided with appropriate clinical supervision. By the end of this affiliation the student demonstrates full readiness to enter the profession of physical therapy. [Pre-Requisite: PTA 221 and PTA 240 with min grade of C; Co-Requisite: None]

Credits 4

CLINICAL EDUCATION COURSE OVERVIEW

Each Clinical Education Experience provides the opportunity for the PTA student to observe and perform data collection and intervention skills following the plan of care established by the PT and with the appropriate supervision and guidance of a qualified CI. Over the course of the three Clinical Education Experiences, the expectation is each PTA student is exposed to the treatment of patients with a variety of commonly encountered diagnoses, impairments, and functional limitations. In addition, each student must also develop a clear understanding of the legal and ethical practices of an entry level PTA, including the relationship and roles of PT/PTA practice. To ensure this level of education, students need to observe ethical, professional, quality focused clinicians in action in all aspects of physical therapy services as this will serve as a frame of reference on which PTA students can model their own behaviors and thought processes.

On each clinical experience, students are expected to be able to implement and integrate the knowledge and skills they have previously learned in their PTA education. However, during any of the clinical experiences, CIs may introduce and instruct PTA students to concepts in treatment techniques or data collection skills to which the PTA student has not had prior academic exposure. Please be aware that these activities **must** be within the PTA scope of practice and not in violation of professional standards. Further, the CI must remain cognizant of the PTA students' knowledge base and prior academic preparation and must not expect PTA students to be safe in the use and application of new concepts and/or skills without the requisite course work to ensure their full understanding.

Each of the three clinical education courses is full time (40 hours per week) for a minimum of six weeks. At the conclusion of all three Clinical Education Experiences a student is expected to have completed a minimum of 720 hours of clinical education. During each clinical education course students apply knowledge and skills learned under the direction and supervision of an experienced PT or PT/PTA team. While each of these experiences provide a crucial link in the process of learning, understanding and gaining practice with the treatment skills necessary for the entry-level PTA clinician, students also gain knowledge and skills that are unique to that particular clinical setting.

To ensure that each student meets entry level expectations for the PTA, the PTA Program requires that each student is exposed to a variety of clinical settings and patient populations over the course of the three clinical experiences. At least one of the three experiences must be at an in-patient setting, such as an acute care hospital, rehabilitation facility, skilled nursing facility or extended care facility. In addition, at least one affiliation must be at either an out-patient PT department or private practice. The selection for the third setting is to provide additional diversity, breadth, and depth of experiences. Conscious and deliberate choices are made on the part of the ACCE to devise a series of clinical placements which match student needs, clinical interests, and which create a cohesive and progressive set of experiences to support the PTA student's transition from novice to entry level PTA. Regardless of the setting, emphasis is placed on the student's provision of safe, responsible, ethical, legal, and respectful patient care; performance issues in these areas provide grounds for the student failing the clinical experience.

Objectives for each clinical education course are established to be consistent with the criteria of the Student Clinical Education Experience Performance Evaluation form. The student's level of performance for each of these criteria is expected to progress over the course of the three clinical experiences. While PTA students are not expected to achieve entry level of performance in these criteria by the end of Clinical Education I, they must be at entry level

of performance by the end of Clinical Education III. The specific expected level of performance is described in each course syllabi, which are enclosed in this handbook.

Clinical Education Experiences I and II are strategically placed within the curriculum so that students can assimilate and synthesize information from both the classroom and clinical experiences. Students returning from Clinical Education I and II are expected to engage in discussions and self-assessment related to their learning during clinical education. Students are expected to identify their current strengths and learning needs and to use this knowledge to more actively participate in the learning opportunities in their remaining PTA course work. This process is particularly significant between the second and third clinical experiences, when students are able to engage in more complex clinical reasoning and problem solving skills, thus preparing them for their third and final clinical experience.

In addition to direct patient care functions, over the course of the three clinical placements PTA students are exposed to and gain experience in the following, as allowed within the scope of PTA practice:

- Understanding the PT/PTA roles and the effective utilization in the provision of quality care
- Varied approaches to clinical reasoning and problem solving
- Organizational structures of three very different care settings
- Billing, reimbursement regulations and requirements common to the settings and patient population served at each clinical site
- Documentation of patient care in at least three different health care settings
- Compliance with health care regulations such as HIPAA, standard precautions, and OSHA
- Providing effective oral and written communications in three varied professional settings
- Interactions between individuals of diverse racial, cultural and socio/economic backgrounds
- Educating individuals with varied learning styles, learning needs and motivation levels
- Resolving conflicts
- Working effectively as a member of a team in different patient care settings
- Quality assurance activities
- Providing and attending in-service trainings
- Team and family meetings
- Observation, collaboration and/or co-treatment with other rehabilitation specialists
- Collaboration and communication with other health care providers such as nursing staff, medical social workers, and physicians
- Utilizing support staff
- Assisting with discharge planning
- Performance of environmental assessment
- The role of physical therapy in health, wellness and preventative care
- Social responsibility and opportunities for community service activities
- Varied career paths and expectations for life-long learning

PTA students frequently have the opportunity to observe the following:

- Surgery
- Fabrication of custom adaptive equipment, braces, casts, and/or prosthetics
- Special testing such as barium swallows
- Home safety and accessibility assessments
- Other therapies, such as Occupational and Speech/Language Pathology

CIs are expected to actively seek out and plan PTA student participation in learning opportunities such as those listed above. CIs often collaborate with other PTs and PTAs on staff for the benefit of the PTA student. For example, if another clinician is assigned to a unique or interesting patient case the PTA student may be given the opportunity to observe and/ or assist with the care provided. Additionally, PTA Program students are encouraged by the ACCE to be active learners and to request additional and special experiences. During each mid-term visit the ACCE reviews with the PTA student and CI the available learning experiences and encourages maximizing the learning opportunities in that setting to gain the most varied exposure possible.

Of the Physical Therapy experiences previously listed one of the most important for PTA students is the development of a clear understanding of PT/PTA roles. By graduation, PTA students need to be ready to form an effective team with the PT(s) directing their involvement with each patient case. CIs foster the development of the PT/PTA relationship.

When the CI is a PTA, the PTA models the appropriate relationship with the PT meeting patient care. The PT who supervises the PTA has an important stake in the supervision of the PTA student since the PT has ultimate legal responsibility for the Physical Therapy services provided to the patient(s). Over the course of the experience, the PTA student observes and directly participates in the communications between the PTA and the PT regarding the plan of care, treatment goals, patient's progression within the plan of care, need for reassessment and adjustment to the plan of care, patient need for equipment and/or other services, and discharge planning. In placements in which the CI is a PT the CI engages the PTA student in communications about each patient which model those between a PTA and PT. As the PTA student gains competency s/he becomes increasingly responsible for communicating with the PT for each case and for progressing the patient within the plan of care established by the PT. The ACCE encourages PTA students to be highly conscious of PT/PTA roles during each clinical experience and is available to answer any questions or concerns that may arise in this regard.

REQUIREMENTS FOR STUDENT PREPARATION PRIOR TO CLINICAL EXPERIENCES

It is the responsibility of the Program Academic faculty, the ACCE, and ultimately the Program Chair to ensure that the student has: 1) successfully completed all prerequisite courses, 2) achieved the required level of skill and safety competency, and 3) achieved the expected levels of performance in the Professional Core Values prior to taking each Clinical Education course.

Prior to student placement, the ACCE ensures that the level of the clinical experience is made clear to the CCCE. It is also very important that CCCEs and CIs review the program curriculum and familiarize themselves with the prior course work and the levels of preparation expected of the student for each Clinical Education course. The following table summarizes the prerequisite courses and the Professional Core Values performance levels expected for each Clinical Education course.

Course	Prerequisites
Clinical Education I	Introduction to Physical Therapy PTA Freshman Seminar I & II Anatomy and Physiology I and II PT Assessment and Measurement Clinical Pathologies Kinesiology Soft Tissue Techniques and Modalities <i>Professional Core Values performance:</i> <ul style="list-style-type: none"> • Developing level in accountability; integrity; excellence; altruism; compassion/caring and professional duty • Beginning level in social responsibility
Clinical Education II	Clinical Education I Musculoskeletal PT Intervention Cardiopulmonary PT Intervention Neuromuscular PT Intervention Senior Seminar I <i>Professional Core Values performance:</i> <ul style="list-style-type: none"> • Developing level in social responsibility • Entry level in all other areas
Clinical Education III	Clinical education II Senior Seminar II <i>Professional Core Values performance:</i> <ul style="list-style-type: none"> • Entry level in all areas

In order for PTA students to progress in the program, they must pass each of their professional (PTA) courses with a minimum grade of a 'C'. For all professional courses with a laboratory component, students must pass both the lab portion of the course with a C **and** the didactic portion of the course with a C, in order to successfully pass the course. If the student does not achieve a grade C in either portion of the course, s/he must re-take the entire course. Until the professional course is repeated and successfully passed, the PTA student may not progress in the PTA Program. If the student does not achieve a 'C' grade for the retake s/he will be withdrawn from the PTA Program. Any student who fails 3 professional courses is withdrawn from the program. In addition, PTA students must maintain a minimum GPA of 2.5 for their professional courses. If a student does not meet the minimal GPA criteria for one semester, s/he is placed on academic probation. The PTA student must achieve a professional GPA of 2.5 during the next semester, in order to remain in the PTA Program. It is possible that a PTA

student may attend a clinical experience if they are on academic probation, but only if they have passed **all** of their pre-requisite professional courses.

The PTA Program utilizes the standards set forth by the Commission on Accreditation of Physical Therapy Education, (CAPTE), the *APTA Code of Professional Conduct*, *The Guide to Physical Therapist Practice* and the *Massachusetts State Practice Act* in determining the skills PTA students are expected to be competent and safe to perform. The following pages contain the PTA Program *Skills Competency and Critical Safety Elements List*. A copy of this document will also be sent to the CCCE and CI prior to the start of each clinical placement.

Bay State College Physical Therapist Assistant Program Skills Competency and Critical Safety Elements List

Assessing student ability to perform patient care and related activities safely and competently is of prime importance to both the academic and clinical faculty of the PTA program. The following is a list of the skills in which students must demonstrate safety and competency as they progress through the curriculum. The performance levels expected of students **prior** to Clinical Education courses are indicated in the columns to the right. Performance elements marked with an asterisk (*) are considered critical aspects of safety.

B = Beginning competency, D = Developing competency, E = Entry level competency

Safety Elements	Performance Level Starting Clinical Education I	Performance Level Starting Clinical Education II & III	Graduate Performance Level
*Observes proper infection control techniques	D	E	E
*Utilizes sterile technique	B	D	E
*Recognizes signs/ symptoms of infection.	B	D	E
*Maintains a safe working environment for patient, self, and others.	D	E	E
*Utilizes effective body mechanics.	D	E	E
*Identifies and observes precautions and contraindications.	B	D	E
*Takes appropriate action in an emergency situation.	D	E	E
*Appropriately responds to changes in patient status.	D	E	E
*Identifies, avoids use of, and reports broken or malfunctioning equipment.	D	E	E
*Recognizes when personal physical abilities, knowledge and/or skill base is not sufficient for the activity required and seeks assistance.	D	E	E
*Identifies issues which require immediate follow up with supervising PT.	B	D	E

Professional Core Values	Performance Level Starting Clinical Education 1	Performance Level Starting Clinical Education II & III	Graduate Performance Level
Communicates verbally and non-verbally with the patient, the physical therapist, health care delivery personnel and others in an effective, appropriate, and capable manner.	B	D	E
Demonstrates effective time management.	B	D	E
Refer to PTA Program Professional Core Values Assessment form for additional professional behaviors			

Related Skills	Performance Level Starting Clinical Education 1	Performance Level Starting Clinical Education II & III	Graduate Performance Level
*Reads and correctly interprets information in medical record.	B	D	E
Appropriately informs patient regarding intervention.	B	D	E
*Appropriately monitors patient status.	B	D	E
Appropriately assesses and responds to patient reports of pain.	B	D	E
*Identifies and provides correct and effective level of assistance for patient.	D	E	E
*Uses appropriate hand placement and force in manual contacts.	B	D	E
Adjusts interventions within the plan of care established by the physical therapist in response to patient clinical indications and reports this to the supervising physical therapist.	B	D	E
Provides and monitors effectiveness of patient-related instruction to patients, family members, and caregivers to achieve patient outcomes based on the plan of care established by the physical therapist.	B	D	E
Provides instruction regarding prevention, and promotion of health and wellness.	B	D	E
Produces documentation which is accurate, concise, timely, and legible.	D	D	E

Data Collection and Intervention			
Demonstrates competence in data collection and implementing selected components of interventions identified in the plan of care established by the physical therapist in a safe and efficient manner:	Performance Level Starting Clinical Education 1	Performance Level Starting Clinical Education II & III	Graduate Performance Level
• Functional Training including:	B	D	E
○ assistive devices	B	D	E
○ bed mobility and transfers	D	E	E
○ gait	B	D	E
○ wheel chair use/management	B	D	E
○ prosthetics/orthotics	B	D	E
○ developmental activities	B	D	E
• Manual Therapy Techniques including:	B	D	E
○ passive range of motion	D	E	E
○ massage	B	D	E
• Physical Agents and Mechanical Agents including:			
○ thermal agents	D	D	E
○ biofeedback	D	D	E
○ compression therapies	D	D	E
○ cryotherapy	D	D	E
○ electrotherapeutic agents	D	D	E
○ hydrotherapy	D	D	E
○ superficial and deep thermal agents, traction	D	D	E
• Therapeutic Activities including:			
○ endurance	B	D	E
○ balance	B	D	E
○ coordination	B	D	E

Demonstrates competence in data collection and implementing selected components of interventions identified in the plan of care established by the physical therapist in a safe and efficient manner:	Performance Level Starting Clinical Education 1	Performance Level Starting Clinical Education II & III	Graduate Performance Level
○ cardiopulmonary exercises and techniques	N/A	D	E
○ posture and postural control	B	D	E
○ range of motion	D	D	E
○ strength training	B	D	E
○ stretching	B	D	E
○ reflexes	B	D	E
○ sensation	B	D	E
○ tone management	N/A	D	E
○ movement facilitation techniques	N/A	D	E
○ motor planning	B	D	E
● Integumentary integrity	B	D	E
● Wound management	B	D	E
● Aerobic capacity and endurance	B	D	E
● Anthropometrical Characteristics	D	E	E
● Arousal, mentation and cognition	B	D	E
● Self-care and home management and community or work reintegration	B	D	E

As previously stated, PTA students must demonstrate acceptable development of Professional Core Values as described in the PTA Program Policy and Procedure Manual and PTA Student Manual before the PTA Program Chair permits PTA students to attend their Clinical Education Experiences. The following is the Professional Core Values Assessment Policy and Procedure.

Professional Core Values Assessment Policy and Procedures

Policy: Professional core values have been established by the American Physical Therapy Association as requisite skills for all practicing Physical Therapists and Physical Therapist Assistants. As such, the PTA Program at Bay State College is committed to assessing and promoting these skills in our students as they progress throughout the program. A student who does not demonstrate an appropriate level of skill in these areas cannot progress through the program and will be advised on an appropriate course of action, whether it is remediation or withdrawal from the program.

Procedures:

1. Each student in each course will be formally assessed on his/her professionalism core values, at the mid-term progress report time and at final grading. These reports will be provided to the program chair, the student's advisor and the student.
2. The student's advisor will review the core values assessments. Any discrepancies and problematic areas will be discussed with the student and an action plan to remediate areas of concern will be developed.
3. Students must meet the following minimum criteria in order to progress through the program.

By the end of the first semester:

Performs at a developing level in: **accountability; integrity and excellence**

Performs at a beginning level in: **altruism, compassion/caring, professional duty and social responsibility**

By the end of the second semester and before attending first clinical affiliation:

Performs at a developing level in: **accountability; integrity; excellence; altruism; compassion/caring and professional duty**

Performs at a beginning level in: **social responsibility**

By the end of the third semester:

Performs at an entry level in: **accountability, integrity; altruism compassion/caring; excellence and professional duty**

Performs at a developing level in: **social responsibility**

By the end of the in-class course work in the fourth semester:

Performs at an entry level in all **professionalism core values**

Students who are not meeting these standards will be prevented, by the program chair, from attending clinical affiliations, until they have participated in and successfully completed a remedial plan. If the student does not successfully remediate areas of deficit, s/he will be withdrawn from the PTA program.

Operational Definitions:



Red Flag: Checking this box indicates that the student is performing at an unacceptable level and an incident report has either been filed or will be filed along with the assessment grading sheet.

Beginning level: Students are able to identify the parameters of the core values and show an understanding of the importance of these values into practice. Students demonstrate efforts to implement the core values. They may require support or assistance to recognize and implement the core values as part of their professional skills.

Developing level: Students are able to implement core values into their repertoire of skills and behaviors on a regular basis, although there may be occasional lapses. They require occasional feedback and support to effectively implement the core values.

Entry level: Students consistently implement core values into their repertoire of skills and behaviors. They demonstrate an awareness of the value and importance of these skills and seek ways to further improve their abilities and performance in the identified areas.

CLINICAL EDUCATION COURSE SYLLABI

Each clinical education course within the PTA curriculum has a syllabus that specifies objectives and requirements students are expected to meet in order to progress in the PTA program. Please be aware that syllabi are flexible documents that are regularly reviewed and revised. A current clinical education course syllabus will be included in the packet of information sent to the CCCE and CI at least one month prior to the start of each clinical placement. CCCEs and CIs should review the current syllabus and use it as a basis from which to plan the student's experience.

The ACCE is available as needed to assist CIs and CCCEs in determining how to structure each clinical experience in accordance with the Clinical Education course syllabus.

Bay State College Physical Therapist Assistant Program Course Syllabus

Course Title: Clinical Education I

Course Number: PTA 130

Year: 2011

Credits: 4

Course Schedule and Hours: This is a full-time, 6-week clinical experience. Students may be scheduled for any 6-week block from mid-May to the end of August depending on the availability of clinical sites. Daily hours may vary depending on the schedule and requirements of the clinical site to which the student is assigned. Students must complete a total of 240 hours (40 hours X 6 weeks)

Name of Clinical Faculty: To be determined. Each student will be assigned a Clinical Instructor (CI) by the Center Coordinator of Clinical Education (CCCE) at the facility. The CI must meet the minimum requirements for licensure, clinical experience, and preparation for clinical teaching (See BSC PTA Clinical Education Handbook). CIs may be either a physical therapist or a physical therapist assistant. When the CI is a PTA the PT(s) who provide supervision to the PTA CI are also involved in the clinical experience and the student becomes part of the PT/PTA team.

Names of Academic Faculty: Eileen Small, PTA, ACCE
Jack Burkinshaw, PTA

Degree(s): AS
Degree(s): AS, BS

Office location: 31 St. James Ave.

Office Hours: by appointment

Office Phone: (617) 217-9437

Fax: (617) 517-2998

Email: esmall@baystate.edu

Course location: Varies dependent on the clinical site to which a student is assigned. Clinical sites may be located throughout New England. The student may be required to travel at least 1 hour to reach the clinical site.

Prerequisites: PTA 101, PTA104, PTA122, PTA 121, PTA 123, PTA 124, PTA 212 and BIO 201 & 202. T.B. test within 1 year of the end date of the affiliation, completed Bay State College Immunization form, at least 2 of 3 Hepatitis B vaccines or waiver form, documentation of professional liability insurance coverage, current CPR and first aid certification, CORI clearance, and authorization of the PTA Program Chair. Individual clinical sites may have additional requirements.

Note: Students who do not comply with required deadlines for submission of required documentation will not be allowed to participate in Clinical Education I during this rotation. This means a student will drop back one year in the program, thus delaying graduation by one year. Required documentation includes: the Student Self-Assessment form, the Learning Style Profile form, written personal goals for the clinical, and letter of introduction to the clinical site approximately 1 month prior to the start of the clinical experience.

Co-requisites: none

Course Description: This is the first of three six-week clinical experiences in the Physical Therapist Assistant Program. Students are given the opportunity to integrate knowledge and skills obtained in class and labs while working with patients in a clinical setting under the supervision of a Clinical Instructor. Students apply patient care skills such as draping, positioning, transfers, gait training with assistive devices, basic passive/active ROM and strengthening exercises, soft tissue techniques and the application of therapeutic modalities. In addition they may assess vital signs, joint range of motion, muscle strength, balance, posture, pain, and edema. Working with their Clinical Instructor, students further develop their skills in communication, documentation, and patient/family education. They gain a broader understanding of the health care system and current issues regarding reimbursement. Students may also gain further experience in therapeutic exercise, and other treatment techniques.

Objectives: For successful completion of this course the student will, at minimum, meet the following objectives.

1. Perform in a safe manner that minimizes risk to patient, self, and others with occasional guidance particularly when working with complex and/or unique situations.
2. Conduct self in a responsible manner with occasional guidance in unique situations.
3. Interact with others in a respectful manner with occasional guidance in unique situations.
4. Adhere to ethical standards with occasional confirmation to guidance in more complex situations.
5. Adhere to legal standards with occasional confirmation to guidance in more complex situations.
6. Communicate in ways that are congruent with situational needs with occasional direction/supervision.
7. Produce documentation to support the delivery of physical therapy services with moderate direction/ supervision.
8. Deliver established patient care to reflect respect for and sensitivity to individual differences with occasional direction/supervision.
9. Participate in patient status judgments within the clinical environment based on the plan of care established by the physical therapist with moderate direction/supervision.
10. Obtain accurate information by performing selected data collection consistent with the plan of care established by the physical therapist with moderate direction/supervision.
11. Discuss the need for modifications to the plan of care established by the physical therapist with moderate direction/supervision.

12. Perform physical therapy interventions in a technically competent manner with moderate direction/supervision.
13. Educate others (patients, family, caregivers, staff, students, other health care providers) using relevant and effective teaching methods with moderate to occasionally higher levels of direction/supervision.
14. Participate in activities addressing quality of service delivery with moderate to occasionally higher levels of direction/supervision.
15. Participate in addressing patient needs for services other than physical therapy with moderate to occasionally higher levels of direction/supervision.
16. Manage resources (e.g. time, space, and equipment) to achieve goals of the clinical setting with moderate direction/supervision.
17. Participate in fiscal management of the physical therapy clinical setting with moderate direction/supervision.
18. Use physical therapy aides and other support personnel according to legal standards and ethical guidelines with moderate to occasionally higher levels of direction/supervision.
19. Implement a self-directed plan for career development and lifelong learning with occasional direction/supervision.
20. Assist the physical therapists in addressing primary and secondary prevention needs of individuals and groups with moderate direction/supervision.

Attendance Policy: Attendance and timeliness are crucial to the successful completion of the clinical affiliation. Clinical affiliations are full-time commitments. Students comply with the hours established for them by the clinical facility. Holidays are observed in accordance with the schedule of the clinical facility, not the Bay State College schedule. In the event of inclement weather, students are responsible for reporting to the clinical site unless otherwise instructed by the CI.

Students are not allowed days off during an affiliation to attend to personal business. Up to 2 days missed due to illness, inclement weather, or emergencies may be made up at the discretion of the CI. Make up of absence of three days or more will be negotiated on an individual basis between the student, the CI(s) and the ACCE.

It is the student's responsibility to provide both the clinic and the college with proper notification each day they must be absent due to illness or emergency. The CI must be notified as soon as the facility opens. The ACCE must be notified as soon as possible by calling (617) 217-9437. Students who are too ill to make such notification should designate another person to do so on their behalf. The student may be asked by the CI and/or the ACCE to provide documentation to substantiate the need for the absence.

It is the student's responsibility to arrive on time each day. If the student must be late due to unavoidable circumstances s/he must notify the CI as soon as the facility opens.

Habitual tardiness and/or attendance problems may seriously jeopardize successful completion of the affiliation.

Safety: Safety in all aspects of clinical performance is the most important concern while students are engaged in this clinical education course. Students are required to demonstrate consistent safety in their judgments, behaviors, and performance of clinical skills. Students must adhere to all BSC safety policies. In addition, they are responsible for learning and following the safety policies and procedures of the clinical facility to which they are assigned. Behaving or performing patient care skills in an unsafe manner is grounds for immediate termination and failure of the clinical experience. (See also PTA Student Manual and Clinical Education Handbook.)

Patient confidentiality: Students are required to strictly observe HIPAA regulations while engaged in this clinical experience. In addition, they must observe any additional confidentiality regulations of the clinical site. Students are not to use social networking to post or discuss information regarding patients, patient families, clinical site and/or site staff. (See Clinical Education Handbook).

Patient rights: All patients have the right to be informed of and to refuse student involvement in their care. Students must wear a name tag with their full name and indication of student status clearly visible at all times. The Clinical Instructor, or other appropriate staff person, should inform patients of student involvement in advance and provide the opportunity for refusal with no negative consequences. In addition, students must clearly introduce themselves, explain their student status, describe the supervision they are receiving, and ensure the patient understands their right to refuse student involvement in their care.

Recommended Textbook:

Skinner, S. & Hurley, C. (2007). Pocket Notes for the Physical Therapist Assistant. Sudbury: Jones and Bartlett. ISBN – 13-978-0-7637-3811-2

Students should also have available previous course textbooks and class materials for review.

Instructional Materials:

1. Observation of patient interaction/treatment techniques and administrative procedures
2. Reading medical records and related materials
3. Discussion with clinical instructor and other health care staff
4. Progressive involvement in patient treatment
5. Formal and informal feedback from the Clinical Instructor and/or other clinicians on performance
6. Attendance at facility in-services
7. Progressive involvement in documentation of patient treatment

Written Assignments:

Email to ACCE with CI and CCCE contact information, suggested times for mid-semester conference visit, street address of the facility as well as telephone numbers and email addresses. Due 3 days after start of clinical

Email correspondences with ACCE

1st assignment

Due prior to mid-semester visit

2nd assignment

Due beginning of last week of clinical

Student Evaluation of a Clinical Education Experience form

Due within 1 week of completion of clinical

Failure to complete the above assignments on time will result in a failing course grade.

Reading Assignments: May be assigned at the discretion of the individual CI.

Other Assignments: The student completes an in-service or special project, such as a quality assurance study. The project is determined in collaboration with the CI. This assignment is graded by the CI on a “pass/fail” basis. CIs base the grade on a grading rubric provided by the ACCE.

In addition to this assignment, students should expect to spend between 1 to 2 hours per night preparing for the next day. This may include activities such as researching diagnoses or treatment techniques, considering treatment options and the rationale for them as well as practicing documentation.

Course Grade:

Pass or Fail

The pass/fail grade while on clinical affiliation is determined in part by the following minimum scores students must achieve on the Bay State College PTA Program Student Clinical Education Experience Performance Evaluation tool:

I.	Professional Behavior	2.8
II.	Safety	2
III.	Communication and Interpersonal Skills	2
IV.	Procedures	2
V.	Critical Thinking Skills	2
VI.	Organizational & Administrative Skills	2

In addition, students must complete all pre-clinical assignments on time, achieve a passing score in the in-service/special project; and submit in a timely fashion all ACCE required assignments.

Note: Students must PASS this course in order to progress in the PTA program.

Students who fail will be allowed one opportunity to repeat the course at another facility arranged by the ACCE. Under some circumstances the ACCE and the PTA Program Director may require a remediation process prior to allowing the student to retake the course. In some cases, depending on the timing of the clinical assignment and the availability of an appropriate clinical site at which to retake this course the student may be delayed in taking third semester course work. This would result in a delay of graduation by at least one year. Repeating this course will result in additional tuition charges. Students should refer to the Clinical Education section of the PTA Program Student Manual for additional information on this and all other clinical education course policies.

Academic Integrity: Students are expected to demonstrate personal and academic integrity at all times. Incidents of dishonesty will be dealt with harshly. Students are referred to the Bay State College policy on academic dishonesty in the Student Handbook. Students are expected to utilize The Pocket Wadsworth Handbook by Kirszner and Mandell, Thomas Learning Publisher, ISBN: 1413011683, to assist in properly citing all references and sources for their work.

Cheating includes seeking information about a quiz, test, or exam from an individual who has taken it or providing information about a quiz, test, or exam to a student who has not yet taken it. Plagiarism includes submission of another individual's written work or ideas as your own. It also includes using sources without proper citation. Students must also take special care when paraphrasing from a source.

Cheating and plagiarism are serious offenses. If you have any questions or concerns regarding cheating or plagiarism, it is entirely your responsibility to ask your instructor, academic advisor or Program Chair as soon as possible. Ignorance regarding what is and what is not cheating or plagiarism is not an excuse. It is imperative that you seek guidance to be certain.

Special Accommodations: Students requiring special accommodations due to learning disability or physical limitation must notify the Student Success Coordinator. Students should refer to their student handbook for contact information or speak to their advisor, ACCE or PTA Program Chair.

Other policies and procedures: Students and Clinical Instructors are expected to adhere to the policies and procedures contained in the *Bay State College Physical Therapist Assistant Program Clinical Education Handbook*. A copy of this document is given to each student and is sent to each clinical education facility. Please contact the ACCE for any clarifications needed or to request additional copies of the handbook.

Course syllabus may be subject to change.

Bay State College Physical Therapist Assistant Program Course Syllabus

Course Title: Clinical Education II

Course Number: PTA 240

Year: 2011

Credits: 4

Course Schedule and Hours: This is a full-time, 6-week clinical experience. Students will be scheduled for a 6-week block from approximately the second week of January through the last week of February, depending on the availability of clinical sites. Daily hours may vary depending on the schedule and requirements of the clinical site to which the student is assigned. Students must complete a total of 240 hours (40 hours X 6 weeks).

Name of Clinical Faculty: To be determined. Each student will be assigned a Clinical Instructor (CI) by the Center Coordinator of Clinical Education (CCCE) at the facility. The CI must meet the minimum requirements for licensure, clinical experience, and preparation for clinical teaching (See BSC PTA Clinical Education Handbook). CIs may be either a physical therapist or a physical therapist assistant. When the CI is a PTA the PT(s) who provide supervision to the PTA CI are also involved in the clinical experience and the student becomes part of the PT/PTA team.

Names of Academic Faculty: Eileen Small, PTA, ACCE Degree(s): AS
Jack Burkinshaw, PTA Degree(s): AS, BS

Office location: 31 St. James Ave.

Office Hours: by appointment

Office Phone: (617) 217-9437

Fax: (617) 517-2998

Email: esmall@baystate.edu

Course location: Varies dependent on the clinical site to which a student is assigned. Clinical sites may be located throughout New England. The student may be required to travel at least 1 hour to reach the clinical site

Prerequisites: PTA 217, PTA 213, PTA 215, PTA 216, T.B. test within 1 year of the end date of the affiliation, completed Bay State College Immunization form, completed Hepatitis B vaccine series or waiver form, documentation of professional liability insurance coverage, current CPR and first aid certification, CORI clearance, and authorization of the PTA Program Chair. Individual clinical sites may have additional requirements.

Note: Students who do not comply with required deadlines for submission of required documentation will not be allowed to participate in Clinical Education II during this rotation. This means a student will drop back in the program, thus delaying graduation. Required documentation includes: the Student Self-Assessment form, the Learning Style Profile form, written personal goals for the clinical, and a letter of introduction to the clinical site approximately 1 month prior to the start of the clinical experience.

Co-requisites: None

Course Description: This is the second of three clinical experiences in the Physical Therapist Assistant Program. Students enter the affiliation with all practice pattern course work completed. This clinical affiliation provides the opportunity to integrate knowledge and skills obtained in class and labs while working with patients in a clinical setting. Under the supervision of a Clinical Instructor who is either a physical therapist assistant or a physical therapist, students practice all treatment techniques appropriate for the clinical setting in which they are placed and continue to develop their skills in communication, documentation, and patient/family education. They learn to work effectively as part of a PT/PTA team and gain additional understanding of the health care system, and administrative and reimbursement issues.

Objectives: For successful completion of this course the student will, at minimum, meet the following objectives.

1. Perform in a safe manner that minimizes risk to patient, self, and others.
2. Conducts self in a responsible manner.
3. Interacts with others in a respectful manner.
4. Adheres to ethical standards.
5. Adheres to legal standards.
6. Communicates in ways that are congruent with situational needs with minimal guidance.
7. Produces documentation to support the delivery of physical therapy services with occasional guidance.
8. Delivers established patient care to reflect respect for and sensitivity to individual differences with minimal guidance.
9. Participates in patient status judgments within the clinical environment based on the plan of care established by the physical therapist with occasional guidance.
10. Obtains accurate information by performing selected data collection consistent with the plan of care established by the physical therapist with occasional guidance.
11. Discusses the need for modifications to the plan of care established by the physical therapist with occasional guidance.
12. Performs physical therapy interventions in a technically competent manner with occasional guidance.
13. Educates others (patients, family, caregivers, staff, students, other health care providers) using relevant and effective teaching methods with guidance.
14. Participates in activities addressing quality of service delivery with guidance.
15. Participates in addressing patient needs for services other than physical therapy with guidance.

16. Manages resources (e.g. time, space, and equipment) to achieve goals of the clinical setting with occasional guidance.
17. Participates in fiscal management of the physical therapy clinical setting with occasional guidance.
18. Uses physical therapy aides and other support personnel according to legal standards and ethical guidelines with guidance.
19. Implements a self-directed plan for career development and lifelong learning with minimal guidance.
20. Assists the physical therapists in addressing primary and secondary prevention needs of individuals and groups with occasional guidance.

Attendance Policy: Attendance and timeliness are crucial to the successful completion of the clinical affiliation. Clinical affiliations are full-time commitments. Students comply with the hours established for them by the clinical facility. Holidays are observed in accordance with the schedule of the clinical facility, not the Bay State College schedule. In the event of inclement weather, students are responsible for reporting to the clinical site unless otherwise instructed by the CI.

Students are not allowed days off during an affiliation to attend to personal business. Up to 2 days missed due to illness, inclement weather, or emergencies may be made up at the discretion of the CI. Make up of absence of three days or more will be negotiated on an individual basis between the student, the CI(s) and the ACCE.

It is the student's responsibility to provide both the clinic and the college with proper notification each day they must be absent due to illness or emergency. The CI must be notified as soon as the facility opens. The ACCE must be notified as soon as possible by calling (617) 217-9437. Students who are too ill to make such notification should designate another person to do so for them. The student may be asked by the CI and/or the ACCE to provide documentation to substantiate the need for the absence.

It is the student's responsibility to arrive on time each day. If the student must be late due to unavoidable circumstances s/he must notify the CI as soon as the facility opens. Habitual tardiness and/or attendance problems may jeopardize successful completion of the affiliation.

Safety: Safety in all aspects of clinical performance is the most important concern while students are engaged in this clinical education course. Students are required to demonstrate consistent safety in their judgments, behaviors, and performance of clinical skills. Students must adhere to all BSC safety policies. In addition, they are responsible for learning and following the safety policies and procedures of the clinical facility to which they are assigned. Behaving or performing patient care skills in an unsafe manner is grounds for immediate termination and failure of the clinical experience. (See also PTA Student Manual and Clinical Education Handbook.)

Patient confidentiality: Students are required to strictly observe HIPAA regulations while engaged in this clinical experience. In addition, they must observe any additional confidentiality regulations of the clinical site. Students are not to use social networking to post or discuss

information regarding patients, patient families, clinical site and/or site staff. (See Clinical Education Handbook).

Patient rights: All patients have the right to be informed of and to refuse student involvement in their care. Students must wear a name tag with their full name and indication of student status clearly visible at all times. The Clinical Instructor, or other appropriate staff person, should inform patients of student involvement in advance and provide the opportunity for refusal with no negative consequences. In addition, students must clearly introduce themselves, explain their student status, describe the supervision they are receiving, and ensure the patient understands their right to refuse student involvement in their care.

Recommended Textbook:

Skinner, S. & Hurley, C. (2007). Pocket Notes for the Physical Therapist Assistant. Sudbury: Jones and Bartlett. ISBN – 13-978-0-7637-3811-2

Students should also have available previous course textbooks and class materials for review.

Instructional Materials:

1. Observation of patient interaction/treatment techniques and administrative procedures
2. Reading medical records and related materials
3. Discussion with clinical instructor and other health care staff
4. Progressive involvement in patient treatment
5. Formal and informal feedback from clinical instructor and/or other clinicians on performance
6. Attendance at facility in-services
7. Progressive involvement in documentation of patient treatment

Written Assignments:

Email to ACCE with CI and CCCE contact information, suggested times for mid-semester conference visit, street address of the facility as well as telephone numbers and email addresses. Due 3 days after start of clinical

Email correspondences with ACCE

1st assignment

Due prior to mid-semester visit

2nd assignment

Due beginning of last week of clinical

Student Evaluation of a Clinical Education Experience form

Due within 1 week of completion of clinical

Failure to complete the above assignments on time will result in a failing course grade.

Reading Assignments: May be assigned at the discretion of the individual CI.

Other Assignments: The student completes an in-service or special project, such as a quality assurance study. The project is determined in collaboration with the CI. This assignment is graded by the CI on a “pass/fail” basis. CIs base the grade on a grading rubric provided by the ACCE.

In addition to this assignment, students should expect to spend between 1 to 2 hours per night preparing for the next day. This may include activities such as researching diagnoses or treatment techniques, considering treatment options and the rationale for them as well as practicing documentation.

Course Grade:**Pass or Fail**

The pass/fail grade while on clinical affiliation is determined in part by the following minimum scores students must achieve on the Bay State College PTA Program Student Clinical Education Experience Performance Evaluation tool:

I.	Professional Behavior	3.5
II.	Safety	3.4
III.	Communication and Interpersonal Skills	3.1
IV.	Procedures	2.8
V.	Critical Thinking Skills	3.1
VI.	Organizational & Administrative Skills	3.3

In addition, students must complete all pre-clinical assignments on time, achieve a passing score in the in-service/special project; and submit in a timely fashion all ACCE required assignments.

Note: Students must PASS this course in order to progress in the PTA program. Students who fail will be allowed one opportunity to repeat the course at another facility arranged by the ACCE. Under some circumstances the ACCE and the PTA Program Director may require a remediation process prior to allowing the student to retake the course. In some cases, depending on the timing of the clinical assignment and the availability of an appropriate clinical site at which to retake this course the student may be delayed in taking third semester course work. This would result in a delay of graduation by at least one year. Repeating this course will result in additional tuition charges. Students should refer to the Clinical Education section of the PTA Program Student Manual for additional information on this and all other clinical education course policies.

Academic Integrity: Students are expected to demonstrate personal and academic integrity at all times. Incidents of dishonesty will be dealt with harshly. Students are referred to the Bay State College policy on academic dishonesty in the Student Handbook. Students are expected to utilize The Pocket Wadsworth Handbook by Kirszner and Mandell, Thomas Learning Publisher, ISBN: 1413011683, to assist in properly citing all references and sources for their work.

Cheating includes seeking information about a quiz, test, or exam from an individual who has taken it or providing information about a quiz, test, or exam to a student who has not yet taken it. Plagiarism includes submission of another individual's written work or ideas as your own. It also includes using sources without proper citation. Students must also take special care when paraphrasing from a source.

Cheating and plagiarism are serious offenses. If you have any questions or concerns regarding cheating or plagiarism, it is entirely your responsibility to ask your instructor, academic advisor or Program Chair as soon as possible. Ignorance regarding what is and what is not cheating or plagiarism is not an excuse. It is imperative that you seek guidance to be certain.

Special Accommodations: Students requiring special accommodations due to learning disability or physical limitation must notify the Student Success Coordinator. Students should refer to their student handbook for contact information or speak to their advisor, ACCE or PTA Program Chair.

Other policies and procedures: Students and Clinical Instructors are expected to adhere to the policies and procedures contained in the *Bay State College Physical Therapist Assistant Program Clinical Education Handbook*. A copy of this document is given to each student and is sent to each clinical education facility. Please contact the ACCE for any clarifications needed or to request additional copies of the handbook.

Course syllabus may be subject to change.

Bay State College Physical Therapist Assistant Program Course Syllabus

Course Title: Clinical Education III

Course Number: PTA 250

Year: 2011

Credits: 4

Course Schedule and Hours: This is a full-time, 6-week clinical experience. Students will be scheduled for a 6-week block from approximately the first week of April through the second week of May, depending on the availability of clinical sites. Daily hours may vary depending on the schedule and requirements of the clinical site to which the student is assigned. Students must complete a total of 240 hours (40 hours X 6 weeks).

Name of Clinical Faculty: To be determined. Each student will be assigned a Clinical Instructor (CI) by the Center Coordinator of Clinical Education (CCCE) at the facility. The CI must meet the minimum requirements for licensure, clinical experience, and preparation for clinical teaching (See BSC PTA Clinical Education Handbook). CIs may be either a physical therapist or a physical therapist assistant. When the CI is a PTA the PT(s) who provide supervision to the PTA CI are also involved in the clinical experience and the student becomes part of the PT/PTA team.

Names of Academic Faculty: Eileen Small, PTA, ACCE Degree(s): AS
Jack Burkinshaw, PTA Degree(s): AS, BS

Office location: 31 St. James Ave.

Office Hours: by appointment

Office Phone: (617) 217-9437

Fax: (617) 517-2998

Email: esmall@baystate.edu

Course location: Varies dependent on the clinical site to which a student is assigned. Clinical sites may be located throughout New England. Students may be required to travel at least 1 hour to reach the clinical site

Prerequisites: PTA 221, T.B. test within 1 year of the end date of the affiliation, completed Bay State College Immunization form, completed Hepatitis B vaccine series or waiver form, documentation of professional liability insurance coverage, current CPR certification, CORI clearance, authorization of the PTA Program Chair. Individual clinical sites may have additional requirements.

Note: Students who do not comply with required deadlines for submission of required documentation will not be allowed to participate in Clinical Education III during this rotation. This means a student will drop back in the program, thus delaying graduation. Required documentation includes: the Student Self-Assessment form, the Learning Style Profile form, written personal goals for the clinical, and a letter of introduction to the clinical site approximately 1 month prior to the start of the clinical experience.

Co-requisites: none

Course Description: This is the last of three six-week clinical experiences in the Physical Therapist Assistant Program. Students enter the affiliation with all core academic course work completed. This clinical affiliation provides the opportunity to integrate knowledge and skills obtained in class and labs while working with patients in a clinical setting. Under the supervision of a Clinical Instructor, students practice all treatment techniques appropriate for the clinical setting in which they are placed and continue to develop their skills in communication, documentation, and patient/family education. They gain additional understanding of the health care system, administrative and reimbursement issues.

Objectives: For successful completion of this course the student will, at minimum, meet the following objectives.

1. Perform in a safe manner that minimizes risk to patient, self, and others.
2. Conducts self in a responsible manner.
3. Interacts with others in a respectful manner.
4. Adheres to ethical standards.
5. Adheres to legal standards.
6. Communicates in ways that are congruent with situational needs.
7. Produces documentation to support the delivery of physical therapy services.
8. Delivers established patient care to reflect respect for and sensitivity to individual differences.
9. Participates in patient status judgments within the clinical environment based on the plan of care established by the physical therapist.
10. Obtains accurate information by performing selected data collection consistent with the plan of care established by the physical therapist.
11. Discusses the need for modifications to the plan of care established by the physical therapist.
12. Performs physical therapy interventions in a technically competent manner.
13. Educates others (patients, family, caregivers, staff, students, other health care providers) using relevant and effective teaching methods.
14. Participates in activities addressing quality of service delivery.
15. Participates in addressing patient needs for services other than physical therapy.
16. Manages resources (e.g. time, space, and equipment) to achieve goals of the clinical setting.
17. Participates in fiscal management of the physical therapy clinical setting.

18. Uses physical therapy aides and other support personnel according to legal standards and ethical guidelines.
19. Implements a self-directed plan for career development and lifelong learning.
20. Assists the physical therapists in addressing primary and secondary prevention needs of individuals and groups

Attendance Policy: Attendance and timeliness are crucial to the successful completion of the clinical affiliation. Clinical affiliations are full-time commitments. Students comply with the hours established for them by the clinical facility. Holidays are observed in accordance with the schedule of the clinical facility, not the Bay State College schedule. In the event of inclement weather, students are responsible for reporting to the clinical site unless otherwise instructed by the CI.

Students are not allowed days off during an affiliation to attend to personal business. Up to 2 days missed due to illness, inclement weather, or emergencies may be made up at the discretion of the CI. Make up of absence of three days or more will be negotiated on an individual basis between the student, the CI(s) and the ACCE.

It is the student's responsibility to provide both the clinic and the college with proper notification each day they must be absent due to illness or emergency. The CI must be notified as soon as the facility opens. The ACCE must be notified as soon as possible by calling (617) 217-9437. Students who are too ill to make such notification on their own should designate another person to do so on their behalf. The student may be asked by the CI and/or the ACCE to provide documentation to substantiate the need for the absence.

It is the student's responsibility to arrive on time each day. If the student must be late due to unavoidable circumstances s/he must notify the CI as soon as the facility opens. Habitual tardiness and/or attendance problems may jeopardize successful completion of the affiliation.

Safety: Safety in all aspects of clinical performance is the most important concern while students are engaged in this clinical education course. Students are required to demonstrate consistent safety in their judgments, behaviors, and performance of clinical skills. Students must adhere to all BSC safety policies. In addition, they are responsible for learning and following the safety policies and procedures of the clinical facility to which they are assigned. Behaving or performing patient care skills in an unsafe manner is grounds for immediate termination and failure of the clinical experience. (See also PTA Student Manual and Clinical Education Handbook.)

Patient confidentiality: Students are required to strictly observe HIPAA regulations while engaged in this clinical experience. In addition, they must observe any additional confidentiality regulations of the clinical site. Students are not to use social networking to post or discuss information regarding patients, patient families, clinical site and/or site staff. (See Clinical Education Handbook).

Patient rights: All patients have the right to be informed of and to refuse student involvement in their care. Students must wear a name tag with their full name and indication of student status clearly visible at all times. The Clinical Instructor, or other appropriate staff person, should inform patients of student involvement in advance and provide the opportunity for refusal

with no negative consequences. In addition, students must clearly introduce themselves, explain their student status, describe the supervision they are receiving, and ensure the patient understands their right to refuse student involvement in their care.

Recommended Textbook:

Skinner, S. & Hurley, C. (2007). Pocket Notes for the Physical Therapist Assistant. Sudbury: Jones and Bartlett. ISBN – 13-978-0-7637-3811-2

Students should also have available previous course textbooks and class materials for review.

Instructional Materials:

1. Observation of patient interaction/treatment techniques and administrative procedures
2. Reading medical records and related materials
3. Discussion with clinical instructor and other health care staff
4. Progressive involvement in patient treatment
5. Formal and informal feedback from the clinical instructor and/or other clinicians on performance
6. Attendance at facility in-services
7. Progressive involvement in documentation of patient treatment

Written Assignments:

Email to ACCE with CI and CCCE contact information, suggested times for mid-semester conference visit, street address of the facility as well as telephone numbers and email addresses. Due 3 days after start of clinical

Email correspondences with ACCE

1st assignment

Due prior to mid-semester visit

2nd assignment

Due beginning of last week of clinical

Student Evaluation of a Clinical Education Experience form

Due within 1 week of completion of clinical

Failure to complete the above assignments on time will result in a failing course grade.

Reading Assignments: May be assigned at the discretion of the individual CI.

Other Assignments: The student completes an in-service or special project, such as a quality assurance study. The project is determined in collaboration with the CI. This assignment is graded by the CI on a “pass/fail” basis. CIs base the grade on a grading rubric provided by the ACCE. .

In addition to this assignment, students should expect to spend between 1 to 2 hours per night preparing for the next day. This may include activities such as researching diagnoses or treatment techniques, considering treatment options and the rationale for them as well as practicing documentation.

Course Grade:

Pass or Fail

The pass/fail grade while on clinical affiliation is determined in part by the following minimum scores students must achieve on the Bay State College PTA Program Student Clinical Education Experience Performance Evaluation tool:

I.	Professional Behavior	4
II.	Safety	4
III.	Communication and Interpersonal Skills	3.9
IV.	Procedures	3.3
V.	Critical Thinking Skills	3.8
VI.	Organizational & Administrative Skills	3.8

In addition, students must complete all pre-clinical assignments on time, achieve a passing score in the in-service/special project; and submit in a timely fashion all ACCE required assignments.

Note: Students must PASS this course in order to progress in the PTA program. Students who fail will be allowed one opportunity to repeat the course at another facility arranged by the ACCE. Under some circumstances the ACCE and the PTA Program Director may require a remediation process prior to allowing the student to retake the course. In some cases, depending on the timing of the clinical assignment and the availability of an appropriate clinical site at which to retake this course the student may be delayed in taking third semester course work. This would result in a delay of graduation by at least one year. Repeating this course will result in additional tuition charges. Students should refer to the Clinical Education section of the PTA Program Student Manual for additional information on this and all other clinical education course policies.

Academic Integrity: Students are expected to demonstrate personal and academic integrity at all times. Incidents of dishonesty will be dealt with harshly. Students are referred to the Bay State College policy on academic dishonesty in the Student Handbook. Students are expected to utilize The Pocket Wadsworth Handbook by Kirsznier and Mandell, Thomas Learning Publisher, ISBN: 1413011683, to assist in properly citing all references and sources for their work.

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Cheating and plagiarism are serious offenses. If you have any questions or concerns regarding cheating or plagiarism, it is entirely your responsibility to ask your instructor, academic advisor or Program Chair as soon as possible. Ignorance regarding what is and what is not cheating or plagiarism is not an excuse. It is imperative that you seek guidance to be certain.

Special Accommodations: Students requiring special accommodations due to learning disability or physical limitation must notify the Student Success Coordinator. Students should refer to their student handbook for contact information or speak to their advisor, ACCE or PTA Program Chair.

Other policies and procedures: Students and Clinical Instructors are expected to adhere to the policies and procedures contained in the *Bay State College Physical Therapist Assistant Program Clinical Education Handbook*. A copy of this document is given to each student and is

sent to each clinical education facility. Please contact the ACCE for any clarifications needed or to request additional copies of the handbook.

Course syllabus may be subject to change.

CLINICAL EDUCATION POLICIES AND PROCEDURES

This section of the Clinical Education Handbook contains policies and procedures which must be adhered to by all students, clinical faculty, and academic faculty. Individuals with questions about any of these policy and procedures should contact the ACCE or the PTA Program Chair.

Non-discrimination Policy

Bay State College prohibits discrimination on the basis of race, color, sex, sexual orientation, age, marital status, religion, national or ethnic origin, veteran status, or non-disqualifying disability. This applies to our educational, admissions, and employment policies, treatment of students, and other college-administered programs and activities. Any inquiries or grievances concerning these regulations may be directed to the Vice President of Student Services, Bay State College, 617-217-9237.

Confidentiality of Student Records Policy

Per the Bay State College Student Handbook students are afforded all rights under the Family Rights and Privacy Act of 1974 (FERPA). Clinical sites are also expected to adhere to FERPA. The Clinical Site can only disclose information regarding student performance to the Academic Coordinator of Clinical Education (ACCE), his or her designee the PTA Program Chair, and the CCCE and CI(s) for the Clinical Site unless written consent of the student is obtained.

Health Insurance Portability and Accountability Act (HIPAA)

Policy: Students will adhere to HIPAA regulations at all times:

Procedure:

1. Basic instruction in the Health Insurance Portability and Accountability Act (HIPAA) is included in the first year of the Bay State College PTA Program curriculum. In addition, its foundational standards regarding privacy of individually identifiable health information and confidentiality are a cross-curricular theme spanning all courses in the program. Students are provided with summary materials to assist them in review of these important legal requirements prior to the start of the all Clinical Education Experiences.
 2. Students agree to adhere to HIPAA through signature of the Student Clinical Education Experience Agreement form which is required prior to participation in any Clinical Education Experience. This completed form is kept on file by the ACCE.
-

Patient Right to be Informed and to Refuse Student Involvement in Care

Policy: All patients have the right to be informed of student involvement in their care and to refuse such involvement at any time without negative consequence.

Procedure:

1. All PTA students must sign the *Student Clinical Education Experience Agreement Form* before participating in any Clinical Education Experience. Patient rights are specifically delineated in this document. This form is kept by the ACCE in each PTA student's secured file.
2. All students must wear a name tag that includes full name and designation as a PTA student while engaged in all Clinical Education Experiences.
3. The CI, or other appropriate staff at the clinical site, must inform the patient prior to student involvement in the provision of care. The patient must be informed of his/her right to refuse treatment by the PTA student at any point during a session or at any time during the patient's length of stay, without this having a negative impact on his/ her treatment.
4. Students must introduce themselves to patients indicating their status as a "Physical Therapist Assistant student from Bay State College".

The right of patients to be informed and to refuse treatment by a PTA student is also covered in the PTA Student Manual and is included in each Clinical Education syllabus.

Safety Policy

Safety is a primary concern at all times in every clinical setting. Students must adhere to all BSC safety policies and must become familiar with and follow all safety policies at the clinical facility to which they are assigned.

During Clinical Education Experiences students are expected to exhibit safe performance of patient care and related activities following instruction and demonstration from the Clinical Instructor. **Inability to demonstrate consistent safety awareness and/or safe performance of skills following reasonable instruction and guidance from the Clinical Instructor is a very serious matter that can result in immediate termination and/or failure of the Clinical Education Experience as well as potential expulsion from the PTA Program.** The staff at the clinical facility has the right and responsibility to remove a student from patient care if necessary in order to ensure the safety of the patient and/or others. The CI and/or CCCE must notify the ACCE of student related safety issues.

CIs may introduce and instruct PTA students to concepts, treatment techniques, or data collection skills to which the PTA student has not had prior academic exposure. However, this is only allowable if the knowledge or skill is within the PTA scope of practice and is not in violation of professional standards. In addition, the CI must remain cognizant of the PTA student's knowledge base and prior academic preparation and must not expect PTA students to be safe in the use and application of new concepts and/or skills without the requisite course work to ensure their full understanding.

Student Illness or Injury during a Clinical Experience

Policy: Students who become ill or injured while on-site at a clinical experience will be immediately removed from patient care and sent for medical care as deemed appropriate by the CI and/or CCCE

Procedure:

1. If indicated, send the student for emergency care as stipulated in the Affiliation Agreement. The student will be responsible for any related costs.

2. Notify the ACCE or the PTA Program Chair as soon as possible after the incident. If unable to reach these individuals, contact the Vice President of Academic Affairs through the main number of the college 617-217-9000.
3. If indicated, the clinical staff should assist the student in making arrangements to be escorted home safely. The student should not be allowed to drive, use mass transit, or walk home if ill or otherwise incapacitated.
4. Complete an incident report according to the procedures at the clinical site.
5. The ACCE will notify the PTA Program Chair and complete an incident report according to PTA Program policies.
6. The ACCE and the CCCE will confer after the incident to determine if the student may be allowed to continue the clinical experience once the illness or injury has resolved. Students with a physical injury/problem, who will require accommodations during their recovery, must provide written documentation from their physician indicating restrictions and length of time for the restrictions. It is at the discretion of the ACCE, CCCE and CI to terminate participation in the clinical education course if it is believed that the student will endanger themselves, patients, and/or others.

Student Incapacitation during a Clinical Experience due to Intoxication

Policy: Students who show evidence of intoxication or incapacitation from alcohol and/or drug use while on-site at a clinical experience will be immediately removed from patient care and sent for medical care as deemed appropriate by the CI and/or CCCE

Procedure:

1. If indicated, send the student for emergency care as stipulated in the Affiliation Agreement. The student will be responsible for any related costs.
2. Notify the ACCE or the PTA Program Chair as soon as possible after the incident. If unable to reach these individuals, contact the Vice President of Academic Affairs through the main number of the college 617-217-9000.
3. The clinical staff should assist the student in making arrangements to be escorted home safely. The student should not be allowed to drive, use mass transit, or walk home if ill or otherwise incapacitated.
4. Complete an incident report according to the procedures at the clinical site.
5. The ACCE will notify the PTA Program Chair and complete an incident report according to PTA Program policies.
6. A student found to be intoxicated by alcohol or other substances will fail the Clinical Experience and will be at risk of being withdrawn from the PTA program for unprofessional behavior.

Drug/Alcohol Use and/or Testing for Clinical Education

Bay State College has a Drug Free School and Workplace Policy. This policy is contained in the Bay State College Student Handbook. Students who are concerned with issues regarding drug and/or alcohol use are encouraged to contact the Student Counselor.

Students are responsible for undergoing drug testing if required by a clinical site to which they are assigned. This may be required prior to and /or randomly during participation in a Clinical Education Experience at their facility. Students are responsible for any associated costs.

A student testing positive for drug use will not be allowed to participate in the Clinical Education Experience. If the Clinical Education Experience is already underway, the student will receive a grade of “F” for that clinical experience. The student may be required to participate in counseling at their own expense and provide acceptable documentation and subsequent negative drug testing results in order to be considered for possible Clinical Education Experiences in the future. The program has a “zero tolerance” policy and the student risks being suspended permanently from the PTA Program.

Students with Learning and/or Physical Disabilities Impacting Clinical Education Courses

Any student with a learning and/or physical disability(ies) is entitled to reasonable accommodations in accordance with the Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. In order to receive accommodations, students must declare their disability(ies) with Bay State College’s school counselor. Students should refer to the BSC Student Handbook for specifics, or speak to their advisor or Program Chair for guidance.

Criminal Offender Record Information (CORI)

All PTA students must authorize Bay State College to process a Criminal Offense Record Investigation (CORI) background check each year, prior to participation in Clinical Education courses. Students are responsible for any associated costs.

Any CORI that indicates a criminal record or a pending case disqualifies a student from participating in the Clinical Education Experience. If a pending case is later cleared the student may proceed in the PTA Program. When a student is precluded from attending a clinical affiliation, the student is unable to complete the PTA program.

Students are also advised that a clinical site may also request a CORI. Students must comply with this request in order to attend that particular clinical rotation.

Clinical Site Qualifications and Selection

The clinical education component of the PTA Program is essential to the training and development of the students. Consequently, the PTA Program places great emphasis on providing exceptional clinical experiences. To achieve this end, the ACCE focuses on recruiting clinical sites which are ethically and legally managed and where provision of excellent patient care is highly valued. Clinical sites must offer a variety of learning opportunities to students and must have PT staff members who possess the experience, training, and interest to support a clinical education program and to provide appropriate levels of supervision and mentoring to students. In addition the ACCE seeks out clinical sites with notable pre-existing student programs or that have excellent potential, with guidance from the PTA Program, to develop exceptional student programs.

Clinical site recruitment and development is a continuous process. The ACCE has a vital role in learning about and securing appropriate clinical education sites as well as maintaining positive ongoing relationships with the clinical faculty. The ACCE is cognizant of developing and

maintaining a range of clinical sites, primarily in the New England area, that will provide depth and breadth of experiences for students. Additionally, the ACCE attempts to maintain an active data base of clinical sites within the New England States.

Students may suggest pursuit of a clinical site. However, it is at the discretion of the ACCE whether or not to pursue the request. This decision is made by determining if the learning opportunities and experiences will meet the needs of the PTA program.

Clinical Affiliation Agreements

Policy: The ACCE ensures that a current Clinical Affiliation Agreement between Bay State College and each clinical facility has been completed and is on file in the ACCE office before a student is placed on a Clinical Education Experience at the facility. The Agreement must clearly delineate the responsibilities and requirements of both institutions, must meet the requirements on the *Affiliation Agreement Review Check List*, and must be signed by appropriate individuals from each institution.

Procedure:

1. No student is allowed to start a clinical experience at any clinical site without a current and completed affiliation agreement on file.
2. When establishing a relationship with a new clinical education site, the ACCE initiates the process of obtaining a clinical affiliation agreement by reviewing the agreement expectations with the Center Coordinator of Clinical Education (CCCE).
3. A determination is made to use either the BSC Clinical Affiliation Agreement or to use an agreement document created for this purpose by the clinical site.
4. In cases in which the agreement document originates from the clinical site, the ACCE utilizes the *Affiliation Agreement Review Check List* to screen for crucial content, to ensure that the agreement language is clear and that it accurately reflects the legal responsibilities of all parties.
5. The ACCE and the CCCE (or other staff responsible for agreements) negotiate and come to an agreement regarding any changes or additions requested by either party.
6. Two originals of the finalized agreement document are reviewed and signed by appropriate parties at both the clinical facility and at BSC.
7. One signed original of the Clinical Affiliation Agreement is kept in a secure file in the ACCE's office. The other signed original is maintained by the clinical site for their records.
8. The ACCE tracks completion of the agreement documents in the clinical education data base and notes any applicable renewal date.
9. The Bay State College Clinical Affiliation Agreement is self-renewing. However in order to ensure periodic review of the document by both parties, the ACCE initiates renewal every five years at minimum.
10. The ACCE reviews the clinical education data base at least annually to identify clinical sites with agreements which require renewal at specified intervals. The ACCE contacts the appropriate individual at the clinical site to initiate the renewal process and the procedure starts again with numbers 3 to 8 above.
11. The ACCE reviews the agreement status of any site to which a student is assigned for Clinical Education Experience. This is done at least 4 months in advance of the start date of the experience.
12. The ACCE reviews the content of the Bay State College Clinical Affiliation Agreement at least annually and in response to any legal, regulatory, or program policy changes to ensure compliance and ongoing effectiveness of the document. Needed changes are discussed

with and approved by the PTA Program Chair. The Vice President of Academics will also review any changes to the Bay State College Clinical Affiliation Agreement and determine if further review by legal counsel is needed.

13. Either the College or the affiliating site may terminate an agreement at any time, unless a PTA student is currently engaged in the affiliation.

Clinical Site Information Forms (CSIF)

The CSIF is a document from the American Physical Therapy Association which was developed “...for Physical Therapist (PT) and Physical Therapist Assistant (PTA) academic programs to collect information from clinical education sites. This information will facilitate clinical site selection, student placements, assessment of learning experiences and clinical practice opportunities available to students; and provide assistance with completion of documentation for accreditation in clinical education.” (page 1 of the 2006 version of the CSIF)

The CSIF is completed or updated annually by the CCCE. The ACCE is responsible for collecting and managing CSIFs and for ensuring PTA student access to these forms. In addition, the ACCE maintains an Access data file with information on each affiliated clinical site. It is crucial that students review the CSIFs and other available information for each facility to which they are placed for a clinical experience well in advance of the start date.

Clinical Faculty Qualifications

Policy: The PTA program is committed to establishing relationships with highly qualified clinical educators to ensure that PTA Program students receive the best possible instruction, guidance, and role modeling during their clinical experiences. To that end, the PTA Program holds specific standards which must be met in order for an individual to be qualified for the roles of Center Coordinator of Clinical Education (CCE) and Clinical Instructor (CI). Specifically these are as follows:

Qualifications for CCCEs: The individual acting in the capacity of the CCCE must be:

- A PT, PTA, OT, or SLP. It is preferred that the CCCE is a PT or PTA.
- Experienced in and knowledgeable about the provision of clinical education/clinical fieldwork.
- Able to select, train, and support Clinical Instructors who meet or exceed the minimal requirements for the program.
- Able to work collaboratively with the ACCE and CIs.
- Able to communicate clearly.
- Able to organize, complete, and maintain appropriate paperwork and records supporting the clinical site’s student program.
- Able to assist CIs and students to identify and resolve problems, and to promote student success in achieving clinical education goals.

It is strongly recommended that the CCCE follows the APTA *Guidelines for Center Coordinators of Clinical Education*. The ACCE strongly encourages the CCCEs to utilize the APTA documents *Guidelines and Self-Assessments for Clinical Education and Guidelines for Center Coordinators of Clinical Education* in the development and management of the clinical site’s student program. Copies of these documents may be obtained from the ACCE upon request.

Qualifications for CIs: The individual must:

- Be a PT or PTA and possess a current, unrestricted license in the state in which s/he practices.
- Adhere to the core documents of the American Physical Therapy Association.
- Have at minimum one year of clinical experience with the same type of patient population as where they are currently employed. For example, it would not be acceptable for a clinician who had only worked in private practice settings to be a CI for a PTA student during the first year of his/her employment in a skilled nursing facility.
- Demonstrate clinical competence; legal and ethical behavior; effective communication and interpersonal skills; the ability to serve as a professional role model; and skills in instruction and performance evaluation.
- Possess a genuine interest in serving as a Clinical Instructor and a desire to develop skills as an educator.
- Be able to assist students to identify and resolve problems and promote student success in achieving clinical education goals.

It is strongly recommended that the individual:

- Adhere to the *APTA Guidelines for Clinical Instructors*.
- Participate in some form of preparation for the role either through the APTA Clinical Instructor Credentialing process, attendance at CI training session(s) offered by an academic institution, or by training from the CCCE or other experienced CIs. Individuals who lack CI training should seek this training and support from the ACCE prior to working with PTA students.

The ACCE reviews these standards with the CCCE when a new facility is evaluated and considered as a clinical education site. The CCCE is expected to assist the ACCE to ensure that CIs meet or exceed these minimal standards. CCCEs are expected to properly screen, select, train, and support the CIs at their facility. For this reason, the ACCE stresses and reinforces these expectations when communicating with CCCEs. The ACCE strongly encourages the CCCEs to utilize the APTA documents *Guidelines and Self-Assessments for Clinical Education and Guidelines for Center Coordinators of Clinical Education* in the development and management of the clinical site's student program. The ACCE is available to assist clinicians in assessing their readiness to be a Clinical Instructor and/or to provide training and support for CIs.

Clinical Faculty Appointment and Clinical Faculty Rights

Policy: Qualified CCCEs and CIs are awarded clinical faculty appointments starting one month prior to and during the time they are engaged in student training activities for any student(s) in the PTA program and for the academic year immediately following such service.

Procedure:

1. The ACCE is responsible for ensuring that the clinical faculty is notified of the associated rights and privileges and, in collaboration with the PTA Program Chair, is available to assist clinical faculty in exercising these rights and privileges.
2. Individuals who have met the required academic and professional standards listed in the policy and procedure on Clinical Faculty Qualifications shall be granted a clinical faculty appointment by Bay State College. Privileges afforded during a clinical faculty appointment are:

- Is granted use of the BSC library, on-line computer facilities, and remote access to specified on-line search tools for use in professional research;
 - May attend faculty in-service seminars, free of charge
 - May participate in student activities, including graduation week ceremonies; and
 - May request a tuition waiver for one three-credit course offered at the College.
3. Clinical faculty are invited to participate in all clinical faculty development seminars and conferences offered by Bay State College and/or by the New England Consortium of PTA Programs. They are also invited and encouraged to participate in PTA departmental meetings.
 4. No financial reimbursement is associated with this appointment and members of the clinical faculty are not deemed to be employees of Bay State College. This appointment will be in effect each academic year in which the individual serves as a Clinical Instructor or Center Coordinator of Clinical Education for Bay State College PTA students.
 5. Clinical faculty wishing to exercise these rights and privileges should contact the PTA program ACCE or the PTA Program Chair.

Clinical Faculty Evaluation and Development

Policy: The ACCE is responsible for gathering data on the performance of the clinical faculty and for using that data to identify specific performance and/or development needs.

Procedure:

The ACCE will complete a Clinical Faculty Performance Summary form for every individual involved in the clinical education of Bay State College PTA Program students during each academic year. (*See copy in Forms section of this document*) Use of this form assists the ACCE in identifying CI/CCCE strengths, as well as needs for support and skill development. The ACCE ratings on this form are based on review and consideration of the following data sources:

- Phone, email, and written communications before, during, and after the clinical experience
- Confirmation letter form supplying information on CI preparation
- Mid-term visit discussions
- Student feedback
- *PTA Student Evaluation of a Clinical Experience and Clinical Instruction form*
- Completion of the *Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance Evaluation*
- Completion and return of *Student Preparedness Survey*
- CI/CCCE response to any student performance issues during clinical experience
- Completion and return of the *CI Self-assessment form*

Through this process, the ACCE identifies the strengths, development needs, and interests of the individual clinical faculty member. The ACCE communicates these findings with the CCCE and CI by phone, email or in writing. When indicated, the ACCE may offer individualized support in the form of one-on-one training sessions. Individual clinical faculty who are not receptive or motivated to improve their abilities as clinical educators are not invited to continue involvement in the instruction of PTA program students.

The information contained on the Clinical Faculty Performance Summary form is confidential. The ACCE keeps the Clinical Faculty Performance Summary form, related notes on the CI's performance, and the results of and follow up on file by Clinical Instructor name. All of these

records are kept in locked cabinets in the ACCE office and can only be accessed by the ACCE and PTA Program Chair.

The ACCE is responsible for ongoing evaluation of the needs of the clinical education program. Findings report this at least annually to the PTA Program Chair and the academic faculty. The ACCE and the PTA Program Chair triangulate data on the needs of the clinical education program, the clinical faculty, the academic faculty, and the PTA program as a whole in order to identify appropriate programs and activities which will best meet the needs of the program as well as the clinical faculty.

Clinical Faculty Curricular Input

Clinical faculty input on the curriculum is solicited by the ACCE in a number of ways: during mid-term site visits, the *Student Preparation for Participation in Clinical Education* form, the *Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance Evaluation*, and the *Student Evaluation: Clinical Experience and Clinical Instruction*. The ACCE compiles and analyzes data from these sources and reports the results to the PTA Program Chair and PTA Program faculty annually. In addition, Clinical faculty members are encouraged to attend PTA Program Faculty meetings where curricular issues are discussed.

Clinical Faculty Evaluation of the ACCE and the Clinical Education Program

Members of the Clinical Faculty are asked to provide feedback on the performance of the ACCE and the clinical education program after providing Clinical Education Experience for a PTA Program student. The anonymous results from this evaluation process are sent to the PTA Program Chair who tabulates, analyzes, and reports results to the ACCE. This information is discussed with the ACCE as part of overall quality improvement efforts for the program.

Clinical Education Program Evaluation and Development

Policy: The ACCE is responsible for evaluating the effectiveness of the clinical education program on a regular basis and for reporting results to the PTA Program Chair on an ongoing basis. Annually, the results are formally reported to the PTA Program faculty for discussion and cross analysis with other PTA Program assessments as part of the curriculum review.

Procedure:

The ACCE gathers, reviews, tracks, and analyzes information from the following data sources:

- The qualifications and effectiveness of the clinical faculty
- Variety and number of clinical sites
- Clinical site cancellation rate and reasons
- Effectiveness of student selection and placement process
- Student Preparation for Clinical Education Courses
- Student Clinical Performance
- Clinical education course duration and length
- Evaluation of Academic Coordinator of Clinical Education

- Communication with the clinical education sites

The ACCE completes the *Clinical Education Objective Reporting Form* and presents the results to the PTA Program Chair and faculty for discussion normally at a fall semester faculty meeting. This information is used in conjunction with other program outcomes data to guide curricular and individual course reviews and revisions.

Clinical Site Assignment Process

Dates of Clinical Education Experiences: All Clinical Education Experience dates are arranged in advance by the ACCE in conjunction with the College's Registrar. When making any plans before, during or immediately after any clinical, students must consider the fact that the dates of Clinical Education Experiences can shift depending on clinical site availability or clinical site preferences. The PTA program has no control over these last-minute changes. In addition, on occasion a student may need to extend a clinical (due to specific site requirements on student absences or poor performance). Students must be available to start a clinical earlier or to extend it; otherwise they place themselves at risk of failing.

Annual Clinical Site Request Process: Every March 1st, the ACCE sends to all active clinical sites a letter with a clinical date reservation request for the following academic year. This is done in compliance with the nationwide March 1st site request mail date established through the APTA for all academic programs. From the returned reservation forms, the ACCE develops a listing of facilities and types of experiences which are being held for students in the PTA program. The ACCE follows up with the CCCEs to obtain more information about the experiences offered and to initiate early planning.

Student Access to Information Regarding Clinical Sites: Students may access the list of reserved clinical experiences from the ACCE. Information on each clinical facility is available in the ACCE office.

Student/Advisor Preparation for Clinical Education Experiences: Copies of the *Student Learning Style Profile*, the *Student Self-Assessment form*, the *Student Goals for Clinical Education*, *Student Clinical Education Experience Agreement*, and the *Clinical Education Assignment Information Sheet* are supplied to students by the ACCE. Meetings are held with first year students to instruct them in the uses of these forms. (See also section on Student Responsibilities Prior to Clinical Education.)

Students are required to begin completing these forms and to hold meetings with their advisor and the ACCE to discuss their strengths and weaknesses, learning style, and possible goals for the Clinical Education Experience. Students indicate any special preferences they have in terms of specific clinical sites, geographic location of their clinical experience and/or access to Mass Transit. While this information is used to guide clinical education placements, it does not mean personal requests can be met. Placements are always made in the education interest of the student.

Assigning Students to Clinical Sites: Matching students to available Clinical Education Experiences is a very complex and labor-intensive task. Assignments are made with the philosophy of providing the best possible Clinical Education Experiences for students. Throughout the course of the three clinical experiences, every student must have one inpatient experience and one outpatient experience. Inpatient experiences may be in a skilled nursing

facility (SNF), inpatient acute care, or inpatient rehabilitation. Outpatient experiences are commonly in either a PT owned private practice or a hospital based outpatient department. The ACCE tracks student placements to ensure completion of these basic requirements.

In addition, an attempt is made to ensure that each student's clinical education assignments offer the widest range of experiences possible. The ACCE evaluates each student's needs on an individual basis. The ACCE is assisted in this activity by the PTA Program Chair and faculty. Students must ensure that they have scheduled at least one meeting with the ACCE prior to the deadline established for each clinical placement selection. **Students who miss this deadline will be assigned to a site at the discretion of the ACCE and after all other students have been placed.**

Locations of Clinical Education Experiences: Whenever possible, the ACCE attempts to accommodate special requests regarding location and or access to Mass-Transit. However, students must be aware that this may not always be possible. It is the student's responsibility to have a plan should they be required to commute by car to a clinical site. Decisions regarding clinical placement must be made first on the basis of the student's academic and experience needs, not on the basis of convenience. Students can expect to commute as much as one hour to reach a clinical site.

In cases where more than one student is considered for a clinical site, the decision regarding placement will first be made on the premises discussed above. If more than one appropriate candidate remains for that clinical site, the decision will be made by random selection.

Student Contact with Clinical Sites Prior to Assignment: Students are **prohibited** from contacting any facility on their own to request a clinical placement. Failure to comply with this policy may result in a delay in clinical placement. Repeat offenses may result in being withdrawn from the PTA Program.

Conflict of Interest: Students will not be placed at clinical sites that may create a conflict of interest. The following circumstances are several examples:

- The student or a family member have been or are working at that physical therapy clinic or an associated site.
- A family member or friend owns or is a partner in the facility.
- The student has a financial interest or connection such as promised employment after graduation or tuition assistance in return for post-graduate employment.
- The student and/or a family member are currently a patient at the facility. If the student and/or a family member were in the past a patient at the facility, the ACCE and/or the CCCE will determine if a conflict of interest exists.

These examples are not intended to be an exclusive list of potential conflicts of interest. Each situation will be evaluated by the ACCE on a case by case basis.

Student Request/Suggestion for New Clinical Site(s): If a student has a suggestion or a special request for a clinical facility which is not on the current clinical site list, s/he may bring this to the attention of the ACCE. Students MUST NOT, under any circumstance, contact the staff at the site or ask any personal contacts to pursue the site on their behalf. All such contact is the province of the ACCE. Unapproved contact with a site could be detrimental to the site development process and potentially jeopardize a clinical education relationship with that facility.

Student Request for an Out-of-State Placement: Students wishing to be placed on a clinical experience in another state must notify the ACCE of this request early in their first semester and no later than their second semester in the PTA program. They must make an appointment to discuss their request with the ACCE. Only students with strong academic performance and exceptional professional behavior will be considered for this type of arrangement.

Announcement of Student/Clinical Assignments: When all assignments have been finalized, the ACCE will notify the students of the clinical site at which they have been placed for the Clinical Education Experience. Typically, placements for Clinical Education II and III are announced in November and placements for Clinical Education I are announced in March. A list will also be available of any open clinical sites that were not utilized. Students will have a period of one week to formally request a possible change of assignment to one of the available sites. Students also may meet with the ACCE, their academic advisor, and/or the PTA Program Chair regarding any concerns they may have about their assignment.

Final Decisions Regarding Clinical Assignments: The ACCE, in consultation with the academic advisors and the PTA Program Chair, are responsible for final decisions regarding clinical assignments. The PTA Program Chair has ultimate authority to decide if a student has demonstrated the necessary level of academic knowledge, clinical skills, and professional behavior to be allowed to participate in a Clinical Education Experience.

Clinical Education Course Grading

The ACCE uses a combination of assessment tools to determine a PTA student's clinical education grade: Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance Evaluation form; performance on in-service, special project, or quality assurance assignment; and assignments/requirements established by the ACCE. The PTA student's grade is calculated using a grading form and a methodology which is shared in advance with PTA students and the clinical faculty in the Clinical Education Handbook. Each of the components that contribute to the PTA student's clinical education grade is described below.

Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance tool

Clinical Instructors use the Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance Evaluation form to record their assessment of PTA student performance during the Clinical Education Experience. This tool is based upon the NEC-ACCE PT Evaluation Form. Instructions are provided within the document to ensure that all CIs use the same methodology for scoring for each performance criteria.

The ACCE tallies the scores entered by the Clinical Instructor at the end of the clinical affiliation. This number is entered onto the student's Clinical Education Grading Rubric form and compared to the minimum passing standards established by the PTA program.

*Asterisk items on the Evaluation form are competencies that are essential for satisfactory completion of the clinical education experience. These relate to safety and adherence to ethical, legal, and administrative procedures. Not consistently meeting the level of expectation in the essential competencies will be interpreted as clinical incompetence and may result in failure of the clinical education experience. Unsafe, irresponsible, disrespectful, unethical, or illegal student behavior is grounds for failure of a clinical experience even if all other criterion meet or

exceed the minimum passing standards. Therefore, if scores are below the minimum standard for any of these criteria, the PTA student fails the Clinical Education Experience. Full documentation of such inconsistencies **must** be provided to the student, CCCE, and ACCE.

The following table illustrates the minimum scores students must achieve on the Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance Evaluation form in order to pass each clinical affiliation.

I. PROFESSIONAL BEHAVIOR AND ATTITUDE

CRITERION: 1.1 The student demonstrates professional and ethical behavior	CEI Min	Student Grade CEI	CEII Min	Student Grade CEII	CEIII Min	Student Grade CEIII
*1.1.1 Is punctual and dependable and adheres to scheduled assignments.	3		4		4	
*1.1.2 Wears appropriate attire/maintains appropriate hygiene.	3		4		4	
*1.1.3 Adheres to ethical and legal standards of practice.	2		3		4	
*1.1.4 Treats clients in a manner which reflects dignity, respect, and value for human life.	3		4		4	
*1.1.5 Maintains confidentiality and uses discretion when with, and in front of clients.	2		3		4	
1.1.6 Demonstrates initiative and accepts responsibility for learning.	3		3		4	
1.1.7 Demonstrates active listening which indicates the student is receptive to learning.	3		4		4	
1.1.8 Accepts criticism and responds in a manner which reflects an understanding of constructive criticism.	3		4		4	
1.1.9 Expresses an attitude reflective of cooperation and flexibility.	3		3		4	
1.1.10 Maintains a balance between personal and professional relationships with staff and clients.	3		3		4	
AVERAGE	2.8		3.5		4	

II. SAFETY

CRITERION: 2.1 The student demonstrates safe practice	CEI Min	Student Grade CEI	CEII Min	Student Grade CEII	CEIII Min	Student Grade CEIII
*2.1.1 Adheres to health and safety regulations according to facility/OSHA standards.	2		3		4	
*2.1.2 Recognizes changes in the client's physiological and psychological status.	2		3		4	
*2.1.3 Responds appropriately to changes in the client's physiological and psychological status.	2		3		4	
*2.1.4 Develops safe client care programs.	1		3		4	
*2.1.5 Implements safe client care programs.	2		4		4	
*2.1.6 Uses appropriate body mechanics for self and client.	2		4		4	
*2.1.7 Requests appropriate assistance when necessary.	3		4		4	
*2.1.8 Recognizes and addresses indications, contraindications, and precautions to treatment.	2		4		4	
*2.1.9 Maintains working area in a manner conducive to efficiency and safety.	2		3		4	
AVERAGE	2		3.4		4	

III. COMMUNICATION AND INTERPERSONAL SKILLS

CRITERION:	CEI Min	Student Grade CEI	CEII Min	Student Grade CEII	CEIII Min	Student Grade CEIII
3.1 The student demonstrates effective verbal communication skills.						
3.1.1 Establishes effective communication with client/family.						
3.1.1.1 Offers appropriate introduction.	3		4		4	
3.1.1.2 Accurately teaches purpose of chosen treatment procedures.	2		3		4	
3.1.1.3 Provides appropriate and timely feedback.	2		3		4	
3.1.1.4 Prepares client/family for discharge/home programming.	1		3		4	
AVERAGE	2		3.2		4	
3.1.2 Establishes effective communication with clinical instructor(s).						
3.1.2.1 Demonstrates understanding of the supervisory role of the clinical instructor.	2		4		4	
3.1.2.2 Takes active role in establishing goals for this clinical experience.	3		4		4	
3.1.2.3 Asks relevant questions in a timely and appropriate manner.	2		4		4	
3.1.2.4 Gives appropriate and timely feedback to supervisor.	2		3		4	
3.1.2.5 Demonstrates awareness of own strengths and weaknesses and actively seeks to improve self.	2		3		4	
3.1.2.6 Communicates need for appropriate referrals to supervisor.	1		3		4	
AVERAGE	2		3.5		4	
3.1.3 Establish effective communication with other members of the health care team.						
3.1.3.1 Initiates regular communication when appropriate.	2		3		4	
3.1.3.2 Prepares and reports accurate and pertinent information.	2		3		4	
3.1.3.3 Recognizes the responsibilities of each member of the health care team, and participates as a team player.	2		3		4	
3.1.3.4 Participates in discharge plan and follow-up care.	1		2		3	
3.1.3.5 Participates in teaching other members of the health care team with methods appropriate for the audience.	2		3		4	
AVERAGE	1.8		2.8		3.8	

III. COMMUNICATION AND INTERPERSONAL SKILLS (continued)

3.2.1 Recognizes the effects of his/her own nonverbal communication upon others.	2		3		4	
3.2.2 Adjusts own posture gesture and facial expressions to meet situational demands.	2		3		4	
3.2.3 Correctly interprets and responds to nonverbal behavior of others (clients, family, and team members).	2		3		4	
3.2.4 Uses alternative communications (signs, gestures) to reinforce verbal communication as indicated.	2		3		4	
AVERAGE	2		3		4	
*3.3.1 Maintains documentation format in accordance with policies of the facility (written, dictated, computerized, etc.).	3		4		4	
3.3.2 Writes in an organized, logical, and concise manner.	2		3		4	
3.3.3 Writes legibly using correct spelling and grammar.	2		3		4	
3.3.4 Uses appropriate medical/lay terminology and abbreviations as indicated.	2		3		4	
*3.3.5 Information contained in written material is pertinent, accurate, and timely.	2		3		4	
AVERAGE	2.2		3.2		4	
Average of 3.1.1	2		3.2		4	
Average of 3.1.2	2		3.5		4	
Average of 3.1.3	1.8		2.8		3.8	
Average of 3.2	2		3		4	
Average of 3.3	2.2		3.2		4	
SECTION 3 OVERALL AVERAGE	2		3.1		3.9	

IV. PROCEDURES

CRITERION: 4.1 The student demonstrates accurate assessment skills.	CEI Min	Student Grade CEI	CEII Min	Student Grade CEII	CEIII Min	Student Grade CEIII
4.1.1 Performs data gathering procedures correctly.						
4.1.1.1 goniometry/end feel assessment/flexibility	2		3		4	
4.1.1.2 manual muscle testing/strength	2		3		4	
4.1.1.3 skin/vascular integrity/wound assessment	2		2		3	
4.1.1.4 postural assessment	2		3		4	
4.1.1.5 vital signs	2		3		4	
4.1.1.6 muscle tone assessment	1		3		3	
4.1.1.7 reflex assessment	1		3		4	
4.1.1.8 pain assessment	2		3		4	
4.1.1.9 balance/righting/equilibrium reactions	2		3		4	
4.1.1.10 endurance	2		3		3	
4.1.1.11 architectural/environmental modifications	2		3		3	
4.1.1.12 gait assessment	2		3		3	
4.1.1.13 ADL assessment	2		3		4	
4.1.1.14 respiratory/pulmonary assessment	2		3		4	
4.1.1.15 anthropometric assessment (leg length, girth volume)	2		3		4	
AVERAGE	1.8		2.9		3.7	

IV. PROCEDURES

(continued)

4.2. Treatment Skills: The student effectively uses the following treatment interventions effectively.						
4.2.1 Physical agents						
4.2.1.1 ultrasound	2		3		4	
4.2.1.2 electrotherapy	2		3		3	
4.2.1.3 hot packs	3		4		4	
4.2.1.4 cold packs	3		4		4	
4.2.1.5 contrast bath	2		3		3	
4.2.1.6 biofeedback	2		3		3	
4.2.1.7 hydrotherapy	2		3		4	
4.2.1.8 traction (cervical and pelvic)	2		3		4	
4.2.1.9 intermittent compression	2		3		3	
4.2.1.10 soft tissue mobilization techniques	2		3		4	
4.2.1.11 paraffin	3		4		4	
4.2.1.12 TENS	2		3		4	
4.2.1.13 fluidotherapy	3		4		4	
4.2.1.14 ionto/phonophoresis	2		3		3	
4.2.1.15 shortwave diathermy	2		3		3	
4.2.1.16 other (please specify)						
AVERAGE	2.2		3.2		3.4	
4.2.2 Therapeutic techniques						
4.2.2.1 ROM exercises	2		3		4	
4.2.2.2 strengthening exercises	2		3		4	
4.2.2.3 exercise equipment	2		3		3	
4.2.2.4 stretching exercises	2		3		4	
4.2.2.5 developmental activities	2		3		3	
4.2.2.6 facilitation/inhibition techniques	2		3		3	
4.2.2.7 balance activities	2		3		4	
4.2.2.8 endurance activities	2		3		4	
4.2.2.9 coordination activities	2		3		3	
4.2.2.10 postural activities	2		3		4	
4.2.2.11 tone management	2		3		3	
4.2.2.12 other (please specify)						
AVERAGE	2		3		3.5	

IV. PROCEDURES

(continued)

4.2.3 Functional activities						
4.2.3.1 bed mobility	2		3		4	
4.2.3.2 transfers	2		3		4	
4.2.3.3 wheelchair mobility	2		3		3	
4.2.3.4 orthotics/prosthetic management	NA		2		3	
4.2.3.5 ADL training	2		3		4	
4.2.3.6 gait training	2		3		4	
4.2.3.7 assistive/adaptive devices	2		3		3	
4.2.3.8 other (please specify)						
AVERAGE	2		2.8		3.6	
4.2.4 Cardiopulmonary care						
4.2.4.1 postural drainage	NA		3		3	
4.2.4.2 breathing & coughing exercises	NA		3		3	
4.2.4.3 percussion/ vibration	NA		3		3	
4.2.4.4 other (please specify)						
AVERAGE	NA		3		3	
4.2.5 Effectively implements PT POC for:			Site Specific			
4.2.5.1 burn/wound care	NA		2		3	
4.2.5.2 pediatrics	NA		2		3	
4.2.5.3 sports	NA		2		3	
4.2.5.4 geriatrics	NA		2		3	
4.2.5.5 aquatics	NA		2		3	
4.2.5.6 equestrian	NA		2		3	
4.2.5.7 bandaging & wrapping	NA		2		3	
4.2.5.8 work hardening	NA		2		3	
4.2.5.9 other (please specify)						
AVERAGE	NA		2		3	
Average of 4.1						
	1.8		2.9		3.7	
Average of 4.2						
	2.2		3.2		3.4	
Average of 4.2.2						
	2		3		3.5	
Average of 4.2.3						
	2		2.8		3.6	
Average of 4.2.4						
	NA		3		3	
Average of 4.2.5						
	NA		2		3	
OVERALL SECTION 4 AVERAGE						
	2		2.8		3.3	

V. CRITICAL THINKING SKILLS

CRITERION: 5.1 The student demonstrates effective critical thinking skills.	CEI Min	Student Grade CEI	CEII Min	Student Grade CEII	CEIII Min	Student Grade CEIII
5.1.1 Recognizes and understands data pertinent to client care.	2		3		4	
5.1.2 Understands physical therapy problems as outlined by the plan of care.	2		3		4	
5.1.3 Prioritizes treatment objectives for clients with complex medical needs.	1		3		4	
5.1.4 Selects, utilizes, and applies appropriate information from medical resources pertinent to the client's treatment plan.	1		3		4	
5.1.5 Identifies the need for client re-evaluation by the physical therapist.	1		3		4	
5.1.6 Identifies rationale for treatment objectives and techniques.	2		3		4	
5.1.7 Identifies the need for outside referral and consults with the physical therapist.	1		3		3	
5.1.8 Identifies and utilizes alternative methods or procedures to acquire desired outcomes within the plan of care.	1		3		3	
5.1.9 Selects a logical treatment sequence to enhance comfort efficiency, and effectiveness.	1		3		4	
*5.1.10 Integrates information to adapt treatment techniques within the plan of care according to the client's individual response.	1		3		4	
5.1.11 Assists the physical therapist in addressing primary and secondary prevention needs of individuals and groups.	2		4		4	
AVERAGE	1.4		3.1		3.8	

VI. ORGANIZATIONAL & ADMINISTRATIVE SKILLS

CRITERION: 6.1 The student demonstrates organizational and administrative skills.	CEI Min	Student Grade CEI	CEII Min	Student Grade CEII	CEIII Min	Student Grade CEIII
6.1.1 Organizes time effectively and works within time limits.	2		3		4	
6.1.2 Uses free time productively.	3		4		4	
6.1.3 Coordinates simultaneous treatment of clients as appropriate.	1		3		3	
6.1.4 Complies with administrative procedures (i.e. scheduling, transportation, coordination with other appointments, etc.) required.	2		3		4	
6.1.5 Delegates appropriate responsibilities to supportive personnel as indicated.	1		3		4	
6.1.6 Performs additional/related duties as defined by the facility.	3		4		4	
6.1.7 Participates in fiscal management of the physical therapy clinical setting (i.e. billing).	2		3		4	
6.1.8 Participates in activities addressing quality of service delivery.	1		3		3	
6.1.9 Implements a self-directed plan for career development and lifelong learning.	3		4		4	
AVERAGE	2		3.3		3.8	
PASS/FAIL BASIS						
In-Service						
Case Presentation	P		P		P	
Special Project						
Quality Assurance						
Additional Comments on above item						
FINAL GRADE	P		P		P	

As previously described, unsafe, irresponsible, disrespectful, unethical, or illegal student behavior is grounds for failure of a clinical experience even if all other criterion meet or exceed the minimum passing standards.

In addition to the scores obtained from the Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance Evaluation form, the ACCE also reads the written comments and considers information obtained during the Mid-Term Visit. These should correlate appropriately to the rating on the Evaluation form. When indicated, the ACCE will contact the CI for clarification, request additional information or to corroborate a particular score. For example, if the CI comments describe a PTA student performance level significantly higher or lower than the score, the ACCE would contact the CI for clarification. No PTA student fails a clinical experience based only on the Evaluation form and written comments of the CI without, at minimum, detailed follow up discussions with the CI, CCCE, PTA student

and the ACCE. This is adhered to in part to ensure that PTA students will not be adversely affected if a CI did not correctly complete the Evaluation form.

In addition to meeting the minimum average score from the Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance Evaluation form, students must pass each of the following activities in order to pass the Clinical Education Experience. Failure in any of these areas results in failing the clinical experience.

Student in-service, special project or quality assurance assignment

The PTA student performance on the in-service, special project or quality assurance assignment is rated as pass-fail based on the CI's completion of the assignment grading rubric provided by the ACCE. In addition, PTA students are required to submit supporting documents to the ACCE related to this assignment for review and corroboration of the grade. If a CI determines a PTA student has not achieved a minimally passing performance on this assignment the CI would immediately contact the ACCE to discuss the situation.

ACCE assignments/requirements

The third component of the clinical education grade is determined by the ACCE for timely completion of assignments. These assignments include submission of post clinical forms, reflection assignments during the experience, and communication with the ACCE.

The Clinical Education Grading Rubric sheet is designed to accommodate the grading process for each of the three clinical experiences. The arrangement of the grading columns enables the ACCE to visually track PTA student progression in performance. For example, if a PTA student has a lower rating on a particular criterion at the end of Clinical Education I, the ACCE will be readily able to see if sufficient improvement in performance was made on that criterion during Clinical Education II. This format enables the ACCE to assist the PTA student in self-assessment and developing strategies to target problematic areas.

Clinical Education Problem Situations

The majority of Clinical Education Experiences proceed without significant difficulties or conflicts. However, it is possible that students may encounter problem situations in a Clinical Education Experience. These may include personality conflicts, problems with communication, and deficiencies in student preparation, performance and/or behavior.

The majority of issues that come up during a Clinical Education Experience can be easily resolved between the student and the CI. Students are expected to behave as mature, responsible adults and to work out any problems they are having directly with the CI if at all possible. In the event that these attempts fail and/or the scope of the problem is more serious or complex, students have two additional resources. They can request a meeting with the CCCE and discuss the situation with him/her without fear of negative consequence. They may also contact the ACCE to discuss the situation and receive guidance as needed.

The CI may also utilize support from the CCCE and ACCE when dealing with any problems with student performance or behavior. When necessary, the ACCE will maintain closer contact with the CI, student, and CCCE through more frequent telephone and/or in-person meetings. The goal of this contact between the ACCE, the CI, the student, and the CCCE is to ensure effective communication, clearly identify the issues involved, and help the student, CI and CCCE

formulate a workable plan to improve student performance and/or eliminate the problem behavior or situation.

If the questions, issues, or problems cannot be resolved at the level of the CCCE or ACCE, the PTA Program Chair should be contacted.

Early Termination of Clinical Education Experiences

Clinical Education Experiences can be terminated at any time by the ACCE, PTA Program Chair or at the request of the clinical site. Examples of situations leading to early termination of a clinical experience are student:

- performance poses a safety threat to patients and/or staff
- attends the clinical under the influence of alcohol or non-prescription drugs
- behavior is unprofessional, rude, or insensitive
- knowledge and skills are deemed to be inadequate to meet the basic level requirements for the clinical setting.

Situations that may lead to termination of a clinical experience are not limited to those listed above. The CI and/or the CCCE retain the right to remove a student from the clinical facility at any time and for any reason they deem appropriate. In such an instance, the CI and CCCE will immediately notify the ACCE and PTA Program Chair of the situation.

If a Clinical Education Experience is terminated, the grade for the course will be an 'F'. The student may also face withdrawal from the PTA program, depending on the reason for the termination.

A grade of 'I' (Incomplete) may be given to a PTA student if his/her experience was canceled prior to start or terminated prior to completion due to circumstances beyond the control of the student or Bay State College. The student has one semester to make up this incomplete experience before his/her grade will convert to an "F" (Failure).

Failed Clinical Education Experiences:

The determination that a student has failed a clinical experience rests with the ACCE and the PTA Program Chair. Such a decision is based on the following:

- Careful review of the final Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance Evaluation form
- Discussion with the CI and the CCCE
- Evaluation of any anecdotal records or other written records
- Review of notes from mid-term and/or other meetings
- Discussion with PTA faculty (when necessary)
- Evaluation of the student's behavior and performance in comparison to the objectives stated in the course syllabus.

This list is not intended to be an inclusive list of all factors that may be considered in such circumstances.

A student who fails a Clinical Education Experience and who has not been withdrawn from the program will be allowed one opportunity to repeat the Clinical Experience at a similar facility. Before a student is allowed to participate in a repeat Clinical Education Experience, the PTA

Program Chair and ACCE will outline a plan of remediation for the student to complete to better prepare him/herself while increasing the likelihood of success on the repeat clinical. The remedial plan will be based on the identified areas of weakness and may include requirements such as additional study, assignments, skills practice, and competency testing. The plan may also include requirements to audit a course or course(s) which the student previously passed.

If the student does not pass the repeat clinical, s/he will be withdrawn from the PTA Program. **Students are allowed to fail and repeat only one of the three required clinical experiences.** For example, a student who had failed and then successfully repeated Clinical Education I would be withdrawn from the PTA Program if s/he failed either Clinical Education II or III. **The student would not be allowed the opportunity to repeat the second failed clinical experience.**

A student cannot progress to the third semester of the PTA program without passing Clinical Education I. The student would be allowed to take non-professional courses within the curriculum and make plans with the ACCE to repeat the failed clinical experience. If the student successfully passed the retake Clinical Education I, s/he would be allowed to resume the professional course work following the sequence of courses as prescribed.

A student who does not pass Clinical Education II must repeat it before they can participate in Clinical Education III. That student may be permitted to take PTA 221 (Senior Seminar II), at the discretion of the PTA Program Chair. Students must pass Clinical Education III and successfully complete all other required course work for the PTA Program before being issued a diploma. Failure of either Clinical Education II or III will delay the receipt of the diploma and will delay the student's ability to register to sit for the professional licensure exam.

The process for grievances and appeals are described below and in the PTA Student Manual.

Student Clinical Education Grievance Procedure

Policy:

Every PTA Program student has the right to grieve an issue or concern.

Procedure:

Appropriate response to conflicts and/or concerns is a part of demonstrating professional behavior. Students who have an issue or concern during a Clinical Education course should do the following:

1. Discuss the concern with the CI to seek a resolution.
2. If this is not successful, or if the student does not feel comfortable addressing the issue with the CI, the student should contact the CCCE and the ACCE who will be able to further advise the student.
3. If the student believes the issue requires further attention, s/he should contact the PTA Program Chair.
4. If the concern cannot be resolved at this level, the PTA Program Chair will recommend that the student meet with the Vice President of Academic Affairs. The student should take the concern to Vice President of Academics at the recommendation of the PTA Program Chair or if the student believes that the PTA Program Chair is not satisfactorily addressing the

issue. It is strongly suggested that the student inform the PTA Program Chair that s/he will be contacting the Vice President.

5. If the issue or concern is related to the ACCE the student should first discuss the problem directly with the ACCE. If this is not successful, or the student does not feel comfortable addressing the issue directly with the ACCE, the student should contact the PTA Program Chair and proceed from # 3 above.

(See also the Bay State College Grievance policy and procedure found in the Bay State College Student Handbook.)

Student Appeal Process for Clinical Education

The college-wide appeal process is described in the Bay State College Student Handbook. Students are advised that in regards to a delay or termination in the students' progression in the PTA Program, they have a right to appeal this decision, and are referred to the BSC Student Handbook for information on the administrative appeals process. All appeals must be submitted in writing to the Academic Standing and Integrity Committee. If a student is not satisfied with the decision of the committee, s/he may appeal to the Vice President of Academic Affairs who is the final decision maker for academic appeals.

Clinical Faculty Grievance or Complaint Procedure

Clinical Faculty members who have a concern or complaint regarding the Clinical Education Program should do the following:

1. CIs should make the CCCE of their facility aware of the concern or complaint.
2. Contact the ACCE to discuss the situation and seek a resolution.
3. If the concern cannot be resolved at this level, or if the Clinical Faculty member is not comfortable addressing the issue directly with the ACCE, the individual should contact the PTA Program Chair.
4. If the concern cannot be resolved at this level, the PTA Program Chair will recommend meeting with the Vice President of Academic Affairs. The process for addressing concerns with student clinical performance is addressed in the roles and responsibility of CCCE/CI section of this handbook.

Complaints from the Public Regarding the PTA Program

Complaints about the PTA Program should be brought to the attention of the PTA Program Chair. The PTA Program Chair records the complaint and based on the nature of the complaint directs it to the appropriate responsible party. Any complaint received that is directed toward the College, its programs, policies or procedures is relayed directly to the President of the College. PTA Program specific complaints are directed to the PTA Program Chair. If the complaint is related to an academic issue, the issue will be addressed with the appropriate parties (e.g. the individual faculty member, the Department Chair for that program and/or the Vice President of Academic Affairs). If the complaint is related to a specific department within the College, the complainant will be directed to the appropriate department. If the complaint is

related to the profession of physical therapy, the complainant will be directed to the Massachusetts Board of Allied Health and/or the American Physical Therapy Association.

All complaints will be recorded by the PTA Program Chair and reported at the next PTA Program faculty meeting. Any action taken will be documented and forwarded to the parties involved and the Vice President of Academic Affairs. In addition, a report will also be made to the PTA Program Advisory Board. Recommendations from the PTA Program faculty and the PTA Program Advisory Board will be duly noted and shared with the Vice President of Academic Affairs. Records of complaints and actions taken will be kept in a secure file in the PTA Program Chair's office.

STUDENT PRE-CLINICAL REQUIREMENTS

Before being allowed to participate in a Clinical Education Experience, each Bay State College PTA student is required to submit proof that they have met all pre-clinical requirements within the deadlines established by the ACCE. Meeting these requirements is entirely the student's responsibility. Any student who fails to do so will be barred from participation in clinical education and consequently will not progress in the PTA Program. The student is responsible for all costs associated with these requirements.

The following is a list of the pre-clinical requirements:

Bay State College Immunization Form: This form is mandated by state law. It is given to the student at the time of admission and must be on file before the student is registered for classes. The form is completed by the student's health care provider and provides proof of MMR 1 & 2 (or immunity), Tetanus/diphtheria (within the past 10 years), Meningococcal vaccine (or waiver), Hepatitis B injection series (or waiver), Tuberculosis screening (within the year prior to admission).

TB Screening: The PTA Program minimum standard is that TB screening must be performed within 1 year prior to the end date of the clinical experience. If the clinical site to which the student is assigned requires more recent testing, the student must abide by the more stringent requirement. If the student tests positive by PPD or Mantoux they must submit a chest x-ray. If chest x-ray is positive the student must provide additional documentation proving that they are not infectious and that they are receiving proper medical monitoring and/or treatment.

Hepatitis B Vaccination Series or waiver form: Hepatitis B is a very serious illness that can be acquired in health-care settings. Vaccination against this disease is strongly recommended. Students may choose (after consulting with their physician) not to be vaccinated. Before any student will be allowed to participate in Clinical Education Experiences the following requirements related to Hepatitis B vaccination must be met:

Prior to Clinical Education I: Students must provide documentation that they have completed, at minimum, the first two injections and be scheduled for the third, **or** the student must sign a Hepatitis B Waiver Form stating they have chosen not to undergo the series of injections after consultation with a physician.

Prior to Clinical Education II: Students must provide documentation that they have completed all three injections, **or** a signed Hepatitis B Waiver Form must be on file.

Professional Liability Insurance: Students must maintain current professional liability insurance with policy limits of at least \$1,000,000/\$3,000,000 from the company approved by the APTA throughout all Clinical Education Experiences.

CPR & First Aid Certification: Students must maintain current adult, infant and child health care provider level CPR certification as well as first aid certification throughout all Clinical Education Experiences. Students who are unable to attend the CPR courses arranged at Bay State College are responsible for obtaining training on their own and at their own cost.

Documentation of all of the above is kept on file by the Academic Coordinator of Clinical Education. Clinical facilities which require copies of any of these documents prior to a student placement may contact the program ACCE. Students have signed forms giving authorization to release copies of these documents if requested by appropriate staff at a clinical site to which they have been assigned for a Clinical Education Experience. If copies are provided to a clinical site it is with the expectation that the documents will be treated as highly confidential information and will be kept in appropriately secure locations at the clinical site.

Additional Health or Immunization Requirements: Please note some clinical facilities have additional health requirements not mentioned in the information above. Students are responsible for complying with the health status requirements of each clinical facility to which s/he is assigned for clinical education.

Health Insurance: All students must have health insurance through the college or show verification that they are covered by another health insurance plan. Students must meet this requirement prior to registering for classes and must maintain coverage while enrolled in the PTA Program. All costs for health insurance are the students' responsibility.

Student Data Form: This form is completed by the student to provide information for the ACCE, CCCE and CI regarding his/her legal name, residence and mailing address, emergency contact name and number, medical insurance numbers, and any pertinent medical history. Students must complete and submit this form by the deadline established by the ACCE prior to each clinical. This form is kept on file by the ACCE and a copy is mailed to the student's clinical site well in advance of the start date.

Criminal Records Check: Students must authorize Bay State College to perform a Criminal Offense Record Investigation (CORI) background check each prior to participation in Clinical Education Experiences. Students with criminal records will be barred from participation on clinical experiences and consequently from progressing within the PTA program. Students who have pending cases will not be permitted to participate in a Clinical Education Experience until there is a cleared CORI.

Drug Testing: Students are responsible for undergoing drug testing if required by a clinical site to which they are assigned. Students are responsible for any associated costs. (Refer also to *Drug/Alcohol Use and/or Testing for Clinical Education* policy previously listed in the handbook)

Program Chair Approval: No student will be allowed on clinical unless the PTA Program Chair agrees the student has demonstrated the necessary level of academic knowledge, clinical skills, and development of professional core values.

Pre-placement Interview at Clinical Site: If required by the clinical site, students may be interviewed by the CCCE and/or CI prior to final placement. This is required or strongly

encouraged by some clinical sites in order to ensure optimal student placements and to provide the prospective student with information about the setting.

Student Clinical Education Agreement: Summarizes the student's responsibilities prior to and during each Clinical Education Experience. Students must sign this agreement and return it to the ACCE by the deadline given in the fall of the first year. This agreement is binding for each of the three Clinical Education Experiences.

The following **forms** provide information for the Academic Advisor, ACCE, CCCE, and CI. The student reviews and discusses these forms with the ACCE and/or his/her advisor prior to mailing to the clinical site. Students are expected to mail all of these forms together to the clinical site at least one month prior to the affiliation. The information provided in these forms assists the CI and the CCCE in planning for the students' clinical experience.

- **Student Self-Assessment Form:** Provides information regarding the student's perception of their level of preparation and experience with various areas of clinical practice.
- **Learning Style Profile:** Provides information regarding the student's preferred methods of learning.

Students are informed that CIs will attempt, whenever possible, to consider the student's learning style when structuring a Clinical Education Experience. However, the reality of clinical settings may not allow restructuring to accommodate the student's perceived learning style. In addition, students must recognize that it is often in their best interest to experiment with and gain flexibility in using various means of learning.

- **Student Goals for the Clinical Education Experience:** Provides information regarding the student's own goals

Students should be aware that their goals might need to be adapted after discussion with their CI during the first few days of the clinical. This will ensure that the goals the student devised are appropriate and attainable at the clinical facility.

- **Introduction Letter to Clinical Site:** For each Clinical Education Experience the student writes a letter of introduction to the CCCE and CI at the clinical site to which s/he is assigned. This letter accompanies the *Student Self-Assessment Form*, the *Learning Style Profile*, and the *Student Goals for the Clinical Experience* which are sent to the clinical site by the student at least one month prior to the start of the affiliation.
- **Initial Phone Contact with the Clinical Site:** Students are in phone contact with the CCCE at the clinical site after the introduction letter and forms have been received. This contact occurs approximately two to three weeks prior to the start date for the affiliation. Students are not to contact their clinical sites directly prior to this unless instructed to do so by the ACCE.

EXPECTATIONS FOR STUDENT BEHAVIOR DURING CLINICAL EDUCATION EXPERIENCES

The following is a summary of the Bay State College PTA Program expectations for student behavior during Clinical Education Experiences. CIs and CCCEs may use this summary as a resource to guide them in working with BSC students. CIs, CCCEs, and students are requested to notify the ACCE as soon as possible if any significant concern with a student's behavior or performance is identified during a Clinical Education Experience.

Patient and Personal Safety:

Safety in all aspects of clinical performance is the most important concern while students are engaged in Clinical Education Experiences. Students are required to demonstrate consistent safety in their judgments, behaviors, and performance of clinical skills. Students must adhere to all BSC safety policies. In addition, they are responsible for learning and following the safety policies and procedures of the clinical facility to which they are assigned. Poor safety awareness or behaving or performing patient care skills in an unsafe manner is grounds for immediate termination and failure of the clinical experience as well as potential expulsion from the PTA program. Please refer also to the Safety Policy in an earlier section of this handbook.

Professional Conduct:

Students are expected to:

- exhibit professional behavior and attitudes at all times while participating in clinical education,
- behave as mature, responsible adults who treat all patients, patient family members and staff with respect and courtesy at all times,
- adhere to the APTA Code of Ethics and Guide for Professional Conduct at all times during Clinical Education Experiences,
- comply with attendance and punctuality policies described within this handbook and in the clinical education course syllabi,
- adhere to the policies of the clinical site to which they are assigned,
- demonstrate personal and academic integrity,
- to play an active role in their own learning process, demonstrating initiative, enthusiasm, and professional curiosity.

Unprofessional conduct on a clinical affiliation is a very serious matter that can result in immediate termination and/or failure of the clinical and potential withdrawal from the PTA program.

Hours and Schedules: Clinical Education Experiences are full-time commitments that average between 37.5 to 40 hours or more per week. The staff at the facility sets the specific schedule of these hours. Students comply with the hours established for them by the clinical facility. Students may be required to work evening or weekend hours. In some clinics the scheduled hours may shift each day depending on patient care needs.

Due to these rigorous requirements, students are advised not to work during their clinical experiences. Students must be aware that if they choose to continue to work they must be prepared to make the clinical experience their number one priority. Failure to do so may jeopardize successful completion of the clinical.

Attendance: Attendance and punctuality are crucial to the successful completion of a clinical experience.

- **Notification:** It is the student's responsibility to provide both the clinic and the college with proper notification each day that s/he must be absent for any reason. The CI must be notified no later than 5 to 10 minutes of the opening of the facility. If the CI is not immediately available the student should leave a message and then call back and speak directly to the CI as soon as s/he is available by phone. The ACCE must also be notified no later than 9AM. The student may be asked by the CI and/or the ACCE to provide documentation to substantiate the need for the absence.
- Students are not allowed days off to attend to personal business or to interview for jobs.
- **Holidays:** Students follow the holiday schedule of the facility, not the Bay State College schedule.
- **Inclement Weather:** Students follow the decision of the facility. The student is responsible to report to the clinical site unless instructed otherwise by his/her CI or CCCE. If the student is unable to safely get to the clinical site s/he must provide appropriate notification to both the CI and to the ACCE. The student may be required to make up the day.
- **Making up time due to absences:** Up to two days missed due to illness, inclement weather, or emergencies may be made up at the discretion of the CI. Make up of absences of three days or more will be negotiated on an individual basis between the student, the CI, the ACCE and the CCCE.

Punctuality: It is the student's responsibility to arrive on time each day. If the student must be late due to unavoidable circumstances s/he must notify the CI as soon as possible. Habitual tardiness and/or attendance problems must be reported to the ACCE and jeopardize successful completion of the course.

Patient/Client confidentiality: Students must respect the confidential nature of all information regarding patients/clients and adhere to the Health Insurance Portability and Accountability Act (HIPAA). In addition, they must adhere to any additional policies and procedures of the individual clinical facility.

Dress Code: Students must conform to the dress code of the facility to which they are assigned. Students must confirm dress code requirements for the site by checking in the files available in the ACCE office and/or by contact with the CCCE and/or CI prior to the start of each clinical experience. In addition to the requirements of the individual facilities the following standards must be adhered to:

- Students must avoid wearing anything that may be a safety hazard, e.g. open footwear, clothing with fringe or other dangling parts. Jeans and T-shirts are not appropriate. Heels should be no more than 1" in height.
- Clothing must be clean and neatly pressed.
- Clothing must be non-provocative and non-revealing. Clothing that is tight, short, low-cut, or sheer is not appropriate.
- Clothing and jewelry must be free from symbols, insignia, words or images which may be disturbing or offensive to others.
- Jewelry must be safe and conservative. Students may wear small, non-dangling pierced earrings if allowed by the clinical site. They may NOT wear body-piercing jewelry on any other body part.

- Students will not be allowed on clinical if they have an open wound from recent body piercing. Students are not allowed to have a body part (including earlobes) pierced while on clinical because of the risks of infection.
- Tattoos may need to be covered. This will be at the discretion of the ACCE, CCCE or CI. Students are not permitted to get tattoos immediately prior to or while on affiliation due to the risk of infection.
- Name tag and a watch with a second hand or display must be worn.

Personal Grooming and Hygiene:

- Students must maintain excellent hygiene and a clean and neat appearance.
- Students must not wear perfume, cologne, scented body lotions or other hygiene products which contain a scent as patients and/or staff may be allergic.
- Nails must be kept short (no longer than ¼ inch) and clean. Artificial nails are not allowed. Nail polish, if allowed by the clinical site, must be conservative in color and not chipped.
- Hair must be pulled back from the face and must be appropriate in color(s), length, shape and style to comply with facility policies and/or as deemed appropriate by the ACCE, CCCE or CI.
- Any cuts, sores or open skin must have a protective covering

Use of electronic devices:

Unless a student shows documented evidence of a legitimate need in advance, cell phones, blackberries, palm pilots, or other electronic devices are not to be turned on or used when the student is actively engaged in a Clinical Education Experience. If allowed by the clinical site, the student may utilize these devices during a designated break period. The student may be temporarily issued and use a pager device for patient care related communication if that is the normal standard at the clinical site.

Social Networking:

Students have been educated on HIPAA expectations and will respect patient and clinical site privacy by not posting protected health or personal information regarding patients and/or site staff on any social networks, such as Facebook, Twitter, MySpace. Students are expected to respect and uphold patient, as well as site, confidentiality at all times.

The ACCE should be notified immediately of any serious problems regarding student behavior in this area. In the event that the ACCE is unavailable the student, the CI or the CCCE should contact the PTA Program Director.

Problem Situations: Students are expected to demonstrate the ability to handle issues with their performance and/or behavior while on a clinical in a mature, responsible and appropriate manner. Whenever possible, issues should first be discussed between the student and the CI. The CCCE can also be utilized as a resource for the student or the CI. The ACCE is available to help a student sort out the issues and identify possible approaches to remedy the situation. Current ACCE phone numbers are printed in the course syllabi.

The ACCE should be notified immediately of any serious problems regarding student performance and/or behavior. In the event that the ACCE is unavailable the student, the CI or the CCCE should contact the Program Director.

Active Participation in the Learning Process: As mentioned under Professional Behavior above, students are expected to engage in self-assessment and to take a very active role in their own learning process. Students are expected to:

- **Set clear goals** objectifying the areas in which they need to target improvement. Goals should be written before each clinical and then may be adjusted in discussion with the CI. Learning goals should be periodically discussed and updated throughout the affiliation. Normally this is done on a weekly basis in collaboration with the CI.
- **Participate in self-assessment** Throughout the clinical students should reflect on their own performance in order to meet established goals and to properly revise them. On each clinical the student is expected to complete a self-evaluation for the mid-term and final evaluations. The student completes the same evaluation form used by the CI. During the mid-term and final evaluation meetings the student and the CI should compare and discuss their individual ratings in each area.

Students are required to submit self-assessment assignments, via email to the ACCE at specified intervals during each Clinical Education Experience. This provides the ACCE with a mechanism for monitoring PTA student development. The ACCE responds to each of these assignments, providing the student with feedback and suggestions as warranted.

- **Ask questions** and identify areas in which additional study or research is needed.
- Be prepared to **answer questions** asked by the CI and to look up answers to the clinical and academic questions the experience generates.
- **Study** at home. Students may find they need to set aside 1 to 2 additional hours each night to review, study, and prepare for patient treatments the next day.
- **Use free time in the clinic productively.** When temporarily not busy with patient care students should request to help or observe another clinician at work or to make use of the clinic library or journals.

Clinical Education Costs: Students should be aware that there may be additional costs associated with each clinical experience which may include but are not limited to the following:

- **Housing:** Every attempt will be made to place students at clinical sites within a one-hour, one-way commute of their home. If a student chooses to seek housing closer to their assigned clinical site or if the student requests a distant out-of-state placement, all activities, costs and responsibilities associated with obtaining housing are their responsibility.
- **Meals**
- **Transportation** by car, subway, bus or train as necessary to get to the site. The program cannot guarantee a placement on a bus, train, or subway route and the student may be required to drive or otherwise arrange to be driven to the clinical site.
- **Parking costs**
- **Uniforms** or other dress requirements of the clinical site
- **A watch** with a second hand or digital display of seconds

Student Evaluation of a Clinical Experience and Clinical Instruction: The ACCE sends this APTA document to the clinical facility before the start of the affiliation. The student is responsible for completing this form by the end of the clinical. The student should review his/her evaluation of the site with the CI and/or the CCCE. The information provided by the student will help the staff improve the clinical experience for other students. The information is used by the ACCE to identify ways to support the development of the clinical faculty and to better guide future students who may be assigned to the site.

The form **MUST** be returned to the ACCE at the end of each clinical. Failure to do so will result in a failing grade for that clinical experience.

Student Evaluation of the ACCE and the Clinical Education Program: Students are required to provide feedback on the performance of the ACCE and the clinical education program after completion of Clinical Education I and III. The anonymous evaluation forms are returned to the PTA Program Chair who will in turn, review, share, and discuss the results with the ACCE as part of overall quality improvement efforts for the program.

THE ROLE AND RESPONSIBILITIES OF THE ACCE

The Academic Coordinator of Clinical Education (ACCE) is a full-time faculty member who is responsible for all aspects of the clinical education component of the PTA Program. S/he collaborates with the PTA Program Chair, and the academic and clinical faculty to ensure that the courses of the program function as an integrated whole in support of the program mission, goals, and objectives. The ACCE provides support to the student, the CI and the CCCE, before, during and after the actual affiliation.

The ACCE identifies appropriate clinical sites and clinical faculty that are capable of providing quality Clinical Education Experiences and which meet or exceed APTA guidelines for clinical education. S/he educates staff at clinical sites about the expectations, responsibilities, and benefits of a clinical education program. S/he ensures that necessary paperwork between the site and the college is in order, provides information about the Bay State College PTA Program curriculum, Clinical Education course syllabi and expectations for student performance. In addition s/he ensures that a clinical site accepting a student on affiliation receives all necessary student information and forms.

The ACCE provides programming for students to prepare them for their Clinical Education Experiences. In addition, s/he assists students by facilitating the best possible clinical site assignments based on the abilities, needs, and interests of the students. The ACCE works with the PTA Program Chair and other members of the academic faculty to ensure that students have demonstrated the levels of knowledge, skills, and core professional values required for the Clinical Education Experience. The ACCE guides students in the completion of their pre-clinical requirements and paperwork and in setting goals for Clinical Education Experiences.

During each Clinical Education Experience the ACCE is available by telephone and email to support the student, CI and CCCE. If the student is demonstrating problem behavior or substandard skill performance on a clinical the ACCE should be notified as soon as possible. In this case the ACCE may be in frequent telephone/email contact and/or may make multiple visits to the clinical site.

Except in extenuating circumstances, all students at clinical sites within the New England area are visited at approximately the mid- point of the experience. For students assigned to clinical sites outside the New England area at least one telephone conference is conducted. During this mid-term visit the ACCE or a designated PTA Program Faculty member meets with the student, the CI and, when possible, the CCCE. The purpose of this visit is to review the student's performance to date, discuss the student's identified strengths and weaknesses and to review and/or help establish a workable plan for targeting areas in need of improvement. The program faculty member meets in private with both the CI and the student to provide each an

opportunity to bring up any issues they may have trouble discussing or working out. S/he provides guidance to the student and/or the CI to facilitate resolution of any problems, goal achievement, and performance improvement. In addition important information regarding curricular issues and possible development needs of the CI and/or CCCE is gathered.

When a student has performance difficulties during a Clinical Education Experience the ACCE works closely with the CI and the student to provide support and guidance. This may necessitate additional meetings and/or telephone or email communications. The ACCE strives to assist in clarification of the performance deficit(s) and in the development of a performance improvement plan to facilitate student achievement of the established goals and course objectives.

After the clinical experience, the ACCE determines the grade for the clinical by following the procedure described in the Clinical Education grading section of this handbook. S/he may follow up with the CI and/or CCCE as needed to clarify ratings and comments on the form and may schedule meetings with individual students to help them understand areas in need of improvement in subsequent clinical experiences. The ACCE also provides PTA student advisors with information regarding student performance while on clinical. This enables the advisors to be of greater assistance to students.

If a student's performance on a Clinical Education Experience is not at a passing level, the ACCE notifies the student and the PTA Program Chair as soon as possible. The ACCE and PTA Program Chair will meet with the student to review and discuss the identified performance issue(s) and, if appropriate, to establish a plan for remediation. The ACCE and the PTA Program Chair collaborate to ensure that the student has satisfactorily met all requirements in the remediation plan prior to the student being allowed to retake the failed clinical experience.

As previously described in an earlier section of this handbook, the ACCE is responsible for gathering and analyzing data on the clinical education program as well as evaluating the performance of CCCEs, CIs, and the functioning of the Clinical Education Program as a whole. This information is used to guide quality improvement efforts for clinical faculty members and for the PTA program.

The ACCE also seeks evaluation of his/her performance by students and clinical faculty members. The data obtained from these evaluations helps the ACCE to improve personal job performance and the general functioning of the clinical education program.

THE ROLE AND RESPONSIBILITIES OF THE CCCE

An individual at each clinical site must be selected to act as the Center Coordinator of Clinical Education (CCCE). The requirements and qualifications for this role were described in a previous section of this handbook. The CCCE is responsible for the facility's student program and works with the ACCE from the PTA Program to set up plans for Clinical Education Experiences. S/he works closely with the ACCE to ensure that all necessary paperwork is exchanged. The CCCE decides if the clinical site is able to commit to accepting a student for a particular time frame. S/he also decides which PT/PTA at the facility is appropriately qualified and trained to act as CI for the clinical experience. It is recommended that CCCEs become familiar with and follow the APTA Guidelines and Self-Assessments for Clinical Education.

The CCCE should be an experienced clinician as well as an experienced clinical educator. S/he works with CIs to provide them with training and support as needed. Often the CCCE is involved with helping the CI make plans for a clinical experience before it begins.

During a Clinical Education Experience, the CCCE acts as an additional resource for the student and the CI. It is recommended that the CCCE hold periodic meetings with the student over the course of the clinical experience. These meetings serve several purposes: to discuss the PTA student's perceptions of his/her own development, the effectiveness of the CI, and to allow the CCCE to provide the student with additional feedback and guidance regarding his/her performance. The student should be encouraged to contact the CCCE at any time a student feels s/he is having difficulty with the clinical experience.

The CCCE is actively involved when a student is demonstrating problem behavior(s) and/or substandard performance during a Clinical Education Experience. The CCCE may work with the CI and the student to help clearly identify the problem behavior and/or skill performance and to develop clear improvement goals and plans to meet them.

Depending on the amount of opportunity the CCCE has had to observe the performance of the student s/he may be involved with the CI in the performance assessment process. The CCCE is expected to review and sign the Evaluation form. S/he may also provide feedback to the PTA Program regarding the preparation of the student and make suggestions for the PTA Program curriculum.

The CCCE works with the CIs to help them identify their development needs as instructors. The CCCE and the PTA Program ACCE establish a working relationship that can facilitate the ongoing development of the CIs and the student program.

THE ROLE AND RESPONSIBILITIES OF THE CI

Clinical Instructors (CIs) are experienced PTs or PTAs who have a minimum of one year of clinical experience and who choose to participate in the preparation of new clinicians. They feel a commitment to the profession of Physical Therapy and they derive personal pleasure and professional stimulation from the process of mentoring students. The requirements and qualifications for this role were described in an earlier section of this handbook. It is recommended that CIs become familiar with and follow the *APTA Guidelines and Self-Assessments for Clinical Education*. CIs must receive at least informal training in the role and are also strongly encouraged to participate in formal training processes and to become a Credentialed Clinical Instructor through the APTA. (Information on this program is provided in a later section of this handbook.)

CIs have demonstrated ability to excel at clinical teaching. It is expected that clinicians acting as CIs will make special efforts to ensure they maintain and further develop their own clinical knowledge and treatment skills. In addition, CIs are expected to actively work on developing and improving their abilities to teach and mentor students by taking courses or workshops, reading articles on clinical education, and engaging in discussions with other CIs, CCCE, and/or the ACCE.

The following is a summary of some of the main CI responsibilities.

Before the arrival of student: The CCCE and CI receive the information packets from the ACCE and the student approximately one month prior to the start of the clinical. The CI is expected to read through the information in both packets and to begin to formulate a plan for the Clinical Education Experience. The CI considers the following:

- The level of the Clinical Education Experience and its placement within the PTA curriculum
- The objectives from the course syllabi
- The student's preparation level according *Skills Competency and Critical Safety Elements List*
- The student's self-reported ability level (from the *Student Self-Assessment Form*)
- The nature of the clinical facility and the patient caseload
- Special experiences possible that might enrich the student's clinical experience
- His or her own preferred teaching style
- The student's reported preferred learning style (from the *Learning Style Profile Form*)

The CI sets up some preliminary goals for the clinical and makes a rough schedule for the six weeks. It is recommended that the CI collaborates with the CCCE in this activity. If needed, assistance may also be sought from the ACCE.

During the clinical:

First week: The CI meets with the student on the first day of the clinical to review both student and CI preliminary goals for the clinical. After discussion the student may need to re-write goals to be more closely aligned with the realities of the clinical site. The CI discusses plans for effective communications during the clinical with the student.

The CI provides the student with a complete orientation to the clinical facility, including safety procedures, treatment protocols, documentation, billing, patient scheduling, etc.

During the first few days the student usually is engaged primarily in observation and discussion with the CI and possibly other clinicians as well.

Interim weeks:

The CI ensures that the student is appropriately challenged through progressive, increasing involvement in the provision of patient care. The CI may, if he or she deems it appropriate, assign "homework" for the student to complete in the evening.

The CI may use a variety of teaching approaches to facilitate improvement in student performance. CIs are encouraged to be aware of the student's preferred learning style however, they are not expected to adapt themselves totally to those methods. Students are expected to be open to expanding their own experience and comfort level with a variety of teaching and learning styles.

It is important to note that the student's main focus should be on the attainment of his/her clinical education goals. While a student should gain experience in all aspects of PT department/clinic functions the student should never be used as a substitute for a PT aide, office staff, or as an "extra set of hands" in place of qualified, licensed staff.

The CI ensures effective communication and ongoing verbal feedback. The CI engages in continuous evaluation and monitoring of the student and keeps him/her informed of the positive and negative aspects of his/her performance. This is crucial to helping the student

make progressive gains toward the goals of the Clinical Education Experience. Ideally this should occur as soon as possible after patient intervention. Commonly this occurs informally in between patient treatment sessions.

CI's are also expected to set aside time daily to meet with the PTA student, discuss his/her performance and to plan for further learning opportunities. While this can be challenging to accomplish given the time constraints in the clinic, the importance of the provision of timely and clear feedback cannot be over stated. Students should also be encouraged to engage in continuous reflection and self-evaluation. Particular attention should be paid to safety and professional behaviors.

Weekly meetings:

CI's are expected to hold more formal meetings with the student to review his/her performance and to establish new learning goals. Together the CI and PTA student summarize the student's accomplishments, identify areas for improvement and create learning objectives to be addressed during the following week. This process can be facilitated by giving the student assignments to engage in self-assessment, update weekly goals, keep a short "journal", or complete other weekly performance review sheets. Samples of weekly performance review forms can be obtained from the ACCE.

PTA student feedback regarding the CI's performance is expected to be solicited by CI's. From these interactions the CI can identify areas that s/he may need to modify, based on the PTA student's learning needs.

The CI alerts the student, the CCCE and the ACCE to any concerns regarding student performance or behavior issues. CI's should utilize the *Anecdotal Record* or similar form to record significant examples of problematic or substandard student performance and the subsequent corrective action expected of the student. The student has the best chance to alter behaviors and improve performance if the issues are carefully and clearly delineated. Provision of explicit examples of positive and negative performances is important in helping the student to understand specifically what they need to do differently and to identify how the needed performance improvement can be accomplished. If the student is having difficulty achieving the goals and objectives for the clinical experience it is crucial that the CI notify the student, the CCCE, and the ACCE. All concerned need to work collaboratively to identify the scope and nature of the problem(s) and to facilitate improvements.

Anecdotal Record forms may also be used to record examples of positive or outstanding performance. Students who exhibit behaviors and skills that are stronger than expected also may need an alteration in approach. The CI will need to consider how to add higher levels of challenge or offer additional experiences to maximize the benefit for the student.

The CI is asked to complete and return the *Student Preparation for a Clinical Experience* form and return it to the attention of the ACCE within the first three weeks of the Clinical Education Experience. This form is included in the pre-clinical packet. It asks the CI to rate the student's level of preparation in key areas as the student started the experience. The data gathered by the ACCE from this document provides valuable information which the academic faculty may use in curriculum review processes.

Mid –Term Performance Evaluation: At approximately the end of the third week the CI gives the student a formal mid-term evaluation by completing and discussing the Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance

Evaluation form. In preparation for this meeting the student should complete one copy of the Evaluation form as a self-assessment. The student and the CI then compare their ratings and comments on the Evaluation form and discuss the student's strengths and weaknesses at that point in the affiliation. Together they formulate new goals for the final half of the clinical experience and develop a plan to help the student achieve them. Both the CI and the student sign the mid-term evaluation form.

Mid-Term ACCE site visit: The mid-term site visit with the ACCE provides a formal mechanism for the CI and the PTA student to summarize their views on student performance and to describe learning goals and plans for the remainder of the experience. This process is described in more detail in the section on the Role and Responsibilities of the ACCE.

Final Performance Evaluation: On the final day of the clinical experience the student and the CI meet formally for the final performance evaluation using the Evaluation form. Once again, the student completes an evaluation form as well as a self-assessment process. The CI reviews the ratings and comments given in detail with the student and they review the progress the student has made during the clinical together. The CI, the CCCE, and the student all sign the final performance evaluation form.

The student completes the *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction* form, created by the APTA in 2006. The student, CI, and CCCE should review and discuss the student's ratings and comments on this document on the final day of the experience. The CI and CCCE may wish to keep a copy of the form to guide performance improvement efforts within their student program.

The CI is also requested to complete the *Post-Clinical Self Assessment Form for Clinical Instructors*

The CI mails the Evaluation form, *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction* form, and the *Post-Clinical Self Assessment Form for Clinical Instructors* to the ACCE within 5 working days unless otherwise instructed.

RESOURCES FOR CLINICAL EDUCATION

The Bay State College Physical Therapist Assistant Program is committed to providing support and resources to affiliating CIs and CCCEs to assist in the continued development of their clinical program organization and their clinical teaching skills. Many resources exist for both new and experienced CIs and CCCEs. The following list highlights just a few of these. Individual or group training and additional resource for CIs and CCCEs can be obtained by contacting the ACCE.

- [Guidelines and Self-Assessments for Clinical Education](#), 2004 Revision, Published by the APTA, this document provides a nationally established framework for the provision of quality Clinical Education Experiences. The Bay State College PTA Program strongly encourages all affiliating clinical sites to make use of this excellent resource. This document may be accessed on the APTA web site at <http://www.apta.org>, or you may contact the Bay State College PTA Program ACCE..
- CIs and CCCEs are encouraged to enroll in the APTA Clinical Instructor Education and Credentialing Program. Information may be obtained on the APTA web site at <http://www.apta.org>. or through the Bay State College PTA Program ACCE.

- Clinical Education: An Anthology, Volumes I and II. Published by the APTA, 1992 and 1996 (Copies may be obtained through the APTA at the phone number listed above. Publication #E-25 and E-30)
- Handbook of Clinical Teaching by Nancy T. Watts, Ph.D., PT. Published by Churchill Livingstone - Longman Group UK, 1990.
- The Bay State College PTA Program ACCE can provide in-service programs on a number of topics related to clinical education. It is also possible to schedule one on one sessions with a faculty member or ACCE; in addition, they are available by phone Monday through Friday to answer your questions, provide support, and suggest resources. Contact the ACCE to make arrangements.
- The Bay State College PTA program hosts seminars to support CI and CCCE growth and development; these are free of charge. Each affiliating clinical site will receive notification of these sessions by mail.
- As a member of the Physical Therapist Assistant Consortium of New England, the Bay State College PTA program faculty actively participates in the Consortium's annual clinical faculty development seminar and ensures that all of its affiliating sites receive notification.
- The Bay State College PTA program ACCE maintains files of articles on a variety of topics related to clinical education.

Planning and Managing a Clinical Education Experience - Tips for New (and Experienced) CIs

Clinical Education Experiences require advance planning and preparation on the part of the CCCE and CI at the clinical site. The following is a brief summary of some points to consider well in advance of the student's first day.

Set up the logistics.

- Parking
- Dress code
- Hours
- Space within department
- Clarity regarding student supervision and expectations for support from other staff.

Review the materials sent in advance from the ACCE and from the student. Contact the ACCE with any questions or to request any additional information needed.

Contact with the student prior to the start date

Some CCCEs and CIs find it helpful to develop an information packet that can be sent to the student in advance. This packet may contain helpful information such as directions, parking, dress code, and hours. It also may include articles, policies and procedures, or suggested material to review to help the student be better prepared for the start of the clinical experience.

Some CCCEs and CIs require the opportunity to meet with the student prior to the first day of the clinical experience. This can be arranged by contacting the ACCE.

Plan for the orientation process

This orientation may need to be spread out over several days during the first week of the experience. Each student should be provided with an orientation that covers at minimum the following points:

- Physical layout of the facility
- Policies and procedures:
 - Safety
 - Facility infection control
 - Emergency procedures
 - HIPAA regulations
 - Other requirements as appropriate for the facility
- Meet key staff and orient to their roles
- Orient to the overall schedule/plan for the experience. Discuss/adapt student goals as appropriate
- Equipment frequently used
- Orient to current patient caseload
- Review Medical Records
- Review PT documentation structure
- Orient to billing/other record keeping
- Other. . . .

Plan the general structure and schedule of the experience

Consider the expectations of the program (course syllabus and other information) and the expectations of the facility. Think about and list the learning opportunities the facility has to offer a student. Also consider the CI's own clinical strengths and specializations as well as the strengths of other staff members and the special opportunities/experiences possible. It is helpful for the CI to formulate an overall vision for the experience and relate that to the time frame assigned.

A basic schedule should be developed for the clinical including orientation, weekly meetings, mid-term conference, special experiences, student in-service or special project presentation, and the final evaluation. Week by week "outlines" can help give structure and ensure that expectations are clear. Examples are available through the Bay State College ACCE.

Consider the special learning experiences possible at your facility. Scheduling time for these in advance makes it more likely that the student will be able to benefit from them.

Plan in advance when and to whom the student will be expected to present an in-service, case study, or other special project (refer to syllabus). It is also helpful to plan in advance the best days and times for a midterm visit from the ACCE to be scheduled.

Communication and feedback

Be aware of the communication "tone" you set; formal and structured versus informal and less structured. It is a good idea to make provisions for regular meeting times with the student (daily and weekly "check in" time) and to give some thought to how these meetings will be conducted. It is also beneficial to consider how the CI plans to give feedback to the student.

Communication can be facilitated and expectations clarified by using a weekly summary/goals tool. Samples are available through the Bay State College ACCE. This does not need to add to the CI's work load as the student can be charged to fill this out and review it with the CI weekly. These forms are designed to foster student self-assessment and they can help make sure the student and CI understand each other and are working toward the same goals.

Planning Learning Experiences

Consider the student's learning style, the CI's teaching style, and how they complement or contrast with each other. Of course, the level of the clinical experience (first clinical versus final clinical) as well as the complexity of the clinical setting will have a significant influence on the planning process. The CI should be sure to address all the "essentials" for learning. The following are some ideas:

- Think about the possible role of "home work" assignments. The CI may have the student "prep" for treatments in advance the night before and/or look up answers to questions identified during the day. The CI may give small assignments to research and report back.
- Mental practice has been shown to improve performance. The student may be asked to think about and discuss in advance a particular patient treatment. Ask the student to verbalize their reasoning and thought processes. It helps when the CI also models this type of "thinking out loud" for the student.
- How will the CI help the student take on progressively more and more responsibility and challenge over the course of the affiliation? Observation → Assist → Perform with supervision → Perform with distant supervision → Perform independently.

Regular and clear feedback on student performance is critical!

Try to couple "constructive criticism" with positive comments as much as possible. Also try to engage the student in self-critique/self assessment and ask the student to give you feedback periodically as well. As mentioned above, "Thinking out loud" for the student before or after an observation session helps develop higher level thinking skills. The CI can share his/her clinical thought processes. Discuss WHY a particular clinical choice was made over other possibilities. Engage the student in this type of verbalized thought process and reasoning.

Planning the Performance Evaluation Process

Keeping a log or other note system may help you remember key examples of performance for use when it comes time to complete the Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Performance Evaluation form. These notes may also include any anecdotal record forms that were completed. Keep in mind that anecdotal records can also be used for positive examples as well as negative. If the anecdotal record is used to document a problem behavior or incident, please notify the ACCE as soon as possible

It is a good idea to schedule time for the mid-term and final performance evaluation discussions right away to avoid being "surprised" when they are due. Periodically review the Evaluation form during the course of the experience. The CCCE and /or ACCE can provide assistance and guidance in the completion of the Evaluation form. Allow ample time to complete the form at Mid-term and final. One copy of the form is provided. Students have been provided a copy for their use.

During the mid-term and final performance evaluation meeting review and discuss the student's self-assessment ratings as the CI presents his/her assessment of the student's performance. Make use of the sample behaviors, instructions and glossaries to guide completion of the Evaluation form. Please include comments summarizing and explaining the visual analog rating, and/or describing example student behaviors. Identify, discuss, and clarify areas of significant disagreement on ratings between CI and student. Never hesitate to call on the ACCE for support or guidance!

Principles of Effective Instruction

(Adapted from Professor David Perkins' course, *Cognition and the Art of Instruction*, Harvard Graduate School of Education, Fall 1997, and from his book, *Smart Schools*, 1995, Free Press, New York)

Any effective instructional effort must attend to each of the following 4 key areas.

1. Provide Clear Information.

- Make sure the CI and the student are functioning from shared expectations and goals. Tell the student what to expect as well as what is expected from him/her.
- Tell the student how communication will occur. Inform them about your personal communication style and preferences. Discuss the types of teaching methods to be used (i.e. observation, case studies, mini-lectures, "Socratic method" (e.g. CI asks a series of questions to help the student discover the answers), homework assignments, etc.). A combination of methods is usually most effective.
- Provide a variety of opportunities for the student to receive information such as: observation, discussion, assisting with treatments, reading/reviewing materials, directed instruction, etc. Consider assigning reading/study to the student for time outside of the clinic. Discuss and demonstrate clinical problem solving methods. The information provided should relate well to the overall goals for the affiliation.

2. Allow Opportunities for Reflective Practice.

- Provide opportunities for the student to engage in the activity targeted by the learning process. The practice activity should relate to the affiliation goals. Gradually move the student from observer to active participant. The rate at which this is accomplished will vary depending on many factors including the clinical experience level, the student's ability, the complexity of the patient and the setting. The increments should be enough to provide "stretch" and encourage growth but not so much as to overwhelm the student.
- Provide opportunity for paper and verbal practice as well. For example, ask the student to write out or diagram their approach to treatments in advance and then explain it. Ask them to "talk it through" first.
- Provide opportunities to practice interactions with other staff and team members as well as to engage in patient/family education. Assign progressive responsibility for practicing documentation and engaging in reimbursement.

3. Provide Informative Feedback.

- In order to give feedback the CI must know how the student is performing. This means the CI must become a careful observer. Balance is needed between having the student watch/assist with treatments and allowing the student to "try their wings" and feel more independent.
- Feedback must be immediate if safety is an issue. For the best results in shaping performance, feedback needs to be given as soon as possible after the observed behavior. This is especially important if the feedback is negative.
- Methods of feedback can be informal (verbal) or formal (written). CIs may choose to frame the feedback in a positive voice or a negative one depending on the situation. Problem behaviors or significant knowledge or skill deficits should be formally documented and reviewed with the student. Use the Anecdotal Record form for significant events and keep the ACCE informed of any issues/concerns identified.

- Encourage continual student self-assessment. “Tell me, how do you think you did?” “What were the good points of your performance and what would you change next time?” “What would be helpful for you to study before you treat this patient again?” “Why did you do it that way and not the other way?” “What were the important factors you had to consider during this treatment?” Important insight into a student’s real knowledge and understanding levels can often be obtained by asking “why” questions and discussing their clinical reasoning process.
- Weekly meetings can be helpful to summarize progress and keep focused. It is a good idea to reformulate goals and plan for the week ahead. Use of a weekly mini- journal or similar techniques can be helpful.
- Be sure to allow sufficient time to both prepare the mid-term evaluation and to review/discuss it with the student. The student should be required to complete a separate evaluation form in advance as a form of self-assessment. Reformulate goals at the mid-term and develop a plan to help the student target areas in need of improvement.
- The final evaluation meeting provides an opportunity to help the student envision professional development goals for the next clinical or for their first year of practice. This is an important cornerstone of professional behavior.

4. Attend to Motivation.

- Consider the effects of intrinsic versus extrinsic motivation. Both can be effective but intrinsic motivation is the best for long-term learning. Encourage the student to draw more on their own intrinsic motivations (i.e. the desire to help their future patients by becoming a skilled PTA) rather than external motivators (such as PTA program requirements).
- Consider setting the student up to benefit even more from practice experiences by comments such as “This may be a bit tough but why don’t you try it? I believe you can do it!” The student won’t be overly discouraged if s/he doesn’t do well but will feel great and even more motivated if s/he succeeds. *Use appropriate praise. This is a great motivator!*

After the Clinical Experience

- The CI will be asked to provide the academic program with feedback and suggestions. This assists the faculty to evaluate program effectiveness and to identify possible needs for curricular revisions. CI feedback is highly valued and greatly appreciated. This collaboration between academic and clinical faculty is needed and welcomed.
- CIs are also encouraged to engage in self-evaluation and reflection during and after the clinical experience. The CI should think about his/her own learning experience and development as a clinical teacher. Questions to reflect on include: What could be done differently to improve the experience for the next student? What teaching techniques were effective and which did not have the desired results? What supports would the CI benefit from? What training opportunities can the CI attend to enhance his/her teaching ability? Taking time for this reflective process is the foundation of the development of strong clinical instructors. Remember that the ACCE is always available to offer assistance in this development process.

Samples of Clinical Education Related Forms Used by the Bay State College PTA Program

The following pages contain a variety of forms which students, CCCEs, CIs may utilize and/or use as reference. Instruction in use or additional copies may be obtained from the ACCE.



Bay State College Physical Therapist Assistant Program Student Clinical Education Experience Agreement

I, _____, agree to honor my commitment to participate in three supervised Clinical Education Experiences (PTA 130, PTA 240, and PTA 250) as a student enrolled in the Bay State College Physical Therapist Assistant Program. This may include additional experiences if deemed necessary by the PTA Program Chair and ACCE. I understand that I will be assigned to these clinical experiences by the program Academic Coordinator of Clinical Education in collaboration with the Program Chair and faculty. I have read and understand the descriptions of and requirements for these clinical education courses in the BSC Student Handbook, Clinical Education Handbook, and the PTA Student Manual.

For each of these three clinical experiences I agree to:

- Provide all required documentation to the ACCE within established deadlines. Such documentation includes, but is not limited to, proof of immunization for Hepatitis B, TB testing, CPR and first aid certification, and professional liability coverage.
- Provide evidence of any additional medical examinations, medical tests, and/or drug testing, which may be required by the clinical facility in addition to the basic BSC clinical education requirements as described in the PTA Student Manual.
- Authorize Bay State College to conduct Criminal Offence Record Investigation (CORI).
- Provide evidence of health insurance to Bay State College and to the clinical facility.
- Obtain and wear appropriate uniform if required by the clinical facility.
- Wear appropriate name tag (or other identification device if required by the clinical facility) with full name and student designation.
- Obtain any equipment or educational resources required by the clinical facility.
- Arrange for my own transportation.
- Obtain housing and meals unless provided by the clinical facility.
- Behave in a safe and professional manner at all times.
- Adhere to the policies and procedures of the clinical facility as well as to the policies and procedures outlined in the PTA Student Manual and Clinical Education Handbook.
- Respect the confidentiality of information regarding patients and clients of the clinical facility and their records in accordance with Health Insurance Portability and Accountability Act (HIPAA) regulations, and the established policies and procedures of the clinical facility.
- Respect the right of all patients to be informed of and to refuse student involvement in their care.
- Obtain written prior approval from the Clinical Facility and BSC before publishing any material relating to the clinical experience.

I understand that I will not be considered an employee of any facility providing me with a Clinical Education Experience and therefore have no rights to any employment related benefits.

Signature of Student

Date

Signature of ACCE

Date

I give permission to the Clinical Education Department to provide medical information to clinical sites under extenuating circumstances.

Signature of Student



PTA Program Clinical Affiliation Confirmation Letter and CI Information Form

Please review the following information, complete the bottom of this form as appropriate and return it as soon as possible using the pre-paid envelope we have provided. The information on the clinical instructor must be received prior to the start of the clinical.

FACILITY NAME: _____

This is to verify that the following Bay State College Physical Therapist Assistant Student(s) will participate in a Clinical Education Experience at this facility during the dates below:

Student Name(s)	Clinical Experience Level	Date(s)
To Be Determined	II -- outpatient	1/9/12-2/17/12

Please fill in information and/or check boxes as applicable:

CCCE Name: _____ Best phone: _____

Email (if you would like student to use email to contact you) _____

CI Name: _____ Phone for CI: _____

Information for the student(s):

- ___ Site information will be sent to the student(s) prior to the starting date.
- ___ Please have the student contact _____ (if other than the CCCE listed above)
- ___ Placement will be at the following *off-site* location:
 - Facility name: _____
 - Address: _____
 - Phone/email: _____

Brief summary of CI qualifications (this information is not shared with students): Please complete the following in order to provide a brief summary of the training this clinician has received to prepare him/her for the supervision of this student.

	Please fill in and/or circle answers
PT or PTA professional license number and state	
CI's terminal degree	
Number of years in clinical practice.	
Area(s) of clinical specialty, if any.	
Total # students CI has supervised.	
CI ethnicity (This information is requested so the program can track the diversity of our clinical faculty)	
Attended formal CI training seminar(s).	Yes/no - If yes, where?
Attended In-house training from experienced CCCE and/or CIs	Yes/no
Completed APTA Clinical Instructor Certification Program	Yes/no – if yes, when?
Please provide any other pertinent information regarding this CI or his/her needs for support prior to or during the clinical experience.	

Please use the back of this form for additional comments or special instructions for ACCE or student(s).

CCCE Signature _____ Date: _____

Please return this form to Eileen Small, PTA, ACCE, in the enclosed envelope. Please contact us with any questions at (617) 217-9437 or esmall@baystate.edu . THANK YOU!



**BAYSTATE COLLEGE
PHYSICAL THERAPIST ASSISTANT PROGRAM
Clinical Education Student Data Form**

Student Name _____ Date _____

Please provide the address and phone number where you can be reached during the 4 weeks prior to the start of your upcoming affiliation.

StreetAddress _____

City/State/Zip _____

Area code/phone number: _____

Email Address _____

Please provide the address and phone number where you can be reached during the dates of your upcoming affiliation if different than above. Same as above

StreetAddress _____

City/State/Zip _____

Area code/phone number: _____

PERSON TO BE NOTIFIED IN CASE OF ILLNESS OR ACCIDENT WHILE ON AFFILIATION:

Name _____

Area Code/phonenumner _____

Street Address _____

City/State/Zip _____

Relationship _____

HEALTH INSURANCE INFORMATION

Insurance Company name _____

Policy ID number _____

Subscriber name _____

Group number _____

Please list any prescription medications you are currently taking, emergency medications you carry with you and/or medications you are allergic to so this information will be available in case of emergency.

Students requiring special accommodations during affiliations must notify the ACCE *and the PTA Program Director* prior to the start of the clinical affiliation.



**Bay State College Physical Therapist Assistant Program
STUDENT LEARNING STYLE PROFILE**

The purpose of this form is to facilitate communication between the student and the clinical instructor regarding the ways in which the student feels he or she learns best. The student completes this form and mails it to the clinical site at least one month prior to the start of the clinical experience. This will allow the clinical instructor time to review the Learning Style Profile and use the information when planning the Clinical Education Experience.

Students must remember that they can not expect their learning experiences while on clinical to be altered to completely match with their preferred learning styles. Students must also be willing to experiment with different styles of teaching and learning.

Student Name: _____ **Date:** _____ **Circle: CE I II III**

1. In new social situations I tend to be (circle the number on the scale that most closely matches your own response.)

1 (uncomfortable)	2	3	4	5 (very comfortable)
1 (reserved)	2	3	4	5 (outgoing)

Other (please describe) _____

2. The time of day I am most alert and at my best is: _____

3. My attention span is: _____ short _____ average _____ long

4. When involved with intensive learning activities I need a break about every
_____ minutes or _____ hours or, other _____

Comments: _____

5. I prefer learning environments that are:
(Please circle the number that best matches your choice for each of the three following scales)

1 (highly structured)	2	3	4	5 (very unstructured)
1 (quiet and calm)	2	3	4	5 (full of activity and noise)
1 (slow paced)	2	3	4	5 (fast paced)

Comments:

6. My top five choices to support myself when learning new information are:
(Please rate your top five choices from the following list with # 1 being your first choice)

	Read about it		Write about the topic
	Listen to information presented on the topic		Manipulate a model or other simulation
	Observe a demonstration		Perform the related activity
	See a diagram, model or graph		Visualize information in my head
	Draw a diagram, model or graph		Teach someone about it
	Discuss the information with someone		

Comments or other choices: _____

7. My top 5 choices when learning a new skill are:
(# 1 is first, use N/A if you would not choose the activity)

	Observe someone performing the activity		Write out plan
	Discuss the rationale and theory		Perform the technique myself
	Receive an overview of the whole process		Assist with the technique
	Read back up materials on the activity		

Comments or other choices: _____

8. If my CI uses the “*Socratic method*” (teaching by asking questions) within the first few days of my affiliation I will: (Please check the response that most closely matches your own.)

	Enjoy it		Faint
	Struggle a bit but do fine		Mentally freeze

Comments or other choices: _____

9. When receiving feedback on my performance I prefer to:
(Check the response that most closely matches your own.)

	If possible, be given feedback while I am performing the task		Sit down at the end of the day and receive all comments at once.
	Be given feedback as soon as possible after performing the task		Other: _____

Comments or other choices: _____

10. I respond best to feedback that is (Check the response the most closely matches your own.)

<input type="checkbox"/>	Given in positive terms as much as possible.	<input type="checkbox"/>	A mix of positive comments with suggestions for improvements.
<input type="checkbox"/>	Given as directly as possible. "Negative" feedback is fine with me.	<input type="checkbox"/>	Given as directly as possible but worded as positively as possible.

Other (please elaborate): _____

11. When learning something new I tend to need feedback:
(Check the response that most closely matches you own.)

<input type="checkbox"/>	Frequently. I like to be sure I am getting it right.	<input type="checkbox"/>	Infrequently. I am a fast learner.
<input type="checkbox"/>	Frequently at the start but infrequently once I begin to understand it.	<input type="checkbox"/>	Other: _____

Comments: _____

12. Please use the following space to provide your CI with any other helpful information about the ways in which you learn best.

NOTE: Students with a documented disability who wish to seek special accommodations while on affiliation must contact the PTA Program Chair and the ACCE BEFORE the start of the clinical experience regarding their needs.



Bay State College Physical Therapist Assistant Program Student Self-Assessment Form

The purpose of this form is to guide you in self-assessment and to provide your clinical instructors with information on how you perceive your experience level and competency in major categories of clinical skills. It also provides information on your familiarity with various diagnostic categories and treatment settings. This information will assist you, the ACCE and your clinical instructors in planning Clinical Education Experiences to best meet your needs.

Accurate self-assessment is an important professional skill. Completion of this form provides you with practice in this skill. Be honest and thoughtful in your responses. Your ratings on this form should be discussed with you academic advisor as part of your preparations for each clinical.

Student Name: _____ **Date:** _____ **Circle: CE I II III**

Please rate your exposure to and competency in the following categories of patient care. Exposure refers to the extent to which you have studied the subject matter in lecture, lab and/or on a previous clinical (if any). Competency refers to your ability to perform the activity accurately and skillfully with varying levels of supervision or guidance. You should consider your experience and preparation from lecture, labs and previous clinical experiences (if any).

Use the following scale: 0 = no exposure/no competency to 4 = in-depth exposure/fully competent no supervision needed.

TREATMENT SKILLS

Treatment Categories	Exposure					Competency				
	0	1	2	3	4	0	1	2	3	4
Therapeutic exercise										
Modalities										
Soft tissue mobilization										
Joint mobilization(extremities) Lecture exposure only										
Neurological treatment techniques										
Sterile technique/infection control										
Bed positioning										
WC positioning										
Balance activities										
Gait										
Cardio pulmonary										

Comments: _____

TEACHING

Category	Exposure					Competency				
	0	1	2	3	4	0	1	2	3	4
Body mechanics										
Mobility training										
Gait training										
ADL training										
Transfer training										
Safety training										
Adaptive equipment use										
Home exercise programs										

Comments: _____

ASSESSMENT SKILLS

Assessment Category	Exposure					Competency				
	0	1	2	3	4	0	1	2	3	4
Cognitive status										
Vital signs										
Skin condition										
Pain										
Goniometry										
Manual muscle test										
Soft tissue										
Sensation/reflex										
Posture										
Neurological										
Functional/ADL										
Balance										
Gait										
Wounds										

Comments: _____

PROCESS/ADMINISTRATION SKILLS

Skill	Exposure					Competency				
	0	1	2	3	4	0	1	2	3	4
Safe patient care										
Monitoring response to treatment										
Modifying treatment within plan of care										
Time management										
Documentation										
Insurance reimbursement/billing										

Comments: _____

TYPES OF DIAGNOSES

Diagnoses	Exposure To					Competency Treating				
	0	1	2	3	4	0	1	2	3	4
Orthopedic										
Neurological										
Cardio-pulmonary										
General medical										
Other:										

Comments: _____

PATIENT POPULATIONS AND SETTINGS

Please rate your exposure to and experience working with the following patient populations and treatment settings. **For Experience use the following scale 0 = no experience with an actual patient of this type or in this setting, 4 = extensive experience in a prior clinical or prior work setting.** Please use the comment section below to explain.

Patient Population or Setting	Exposure					Experience with				
	0	1	2	3	4	0	1	2	3	4
Geriatric										
Adult										
Pediatric										
Inpatient acute										
Inpatient rehab										
Transitional Care Unit										
Skilled Nursing Facility										
Hospital based outpatient										
Private Practice										
Sports-focused outpatient										
Home healthcare										
School setting										
Early Intervention										
Other:										

Comments: _____

AFFECTIVE/COMMUNICATON SKILLS

Please rate your confidence level in each of the following categories. Use the following scale: 0 = no confidence to 4 = fully confident and independent.

Affective or Communication Skill	Competency				
	0	1	2	3	4
Communicate effectively with patients and families					
Communicate effectively with other healthcare workers					
Respond appropriately to nonverbal communication from others					
Modify behavior in response to feedback received					
Provide appropriate feedback to clinical instructor					
Appropriately handle conflict					



Bay State College
Physical Therapist Assistant Program
Clinical Education Student Goals

Student Name: _____ **Date:** _____

Clinical Facility: _____

Clinical Education Course: **PTA130** **PTA240** **PTA250**

Please complete the following information based on your experience in lecture, lab, and if applicable, previous Clinical Education Experience(s). This information will assist your clinical instructor in planning the clinical experience.

Indicate your top four areas of strength:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Indicate your top four areas for improvement:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Draft four *specific, realistic, objective and measurable* goals you hope to accomplish during this Clinical Education Experience. These should relate to your areas for improvement and should be appropriate for the setting where you are assigned.

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Use this space and the back of this sheet to provide any other pertinent information about yourself, your goals and/or your special interests: _____



Bay State College Physical Therapist Assistant Program

Use of the Clinical Education Experience Anecdotal Record Form

The purpose for the Anecdotal Record Form is to provide CI's with a means of recording significant examples of student performance and behavior when they occur. *The form can be used to document positive as well as negative incidents.* However, the use of the Anecdotal Record is a particularly important for documenting problem performance or behavior. In addition to providing a permanent record that the occurrence was discussed with the student, it provides an over-all framework for the discussion that the CI may find helpful.

Through documentation of all problem performance and behavior is essential. The form must be carefully reviewed with the student. The student should be made aware of potential repercussions if the negative behavior/performance problem continues, such as lowering of rating on performance evaluation and/or potential failure of the clinical. The student, the CI and/or the CCCE must sign the form. Student signature signifies that the incident, consequences, and expectations future performance were discussed with them.

Report the incident as it occurred in as objective a manner as possible. Be certain that the potential or actual negative consequences and the expectations for future performance are very clear. In some instances it may be helpful to have the CCCE sit in on the discussion with the CI and the student.

If performance or behavior problems significant enough to warrant use of this form are observed contact with the ACCE, (617) 217-9437 or esmall@baystate.edu, is important. All Anecdotal Record forms must be returned to the ACCE along with the performance evaluation at the end of the affiliation.

**BAY STATE COLLEGE
PHYSICAL THERAPIST ASSISTANT PROGRAM
CLINICAL EDUCATION EXPERIENCE ANECDOTAL RECORD**

Student Name: _____ Date: _____

Clinical Instructor: _____ Facility: _____

The following is a record of a critical incident or behavior. (Use back of the sheet or attach a separate page if needed). All Anecdotal Records must be returned to the ACCE with the final performance evaluation form. The ACCE should also be notified of significant problem performance or behavior issues when they occur.

Date and time of incident:

Setting:

Individuals involved:

Student action or behavior:

CI's evaluation of consequences of student action or behavior:

Student's comments:

CI/Student understanding regarding behavior/actions expected in the future:

The information above was discussed with me. I understand the concerns raised and the performance/behavior expected of me in the future.

Student Signature

Date: _____

Clinical Instructor Signature

Date: _____



Bay State College Physical Therapist Assistant Program CLINICAL AFFILIATION MID-TERM CONFERENCE

This form is completed during ACCE visits to clinical sites actively engaged in provision of a Clinical Education Experience. These questions assist the ACCE in obtaining information regarding the learning experiences offered, student performance, clinical instructor effectiveness, academic program effectiveness, and CI, CCCE and/or clinical site development needs.

Student: _____ Date: _____ CE level: I II III
 Facility: _____ Type: _____

Dates (if off sequence): _____ ACCE: _____

Clinical Instructor(s): _____

*CCCE and/or CI email _____ Facility URL _____

Briefly describe the patient population and the nature of the experience offered to the student. Include information on the clinical focus of the facility if appropriate.

Summary of student performance at mid-term visit.

Days absent _____ # tardy _____ Proper notification to CI and/or ACCE? Yes No

Please use this scale: - Performance concern √ Developing/acceptable, + Above average

Component	Rating	Comments
<i>The "red flag 5"</i> - Safety, responsibility (including level of initiative), respectfulness, ethical, legal		
Interpersonal skills including verbal communication skills		
Written communication skills/documentation		
Clinical thought processes. (E.g.: understanding treatment rationales, clinical problem solving, understanding & participating in treatment progression.)		
Competence in treatment skills		
Data collection skills		
Teaching skills		
Management of resources (i.e. managing schedule, use of "down time")		
Other:		
Overall rating of student performance to date		

Questions for the student:

	Yes	No	Comments
Was preliminary information provided to you about this site adequate?			
Was the orientation to the site adequate?			
How often do you meet with your CI? BID Daily Weekly Other			
Is the communication/feedback from your CI sufficient and helpful?			
Are you and CI establishing, adapting, and accomplishing objectives for the affiliation			
Is your CI an effective teacher?			
Do you receive guidance/assistance from staff other than your CI?			
Would you recommend this site to other students?			
How far from your home was this clinical site? How long was your commute?			

Use the space below for any other comments regarding the student's perception of how the clinical site is or is not meeting his/her needs:

Questions for the CI:

Explain that these questions are used to help us improve our PTA program and determine how we can better meet the needs of our CIs and our clinical sites. In addition, they help us ensure compliance with accreditation standards.

Were the materials CI received before the student's arrival and communications with the BSC PTA Clinical Education Program adequate? Yes No

Suggestions for the BSC PTA Clinical Education Program: _____

Approximately how many students has CI supervised (*including current student*)? _____

Is CI an APTA credentialed clinical instructor? Yes No

If not, is s/he interested in receiving this training? Yes No

Comments: _____

Information on CI training courses provided: Yes No

CI's area(s) of clinical focus, if any: _____

Does CI have any special clinical certifications/specializations? (E.g. ABPTS, OCS, etc.)

CI's suggestions for clinical education related in-services, seminar topics, or other and requests for needed support. _____

Summary of CI or Clinical Site development needs from the ACCE perspective and other pertinent comments:

Bay State College PTA Program Student Clinical Education Experience Grading Rubric

<p>KEY</p> <p>1 = constant supervision 2 = supervision 3 = guidance 4 = confirmation</p>
--

Student Name: _____

I. PROFESSIONAL BEHAVIOR AND ATTITUDE

	Facility/Date:			Facility/Date:			Facility/Date:		
	CEI Min	CEI	Comments or Distinctions	CEII Min	CEII	Comments or Distinctions	CEIII Min	CEIII	Comments or Distinctions
CRITERION:									
1.1 The student demonstrates professional and ethical behavior									
*1.1.1 Is punctual and dependable and adheres to scheduled assignments.	3			4			4		
*1.1.2 Wears appropriate attire/maintains appropriate hygiene.	3			4			4		
*1.1.3 Adheres to ethical and legal standards of practice.	2			3			4		
*1.1.4 Treats clients in a manner which reflects dignity, respect, and value for human life.	3			4			4		
*1.1.5 Maintains confidentiality and uses discretion when with, and in front of clients.	2			3			4		
1.1.6 Demonstrates initiative and accepts responsibility for learning.	3			3			4		
1.1.7 Demonstrates active listening which indicates the student is receptive to learning.	3			4			4		
1.1.8 Accepts criticism and responds in a manner which reflects an understanding of constructive criticism.	3			4			4		
1.1.9 Expresses an attitude reflective of cooperation and flexibility.	3			3			4		
1.1.10 Maintains a balance between personal and professional relationships with staff and clients.	3			3			4		
AVERAGE	2.8			3.5			4		

II. SAFETY

CRITERION:	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions
2.1 The student demonstrates safe practice	2			3			4		
*2.1.1 Adheres to health and safety regulations according to facility/OSHA standards.									
*2.1.2 Recognizes changes in the client's physiological and psychological status.	2			3			4		
*2.1.3 Responds appropriately to changes in the client's physiological and psychological status.	2			3			4		
*2.1.4 Develops safe client care programs.	1			3			4		
*2.1.5 Implements safe client care programs.	2			4			4		
*2.1.6 Uses appropriate body mechanics for self and client.	2			4			4		
*2.1.7 Requests appropriate assistance when necessary.	3			4			4		
*2.1.8 Recognizes and addresses indications, contraindications, and precautions to treatment.	2			4			4		
*2.1.9 Maintains working area in a manner conducive to efficiency and safety.	2			3			4		
AVERAGE	2			3.4			4		

III. COMMUNICATION AND INTERPERSONAL SKILLS

CRITERION:	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions
3.1 The student demonstrates effective verbal communication skills.									
3.1.1 Establishes effective communication with client/family.									
3.1.1.1 Offers appropriate introduction.	3			4			4		
3.1.1.2 Accurately teaches purpose of chosen treatment procedures.	2			3			4		
3.1.1.3 Provides appropriate and timely feedback.	2			3			4		
3.1.1.4 Prepares client/family for discharge/home programming.	1			3			4		
AVERAGE	2			3.2			4		
3.1.2 Establishes effective communication with clinical instructor(s).									
3.1.2.1 Demonstrates understanding of the supervisory role of the clinical instructor.	2			4			4		
3.1.2.2 Takes active role in establishing goals for this clinical experience.	3			4			4		
3.1.2.3 Asks relevant questions in a timely and appropriate manner.	2			4			4		
3.1.2.4 Gives appropriate and timely feedback to supervisor.	2			3			4		
3.1.2.5 Demonstrates awareness of own strengths and weaknesses and actively seeks to improve self.	2			3			4		
3.1.2.6 Communicates need for appropriate referrals to supervisor.	1			3			4		
AVERAGE	2			3.5			4		

III. COMMUNICATION AND INTERPERSONAL SKILLS (continued)

3.1.3 Establish effective communication with other members of the health care team.						
3.1.3.1 Initiates regular communication when appropriate.	2			3		4
3.1.3.2 Prepares and reports accurate and pertinent information.	2			3		4
3.1.3.3 Recognizes the responsibilities of each member of the health care team, and participates as a team player.	2			3		4
3.1.3.4 Participates in discharge plan and follow-up care.	1			2		3
3.1.3.5 Participates in teaching other members of the health care team with methods appropriate for the audience.	2			3		4
AVERAGE	1.8			2.8		3.8
3.2 The student demonstrates appropriate nonverbal communication skills.						
3.2.1 Recognizes the effects of his/her own nonverbal communication upon others.	2			3		4
3.2.2 Adjusts own posture, gesture and facial expressions to meet situational demands.	2			3		4
3.2.3 Correctly interprets and responds to nonverbal behavior of others (clients, family, and team members).	2			3		4
3.2.4 Uses alternative communications (signs, gestures) to reinforce verbal communication as indicated.	2			3		4
AVERAGE	2			3		4

III. COMMUNICATION AND INTERPERSONAL SKILLS (continued)

3.3 The student demonstrates appropriate and effective documentation skills.									
*3.3.1 Maintains documentation format in accordance with policies of the facility (written, dictated, computerized, etc.).	3				4				4
3.3.2 Writes in an organized, logical, and concise manner.	2				3				4
3.3.3 Writes legibly using correct spelling and grammar.	2				3				4
3.3.4 Uses appropriate medical/lay terminology and abbreviations as indicated.	2				3				4
*3.3.5 Information contained in written material is pertinent, accurate, and timely.	2				3				4
AVERAGE	2.2				3.2				4
Average of 3.1.1	2				3.2				4
Average of 3.1.2	2				3.5				4
Average of 3.1.3	1.8				2.8				3.8
Average of 3.2	2				3				4
Average of 3.3	2.2				3.2				4
SECTION 3 OVERALL AVERAGE	2				3.1				3.9

IV. PROCEDURES

CRITERION:	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions
4.1 The student demonstrates accurate assessment skills.												
4.1.1 Performs data gathering procedures correctly.												
4.1.1.1 goniometry/end feel assessment/flexibility	2			3			4					
4.1.1.2 manual muscle testing/strength	2			3			4					
4.1.1.3 skin/vascular integrity/wound assessment	2			2			3					
4.1.1.4 postural assessment	2			3			4					
4.1.1.5 vital signs	2			3			4					
4.1.1.6 muscle tone assessment	1			3			3					
4.1.1.7 reflex assessment	1			3			4					
4.1.1.8 pain assessment	2			3			4					
4.1.1.9 balance/righting/equilibrium reactions	2			3			4					
4.1.1.10 endurance	2			3			3					
4.1.1.11 architectural/environmental modifications	2			3			3					
4.1.1.12 gait assessment	2			3			3					
4.1.1.13 ADL assessment	2			3			4					
4.1.1.14 respiratory/pulmonary assessment	2			3			4					
4.1.1.15 anthropometric assessment (leg length, girth volume)	2			3			4					
AVERAGE	1.8			2.9			3.7					

IV. PROCEDURES (continued)

4.2. Treatment Skills: The student effectively uses the following treatment interventions effectively.									
4.2.1 Physical agents									
4.2.1.1	ultrasound	2					3		4
4.2.1.2	electrotherapy	2					3		3
4.2.1.3	hot packs	3					4		4
4.2.1.4	cold packs	3					4		4
4.2.1.5	contrast bath	2					3		3
4.2.1.6	biofeedback	2					3		3
4.2.1.7	hydrotherapy	2					3		4
4.2.1.8	traction (cervical and pelvic)	2					3		4
4.2.1.9	intermittent compression	2					3		3
4.2.1.10	soft tissue mobilization techniques	2					3		4
4.2.1.11	paraffin	3					4		4
4.2.1.12	TENS	2					3		4
4.2.1.13	fluidotherapy	3					4		4
4.2.1.14	ionto/phonophoresis	2					3		3
4.2.1.15	shortwave diathermy	2					3		3
4.2.1.16	other (please specify)								
AVERAGE		2.2					3.2		3.4

IV. PROCEDURES (continued)

4.2.2 Therapeutic techniques										
4.2.2.1 ROM exercises	2				3				4	
4.2.2.2 strengthening exercises	2				3				4	
4.2.2.3 exercise equipment	2				3				3	
4.2.2.4 stretching exercises	2				3				4	
4.2.2.5 developmental activities	2				3				3	
4.2.2.6 facilitation/inhibition techniques	2				3				3	
4.2.2.7 balance activities	2				3				4	
4.2.2.8 endurance activities	2				3				4	
4.2.2.9 coordination activities	2				3				3	
4.2.2.10 postural activities	2				3				4	
4.2.2.11 tone management	2				3				3	
4.2.2.12 other (please specify)										
AVERAGE	2				3				3.5	

IV. PROCEDURES (continued)

4.2.3 Functional activities									
4.2.3.1 bed mobility	2				3			4	
4.2.3.2 transfers	2				3			4	
4.2.3.3 wheelchair mobility	2				3			3	
4.2.3.4 orthotics/prosthetic management	NA				2			3	
4.2.3.5 ADL training	2				3			4	
4.2.3.6 gait training	2				3			4	
4.2.3.7 assistive/adaptive devices	2				3			3	
4.2.3.8 other (please specify)									
AVERAGE	2				2.8			3.6	
4.2.4 Cardiopulmonary care									
4.2.4.1 postural drainage	NA				3			3	
4.2.4.2 breathing & coughing exercises	NA				3			3	
4.2.4.3 percussion/ vibration	NA				3			3	
4.2.4.4 other (please specify)									
AVERAGE	NA				3			3	

IV. PROCEDURES (continued)

4.2.5 Effectively implements PT POC for:		Site Specific					
4.2.5.1 burn/wound care	NA			2			3
4.2.5.2 pediatrics	NA			2			3
4.2.5.3 sports	NA			2			3
4.2.5.4 geriatrics	NA			2			3
4.2.5.5 aquatics	NA			2			3
4.2.5.6 equestrian	NA			2			3
4.2.5.7 bandaging & wrapping	NA			2			3
4.2.5.8 work hardening	NA			2			3
4.2.5.9 other (please specify)							
AVERAGE	NA			2			3
Average of 4.1	1.8			2.9			3.7
Average of 4.2	2.2			3.2			3.4
Average of 4.2.2	2			3			3.5
Average of 4.2.3	2			2.8			3.6
Average of 4.2.4	NA			3			3
Average of 4.2.5	NA			2			3
OVERALL SECTION 4 AVERAGE	2			2.8			3.3

V. CRITICAL THINKING SKILLS

CRITERION:	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions
5.1 The student demonstrates effective critical thinking skills.												
5.1.1 Recognizes and understands data pertinent to client care.	2			3			4					
5.1.2 Understands physical therapy problems as outlined by the plan of care.	2			3			4					
5.1.3 Prioritizes treatment objectives for clients with complex medical needs.	1			3			4					
5.1.4 Selects, utilizes, and applies appropriate information from medical resources pertinent to the client's treatment plan.	1			3			4					
5.1.5 Identifies the need for client re-evaluation by the physical therapist.	1			3			4					
5.1.6 Identifies rationale for treatment objectives and techniques.	2			3			4					
5.1.7 Identifies the need for outside referral and consults with the physical therapist.	1			3			3					
5.1.8 Identifies and utilizes alternative methods or procedures to acquire desired outcomes within the plan of care.	1			3			3					
5.1.9 Selects a logical treatment sequence to enhance comfort efficiency, and effectiveness.	1			3			4					
*5.1.10 Integrates information to adapt treatment techniques within the plan of care according to the client's individual response.	1			3			4					
5.1.11 Assists the physical therapist in addressing primary and secondary prevention needs of individuals and groups.	2			4			4					
AVERAGE	1.4			3.1			3.8					

VI. ORGANIZATIONAL & ADMINISTRATIVE SKILLS

CRITERION:	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions	CEI Min	CEI	Comments or Distinctions
6.1 The student demonstrates organizational and administrative skills.									
6.1.1 Organizes time effectively and works within time limits.	2			3			4		
6.1.2 Uses free time productively.	3			4			4		
6.1.3 Coordinates simultaneous treatment of clients as appropriate.	1			3			3		
6.1.4 Complies with administrative procedures (i.e. scheduling, transportation, coordination with other appointments, etc.) required.	2			3			4		
6.1.5 Delegates appropriate responsibilities to supportive personnel as indicated.	1			3			4		
6.1.6 Performs additional/related duties as defined by the facility.	3			4			4		
6.1.7 Participates in fiscal management of the physical therapy clinical setting (i.e. billing).	2			3			4		
6.1.8 Participates in activities addressing quality of service delivery.	1			3			3		
6.1.9 Implements a self-directed plan for career development and lifelong learning.	3			4			4		
AVERAGE	2			3.3			3.8		
PASS/FAIL BASIS									
In-Service Case Presentation Special Project Quality Assurance	P			P			P		
Additional Comments on above item									
FINAL GRADE	P			P			P		



**Bay State College Physical Therapist Assistant Program
Student Preparation for Participation in Clinical Education I
Clinical Instructor Survey Form**

Clinical Site: _____ Date: _____

Facility Type: _____ Individual completing form: CI CCCE

The purpose of this survey is to provide the Bay State College Physical Therapist Assistant Program Faculty with important information relating to the level of preparation of the student you supervised as they were beginning the Clinical Education I experience. Your completion of this survey, along with data from other clinical sites, will contribute to our evaluation of the effectiveness of the academic courses in the first year of our PTA program. Your comments and feedback will help us conduct our curriculum review and strengthen our PTA program in the best interests of future students. This information is not linked to the individual student and has no effect on the grade for this clinical education affiliation.

Please indicate your rating of the student's level of preparation in the following areas as they began the Clinical Education I experience with you.

Scale: 0 = not prepared, 1 = inadequate, 2 = adequate 3 = above average 4 = very well prepared N/O = not observed

Category	0	1	2	3	4	N/O
Knowledge and demonstration of professional ethics						
Knowledge and demonstration of safe clinical practice						
Knowledge and demonstration of legal practice						
Knowledge and demonstration of APTA professional standards of practice						
Knowledge of PT/PTA roles						
Ability to recognize and respect individual differences						
Medical terminology						
Basic understanding of US healthcare systems						
Basic understanding of reimbursement issues						
Anatomy * Musculoskeletal						
* Neurological						
* Integumentary						
* Cardiopulmonary						
Pathology * Musculoskeletal						
* Neurological						
* Integumentary						
* Cardiopulmonary						
Kinesiology – theory of movement						
Communication * With patients and families						
* With Clinical Instructor						
* With other staff						
* Documentation skills						
* Patient teaching skills						

Category	0	1	2	3	4	N/O
Knowledge & performance of basic patient care skills						
• Infection Control						
• Positioning/draping						
• Dressing and other ADLs						
• Body mechanics						
• Transfers						
• Basic gait training/assistive devices						
• Passive, active assisted & active ROM						
Knowledge & performance of assessment skills						
• Goniometry/flexibility						
• Anthropometrics						
• Manual muscle testing						
• Pain assessment						
• Sensation and reflex						
• Posture and balance						
• Vital Signs						
• Environmental assessment						

Please feel free to attach an additional page as needed in responding to the following:

Please provide an explanation for any area you rated below a '3' on the chart above:

What were the strengths of the student's preparation at the start of the clinical?

Based on the preparation level of this student, what recommendations do you have for our PTA curriculum?

Thank you very much for your observations, comments and suggestions. You have made a difference for our student and for our PTA program!



**Bay State College Physical Therapist Assistant Program
Student Preparation for Participation in Clinical Education II and III
Clinical Instructor Survey Form**

Clinical Site: _____ Date: _____ Facility type: _____

Level of clinical experience: CE II CEIII Individual completing: CI CCCE

The purpose of this survey is to collect information on how prepared BSC PTA senior students were for their final clinical experiences. The information from this survey, along with data from other clinical sites, will provide data for evaluating the effectiveness of the academic courses in the PTA program. Your comments and feedback will help strengthen our PTA program in the best interests of future students. This information is **not** linked to the individual student and has no effect on the grade for this clinical education affiliation.

Please rate the student's level of preparation as they began this clinical education II or III experience.

Scale: 0 = not prepared, 1 = inadequate, 2 = adequate 3 = above average 4 = very well prepared, N/O = not observed

Category	0	1	2	3	4	N/O
Knowledge and demonstration of professional ethics & legal practice						
Knowledge and demonstration of safe clinical practice						
Knowledge and demonstration of APTA professional standards of practice						
Knowledge of PT/PTA roles						
Ability to recognize and respect individual and cultural differences						
Ability to self-assess , set goals for improvement, create and implement achievement plan						
Ability in time management skills						
Ability in critical thinking and problem solving skills						
Documentation skills						
Communication skills (with patients and families, with other health care providers, and with CI)						
Teaching Skills (Patients/family and other health care providers)						
Knowledge and clinical application of anatomy & physiology						
Knowledge and clinical application of pathology						
Knowledge and clinical application of kinesiology & movement theory						
Knowledge of US healthcare systems & reimbursement						
Knowledge and performance of basic patient care skills						
Knowledge and performance of assessment skills						
Ability to suggest possible treatment progressions based on assessment data						
Ability to identify patient problems or change in status which require follow up						
Modalities/Soft Tissue						
Understanding of rationale, indications and contraindications for PT modalities and soft tissue techniques.						
Ability to apply thermal, mechanical, electrical, PTA appropriate manual techniques						
Ability to assess Patient response to modalities and soft tissue techniques						

Category	0	1	2	3	4	N/O
Musculoskeletal PT						
Understanding of orthopedic diagnoses and related dysfunction						
Understanding of rationale for and effectiveness of musculoskeletal PT interventions.						
Creation, implementation, and progression of comprehensive orthopedic treatment programs as appropriate for PTA						
Performance of musculoskeletal interventions						
Neuromuscular PT						
Understanding of neurological diagnoses, related dysfunction, and theories of motor control and motor learning.						
Understanding of rationale for and effectiveness of neurological PT interventions.						
Creation, implementation and progression of comprehensive neurological treatment programs as appropriate for PTA						
Performance of neurological treatment techniques						
Cardiopulmonary						
Understanding of cardiopulmonary diagnoses and related dysfunction						
Understanding of rationale for and effectiveness of cardiopulmonary PT interventions.						
Creation, implementation and progression of comprehensive cardiopulmonary treatment programs as appropriate for PTA						
Performance of cardiopulmonary treatment techniques.						
Integumentary						
Understanding of integumentary diagnoses and related dysfunction						
Understanding of rationale for and effectiveness of integumentary PT interventions.						
Creation, implementation and progression of comprehensive integumentary treatment programs as appropriate for PTA						
Knowledge and application of integumentary PT interventions						
Miscellaneous						
Knowledge and application of PT interventions for geriatric populations						
Knowledge and application of PT interventions for pediatric populations						

Please respond to the following questions. Attach a page if additional space is needed.

What were the weaknesses of the student's preparation **at the start** of the clinical? Please specifically comment on any area above that you rated below a 3.

What were the strengths of the student's preparation **at the start** of the clinical?

Based on the preparation level of this student, what recommendations do you have for our PTA curriculum?

Thank you very much for your comments and suggestions. They will help us improve the Bay State College PTA program. Please return this form using the envelope provided or hand deliver to the ACCE at the mid-term clinical visit.



Bay State College Physical Therapist Assistant Program Post-Clinical Self-Assessment Form for Clinical Instructors

The purpose of this form is to provide a process for clinical instructors to reflect on the Clinical Education Experience in which they just participated in order to evaluate their own strengths and needs for development as clinical educators. **The data from this evaluation tool will be kept strictly confidential.** It will be used by the ACCE at Bay State College only to identify individual clinical faculty development needs.

This form should be completed by the clinical instructor at the end of the clinical experience and returned to the Bay State College PTA program ACCE along with the student's final CPI. The CI does not share their self-assessment with the student. However, CIs are encouraged to share it with the CCCE and/or supervisor at the clinical site.

Please direct questions or specific requests for assistance to Eileen Small PTA, ACCE at esmall@baystate.edu or 617-217-9437.

Clinical Instructor Name and professional designation: _____

Name of Clinical Site: _____

CI work email address: _____ **CI Phone:** _____

Date of self-assessment: _____ **Level of clinical experience just provided:** CEI CEII CEIII

How many years of clinical experience do you have? _____

How many years have you been in your current position? _____

List continuing education seminars or courses you have completed in the past 2 years.

How many students (including this one) have you supervised? _____

Are you an APTA Credentialed Clinical Instructor? Yes No

If yes, when did you receive this training? _____

If no, are you interested in becoming credentialed as a CI? Yes No

Briefly describe the training that prepared you for your role as a clinical instructor



Bay State College
Physical Therapist Assistant Program
Student Evaluation of Academic Coordinator of Clinical Education

ACCE Name: Eileen Small Course: PTA 130 PTA 240 PTA 250
 Year: _____

Directions: The purpose of this form is to assist the ACCE with the performance assessment process. Please use the following criteria to rate your level of agreement to the statements regarding the PTA program ACCE:

1= strongly disagree 2 = disagree 3 = agree 4 = strongly agree

For any statement you rate a 1 or 2 please comment further at the end of this evaluation. If a statement does not apply, please leave it blank. **There are two sides to this evaluation.**

The PTA program ACCE:	1	2	3	4
1. Was knowledgeable about clinical education.	1	2	3	4
2. Was well organized with clinical education paperwork and processes.	1	2	3	4
3. Communicated regarding clinical education requirements, expectations and procedures in a timely and effective manner.	1	2	3	4
4. Was available to discuss clinical education related matters.	1	2	3	4
5. Provided clear and effective training seminars to orient me to the requirements, expectations, objectives, and guidelines for clinical education.	1	2	3	4
6. Informed me of the process for performance assessment and grading of clinical experiences.	1	2	3	4
7. Expected me to demonstrate professional behaviors as a pre-requisite to attending clinical experiences.	1	2	3	4
8. Encouraged me to access information about clinical sites.	1	2	3	4
9. Encouraged my input into the clinical assignment process.	1	2	3	4
10. Considered my needs and interests in the selection and assignment of my clinical experiences.	1	2	3	4
11. Assigned me to clinical experiences in a fair and equitable manner.	1	2	3	4
12. Ensured that my clinical placements provided me with varied experiences.	1	2	3	4
13. Was available and responsive during my Clinical Education Experiences.	1	2	3	4

14. Conducted effective mid-term clinical visits.	1	2	3	4
15. Appropriately assisted with any issue(s) experienced during my Clinical Education Experiences.	1	2	3	4
16. Provided helpful feedback on my clinical performance.	1	2	3	4
17. Was fair and consistent in grading my Clinical Education Experiences.	1	2	3	4
18. Solicited my feedback regarding clinical experiences.	1	2	3	4
19. Solicited my feedback regarding academic preparation for each clinical experience.	1	2	3	4
20. The student self-reflection assignments (student "SOAP" notes) helped me focus my thoughts and feelings regarding what I was learning and how I was progressing during each clinical.	1	2	3	4
21. Overall, I was pleased with my Clinical Education Experiences.	1	2	3	4

For any statement you rated a 1 or a 2 please comment further here. Attach an additional sheet if needed.

The ACCE's strengths are:

The ACCE could improve in the following ways:

Thank you very much for sharing your ratings and comments! Please return the completed evaluation to the Physical Therapist Assistant Program Chair in the envelope provided.



**BAY STATE COLLEGE
PHYSICAL THERAPIST ASSISTANT PROGRAM**

Clinical Education Handbook Receipt Signature

The ACCE of the Physical Therapist Assistant Program, in collaboration with the PTA Program Chair, has created the policies and procedures delineated in this *Clinical Education Handbook*. It is anticipated that this will help consolidate information regarding Clinical Education and provide you with a reference during your enrollment at the College.

It is your responsibility to review this document thoroughly and understand the implication of all policies and procedures. If you do not understand the contents, please meet with the ACCE and/or PTA Program Chair.

After receiving this *Clinical Education Handbook* please sign this tear-off sheet and return it to the ACCE.

Keep the *Clinical Education Handbook* reference. Please be advised that revisions may be made and will be distributed as appropriate throughout your tenure in the PTA Program.

I have received the *Clinical Education Handbook*. Further, I understand that I am responsible for reading, understanding and adhering to the policies contained in this handbook.

Name: _____

Signed: _____

Date: _____