

HANDBOOK
FOR
CLINICAL
EDUCATORS

PTA PROGRAM
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*PTA Faculty and Staff are available to assist you
We welcome any questions, comments or suggestions you may have*

INTRODUCTION

The Handbook for Clinical Educators was written to help Center Coordinators of Clinical Education (CCCEs) and Clinical Instructors (CIs) who provide clinical education experiences for our physical therapist assistant students. This handbook will give you basic information about our academic program, curriculum and the clinical affiliations. We hope that you will find this information useful when organizing a clinical practice for one of our PTA students.

PTs and PTAs involved in the clinical education of our PTA students should have access to this handbook. Clinical Instructors will receive updated evaluation forms and clinical education syllabi prior to an affiliation. However, this handbook provides supplemental information that can be useful for the experienced or novice clinical educator. The Finlandia PTA Program's Mission and Vision statements, terminal competencies and curriculum are included to help you understand our program.

Processes for establishing a clinical affiliation site and the development and evaluation of the clinical education program are outlined. The roles and responsibilities of the Academic Program, Clinical Site and student in the clinical affiliations are described as well as information on remediation and dismissal of the student from the clinical affiliation. APTA documents regarding PTA utilization, supervision and ethical conduct are presented in PTA223, Clinical Preparation, and sent to Clinical Instructors to ensure each affiliated clinic has easy access to these supporting documents.

If you have any questions about the material in the Clinical Handbook or the clinical education program, please call Nicole Polakowski, PT, DCE, at 906-487-7372 or e-mail nicole.polakowski@finlandia.edu.

Section 1: FINLANDIA UNIVERSITY

Physical Therapist Assistant Program

This section provides the context of our program to the Clinical Educator. The PTA program philosophy reflects the belief of the program director, the faculty and the administration. The philosophy, mission and vision of the program are closely linked to the Mission of Finlandia University.

PTA Program Statement of Philosophy:

At the turn of the last century thousands of Finnish families settled, along with other immigrants, in this pristine and beautifully rugged country known as the Upper Peninsula (U.P.) of Michigan. Most of them worked as farmers, lumberjacks, or miners. Finlandia University's early aim was to educate the Finnish youth in English and other skills that would provide job opportunities in their new land.

The U.P. remains extremely rural in nature. Many of its inhabitants are the third generation of these immigrants. The large dairy and beef farms, which once sustained communities, have diminished. Reduced resources and environmental regulations threaten to close down industries that once were the mainstay of the economy in the region. Large-scale manufacturing industries tend to not locate in the northern U.P. due to high transportation costs.

Small businesses/industries operating within the context of sustain-ability are prospering. Community leaders continue to look for creative ways to develop the region's economy within this framework. Finlandia University is committed to serving the region by contributing to this concept through its program development.

It is within this context that the health care industry in the U.P. is growing. Home health agencies are proliferating due to the large elderly population. Acute-care hospitals are changing to "systems" which provide physical therapy at all levels. Nursing homes are seeking (often through contracts) skilled rehabilitation services.

Physical Therapy is a profession, within the health care industry, which promotes optimal human health and function. The licensed physical therapist applies scientific principles to prevent, identify, alleviate, correct or reduce acute or prolonged movement dysfunction.

The Physical Therapist Assistant (PTA) is a skilled clinical practitioner who performs patient care under the supervision of a licensed physical therapist and carries out a treatment plan following established procedures. The PTA trains patients in exercises and activities of daily living, administers treatments using special equipment, observes and reports the patient's responses to treatment and assists in performing evaluations, special tests and complicated treatment procedures.

Physical therapists and physical therapist assistants work as a team, treating clients with dignity and respect, allowing achievement of the highest level of independence.

Our PTA Program offers the opportunity for individuals from diverse educational, economic and cultural backgrounds to receive highly personalized learning experiences. We strive to produce PTAs with open minds and excellent critical thinking skills, who can give quality care to those they serve.

PTA Program Mission Statement:

The **mission** of the Physical Therapist Assistant (PTA) Program is to give each student the necessary education to become a competent physical therapist assistant. This is achieved through professional education and training using sequential instruction, practical clinical experiences and strong leadership. Emphasized throughout the student experience are problem-solving skills, scientific inquiry, ethics, professional behavior and teamwork, as well as examination of the roles of the Physical Therapist and the PTA and the boundaries between them. Also emphasized is development of professional behaviors that facilitate and enhance positive therapeutic relationships with patients including respect and sensitivity for ethnic, cultural and spiritual differences. Qualified clinical sites further support these ideas.

The PTA faculty believes learning is a lifelong process that requires active participation in an open, supportive environment. The faculty demonstrates attitudes necessary to support individual learning styles maximizing each student's potential. Through the competency-based curriculum, the student is given the opportunity to learn the problem-solving skills and professional behaviors necessary to become both a critical thinking PTA and a contributing member of society.

PTA Program Vision Statement:

The Finlandia University Physical Therapist Assistant Program will be a leader of physical therapy education in the Upper Peninsula of Michigan. The program will provide a strong educational foundation for physical therapist assistants with an emphasis on delivery of service in rural America.

To promote this vision the program will:

- Maintain accreditation status from the Commission on Accreditation in Physical Therapy Education (CAPTE)
- Partner with local and regional rehabilitation resources to provide excellent learning experiences for the student and foster positive relationships between PTs and PTAs.
- Develop a solid reputation of providing an excellent foundation education to PTA students.
- Provide a forum for facilitating physical therapy education to the external community of rehabilitation professionals and the general public.

PTA Program Statement of Conduct and Ethical Standards

The student will abide by the American Physical Therapy Association (APTA) *Standards of Ethical Conduct for the Physical Therapist Assistant* and *Guide for Conduct of the Physical Therapist Assistant*.

PTA Program Goals:

The goal of the Physical Therapist Assistant Program at Finlandia University is to enable the graduate to function effectively as a physical therapist assistant in any practice setting. By providing appropriate learning experiences, the successful student acquires the knowledge and skills necessary to be both an effective physical therapist assistant and a contributing member of society.

Based upon the mission and curriculum plan, the goals for the Physical Therapist Assistant Program are:

1. To develop clinicians who possess the necessary entry-level technical skills to practice as a physical therapist assistant in a variety of practice settings.
2. To develop clinicians that can apply knowledge of basic sciences and PT theory to the application and appropriate modification of selected PT procedures.
3. To develop clinicians who effectively communicate with patients, supervisors, support personnel and other health care team members using suitable verbal, non-verbal, and written skills.
4. To develop clinicians with critical/creative thinking and analytical skills to make sound clinical judgments and proposals to enhance patient care.
5. To develop clinicians who possess the necessary professional behaviors to practice as a physical therapist assistant in a variety of practice settings. These behaviors include:
 - § Commitment to Learning (Use of Constructive Feedback)
 - § Interpersonal Skills
 - § Communication Skills
 - § Critical Thinking (Problem-Solving)
 - § Stress Management (Effective Use of Time and Resources)
 - § Professionalism (Responsibility)
6. To prepare the student to pass the NPTE examination allowing for state licensure to practice as a PTA.
7. To maintain a program accredited by CAPTE.

Physical Therapist Assistant Program Terminal Competencies*:

At completion of the PTA Program the student will:

1. Perform in a safe manner that minimizes the risk to patient, self, and others.
2. Demonstrate expected clinical behaviors in a professional manner in all situations.
3. Perform in a manner consistent with established legal standards, standards of the profession, and ethical guidelines.
4. Adapt delivery of physical therapy services with consideration for patients' differences, values, preferences, and needs.
5. Communicate in ways that are congruent with situational needs.
6. Participate in self-assessment and develops plans to improve knowledge, skills, and behaviors.
7. Demonstrate clinical problem solving.
8. Perform selected therapeutic exercises* in a competent manner.
9. Apply selected manual therapy*, airway clearance*, and integumentary repair and protection techniques in a competent manner.
10. Apply selected physical agents* and mechanical modalities in a competent manner.
11. Apply selected electrotherapeutic modalities in a competent manner.
12. Perform functional training* in self-care and home management and application and adjustment of devices and equipment in a competent manner.
13. Produce quality documentation* in a timely manner to support the delivery of physical therapy services.
14. Participate in the efficient delivery of physical therapy services.

Physical Therapist Assistant Clinical Performance Instrument
American Physical Therapy Association 2009

Section 2: PTA Program Curriculum

This section outlines the requirements the PTA student must complete in order to receive an Associate of Applied Science Degree and the two or three year options for study in this area. The technical phase curriculum is presented in abbreviated form with the present textbooks used for each course. This information will help a student's Clinical Instructor understand the academic content of our program. More detailed syllabi are available on request from the program.

2.1 The Associate Degree Requirements

The Finlandia University Physical Therapist Assistant Program is an associate in applied science degree program. It consists of a minimum of 29 credits in general education (gen. ed. core) and 41 credits in PTA education (technical phase).

2.2 Two-year and Three-year Track Options

The PTA program offers two different tracks for completion of study, a recommended three-year track, and an accelerated two-year track. In addition, a 4-year track leading to an Associate of Applied Science Degree in Physical Therapy and a Bachelor's Degree in Applied Sports Management or Healthcare Management is also offered. The faculty highly recommends the preferred three-year track due to the intensive laboratory portion of the technical phase of the program. Successful graduates will be awarded an Associate of Applied Science Degree.

2.3 Admission to the PTA Program

Admission into the PTA Program is limited to approximately sixteen to twenty four students each fall. Students applying for admission to the program will be considered without regard to race, color, national origin, sex, disability, or age. The exact number to be admitted is determined each year by the PTA Program Director and Director of Clinical Education and is based on a number of students that equals no more than 150% of clinical placements for each affiliation and not to exceed twenty-four students each fall.

The following GPA requirements are the minimum necessary to qualify for possible acceptance into the PTA program:

All prerequisite course work, except for BIO 171 and BIO 172 (see below), must be completed with a grade of C or better. In addition:

- The student must achieve a cumulative 2.5 GPA in the required prerequisite courses
- **The student must have a 2.7 (B-) or above in the following courses: BIO 171 and BIO 172 within the last 5 years**

GENERAL EDUCATION REQUIREMENTS (23)

ENG 103	College English I	3
ENG 104	College English II	3
MAT 144 or above	Quantitative Reasoning	4
BIO 171	Anatomy & Physiology	4
REL/FNS	Religion/Finnish Elective	3
PHL 212	Ethics: Theory & Practice (Humanities)	3
PSY 101	General Psychology (Social Science)	3

PRE-PTA REQUIREMENTS (7)

BIO 172	Anatomy & Physiology II	4
PTA 101	Introduction to Physical Therapy	1
HSC 112	Medical Terminology	1
UNS 100	Sisu Seminar	1

2.4 PTA Program Course Descriptions

PTA 101 Introduction to Physical Therapy (*offered every fall*)

Introduction to the field of physical therapy, its history, and the role physical therapy plays in the health care system. Basic medical abbreviations are taught and the standards of ethical practice are emphasized. The practice of physical therapy, the laws that regulate the physical therapist assistant, and the structure and function of the American Physical Therapy Association are discussed. Strongly emphasized are the boundaries between the physical therapist and physical therapist assistant. Also covers common practice settings and patient types. **Prerequisite:** For students whose first language is not English, a TOEFL score of 550 or greater and permission of instructor. **Co-requisite:** ENG103, BIO171 or permission of PTA Program Director **Text Used:** *Introduction to Physical Therapy*, 5th edition by Michael Pagliarulo, Mosby.

PTA 200 Functional Anatomy (*offered every fall*)

Knowledge of functional anatomy and kinesiology are essential foundations for the PTA. Musculoskeletal and nervous systems are studied in terms of their ability to produce movement using the principles of biomechanics. Lecture and laboratory exercises are integrated to help the student learn how the body moves and then apply that knowledge to physical therapy. **Prerequisite:** BIO 172 or permission of PTA Program Director **Text Used:** *Trail Guide to the Body*, 5th edition, A. Biel, Books of Discovery, *Essentials of Kinesiology for PTA*, 3rd edition, Paul J. Mansfield and Donald A. Neumann, Mosby.

PTA 205 Functional Activities (*offered every fall*)

Instruction in basic patient handling skills including: patient transfers from and with a variety of patient equipment; gait training; wheelchair/bed mobility, and transfers training; assistive devices

using patient mobility and transfer skills; body mechanics with an emphasis on the safety of the patient and caregiver during activity; OSHA safety requirements and universal precaution procedures. Issues regarding the quality, appropriateness, and clarity of documentation are presented and practiced with an emphasis on documenting functional activities. **Prerequisite:** BIO 172 **Co-requisite:** PTA 200 or permission of PTA Program Director **Text used:** *Patient Care Skills*, 7th edition, Minor & Minor, Prentice Hall

PTA 210 Therapeutic Exercise (*offered every fall*)

Introduces the principles and techniques of range of motion, strengthening, soft-tissue stretching, aerobic exercise, endurance, and balance/coordination. Review of the healing process of the various tissues, ligaments, bones, cartilage, and muscles/tendons. Examines the basic concepts of peripheral joint mobilization and theories of the body's response to exercise in the normal and pathological states. **Prerequisite:** BIO172 **Co-requisite:** PTA 200 or permission of PTA Program Director **Text Used:** *Therapeutic Exercise for Physical Therapist Assistants*, 3rd edition, Bandy, Lippincott, Williams & Wilkins and *Fundamental Orthopedic Management for the Physical Therapist Assistant*, 4th edition, Shankman, Gary A., Mosby.

PTA 211 Clinical Orthopedics (*offered every spring*)

Expands the knowledge of therapeutic management and rehabilitation with regard to common orthopedic injuries/conditions. Emphasizes principles for treating soft tissue, bony and post-surgical problems, including the investigation of sprains, strains, surgical procedures, overuse syndromes and fractures. Investigates therapeutic management and rehabilitative intervention methods for the presented condition/injuries in various stages of recovery joint by joint. **Prerequisites:** PTA 200, PTA 210 and PTA 215 or permission of PTA Program Director **Text used:** *Fundamental Orthopedic Management for the Physical Therapist Assistant*, 4th edition, Shankman, Gary A., Mosby

PTA 215 Therapeutic Modalities I (*offered every fall*)

Theory and application of therapeutic thermal agents (heat, cold, ultrasound, hydrotherapy) and aquatic therapy. The pathologic and physiological processes, specific techniques, frequencies, and the effects of intervention are discussed. Application methods are learned with an emphasis on the indications, contraindications and precautions for the selected forms of therapeutic intervention. The safe, effective and efficient delivery of physical thermal agents and aquatic therapy are considered, as well as patient and caregiver interactions. **Prerequisite:** BIO 172 **Co-requisite:** PTA 200 or permission of PTA Program Director **Text used:** *Physical Agents in Rehabilitation. From Research to Practice*, 5th edition, Cameron, W.B. Saunders, Finlandia University's Therapeutic Modalities I Lab Manual and APTA's Clinical Performance Instrument for the Physical Therapist Assistant.

PTA 216 Therapeutic Modalities II (*offered every spring*)

Theories concerning the pathologic processes, the physiological responses to an intervention, and the application of the following agents: electrical current, mechanical lumbar/cervical traction, ultraviolet and external compression. Intervention methods are learned with emphasis on the safe, effective and efficient deliveries of the physical agents. Consideration is given to the indications, contraindications and precautions for these physical agents. Because an intervention requires human interaction, clinical lab activities emphasize the interaction between the clinician and the patient. **Prerequisite:** PTA 215 or permission of PTA Program Director **Text used:** *Physical Agents in Rehabilitation: From Research to Practice* 5th edition, Cameron, M., W.B. Saunders, Finlandia University's Therapeutic Modalities II Lab Manual and APTA's Clinical Performance Instrument for the PTA.

PTA 217 Therapeutic Procedures (*offered every spring*)

Pathological gait deviations, the physical therapy management of the burn-injured patient, wound care management, chest physical therapy, amputee care, prosthetics, and orthotics for the upper and lower extremities are examined. Anatomy, physiology, and pathology are discussed for each topic.

Prerequisite: HSC 260 and PTA 200 or permission of PTA Program Director **Text used:** There is no text to purchase for this class, reference materials will be provided for information needed for this course

PTA 220 Tests and Measures (*offered every fall*)

Introduction to the tests and measures commonly used in the practice of physical therapy, including goniometry, gross functional muscle testing, sensation, pain, vital signs, and anthropometric measurements. Emphasizes the comparison of examination and evaluation as it relates to physical therapy practice. **Prerequisite:** BIO 172 **Co-requisite:** PTA 200 or permission of PTA Program Director **Text used:** *Muscles & Sensory Testing, 3rd edition*, Reese, Saunders, *Cram Session in Goniometry, 1st edition*, Van Ost, Slack, Inc.

PTA 223 Clinical Preparation (*offered every fall*)

Orientation to clinical practice policy and procedures and clinical documentation. Provides information to assist student learning in the clinical environment. Students begin the process of self-assessing their development of professional behaviors and develop a plan to enhance their professional skills. **Co-requisite/Prerequisite:** PTA200, PTA205, PTA210, PTA220, PTA215 and HSC260 or permission of PTA Program Director. Taken concurrently with PTA 224 **Text Used:** *PTA Exam: The Complete Study Guide*, Scott M. Giles, ScoreBuilders, and APTA's Clinical Performance Instrument.

PTA 224 Clinical Practice (*offered every fall*)

Full-time, four-week clinical practice. The student applies novice physical therapy knowledge and skills (selected tests and measures, modalities, therapeutic exercise and functional activities) under the close supervision of a qualified clinical instructor. Prerequisites: All Fall Semester PTA Classes and HSC260. Must be taken concurrently with PTA 223. **Text Used:** APTA's Clinical Performance Instrument and *PTA Exam: The Complete Study Guide*, Scott M. Giles, ScoreBuilders.

PTA 226 Clinical Affiliation/Preparation/Special Topics (*offered every spring*)

Prepares students for completion of the final two clinical practices and entry into the physical therapy workforce. Self-awareness, effective helping, communication skills, stress management, cultural competency and spirituality are discussed as part of a continuing exploration of the core professional values of the APTA **Prerequisite:** Satisfactory completion of all fall semester PTA courses or permission of PTA Program Director. **Co-requisite:** Spring PTA courses. Must be taken concurrently with PTA 290. **Text used:** *PTA Exam: The Complete Study Guide* Giles, Scott M., ScoreBuilders, and Finlandia University's PTA Program's Student Clinical Binder.

PTA 235 Patient Handling and Therapeutic Massage (*offered every spring*)

Therapeutic massage and patient handling skills. Basic principles and application of soft tissue massage techniques as part of an overall physical therapy intervention plan. Various basic local and general massage techniques are presented and practiced. Introduces general principles of massage for specialized systems and selected specific purposes. **Prerequisite:** PTA 200 or permission of PTA Program Director **Text used:** *Beard's Massage, 5th edition*, DeDomenico & Wood, W.B. Saunders

PTA 245 Neurologic Rehabilitation through the Lifespan *(offered every spring)*

Prepares the PTA student to treat patients with pediatric and adult movement disorders caused by damage to the nervous system. Neuroanatomy, motor control, motor learning, and motor development form the foundations for understanding the pathology and the interventions used for the patient with neurologic disorders. Case studies dealing with common pediatric and adult disorders help the student appreciate the effect of the disability on the individual's life and provide an opportunity for the student to apply their clinical reasoning skills. **Prerequisite:** PTA 200 and PTA210 or permission of instructor **Text used:** *Neurologic Intervention for Physical Therapist Assistants, 3rd edition;* Martin, Tink and Kessler, M. W. B. Saunders. 2007

PTA 250 Geriatric PTA *(offered every spring)*

Comprehensive study of physical therapy and aging. Age-related changes in biology, physiology, and anatomy and general information on theory and psychosocial aspects of aging. Specific treatment considerations for the older person are outlined. **Prerequisite:** HSC 260 or permission of instructor. **Text used:** *Geriatric Physical Therapy: A Case Study Approach,* Staples, William H. New York City, NY, McGraw-Hill, 2016

PTA 290 Clinical Education I *(offered every spring)*

This is the initial two-weeks of a five-week clinical affiliation. It allows students to apply their didactic and laboratory learning as an active participant in clinical practice. The student will be expected to practice all the basic physical therapy data collection techniques and treatment interventions and implement the plan of care as directed by the physical therapist. Eighty hours of clinical practice at an affiliated clinical site is required. **Prerequisite:** Student must be assessed at the developing level or higher on the Professional Behaviors Assessment Tool, completion of all PTA course work or permission of the PTA Program Director. **Required Text Material:** Clinical Education Binder, Finlandia University's PTA Program's Student Handbook, APTA's Clinical Performance Instrument for the PTA and policy and procedures manual of the clinical facility.

PTA 291 Clinical Education II *(offered every summer)*

The final three-weeks of a five-week clinical affiliation provides further development of problem solving and interpersonal skills and continues to develop in the successful student the minimal competencies necessary to become an effective, efficient physical therapist assistant. At the conclusion of this affiliation, the student is expected to consistently provide quality care with simple or complex patients in a predictable environment. The student may require supervision or cueing when addressing complex problems and may still be developing efficiency in delivering treatment plans. One hundred twenty hours of clinical practice at an affiliated clinical site is required. **Prerequisite:** PTA 290 and student must be assessed at the developing level or higher on the Professional Behaviors Assessment Tool. Must be taken concurrently with PTA 292. **Required Text Material:** Clinical Education Binder, Finlandia University PTA Program Student Handbook, APTA's Clinical Performance Instrument for the PTA and policy and procedures manual of the clinical facility

PTA 292 Clinical Education III *(offered every summer)*

This five-week full time clinical affiliation is the final clinical practice for the student. At the start of this affiliation, the students will have completed 65% of their clinical hours and all of their academic course work. The student is expected to practice all the basic physical therapy data collection techniques and treatment interventions and implement the plan of care as directed by the physical

therapist. At the conclusion of this affiliation, the student is expected to perform at entry-level, consistently and efficiently providing quality care with simple or complex patients in a variety of clinical environments under the supervision of a physical therapist. The student requires no further guidance or supervision except when addressing new or complex problems at which time the student seeks assistance. Two hundred hours of clinical practice at an affiliated clinical site is required. **Prerequisite:** PTA 291 **Required Text Material:** Clinical Education Binder, Finlandia University PTA Program Student Handbook, APTA's Clinical Performance Instrument for the PTA and policy and procedures manual of the clinical facility

2.5 PTA Program Clinical Education Sequence

Students have been prepared for the clinical experience by both academic knowledge acquired in lectures and practice of physical therapy skills in the classroom laboratory sessions. Clinical Instructors (CI's) are asked to review academic courses and clinical skills the students have completed prior to each affiliation. Also, the Clinical Instructor must complete the APTA training modules and test available on "The Learning Center" at www.apta.org. Information about the training and access to the PTA CPI web-site is sent to the clinical instructor via e-mail and hard copy.

The following are schedules and general expectations for the three clinical affiliations:

Clinical Affiliation I; (PTA 224)

Duration: Four weeks

Clinical Hours to be completed: Minimum of 160 hours (scheduled hours determined by a clinical site may exceed the minimum number of hours)

The student physical therapist assistant is at a novice level at this point who has had limited opportunity to apply their academic knowledge or clinical skills. During the affiliation, the student will begin to practice the data collection methods and interventions of care they have been studying to this point in the program. Primarily these include the technical aspects of physical therapy such as; thermal modalities, therapeutic exercise, ADL's and functional physical therapy techniques and background scientific knowledge of functional anatomy, professional behaviors, and tests and measures. The student will still require close supervision and will need to be directed to perform selected portions of the plan of care. The student is required to prepare a case study using an established format based on the Disablement Models and will present this case study in a seminar at the beginning of the next semester.

The student is expected to achieve a minimum of *Advanced Beginner* performance rating on the Clinical Performance Instrument Version 2 (supervision by the C.I. is required 75% of the time or less with patients with simple conditions and the student is consistent in developing proficiencies in monitoring therapeutic exercises and related data collection with a familiar patient group and should be beginning to share a patient care caseload with the clinical instructor).

Clinical Affiliation II; (PTA 290 & PTA 291)

Duration: Five weeks

Clinical Hours to be completed: Minimum of 200 hours (scheduled hours determined by a clinical site may exceed the minimum number of hours)

The student physical therapist assistant has completed all the academic course work and approximately 30% of their clinical hours prior to this affiliation. The student will be expected to practice all the basic

physical therapy data collection techniques and treatment interventions and implement the plan of care as directed by the physical therapist with appropriate professional behavior. The student is required to prepare an in-service presentation at this site. Topic is at the discretion of the CI and/or student

The student is expected to achieve a minimum of *Intermediate* performance rating on the Clinical Performance Instrument Version 2. (supervision by the C.I. is required less than 50% of the time with patients with simple conditions and the student is proficient with simple tasks and is developing the ability to perform more complex tasks, clinical problem solving and interventions/data collection. Student is capable of maintaining 50% of a full- time PTA's patient care workload)

Clinical Affiliation III; (PTA 292)

Duration: Five weeks

Clinical Hours to be completed: Minimum of 200 hours (scheduled hours determined by a clinical site may exceed the minimum number of hours)

The student physical therapist assistant has completed 65% of their clinical hours prior to this affiliation as well as the program's academic course work. Expectations for the student are to practice all major components of physical therapy data collection techniques and treatment interventions and implement the plan of care as directed by the physical therapist with appropriate professional behavior aiming towards entry level performance.

At the completion of this final affiliation it is expected that the student will be performing at *Entry Level* on the red flag performance criteria (#1, 2, 3, 5, and 7) and minimum of *Advanced Intermediate* performance on all other performance criteria of the Clinical Performance Instrument Version 2. (Student is independent in working with patients with simple conditions and may require supervision 25% of the time for patients with complex conditions. Student is consistent and proficient in most tasks and is capable of maintaining 75% of a full-time physical therapist assistant's patient care workload). Student must prepare and present a clinical study to staff at this site. Topic at discretion of CI and/or student PTA. **A mandatory graduation seminar concludes the affiliation. The student is required to participate in class and individual activities that will prepare them for the National Physical Therapy Licensing Exam.**

Section 3: DEVELOPING CLINICAL AFFILIATION SITES

Clinical Facilities that can provide a variety of clinical experiences for Student Physical Therapist Assistants with appropriate supervision are essential for the strength of our program. This chapter outlines the steps to establishing a Clinical Site for our Finlandia students, identifies the clinical site liabilities, describes professional development activities and resources available to clinical educators and details the evaluation of the clinical education program.

3.1 Establishing the Clinical Affiliation Site

Contractual agreements will be executed with clinical agencies who:

- Are willing to provide clinical learning experiences to Finlandia University PTA students
- Offer an adequate variety of learning experiences

- Have qualified clinical instructors (minimum qualifications for a CI are: 1) to be a licensed PT or PTA, 2) at least one year of clinical practice, and 3) willingness to work with a student. Clinical instructor training is preferred but a willingness to learn about clinical education is acceptable.
- Meet the selection criteria to the satisfaction of the Director of Clinical Education (DCE).

The DCE assesses the clinical agency's ability to offer a quality education experience using information gathered from a telephone interview, site visit and the CSIF if available. "*APTA Guidelines for Clinical Education Sites*" have been used to develop the "Questionnaire for New Sites". If the DCE feels the site meets the criteria, a Clinical Education Affiliation Agreement is executed. (See Appendix A)

A signed and dated Clinical Education Affiliation Agreement must be fully executed prior to a student's placement. The Agreement is considered valid until either party terminates the agreement unless otherwise specified in the agreement. Alternative contracts and revisions will be acceptable as long as they meet the approval of the University's legal counsel and insuring agents. The DCE/delegate reviews the Affiliation Agreement prior to students participating in clinical assignments to ensure that the written agreements are up to date and consistent with accreditation standards and Finlandia University policy. If a contract is not valid or requires modification, the students are not placed there until a valid contract is on file. Signed contracts older than five years require updates prior to the placement of students at the site.

If possible, the DCE visits a new clinical affiliation site prior to the student being placed. This visit allows the DCE and CCCE to exchange information, complete site criteria, review and establish a foundation for providing clinical education for Finlandia PTA students. The DCE will encourage the CCCE to communicate any concerns or questions about the Clinical Education Program and promote development of clinical education at the site. If a visit is not possible because of distance, a telephone conference will be undertaken with the CCCE.

Students are given a list of clinical sites organized by setting. More clinical site information is available on the Clinical Site Information Forms found on the PTA CPI website.

3.1.1 Student Requests for Additional Clinical Sites

The DCE may give permission to an additional site request based on the following:

- Student's most recent GPA and course grades
- Student's attendance habits
- Professional behaviors demonstrated throughout the school year.
- Site's ability to provide a quality clinical education experience as per the "Assessment of New Clinical Sites Form"
- Student has contacted the site and the site is willing to provide a clinical placement for the scheduled time period of the affiliation and the facility has an established Clinical Education Program for PTA Students.
- Site enters into an affiliation agreement with the PTA program.

Students must follow the following procedure to request an additional site:

1. The student inquires if the clinic is willing to provide a clinical experience for the student during the scheduled affiliation time period and confirms that the clinic has had students from other PTA programs.
2. If the facility is willing to offer an affiliation, the student completes an “Additional Site Request Form”.
3. The DCE will contact the CCCE and confirm that the clinic is able to provide appropriate learning experiences and a qualified clinical instructor (CI) for the student using the “Assessment of New Clinical Sites Form”.
4. Approval of a site is at the discretion of the DCE. If approved, an affiliation agreement must be executed prior to the student’s affiliation as stated above. The affiliation agreement may be ongoing or for one time only as agreed to by the site and the DCE.

3.2 Clinical Education Faculty

The contract agreement between the clinical agency and Finlandia University requires the clinical agency to designate a staff member as the Clinical Coordinator of Clinical Education (CCCE) and to assign Clinical Instructors (CI) to students accepted for clinical affiliations.

3.2.1 CCCE Selection

The clinical site should select an experienced physical therapist or physical therapist assistant whom is knowledgeable about the clinical site and its resources to be the CCCE. The CCCE requires a keen interest in students and clinical education. The selected CCCE serves as a consultant to the Clinical Site’s Clinical Instructors and works with the DCE to develop the on-site Clinical Education Program. A non-physical therapy professional, who possesses the skills to organize and maintain an appropriate clinical education, can be selected. Should the CCCE be a novice to the area of clinical education the DCE will provide the CCCE with APTA’s *Self-Assessment for CCCE’s* and recommend that the CCCE complete it. The completed self-assessment helps the DCE to identify development activities.

3.2.2 CI Selection

A CI must be a competent physical therapist or physical therapist assistant with the required state license or registration. One year of clinical experience and a desire to work with students and develop clinical teaching skills is required. The PT/PTA team is the preferred model of clinical instruction for the student physical therapist assistant, but either can be the CI. (See the Guidelines for Clinical Education Sites Item 12.0, APTA, Appendix B). The State Practice Act will serve as a guide to determine if a physical therapist assistant can supervise student PTAs without the on-site supervision of a physical therapist. (The states of Michigan and Wisconsin do not require direct on-site supervision for the PTA; Minnesota requires that the PT be on-site for the PTA to supervise a student).

Should the CI be at the novice level, the DCE will recommend the CI complete the APTA’s *Self-Assessment for Clinical Instructors*.

3.2.3 Clinical Faculty Benefits And Privileges

A Physical Therapist and Physical Therapist Assistant who serve as CCCE or CI are entitled to the following benefits and privileges:

- Use of the university’s physical facilities including conference rooms, classrooms and laboratory facilities for in-services or other professional functions as the program and university schedule allows.
- Access to Finlandia University library facilities. Clinical faculty need to come to the library to be issued a card.
- Access to the library on-line services to journal and periodical databases and full text services. Clinical faculty should contact DCE or PTA Program Director to receive university user name and password to get admittance to the services via Finlandia University website.
- Registration for workshops, continuing education opportunities scheduled at the university. Program schedules one course approximately every two years.
- Ability to submit PTA job opportunities to the PTA Department for dissemination to graduates and alumni of the Finlandia PTA program.
- Loan of program equipment and educational resources when not required by the curriculum.

Clinical faculty members are encouraged to make requests for benefits and privileges not listed above that they feel would be helpful. Feedback is appreciated.

The information on benefits and privileges is sent to the CCCE and CI with the clinical affiliation information and the feedback letter.

3.3 Clinical Education Site Liability

Finlandia University provides PTA students with the necessary malpractice insurance. Proof of coverage is forwarded to the Clinical Site prior to a scheduled affiliation. The students are trained for entry-level skills as indicated in the *APTA Normative Model of Physical Therapist Assistant Education, version 2007*. Clinical Instructors are provided a list of those physical therapy skills for which the students have received instruction and training (Clinical Experience Logs –Technical Skills) prior to the affiliation. The malpractice insurance covers the students’ practice of these skills with appropriate supervision.

Students enrolled in the PTA Program at Finlandia University are not instructed or tested to demonstrate any level of competency for the following technical skills:

- Spinal mobilization/manipulation
- Cranio-sacral therapy
- Selective sharp debridement in wound care

Note: Starting in the spring 2014 semester, psychomotor components of peripheral joint mobilization grades 1 – 3 have been added to the curriculum and tested in practical examination. All aspects of wound care are covered in the second semester of the technical phase.

Students are taught the concepts, contraindications and precautions of the following modalities; infrared, diathermy and ultraviolet and are tested by written examination. “Hands-on” practice is not provided as part of the academic program.

This is consistent with *the Normative Model of PTA Education, Guide to Physical Therapist Practice 2007* and the *(HOD P06-00-30-36) Procedural Interventions Exclusively Performed by Physical Therapists*.

If a clinical instructor teaches a treatment or measurement technique that has not been presented and practiced in the academic setting, the clinical instructor is responsible for determining if the student is safe in applying the procedure to a patient within the clinical setting and is liable for any harm.

The DCE sends out a notice of the above to all CIs prior to their supervision of a student.

3.4 ANNUAL CLINICAL SITE UPDATES

Each spring the Finlandia PTA Program contacts the CCCE at each active clinical site to determine their availability as a clinical site for the next academic year. Clinical sites are asked to provide updates on the clinical site and student requirements.

3.4.1. Requests for Clinical Affiliation Slots

The Finlandia PTA Program participates in the Voluntary Uniform Mailing Date implemented by the Clinical Education Special Interest Group of the Education Section of the APTA in 1999. In March, a Clinical Site Request Form (CSRF) is sent to each active clinical site requesting affiliation slots for Finlandia Physical Therapist Assistant Students.

Clinics are asked to indicate if they are able to offer a clinical placement slot for our students and to identify the settings available for the following calendar year. The forms are to be returned by the end of April. The DCE informs the CCCE of each clinical site in the fall if a student selects their site. If the offered clinical slot will not be needed, the DCE informs the CCCE that the slot may be released.

3.4.2. Clinical Site Information Form

Clinical Sites should review the CSIF annually on the PTA CPI web and update the information. Updates may include but are not limited to: new services, staff changes, professional courses attended or on-site clinical development activities.

3.5 DEVELOPMENT ACTIVITIES FOR CLINICAL FACULTY

The Finlandia PTA Program is committed to providing Clinical Education Faculty with the tools and resources needed to provide a solid clinical experience to the student. Development of the clinical faculty is an ongoing process and is closely tied to the evaluation of the clinical education program. The professional development opportunity that is initially available to the clinical educator is the one-on-one interaction with the DCE in identifying the CPI Version 2 as the assessment tool for the affiliation. The Clinical Instructor is given the instructions for accessing the APTA CPI Training Modules on the APTA Learning Center and the instructions for the *PTA CPI Web 2.0 Instructions for a CI*. Time is dedicated during telephone or on-site visits to educate clinical faculty on the expectations of our students and the best way to use the **PTA CPI Web Assessment Tool**. Clinical faculty are encouraged to contact the DCE/delegate with questions or concerns throughout the clinical affiliation.

The clinical educator is a professional role model for our PTA students and should demonstrate to the student involvement in professional activities and a commitment to lifelong learning in their field. Clinical faculty can access the following resources from Finlandia University to assist in their on-going development as a Clinical Educator:

- Current academic information from the students and academic faculty
- Individual clinical education training sessions with the DCE or designate
- Clinical education workshops, including APTA Clinical Education Credentialing Workshops
- APTA Self-Assessment Forms for CCCE, CI or Clinical Sites from The APTA Division of Education publication: *Clinical Education Guidelines and Self-Assessments*
- Academic faculty to provide in-services within your clinical site in their area of expertise
- Library resources of the Sulo and Aileen Maki Library at Finlandia University available on-line at www.finlandia.edu
- Educational videos from the PTA Program
- Notices of physical therapy related courses or events offered on site at Finlandia University or in local area
- Observation of individual PTA lectures in areas of their interests, with permission of the PTA instructor
- Opportunities to participate as a guest lecturer in the Clinical Educators area of expertise.

Clinical Faculty should also consult the following resources for continuing education:

- APTA web site: www.apta.org
- Professional literature and journals
- State Consortia for Clinical Education. In Michigan, contact the MPTA Special Interest Group for Clinical Educators

3.6 Evaluating the Clinical Education Program

The DCE completes an annual evaluation of clinical education to ensure that the program meets the following objectives:

1. The program will maintain an adequate number of affiliation sites that provide varied settings, patient populations and learning activities.
2. Students will have access to current information on clinical sites that facilitates their selection of appropriate sites.
3. Students will have a quality clinical learning experience under appropriate PT and/or PTA supervision
4. Students will receive the necessary academic/classroom training prior to their clinical experience.
5. Clinical faculty will receive current program academic and clinical requirements for each level of PTA clinical education.
6. Clinical faculty will receive adequate information about the clinical communication, supervision, and evaluation methods.
7. Clinical faculty will receive the information and academic support needed to encourage students' active learning behaviors, and to facilitate the students' progress towards the goals of the affiliation.

8. The clinical faculty will receive on-going opportunities for professional growth through feedback and educational opportunities.

The following data is used to evaluate the above objectives:

- Clinical site visit notes. DCE/designate notes any activities at the clinical site that will facilitate a quality clinical education experience or will impose a barrier.
- Clinical Affiliation Communication Form. The DCE/designate records their discussion with the CI and the SPTA at mid-term and final weeks. If the student has difficulties, remedial actions are outlined on the form.
- Completed Weekly Planning Forms. Confirming the correct number of clinical hours and ongoing feedback and communication between Student and CI.
- Completed Clinical Performance Instrument. Confirming the student is receiving constructive comments for improving in the 14 performance criteria.
- Student Evaluation of Clinical Education Form (SECE). The form indicates student's satisfaction with the preparation for the clinical experience, orientation to the clinical facility, appropriateness of learning experiences, variety of clinical experiences, clinical supervision, overall clinical site experience and academic preparation. Students are encouraged to share their evaluation with their CI at the end of their affiliation and have their CI sign the form. If they desire not to do so, they should send it to the DCE with the reasons for their hesitancy to provide feedback.

A review of the above data will be completed after each affiliation and the CCCE and CI will receive feedback. Additional clinical faculty development resources will be given as needed or requested. When a severe concern is identified this will be addressed by the DCE in a timely manner. If the concern is significant and the clinical site cannot address the problem, the clinical site will be dropped from the list of established sites.

The data from all the affiliations will be reviewed annually to identify the strengths and weaknesses of the clinical education program. The DCE will highlight the met and unmet objectives and make recommendations as necessary to the Program Director in August and to the Advisory Board.

Section 4: THE CLINICAL AFFILIATION

The Academic Program, the Clinical Affiliate, and the student PTA are responsible for implementing and evaluating the clinical experience. This chapter describes the roles of the Director of Clinical Education (DCE), Clinical Coordinator of Clinical Education (CCCE) and the student PTA. The preparation of the student PTA and the evaluation of the student by self, CI and DCE is described in detail. Procedures for remediation and dismissal from the clinical affiliation are included.

4.1 Academic Program Responsibilities

Academic Program responsibilities are specified in each individual Clinical Affiliation Agreement. The Academic Program should have an original copy of the signed agreement for each affiliated site. The standard Affiliation Agreement for Finlandia University can be found in Appendix A.

4.11 Role of the Director of Clinical Education (DCE)

The Finlandia University Academic Program designates a faculty member to plan, administrate and coordinate the clinical education for the student PTA. The DCE:

- Serves as a liaison between Finlandia University and the affiliating facilities by selecting the clinical education sites and overseeing the selection of educators, scheduling the clinical affiliation, communicating information between the academic faculty and clinical facilities.
- Recruits and maintains an adequate number of clinical contracts in terms of quality, quantity and scope of practice to meet the clinical education goals of the program.
- Assigns the students to clinical sites and prepares the students for their clinical education experience.
- Monitors the academic performance of the students to ensure that they meet the criteria for participating in clinical affiliations.
- Ensures adequate supervision of the student by communication with the clinical instructor and student via letter, phone calls and site visits.
- Encourages and assists clinical site development and clinical faculty development by coordinating or offering individual training or workshops and providing written feedback about the students' clinical experiences at the site.

4.12 Student Clinical Education Requirements

To graduate from the Finlandia University Physical Therapist Assistant Program the student must complete:

- Clinical practice in three different clinical settings* which include:
 - o Inpatient care
 - o Outpatient care
 - o A setting of their choice
 - o One or more rural rehabilitation settings is recommended
- A varied case mix including:
 - o Patients with musculoskeletal and neurological diagnoses
 - o Patients in the adult and geriatric age groups
- A minimum of 75% of the technical skills listed in the Clinical Experience Logs and CPI Interventions #7, #8, #9, #11, #12.
- A minimum of 560 clinical hours
- Successful completion of PTA 224, 290, 291 and 292
- Professional Behaviors assessed by self and faculty advisor at or close to entry-level

* Several acute care hospital sites require that the didactic portion of the academic program is completed because of the complex nature of the patients' conditions and the hospital environment before they accept a student.

Should the student fail to meet one or more of the above requirements after completion of the third affiliation the DCE/ Program Director will decide if the student requires additional clinical experience to complete the program.

4.1.3 Preparing the Student for the Clinical Affiliations

Every technical course prepares the students for their clinical experiences. The DCE provides two courses, PTA 223 Clinical Affiliation Preparation and Practice and PTA 226 Clinical Preparation and Special Topics, which prepare the student for the clinical affiliation procedures and grooms them for their professional role.

PTA 223 is completed prior to the first clinical affiliation. The students learn to use the clinical evaluation materials and identify expectations for their learning in the clinical setting. Students are informed that they must abide by the rules and regulations of the clinical site and the importance of patient safety. Legal and ethical issues, core professional values, resume writing, documentation, patient education and the self-assessment of professional behaviors and learning styles are included. The student is required to develop a goal for the professional behavior, *Communication*, to work on during the first affiliation. (See Curriculum Section I)

PTA 226 is a continuation of the above and is completed prior to the final two clinical affiliations. The development of professional communication and critical thinking skills is covered in depth and students are required to refine goals and strategies to enhance their performance in these key areas. Career development activities such as job interviewing and stress management are also included.

The DCE ensures that all students participating in the first clinical affiliation:

- Complete the following physical therapist assistant course requirements: PTA 200, 205, 210, 215, 220, 223 and HSC 260 with a grade of C (2.0) or better.
- Have professional behaviors that are determined by their own assessment and verified by their faculty advisor to be at or above a beginning level. (Refer to Section 1, page 1-4)

The DCE ensures that all students participating in the second and third clinical affiliation:

- Complete all the physical therapist assistant course requirements of the program with a grade of C (2.0) or better
- Have professional behaviors determined by their own assessment and verified by their faculty advisor at or above the developing level.

The academic faculty determines that students are competent and safe to function in the assigned clinical placement as part of the course requirements. Students practice the skill competency for each modality, treatment technique/procedure or exercise taught on one another in the classroom/laboratory both during class hours and at other appointed hours. Instructors will complete a skill assessment for each clinical skill taught and will ensure that the student demonstrates safe and appropriate techniques.

The instructors will base their assessment on the Clinical Performance Instrument (CPI) Version 2.0 and the *APTA Normative Model of Physical Therapist Assistant Education, version 2007*.

The exception to the above is for the modalities of infrared, diathermy and ultraviolet. Students are taught the concepts, contraindications and precautions and are tested by written examination. “Hands-on” practice is not provided as part of the academic program. This exception is the result of a survey of our affiliated clinical sites in 1997 that indicated these modalities were seldom utilized for treatment.

Practical examinations are given to test the student’s ability to communicate effectively with the patient, handle the patient appropriately, carry out the desired treatment plan, assess changes in the

patient's condition and appropriately report findings to the supervising physical therapist either verbally or through documentation. The student is questioned for their knowledge of indications, contraindications, precautions and rationale for the treatment. To participate in the clinical practice students must pass the practical and the lecture portion of the class with a grade of C (2.0) or higher.

4.14 Student Selection of Individual Clinical Placements

The DCE guides students in their selection of clinical sites. Students should select sites that meet the program's clinical education requirements and their own individual goals. The site selection process is described to the students in the spring before their final academic year and students with special concerns are asked to meet with the DCE.

The following outlines the process of clinical site selection:

1. Students meet with the DCE in the spring semester prior to the start of their technical year and are familiarized with the clinical selection process.
2. Students are given a list of the "Active" and "On File" affiliated clinical sites, organized by setting and identified by geographic location ("Active" clinical sites have indicated clinical placement slots; "On File" sites are clinical sites that are used infrequently but have agreed to try and provide a slot when a student requests a clinical placement.)
3. Students provide the DCE with their individual goals upon completion of the program and their preferences for patient populations, treatment settings and geographic location. Also, each student indicates three choices for each clinical affiliation from the active and on-file sites. Students may also request an additional site under the conditions described in *3.1.1 Student Requests for Additional Clinical Sites*.
4. The DCE reviews each student's site choices and confirms that the choices will meet the clinical education requirements and the student's individual objectives.
5. The DCE confirms the availability of the sites and strives to give each student one of their three choices and if possible their first choice. The DCE will provide alternatives if their choices cannot be accommodated or the DCE feels the choices given will not meet the student's goals or the program requirements.
6. The DCE presents a final clinical affiliation list to the student.

Students have one week to negotiate changes in the affiliation assignments with the DCE. After this time period, there will be no changes except at the discretion of the DCE. Students are responsible for cost of food, housing and transportation at all sites.

Selecting a Clinical Site Not Presently Affiliated with the PTA Program

The DCE may give permission to an additional site request based on the following:

- Student's most recent GPA and course grades
- Student's attendance habits
- Professional behaviors demonstrated throughout the school year.
- Site's ability to provide a quality clinical education experience as per "Assessment of New Clinical Sites Form"
- Student has contacted the site and the site is willing to provide a clinical placement for the scheduled time period of the affiliation and the facility has an established Clinical Education Program for PTA Students.

- Site enters into an affiliation agreement with the PTA program.

Students must follow the following procedure to request an additional site:

1. The student inquires if the clinic is willing to provide a clinical experience for the student during the scheduled affiliation time period and confirms that the clinic has had students from other PTA programs.
2. If the facility is willing to offer an affiliation, the student completes an “Additional Site Request Form”.
3. The DCE will contact the CCCE and confirm that the clinic is able to provide appropriate learning experiences and a qualified clinical instructor (CI) for the student using the “Assessment of New Clinical Sites Form”.
4. Approval of a site is at the discretion of the DCE. If approved, an affiliation agreement must be executed prior to the student’s affiliation as stated above. The affiliation agreement may be ongoing or for one time only as agreed by the site and the DCE.

Planning for the Clinical Affiliation

1. Students may expect to complete **one** of the three affiliations at clinical sites within 2 hours of Finlandia University.
 - First Clinical Affiliation is 4 weeks: November – December
 - Second Clinical Affiliation is 5 weeks: April – May
 - Third Clinical Affiliation is 5 weeks: May – June
 - Three different clinical sites – one inpatient, one outpatient and one of the student’s choice. A rural setting for at least one is recommended.
2. Identify the types of experience you would like to obtain.
 - This may be related to your goals for working after you complete program, e.g. Sports Medicine, Long Term Care
 - You may just want to get a variety of experiences and sites
 - **Your best clinical experience may not be conveniently located**
3. Identifying options for clinical experience
 - List of affiliated clinical sites
 - Clinical Site Information Forms available in the on-line CSIFs
 - Students Experiences Survey available in student files.
 - DCE
 - An additional clinical site may be requested
4. Budget for affiliations away from home and save money for these expenses
 - See Financial Aid Office regarding tuition costs for 3 semesters in the final year and extra away costs
 - Cost of transportation to site if far away
 - Daily transportation costs
 - Food costs
 - Housing costs ~ \$200 – 250 per week at an economical motel, can sometimes get a better deal with Bed and Breakfast establishments especially out of season.
5. Housing Options
 - Relatives and Friends (least expensive)
 - Bed and Breakfast and Motels

- Short-term Apartment Rentals
- Housing availability at site

Motel or Bed and Breakfast facilities can be found using google.com or calling the Chamber of Commerce of the location you will be going.

4.15 Communication with Site

Communication between the clinical site Center Coordinator of Clinical Education (CCCE), Clinical Instructor (CI) and DCE is crucial to the success of the clinical education program. The DCE encourages the CCCE and the CI to call and request information or assistance to provide a good clinical education experience for the student. Typically, the DCE or assigned faculty member will call the CI prior to the affiliation, during the affiliation and follow up with written feedback on the clinical affiliation and the student's experience.

4.1.5.1 Communication before the Affiliation

The CCCE and the Clinical Instructor are made aware of the training requirement for the CPI 2.0 that is available at "The Learning Center" on www.apta.org as soon as the clinical placement is finalized. A hard copy of the CPI Training Document is sent to the CCCE and/or CI.

The student will send the CCCE/CI the following items approximately two months prior to the affiliation:

1. A cover letter detailing the student's goals for the affiliation and learning style preferences
2. A current resume
3. Clinical Instructor Selection Form
4. A Finlandia University return envelope

One month prior to the start of the affiliation, the DCE sends the Clinical Instructor a syllabus which outlines the expectations for the clinical experience and a copy of the Clinical Experience Log which identifies the technical skills listed in the CPI Interventions #8 through #12 . In addition, information on clinical liability insurance, skills not taught in the program and updated information on Medicare and supervision of the student are included in the packet of information.

One to two weeks prior to the affiliation, the DCE or assigned faculty member phones the CI to ensure that the above information has been received and to answer any questions. If this is a new CI, the DCE will review the process in more detail and will determine if more resources or a visit is required to assist the CI. Encouragement is given to call if any concerns or questions arise during the affiliation.

4.1.5.2 Communication during the Affiliation

During the student's affiliation, the DCE or a designated faculty member will be identified as the student's contact person. The student or CI should notify their contact person if there are any concerns or questions. If there are any significant concerns the DCE will be notified but the designated faculty member has the authority to resolve minor problems and advise students and clinical instructors.

The DCE or designate will either call and/or visit the student during mid-term and final clinical evaluation week. The clinical instructor and student should complete the mid-term CPI and sign off prior to the DCE/ delegate call if possible. Concerns with the use of the PTA CPI web-site can then be rectified prior to the final evaluation. A Communication Form for DCE/designate will be used by the DCE/designate to report the student's progress and the DCE/designate should also read and make notes of the following on reviewing the CPI on the PTA CPI web: discrepancies in the CI's and student's ratings and comments; clinical time to be made up; actions taken in the event of performance concerns.

The DCE should be alerted immediately if there are concerns identified that could prevent a student from passing the affiliation. The Communication form is directed to the student's file at the end of the affiliation and the information on the form is used in assessing the student's clinical experience. As well, a copy of the students and CI evaluation ratings on the CPI is placed in the student's file.

4.1.5.3 Communication Following the Affiliation

The DCE/ designate sends a letter to the CI after the affiliation to thank them for sharing their expertise and time to supervise the student and to provide feedback on the clinical affiliation. The DCE reviews the comments on the "Student Evaluation of Clinical Education", the Communication Form, the CI's comments on the Weekly Planning Forms and their feedback to the student on the CPI and from this review provides constructive comments to the CI and the CCCE. A copy of this letter and the Student Evaluation of Clinical Education is sent to the CCCE. When there is a significant concern the DCE will call the CCCE and/or CI to discuss a plan of corrective action.

4.1.6 Evaluation of the Student:

The DCE is responsible for determining the final pass/fail of the student for each affiliation based on:

- Clinical Instructor's CPI rating and comments
- Student's CPI self-assessment
- Communication Form for the Affiliation
- Completion of clinical hours
- Weekly objectives on the Weekly Planning Form
- Case Study (first affiliation)
- Performance on the Scorebuilder's PTA Exam (final affiliation)

4.1.7 Privacy and Confidentiality

The privacy and confidentiality of the students and patients is respectfully maintained in both the academic and the clinical environment. The Family Educational rights and Privacy Act of 1974 (FERPA) is adhered to protect the privacy of the student educational records and HIPAA (Health Insurance Portability and Accountability Act of 2006) is adhered to for both students and patients.

Students authorize the release of required information to the clinical site by signing "The Student Conduct Form". In addition, students authorize release of criminal background check information to the clinical site by signing the "Limited Release of Criminal Record" form. Background checks are only viewed by potential affiliation site personnel and academic faculty. Background check information is kept in a locked file in the DCE office separate from the student's academic file.

Students also authorize the release of information when a required drug screen is completed for or by Finlandia University.

Student counseling/advising sessions with program faculty and clinical faculty will occur in an appropriate private area and confidentiality will be maintained by all parties concerned.

In signing “The Student Conduct Form” students also acknowledge that all information acquired in the program related to personal conditions and affairs of others is confidential. The student receives instruction regarding patient confidentiality in PTA 101 Introduction to Physical Therapy; in PTA 223 Clinical Preparation students are instructed in the guidelines for HIPAA and must receive a passing grade in the HIPAA Quiz prior to commencing their clinical experiences.

4.2 Clinical Site Responsibilities

Clinical Site responsibilities are specified in each individual Clinical Affiliation Agreement. The Clinical site should have an original copy of the signed agreement. The Standard Affiliation Agreement for Finlandia University’s PTA Program can be found in Appendix A.

4.2.1 Center Coordinator of Clinical Education Role

The Clinical Site identifies a representative with the qualifications described in Section 3.2.1 to administrate and coordinate the assignments and activities of students at the clinical center to be the Center Coordinator of Clinical Education (CCCE). The CCCE:

- Provides the necessary documentation to Finlandia University’s PTA Program including the Clinical Site Information Form (CSIF) and a signed Clinical Affiliation Agreement
- Schedules student affiliations
- Selects an appropriate qualified clinical instructor for each student (Section 3.2.2)
- Coordinates communication between the school and the clinic
- Develops an appropriate clinical education program
- Intervenes between the student and clinical instructor as needed
- Assists clinical instructors in their development of clinical teaching skills

4.2.2 Selecting Clinical Instructor for Affiliation

1. The CCCE selects the clinical instructor (CI) based on:
 - The criteria in Section 3.2.2 (a *competent PT [licensed] and/or PTA [licensed as required], has one or more years of experience and is interested in working with student PTAs*) The PTA Program at Finlandia University encourages the clinical centers to select experienced PTAs who will be positive role models for our students. It is important that the student also have a PT involved to help the student appreciate the PT/PTA team roles.
 - The student’s pre-affiliation information (resume and cover letter) which outlines the student’s goals and learning style.
2. The CCCE notifies the DCE by completing and returning a Clinical Instructor Selection Form that accompanies the student information.
3. The DCE reviews the Clinical Instructor Selection Form prior to the scheduled affiliation to confirm the name, contact information, and qualifications of the CI, the affiliation dates and

that the clinical site is still able to offer the affiliation placement. The DCE notifies the CCCE if there are any concerns about the selection.

4.2.3 Clinical Instructor (CI)

The CI is directly involved with the student and provides the clinical site education opportunities for the student. During the student's clinical affiliation the CI:

- Provides clinical mentorship, supervision and feedback to the student
- Provides role-modeling of the PT/PTA relationship
- Completes the required Clinical Performance Instrument training on the APTA "Learning Center".
- Uses the APTA Clinical Performance Instrument (CPI) Version 2 to evaluate the student's clinical performance.
- Follows the guidelines provided by the DCE prior to the affiliation.
- Communicates with the DCE or designate at mid-term and final, or more frequently if there are questions or concerns, about the student's ability to successfully complete the affiliation.

4.2.4 Supervision of the Student

The CCCE and CI are responsible for ensuring the student has appropriate supervision. The students should begin the affiliation with observation experiences and patient care activities under direct supervision of the CI and gradually progress to independence. This will help assure patient safety. The following policies are to be followed to assure the safety of all individuals who participate in the clinical education component of the curriculum:

- The selected clinical sites have to have at least one full time licensed physical therapist on site. (Exception: A split rotation educational model, where two clinical instructors share one full-time position) The State Practice Act will serve as a guide to determine if a PTA can supervise student PTAs without the on-site supervision of a physical therapist. If the State Practice Act does not address this issue the DCE will decide if the PTA will adequately supervise the student PTA.
- The clinical sites that employ only one physical therapist should identify provisions for the students if the physical therapist is ill or away from the center.
- The CI must supervise a student PTA that is providing direct patient care or designate another qualified PT or PTA to do so.
- The CI and the student PTA should schedule weekly formal meetings and communicate in an appropriate manner to assure safety of patient care and to determine the progress made by the student PTA.
- The CI or other qualified designated supervisor has to be on the premises or reachable without delay at all times when a student is performing direct patient care. Pagers, phones and intercoms may be used when a student treats patients on other floors or in a separate building. The CI/designate must remain a safe distance from the student to be able to intervene should the student need help. Medicare and Insurance requirements must be followed.

4.2.5 Assessing Student Performance

The Clinical Instructor is asked to provide on-going constructive feedback to the student during the affiliation. A summative assessment of student performance is performed at mid-term and final using

the APTA Clinical Performance Instrument (CPI) 2.0. The DCE provides directions for completing the evaluation as part of the pre-affiliation correspondence. The CI may use the following information to assist in evaluating the student's performance:

- Their own observations
- Feedback from co-workers and patients involved with the student
- Progress shown on the weekly planning form

The student's ability to self-assess their own performance is important in the development of life-long learning skills. For this reason, we ask the Clinical Instructor to review the Student CPI self-assessment. Discussing any discrepancies between the CI's assessment and the student self-assessment proves to be a valuable learning tool. The CI and student should sign both the Student Self-Assessment and the CI Assessment.

4.2.6 Complaints about Student Performance:

The CI/CCCE should telephone the DCE/Delegate if any of the following occur:

- Student demonstrates unsafe, unprofessional or unethical clinical performance
- Student is suspected of substance abuse
- Student has excessive absenteeism
- Student has an illness or injury that will result in the student being unable to achieve course objectives
- Student fails to comply with the rules and regulations of the clinical site
- Student is prevented from successfully completing the clinical affiliation requirements because of an unexpected event

The clinical site supervisory personnel may temporarily relieve a student from a specific assignment or require the student be withdrawn from the affiliation if patient safety is a concern. The CCCE/CI should call the DCE immediately if this occurs. A meeting will be immediately scheduled by the DCE with the CCCE/CI and student to remedy the situation. The DCE may ask the CCCE/CI to complete an "Observation of Behavior Form".

The CI/CCCE is encouraged to call the DCE/designate if there are any questions or concerns prior to, during or after the clinical affiliation. See Section 5 for Remediation and Dismissal.

4.3 Student Responsibilities

4.3.1 Student Behaviors

The student will:

- a. Abide by the American Physical Therapy Association's (APTA) *Standards of Ethical Conduct for the Physical Therapist Assistant* and *Guide for Conduct of the Physical Therapist Assistant*.
- b. Observe the policies and procedures of the clinical facility, Finlandia University, and the PTA Program at Finlandia University.
- c. Observe the "*Patient's Bill of Rights*".
- d. Demonstrate professional behaviors and associated behavioral criteria as described in Section 32

of the PTA Student Handbook.

- e. Introduce himself or herself as a student to patients that they observe or treat.
- f. Comply with the working hours of the clinical agency. (Approximately 40 hours per week but varies with the agency and the clinical instructor's scheduled hours)
- g. Be responsible for their room and board during clinical assignments. (Some facilities offer room and/or board but student should budget for this expense)
- h. Provide his or her transportation to and from the assigned clinical agency.
- i. Be fully prepared mentally and physically to carry out the patient care assignment.
- j. Complete instructional class of OSHA requirements for PTA students, seminars on Hazardous Materials and Health Insurance Portability and Accountability and obtain a certificate to take to the clinical agency.
- k. Provide proof of health insurance and other health information to the clinical agency on request.
- l. Maintain the copy of liability insurance given to you by the program prior to attending a clinical and supply to the clinical agency if requested.
- m. Clear criminal background checks as required by the program and clinical site. Student will be responsible for any costs associated with the background check.
- n. Be aware that the clinical site has the right to request a drug screen and the student must clear the drug screen to the facility's satisfaction.
- o. Accept assignments as prepared for them by the PTA program faculty.

4.3.2 Dress Code

The student must:

- Adhere to the dress code of the clinical setting in which he/she practices (refer to individual Facility's Clinical Site Information Form).
- Wear a Finlandia University PTA Program nametag at all times during each clinical experience. The Finlandia University nametag is ***not*** to be worn while serving as an employee of a facility.
- Purchase and wear a white lab coat at the clinical experience if required by the clinic.

Failure to meet the above dress code will be cause for disciplinary action.

4.3.3 Personal Grooming

The following grooming habits should be adhered to in the clinical setting as well as practiced within the classroom:

- Clothing and laboratory coats are to be fresh and clean.
- Shoes are to be clean and polished.
- Hair is to be neat and clean.
- Beards and mustaches must be clean and trimmed.
- Nails are to be clean and manicured.
- No gum chewing.
- No jewelry, with the exception of a wedding band and post-type earrings for pierced ears.
- Be aware that strong odors of perfume, cologne, shaving lotion, cigarette smoke, and body odor can be offensive and/or noxious to patients.

4.3.4 Attendance

Attendance is mandatory for all clinical days. No official number of sick days or absences is allowed. Students absent from the clinic with medical documentation and/or a valid personal excuse may be excused at the discretion of the Clinical Instructor and DCE.

Students must notify the clinical site prior to the start time on the day of any absence. Missed clinical time will be made up at the clinical site's convenience. When more than one day is or will be missed, the DCE should be informed.

Failure to comply with the attendance policy will result in the student's dismissal from the clinical rotation.

4.3.5 Providing Pre-Affiliation Student Information

The student will send the CCCE/CI the following items one-month prior to the first affiliation and two months prior to the second and third affiliations. This will be covered in detail in PTA 223 and PTA 226:

- a. A cover letter detailing the student's goals for the affiliation, learning style and clinical experiences the student desires.
- b. A current resume
- c. Clinical Instructor Selection Form
- d. A Finlandia University return envelope

4.3.6 Information Accompanying Students to the Clinic

The student will have available the following documents and information at each clinical affiliation. Note that some sites require this information prior to the affiliation.

- a. A copy of signed Finlandia University Student Conduct Form
- b. Proof of liability insurance (a copy will be forwarded to the clinic by the insurance company)
- c. Proof of health insurance coverage
- d. OSHA Acknowledgment of Receipt of Training
- e. Hazardous Materials – Certificate of Completion
- f. Proof of patient privacy and confidentiality training as per Health Insurance Portability and Accountability Act, 2001 (HIPAA).
- g. Proof of current CPR certification (no older than 1 year)
- h. Current record of or test for TB (most facilities require no older than 1 year, however some require more current so student should refer to the CSIF). If a TB test is positive, a negative chest x-ray no older than twelve months is required.
- i. Proof of current immunization for Rubella, Rubeola (measles), mumps and chicken pox.
- j. Proof of current Hepatitis B immunizations or a signed Hepatitis B Immunization Information and Release from Responsibility Form
- k. Additional Health Information per clinics' request (specified in the facility's CSIF, under Medical Information)
- l. Current Flu Vaccination

- m. Criminal Background Check as required by the facility. Costs are the responsibility of the student.
- n. Background Information Disclosure Form (only required by Wisconsin Sites).

Please note: A site may have additional requirements identified in their information.

For example: Drug testing that may occur at the site when you arrive or be required prior to the first day.

The student will have the following evaluation materials:

- Syllabus for the Clinical Experience
- Training Manual for the Clinical Performance Instrument for PTA Version 2.
- Clinical Performance Instrument for self-assessment-on-line access
- Clinical Experience Logs: Patient Diagnoses, Technical Skills
- Weekly Planning Forms
- Student Evaluation of Clinical Education Form
- Professional Behaviors self-assessment
- Case Study Guidelines (for first affiliation)

4.3.7 Clinical Performance Evaluation – Student Role

Students are expected to take a lead role in the clinical education experience, initially developing their goals and then collaborating with the Clinical Instructor to define the goals and objectives for each affiliation. The student must complete and submit the following documents:

- a. **Technical Skills Log.** Students use this list of technical skills to collaborate with their Clinical Instructor to get as wide a range of experiences as appropriate for their level of academic and clinical experience. The technical skills log correlates with the Interventions Performance Criteria #7 thru #12 of the CPI. Each of the Technical Skills has related data collections skills that the student will note “observing” or “performing” in the CPI performance criteria #7 thru #12. Student submits this completed form at the end of the third affiliation to verify that a minimum of 75% of Technical Skills have been completed. The technical skills log should reflect the CI CPI assessment for Criteria #7 thru #12.
- b. **Weekly Planning Form** should be completed at the mandatory weekly meeting with the CI. The student completes the first section briefly listing interventions performed, observations made, and reviews progress towards objectives. This is an opportunity for the student to review the Technical Skills Log and identify skills they may have an opportunity to practice. The student discusses the above with the CI who will complete the second section noting the student’s strengths and weaknesses and progression in patient care. The third section is a collaborative effort by the student and the CI whereby objectives are set for the up-coming week. The student records the medical diagnoses for individual patients that he/she observes or treats that week.
- c. **The Clinical Performance Instrument Version 2.0** is used by the student to self-assess his/her performance. This is completed by the student and CI. Discrepancy between student self-assessment and CI assessment should be discussed and viewed as an opportunity for learning. Student must have completed the PTACPI on line and signed off by the dates specified in the syllabus.
- d. **Professional Behaviors Assessment** is completed at the completion of each affiliation and is a continuation of the assessments completed as part of PTA 223 and PTA 226. The student identifies their rating on the assessment, indicates their progress in identified areas and

establishes goals and strategies to enhance their professional behaviors as outlined in the syllabus.

- e. **Case Study** is prepared at the first clinical affiliation according to the guidelines given in syllabus.

The above materials are delivered to the DCE/designate as per directions on the syllabus for the affiliation.

4.3.8 Student Evaluation of Clinical Education Experience

The student's feedback on their clinical education experience helps develop the clinical education portion of the PTA Program and the clinical site. At the end of the clinical affiliation the student completes a Finlandia University *Student Evaluation of Clinical Education (SECE)*. Using the form, the student indicates their satisfaction with the preparation for the clinical affiliation, the orientation to the clinical facility, the variety and quality of clinical learning experiences, clinical supervision, and the academic curriculum.

The student is encouraged to share the completed evaluation form with the CI/CCCE after receiving the CI's final evaluation. The CI should sign the completed form and add any additional comments. Should the student not wish to share the evaluation form with the CI and obtain a signature, the student will be required to specify the reason to the DCE. The DCE reviews the information and forwards a copy to the clinical site when writing a feedback letter to the site. The student's name is deleted from the copy.

The SECE is submitted to the DCE/designate as per directions on the syllabus for the affiliation.

Section 5: Remediation and Dismissal of the Student During a Clinical Affiliation

5.1 Clinical Affiliation Remedial Policy

The Clinical Instructor should inform the DCE of any significant concerns immediately. See 4.2.6 Complaints about Student Performance. The following remedial measures are applied to students at risk of failing an affiliation and/or students failing an affiliation:

1. A learning contract is developed when the CI identifies the student as having significant concerns. The DCE, with input from the CCCE and/or CI, determines that a learning contract is required. A learning contract will detail the remedial actions required by the student to address the concerns and will specify the time frame for improvement and consequences should remedial actions not be successful. The learning contract can be developed by the DCE, CCCE or the CI. The student and his/her CI sign the learning contract. A copy of the contract is distributed to the DCE, CI and the student. See Appendix B for a copy of the learning contract.
2. A student, who has not met the pass requirements of one clinical affiliation may:
 - a) Proceed to the next clinical affiliation with a learning contract in place

- b) Receive an incomplete grade for the affiliation and will repeat appropriate parts or the entire affiliation before progressing to the next course/affiliation. A learning contract will be written by the DCE to establish requirements for progressing. (A repeated affiliation may be at the same or a different facility at the discretion of the DCE)
 - c) May require remediation with instructors at Finlandia University prior to starting their next clinical. (See 6.3.4 Remediation)
3. If more than one clinical affiliation falls below passing requirements, the student will receive a failing grade and will be dismissed from the program.

5.2 Dismissal Policy

A student may be dismissed from the Finlandia University's PTA Program when:

- Minimal performance is not maintained and/or for persistent behavior that is not reflective of safe PTA practice
- There is substance abuse
- Student is found to be guilty of cheating on an examination or plagiarizing on a paper or report
- Student has excessive absences during the clinical affiliation without documentation or approval of the DCE
- Faculty deems that the student's health, conduct, scholastic standing, or clinical practice does not meet the minimal standards of the program

Dismissal from the program can make the student ineligible for re-entry into the PTA program at a later date. It is the responsibility of each student to read the Finlandia University catalog and handbook and the Physical Therapist Assistant Student Handbook and to seek consultation with the department personnel should specific problems or questions arise.

Section 6: Resources for the Clinical Educator

This section provides information and suggestions to assist the Clinical Educator. It will be especially helpful to new clinical instructors or Center Coordinators of Clinical Education.

6.1 Preparing for the Affiliation

The following activities will help the clinical instructor prepare for the start of a clinical affiliation:

1. Read the letter and resume sent by the student to the CCCE/CI of your site. These will provide background information on the student physical therapist assistant (SPTA), his/her learning style and learning objectives for the clinical.
2. Review the evaluation materials sent to you by the DCE including:
 - a) Syllabus for the clinical affiliation which has specific learning objectives
 - b) Clinical Performance Instrument
 - c) Clinical Experience Logs which lists the skills the SPTA can perform
 - d) Tips for the clinical instructor
3. Refer to the Program Curriculum found in Section 2 of this handbook.

4. Outline the learning experiences available at your site and your goals for the student's affiliation.
5. Set up a skeleton schedule for the student with a patient that he/she may follow and plan other activities.
6. Arrange your schedule to allow daily discussion time (~1/2 hour) and time for a weekly planning session (~1/2 hour)
7. Arrange a place for the student to sit and provide preliminary orientation materials.
8. Review the affiliation with the CCCE and call the DCE with any questions.
9. If you are a first-time CI or CCCE you may find APTA's *Self-Assessment for the Clinical Instructor* and/or *Self Assessment for the CCCE* helpful. The DCE can provide these to you.

6.2 Orientation for the Student

It is important during the orientation for the clinical instructor to give the student the context of the clinical education experience. The student, like any new employee, needs to know the policies and procedures of the department, the names of staff he/she will be working with and the location of work areas, offices of instructors, supervisors, restrooms etc. The CI can encourage the student to feel at ease in the clinic environment and to be comfortable to ask questions. The following are items that may be included in the first few days to help the student:

- Tour the department and introduce the PT staff, support staff and administration
- Familiarize the student with work areas, types of equipment, lunch areas, restrooms, telephone, library, study areas, etc.
- Provide an orientation schedule that includes: procedures in the department, documentation and facility abbreviations, organization of patient charts, daily schedule, facility policies and procedures for emergencies, patient confidentiality (HIPAA), and infection control.
- Communicate to the student clearly the person(s) the student is expected to report to and establish whom the student may go to for help or problems.
- Establish a backup supervision plan for the student when you are not available (supervision must be provided by a PT and/or PTA with one or more years of experience).
- Ensure the student understands the expectations of free time (coffee breaks, lunch).
- Provide handouts of important information for easy reference eg. abbreviations list.
- Discuss with the student their objectives and the objectives you feel are important to this clinical site. Negotiate shared objectives for the affiliation and for the first week.
- Reassure the student that the emphasis of the clinical affiliation is on learning, and that you will be helping that process by helping the student to assess their strengths and weaknesses. Feedback and evaluations are part of the learning process.
- Establish a schedule for feedback and weekly planning sessions.

6.3 During the Clinical Affiliation

The student is expected to take responsibility for his/her learning and to use adult learning behaviors. The CI can encourage those adult-learning behaviors by the following:

- Request that the student assess their skills on a regular basis
- Provide the student time and opportunity to reflect on patient treatment
- Identify learning style of the student and your own learning style and assess the impact on learning and teaching
- Encourage the student to keep a list of questions for discussions

- Facilitate learning with appropriate questions and coaching
- Do not expect the student to know and do everything that you do

6.3.1 Feedback

Provide on-going feedback on the student’s performance. Feedback is most useful when it is

- Immediate or timely
- Specific
- Positive with ideas for change
- Given in private
- Supportive versus judgmental
- Constructive
- Focused on the behavior not the student’s personality
- Based on firsthand information not “hearsay”

6.3.2 Facilitating Learning

The Clinical Instructor can help the process of student learning by the following:

- Be available for the student
- Use a variety of available patients for effective learning experiences
- Ask appropriate questions to help the student self-assess their knowledge level and understanding (See 6.3.3)
- Observe the student’s performance and provide opportunities for independence as the student is ready

6.3.3 Questioning Skills

Questions are an important key to learning. During a clinical internship it is important for the student to ask questions of the CI when there is an ambiguity or they desire further information. It is even more crucial for the CI to ask questions that will help assess the student’s knowledge and the student’s ability to apply that knowledge and use it for problem solving. Questions can build the student’s confidence and help students develop the ability to think on the spot and verbally express his/her thoughts well.

There are three basic types of question.

- Knowledge – does the student know the basic academic information?
- Application – is the student able to transfer or utilize the information in the clinical site?
- Problem Solving – is the student able to utilize their knowledge to generate a creative solution for a patient’s treatment plan?

Build the student’s confidence by starting with knowledge questions that you are sure the student will be able to answer.

- Open-ended and thoughtful questions such as “What do you think are the reasons for that?” help to stimulate discussion and provide you with some insight into the student’s understanding.

The CI can then provide prompting to draw out further information during the discussion or ask for clarification if required. These types of questions are more fruitful than a “yes-no”, or one-word answer recall questions.

Application questions allow the student to demonstrate their knowledge.

- An example of an application question would be “what exercises would you use to implement this physical therapy plan?”

Identify correct answers and help the student work through incorrect answers. The student’s initial answer may also be enlarged with further possibilities and refinements.

Problem-solving questions require the highest level of thinking in the student. Critical thinking is required to identify the issue and parameters of the problem; creative thinking is required to generate possible interventions and then critical thinking to evaluate the best response.

- Case scenarios or a question that is based on a challenge that the student has encountered during the day are some examples of the problem solving questions that are used by some of our CIs. Students need time to tackle the scenario and come back later to discuss options.

Clinical educators are encouraged to ask questions of the students. Sometimes the clinical educator may ask a question that they are not sure of the answer. This is a great opportunity to be honest and share the responsibility with the student for finding the answer.

References: *Handbook of Teaching for Physical Therapists* by K.F. Shepard and G.M. Jensen. 1997
Active Teaching Skills by M.E. Drench. Course Notes from 2001 National Clinical Education Conference

6.3.4 Remediation

Most performance problems can be corrected with early feedback. However, persistent performance problems require remediation. Start the remediation process as early as possible. In such cases the following from *Coaching through Effective Feedback* by Paul J. Jerome may be helpful:

1. Describe the current behaviors that you want to reinforce (praise) and those that you want to redirect to improve a situation. Be specific with behaviors but not judgmental.
2. Identify the specific situation(s) where you observed these behaviors.
3. Describe the impacts and consequences of the current behavior. Be objective and supportive and ask the student to evaluate his/her performance.
4. Identify alternative behaviors and actions for you, the student and others to improve the behavior. Be encouraging and offer ideas.

Provide opportunities for the student to try again and succeed. Be encouraging but honest. You may wish to proceed with a learning contract as described in Section 5.1 and found in Appendix B.

If you feel the student is at risk for failing the affiliation, the student and/or patients are at risk, or need support, call the DCE. Call as soon as possible. The DCE can decide if further intervention is required such as remediation with instructors at Finlandia University prior to next clinical and/or terminated.

6.3.5 Intervention

Request intervention by the DCE when a student continues to have difficulty. The DCE in discussion with the CI/CCCE and student can decide to implement a learning contract or discontinue the affiliation. Some of the problems that may require intervention include but are not limited to the following:

- Inappropriate judgment
- Failure to establish satisfactory relationships with patients and staff
- Failure to treat assigned patients
- Behavior that jeopardizes patient safety
- Failure to know the rationale for patient treatment, precautions and contraindications
- Unwillingness to follow directions
- Inability to accept constructive criticism
- Failure to manage time well
- Repetitive errors in which a critical incidence is filed by the CI

6.4 TEACHING MODELS IN CLINICAL EDUCATION

1 CI : 1 student

This refers to the assignment of one student to one clinical instructor. This has been the traditional clinical teaching model used for physical therapy in the United States. While it has not been proven to be the most effective teaching model, it continues to be used with the most frequency. This traditional model has been increasingly challenged and replaced with alternative clinical teaching models.

2 CIs : 1 student (split rotations)

This refers to two part time PTs/PTAs equaling one full time employee sharing the responsibilities of the CI. In this situation the teaching model is still 1:1.

1 CI : 2 students

- A. 2:1 Individualistic model: The CI instructs the students on a one to one basis. The students work individually; consultation and collaboration with student peers are not encouraged by the CI.
- B. 2:1 Collaborative model: The students can have their individual patients, but they are encouraged to consult and collaborate with each other. In the collaborative model, the CI acts more as a resource person and mentor for students. The students are encouraged to help each other with problem solving, second opinion etc. The CI may arrange individual and joint sessions with students as needed.

1 CI : more than 2 students

The individualistic and especially the collaborative model can be modified to 3 or even 4 students per CI. The principles remain the same.

It is important to note that, when the CI supervises more than one student, s/he has to be able to delegate a major part of his/her patients to these students. Usually this is not a problem, since the students eventually assume responsibility of a patient load equal to or greater than that normally carried by the individual PT/PTA. It is also important to remember that PTA students should not be working independently with patients whose outcome is not predictable. Therefore the CI should either

give those patients to other PTs within the department, or if this is not possible, assume full responsibility for treatment of these patients. However, the CI could still delegate appropriate parts of the treatment session to the student(s). The CI could ask the other physical therapists within the department to delegate appropriate patients to the PTA students, if so desired.

Increasing need for clinical placements and good results with collaborative clinical teaching models from both student and CI viewpoints have indicated a need to further explore these alternative clinical teaching models. One important advantage is that the collaborative model prepares the future PTA better for functioning as a “team player” in the physical therapy field.

References and recommended reading regarding the design of clinical education:

- *APTA Clinical Education: An Anthology Vol. 2, 1996.*
- Ladyshevsky, Healey: *The 2:1 Teaching Model in Clinical Education: A Manual for Clinical Educators*, Department of Rehabilitation Medicine, Division of Physical Therapy, University of Toronto, 1990.

6.5 EVALUATION

Evaluation should be a constructive process focused on student learning and pointing out the student’s strengths and weaknesses. The student should be encouraged to assess their own performance and identify areas for praise and for improvement. This is the basis of lifelong learning.

Weekly: Meet with the student and use the Weekly Planning Form that the student will have in his/her assessment binder. Provide written feedback on how the student has met the week’s objectives and constructive suggestions for improvement or continued challenges. This would be a time to review the Clinical Experiences Log with the student to see that they are accessing opportunities available at your site.

Mid-term and Final Evaluation using the CPI: This evaluation should be consistent with the feedback given on the weekly planning form.

6.6 CLINICAL FACULTY DEVELOPMENT

The Finlandia University PTA Program encourages the clinical educator to develop their clinical skills and knowledge and their clinical teaching skills. Refer to section 3.2.3 *Clinical Faculty Benefits and Privileges* for full list of resources available.

The PTA Program will assist clinical sites in the following areas to help clinicians develop knowledge and clinical education skills. The PTA Program hosts educational courses for specific clinical skills to provide access to these courses in the Western Upper Peninsula. The program will also set up APTA Clinical Instructor Education and Credentialing Workshops when required. The DCE will monitor the clinical faculty development needs and provide seminars, workshops and material as deemed necessary by the clinical site and the DCE.

The CI/CCCE can access the following through Finlandia University to assist in their clinical teaching development or establishing a clinical education program in their facility:

- *APTA Guidelines and Self-Assessments for Clinical Education –1999 Version*

- *APTA Clinical Instructor Education and Credentialing Program*
- Finlandia University PTA Program's Workshops for Clinical Educators
- Handbook of Teaching for Physical Therapists by K.F. Shepard, G.M. Jensen. 1997.

The DCE will provide sessions at a facility or at the university to present specific clinical teaching techniques or to address clinical education issues that have occurred at a site. These can be arranged as required.

Clinical faculty have access to the library resources at the Sulo & Aileen Maki Library on Finlandia University's campus. Clinical faculty are eligible to receive a library card from the library. Use the website: www.finlandia.edu and click on the site index - Maki Library to access the on-line catalog Voyager.

The PTA Program will allow facilities to use their video resources by arrangement. A copy of video resources is available upon request.

PTA Program faculty can be contacted to provide presentations on their areas of specialty.

Appendix A

FINLANDIA UNIVERSITY

PHYSICAL THERAPIST ASSISTANT PROGRAM AGREEMENT

AGREEMENT made this ____ day of _____ 20_ by and between

(hereinafter referred to as the "Facility") and Finlandia University of 601 Quincy St., Hancock, MI. 49930 (hereinafter referred to as the "University"):

WHEREAS the University offers a program for the training of physical therapist assistants, and

WHEREAS the Facility provides a service that regularly offers physical therapy to those in need of such services and therefore regularly employs physical therapists and physical therapist assistants, and

WHEREAS the Facility and the University share the following objectives of Clinical Education:

To give the student opportunities to provide Physical Therapy Services to the available patients; and

To give the student the opportunities to achieve the terminal competencies of the PTA Program; and

WHEREAS the parties hereto desire to enter into a relationship to provide clinical instruction to the students of the University who are enrolled in its Physical Therapist Assistant Program (hereinafter referred to as "PTA Program"),

NOW, THEREFORE, IT IS HEREBY AGREED BY AND BETWEEN THE PARTIES HERETO AS FOLLOWS:

A. Responsibilities of the University:

1. to assume and retain full responsibility for the planning and execution of its PTA Program, including administration, faculty appointments, curriculum, criteria for student admission, student advancement, and graduation, and for compliance with any applicable laws, statutes, rules, or regulations presently in force or at any time in the future enacted or promulgated and to assume responsibility to assure continued compliance with the educational standards established by the American Physical Therapy Association;
2. to designate one or more of its instructors or facility members (instructors) to instruct and provide academic supervision of students during the PTA Program and to appoint a faculty member as the Director of Clinical Education (hereinafter referred to as "DCE") to the University who will have immediate

responsibility of student clinical education and be a liaison between the University, the Facility, and the students and to provide and assign qualified instructors, to the extent not provided by the Facility, for the instruction and supervision of students assigned to the Facility for clinical experience;

3. to establish and maintain on-going communication with the appropriate personnel of the Facility on matters pertinent to the education of students enrolled in the Physical Therapist Assistant Program. Such communication may include, but is not limited to, curriculum, course descriptions, course outlines, policies, and significant changes in this information;
4. to confer with the Center Coordinator of Clinical Education (hereinafter referred to as "CCCE") or other appropriate personnel of the Facility in regards to placement of students at the Facility and to provide such other pertinent information as may from time to time be required such as the student's name, degree of experience, and the like;
5. to certify for clinical experience only those students who meet the University's criteria for clinical activity;
6. to supply the Facility with appropriate forms to be employed in evaluating the performance of students participating in the program;
7. to advise the enrolled students of the responsibility for complying with the rules and regulations of the Facility (including requirements for patient privacy and confidentiality as described by the Health Insurance Portability and Accountability Act [HIPAA] of 1996 and related Federal and State regulations).
8. to maintain liability/malpractice insurance of not less than \$1,000,000 each occurrence, aggregate amount of \$3,000,000 covering students and faculty while assigned to the Facility for clinical experience or otherwise;
9. to schedule students and instructors so as to assure adequate supervision of student clinical activities;
10. to reimburse the Facility for any loss, damage, or breakage of any equipment by students or University instructors in those circumstances where Facility personnel would be held responsible for such loss, damage, or breakage;
11. to maintain all educational records and reports relating to the clinical program conducted at the Facility; and
12. to process any complaints by the Facility against any student in accordance with the University's standards and procedures for student conduct or academic discipline applicable to such complaints

B. Responsibilities of the Facility:

1. to designate as CCCE the Facility staff member who will be responsible for the planning and implementation of the clinical program in coordination with the designated faculty member designated as DCE pursuant to Paragraph A(2) above;
2. to provide the Clinical Instructors (hereinafter referred to as "CI") the physical facilities, equipment, supplies, and medical information necessary to conduct the clinical program and to furnish participating students and instructors, subject to reasonable limitations, access to existing ancillary facilities such as offices, conference rooms, locker facilities, libraries, and the like;
3. to advise the University of any change in its personnel, operations, or policies which may affect the clinical program;
4. to provide an orientation to the DCE, instructors and/or students that includes a tour of the facility and addresses any policies or procedures of a particular facility department pertinent to the PTA Program and to provide the University and the assigned students with a copy of the Facilities existing Rules and Regulations;
5. to provide appropriate training to students on rotation regarding patient privacy and confidentiality. Such training shall satisfy the requirements of all applicable Federal and state laws and regulations, including, but not limited to, the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and related regulations.
6. to evaluate the performance of the assigned students in conjunction with the University instructors described in Paragraph A(2) above on a regular basis employing the form provided by the University pursuant to Paragraph A(2) above at such reasonable intervals as the Parties hereto shall from time to time agree upon;
7. to indemnify and to hold harmless the University from any and all claims, damages, and/or loss arising out of patient treatment rendered by Facility staff or employees;
8. to make available, if possible, emergency health care for the assigned student which care will otherwise be the responsibility of the student; and
9. to keep confidential all student information (including background checks, immunization, medical, academic grades and performance) as required by FERPA.

C. Mutual Responsibilities and Additional Agreements:

1. No provision of this Agreement shall prevent any patient from requesting not to be a teaching patient or prevent any member of the Facility's staff from designating any patient as a non-teaching patient.
2. The facility shall have the right to terminate any student whose health or performance is determined to be detrimental to the well being of any patient. Student removal from the PTA program is subject to non-discrimination and ADA compliance policy as discussed in Item #4.
3. There shall be no monetary consideration paid by either party to the other, it being acknowledged that the program provided for hereunder is mutually beneficial. The parties shall cooperate in administering the program in a manner which will maximize the mutual benefits to the Facility, the University, and the students participating in the PTA Program.
4. Each party shall be separately responsible for compliance with all applicable statutes, laws, regulations, and rules, including anti-discrimination and affirmative action laws and statutes, which may be applicable to their respective activities under this program.
5. The University students and instructors shall be considered guests or licensees in the Facility and not the agents or employees of the Facility and, therefore, the Facility shall have the sole and exclusive right to determine what services shall be rendered to its patients.
6. Students shall not be allowed to give service to patients of the Facility apart from that rendered for its educational value as a part of the planned clinical program and the students shall at all times be under the supervision of a professional practitioner.
7. The Director of the University PTA Program or his/her designate shall make necessary visitations to the clinical site or the Facility and shall make a minimum of one such visitation every three (3) years and shall give reasonable advance notice to the Facility of such visitation.

D. Miscellaneous Provisions:

1. This Agreement is intended solely for the mutual benefit of the parties hereto, and there is no intention, express or implied, to create any rights or interest for any party other than the University and the Facility; provided, however, that the independently created rights of Facility employees, Facility patients, University faculty, University staff, and University students, some of which are referred to herein, shall not be abrogated or altered by this Agreement.

2. This Agreement shall be effective upon execution by the parties hereto and shall continue for a period of one year thereafter. This Agreement shall be annually reviewed by the parties hereto. This Agreement shall be automatically renewed for a like period unless either of the parties hereto notifies the other party in writing of its intention not to renew said Agreement which notice shall be given at least sixty (60) days prior to said renewal date. This agreement may otherwise be terminated at any time by the giving of sixty (60) days notice thereof by the terminating party to the other party in writing; provided, however, that, notwithstanding such termination, the University and the Facility shall fulfill their mutual obligations hereunder for the benefit of those students who have enrolled in and commenced, but have not completed, the clinical program provided for herein until such time as such students complete the present term of clinical training or discontinue participation in such training.
3. All amendments or modifications to this Agreement shall be in writing and shall be signed by the parties hereto.
4. This Agreement contains all of the terms, covenants, and conditions between the parties and thus constitutes the entire agreement between the parties.

IN WITNESS WHEREOF the parties hereto have executed this Agreement on and as of the date first written above.

Facility

Finlandia University

By: _____

By: _____

Print Name: _____

Fredi deYampert, PhD
Its: VP Academic and Student Affairs

Title: _____

And

And

By: _____

By: _____

Its: CCCE

Nicole Polakowski, PT
Its: PTA Program DCE

APPENDIX B

This Appendix consists of forms used to help when a student requires remediation. These forms also provide documentation should a student fail at remediation and must be dismissed from the program.

Included in this Appendix are:

B.1 Documentation of Student Behavior

B.1a Sample Observation of Student Behavior Form

Reference: Section 4.2.6

B.2 Clinical Experience Learning Contract

B.2a Sample Clinical Experience Learning Contract.

Reference: Section 5.1

Appendix B.1a

FINLANDIA UNIVERSITY PHYSICAL THERAPIST ASSISTANT PROGRAM OBSERVATION OF STUDENT BEHAVIOR (SAMPLE)

Date: June 5, 2018 Student Name: SPTA _____

Evaluator/Observor: Dead Eye

Facility: Good Health Center

Describe the setting (place, persons involved, atmosphere).

SPTA was working with a frail, elderly woman p/s pneumonia in the outpatient department. He was carrying out a program for strength and endurance. This was the third visit the student had with the patient. CI was in the area preparing for next patient's evaluation. There was an attendant bringing in towels from the laundry. There was another PT doing an evaluation in the end cubicle.

Describe the student action/behavior:

SPTA put the patient on the stationary bike and then went to the therapy desk to make a phone call. The woman became tired and tried to descend from bike independently. She would have fallen but for an attendant who passed by and offered support. SPTA reacted after the fact by saying "She was doing fine, I was sure I could make the phone call before she got tired".

SPTA has had several reminders about amount of assistance required for patients in 2 other instances – gait training and stairs.

Describe any action taken to resolve or address the above.

SPTA reviewed the status of the patient and type of supervision that was required for more strenuous exercises versus mat exercise with the CI. CI reported this incident to the ACCE and the CI's concern about the student's ability to function safely in this outpatient setting.

Student's Signature

Clinical Instructor's Signature

Student Comments:

Appendix B.2a

**FINLANDIA UNIVERSITY
PTA PROGRAM
CLINICAL EXPERIENCE LEARNING CONTRACT**

Student: SPTA

Date: June 6, 2018

Clinical Affiliation: I II III

During the next 2 weeks, I will meet the following objectives:

1. Maintain patient safety in the outpatient setting 100% of the time; identify patient status and how patient may respond to interventions (examples; A patient with COPD may need to rest frequently during exercises and a frail patient may need Stand By Guard Assist (SGA)).
2. Provide education to patient within the scope of PTA Practice that is consistent with the treatment plan and patient's understanding.

The purpose of these specific objectives is to clarify the expectations of my performance during my clinical experience at GOOD HEALTH CENTER. Failure to meet these objectives by June 20 may result in:

An extension of the affiliation if student meets objectives partially or repeat of the affiliation with further remediation should safety concerns continue.

Student's Signature

Date

CI's Signature

Date

CCCE/ACCE Signature

Date

Follow up report on reverse