



## **Department of Physical Therapy**

# **Doctor of Physical Therapy Clinical Education Handbook 2022-2023**

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## **Welcome to the Department of Physical Therapy at The University of North Texas Health Science Center at Fort Worth**

The following handbook has been compiled to help familiarize students and clinical faculty with the curriculum, responsibilities of involved parties, expectations, and resources available to assist clinicians and students in planning and implementing clinical education experiences. We are prepared to assist you to make this an excellent experience for everyone involved.

### **HSC Mission**

“Create solutions for a healthier community.”

### **HSC Vision**

“One University built on values, defining and producing the providers of the future.”

### **HSC Values**

*Serve Others First* – Encourage growth, well-being, and success of each other and the people we serve

- Empower one another to make values-based decisions
- Consider the impact of your decisions
- Be good stewards of people and resources
- Demonstrate compassion, care, and humility
- Promote individual potential

*Integrity* – Uphold the highest ethical standards

- Do what is right, not just what is easy – even if no one is looking
- Conduct ourselves with honesty, trustworthiness, and dependability
- Be transparent in actions
- Own, correct, and learn from successes and failures
- Demonstrate loyalty to our mission and vision

*Respect* – Treat everyone with dignity and compassion

- Gratefully acknowledge contributions and efforts of others
- Invite other perspectives and encourage dialogue
- Communicate openly in a timely, courteous, and relevant manner
- Promote diversity of thought, ideas, and people
- Build trust by honoring our word through actions

*Collaboration* – Work together to achieve shared goals

- Combine our strengths to discover new ideas and share best practices
- Seek opportunities to engage others and break through barriers
- Inspire one another to be more, collectively, than the sum of our individual parts

- Give, ask for, and value feedback
- Recognize the contributions of others and celebrate successes

*Be Visionary* – Create innovative solutions in the pursuit of excellence

- Respectfully challenge the way things have always been done
- Create unique ways to provide remarkable service
- Navigate change to move us forward
- Proactively implement new ideas
- Take thoughtful risks

### **DPT Program Mission**

“Creating solutions for a healthier community by producing highly qualified doctors of physical therapy, and leading in education, professional service, and scholarly activities.”

### **Program highlights include:**

- A well-rounded education in all aspects of contemporary physical therapy
- Opportunities for exposure to rural and global health through coursework and clinical rotations
- Faculty with board-certified clinical specializations in various fields of practice
- Interprofessional education experiences with students in other health professions programs at HSC and other institutions.
- Clinical sites across the DFW area, the nation, and globally, including opportunities to train in smaller communities throughout Texas, and international clinical experiences

### **Program Approval/Accreditation:**

HSC at Fort Worth is accredited by the Commission on Accreditation in Physical Therapy Education of the American Physical Therapy Association (1111 North Fairfax Street, Alexandria, VA 22314; phone 703-706-3245; [accreditation@apta.org](mailto:accreditation@apta.org)).

The University of North Texas Health Science Center at Fort Worth is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award masters, and doctorate degrees.

Clinical Education Faculty can discover more about the CAPTE criteria and processes from the APTA website at [www.apta.org](http://www.apta.org) or in dialogue with the program’s core faculty. Information regarding filing complaints with CAPTE can be found at [accreditation@apta.org](mailto:accreditation@apta.org)

# DPT PROGRAM'S EDUCATIONAL GOALS & OBJECTIVES

## **Core Professional Values, Professional Behaviors, Patient/Client Management & Professional Practice Expectations**

The program goal is to produce competent entry-level clinicians for the practice of physical therapy. The clinical education portion of the curriculum has been designed to complement and integrate with the didactic portion.

The program of study is designed to meet these goals based on information from contemporary practice of physical therapy, standards of practice, the Normative Model, minimum skills, core values, American Physical Therapy Association (APTA), advisory committee input, experience, expertise of the faculty, and current literature. The curriculum plan has been modified over the years to maintain currency in the different disciplines of physical therapy. The progression and topics of the curriculum integrate the core professional values, patient/client management, and professional practice expectations as identified by the American Physical Therapy Association (APTA) and the Commission on Accreditation in Physical Therapy Education (CAPTE). These are:

### Core Professional Values [Appendix A](#)

- Accountability
- Altruism
- Compassion/Caring
- Integrity
- Professional Duty
- Collaboration
- Excellence
- Inclusion
- Social Responsibility

### Professional Behaviors [Appendix B](#)

- Commitment to Learning
- Interpersonal Skills
- Communication Skills
- Effective Use of Time and Resources
- Use of Constructive Feedback
- Problem Solving
- Professionalism
- Responsibility
- Critical Thinking
- Stress Management

### Patient/Client Management Expectations:

- Screening
- Examination
- Evaluation
- Diagnosis

- Prognosis
- Plan of Care
- Intervention
- Outcomes Assessment
- PT education

Practice Management Expectations:

- Prevention, Health Promotion, Fitness, and Wellness
- Management of Care Delivery
- Practice Management
- Consultation
- Social Responsibility and Advocacy

**Clinical Education Objectives**

The HSC Doctor of Physical Therapy Program includes clinical education experiences designed to serve the program's mission for graduating students who are prepared for entry-level practice. Consequently, clinical experiences are designed to provide students with opportunities to develop a professional practice that models:

- Delivery of legal, ethical, and moral practice of physical therapy
- Safe and effective autonomous practice following contemporary regulatory requirements
- Full-spectrum of duties and responsibilities of physical therapist clinicians as represented by the patient-client management model
- All-encompassing responsibilities of the physical therapy profession related to being a member of the patient care team
- Advocate, consultant, teacher, researcher, manager, and leader of contemporary reflective practice, clinical reasoning, critical thinking, and evidence-based practice
- Lifelong learning, personal, and professional development
- Professional interactions with persons across the lifespan including at the minimum, adults, older individuals, and adolescent populations
- Professional interactions with persons across the continuum of care, including wellness and prevention
- Professional interactions with persons from different cultural and socioeconomic backgrounds, including from rural areas of Texas.

Additionally, the goals of clinical education are for graduating students to develop clinical proficiency across the continuum of care, all clinical practice patterns, and the lifespan, including participation in clinical experiences in settings consistent with the range of contemporary practice.

# STRUCTURE OF THE CLINICAL EDUCATION PROGRAM

## Expected General Educational Competencies in Clinical Education

The physical therapist professional curriculum includes clinical education experiences for each student incorporating general competencies. By the end of all clinical education experiences, students are expected to be able to practice at entry-level or above on the following:

- Learning to manage patients/clients representative of those commonly seen in practice across the lifespan and continuum of care
- Being involved in physical therapy settings is representative of those in which physical therapy is commonly practiced across the lifespan and continuum of care
- Interacting with physical therapist role models whose practice is consistent with the program's philosophy of practice including rural area physical therapy practice
- Having opportunities for involvement in interprofessional care teams
- Being able to participate in the delivery of legal, ethical, and moral practice of physical therapy
- Being immersed in a safe and effective autonomous practice following contemporary regulatory requirements
- Performing a full spectrum of duties and responsibilities of physical therapy clinician as represented by the patient-client management model of care
- Understanding the broader responsibilities of the physical therapy profession, including patient care team member, advocate, consultant, teacher, researcher, manager, and leader
- Being involved in the reflective practice environment, clinical reasoning, critical thinking, evidence-based practice, and other experiences that lead to the achievement of expected student outcomes

## Clinical Experiences

The clinical education program at HSC includes integrated and terminal clinical education experiences designed to meet the mission and goals of the physical therapy education program. The clinical experiences are designed to allow students frequent opportunities to integrate skills and expectations that encourage complexity in skills and practices. There are five different clinical experiences during the Doctor of Physical Therapy program at the HSC. The first begins in the third semester of the first year. By the completion of the final semester's Internship, students will be able to consistently demonstrate entry-level competence as indicated in the patient-client management model across the lifespan and practice patterns.

Clinical education is designed to provide students with various supervised clinical experiences including:

- At the minimum:
  - Inpatient hospital experience (acute care or inpatient rehab)
  - Outpatient orthopedic environments
  - Neuro-focused setting (inpatient, SNF, developmental pediatrics, outpatient neuro focus)
- All four clinical practice patterns include:
  - Musculoskeletal
  - Neuromuscular

- Cardiovascular/pulmonary
- Integumentary
- Patients/clients across the lifespan
- Patients/clients from different cultural and socioeconomic backgrounds

Exceptions to this guideline may be granted at the discretion of the clinical education team when HSC is operating on emergency status.

### **Description and Schedule of Clinical Curriculum**

The full-time clinical education curriculum includes thirty-six weeks of full-time clinical experiences giving the opportunity for students to interact, learn, self-assess, and be mentored in culturally competent and professional clinical affiliation sites. Student outcomes are shared by the academic and clinical faculty during ongoing formative and summative clinical evaluations.

#### Year 1:

Preliminary Clinical Practicum 2 weeks in Summer Semester

#### Year 2:

Clinical Practicum I 6 weeks in Fall Semester

#### Year 3:

Clinical Practicum II 8 weeks in Fall Semester

Clinical Practicum III 8 weeks in Fall Semester

Internship 12 weeks in Spring Semester

See [Appendix C](#) (UNTHSC Course Catalog) for more detailed course descriptions for clinical education and didactic courses.

### **Definitions of Clinical Sites**

#### ***Acute Care Setting***

The acute care setting provides inpatient services to patients/clients with unstable medical conditions that may result from acute disease, change in chronic disease, injury, or surgery. Patients/clients admitted into the acute care setting receive 24-hour/day highly skilled medical service from physicians, nursing, and a range of health professionals including but not limited to: physical therapy, occupational, speech therapy, registered dietician services, and social services.

Examples of Acute Care facilities include community hospitals, large medical centers, level 1 trauma centers, and specialty hospitals. These facilities may house emergency rooms, medical/surgical care units, multiple varieties of intensive care units, and surgical suites. Physical therapists in this environment work very closely with the entire health care team to diminish the impact of acute illness/active disease on physiological processes and functional independence. Acute care physical therapists also play a vital role in discharge planning making recommendations regarding the patient/client's need for further rehabilitation, additional support, or assistive technology.

### ***Post-Acute Care Facilities***

Post-acute care sites include facilities that provide inpatient care to residents that are relatively medically stable but unable to return to prior living arrangements. Examples of post-acute sites include inpatient rehabilitation centers, sub-acute care centers, skilled nursing care, and long-term care facilities.

#### ***Inpatient Rehabilitation:***

Patients/clients in this setting require intense physical, occupational, and/or speech therapies to maximize functional outcomes after incurring diagnoses such as CVA, traumatic brain injury, spinal cord injury, complicated post-surgical/medical conditions, or other neurological disease processes. These clients require 24-hour nursing care, a minimum number of weekly physician visits, and patients must be able to participate in at least three hours of skilled therapy including physical, occupational, and/or speech therapy per day.

#### ***Sub-Acute/Skilled Nursing Facilities:***

Sub-acute care and skilled nursing facilities provide inpatient care to patients/clients requiring medical and/or rehabilitation services to maximize functional outcomes. Patients/clients in sub-acute or skilled nursing facilities require supervised living conditions and must be able to tolerate 1 hour of skilled physical rehabilitation per day (physical or occupational therapy services) in most cases. Patients/clients in these settings may be recuperating from any host of diagnostic categories, including recovery from post-operative/medical conditions.

#### ***Long Term Care Facilities:***

Long-term care facilities provide varying levels of supervised living arrangements for patients/clients who cannot safely manage independent living. Physical therapists interact with these patients/clients to offer skilled interventions in cases when a change in functional status has the potential for improvement to occur.

#### ***Home Health Care:***

Home health refers to skilled nursing and rehabilitation services delivered in the home setting. Patients/clients are medically stable or sufficiently stable to be discharged from an acute or post-acute facility but cannot travel out of the home to receive services in the outpatient setting. Patients/clients receiving home health care have a broad range of clinical problems that require a high degree of clinical problem-solving.

### ***Outpatient non-specialized***

Outpatient non-specialized sites include ambulatory care environments that offer treatment to patients/clients in various age groups for a broad range of clinical problems, such as an orthopedic sports medicine facility that also sees neurological or other cases. Varying levels of complexity in the problem-solving and practice patterns may determine what level of practicum or internship the facility will accept students. These facilities typically offer a large exposure to the musculoskeletal practice pattern.

### ***Outpatient specialized***

Outpatient specialized sites include ambulatory care environments specializing in a narrow range of ages and clinical problems. Some areas of practice include work hardening, hand

therapy, women's health, pediatric rehabilitation, specialized manual therapy, and CORF (Certified Outpatient Rehabilitation Facility). These specialized settings typically prefer to provide placements to students in their final clinical experiences only. These sites may require a high degree of match between the student and facility; the student must be motivated to increase the depth of knowledge and skills in the specialty area of practice at the facility. The facility may require additional learning assignments either during or before the start of the experience. The facility may also want to interview students before accepting them for a clinical rotation.

To ensure students are prepared to sufficiently manage patients across the continuum of care, each student will be required to have clinical experience in each of the following practice settings: inpatient hospital (acute or rehab), outpatient orthopedic care, and one neuro-based location that will add breadth to the student experience. The DCE reserves the right to make decisions regarding site type and patient population on a case-by-case basis.

# ACADEMIC & CLINICAL FACULTY EXPECTATIONS RELATIVE TO CLINICAL EDUCATION

## **Roles of the DCE and Core Faculty**

To ensure continuity between the didactic education and clinical education in the HSC Department of Physical Therapy, the Core Faculty holds the following responsibilities:

- Assure that only students who meet academic and other professional expectations are referred to a clinical site
- Require all students to comply with bylaws, rules and regulations, and policies/procedures of the clinical site in addition to the state practice act for PT, as well as JCAHO, HIPAA, and OSHA regulations for health care workers
- Communicate any additional placement requirements of a site including, but not limited to, criminal background check, drug-testing, vaccinations, curriculum vitae/resume, schedule and attend an interview with site staff, or other procedures specific to an individual site
- Support the clinical site's decision to dismiss students from the facility for lack of professional behavior or poor clinical performance if such dismissal is warranted due to illegal, unsafe, unprofessional, or unethical performance
- Determine expectations for professional development, skill acquisition, and clinical competence for each clinical experience
- Assess student performance during academic preparation, make recommendations for improvement, and assist in clinical site visits.

## **The Director of Clinical Education (DCE) Responsibilities**

The DCE is the core faculty member at the HSC DPT Program, primarily responsible for supervising the implementation and ongoing evaluation of the clinical education plan. The DCE is responsible for communicating with the clinical education faculty all necessary information to facilitate the planning and execution of a student's experience at the clinical site. The DCE also assists clinical education faculty in managing any issues that arise during a clinical experience. The DPT Program also has a Clinical Site Coordinator that assists the DCE.

### ***Responsibilities of the DCE include:***

- Serves as a liaison between HSC and the clinical site
- Maintains current clinical education affiliation agreements and list of clinical experiences
- Assesses clinical sites to ensure the quality of education provided to students
- Provides development activities for clinical education faculty, including instruction in the use of the Clinical Performance Instrument (CPI)
- Assures current university coverage for general and professional liability insurance
- Assigns physical therapy students to appropriate clinical sites based on an optimal match between student educational needs and clinical site availability
- Makes periodic visits or telephone calls to the clinical site and makes suitable recommendations regarding training, supervision, and overall clinical experience of the student
- Serves as a liaison to clinical education faculty to problem-solve strategies and activities to maximize the educational experience for a student
- Evaluates student achievement and progress; monitor student performance, and submit grades for clinical courses

- Notifies clinical sites of clinical development and training offerings
- Collects and summarizes clinical education program outcome data
- Provides formal feedback and recommendations to the Program Director and core faculty about curricular needs identified by trends in the data collected and summarized
- Maintains contact with Site Coordinator of Clinical Education (SCCE) or other designated individuals (Clinical Instructor (CI), facility director/manager) and provides the facility with the required information and paperwork before and during clinical affiliation
- Negotiates clinical education agreement
- Sends requests for slots to the SCCE or other designated individual during the voluntary national mail-out dates between March 1 and 15 of each year
- Assists the SCCE and the CI at the clinical site in planning student's clinical experience
- Assists students with their clinical education planning

### **Clinical Faculty:**

Clinical Education Faculty members include the Site Coordinator of Clinical Education (SCCE) and Clinical Instructor (CI). Clinical education faculty members provide direct development, supervision, and mentoring to student physical therapists and may contribute to the design, implementation, and assessment of the curriculum plan, mission, and philosophy of the HSC's PT Program through formal and informal feedback processes.

#### ***Site Coordinator of Clinical Education (SCCE)'s Role***

- Administers, manages, and coordinates the assignment of Clinical Instructors (CIs) to incoming physical therapy students.
- Develops the clinical education program for the clinical site, including designing and coordinating learning activities available at the clinical facility, determining the readiness of facility-based physical therapists to serve as clinical instructors, and developing the instructional skills of the clinical instructors.
- Works with the Program's clinical education team to execute a clinical affiliation agreement. The SCCE is the focal point for communication between the clinical site and the academic program, including completing and updating the clinical site information form (CSIF) and providing oversight of the student's clinical education experience.
- Acts as a resource to students and clinical instructors, including addressing conflict when needed
- The SCCE of a facility may be anyone on the healthcare team (PT, PTA, OTR, SLP, etc.)

#### ***Clinical Instructor (CI)'s Role***

- Directly supervises and instructs the student during the clinical education experience
- Alter learning experience based on the student's level of competence and developmental needs or interests
- Inform students of all pertinent policies and procedures specific to the facility to ensure compliance
- Provide students with an appropriate level of supervision to ensure patient safety and high-quality care

- Provide feedback to the program regarding trends in student performance relative to demands of contemporary professional practice.
- Implement teaching methods that are conducive to the individual student's learning needs
- Provide critical feedback to enhance the student's current level of competence
- Assess student achievement with formative and summative tools provided by the school for the experience
- Be familiar with the HSC's Program in Physical Therapy curriculum to understand the program's expectations for student performance during and upon completion of a given clinical affiliation
- Minimum requirements for an individual to serve as a CI for a student physical therapist include:
  - A licensed physical therapist in the jurisdiction in which they practice
  - Minimum of one year of experience in clinical practice
  - Possess clinical competence (determined by the SCCE or clinic supervisor) in the area of practice in which they will be providing clinical instruction
  - Expressed interest in working with physical therapy students and pursuing learning experiences to develop knowledge and skills in clinical teaching
- Preferred qualifications for a clinical instructor also include:
  - APTA CI credentialing or
  - Texas Consortium (or other state Consortium) CI credentialing
  - ABPTS clinical specialist certification

# **RIGHTS AND PRIVILEGES OF CLINICAL EDUCATION FACULTY**

## **Mentorship**

The DPT program at the HSC supports the development of clinical education faculty members' role as teachers and student mentors in the clinical setting. The DCE and other core faculty members are available to serve as consultants for clinical education faculty as needed. The clinical education faculty or core faculty may also provide individual training/mentorship during an interaction with DPT students during an affiliation to assist a clinical instructor and student in creating a successful learning experience.

## **Collaboration**

The DPT Program supports clinical education faculty professional development with potential opportunities to engage in collaborative projects, such as clinically relevant research and publication/dissemination of case studies, posters, and articles.

## **Continuing Education Credits**

The DPT program offers continuing education courses, many of which are free or discounted for active CIs. Some states, including Texas, recognize the mentorship of student physical therapists as professional development. These jurisdictions may accept documentation from the program in physical therapy to fulfill continuing education requirements necessary for license renewal. Please refer to your state's practice act for details. Each CI is responsible for understanding their jurisdiction's requirements. If you need assistance obtaining a certificate, please get in touch with Ana Rodriguez, the Clinical Site Coordinator, for documentation at [ana.rodriquez@unthsc.edu](mailto:ana.rodriquez@unthsc.edu).

## **Gibson H. Lewis Library Access**

Upon request, the DPT program will offer library privileges allowing clinical education faculty to access all databases, including e-databases, e-journals, and e-texts. To obtain access, a clinical instructor must accept at least one student each year and comply with all rules and security training as dictated by library personnel. For access, please contact Ana Rodriguez, the Clinical Site Coordinator, at: [ana.rodriquez@unthsc.edu](mailto:ana.rodriquez@unthsc.edu).

## STUDENT RESPONSIBILITIES IN CLINICAL EDUCATION

In general, for a student to enter into any clinical experience, they must demonstrate the following:

- Successful completion of all previous course work with a passing grade or permission from DCE and Chair for those with special circumstances
- Professional comportment as deemed appropriate by the faculty
- Safe, legal, and ethical performance
- Proof of current CPR certification and required immunizations
  - The student must maintain their current status and provide proof to the program and the clinical site upon request.
  - Though required immunizations vary, typical requirements include Hepatitis B, Td, Varicella, and MMR. Many acute and inpatient facilities also require COVID-19 Vaccination. Students must maintain updated records through the HSC system, Mediat. Flu shots are also a common seasonal requirement.
  - When possible, students will be notified ahead of time of special requirements specific to their clinical site.
    - Students should notify the DCE if they are unable to comply with these requirements.
  - TB tests must be completed annually and remain current through the end of the clinical rotation.
  - The student is responsible for all costs associated with maintaining current cardiopulmonary resuscitation (CPR) and immunizations.
  - CPR certification by the American Heart Association BLS for Healthcare Providers is the most widely accepted. CPR certification must remain current throughout the entire duration of the clinical rotation.
- Attendance at all scheduled Clinical Education preparation classes during the program is required.
- Successful completion of HIPAA training (available on Canvas during Semester 1)
- Training in Blood-Bourne pathogens/Standard Precautions/Body Substance Isolation. Blood-Bourne pathogen training can be completed at: <https://www.unthsc.edu/research/biosafety/bloodborne-pathogen/>.
- Successful completion of a criminal background check upon matriculation into the program. If requested by the clinical site, students are responsible for obtaining a copy of their background check. Some sites may also require a more current background check. For help obtaining a new background check, please contact The Office of Care and Civility at [OCC@unthsc.edu](mailto:OCC@unthsc.edu). You will need to provide your student ID number in the e-mail.
- Drug/Alcohol Screening:
  - Drug screening will be conducted through Certiphi Screening twice during the program, once before PCP, and once approximately one year later before CPII. All screenings must be completed through the Certiphi system set up through the school unless the DCE gives explicit written permission.
  - A clear drug screen is required for progression to the clinic
  - It is the student's responsibility to complete all drug screens promptly
  - The student is responsible for all costs related to drug screening
  - Students will note that many facilities have adopted a "Zero Tolerance" policy on substance abuse in the workplace. Therefore, any positive screening results may have severe consequences for the student.

Many facilities may require criminal background checks/drug screens within a specified time of beginning the affiliation. A student's background screening as part of admission or programmatic requirements may not suffice. If the student is required to complete additional background or drug screens for a clinical site, the student is responsible for all associated costs.

All information gathered during drug/alcohol screening and criminal background checks is governed by HIPAA and FERPA and is strictly confidential. This information is to remain between the facility and the University and may not be revealed to any other party without written permission from the student. The student may be required to supply the DCE or Clinical Coordinator with a copy of their background check, immunizations, CPR card, and other documentation so that an attestation can be signed on their behalf. If a facility requests actual copies of the student's information, the student will be required to supply all documentation directly to their clinical rotation facility.

Students are responsible for maintaining their documentation and should not rely on HSC staff or faculty to keep track of student records. Students are expected to maintain their original documentation and provide a copy to the HSC if requested.

Students will be responsible for completing any clinical time lost due to incomplete requirements. The CI and DCE must approve the timing of the make-up requirements.

At HSC's DPT Program, students are expected to:

- Uphold the legal and ethical standards of the profession and the jurisdiction of their clinical rotations
- Uphold all policies and procedures governing the delivery of physical therapy services at the clinical site
- Uphold standards of the profession, including Core Values, Professional Behaviors, Code of Ethics, and standards of practice
- Integrate and apply information taught within the academic curriculum
- Demonstrate professionalism in all interactions
- Demonstrate effective verbal and written communication skills
- Demonstrate measurable progress toward clinical and professional competence
- Complete all assignments, paperwork, and documentation before the conclusion of the clinical experience
- Complete all formal and informal assignments given by clinical faculty during the clinical experience to facilitate knowledge base, clinical reasoning, and professional development;
- Engage in reflective practice evidenced by:
  - Assessing own learning needs and developing strategies to address those needs
  - Seeking and incorporating constructive criticism/feedback into future interactions
  - Demonstrating effective use of time and available resources
  - Developing and utilizing critical thinking and problem-solving skills
  - Maintaining contact with the DCE throughout the clinical experiences
- Additional goals and expectations have been developed for each clinical rotation to assist the student in progressing towards entry-level competency and in taking on the

roles and responsibilities of a physical therapist functioning in a doctoring profession. See the Syllabus for each course in [Appendix D](#).

### **Clinical Education Handbook**

The Clinical Education Handbook (CEH) is the required text for all clinical courses. Updated information for inclusion in the CEH will be provided as appropriate and posted to the Canvas site for the clinical education courses.

### **Physical Therapist Clinical Performance Instrument**

The Clinical Performance Instrument (CPI) is required for all clinical courses. The Physical Therapist Clinical Performance Instrument is a standardized, validated instrument used to assess student performance during clinical education experiences. Clinical instructors will access CPI online to assess student performance during and at the end of the clinical education experience.

Link for CPI:

[https://cpi2.amsapps.com/user\\_session/new](https://cpi2.amsapps.com/user_session/new)

### **Professional Liability Insurance**

All students registered for clinical education courses in the Doctoral Program in Physical Therapy will be covered by professional liability protection by an actuarially funded self-insurance trust administered by Accord. Students are covered by a policy of professional liability insurance or self-insurance with limits of no less than \$1,000,000 per claim and \$3,000,000 in the annual aggregate. Insurance coverage verification letters are available to students and clinical facilities upon request. This letter is located in the clinical education course in Canvas. If a student wishes to have additional coverage, they may also secure professional liability insurance if they desire through the plans offered by the American Physical Therapy Association ([www.apta.org](http://www.apta.org)). **These costs of the optional additional coverage will be at the expense of the student.**

### **Student Registration**

Students must have current registration in all courses in which there is a clinical education component. If the student has difficulty with registration or otherwise has a “registration hold” the student will not be allowed to participate in clinical education experiences.

### **Health Insurance**

All students must have health insurance and must obtain and maintain health insurance coverage while enrolled at the Health Science Center. Students who find themselves without coverage due to age limitations or employment changes should contact [health@unthsc.edu](mailto:health@unthsc.edu) to obtain insurance coverage information as soon as possible. Additional information on student health insurance can be found on the HSC website: <https://www.unthsc.edu/students/student-health-insurance/> .

Primary health care services are available at the [HSC Student Health Clinic](#).

### **Confidentiality of Students' Medical Records**

The Health Science Center will comply with federal and state laws, regulations, and policies to protect the confidentiality of medical and educational records. Agencies, students, and individuals having access to such records by law or regulation will have access on a need-to-know basis but may not divulge the information to others. The Health Science Center personnel with knowledge of students or other individuals infected with a communicable

disease such as HIV or hepatitis may not reveal that information to others as provided by law or regulation. This policy aims to provide environments conducive to delivering quality health-care, academic instruction, and research while protecting personnel and individuals.

Refer to the HSC policy on HIPAA:

[https://www.unthsc.edu/research/wp-content/uploads/sites/21/HIPAA\\_Policy.pdf](https://www.unthsc.edu/research/wp-content/uploads/sites/21/HIPAA_Policy.pdf)

### **Communicable Diseases**

Refer to the HSC policy related to Communicable Diseases:

[https://www.unthsc.edu/administrative/wp-content/uploads/sites/23/Occupational\\_Acquired\\_Communicable\\_Diseases\\_Policy.pdf](https://www.unthsc.edu/administrative/wp-content/uploads/sites/23/Occupational_Acquired_Communicable_Diseases_Policy.pdf)

### **Attendance**

Students are expected to follow the schedule of their clinical instructor(s) during clinical experiences. Clinical rotation experiences can have varied schedules, including early mornings, late evenings, weekend work, and holiday coverage. Students are expected to be available at least 40 hours per week, with the understanding that many clinical rotations will require more than 40 hours per week, for which the student is also expected to be present. Forty hours per week of attendance is expected on all clinical rotations, and absence from the clinic is not permitted without consultation with the DCE and the Clinical Instructor. Unless the DCE and CI give explicit approval, all missed clinical days are expected to be made up. Students should not request time away from the clinic for any reason.

### **Unanticipated absence**

If a student must miss a clinical day for illness or emergency, the student is required to:

1. Contact the clinical instructor as soon as possible and before the scheduled arrival time.
2. Contact the DCE after contacting the clinical site. 817-735-2984
3. If the DCE is unavailable, the student should contact the Program Chair, Dr. Myles Quiben, at 817-735-2980 or [Myla.Quiben@unthsc.edu](mailto:Myla.Quiben@unthsc.edu).
4. Fill out the DPT Student Clinical Education Absence Form and return to DCE upon return to the clinic. [Appendix E](#)

\* Electronic and voice messages sent to the clinical site are unacceptable. Students must speak with either the clinical instructor or the supervisor of the department or facility.

\* Students may be required to make up any absence from clinical experiences.

### **Planned Absence**

For planned absences, including religious holidays, professional meetings, etc., prior notice of 4 weeks must be given to both CI and DCE.

Make-up times during clinical affiliations will be at the discretion of the DCE in consultation with the SCCE and the CI at the clinical site. Planned or unanticipated absences must be documented with the DPT Student Clinical Education Absence Form.

If the clinic or the schedule does not permit time for making up absences, alternative learning experiences and/or outside assignments may be required. The nature of this work will be determined by the CI at the clinical site and/or the DCE. Prolonged absences may require a leave of absence from clinical education or academic experiences. In the event of

a leave of absence, the student will work with their advisor, the DCE, and Program Chair to specify the terms and conditions of the leave and conditions under which the student may resume clinical education experiences.

### **Absence due to Inclement Weather:**

As a rule, clinical experiences are not canceled because of inclement weather and may not be affected by a local emergency. Even when the HSC is closed, students are expected to attend clinical experiences unless directed otherwise by the CI or supervisor at the site, the DCE, or the Program Chair. The student is expected to use good judgment if travel conditions between their residence and their clinical education site make travel unsafe or impossible. If a student suspects they cannot safely attend the clinic due to severe weather conditions, they must immediately alert the CI, the DCE, or the Program Chair. Absences due to weather must be made up to complete the clinical experience successfully.

### **Holidays**

The student is expected to take the same holidays that the clinical facility allows for its employees or regular full-time staff. In some settings, holiday coverage is expected. In the event of religious or personal holidays, the student follows the protocol for planned absences, providing four weeks of advance notice and using the DPT Student Clinical Education Absence Request Form. Students may be required to make up clinical hours lost due to holidays.

### **Attendance in Professional Conferences**

As an academic institution, the University of North Texas Health Science Center at Fort Worth DPT program strongly encourages students to attend and participate in professional conferences. Please consult with the DCE to balance clinical facility needs best with student attendance in professional conferences.

### **Dress Code**

Please refer to the dress code guidelines listed in the current Department of Physical Therapy Student Handbook.

### **Communication Expectations**

The clinical education team maintains an “open door” policy about communication throughout a student’s tenure. While on clinical experiences, the DCE is in contact with students in various ways including e-mail and telephonic communication.

Several documents, including the Early Assessment of Clinical Experience, Midterm visit planning form, and Clinical Experience Planning Form, provide opportunities for students and clinical faculty to communicate with the core faculty.

Students are expected to continue to check their e-mail **daily** and respond within **two business days** unless directed otherwise during the clinical experience. Failure to respond in a timely manner may result in additional assignments as deemed necessary by the DCE.

Students receive a midterm assessment as an on-site visit or conference call for every clinical experience. The purpose of the contact is to assess the student’s clinical progress at that facility and the student’s progress toward completing the course objectives for the experience. To facilitate calls and arrange site visits, the student is responsible for completing and returning a form with contact information to the DCE. This form can be

accessed in the corresponding clinical rotation canvas course. If a mutually agreeable time cannot be scheduled, the midterm check may occur via email correspondence.

### **Joint Commission on Accreditation of Healthcare Organizations (JCAHO)**

JCAHO accredits many clinical facilities to which students may be assigned. Students are required to have an orientation to key JCAHO regulations before the start of clinical education experiences. These include National Patient Safety Goals; organization-wide performance improvement activities; ethics, rights, and responsibilities of healthcare workers and patients; provision of care requirements that enhance positive patient outcomes; infection control processes; and security of information systems. Orientation to JCAHO regulations will occur during the program's coursework.

*Please Note:* Patients have the right to refuse treatment at any time, and students must respect a patient's right to refuse participation.

### **Privacy and Confidentiality**

Information contained within a patient's medical record is strictly confidential and may not be released to anyone without written permission from the patient. Students have the right to access specific patient information only related to the physical therapy evaluation and treatment of that patient or screening for the appropriateness of physical therapy services.

Students are not allowed access to patients' information not on their physical therapy caseload. Discussions of patient problems or identifying the patient by name or other health information will occur with the highest standards of confidentiality and privacy. Students will be aware of the environment, the potential for being overheard, and the potential for their comments to be taken out of context. Breaches in privacy and or confidentiality may result in the immediate termination and potential failure of a clinical experience.

### **Confidentiality Outside of Patient Care**

Students are reminded that all information related to a given clinical site is the property of that site. If a student would like to use/present information related to patients or administrative aspects of clinic management beyond that facility, they must obtain the expressed permission of the SCCE.

### **Occupational Safety and Health Administration (OSHA) Requirements**

OSHA Requirements specify the protective measures all health care personnel must perform to prevent the spread of communicable disease. Completion of OSHA training ensures students can demonstrate proper hand-washing techniques, apply personal protective devices in the presence of potential or confirmed infections, integrate isolation precautions, and provide proof of current immunization records and screening for active tuberculosis. Training in OSHA requirements must be completed before the start of any clinical experience.

**Needle Sticks:** Physical therapy students are susceptible to exposure to biohazards as any health care provider. To minimize the risk of exposure, students receive training at the HSC and orientation during the program's first semester. In the event of a needle stick or other biohazard exposure, students are to follow the institution's guidelines for managing and reporting. Equal regard and attention must be paid to the patient, the student, and any facility staff involved in the incident. The student must immediately complete any cleansing and first aid associated with the biohazard material. The student must also take any steps required by the clinical affiliation site for reporting and documenting the incident with the

assistance of the CI, SCCE, and physical therapy director/manager. In some cases, immediate prophylaxis and follow-up medications are indicated. The student will be fully informed about all treatment options.

The student will assume full financial responsibility for all treatment associated with a biohazard exposure. If the student or facility has questions, please direct them to the DCE. Typical clinical affiliation agreements indicate that clinical sites shall provide students with access to emergency care if necessary while the student is assigned to the facility. However, the student shall be responsible for the cost of all emergency services rendered.

### **Americans with Disabilities Act (ADA) Requirements**

Due to the ADA privacy requirements, the faculty and staff of the Department of Physical Therapy at HSC are prohibited from discussing any disability with the clinical site without specific authorization from the student. If written permission to disclose is provided by the student, the DCE will discuss the disability with the SCCE/CI and request for the appropriate accommodations to be made *before* the student's arrival. In addition, students are strongly encouraged to continue a proactive, open dialogue about their educational needs with the academic and clinical faculty. If problems cannot be resolved, the DCE should be contacted immediately. Retroactive disclosure of a documented disability will not change performance assessment. It is strongly suggested that students disclose relevant information before beginning a clinical rotation to ensure successful completion.

### **Facility Policies and Procedures**

The student is expected to adhere to all facility policies/procedures during the duration of the clinical assignment. It is the responsibility of the student to request policies/procedural manuals in the event it is not provided during orientation. Failure to comply with the facility policies/procedures will result in the removal of the student from that clinical facility and potential failure of that clinical experience.

### **Legal Limitations/Regulations on Clinical Activities**

Students should recognize the serious nature and potential liability involved with clinical education. Patients being treated by a student in a clinical facility have the right to know the level of training of the person administering treatment, the right to receive the same standard of care as provided by licensed therapists, and the right to refuse treatment administered by any health care provider. The clinical instructors are responsible for patient care and must, therefore, guide and supervise a student's activities.

Students are expected to know and abide by the Practice Acts of all jurisdictions in which they complete clinical experiences. Students will also be held accountable for performance consistent with Physical Therapy Practice Regulations for the state of Texas or any other states in which they are engaged in clinical experiences, as well as the requirements outlined in the APTA's *Guide for Professional Conduct*, the *Code of Ethics and Core Values*  
*APTA Guide for Professional Conduct:*

<https://www.apta.org/your-practice/ethics-and-professionalism/apta-guide-for-professional-conduct>

*APTA Code of Ethics for Physical Therapist:*

<https://www.apta.org/apta-and-you/leadership-and-governance/policies/code-of-ethics-for-the-physical-therapist>

### **Students and Medicare Beneficiaries**

Regulations regarding student interaction with Medicare patients change frequently. Students are strongly encouraged to remain abreast of these regulatory guidelines to maximize learning opportunities. The most updated information can be found on the web at [www.cms.gov](http://www.cms.gov)

### **Mobile Devices (e.g., cell phones, smart watches, etc.)**

Students will not respond to phone or text messages while in the clinic. The use of social media or other applications is a distraction from the clinical experience. Students should discuss the mobile device policy of the clinic with their CI, as it may be permissible to use a mobile device while on a break or for urgent situations as long as it is consistent with clinic policy. Pictures (or any other patient's confidential information) **MAY NOT** be taken or transmitted via cellular picture phones or other similar devices in **ANY** circumstance due to patient privacy regulations. Students who do not adhere to this policy will be removed from the clinical site immediately if the site requests that student's removal.

### **Guidelines on Use of Human Subjects in Demonstrations and Practice for Research**

#### **Purposes:**

As per the APTA's BOD policies and procedures (BOD Y03-06-20-52), PTs and PT students should ensure that the participation of human subjects in research is voluntary, free of coercion and deception, and based on an understanding by the subjects, or their legally authorized representatives, of the nature of the research and its expected benefits and risks. PTs and PT students should ensure that data and observations obtained on human subjects who participate in research are recorded, stored, and reported in ways that protect the individual and personal identity of the subjects. Research must be compliant with the standards outlined in HIPAA regulations. All HSC faculty, staff, and students must adhere to all guidelines set forth by the North Texas Regional Institutional Review Board. Additional information can be found on the HSC [website](#).

# POLICIES AND PROCEDURES OF CLINICAL EDUCATION: PRE-ASSIGNMENT, SELECTION, CLINICAL VISIT PROCESSES & GRADING

## Assessing Clinical Site Availability

The DCE contacts clinical facilities during the APTA voluntary national mail-out dates to identify their availability to work with students on clinical rotations. Mail-out dates are between March 1 and March 15 of each year, with a requested return date of April 30. Every effort is made to confirm placements at least 1 year in advance of the beginning of clinical rotations; however, this is not possible in all situations. Ultimately, clinical facilities have the right and responsibility to assess their availability for clinical experiences and decline student placements, even when the placement was previously confirmed.

## DCE Contacting Clinical Sites

The DCE is the primary point of contact with clinical sites to negotiate clinical education agreements, the assignment of students, and the ongoing information exchange between the program and the clinical site. The Clinical Site Coordinator assists the DCE with these tasks. The DCE will contact the SCCE or another designated individual. **Students who contact clinical sites without written permission from the DCE may become ineligible to do a rotation at that site.**

## Establishing New Clinical Sites

Occasionally, students may request clinical experiences with facilities, individual practitioners, or geographic locations that are not among the program's active list of clinical facilities. The HSC program honors the requests of clinical sites that individual students do not contact them inquiring about site availability. All inquiries should be directed to the DCE.

In these circumstances, the student will provide a written request using this [link](#) to the DCE, which includes the rationale for the request and contact information. The DCE will contact the site for additional information and determine if the site meets the Program's mission and philosophy. The DCE will decide whether to open the new site. New clinical sites will only be established if they meet current program needs. Current needs include sites in rural and medically underserved areas, neurological rehabilitation, acute care, and other specialty PT practices.

If the requested site is approved and added, the DCE will determine whether the new site will be reserved for the requesting student or if it will be open to the entire class. If the requested site is offered to the requesting student, the student will be required to take that spot. Requests to establish a new clinical site are limited to one request per student.

Requests should be submitted/discussed a minimum of 1 year in advance of the start of the clinical experience to allow the DCE adequate time to evaluate the quality of the potential experience and the facility's willingness to engage in contractual negotiations with the HSC. Clinical experiences are not finalized until a clinical affiliation agreement has been fully executed. Students are reminded that new contracts can take up to a year to be fully executed, and no student will be placed at a site without a fully executed contract. The Department of Physical Therapy reserves all rights to initiate and discontinue clinical agreements as it deems appropriate.

Under no circumstances should a student try to establish a new clinical site without following the process outlined.

### **Assessment of Clinical Sites**

The selected clinical sites should be able to provide quality experiences that meet the HSC's Program in Physical Therapy mission. The DCE evaluates a facility's professional staff to ensure they function as role models who adhere to standards of practice that are legal, ethical, and moral. In addition, the clinical faculty must demonstrate clinical autonomy consistent with contemporary physical therapy practice.

Sites are also evaluated for depth/breadth in patient management, professional management, and practice management paradigms representing all the roles/responsibilities of physical therapists. Additionally, there is an ongoing evaluation of all sites affiliated with the HSC to ensure the program adequately represents a variety of experiences.

### **Prerequisites to Each Clinical Experience**

Students have the option of a clinical education planning meeting with the DCE. Each student will be assigned to a clinical facility, which will allow that student to achieve both curricular and personal clinical education goals. Due to changes in the clinical environment (e.g., facility staffing, patient type, changing regulations, etc.), cancellation of previously confirmed clinical assignments may occur, resulting in a new assignment that must be planned and confirmed. The DCE will inform the student of such an occurrence, and a discussion of alternative assignments will be completed before a new assignment.

The student will be notified of a clinical experience assignment after it is confirmed. A few months before each clinical rotation, or as soon as possible, the student will be provided with contact information for the confirmed site. It is then the student's responsibility to contact the site to provide personal contact information and manage all future interactions with that site. Any housing arrangements that must be confirmed are the responsibility of the student.

For each portion of the clinical education experience, the student must demonstrate acceptable academic performance, adherence to safety standards, and appropriate professional attributes. It is program policy that safety issues, red flag issues, or deficits in professional behavior are sufficient to prevent a student from progressing to clinical education experiences. These issues must be addressed with the student's faculty advisor, and the DCE must be informed of the student's status with these issues. Decisions about students' preparation, safety, and readiness to engage at each level of clinical experience are the sole responsibility of the core faculty. The DCE facilitates this decision-making process by reporting to the core faculty in faculty meetings and consultation with individual student advisors, course instructors, and the program director. Students who are not in good academic standing or have received notification of course failure or dismissal from the program may not proceed to the clinic. Should a student begin a clinical rotation before notification of the failure/dismissal, the student may be pulled from the clinic. Students will not be permitted to continue on clinical rotation during the appeals process. All financial ramifications of course failure, dismissal, or clinical experience delay are the student's responsibility.

The Department of Physical Therapy intends to provide the student with high-quality clinical educational experiences sequenced to promote an increased level of complexity and autonomy in clinical decision-making processes. To meet the mission and prepare the student to practice as a **generalist** upon graduation, students are required to participate in clinical affiliations that span the continuum of health care, life span, and cultural diversity. Clinical placement is the sole responsibility of the DCE. Decisions are made in consultation with core faculty.

### **Clinical Affiliation Agreements**

Clinical education facilities must have a fully executed clinical affiliation agreement in effect between the site and the university to be considered for student placement. An example of the clinical affiliation agreement used by The University of North Texas Health Science Center at Fort Worth will be made available upon request from the Clinical Site Coordinator. Clinical affiliation agreements specify the duties and responsibilities of all parties in the clinical education process. This includes the school, the clinical facility, and the students. All contracts specify that the student is appropriately prepared for the clinical experience. Because the clinical facility is ultimately responsible for the care rendered to patients/clients in their facility, the clinic has the right to terminate a student experience in the event of illegal, unsafe, unethical, or unprofessional behavior of the student.

### **ADA Requirements for the DCE**

Due to the ADA privacy requirement, the DCE is legally prohibited from discussing any disability with the clinical site without specific authorization from the student. Thus, it is recommended that the student discuss any relevant information about their disability that may result in clinical performance, scheduling, or time management difficulties with the CI during the orientation meeting. If problems cannot be resolved, the DCE should be immediately notified.

If requested and written permission is given to the DCE, the DCE will discuss the disability and implications for the clinical site before the student arrives at the assigned facility.

### **FERPA Requirements for the DCE**

The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. 1232G, grants students in institutions of higher education the right of access to their educational records except confidential letters and statements of recommendation that the student has waived the right to inspect. Before disclosing any personally identifiable information, except directory information, the Health Science Center must obtain written consent from the student unless the disclosure is allowed by law.

The Family Educational Rights and Privacy Act considers certain information to be “directory information,” which is subject to disclosure without prior consent from the student. Directory information relating to students includes the following: the student’s name; Address; Telephone listing; Date and place of birth; Hometown; Major field of study; participation in officially recognized activities and sports; Classification; Degrees and awards received; The most recent educational agency or institution attended by the student; and Dates of attendance.

HSC is committed to protecting the privacy rights of its students. The following information covers the basic privacy issues related to student records under the Family Educational Rights and Privacy Act (FERPA). Questions concerning FERPA and a copy of the policy and procedures should be directed to the Office of the Registrar. FERPA students’ rights

begin on the first day of enrollment in an HSC academic program. Additional information relating to FERPA can be found on the HSC Policy and training page:

<https://www.unthsc.edu/students/registrar/ferpa/>.

### **Clinical Site Information Form (CSIF)**

Clinical site information forms (CSIF) are located on Canvas to assist students with their clinical education planning.

The CSIF form is to be completed by all facilities with an active clinical affiliation agreement. These forms provide information regarding the population of patients/clients served, the SCCE, CIs, site-specific policies and procedures, and important contact information. The CSIF can also be a resource for estimated daily expenses, including parking, meal options, and information regarding any additional housing, transportation, or other offerings specific to that site. Students are encouraged to carefully review the CSIF of any site they are considering for a clinical rotation.

### **Student Access to Care**

As stated in the clinical affiliation agreement, all clinical education sites must have access to health care in the event of high-risk exposure. Unless dictated by clinical facility policy, students are responsible for all costs incurred to receive care. To report an emergency (needle stick, injury, etc.), you must contact the [Student Health Clinic](#) and complete this [post-exposure survey](#).

### **Midterm Clinical Visit**

A clinical contact, by either an on-site visit or a telephone call, or email correspondence, will be scheduled by the DCE or other faculty member to be held with the student and the CI near the mid-point of each clinical education experience. If needed, a clinical contact can also be made upon request of the DCE, CI, or student. The purpose of the clinical contact is to assess the student's clinical progress at that facility and the student's progress toward completing the entry-level skills required for graduation.

To facilitate calls and arrange site visits, the student is responsible for completing and returning a form with contact information to the DCE, excluding the Preliminary Clinical Practicum. The form is available through the corresponding clinical Canvas course.

If the on-site visit or telephone call must be rescheduled, it is the student's responsibility to provide alternative dates so the DCE can reschedule a time for that clinical contact. Once the information has been received from all students, the DCE will work with the students needing changes in their contact time.

Each student will receive at least one on-site visit at some point within their clinical education experiences unless program resources or other emergency statuses prevent an on-site visit from occurring. If an on-site visit is not scheduled for a specific clinical education experience, but the student or CI believes an on-site visit to be necessary to resolve any problems, the student or CI should contact the DCE to schedule an on-site visit.

### **Description of Student Performance Assessment Tools**

The student's clinical performance and experiences will be evaluated using the following instruments (each form is also available through the concurrent Canvas course):

#### **Early Student Assessment of Clinical Education Experience [Appendix G](#)**

This form is a student questionnaire regarding early exposure to the clinical education experience. The form requires completion by the student early in the clinical experience.

#### **Weekly Planning Form [Appendix H](#)**

This form allows the student to focus and organize their learning, engages the student in reflective practice, and clarifies their weekly expectations with the CI. The form requires completion by the student with feedback from the CI. This form is optional but is made available for the student and CI should they feel they need additional resources to plan and execute a successful experience.

#### **Clinical Experience Planning Form [Appendix I](#)**

This form allows the student to complete a weekly log describing their clinical education goals, skills performed, self-assessment, and the following week's goals. This form helps organize student-learning objectives, engages the student in reflective practice, and improves communication between the student and CI regarding students/CI's expectations, student performance, and outcomes. The form requires completion, by the student, with feedback from the CI and is returned to the DCE at the close of the clinical experience.

#### **Professional behaviors Assessment and Self-Assessment [Appendix K](#)**

For the Preliminary Clinical Practicum, a professional behaviors assessment will be filled out by the CI. The student will also fill out a professional behaviors self-assessment. The student and CI will review the forms together, and both documents will be turned in to the DCE.

#### **Educational & Behavioral Indicators Report and Learning Agreement [Appendix J](#)**

The form documents students' critical educational and behavioral trends or a single grievous occurrence. The form will assist the student's change plan and the CI's interpretation and reevaluation. In the event of a conflict with the student as it relates to clinical experience, the CI will initiate the Educational & Behavioral Indicators Report and Learning Agreement outlining the incident that occurred. This assessment represents a critical incident report and must be used to document a series of similar behaviors or educational deficiencies (or one central educational and/or behavioral occurrence) demonstrated by the student that has consequences of a serious nature.

If such a report is needed, the clinical instructor must contact the DCE as soon as possible for assistance. This report will be used as a form of communication and to help the student work on educational and behavioral indicators and plans for improvement. It will also provide information to the DCE and core faculty about specific instructional domains and curriculum improvements.

This report does not substitute for any required incident report in place at the clinical facility.

Students and clinical education faculty are encouraged to utilize the learning agreement to clarify expectations and facilitate communication. This is particularly encouraged if a

student is not meeting the educational performance indicators of the clinical experience. In addition, the learning agreement is designed to outline learning goals the student must achieve to successfully pass the clinical experience.

### **Anecdotal Form [Appendix L](#)**

This form allows clinical faculty to document poor student performance and is utilized only when necessary. It requires completion by the clinical faculty (SCCE and CI) with feedback from the student. It provides evidence of unacceptable student performance and student performance that may require additional assistance. This form is returned to the DCE and leads to frequent check-ins with the student and clinical faculty.

### **APTA Clinical Performance Instrument (CPI):**

This tool requires a self-assessment by the student, as well as an assessment by the CI. An assessment must be completed at the mid-term and at the end of each clinical practicum with the exception of the Preliminary Clinical Practicum. Find link

Link for APTA Clinical Performance Instrument (CPI):

[https://cpi2.amsapps.com/user\\_session/new](https://cpi2.amsapps.com/user_session/new)

### **Clinical Internship Evaluation Tool (CIET)**

The CIET assessment tool for the Internship measures the student's clinical performance relative to a competent clinician. The document will need to be completed and turned in at both midterm and final.

### **APTA Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction Survey**

Allows the student to assess the clinical facility, learning experiences, and clinical instructor. This form will be completed during the midterm and final week of the clinical knowledge and returned to the DCE. The DCE reviews the form after each rotation.

### **Determination of Final Grade for Clinical Experiences**

To receive a passing grade for each clinical experience, the student must complete all paperwork as outlined in the clinical course syllabus. Requirements will also include assignments and projects required by the facility's clinical education faculty (SCCE & CI). Students must complete any assignments issued by the SCCE & CI, even if they are not indicated on the course syllabus. Clinical experience will be graded as satisfactory/unsatisfactory or pass/no pass. The assignment of grades is the sole responsibility of the DCE.

Nevertheless, the feedback from the clinical education faculty is critical in determining the final grade. In addition, ***it is the responsibility of the student*** to collect all assessment documents completed by the clinical instructor and submit them to the DCE within ***the timeline listed in the course syllabus***. This procedure will allow adequate time for the DCE to comprehensively review all documentation and submit grades in a timely fashion.

### **Remediation for Clinical Experience**

DPT students receiving a "no pass" for any clinical assignment must arrange an appointment with the course director (DCE). With the approval of the DPT Program's Student Performance Committee and the Chair, a student may be allowed to remedy a failing course grade. The mechanism to remedy a failing course grade will be determined by the DPT Program's Student Performance Committee and recommended to the Chair

after consulting the DCE. Students receiving a grade of “incomplete” may also require remediation before the resolution of the grade.

### **Termination & Failure of Clinical Experience**

Students who are concluded to receive termination from a clinical experience due to inadequate performance may receive a grade of “No Pass.” The DCE will determine this grade with input from the clinical education faculty. Deficient performance must be appropriately documented and communicated to the DCE. The following are examples of trends and categories that indicate termination and failure of a clinical experience:

- Unprofessional behaviors
- Poor clinical judgment
- Consistently poor skill performance despite multiple remediation attempts
- Unsafe and/or unethical practice as described by the APTA Code of Ethics and Standards of Practice (will be immediately terminated and receive a failing grade)
- Disclosure of confidential information
- Violation of policies and procedures of the facility and/or the DPT program at the HSC.

### **Policy and Procedure: Complaints from Patients/Clients, Family Members, and Other Stakeholders (that Fall Outside of Due Process Within the HSC):**

The Department Chair is responsible for handling complaints that fall outside of due process. If the Chair is unavailable or it is inappropriate for the Chair to address the complaint, the complaint will be forwarded to the Dean of the School of Health Professions.

Complaints must be submitted in writing or anonymously. As appropriate, documentation regarding the complaint and any action(s) taken will be maintained in the Chair’s office or the Dean’s office.

The Chair or the Dean will manage the complaint. If indicated, the Chair or Dean will respond to the maker of the complaint within three (3) weeks of receipt unless the complaint is made anonymously. The Chair or designee may consult with other university offices and personnel in addressing the complaint.

The Department of Physical Therapy values comments and complaints related to its curriculum, students, faculty, and graduates from parties outside the university. We strive to respond in a timely and appropriate manner. Comments may be directed to the Department Chair of the Department of Physical Therapy.

## **POLICIES AND PROCEDURES OF CLINICAL EDUCATION: ASSIGNMENT OF STUDENTS TO CLINICAL FACILITIES**

*The coronavirus pandemic has disrupted and affected all aspects of life, including clinical education. With safety for patients and clinicians as a significant focus during this time, the availability of clinical rotation slots has been a primary concern. We are committed to providing a variety of clinical experiences to develop HSC students into well-rounded clinicians. However, we have no control over decisions on student activities in clinical settings. Students should anticipate an increased need to travel outside of the DFW area to complete clinical requirements. Additionally, students may be required to leave the local area for more than one clinical rotation to ensure adequate clinical experiences. At this time, all international affiliations are on hold. If the need for alternate placement occurs, students will be informed timely, and alternatives will be discussed based on university, local, state, and CDC guidelines.*

Students are encouraged to meet with the DCE in the selection process to discuss progress, learning goals/objectives, and remaining curricular requirements to facilitate placement decisions. While student preferences such as travel and other personal requests are considered in the decision-making process, factors such as curricular requirements, student-learning style, strengths of an individual site, and availability in clinical sites ultimately determine placement. **Students should expect to travel up to 1.5 hours to their clinical placements. Students may be required to complete at least one of their clinical affiliations outside of a 90-mile radius of the Dallas-Fort Worth area and are responsible for their housing and transportation.** Students who wish to complete their clinical rotations outside of the 90-mile DFW radius should discuss their plans with the DCE and will not participate in the wish list system.

Some clinical facilities actively participate in the process of matching interested students to the site. In these cases, students may be required to prepare curriculum vitae, attend an interview or submit other work/materials to be considered for affiliation. The program cannot guarantee a student placement in these sites as the final decision rests with the clinical faculty of the facility to accept the student.

### **Preliminary Clinical Practicum & Clinical Practicum I Placement**

Based on DCE/student meetings, faculty input, and student's wish lists, the DCE will match students to appropriate clinical sites through preference ranking and a lottery system. The lottery number will be determined by drawing a number or through the Excel randomization feature. Students will receive a list of clinical sites available for a specific experience through the Exxat system. The list will include the type of experience offered. Students are to review the available clinical sites and prioritize their top choices. Students should provide a list of sites to participate in the match. Students will be matched based on preference and lottery number. The Clinical Practicum I should ideally be in the same location as the Preliminary Clinical Practicum, though occasionally this is not possible, and the student must be reassigned.

### **Clinical Practicum II**

Based on DCE/student meetings, faculty input, performance in prior affiliations, and student's wish list, the DCE will match students to appropriate clinical sites through preference ranking and a lottery system. Students will receive a list of clinical sites available for a specific experience through the Exxat system. The list will include the type of experience offered. Students are to review the available clinical sites and prioritize their top choices. Students are required to provide a list of sites to participate in the match.

Students will be matched based on preference and lottery number. For CP II, those students in the bottom half of the lottery list for PCP/CP I will be assigned a number from the top half of the list, and those students from the top half of the list will be given a number from the bottom half of the list.

### **Clinical Practicum III**

With input from the student, the DCE places the students at their CP III site based on previous experience and which type of experience is still needed by the student. The student's geographic preference and site preference will be considered, though site availability may be limited and not allow preferences to be realized.

### **Internship Placements**

During the Spring of Year 2, students may be required to fill out an Internship Student Request Form [Appendix N](#). Students will then meet with the DCE to discuss educational goals and preferences. The DCE will assign sites based on student goals, the choice for the type of affiliation, location, and academic standing. The DCE will consult with other faculty members teaching in the area of the student's chosen specialization and obtain a ranking of those students interested in that content area. This list will be used in assigning sites as well.

### **International Internships**

Special permission from the DCE, with consultation from the Chair, is required to complete an international clinical rotation. At the appropriate time in the curriculum, the DCE may ask students wishing to participate in international affiliations to submit an international Internship application ([Appendix O](#)) corresponding to the affiliation of interest. The final decision to allow a student to participate in an international experience is made collaboratively by the DCE with input from the Chair. It is based on student performance in didactic and laboratory experiences, professional behavior, and progress toward clinical education objectives. Only students in good standing will be considered, and any academic, professional, behavioral, or other concerns may disqualify a student from consideration. International affiliations require the completion of documents to secure appropriate visas and travel clearance. Completing the appropriate documentation and payment of any associated fees is the student's sole responsibility.

While applying for an international rotation, students agree that they will remain at the international site amidst any changes to location, clinical instructor, or site setting. In case of a national/global crisis or national/international pandemic, where the student faces unsafe or challenging conditions, the Clinical Education Team and Department Chair will coordinate with the student to assist with organizing a safe return to the US.

International rotations can be seen as a positive experience for many students. However, some students may experience difficulty coping with culture changes or additional factors. Before submitting an international rotation application, students should read the APTA International Service Manual for Students: A guide for students considering international service trips. <https://www.apta.org/apta-magazine/2016/11/01/making-the-most-of-international-volunteer-and-learning-opportunities>

### **Clinical Experiences Ineligibility**

Students will not be placed in facilities where any actual or potential conflict of interest exists. Students will not be allowed to use current or prior places of employment as sites for clinical education affiliations. Utilizing a facility where a student previously volunteered

for their clinical experience is also generally discouraged. A student will also be ineligible for clinical education at a facility where family members are employed. The student will be ineligible for clinical education where they have a contract for future employment. The DCE will consider placements of this nature on a case-by-case basis.

### **Cancellation and Reassignment Process**

Clinical facilities may cancel clinical experiences at the last minute, or contracts may be denied due to unforeseen circumstances. The DCE will attempt to reassign the student to a similar setting as timely as possible. However, reassignments will be based on the availability of the clinical site. Once clinical assignments are made, any request by the student to change their clinical rotation must be submitted in writing to both the DCE and Chair. The student will be required to write a letter to both parties detailing why they need their rotation changed. The DCE and Chair will meet and reach a decision. Due to the nature of the relationship between the program and the clinic, only on infrequent occurrences will the program change a clinical site.

### **Orientation to Clinical Experiences**

Before the start of each clinical experience, students will be expected to attend one or more **mandatory** orientation meetings. The orientations will review the specific clinical objectives, performance expectations, and assignments for that clinical experience. It is the responsibility of the student to notify the DCE in the event that they are unable to attend the orientations. Failure to provide timely notification may delay starting the clinical affiliation. The facility may provide additional orientation and students are encouraged to contact their assigned facilities by phone or email at a minimum of 2 weeks in advance of the start of their assignments, but not before they receive clearance from the DCE. Students are encouraged to minimize their telephone contact with the SCCE, CI, or clerical staff at clinical facilities out of respect for the fast pace of work at most clinical sites. If students have questions about the clinical site, they are encouraged to access the CSIF on file for the site and other available resources (internet sites, and maps) before contacting clinical facilities.

### **Rural Academic/Clinical Opportunities**

Another important curriculum component of the DPT program is its rural practice opportunities. The Rural and Underserved populations course will include objectives regarding students' appreciation of demographics, economics, and structure of the health care delivery system in rural America with a concentration on the diverse population of rural Texas.

In addition, clinical affiliations have been established with rural clinical sites to prepare students for physical therapy practice in rural areas. Students are encouraged to do at least one of their clinical rotations in a rural facility.

### **Before a Student's Arrival at a Clinical Facility**

The DCE will provide pertinent information to the clinical site no later than six weeks prior to the scheduled clinical experience. A clinical education team member will contact the clinical site after the mailing to confirm the receipt of packets and to determine any facility requirements the student must complete before starting the experience.

### **Clinical Education Packet**

In addition to this Clinical Education Handbook, the clinical facility will receive the following forms and information on the student:

- Student Information Form

- Overview of Curriculum [Appendix F](#)
- Course Syllabi outlining student performance expectations [Appendix D](#)

On the first day of clinical experience, students will ensure they have access to:

- All required student evaluation instruments, which will be available on Canvas
- All the necessary health documentation (if not previously given to an appropriate person at the site)
- A copy of the clinical education handbook, which will be available on Canvas

### **Expenses, Transportation, and Housing**

It is the student's responsibility to cover all costs associated with clinical education experiences, including food, parking, uniforms, transportation, and housing at locations distant from their school address. The DCE, classmates, and/or alumni, as well as the CSIF, are available to provide information about what expenses may occur. Students are also responsible for the costs of any medical care accessed while participating in clinical rotations. These may include immunizations, emergency prophylaxis in the event of a needle stick, or blood work to verify the presence of antibodies. Any financial implications of clinical experience delay or failure are the student's responsibility.

### **Student Information Form**

Prior to each clinical experience, students will complete a Student Information Form. This information should include current and emergency contact information for use by the clinical site. In addition, the student will include information on previous clinical experiences to date, learning styles, and any personal information the student would like the site to know before arrival. This information will be shared with the clinical facility a minimum of two weeks before the start of the clinical experience.

## **APPENDIX A: CORE VALUES DEFINITION & SAMPLE INDICATORS**

**Link for Core Values for Physical Therapist and Physical Therapist Assistant:**

<https://www.apta.org/apta-and-you/leadership-and-governance/policies/core-values-for-the-physical-therapist-and-physical-therapist-assistant>

**Link for Professionalism in Physical Therapy: Core Values Self-Assessment [including Sample Indicators]:**

<https://www.apta.org/your-practice/ethics-and-professionalism/professionalism-in-physical-therapy-core-values-self-assessment>

## APPENDIX B: PROFESSIONAL BEHAVIORS

### COMMITMENT TO LEARNING

*The ability to self-asses, self-correct, and self-direct; to identify needs and sources of learning; and to continually seek new knowledge and understanding.*

<b>Beginning</b>	<ul style="list-style-type: none"> <li>• <i>Identifies problems</i></li> <li>• <i>Formulates appropriate questions</i></li> <li>• <i>Identifies and locates appropriate resources</i></li> <li>• <i>Demonstrates positive attitude (motivation) toward learning</i></li> <li>• <i>Offers own thoughts and ideas</i></li> <li>• <i>Identifies need for further information</i></li> </ul>
<b>Developing</b>	<ul style="list-style-type: none"> <li>• <i>Prioritizes information needs</i></li> <li>• <i>Analyzes and subdivides large questions into components</i></li> <li>• <i>Seeks out professional literature</i></li> <li>• <i>Sets personal and professional goals</i></li> <li>• <i>Identifies own learning needs based on previous experiences</i></li> <li>• <i>Welcomes and/or seeks new learning opportunities</i></li> </ul>
<b>Entry-Level</b>	<ul style="list-style-type: none"> <li>• <i>Applies new information and re-evaluates performance</i></li> <li>• <i>Accepts that there may be more than one answer to a problem</i></li> <li>• <i>Recognizes the need to and can verify solutions to problems</i></li> <li>• <i>Reads articles critically and understands limits of application to professional practice</i></li> <li>• <i>Researches and studies areas where knowledge base is lacking</i></li> </ul>
<b>Post-Entry-Level</b>	<ul style="list-style-type: none"> <li>• <i>Questions conventional wisdom</i></li> <li>• <i>Formulates and re-evaluates position based on available evidence</i></li> <li>• <i>Demonstrates confidence in sharing new knowledge with all staff levels</i></li> <li>• <i>Modifies programs and treatments based on newly learned skills and considerations</i></li> <li>• <i>Acts as a mentor in area of specialty for other staff</i></li> </ul>

### INTERPERSONAL SKILLS

*The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community and to deal effectively with cultural and ethnic diversity issues.*

<b>Beginning</b>	<ul style="list-style-type: none"> <li>• <i>Maintains professional demeanor in all clinical interactions</i></li> <li>• <i>Demonstrates interest in patients as individuals</i></li> <li>• <i>Respects cultural &amp; personal differences of others; is non-judgmental about patients' lifestyles</i></li> <li>• <i>Communicates with others in a respectful, confident manner</i></li> <li>• <i>Respects personal space of patients and others</i></li> <li>• <i>Maintains confidentiality in all clinical interactions</i></li> <li>• <i>Demonstrates acceptance of limited knowledge and experience</i></li> </ul>
<b>Developing</b>	<ul style="list-style-type: none"> <li>• <i>Recognizes impact of non-verbal communication and modifies accordingly</i></li> <li>• <i>Assumes responsibility for mistakes, apologizes</i></li> <li>• <i>Motivates others to achieve</i></li> <li>• <i>Establishes trust</i></li> <li>• <i>Seeks to gain knowledge and input from others</i></li> <li>• <i>Respects role of support staff</i></li> </ul>
<b>Entry-Level</b>	<ul style="list-style-type: none"> <li>• <i>Listens to patient but reflects back to original concern</i></li> <li>• <i>Works effectively with challenging patients</i></li> <li>• <i>Responds effectively to unexpected experiences</i></li> <li>• <i>Talks about difficult issues with sensitivity and objectivity</i></li> <li>• <i>Delegates to others as needed</i></li> <li>• <i>Approaches others to discuss differences in opinion</i></li> <li>• <i>Accommodates differences in learning styles</i></li> </ul>

<b>Post-Entry-Level</b>	<ul style="list-style-type: none"> <li>• Recognizes role as a leader</li> <li>• Builds relationships with other professionals</li> <li>• Establishes mentor relationships</li> </ul>
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## COMMUNICATION SKILLS

*The ability to communicate effectively (i.e., speaking, body language, reading writing, listening) for varied audiences and purposes.*

<b>Beginning</b>	<ul style="list-style-type: none"> <li>• Demonstrates understanding of basic English (verbal and written); uses correct grammar, accurate spelling and expression</li> <li>• Writes legibly</li> <li>• Recognizes impact of non-verbal communication: maintains eye contact, listens actively</li> </ul>
<b>Developing</b>	<ul style="list-style-type: none"> <li>• Utilizes non-verbal communication to augment verbal message</li> <li>• Restates, reflects, and clarifies message</li> <li>• Collects necessary information from patient interview</li> </ul>
<b>Entry-Level</b>	<ul style="list-style-type: none"> <li>• Presents verbal or written message with logical organization and sequencing,</li> <li>• Modifies communication (verbal and written) to meet the needs of different audiences</li> <li>• Maintains open and constructive communication</li> <li>• Utilizes communication technology</li> <li>• Dictates clearly and concisely</li> </ul>
<b>Post-Entry-Level</b>	<ul style="list-style-type: none"> <li>• Demonstrates ability to write scientific research papers</li> <li>• Fulfills role as patient advocate</li> <li>• Mediates conflict</li> <li>• Communicates professional needs and concerns</li> </ul>

## EFFECTIVE USE OF TIME AND RESOURCES

*The ability to obtain the maximum benefit from a minimum investment of time and resources.*

<b>Beginning</b>	<ul style="list-style-type: none"> <li>• Focus on tasks at hand without dwelling on past mistakes</li> <li>• Recognizes own resource limitations</li> <li>• Uses existing resources effectively</li> <li>• Uses unscheduled time efficiently</li> <li>• Completes assignments in a timely fashion</li> </ul>
<b>Developing</b>	<ul style="list-style-type: none"> <li>• Coordinates schedule with others</li> <li>• Sets up own schedule</li> <li>• Demonstrates flexibility</li> <li>• Plans ahead</li> </ul>
<b>Entry-Level</b>	<ul style="list-style-type: none"> <li>• Performs multiple tasks simultaneously and delegate when appropriate</li> <li>• Has ability to say "No".</li> <li>• Sets priorities and reorders when necessary</li> <li>• Considers patient's goals in context of patient, clinic, and third-party resources</li> <li>• Uses scheduled time with each patient efficiently</li> </ul>
<b>Post-Entry-Level</b>	<ul style="list-style-type: none"> <li>• Uses limited resources creatively</li> <li>• Manages meeting time effectively</li> <li>• Takes initiative in covering for absent staff members</li> <li>• Develops programs and works on projects while maintaining case loads</li> <li>• Follows up on projects in a timely manner</li> <li>• Advances professional goals while maintaining expected workload</li> </ul>

## USE OF CONSTRUCTIVE FEEDBACK

*The ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.*

<b>Beginning</b>	<ul style="list-style-type: none"> <li>• Demonstrates active listening skills</li> <li>• Actively seeks feedback and help</li> <li>• Demonstrates a positive attitude toward feedback</li> <li>• Critiques own performance</li> <li>• Maintains two-way communication</li> </ul>
<b>Developing</b>	<ul style="list-style-type: none"> <li>• Assesses own performance accurately</li> <li>• Utilizes feedback when establishing pre-professional goals</li> <li>• Provides constructive and timely feedback when establishing pre-professional goals</li> <li>• Develops plan of action in response to feedback</li> </ul>
<b>Entry-Level</b>	<ul style="list-style-type: none"> <li>• Seeks feedback from clients</li> <li>• Reconciles differences with sensitivity</li> <li>• Modifies feedback given to clients according to their learning styles</li> <li>• Considers multiple approaches when responding to feedback</li> </ul>
<b>Post-Entry-Level</b>	<ul style="list-style-type: none"> <li>• Engages in non-judgmental, constructive problem-solving discussions</li> <li>• Acts as conduit for feedback between multiple resources</li> <li>• Utilizes feedback when establishing professional goals</li> <li>• Utilizes self-assessment for professional growth</li> </ul>

## PROBLEM SOLVING

*The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.*

<b>Beginning</b>	<ul style="list-style-type: none"> <li>• Recognizes problems</li> <li>• States problems clearly</li> <li>• Describes known solutions to problem</li> <li>• Identifies resources needed to develop solution</li> <li>• Begins to examine multiple solutions to problems</li> </ul>
<b>Developing</b>	<ul style="list-style-type: none"> <li>• Prioritizes problems</li> <li>• Identifies contributors to problem</li> <li>• Considers consequences of possible solutions</li> <li>• Consults with others to clarify problem</li> </ul>
<b>Entry-Level</b>	<ul style="list-style-type: none"> <li>• Implements solutions</li> <li>• Reassesses solutions</li> <li>• Evaluates outcomes</li> <li>• Updates solutions to problems based on current research</li> <li>• Accepts responsibility for implementation of solutions</li> </ul>
<b>Post-Entry-Level</b>	<ul style="list-style-type: none"> <li>• Weighs advantages</li> <li>• Participates in outcome studies</li> </ul>
	<ul style="list-style-type: none"> <li>• Contributes to formal quality assessment in work environment</li> <li>• Seeks solutions to community health-related problems</li> </ul>

## PROFESSIONALISM

*The ability to exhibit appropriate professional conduct and to represent the profession effectively.*

<b>Beginning</b>	<ul style="list-style-type: none"> <li>• Abides by APTA Code of Ethics</li> <li>• Demonstrates awareness of state licensure regulations</li> <li>• Abides by facility policies and procedures</li> <li>• Projects professional image</li> <li>• Attends professional meetings</li> <li>• Demonstrates honesty, compassion, courage and continuous regard for all</li> </ul>
<b>Developing</b>	<ul style="list-style-type: none"> <li>• Identifies appropriate professional role models</li> <li>• Discusses societal expectations of the profession</li> </ul>

	<ul style="list-style-type: none"> <li>• Acts on moral commitment</li> <li>• Involves other health care professionals in decision-making</li> <li>• Seeks informed consent from patients</li> </ul>
<b>Entry-Level</b>	<ul style="list-style-type: none"> <li>• Demonstrates accountability for professional decisions</li> <li>• Treats patients within scope of expertise</li> <li>• Discusses role of physical therapy in health care</li> <li>• Keeps patient as priority</li> </ul>
<b>Post-Entry-Level</b>	<ul style="list-style-type: none"> <li>• Actively promotes profession</li> <li>• Participates actively in professional organizations</li> <li>• Attends workshops</li> <li>• Acts in leadership role when needed</li> <li>• Supports research</li> </ul>

## RESPONSIBILITY

*The ability to fulfill commitments and to be accountable for actions and outcomes.*

<b>Beginning</b>	<ul style="list-style-type: none"> <li>• Demonstrates dependability</li> <li>• Demonstrates punctuality</li> <li>• Follows through on commitments</li> <li>• Recognizes own limits</li> </ul>
<b>Developing</b>	<ul style="list-style-type: none"> <li>• Accepts responsibility for actions and outcomes</li> <li>• Provides safe and secure environment for patients</li> <li>• Offers and accepts help</li> <li>• Completes projects without prompting</li> </ul>
<b>Entry-Level</b>	<ul style="list-style-type: none"> <li>• Delegates as needed</li> <li>• Directs patients to other health care professionals when needed</li> <li>• Encourages patient accountability</li> </ul>
<b>Post-Entry-Level</b>	<ul style="list-style-type: none"> <li>• Orients and instructs new employees/students</li> <li>• Promotes clinical education</li> <li>• Accepts role as team leader</li> <li>• Facilitates responsibility for program development and modification</li> </ul>

## CRITICAL THINKING

*The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.*

<b>Beginning</b>	<ul style="list-style-type: none"> <li>• Raises relevant questions</li> <li>• Considers all available information</li> <li>• States the results of scientific literature</li> <li>• Recognizes “holes” in knowledge base</li> <li>• Articulates ideas</li> </ul>
<b>Developing</b>	<ul style="list-style-type: none"> <li>• Feels challenged to examine ideas</li> <li>• Critiques hypotheses and ideas</li> <li>• Formulates new ideas</li> <li>• Seeks alternative ideas</li> <li>• Formulates alternative hypotheses</li> <li>• Understands scientific method</li> </ul>
<b>Entry-Level</b>	<ul style="list-style-type: none"> <li>• Exhibits openness to contradictory ideas</li> <li>• Assesses issues raised by contradictory ideas</li> <li>• Justifies solutions selected</li> <li>• Determines effectiveness of applied solutions</li> </ul>
<b>Post-Entry-Level</b>	<ul style="list-style-type: none"> <li>• Distinguishes relevant from irrelevant</li> </ul>

	<ul style="list-style-type: none"> <li>• Distinguishes when to think intuitively vs. analytically</li> <li>• Demonstrates beginning intuitive thinking</li> <li>• Identifies complex patterns of associations</li> <li>• Recognizes own biases and suspends judgmental thinking</li> <li>• Challenges others to think critically</li> </ul>
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## **STRESS MANAGEMENT**

*The ability to identify sources of stress and to develop effective coping behaviors.*

<b><i>Beginning</i></b>	<ul style="list-style-type: none"> <li>• Recognizes own stressors or problems</li> <li>• Recognizes distress or problems in others</li> <li>• Seeks assistance as needed</li> <li>• Maintains professional demeanor in all situations</li> </ul>
<b><i>Developing</i></b>	<ul style="list-style-type: none"> <li>• Maintains balance between professional and personal life</li> <li>• Demonstrates appropriate affective responses to situations</li> <li>• Accepts constructive feedback</li> <li>• Establishes outlets to cope with stressors.</li> </ul>
<b><i>Entry-Level</i></b>	<ul style="list-style-type: none"> <li>• Tolerates inconsistencies in health care environment</li> <li>• Prioritizes multiple commitments</li> <li>• Responds calmly to urgent situations</li> </ul>
<b><i>Post-Entry-Level</i></b>	<ul style="list-style-type: none"> <li>• Recognizes when problems are unsolvable</li> <li>• Assists others in recognizing stressors</li> <li>• Demonstrates preventative approach to stress management</li> <li>• Establishes support network for self and clients</li> <li>• Offers solutions to the reduction of stress within the work environment</li> </ul>

## APPENDIX C: PHYSICAL THERAPY COURSE DESCRIPTIONS

Physical Therapy DPT Course Curriculum Description Link:

[http://catalog.unthsc.edu/preview\\_program.php?catoid=12&poid=935](http://catalog.unthsc.edu/preview_program.php?catoid=12&poid=935)

## **APPENDIX D: CLINICAL EDUCATION SYLLABI**

### **DPHT 7133 – PRELIMINARY CLINICAL PRACTICUM COURSE SYLLABUS Summer: 2 Weeks**

#### **COURSE INSTRUCTOR:**

##### **Director of Clinical Education**

**Leslie Ayres, PT, DPT**

Office location: MET - 536  
Office hours: by appointment  
Telephone: 817-735-2984  
E-mail: [leslie.ayres@unthsc.edu](mailto:leslie.ayres@unthsc.edu)

##### **Ana Rodriquez**

**Clinical Coordinator**

Telephone: 817-735-0146  
E-mail: [ana.rodriquez@unthsc.edu](mailto:ana.rodriquez@unthsc.edu) <mailto:sara.correa@unthsc.edu>

#### **COURSE PREREQUISITES:**

Prerequisites for this course include all preceding coursework in the curriculum. Any exceptions require approval from the Physical Therapy Department Faculty and Chair.

#### **COURSE DESCRIPTION:**

The Preliminary Clinical Practicum consists of 80 contact hours over 2 weeks. Preliminary Clinical Practicum consists of two weeks of supervised full-time clinical practice in the first year of the summer semester and is the first in a series of five (5) clinical experiences. The course will acquaint the students to various clinical environments. This clinical course emphasizes observation and reflection of characteristics of professional practice as demonstrated by health care providers in clinical practice, as well as a chance to practice basic skills.

#### **GENERAL EXPECTATIONS:**

This course is part of a professional graduate-level curriculum and, as such, has graduate-level expectations for attendance, participation, dress, and satisfactory completion on ALL assignments and evaluations. Out-of-class reading, study and written assignments are expected. Additionally, students are also expected to check their email daily and follow the guidelines outlined in the DPT Program's Student Handbook.

**CREDIT HOURS:** 1

**CONTACT HOURS:** 80

#### **CLASS WEBSITE-CANVAS:**

Revised July 7, 2022

## **COURSE OBJECTIVES:**

- Demonstrate adherence to the APTA's Code of Ethics, Professional Behaviors, Core Values, the Guide for Professional Conduct, and legal standards and institutional regulations.
- Participate in self-assessment of weaknesses and strengths with incorporation of feedback from clinical instructor as related to the role of physical therapist, professionalism and professional duty.
- Practice in a safe manner that minimizes risk to patient/client, self and others, and respond effectively to patient/client and environmental emergencies in the practice setting.
- Identify and use appropriate verbal and nonverbal communication to effectively interact with professional colleagues and patients.
- Recognizes need for varied delivery of physical therapy services in consideration for patients' differences, values, culture, preferences, and needs.
- Recognize the need for use of current knowledge, theory, clinical judgment, and the patient's values and perspectives in patient management.
- Perform full history and systems review on patients with simple diagnoses.
- Participate in evaluation of data from the patient/client's examination
- Produce basic documentation to support the delivery of physical therapy services.

At this level, the student requires clinical supervision between 80%-100% of the time managing patients with simple conditions, and 100% of the time managing patients with complex conditions.

At this level, the student demonstrates consistency in developing proficiency with simple tasks. The student is unable to perform skilled examinations, complex interventions and clinical reasoning skills. The student is expected to be able to:

- Review patient/client's medical record
- Take a patient history
- Perform simple interventions
- Perform goniometric measurements
- Perform manual muscle testing

## **REQUIRED READINGS:**

- Per your clinical instructor
- Clinical Education Handbook

## **RECOMMENDED READINGS:**

Per your clinical instructor

## **ACADEMIC PERFORMANCE EXPECTATIONS:**

- Students are required to report to clinic fully.
- Assignments must be turned in electronically via CANVAS in the appropriate format.
- Students are expected to complete all assignments by their assigned due date. Any assignment turned in after the due date will require additional assignments to be completed in order to get credit for the original assignment. **Late offenses will be cumulative over the entire duration of the curriculum.**
  - 1<sup>st</sup> offense: The student will be required to write a 2-page paper detailing the relationship between late assignments and the Professional Behaviors and Core Values

- 2<sup>nd</sup> offense: The student will be required to write a 5-page paper detailing discussing the relationship between behaviors as a student and how those behaviors translate to behaviors and actions in professional practice. The paper will need to have at least 3 peer-reviewed articles referenced.
- 3<sup>rd</sup> offense: Failure of clinical rotation.

### **ATTENDANCE EXPECTATIONS:**

Students are expected to follow the schedule of their clinical instructor(s) during clinical experiences. Course directors, instructors and the School of Health Professions administration expect students to be regular and punctual in attendance. Absence from the clinic is not permitted without consultation with both the DCE and clinical instructor. Weddings, family reunions, vacations, etc. are NOT considered excused absences. Should a student need to miss clinic for any reason, it is expected that he/she inform the clinical instructor – by phone, email or in person – prior to the scheduled arrival time (only emergency situations will be exempt from this expectation). After contacting the CI, the DCE must be notified, and the DPT Student Clinical Education Absence Form will need to be completed and signed by the CI upon the students return to the clinic. Missed days are expected to be made up.

### **PROFESSIONAL BEHAVIOR EXPECTATIONS:**

- Students are expected to show respect for the clinical instructor, other practitioners, patients, and each other.
- Students shall dress appropriately to represent the school in a professional manner. Business casual dress code is expected unless the particular clinic dress code dictates otherwise.
- Students are expected to review HSC Live Email and CANVAS daily for course and Department of Physical Therapy correspondences.
- Cell Phones: Students are expected to silence their cell phones to avoid disruption. Inappropriate phone use could result in dismissal from the clinic.
- Laptop Computers: Laptops may be used if needed. Inappropriate laptop use could result in dismissal from clinic.

### **ASSESSMENT AND GRADING POLICY:**

<http://catalog.unthsc.edu/content.php?catoid=10&navoid=1260>

*At the completion of this course, the student will receive a grade of either **Satisfactory/Pass or Unsatisfactory/Fail***

#### **A grade of Satisfactory/Pass requires the following:**

- Appropriate clinical performance
- Satisfactory completion of all assignments
- Timely return of all required documents

#### **A grade of Unsatisfactory/Fail may be given for any of the following:**

- Violation of patients' rights.
- Violation of the rights others.
- Violation of the APTA Code of Ethics.
- Unprofessional behavior.
- Unsafe practice.

- Substance abuse that affects performance.
- Failure to complete any of the requirements listed in the previous section.

A grade of unsatisfactory will require the student to repeat the clinical and/or complete remedial clinical experiences agreed upon by the academic program and the clinical facility.

### **ACADEMIC ASSISTANCE:**

The Course Directors, Instructors and Academic Advisors are available for email, telephonic and personal interactions with students. Students are encouraged to make appointments when they are experiencing difficulty with completing course requirements.

In addition, academic assistance is available through the HSC Center for Academic Performance (CAP). CAP provides academic counseling, learning and study strategy assessments, writing support, tutoring, and workshops on time management, test-taking skills, paper formatting, learning styles and strengths-based learning. All services are available to the School of Health Professions students at no charge. To schedule an appointment with CAP, call (817) 735-2531 or visit <https://www.unthsc.edu/center-for-academic-performance/>

### **ACADEMIC INTEGRITY PROGRAM:**

The School of Health Professions supports an environment that promotes professional and ethical behavior while achieving academic growth and individual self-discipline. Each student within the School of Health Professions, upon matriculation, shall have signed an Academic Integrity Agreement that articulates the following:

- It is understood that it is the student's responsibility to become familiar with all policies related to academic ethics and professional integrity within the School of Health Professions and the University of North Texas Health Science Center at Fort Worth,
- It is understood that it is the student's responsibility as a part of his/her professional maturation to adhere to the Student Code of Conduct and Discipline and other policies related to ethical behavior, and
- The student promised to conduct himself/herself in a professional and ethical manner during all academic pursuits within the School of Health Professions at the University of North Texas Health Science Center at Fort Worth.

Therefore, enrollment is considered implicit acceptance of the rules, regulations, and guidelines governing student behavior at the University of North Texas Health Science Center at Fort Worth.

School of Health Professions faculty members are expected to report any infractions of these rules and regulations governing student behavior to the University of North Texas Health Science Center at Fort Worth's Division of Student Affairs. These infractions consist of actions of dishonesty, including but not limited to, plagiarism, cheating, and theft. Possible sanctions for a violation of academic integrity include, but are not limited to, disciplinary probation, suspension, and dismissal from the university.

The Student Code of Conduct and Discipline is posted at the following website:

<https://www.unthsc.edu/care-and-civility/office-of-care-and-civility-test/student-conduct/>

### **AMERICANS WITH DISABILITIES ACT:**

The University of North Texas Health Science Center at Fort Worth does not discriminate on the basis of an individual's disability and complies with Section 504 and Public Law 101-336 (American with Disabilities Act) in its admissions, accessibility, treatment and employment of individuals in its programs and activities.

The University of North Texas Health Science Center at Fort Worth provides academic adjustments and auxiliary aids to individuals with disabilities, as defined under the law, who are otherwise qualified to meet the

institution's academic and employment requirements. For assistance, contact the Assistant Director, Disability Accommodations within the Center for Academic Performance at the Health Science Center. Brandie Wiley, 817-735-2134, [Brandie.Wiley@unthsc.edu](mailto:Brandie.Wiley@unthsc.edu). Reference Policy 7.105 American with Disabilities Act Protocol in the Student Policies.

<https://www.unthsc.edu/students/office-of-disability-access/>

## **COURSE SCHEDULE**

<b>Week</b>	<b>Course Session Topic</b>	<b>Notes</b>
Week 1	Full time clinical rotation	Assignments per Canvas
Week 2	Full time clinical rotation	Assignments per Canvas

### **Description of teaching methods and learning experiences:**

Clinical practice, demonstrations, visual aids, Internet research, independent study, written papers.

### **Required Assignments:**

All assignments must be turned in by **dates indicated on CANVAS**. Late assignments may require additional assignments to be completed in order to obtain a passing grade. See Academic Performance Expectations above. Assignments must be submitted electronically via Canvas. Attachments must be named in the following format: Last Name – Course Name – Assignment Name. (Example: Ayers – PCP – Core Values Development). Each assignment must be in a separate attachment, and all pages of a particular assignment should be in one attachment. Multi-page documents submitted in multiple attachments will not be accepted. Assignments not attached in the appropriate format will not be accepted and will be considered late if not submitted in the proper format prior to the deadline.

#### **1. Core Values Development**

You will present a professional development plan considering the APTA's Core Values. There are 7 core values with 75 sample indicators. Specific examples will be needed to pinpoint each student values and relate them to his/her goals in practice, education, and/or research.

This assignment has 5 parts. The first two items will be completed prior to your clinical rotation, and the last three items will be turned in at the completion of your clinical rotation:

- For each of the core values, describe how you have demonstrated evidence of these values during or prior to your physical therapy education thus far.
- For each of the core values, create two goals related to the sample indicators. These goals should correlate with areas in which you believe you have room to grow. The goals should be achievable within the timespan of your Preliminary Clinical Practicum.
- Upon completion of your Preliminary Clinical Practicum, discuss each of your goals. Did you meet or make progress towards your goal? If yes, describe the behaviors and actions demonstrate evidence of the core value. If no, what challenges did you encounter? Would you alter the goal in any way based on the experience you had in the PCP?
- Describe how you saw (or did not see) your CI demonstrate each core value in their daily practice.

This assignment will be graded on Pass/Fail basis. Students need to complete this assignment to be able to continue in the program. Completed assignments will receive a passing score in this course. Incomplete assignments will receive a failing grade in this course. The DCE may ask the student to make revisions in

order to improve the assignment to a quality that would be considered passing.

## 2. **Reflective Journal**

**Purpose:** Reflection is the most powerful mechanism available to us for personal and professional growth. Reflection is necessary for developing self-assessment and self-directed learning, and also plays a major role in developing critical thinking skills. Your journal should be reflective in nature and not merely a narrative of what you did each day.

### **Instructions:**

- Entries should be DAILY for this clinical rotation.
- Select a specific event that merits reflection. Perhaps it is a task that you struggled with or perhaps it is a task that made you feel uncomfortable.
- Record your reflections in a journal purchased solely for this purpose.
- Begin the *reflective process* by describing what you did along with how you “felt” while you were doing it.
- What have you learned about your abilities based on this reflection?
- Can you generalize about your strengths and weaknesses based on your reflection?
- Are you progressing according to everyone’s expectations? Is it time to call the program for some guidance?
- Other suggestions to stimulate your journaling thoughts:
  - Challenge yourself to record a “lesson of the day” – find one valuable insight you wish to think about and remember.
  - Start a “if I could change one thing I did today ... ” section and watch your progress over time.
  - Start a “one thing I did exceptionally well today...” section so that you recognize your strengths.
  - Having difficulty finding the right words to communicate an important message to your CI? Write it out first and then rehearse it out loud.
  - Draw pictures, paste clippings or insert articles that relate to your learning or clinical education experiences.
  - Record funniest moments and find the humor around you to help decrease your stress.
  - Based on your observations of your clinical learning environments, create a list of criteria you wish to look for when interviewing for your first position.

## 3. **Professional Behaviors Assessment**

A Professional Behaviors assessment will be filled out by both the student and Clinical Instructor at the end of the two-week clinical experience. Student and CI are to review the assessment and comments together. Signatures should be present on both documents.

Both the self-assessment and CI assessment must be submitted to CANVAS

## 4. **Early Student Assessment of Clinical Education Experience**

This form must be completed and submitted to CANVAS.

**DPHT 7345 – CLINICAL PRACTICUM I**  
**COURSE SYLLABUS**  
**FALL: 6 WEEKS**

**COURSE INSTRUCTOR:**

**Director of Clinical Education**  
**Leslie Ayres, PT, DPT**

Office location: MET - 536  
Office hours: by appointment  
Telephone: 817-735-2984  
E-mail: [leslie.ayres@unthsc.edu](mailto:leslie.ayres@unthsc.edu)

**Ana Rodriquez**  
**Clinical Coordinator**

Telephone: 817-735-0146  
E-mail: [ana.rodriquez@unthsc.edu](mailto:ana.rodriquez@unthsc.edu)

**COURSE PREREQUISITES:**

Prerequisites for this course include all preceding coursework in the curriculum. Any exceptions require approval from the Physical Therapy Department Faculty, DCE, and Chair.

**COURSE DESCRIPTION:**

The Clinical Practicum I consists of 240 contact hours over 6 weeks. Clinical Practicum I consists of six (6) weeks of full time clinical practice in a clinical environment. This course is the second in a series of five (5) supervised full-time clinical experiences. This clinical course emphasizes application of physical therapy knowledge, skills and behaviors appropriate to patient and practice management.

**GENERAL EXPECTATIONS:**

This course is part of a professional graduate-level curriculum and, as such, has graduate-level expectations for attendance, participation, dress, and satisfactory completion on ALL assignments and evaluations. Out-of-class reading, study and written assignments are expected. Additionally, students are also expected to check their email daily and follow the guidelines outlined in the DPT Program's Student Handbook.

**CREDIT HOURS:** 3

**CONTACT HOURS:** 240

**CLASS WEBSITE - CANVAS**

**COURSE OBJECTIVES:**

1. Demonstrate adherence to the APTA's Code of Ethics, Professional Behaviors, Core Values, the Guide for Professional Conduct, and legal standards and institutional regulations.
2. Participate in self-assessment of weaknesses and strengths with incorporation of feedback from clinical instructor as related to the role of physical therapist, professionalism and professional duty.
3. Participate in organizations working toward enhancing the health and wellness of the public.
4. Promotes patient involvement in his/her care.
5. Practice in a safe manner that minimizes risk to patient/client, self and others, and respond effectively to patient/client and environmental emergencies in the practice setting.
6. Utilize appropriate verbal and nonverbal communication to effectively interact with patients, families, communities, and other healthcare professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and treatment of disease.
7. Recognizes need for varied delivery of physical therapy services in consideration for patients' differences, values, culture, preferences, and needs.
8. Utilize current knowledge, theory, clinical judgment, and the patient's values and perspectives in patient management.
9. Select and perform appropriate tests and measures for screening and examination of patients/clients with a variety of diagnoses.
10. Perform full history and systems review on a variety of patients.
11. Participate in evaluation of data from the patient/client's examination to make clinical judgments in order to
  - a. Determine a diagnosis and prognosis that guides future patient management.
  - b. Determine the patient's need for further reexamination or referral to another health care professional.
  - c. Establish a basic, safe, and effective plan of care in collaboration with the patient.
  - d. Participate in patient/client reexamination, and modification of POC
  - e. Select short and long term patient/client functional goals.
  - f. Perform treatment interventions in a safe and effective manner.
12. Outline an appropriate home program for patient/client/family and/or caregiver.
13. Produce quality documentation in a timely manner to support the delivery and reimbursement of physical therapy services.
14. Interpret data from selected outcome measures in a manner that supports accurate analysis of individual patient/client and group outcomes.
15. Participate in case management process and collaboration with other healthcare professionals as needed.

**REQUIRED READINGS:**

- PT MACS
- Clinical Education Handbook
- Additional Readings per clinical instructor
- Additional Readings as posted in CANVAS

**RECOMMENDED READINGS:** per your clinical instructor

**ACADEMIC PERFORMANCE EXPECTATIONS:**

- Students are expected and required to report to clinic fully
- Assignments must be turned in electronically via CANVAS in the appropriate format.
- Students are expected to complete all assignments by their assigned due date. Any assignment turned in after the due date will require additional assignments to be completed in order to get

credit for the original assignment. **Late offenses will be cumulative over the entire duration of the curriculum.**

- 1<sup>st</sup> offense: The student will be required to write a 2 page paper detailing the relationship between late assignments and the Generic Abilities and Core Values
- 2<sup>nd</sup> offense: The student will be required to write a 5-page paper detailing discussing the relationship between behaviors as a student and how those behaviors translate to behaviors and actions in professional practice. The paper will need to have at least 3 peer-reviewed articles referenced.
- 3<sup>rd</sup> offense: Failure of clinical rotation

### **ATTENDANCE EXPECTATIONS:**

Students are expected to follow the schedule of their clinical instructor(s) during clinical experiences. Course directors, instructors and the School of Health Professions administration expect students to be regular and punctual in attendance. Absence from the clinic is not allowed without consultation with both the DCE and clinical instructor. Should a student need to miss clinic for any reason, it is expected that he/she inform the clinical instructor – by phone, email or in person – prior to the scheduled arrival time (only emergency situations will be exempt from this expectation). After contacting the CI, the DCE must be notified, and the DPT Student Clinical Education Absence Form will need to be completed upon the students return to the clinic.

### **PROFESSIONAL BEHAVIOR EXPECTATIONS:**

- Students are expected to show respect for the clinical instructor, other practitioners, patients, and each other.
- Students shall dress appropriately to represent the school in a professional manner. Business casual dress code is particularly expected unless the particular clinic dress code dictates otherwise.
- Students are expected to review HSC Live Email and Canvas daily for course and Department of Physical Therapy correspondences.
- Cell Phones: Students are expected to silence their cell phones to avoid disruption. Inappropriate phone use could result in dismissal from the clinic.
- Laptop Computers: Laptops may be used if needed. Inappropriate laptop use could result in dismissal from clinic.

### **ASSESSMENT AND GRADING POLICY:**

<http://catalog.unthsc.edu/content.php?catoid=10&navoid=1260>

*At the completion of this course, the student will receive a grade of either **Satisfactory/Pass or Unsatisfactory/Fail***

### **A grade of Satisfactory/Pass requires the following:**

1. Satisfactory completion of all assignments
2. Timely return of all required documents

### **A grade of Unsatisfactory/Fail may be given for any of the following:**

1. Violation of patients' rights.
2. Violation of the rights others.

3. Violation of the APTA Code of Ethics.
4. Unprofessional behavior.
5. Unsafe practice.
6. Substance abuse that affects performance.
7. Failure to complete any of the requirements listed in the previous section.

A grade of unsatisfactory will require the student to repeat the clinical and/or complete remedial clinical experiences agreed upon by the academic program and the clinical facility.

**ACADEMIC ASSISTANCE:**

The Course Directors, Instructors and Academic Advisors are available for email, telephonic and personal interactions with students. Students are encouraged to make appointments when they are experiencing difficulty with completing course requirements.

In addition, academic assistance is available through the HSC Center for Academic Performance (CAP). CAP provides academic counseling, learning and study strategy assessments, writing support, tutoring, and workshops on time management, test-taking skills, paper formatting, learning styles and strengths-based learning. All services are available to the School of Health Professions students at no charge. To schedule an appointment with CAP, call (817) 735-2531 or visit <https://www.unthsc.edu/center-for-academic-performance/>.

**ACADEMIC INTEGRITY PROGRAM:**

The School of Health Professions supports an environment that promotes professional and ethical behavior while achieving academic growth and individual self-discipline. Each student within the School of Health Professions, upon matriculation, shall have signed an Academic Integrity Agreement that articulates the following:

- It is understood that it is the student's responsibility to become familiar with all policies related to academic ethics and professional integrity within the School of Health Professions and the University of North Texas Health Science Center at Fort Worth,
- It is understood that it is the student's responsibility as a part of his/her professional maturation to adhere to the Student Code of Conduct and Discipline and other policies related to ethical behavior, and
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The Student Code of Conduct and Discipline is posted at the following website:

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The University of North Texas Health Science Center at Fort Worth provides academic adjustments and auxiliary aids to individuals with disabilities, as defined under the law, who are otherwise qualified to meet the institution's academic and employment requirements. For assistance contact the Assistant Director, Disability Accommodations within the Center for Academic Performance at the Health Science Center. Brandie Wiley, 817-735-2134, [Brandie.Wiley@unthsc.edu](mailto:Brandie.Wiley@unthsc.edu). Reference Policy 7.105 American with Disabilities Act Protocol in the Student Policies.

<https://www.unthsc.edu/students/office-of-disability-access/>

## **COURSE SCHEDULE**

<b>Week</b>	<b>Course Session Topic</b>	<b>Notes</b>
Week 1	Full time clinical experience	Midterm Visit Planning Form Due November 9 by 11:59pm
Week 2	Full time clinical experience	
Week 3	Full time clinical experience	Due dates via CANVAS: <ul style="list-style-type: none"> <li>• CPI Midterm Evaluation</li> <li>• Part 2 Midterm APTA Student Evaluation of CI with signature of CI at the bottom.</li> </ul>
Week 4	Full time clinical experience	
Week 5	Full time clinical experience	
Week 6	Full time clinical experience	Due Dates via CANVAS <ul style="list-style-type: none"> <li>• CPI Final Evaluation</li> <li>• Clinical Experience Planning Form for Weeks 1-6</li> <li>• Part 1 and 2 of APTA PT student Evaluation</li> <li>• Journal</li> <li>• In-service evaluation form signed by CI and a copy of your presentation/project</li> </ul>

### **Description of teaching methods and learning experiences:**

Clinical practice, demonstrations, visual aids, Internet research, independent study, written papers

### **Required Assignments:**

All assignments must be turned in by **dates indicated on Canvas**. Late assignments may require additional assignments to be completed in order to obtain a passing grade. Attachments must be submitted electronically and named in the following format: Last Name – Course Name – Assignment Name. (Example: Schwarz –CPI – Reflective Journal). Each assignment must be in a separate attachment and be in PDF or word format.

Revised July 7, 2022

Assignments with multiple pages should be attached as one attachment, not as individual pages. Assignments not attached in the appropriate format will not be accepted.

### 1. Midterm Visit Planning Form

The midterm visit planning form is designed to help facilitate the scheduling of a midterm visit with the DCE (or other faculty member), clinical instructor, and student.

### 2. Reflective Journal

**Purpose:** Reflection is the most powerful mechanism available to us for personal and professional growth. Reflection is necessary for developing self-assessment and self-directed learning, and also plays a major role in developing critical thinking skills.

**Instructions:** Entries should be ONCE A WEEK for this clinical rotation.

- Select a specific event that merits reflection. Perhaps it is a task that you struggled with or perhaps it is a task that made you feel uncomfortable.
- Reflections can be recorded in a physical journal or typed into a document on the computer.
- Begin the *reflective process* by describing what you did along with how you “felt” while you were doing it.
- What have you learned about your abilities based on this reflection?
- Can you generalize about your strengths and weaknesses based on your reflection?
- Where are you on your educational journey as compared to your Preliminary Clinical Practicum?
- Are you progressing according to everyone’s expectations? Is it time to call the program for some guidance?
- Other suggestions to stimulate your journaling thoughts:
  - Start a “if I could change one thing I did today ...” section and watch your progress over time.
  - Start a “one thing I did exceptionally well today...” section so that you recognize your strengths.
  - Are you having difficulty finding the right words to communicate an important message to your CI? Write it out first and then rehearse it out loud.
  - Draw pictures, paste clippings or insert articles that relate to your learning or clinical education experiences.
  - Record funniest moments and find the humor around you to help decrease your stress.
  - Based on your observations of your clinical learning environments, create a list of criteria you wish to look for when interviewing for your first position.

### 3. In-service

Chose a topic related to your setting for Clinical Practicum I or based on a patient you have treated during your clinical practicum. Prepare a presentation and give an in-service to your CI and other colleagues at your site. Your CI will need to fill out and sign the Student In-Service Evaluation Form, which should be returned to the DCE after the close of Clinical Practicum I. A copy of your presentation and or handouts should also be returned to the DCE.

#### **4. Clinical Experience Planning Form**

The Clinical Experience Planning form allows the student to complete a log describing weekly his/her clinical education goals, skills performed, self-assessment, and the following week's goals. This form requires completion by the student with feedback from the CI. This form helps to organize student learning objectives; engages students in reflective practice; improves communication between the student and CI regarding students/CI's expectations, and addresses the student's performance and outcomes. A copy of this form needs to be uploaded to CANVAS at the midterm and at the end of Clinical Practicum I.

#### **5. APTA Clinical Performance Instrument (CPI)**

The student is expected to demonstrate progression in performance from mid- to final evaluation on all skills regarding professional practice and patient management. The DCE should be notified immediately if a 'red flag' item or deficiency is noted.

A final rating of 'significant concerns' or written documentation of significant difficulty on any skills will require a review of the student's performance and may result in required additional didactic work and required additional clinical time or remediation for the student to pass the clinical experience. Inability to remedy the 'significant concern' or 'red flag' items may result in clinical failure.

##### *Red Flag Items*

In the event that a student demonstrates difficulty with any of the red flag performance criteria, immediate attention is required. The CI should:

- a) Document a clear description of the performance deficiency
- b) Contact the DCE via telephone

Work with the DCE and student to address a plan to improve performance

The APTA CPI will be completed via the CPI web system at midterm and final.

#### **6. APTA's Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction**

This evaluation tool has two parts. Part one is an evaluation of the Clinical Experience. Part 2 is an evaluation of your Clinical Instruction. Part 2 should be completed at both the midterm and final evaluations and should be signed by your CI each time. Part 1 is to be completed only at the final evaluation. The document should be shared and discussed with your clinical instructor. A copy of each section should be completed in Exxat at the close of the clinical practicum.

**DPHT 7460 – CLINICAL PRACTICUM II**  
**COURSE SYLLABUS**  
**Fall: 8 Weeks**

**COURSE INSTRUCTOR:**

**Leslie Ayres, PT, DPT,**  
**Director of Clinical Education**

Office location: MET - 536

Office hours: by appointment

Telephone: 817-735-2984

E-mail: [Leslie.Ayres@unthsc.edu](mailto:Leslie.Ayres@unthsc.edu)

**Ana Rodriguez**

**Clinical Coordinator**

Telephone: 817-735-0146

E-mail: [ana.rodriquez@unthsc.edu](mailto:ana.rodriquez@unthsc.edu) <mailto:sara.correa@unthsc.edu>

**COURSE PREREQUISITES:**

Prerequisites for this course include all preceding coursework in the curriculum. Any exceptions require approval from the Physical Therapy Department Faculty and Chair.

**COURSE DESCRIPTION:**

The Clinical Practicum II consists of 320 contact hours over 8 weeks. Clinical Practicum II consists of eight (8) weeks of full time supervised clinical practice and is the third in a series of five (5) clinical experiences. This clinical course emphasizes application and analysis of physical therapy knowledge, skills and behaviors appropriate to patient and practice management.

**GENERAL EXPECTATIONS:**

This course is part of a professional graduate-level curriculum and, as such, has graduate-level expectations for attendance, participation, dress, and satisfactory completion on ALL assignments and evaluations. Out-of-class reading, study and written assignments are expected. Additionally, students are also expected to check their email daily and follow the guidelines outlined in the DPT Program's Student Handbook.

**CREDIT HOURS:** 4

**CONTACT HOURS:** 320

## **CLASS WEBSITE-CANVAS**

### **COURSE OBJECTIVES:**

1. Exemplify the APTA's Code of Ethics, Professional Behaviors, Core Values, the Guide for Professional Conduct, and legal standards and institutional regulations.
2. Participate in self-assessment of weaknesses and strengths with incorporation of feedback from clinical instructor as related to the role of physical therapist, professionalism and professional duty.
3. Participate in organizations working toward enhancing the health and wellness of the public.
4. Promotes patient involvement in his/her care.
5. Practice in a safe manner that minimizes risk to patient/client, self and others, and respond effectively to patient/client and environmental emergencies in the practice setting.
6. Utilizes appropriate verbal and nonverbal communication to effectively interact with patients, families, communities, and other healthcare professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and treatment of disease.
7. Adjust delivery of physical therapy services in consideration for patients' differences, values, culture, preferences, and needs.
8. Apply current knowledge, theory, clinical judgment, and the patient's values and perspective in patient management.
9. Select and perform appropriate tests and measures for screening and examination of patients/clients with a variety of diagnoses.
10. Perform full history and systems review on a variety of patients.
11. Analyze data from the patient/client's examination to make clinical judgments in order to
  - a. Determine a diagnosis and prognosis that guides future patient management.
  - b. Determine the patient's need for further reexamination or referral to another health care professional.
  - c. Establish a safe, effective, and evidence-based plan of care in collaboration with the patient.
  - d. Perform patient/client reexamination, and modification of POC
  - e. Constructs short and long term patient/client functional goals.
  - f. Perform treatment interventions in a safe and effective manner.
12. Create an appropriate home program to patient/client/family and/or caregiver.
13. Produce quality documentation in a timely manner to support the delivery and reimbursement of physical therapy services.
14. Interpret data from selected outcome measures in a manner that supports accurate analysis of individual patient/client and group outcomes.
15. Participate in case management process and collaboration with other healthcare professionals as needed.
16. Direct and supervise personnel to meet patient's goals and expected outcomes according to legal standards and ethical guidelines.

**REQUIRED READINGS:** Weekly discussions may require reading of a particular article. The articles are all available through the HSC Library or through the APTA website. Additional readings may be required as assigned by your clinical instructor

### **RECOMMENDED READINGS:**

- PT MACS
- Clinical Education Handbook
- Additional Readings per clinical instructor
- Additional Readings as posted in CANVAS

### **ACADEMIC PERFORMANCE EXPECTATIONS:**

- Students are expected and required to report to clinic fully
- Assignments must be turned in electronically via CANVAS in the appropriate format.
- Students are expected to complete all assignments by their assigned due date. Any assignment turned in after the due date will require additional assignments to be completed in order to get credit for the original assignment. **Late offenses will be cumulative over the entire duration of the curriculum.**
  - 1<sup>st</sup> offense: The student will be required to write a 2-page paper detailing the relationship between late assignments and the Professional Behaviors and Core Values
  - 2<sup>nd</sup> offense: The student will be required to write a 5-page paper detailing discussing the relationship between behaviors as a student and how those behaviors translate to behaviors and actions in professional practice. The paper will need to have at least 3 peer-reviewed articles referenced.
  - 3<sup>rd</sup> offense: Failure of clinical rotation

### **ATTENDANCE EXPECTATIONS:**

Students are expected to follow the schedule of their clinical instructor(s) during clinical experiences. If a student's CI is working on a weekend or school holiday, the student is expected to work as well. Course directors, instructors and the School of Health Professions administration expect students to be regular and punctual in attendance. Absence from the clinic is not allowed without consultation with both the DCE and clinical instructor. Should a student need to miss clinic for any reason, it is expected that he/she inform the clinical instructor – by phone, email or in person – prior to the scheduled arrival time (only emergency situations will be exempt from this expectation). After contacting the CI, the DCE must be notified, and the DPT Student Clinical Education Absence Form will need to be completed upon the students return to the clinic. This form is available in the Clinical Education Handbook. All missed days are expected to be made up.

### **PROFESSIONAL BEHAVIOR EXPECTATIONS:**

- Students are expected to show respect for the clinical instructor, other practitioners, patients, and each other.
- Students shall dress appropriately to represent the school in a professional manner. Business casual dress code is particularly expected unless the particular clinic dress code dictates otherwise.
- Students are expected to review HSC Live Email and CANVAS daily for course and Department of Physical Therapy correspondences.

- **Cell Phones:** Students are expected to silence their cell phones to avoid disruption. Inappropriate phone use could result in dismissal from the clinic.
- **Laptop Computers:** Laptops may be used if needed. Inappropriate laptop use could result in dismissal from clinic.

**ASSESSMENT AND GRADING POLICY:**

<http://catalog.unthsc.edu/content.php?catoid=10&navoid=1260>

*At the completion of this course, the student will receive a grade of either **Satisfactory/Pass or Unsatisfactory/Fail***

**A grade of Satisfactory/Pass requires the following:**

1. Satisfactory completion of all assignments
2. Timely return of all required documents

**A grade of Unsatisfactory/Fail may be given for any of the following:**

1. Violation of patients' rights.
2. Violation of the rights others.
3. Violation of the APTA Code of Ethics.
4. Unprofessional behavior.
5. Unsafe practice.
6. Substance abuse that affects performance.
7. Failure to complete any of the requirements listed in the previous section.

A grade of unsatisfactory will require the student to repeat the clinical and/or complete remedial clinical experiences agreed upon by the academic program and the clinical facility.

**ACADEMIC ASSISTANCE:**

The Course Directors, Instructors and Academic Advisors are available for email, telephonic and personal interactions with students. Students are encouraged to make appointments when they are experiencing difficulty with completing course requirements.

In addition, academic assistance is available through the HSC Center for Academic Performance (CAP). CAP provides academic counseling, learning and study strategy assessments, writing support, tutoring, and workshops on time management, test-taking skills, paper formatting, learning styles and strengths-based learning. All services are available to the School of Health Professions students at no charge. To schedule an appointment with CAP, call (817) 735-2531 or visit <https://www.unthsc.edu/center-for-academic-performance/>.

**ACADEMIC INTEGRITY PROGRAM:**

The School of Health Professions supports an environment that promotes professional and ethical behavior while achieving academic growth and individual self-discipline. Each student within the

School of Health Professions, upon matriculation, shall have signed an Academic Integrity Agreement that articulates the following:

- It is understood that it is the student's responsibility to become familiar with all policies related to academic ethics and professional integrity within the School of Health Professions and the University of North Texas Health Science Center at Fort Worth,
- It is understood that it is the student's responsibility as a part of his/her professional maturation to adhere to the Student Code of Conduct and Discipline and other policies related to ethical behavior, and
- The student promised to conduct himself/herself in a professional and ethical manner during all academic pursuits within the School of Health Professions at the University of North Texas Health Science Center at Fort Worth.

Therefore, enrollment is considered implicit acceptance of the rules, regulations, and guidelines governing student behavior at the University of North Texas Health Science Center at Fort Worth.

School of Health Professions faculty members are expected to report any infractions of these rules and regulations governing student behavior to the University of North Texas Health Science Center at Fort Worth's Division of Student Affairs. These infractions consist of actions of dishonesty, including but not limited to, plagiarism, cheating, and theft. Possible sanctions for a violation of academic integrity include, but are not limited to, disciplinary probation, suspension, and dismissal from the university.

The Student Code of Conduct and Discipline is posted at the following website:

<https://www.unthsc.edu/care-and-civility/office-of-care-and-civility-test/student-conduct/>

**AMERICANS WITH DISABILITIES ACT:**

The University of North Texas Health Science Center at Fort Worth does not discriminate on the basis of an individual's disability and complies with Section 504 and Public Law 101-336 (American with Disabilities Act) in its admissions, accessibility, treatment and employment of individuals in its programs and activities.

The University of North Texas Health Science Center at Fort Worth provides academic adjustments and auxiliary aids to individuals with disabilities, as defined under the law, who are otherwise qualified to meet the institution's academic and employment requirements. For assistance contact the Assistant Director, Disability Accommodations within the Center for Academic Performance at the Health Science Center. Brandie Wiley, 817-735-2134, [Brandie.Wiley@unthsc.edu](mailto:Brandie.Wiley@unthsc.edu). Reference Policy 7.105 American with Disabilities Act Protocol in the Student Policies.

<https://www.unthsc.edu/students/office-of-disability-access/>

**COURSE SCHEDULE**

<b>Week</b>	<b>Course Session Topic</b>	<b>Notes</b> <b>***All Due Dates Per Canvas</b>
Week 1	Full time clinical experience	Midterm Visit Planning Form Due  Early Student Assessment of Clinical Experience due  Discussion Board Due
Week 2	Full time clinical experience	
Week 3	Full time clinical experience	Discussion Board Due
Week 4	Full time clinical experience	Midterm CPI due  Reminder – you should be filling out your Clinical Experience Planning Form. You should also fill out and discuss Part 2 of APTA PT Student Evaluation of Clinical Experience with your CI. These documents will be due at the end of the clinical rotation
Week 5	Full time clinical experience	Discussion Board Due
Week 6	Full time clinical experience	
Week 7	Full time clinical experience	Discussion Board Due
Week 8	Full time clinical experience	<ul style="list-style-type: none"> <li>• Final CPI Due</li> <li>• Clinical Experience Planning Form for Weeks 1-8</li> <li>• Part 1 and 2 of APTA PT student Evaluation signed by CI</li> <li>• In-service evaluation form signed by CI and a copy of your presentation/project</li> </ul>

**Description of teaching methods and learning experiences:**

Clinical practice, demonstration, visual aids, reading assignments, Internet research, case studies reading and practice, independent study, written papers, peer review

**Required Assignments:**

All assignments must be turned in by dates listed above. Late assignments may require additional

assignments to be completed in order to obtain a passing grad – see policy above. All documents should be submitted electronically via CANVAS and all attachments must be named in the following format: Last Name – Course Name – Assignment Name. (example: Schwarz –CP II – Core Values Development). Each assignment must be in a separate attachment. Assignments not attached in the following format will not be accepted. Attachments must be in Word or PDF format. All CI signatures must be actual signatures, not electronic signatures.

### **1. Midterm Visit Planning Form**

This form will be filled out by the student and CI to assist in the planning of a midterm visit or call with the DCE.

### **2. In-service**

Chose a topic related to your setting for Clinical Practicum II or based on a patient you have treated during your clinical practicum. Prepare a presentation and give an in-service to your CI and other colleagues at your site. Your CI will need to fill out and sign the Student In-Service Evaluation Form, which should be submitted to CANVAS.

### **3. Clinical Experience Planning Form**

The Clinical Experience Planning form allows the student to complete a log describing weekly his/her clinical education goals, skills performed, self-assessment, and the following week goals. This form requires completion by the student with feedback from the CI. This form helps to organize student learning objectives; engages student in reflective practice; improves communication between the student and CI regarding students/CI's expectations, and addresses the student's performance and outcomes. A copy of this form needs to be submitted to CANVAS at the end of the final week of Clinical Practicum II.

### **4. Early Student Assessment of Clinical Education Experience**

This form must be completed and submitted to CANVAS.

### **5. APTA Clinical Performance Instrument (CPI)**

The student is expected to demonstrate progression in performance from mid- to final evaluation on all skills regarding professional practice and patient management. The DCE should be notified immediately if a 'red flag' item or deficiency is noted.

A final rating of 'significant concerns' or written documentation of significant difficulty on any skills will require a review of the student's performance and may result in required additional didactic work and required additional clinical time or remediation for the student to pass the clinical experience. Inability to remedy the 'significant concern' or 'red flag' items may result in clinical failure.

#### *Red Flag Items*

In the event that a student demonstrates difficulty with any of the red flag performance criteria, immediate attention is required. The CI should:

- a) Document a clear description of the performance deficiency
- b) Contact the DCE via telephone

Work with the DCE and student to address a plan to improve performance

The APTA CPI will be completed via the CPI web system at midterm and final.

**6. APTA's Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction**

This evaluation tool has two parts. Part one is an evaluation of the Clinical Experience. Part 2 is an evaluation of your Clinical Instruction. Part 2 should be completed at both the midterm and final evaluations. Part 1 is to be completed only at the final evaluation. A copy of each section should be completed in Exxat after the close of Clinical Practicum II.

**7. CANVAS Discussions**

CANVAS discussions will be due every other week, as indicated by the schedule above. For each topic, students are required to make one initial post and to comment on at least two additional posts made by classmates. Students may be asked to redo a post if the original post is not substantial.

**DPHT 7473 – CLINICAL PRACTICUM III**  
**COURSE SYLLABUS**  
**Fall: 8 Weeks**

**COURSE INSTRUCTOR(s):**

**Leslie Ayres, PT, DPT**

**Director of Clinical Education**

Office location: MET - 536  
Office hours: by appointment  
Telephone: 817-735-2984  
E-mail: [Leslie.Ayres@unthsc.edu](mailto:Leslie.Ayres@unthsc.edu)

**Ana Rodriguez**

**Clinical Coordinator**

Telephone: 817-735-0146  
E-mail: [ana.rodriquez@unthsc.edu](mailto:ana.rodriquez@unthsc.edu)

**COURSE PREREQUISITES:**

Prerequisites for this course include all preceding coursework in the curriculum. Any exceptions require approval from the Physical Therapy Department Faculty and Chair.

**COURSE DESCRIPTION:**

The Clinical Practicum III consists of 320 contact hours over 8 weeks. Clinical Practicum III consists of eight (8) weeks of full time supervised clinical practice and is the fourth in a series of five (5) clinical experiences. This clinical course continues the focus of DPHT 7560 through application and further analysis of physical therapy knowledge, skills and behaviors appropriate to patient and practice management.

**GENERAL EXPECTATIONS:**

This course is part of a professional graduate-level curriculum and, as such, has graduate-level expectations for attendance, participation, dress, and satisfactory completion on ALL assignments and evaluations. Out-of-class reading, study and written assignments are expected. Additionally, students are also expected to check their email daily and follow the guidelines outlined in the DPT Program's Student Handbook.

**CREDIT HOURS:** 4

**CONTACT HOURS:** 320

**CLASS WEBSITE-CANVAS**

<https://www.unthsc.edu/academic-affairs/center-for-online-education/canvas/>

## **COURSE OBJECTIVES:**

1. Exemplify with the APTA's Code of Ethics, Professional Behaviors, Core Values, the Guide for Professional Conduct, and legal standards and institutional regulations.
2. Uses self-assessment of weaknesses and strengths with incorporation of feedback from clinical instructor as related to the role of physical therapist, professionalism and professional duty.
3. Participate in organizations working toward enhancing the health and wellness of the public.
4. Discover additional strategies and techniques to promote patient involvement in his/her care.
5. Practice in a safe manner that minimizes risk to patient/client, self and others, and respond effectively to patient/client and environmental emergencies in the practice setting.
6. Utilizes appropriate methods to effectively interact with patients, families, communities, and other healthcare professionals through the use of verbal and nonverbal communication that supports a team approach to the maintenance of health and treatment of disease.
7. Adapt delivery of physical therapy services with consideration for patients' differences, values, culture, preferences, and needs.
8. Apply current knowledge, theory, clinical judgment, and the patient's values and perspective in patient management.
9. Select and perform appropriate tests and measures for screening and examination of patients/clients with a variety of diagnoses.
10. Perform full history and systems review on a variety of patients.
11. Analyze data from the patient/client's examination to make clinical judgments in order to
  - a. Determine a diagnosis and prognosis that guides future patient management.
  - b. Determine the patient's need for further reexamination or referral to another health care professional.
  - c. Establish a basic, safe, effected, and evidence-based plan of care in collaboration with the patient.
  - d. Modify POC as needed based on patient/client reexamination
  - e. Selects short and long term patient/client functional goals.
  - f. Plan and perform treatment interventions in a safe and effective manner.
12. Create an appropriate home program to patient/client/family and/or caregiver.
13. Produce quality documentation in a timely manner to support the delivery and reimbursement of physical therapy services.
14. Interpret data from selected outcome measures in a manner that supports accurate analysis of individual patient/client and group outcomes.
15. Contribute to case management process and collaborate with other healthcare professionals as needed.
16. Direct and supervise personnel to meet patient's goals and expected outcomes according to legal standards and ethical guidelines.
17. Demonstrate entry-level competency in all 12 professional practice skills, all 5 patient management skills and sub-skills, and the 2 practice management skills addressed in the Physical Therapy Manual for the Assessment of Clinical Skills (PT MACS).

## **REQUIRED READINGS:**

- PT MACS
- Clinical Education Handbook
- Additional Readings per clinical instructor
- Additional Readings as posted in CANVAS

## **RECOMMENDED READINGS:** Per clinical instructor

## **ACADEMIC PERFORMANCE EXPECTATIONS:**

- Students are expected and required to report to clinic fully
- Assignments must be turned in electronically via CANVAS in the appropriate format.
- Students are expected to complete all assignments by their assigned due date. Any assignment turned in after the due date will require additional assignments to be completed in order to get credit for the original assignment. **Late offenses will be cumulative over the entire duration of the curriculum.**
  - 1<sup>st</sup> offense: The student will be required to write a 2-page paper detailing the relationship between late assignments and the Generic Abilities and Core Values
  - 2<sup>nd</sup> offense: The student will be required to write a 5-page paper detailing discussing the relationship between behaviors as a student and how those behaviors translate to behaviors and actions in professional practice. The paper will need to have at least 3 peer-reviewed articles referenced.
  - 3<sup>rd</sup> offense: Failure of clinical rotation

### **ATTENDANCE EXPECTATIONS:**

Students are expected to follow the schedule of their clinical instructor(s) during clinical experiences. If a student's CI is working on a weekend or school holiday, the student is expected to work as well. Course directors, instructors and the School of Health Professions administration expect students to be regular and punctual in attendance. Absence from the clinic is not allowed without consultation with both the DCE and clinical instructor. Should a student need to miss clinic for any reason, it is expected that he/she inform the clinical instructor – by phone, email or in person – prior to the scheduled arrival time (only emergency situations will be exempt from this expectation). After contacting the CI, the DCE must be notified, and the DPT Student Clinical Education Absence Form will need to be completed upon the students return to the clinic. This form is available in the Clinical Education Handbook.

### **PROFESSIONAL BEHAVIOR EXPECTATIONS:**

- Students are expected to show respect for the clinical instructor, other practitioners, patients, and each other.
- Students shall dress appropriately to represent the school in a professional manner. Business casual dress code is particularly expected unless the particular clinic dress code dictates otherwise.
- Students are expected to review HSC Live Email and Canvas daily for course and Department of Physical Therapy correspondences.
- Cell Phones: Students are expected to silence their cell phones to avoid disruption. Inappropriate phone use could result in dismissal from the clinic.
- Laptop Computers: Laptops may be used if needed. Inappropriate laptop use could result in dismissal from clinic.

### **ASSESSMENT AND GRADING POLICY:**

<http://catalog.unthsc.edu/content.php?catoid=10&navoid=1260>

*At the completion of this course, the student will receive a grade of either **Satisfactory/Pass or Unsatisfactory/Fail***

**A grade of Satisfactory/Pass requires the following:**

1. Satisfactory completion of all assignments
2. Timely return of all required documents

**A grade of Unsatisfactory/Fail may be given for any of the following:**

1. Violation of patients' rights.
2. Violation of the rights others.
3. Violation of the APTA Code of Ethics.
4. Unprofessional behavior.
5. Unsafe practice.
6. Substance abuse that affects performance.
7. Failure to complete any of the requirements listed in the previous section.

A grade of unsatisfactory will require the student to repeat the clinical and/or complete remedial clinical experiences agreed upon by the academic program and the clinical facility.

**ACADEMIC ASSISTANCE:**

The Course Directors, Instructors and Academic Advisors are available for email, telephonic and personal interactions with students. Students are encouraged to make appointments when they are experiencing difficulty with completing course requirements.

In addition, academic assistance is available through the HSC Center for Academic Performance (CAP). CAP provides academic counseling, learning and study strategy assessments, writing support, tutoring, and workshops on time management, test-taking skills, paper formatting, learning styles and strengths-based learning. All services are available to the School of Health Professions students at no charge. To schedule an appointment with CAP, call (817) 735-2531 or visit <https://www.unthsc.edu/center-for-academic-performance/>

**ACADEMIC INTEGRITY PROGRAM:**

The School of Health Professions supports an environment that promotes professional and ethical behavior while achieving academic growth and individual self-discipline. Each student within the School of Health Professions, upon matriculation, shall have signed an Academic Integrity Agreement that articulates the following:

- It is understood that it is the student's responsibility to become familiar with all policies related to academic ethics and professional integrity within the School of Health Professions and the University of North Texas Health Science Center at Fort Worth,
- It is understood that it is the student's responsibility as a part of his/her professional maturation to adhere to the Student Code of Conduct and Discipline and other policies related to ethical behavior, and
- The student promised to conduct himself/herself in a professional and ethical manner during all academic pursuits within the School of Health Professions at the University of North Texas Health Science Center at Fort Worth.

Therefore, enrollment is considered implicit acceptance of the rules, regulations, and guidelines governing student behavior at the University of North Texas Health Science Center at Fort Worth.

School of Health Professions faculty members are expected to report any infractions of these rules and regulations governing student behavior to the University of North Texas Health Science Center at Fort Worth's Division of Student Affairs. These infractions consist of actions of dishonesty, including but not limited to,

plagiarism, cheating, and theft. Possible sanctions for a violation of academic integrity include, but are not limited to, disciplinary probation, suspension, and dismissal from the university.

The Student Code of Conduct and Discipline is posted at the following website:

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The University of North Texas Health Science Center at Fort Worth provides academic adjustments and auxiliary aids to individuals with disabilities, as defined under the law, who are otherwise qualified to meet the institution’s academic and employment requirements. For assistance contact the Assistant Director, Disability Accommodations within the Center for Academic Performance at the Health Science Center. Brandie Wiley, 817-735-2134, Brandie.Wiley@unthsc.edu. Reference Policy 7.105 American with Disabilities Act Protocol in the Student Policies.

<https://www.unthsc.edu/students/office-of-disability-access/>

**COURSE SCHEDULE**

<b>Week</b>	<b>Course Session Topic</b>	<b>Notes</b> <b>**All Due Dates via CANVAS</b>
Week 1	Full time clinical experience	Midterm Visit Planning Form Due  Early Student Assessment of Clinical Education Form Due  Canvas discussion 1
Week 2	Full time clinical experience	
Week 3	Full time clinical experience	Canvas discussion 2
Week 4	Full time clinical experience	
Week 5	Full time clinical experience	Canvas discussion 3  Due dates via Canvas: <ul style="list-style-type: none"> <li>• Midterm CPI due</li> </ul>
Week 6	Full time clinical experience	

Week 7	Full time clinical experience	Canvas discussion 4
Week 8	Full time clinical experience	<p>Due dates via Canvas</p> <ul style="list-style-type: none"> <li>• Final CPI</li> <li>• Clinical Experience Planning Form for Weeks 1-8</li> <li>• Part 1 and 2 of APTA PT student Evaluation</li> <li>• In-service evaluation form signed by CI</li> <li>• Compilation of all PT MACS progress reports</li> </ul>

**Description of teaching methods and learning experiences:**

Lecture, class discussion, demonstrations, visual aids, CDs, reading assignments, handouts, guest lecturers, written examinations, students' presentations, study questions, Internet research, case studies reading and practice, independent study, written papers, portfolio, peer review

**Required Assignments:**

All assignments must be turned in by due date indicated above. Late assignments may require additional assignments to be completed in order to obtain a passing grade. All assignments should be submitted electronically and all attachments must be named in the following format: Last Name – Course Name – Assignment Name. (example: Schwarz – CPIII – Core Values Development). Each assignment must be in a separate attachment. Attachments need to be in Word or PDF and each assignment should be in one document/attachment. Assignments not attached in the following format will not be accepted.

**1. Midterm Visit Planning Form**

This form will be filled out by the student and CI to assist in the planning of a midterm visit or call with the DCE.

**2. In-service**

Chose a topic related to your setting for Clinical Practicum III or based on a patient you have treated during your clinical practicum. Prepare a presentation and give an in-service to your CI and other colleagues at your site. Your CI will need to fill out and sign the Student In-Service Evaluation Form, which should be uploaded to CANVAS at the close of Clinical Practicum III.

**3. Clinical Experience Planning Form**

The Clinical Experience Planning form allows the student to complete a log describing weekly his/her clinical education goals, skills performed, self-assessment, and the following week goals. This form requires completion by the student with feedback from the CI. This form helps to organize student learning objectives; engages student in reflective practice; improves communication between the student and CI regarding students/CI's expectations, and addresses the student's performance and outcomes. A copy of this form needs to be uploaded to CANVAS at the close of Clinical Practicum III.

**4. Early Student Assessment of Clinical Education Experience**

This form must be completed and returned by date indicated on Canvas

## 5. **APTA Clinical Performance Instrument (CPI)**

The student is expected to demonstrate progression in performance from mid- to final evaluation on all skills regarding professional practice and patient management. The DCE should be notified immediately if a 'red flag' item or deficiency is noted.

A final rating of 'significant concerns' or written documentation of significant difficulty on any skills will require a review of the student's performance and may result in required additional didactic work and required additional clinical time or remediation for the student to pass the clinical experience. Inability to remedy the 'significant concern' or 'red flag' items may result in clinical failure.

### *Red Flag Items*

In the event that a student demonstrates difficulty with any of the red flag performance criteria, immediate attention is required. The CI should:

- a) Document a clear description of the performance deficiency
- b) Contact the DCE via telephone

Work with the DCE and student to address a plan to improve performance

The APTA CPI will be completed via the CPI web system at midterm and final.

## 6. **APTA's Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction**

This evaluation tool has two parts. Part one is an evaluation of the Clinical Experience. Part 2 is an evaluation of your Clinical Instruction. Part 2 should be completed at both the midterm and final evaluations. Part 1 is to be completed only at the final evaluation. A copy of each section should be completed in Exxat after the close of Clinical Practicum III.

## 7. **Canvas Discussions**

Canvas discussions will be due every other week, as indicated by the schedule above. For each topic, students are required to make one initial post and to comment on at least two additional posts made by classmates. Students may be asked to redo a post if the original post is not substantial.

**DPHT 7680 – SPECIALIZED INTERNSHIP**  
**COURSE SYLLABUS**  
**Spring: 12 Weeks**

**COURSE INSTRUCTORS:**

**Leslie Ayres, PT, DPT**

**Director of Clinical Education**

Office location: MET - 536

Office hours: by appointment

Telephone: 817-735-2984

E-mail: [Leslie.Ayres@unthsc.edu](mailto:Leslie.Ayres@unthsc.edu)

**Ana Rodriquez**

**Clinical Coordinator**

Telephone: 817-735-0146

E-mail: [ana.rodriquez@unthsc.edu](mailto:ana.rodriquez@unthsc.edu)

**COURSE PREREQUISITES:**

Prerequisites for this course include all preceding coursework in the curriculum. Any exceptions require approval from the physical therapy department faculty and chair.

**COURSE DESCRIPTION:**

The Specialized Internship consists of 480 contact hours over 12 weeks. Specialized Internship consists of twelve (12) weeks of full time supervised clinical practice in the students' selected area(s) of physical therapy practice which refines the critical thinking and clinical decision making processes as well as integration of evidence-based practice to guide autonomous practice and professional development.

**GENERAL EXPECTATIONS:**

This course is part of a professional graduate-level curriculum and, as such, has graduate-level expectations for attendance, participation, dress, and satisfactory completion on ALL assignments and evaluations. Out-of-class reading, study and written assignments are expected. Additionally, students are also expected to check their email daily and follow the guidelines outlined in the DPT Program's Student Handbook.

**CREDIT HOURS:** 6

**CONTACT HOURS:** 480

**CLASS WEBSITE-CANVAS:**

<https://www.unthsc.edu/academic-affairs/center-for-online-education/canvas/>

## **COURSE OBJECTIVES:**

1. Identify with and adhere to the APTA's Code of Ethics, Generic Abilities, Core Values, the Guide for Professional Conduct, and legal standards and institutional regulations.
2. Internalize self-assessment of weaknesses and strengths with incorporation of feedback from clinical instructor as related to the role of physical therapist, professionalism and professional duty.
3. Show involvement in organizations working toward enhancing the health and wellness of the public.
4. Devise effective strategies and techniques to promote patient involvement in his/her care.
5. Practice in a safe manner that minimizes risk to patient/client, self and others, and respond effectively to patient/client and environmental emergencies in the practice setting.
6. Selects appropriate methods to effectively interact with patients, families, communities, and other healthcare professionals through the use of verbal and nonverbal communication that supports a team approach to the maintenance of health and treatment of disease
7. Adapt delivery of physical therapy services with consideration for patients' differences, values, culture, preferences, and needs.
8. Apply current knowledge, theory, clinical judgment, and the patient's values and perspective in patient management.
9. Select and perform appropriate tests and measures for screening and examination of patients/clients with a variety of diagnoses.
10. Perform full history and systems review on a variety of patients with both simple and complex diagnoses.
11. Synthesize data from the patient/client's examination to make clinical judgments in order to
  - a. Determine a diagnosis and prognosis that guides future patient management.
  - b. Determine the patient's need for further reexamination or referral to another health care professional.
  - c. Establish a basic, safe, effected, and evidence-based plan of care in collaboration with the patient.
  - d. Modify POC as needed based on patient/client reexamination
  - e. Write short and long term patient/client functional goals, revise as necessary.
  - f. Plan and perform treatment interventions in a safe and effective manner.
12. Create and implement an appropriate home program to patient/client/family and/or caregiver.
13. Produce quality documentation in a timely manner to support the delivery of physical therapy services.
14. Compile data from selected outcome measures in a manner that supports accurate analysis of individual patient/client and group outcomes.
15. Contribute to case management process and collaborate with other healthcare professionals as needed.
16. Direct and supervise personnel to meet patient's goals and expected outcomes according to legal standards and ethical guidelines.
17. Apply principles of health promotion and prevention to defined population groups.
18. Understand the importance of participating in the clinical education of students.

## **REQUIRED READINGS:**

- Clinical Education Handbook
- Readings determined per clinical instructor

## **RECOMMENDED READINGS:** per your clinical instructor

## **ACADEMIC PERFORMANCE EXPECTATIONS:**

- Students are expected and required to report to clinic fully
- Assignments must be turned in electronically via CANVAS in the appropriate format.
- Students are expected to complete all assignments by their assigned due date. Any assignment turned in after the due date will require additional assignments to be completed in order to get credit for the original assignment. **Late offenses will be cumulative over the entire duration of the curriculum.**

- 1<sup>st</sup> offense: The student will be required to write a 2-page paper detailing the relationship between late assignments and the Generic Abilities and Core Values
- 2<sup>nd</sup> offense: The student will be required to write a 5-page paper detailing discussing the relationship between behaviors as a student and how those behaviors translate to behaviors and actions in professional practice. The paper will need to have at least 3 peer-reviewed articles referenced.
- 3<sup>rd</sup> offense: Failure of clinical rotation

### **ATTENDANCE EXPECTATIONS:**

Students are expected to follow the schedule of their clinical instructor(s) during clinical experiences. Course directors, instructors and the School of Health Professions administration expect students to be regular and punctual in attendance. Absence from the clinic is not allowed without consultation with both the DCE and clinical instructor. Should a student need to miss clinic for any reason, it is expected that he/she inform the clinical instructor – by phone, email or in person – prior to the scheduled arrival time (only emergency situations will be exempt from this expectation). After contacting the CI, the DCE must be notified, and the DPT Student Clinical Education Absence Form will need to be completed upon the students return to the clinic.

### **PROFESSIONAL BEHAVIOR EXPECTATIONS:**

- Students are expected to show respect for the clinical instructor, other practitioners, patients, and each other.
- Students shall dress appropriately to represent the school in a professional manner. Business casual dress code is particularly expected unless the particular clinic dress code dictates otherwise.
- Students are expected to review HSC Live Email and Canvas daily for course and Department of Physical Therapy correspondences.
- Cell Phones: Students are expected to silence their cell phones to avoid disruption. Inappropriate phone use could result in dismissal from the clinic.
- Laptop Computers: Laptops may be used if needed. Inappropriate laptop use could result in dismissal from clinic.

### **ASSESSMENT AND GRADING POLICY:**

<http://catalog.unthsc.edu/content.php?catoid=10&navoid=1260>

*At the completion of this course, the student will receive a grade of either **Satisfactory/Pass or Unsatisfactory/Fail***

#### **A grade of Satisfactory/Pass requires the following:**

1. Satisfactory completion of all assignments
2. Timely return of all required documents

#### **A grade of Unsatisfactory/Fail may be given for any of the following:**

1. Violation of patients' rights.
2. Violation of the rights others.
3. Violation of the APTA Code of Ethics.
4. Unprofessional behavior.
5. Unsafe practice.
6. Substance abuse that affects performance.
7. Failure to complete any of the requirements listed in the previous section.

A grade of unsatisfactory will require the student to repeat the clinical and/or complete remedial clinical experiences agreed upon by the academic program and the clinical facility.

### **ACADEMIC ASSISTANCE:**

The Course Directors, Instructors and Academic Advisors are available for email, telephonic and personal interactions with students. Students are encouraged to make appointments when they are experiencing difficulty with completing course requirements.

In addition, academic assistance is available through the HSC Center for Academic Performance (CAP). CAP provides academic counseling, learning and study strategy assessments, writing support, tutoring, and workshops on time management, test-taking skills, paper formatting, learning styles and strengths-based learning. All services are available to the School of Health Professions students at no charge. To schedule an appointment with CAP, call (817) 735-2531 or visit <https://www.unthsc.edu/center-for-academic-performance/>

### **ACADEMIC INTEGRITY PROGRAM:**

The School of Health Professions supports an environment that promotes professional and ethical behavior while achieving academic growth and individual self-discipline. Each student within the School of Health Professions, upon matriculation, shall have signed an Academic Integrity Agreement that articulates the following:

- It is understood that it is the student's responsibility to become familiar with all policies related to academic ethics and professional integrity within the School of Health Professions and the University of North Texas Health Science Center at Fort Worth,
- It is understood that it is the student's responsibility as a part of his/her professional maturation to adhere to the Student Code of Conduct and Discipline and other policies related to ethical behavior, and
- The student promised to conduct himself/herself in a professional and ethical manner during all academic pursuits within the School of Health Professions at the University of North Texas Health Science Center at Fort Worth.

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School of Health Professions faculty members are expected to report any infractions of these rules and regulations governing student behavior to the University of North Texas Health Science Center at Fort Worth's Division of Student Affairs. These infractions consist of actions of dishonesty, including but not limited to, plagiarism, cheating, and theft. Possible sanctions for a violation of academic integrity include, but are not limited to, disciplinary probation, suspension, and dismissal from the university.

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### **AMERICANS WITH DISABILITIES ACT:**

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The University of North Texas Health Science Center at Fort Worth provides academic adjustments and auxiliary aids to individuals with disabilities, as defined under the law, who are otherwise qualified to meet the

institution's academic and employment requirements. For assistance contact the Equal Employment Opportunity Office at the health science center <https://www.unthsc.edu/administrative/human-resource-services/equal-employment-opportunity/>

## **COURSE SCHEDULE**

<b>Week</b>	<b>Course Session Topic</b>	<b>Notes</b> <b>**All Due Dates via CANVAS</b>
Week 1	Full time clinical experience	Due dates via Canvas: <ul style="list-style-type: none"> <li>• Midterm Visit Planning Form</li> <li>• Early Student Assessment of Clinical Education Form</li> </ul>
Week 2	Full time clinical experience	
Week 3	Full time clinical experience	
Week 4	Full time clinical experience	
Week 5	Full time clinical experience	
Week 6	Full time clinical experience	
Week 7	Full time clinical experience	Due dates via Canvas: <ul style="list-style-type: none"> <li>• CIET midterm</li> <li>• You should also complete and review with your CI part 2 of the APTA student assessment with your CI, but you do not need to turn this in until the final.</li> </ul>
Week 8	Full time clinical experience	
Week 9	Full time clinical experience	
Week 10	Full time clinical experience	
Week 11	Full time clinical experience	
Week 12	Full time clinical experience	Due dates via Canvas <ul style="list-style-type: none"> <li>• CIET</li> <li>• Clinical Experience Planning Form for Weeks 1-12</li> <li>• Part 1 and 2 of APTA PT student Evaluation, including page 3</li> <li>• In-service evaluation form signed by CI and a copy of your presentation/project</li> <li>• Interprofessional Professionalism Assessment</li> </ul>

### **Description of teaching methods and learning experiences:**

Lecture, class discussion, demonstrations, visual aids, CDs, reading assignments, handouts, guest lecturers, written examinations, students' presentations, study questions, Internet research, case studies reading and practice, independent study, written papers, portfolio, peer review

## **Required Assignments:**

All assignments must be turned in by due date indicated above. Late assignments may require additional assignments to be completed in order to obtain a passing grade. Assignments must be submitted electronically and all attachments must be named in the following format: Last Name – Course Name – Assignment Name. (example: Schwarz – Internship – CIET). Each assignment must be in a separate attachment. All pages of the assignment should be in one attachment. Attachments need to be in Word or PDF. Assignments not attached in the following format will not be accepted.

### **1. Midterm Visit Planning Form**

This form will be filled out by the student and CI to assist in the planning of a midterm visit or call with the DCE.

### **2. In-service**

Chose a topic related to your setting for the Specialized Internship or based on a patient you have treated during your clinical practicum. Prepare a presentation and give an in-service to your CI and other colleagues at your site. Your CI will need to fill out and sign the Student In-Service Evaluation Form, which should be returned to the DCE after the close of the Internship.

### **3. Clinical Experience Planning Form**

The Clinical Experience Planning form allows the student to complete a log describing weekly his/her clinical education goals, skills performed self-assessment, and the following week goals. This form requires completion by the student with feedback from the CI. This form helps to organize student learning objectives; engages student in reflective practice; improves communication between the student and CI regarding students/CI's expectations, and addresses the student's performance and outcomes. A copy of this form needs to be submitted to CANVAS at the end of the final week of the Internship.

### **4. Early Student Assessment of Clinical Education Experience**

This form must be completed and uploaded to CANVAS.

### **5. Clinical Internship Evaluation Tool (CIET)**

The assessment tool for the Specialized Internship is the Clinical Internship Evaluation Tool (CIET), which measures clinical performance of the student relative to a competent clinician. The document will need to be completed and turned in to CANVAS at both midterm and final.

### **6. APTA's Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction**

This evaluation tool has two parts. Part one is an evaluation of the Clinical Experience. Part 2 is an evaluation of your Clinical Instruction. Part 2 should be completed at both the midterm and final evaluations. Part 1 is to be completed only at the final evaluation. A copy of this document, including page 3, should be completed in Exxat.

### **7. CANVAS Discussions**

CANVAS discussions will be due once a month, as indicated by the schedule above. For each topic, students are required to make one initial post and to comment on at least two additional posts made by classmates.

# APPENDIX E: DPT STUDENT ABSENCE REQUEST FORM

## Department of Physical Therapy

UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER at  
Fort Worth School of Health Professions

<b>Student's Name</b>	<b>Class of</b>	<b>Date of Request</b>
<b>Date(s) of Absence</b>	<b>From:</b>	<b>To:</b>
<p><b>CIRCUMSTANCE OF ABSENCE</b></p> <p>Please attach any documentation you have such as a doctor's note for illness to this form.</p> <p>For any absence other than unanticipated i.e. illness/family emergency, please provide the CI and DCE at least 4 weeks prior notice.</p>	<input type="checkbox"/> Illness <i>(Documentation may be required if exceeds 1 day.)</i> <input type="checkbox"/> Religious Holiday <i>(See Student Policy S/UNTHSC/General -03)</i> <input type="checkbox"/> Family Issues <i>(Explain below.)</i> <input type="checkbox"/> HSC Representative to Meeting <i>(Explain below)</i> <input type="checkbox"/> Present Abstract or Poster at Meeting <i>(Explain below.)</i> <input type="checkbox"/> Other <i>(Explain below.)</i>	

*I attest that the above statements are true to the best of my knowledge:*

\_\_\_\_\_  
*Student Signature*

<b>Students are required to list events that were (will be) missed during absence and obtain DCE and CI approval</b>	
<b>Please list in detail the affected course and event</b>	<b>DCE Approval (signature) and CI Approval (signature) are both required</b>
	DCE:
	CI:
<b><u>Clinical Instructor and/or DCE are requested to list make-up requirements (if any)</u></b>	

**Completed Form must be submitted to DC**

APPENDIX F:



**DEPARTMENT OF PHYSICAL THERAPY**  
**Curriculum Sheet - Doctor of Physical Therapy (DPT)**

	<b>FALL</b>	<b>SPRING</b>	<b>SUMMER</b>
<b>First Year</b>	DPHT 7400 : Clinical Anatomy I 4 DPHT 7200 : Clinical Anatomy II 2 DPHT 7221 : Evidence Based Practice I 2 DPHT 7305 : Applied Anatomy & Kinesiology 3 DPHT 7301 : Clinical Medicine I 3 DPHT 7307 : Clinical Reasoning I 3 DPHT 7209 : Foundations of PT 2  <b>Semester Credits: 19</b> <b>Semester Weeks: 21 Weeks</b>	DPHT 7202 : Clinical Medicine II 2 DPHT 7320 : Integrated Control of Movement 3 DPHT 7323 : Applied Exercise Physiology 3 DPHT 7324 : Development and Geriatrics 3 DPHT 7230 : Therapeutic Exercise I 2 DPHT 7225 : Culture Teaching & Learning 2 DPHT 7232 : Therapeutic Interventions I 2  <b>Semester Credits: 17</b> <b>Semester Weeks: 18 Weeks</b>	DPHT 7333 : Evidence Based Practice II 3 DPHT 7233 : Therapeutic Interventions II 2 DPHT 7256 : Health Promotion (Even Years) 2 DPHT 7133 : Preliminary Clinical Practicum 1  <b>Semester Credits: 8</b> <b>Semester Weeks: 9 Weeks</b>
	<b>Second Year</b>	DPHT 7340 : Cardiovascular-Pulmonary PT 3 DPHT 7441 : Musculoskeletal PT I 4 DPHT 7442 : Neuromuscular PT I 4 DPHT 7343 : Clinical Reasoning II 3 DPHT 7345 : Clinical Practicum I 3  <b>Semester Credits: 17</b> <b>Semester Weeks: 21 Weeks</b>	DPHT 7150 : Therapeutic Exercise II 1 DPHT 7451 : Musculoskeletal PT II 4 DPHT 7452 : Neuromuscular PT II 4 DPHT 7254: Advanced Clinical Diagnostics & Imaging 2 DPHT 7244 : Evidence Based Practice III 2 DPHT 7141: Integumentary PT 1  <b>Semester Credits: 14</b> <b>Semester Weeks: 18 Weeks</b>
<b>Third Year</b>		DPHT 7560 : Clinical Practicum II 4 DPHT 7473 : Clinical Practicum III 4  <b>Semester Credits: 8</b> <b>Semester Weeks: 21 Weeks</b>	DPHT 7680 : Specialized Internship 6 DPHT 7192 : Capstone 1  <b>Semester Credits: 7</b> <b>Semester Weeks: 18 Weeks</b>

**Total Credits : 99 Updated for Summer 2020 and beyond**

**EARLY STUDENT ASSESSMENT OF CLINICAL EDUCATION EXPERIENCE**

Student Name \_\_\_\_\_ Student phone \_\_\_\_\_

Facility Name \_\_\_\_\_ Clinical Instructor \_\_\_\_\_

CI phone \_\_\_\_\_ CI e-mail \_\_\_\_\_

Year CI became licensed \_\_\_\_\_ Year CI became an instructor \_\_\_\_\_  
 Highest Physical Therapy Degree \_\_\_\_\_ Highest Earned Degree \_\_\_\_\_  
 University attended for PT \_\_\_\_\_

CI advanced degrees or certification: (Please check all that apply)

- APTA Certified Clinical Instructor  TEXAS Consortium Certified Clinical Instructor  
 GCS  CSCS  OCS  NCS  ATC  Other

Type of Experience:  Acute  Sub-Acute  In-Patient Rehab  Out-Patient Orthopedic  Specialty  
 \_\_\_\_\_

Please respond to the following statements as it relates to your clinical rotation using the drop down boxes:

		Additional Comments
I received a thorough orientation of the facility and my responsibilities as a student	Select from the drop down:	
I know where to find policies, procedures and forms needed for this clinical experience	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree", did you ask?
I have access to all facility resources as needed	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree," what resources do you need that you do not have?
I have been introduced to the rehabilitation team	Select from the drop down:	
I am aware of the individual(s) who will replace my CI (if CI is not available)	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree", did you ask?

I am aware of my own supervisory responsibilities (of PTAs, PT technician(s), etc.)	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree", did you ask?
I am aware of my caseload and workload expectations	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree", did you ask?
I am aware of my responsibilities regarding evaluations/interventions	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree", did you ask?
I was able to participate in the organization of my own clinical experience	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree", what would you like to see included in your experience that you were unable to communicate with your CI?
The clinical experience is organized to facilitate and expand my learning	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree", have you had a conversation with your CI about how to best facilitate your learning?
I am receiving the necessary feedback to facilitate and expand my learning	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree", have you had a conversation with your CI about how to best facilitate your learning?
My CI established a pattern of collaboration including feedback and open lines of communication	Select from the drop down:	If you marked "Disagree" or "Strongly Disagree", have you had a conversation with your CI about communication?
I feel equipped to manage my educational responsibilities in this clinical setting	Select from the drop down:	
I feel that I need additional help and resources to be able to successfully complete this clinical experience	Select from the drop down:	If yes, what additional resources do you need to be successful?
Do you feel that you needed additional information prior to starting this clinical experience	Select from the drop down:	If yes, what additional information do you need to be successful?

Do you need a phone call from the DCE? -  YES  NO

Student Signature/Date

---

**APPENDIX H: WEEKLY PLANNING FORM**  
**(PLEASE DUPLICATE THIS FORM FOR EACH WEEK)**

**Instructions:** This instrument should be used to focus learning, promote realistic self-appraisal, provide timely feedback, stimulate professional growth and clarify expectations on a weekly basis. The students should complete all sections marked “Student” prior to meeting with Clinical Instructor. Clinical Instructor will review and make additional comments or changes (if necessary). Use of this form is not required.

**Week #** \_\_\_\_\_ **DATES:** \_\_\_\_\_

<b>Student:</b> Summary of previous week: Note progress, achievements, feedback on previous goals, etc.
<b>Student:</b> Identify two-three skills, behaviors, goals that I would like to work during this week
<b>Student:</b> Identify methods that Clinical Instructor can assist your learning
<b>Clinical Instructor:</b> Note progress, achievements, feedback on previous goals, etc., (if they are different than above)
<b>Clinical Instructor:</b> Identify a method (or methods) that the student can improve during next week
<b>Student:</b> Include goals for the upcoming week

## APPENDIX I: CLINICAL EXPERIENCE PLANNING FORM

**NOTE TO STUDENT:** The student is responsible for completing a weekly log describing his/her clinical experience. The clinical Instructor should initial the log at the end of each week. **NOTE:** A copy of this log should be provided to the DCE at midterm and at final.

STUDENT NAME \_\_\_\_\_ CLINICAL FACILITY \_\_\_\_\_

CLINICAL ROTATION \_\_\_\_\_ TYPE OF CLINICAL EXPERIENCE \_\_\_\_\_

	#of Patients Seen	Type of Patients Seen	Skills Performed	Self-Assessment of Performance	Goal(s) for Following Week	CI Initials
Week 1						
Week 2						
Week 3						
Week 4						

	<b>#of Patients Seen</b>	<b>Type of Patients Seen</b>	<b>Skills Performed</b>	<b>Self-Assessment of Performance</b>	<b>Goal(s) for Following Week</b>	<b>CI Initials</b>
<b>Week 5</b>						
<b>Week 6</b>						
<b>Week 7</b>						
<b>Week 8</b>						
<b>Week 9</b>						

	<b>#of Patients Seen</b>	<b>Type of Patients Seen</b>	<b>Skills Performed</b>	<b>Self-Assessment of Performance</b>	<b>Goal(s) for Following Week</b>	<b>CI Initials</b>
<b>Week 10</b>						
<b>Week 11</b>						
<b>Week 12</b>						

# APPENDIX J: EDUCATIONAL AND BEHAVIORAL INDICATORS REPORT

Please document either a behavioral or educational trends or a single occurrence of a serious nature. Please immediately contact the DCE at: 817-735-2984 or email at: [leslie.ayres@unthsc.edu](mailto:leslie.ayres@unthsc.edu). Send this completed form by email to the DCE.

**Student Name** \_\_\_\_\_

**Clinical Instructor Name** \_\_\_\_\_

Date, Time, Behavior/Educational Trend Observed	Evaluator/Observer's Interpretation
Agreement & Statement of Planned Change	Timeframe for Achievement/Reevaluation of Change

**Student Signature/Date** \_\_\_\_\_

**Clinical Instructor Signature/Date** \_\_\_\_\_

**Student signature is required as the document was reviewed with the student.**

**Completed by program: Summary of Outcome(s)**

# APPENDIX K: PROFESSIONAL BEHAVIORS - SELF ASSESSMENT FORM

Student: \_\_\_\_\_

Date \_\_\_\_\_

**Instructions:** Assess each of your abilities based on your assessment of your own performance. Circle the letter that indicates your current level of performance (B - Beginning Level, D - Developing Level, E – Entry-Level). The student is not required to be at the Post-Entry-Level at this time. For each of the professional behaviors provide at least one example of your performance in that area. You may attach additional sheets if necessary, but this is not required. Please sign and date the assessment.

1.	Commitment to Learning Examples:	B	D	E
2.	Interpersonal Skills Examples:	B	D	E
3.	Communication Skills Examples:	B	D	E
4.	Effective Use of Time and Resources Examples:	B	D	E
5.	Use of Constructive Feedback Examples:	B	D	E
6.	Problem-solving Examples:	B	D	E
7.	Professionalism Examples:	B	D	E
8.	Responsibility Examples:	B	D	E
9.	Critical Thinking Examples:	B	D	E
10.	Stress Management Examples:	B	D	E

Student: \_\_\_\_\_  
(signature)

Date \_\_\_\_\_

Clinical Instructor  
Signature: \_\_\_\_\_  
(signature)

Self Assessment is: (circle one)    Valid        Not Valid

Comments:

## APPENDIX L: ANCEDOTAL FORM

**Student's Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Evaluator/Observer's Name:** \_\_\_\_\_

**Setting (Place, Persons, Atmosphere, Surroundings, etc.):** \_\_\_\_\_

\_\_\_\_\_

**Student Action/Behavior:** \_\_\_\_\_

\_\_\_\_\_

**Evaluator Interpretation:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Student's Signature** \_\_\_\_\_

**Evaluator Signature** \_\_\_\_\_

**Student's Comments** \_\_\_\_\_

# APPENDIX N: INTERNSHIP STUDENT REQUEST FORM

Name: \_\_\_\_\_

**Preferred Specialty (Please mark 1<sup>st</sup> and 2<sup>nd</sup> choice):**

- ❖ Sports
- ❖ Manual Therapy / Ortho
- ❖ Geriatrics
- ❖ Pediatrics (Neuro, ortho, schools, home health, other\_(1<sup>st</sup> Choice)\_\_\_\_\_)
- ❖ Neuro (Stroke, TBI, SCI, other\_\_\_\_\_ )
- ❖ Amputee
- ❖ Burns
- ❖ Women's Health
- ❖ Aquatics
- ❖ Wounds
- ❖ Other\_\_\_\_\_

**Educational Goals for Internship (3 goals are required):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Preferred Geographic Location (Please list at least 3 areas):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

-OR-

I am willing to go anywhere that can provide me a quality internship in the area of my preferred specialty

**Specific Facilities in which I am interested (Please list no more than 3):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Other information/Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



I understand that participation in an international internship will incur additional costs including, but not limited to, airfare, housing, food, transportation, emergency evacuation insurance, and immunizations. These costs are my responsibility.

Initials \_\_\_\_\_

Signature:

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# APPENDIX P: CERTIFICATE OF PROFESSIONAL LIABILITY INSURANCE



UNIVOFN-01

TGODSEY

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
8/30/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER License # 4682</b> Fort Worth, TX-Hub International Insurance Services 3221 Collinsworth Fort Worth, TX 76107		<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): <b>(817) 820-8100</b> FAX (A/C, No): <b>(817) 870-0310</b> E-MAIL ADDRESS: <b>ftw.service@hubinternational.com</b>	
		INSURER(S) AFFORDING COVERAGE	
		NAIC #	
INSURED		INSURER A : <b>Columbia Casualty Company</b>	<b>31127</b>
University of North Texas System 1155 Union Circle #310950 Denton, TX 76203		INSURER B : <b>Twin City Fire Insurance Company</b>	<b>29459</b>
		INSURER C : <b>Continental Casualty Company</b>	<b>20443</b>
		INSURER D :	
		INSURER E :	
		INSURER F :	

**COVERAGES**      **CERTIFICATE NUMBER:**      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTB	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
<b>A</b>	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			<b>HPP4031960334</b>	<b>9/1/2021</b>	<b>9/1/2022</b>	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>50,000</b> MED EXP (Any one person) \$ <b>5,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>3,000,000</b> PRODUCTS - COM/POP AGG \$ <b>3,000,000</b> \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
<b>B</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		<b>Y/N</b> <input type="checkbox"/> N/A	<b>46WERT3322</b>	<b>9/1/2021</b>	<b>9/1/2022</b>	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ <b>500,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>500,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>500,000</b>
<b>C</b>	<b>Healthcare Prof Lia</b>			<b>ADT6049766024</b>	<b>9/1/2021</b>	<b>9/1/2022</b>	<b>Each Claim</b> <b>1,000,000</b>
<b>C</b>	<b>Healthcare Prof Lia</b>			<b>ADT6049766024</b>	<b>9/1/2021</b>	<b>9/1/2022</b>	<b>Aggregate</b> <b>3,000,000</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**Named Insureds included for Professional Liability Only:**

University of North Texas Health Science students (Texas College of Osteopathic medicine, community health, long term health care administration, pharmacist, physical therapist, and physician assistant).

University of North Texas Health Science Center and its non-physician licensed providers, faculty and staff.

SEE ATTACHED ACORD 101

<b>CERTIFICATE HOLDER</b>  University of North Texas System 1155 Union Circle #310950 Denton, TX 76203	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
--	--



AGENCY CUSTOMER ID: UNIVOFN-01

TGODSEY

LOC #: 2

**ADDITIONAL REMARKS SCHEDULE**

Page 1 of 1

AGENCY <b>Fort Worth, TX-Hub International Insurance Services</b>		License # 4682	NAMED INSURED <b>University of North Texas System 1155 Union Circle #310950 Denton, TX 76203</b>
POLICY NUMBER <b>SEE PAGE 1</b>			
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>	EFFECTIVE DATE: <b>SEE PAGE 1</b>	

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

**Description of Operations/Locations/Vehicles:  
Texas College of Osteopathic Medicine of UNTHSC**

**University of North Texas Kristin Farmer Autism Center**

**Universality of North Texas Student Health & Wellness Center**

**University of North Texas Athletic Training and Rehabilitation Center**

**University of North Texas Speech and Hearing Center**

**University of North Texas students (Social worker, counseling, rehabilitation assistant, rehabilitation counselor, health education, audiologist, speech-language pathology);**

**University of North Texas Systems (Medical Professional Student While Doing Internship/Clinical Rotations)**

**University of North Texas at Dallas (counseling programs)**

**General Liability and Professional Liability applies only to enrolled students acting within the scope of internships and clinical rotations of the entities.**

**Professional Liability Limits by Retroactive Date  
On or After Date - 09/01/1996 - \$250,000 Each Claim Limit, \$500,000 In the Aggregate Limit  
On or After Date - 12/01/2009 - \$1,000,000 Each Claim Limit, \$3,000,000 In the Aggregate Limit**

**Workers' Compensation coverage for Colorado locations applies to enrolled students acting within the scope of internships and clinical rotations of the entities referenced in this paragraph.**



**DEPARTMENT OF PHYSICAL THERAPY**

**DPT STUDENT ACKNOWLEDGEMENT FORM**

I have read and understand all information presented in this Clinical Education Handbook. I agree to abide by all rules and guidelines.

---

**PRINTED STUDENT NAME**

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**STUDENT SIGNATURE**

---

**DATE**

## **Student Consent for Clinical Educational Experiences**

\_\_\_ I understand that a portion of my education in The University of North Texas Health Science Center at Fort Worth (HSC Fort Worth) DPT program consists of 5 clinical rotations.

\_\_\_ I understand that all expenses related to clinical education experiences are my sole responsibility.

\_\_\_ I understand that during any clinical experiences I will be subject to the known and unknown risks members of my profession experience in the provision of health care. These may include exposure to people with infectious and communicable diseases, mental illnesses, and risks attendant to the work environment. I realize, however, as a student, I am not eligible for coverage under the University's nor the healthcare facility's worker's compensation insurance, and that there is no mechanism for compensation in the event I am injured during my clinical experience.

\_\_\_ I will be expected to abide by whatever policies the facility has regarding risk exposure management for its employees, even though I am not considered by HSC at Fort Worth nor the facility to be an employee of the facility.

\_\_\_ I will carry at all times proof of the following: 1) current CPR certification 2) current immunization records required by University and clinical site 3) background check clearance 4) negative drug screen for proof of health clearance 5) current liability insurance and 6) health insurance coverage.

\_\_\_ I understand that failure to meet the above documentation criteria will delay or prevent my participation in clinical education experiences.

\_\_\_ I understand that I must be registered for clinical courses for my liability insurance to cover me.

\_\_\_ I understand that each facility may require additional background check or drug screen prior to the start date of each rotation and the costs are solely my responsibility.

\_\_\_ I voluntarily agree to participate in clinical education experiences arranged by the HSC at Fort Worth DPT program.

I, \_\_\_\_\_ (PRINT NAME), have read the requirements for the Professional Behaviors. I have been given the opportunity to ask questions which have been adequately answered. I understand that professional behavior is just as much a part of becoming a competent physical therapist as is the theory and application of treatment.

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE