To our Clinical Education Partners:

On behalf of the faculty and staff of the UMHB Doctor of Physical Therapy Program, thank you for your support and partnership with UMHB.

The DPT curriculum was developed to reflect current physical therapy practice and to prepare an autonomous entry-level DPT practitioner. During the course of the program, students experience a number of unique learning opportunities, including interprofessional interactions and service learning activities, to facilitate engagement in the profession and the community. Clinical education is a critical component of this program and we greatly appreciate your participation.

The DPT faculty developed this handbook to assist you in providing our students with a positive clinical experience at your facility. Please do not hesitate to contact us if you have any questions.

Sincerely,

Jenise Engelke

Jenise Engelke, PT, DPT
Director of Clinical Education

Kristi Trammell

Kristi Trammell, PT, DPT
Assistant Director of Clinical Education
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STATEMENT OF NON-DISCRIMINATION

The University of Mary Hardin-Baylor (UMHB) admits qualified students of any race, color, sex, national, or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not unlawfully discriminate on the basis of race, color, sex, religion, age, nationality, and ethnic origin in the administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs. Furthermore, UMHB does not unlawfully discriminate on the basis of handicap in the recruitment and admission of students and the operation of any of its programs and activities, as specified by federal laws and regulations.

UMHB is authorized under federal law to enroll non-immigrant alien students. The university is a private institution and reserves the right to deny admission to an applicant for any lawful reason.

The University is required not to discriminate unlawfully on the basis of sex by Title IX of the Education Amendments Act of 1972 and its implementing regulations at 34 C.F.R. Part 106. This requirement extends to admission, except that the University may discriminate on the basis of sex in undergraduate admissions and is exempt from provisions of Title IX which conflict with the University's religious tenets.

The University has grievance procedures to provide students, employees, or applicants an opportunity to file a complaint of illegal discrimination of any kind. In order to file a grievance, contact the appropriate person below or see the grievance procedures published online.

A Student or applicant with a question about the university’s non-discrimination policies or who claims to have experienced unlawful discrimination in connection with any university program or activity should contact the designated coordinator for university compliance with nondiscrimination policies: Susan Owens, Vice President for Human Resources, Title IX Coordinator and non-discrimination compliance officer, Sanderford Administrative Complex, 900 College Street, Belton, Texas 76513, 254-295-4527, susan.owens@umhb.edu.
Sexual Harassment, Sexual Assault or Sexual Violence
The University strives to create a campus environment that is free from sexual violence, sexual assault, or sexual harassment, all of which are prohibited by university policy and by federal law. Detailed information about reporting crimes, sex offenses, or violations of the university’s policies on sexual harassment can be found in the UMHB Student Handbook and website.

Potential Health Risks and Standard Precautions
The DPT program and many of the contracted clinical facilities require that students have been educated about the dangers of blood borne pathogens and how to protect themselves and others, including the use of standard precautions. The DPT program will provide education on these topics in specific physical therapy courses during the first year of the program.

DPT Program students are expected to take precautions to prevent exposure to hazardous materials or substances, i.e. wear goggles/gloves, when performing certain procedures.

If a physical therapy student experiences an exposure, he/she should report it promptly to the university faculty member for the course and/or the clinical facility. Students are expected to follow all clinical facility and university policies regarding precautions and exposures.
Institutional Mission Statement
The University of Mary Hardin-Baylor prepares students for leadership, service, and faith-informed discernment in a global society. Academic excellence, personal attention, broad-based scholarship and a commitment to a Baptist vision for education distinguish our Christ-centered learning community.

Mayborn College of Health Sciences Mission Statement
The mission of the Mayborn College of Health Sciences is to engage students in a Christ-centered learning environment where they will develop the knowledge, skills, and interprofessional competencies to become leaders in the complex and dynamic environment of health sciences. The college promotes the integration of health and restoration of the mind, body and spirit through the preparation of students in a supportive and rigorous academic setting. Our students learn in a student-centered, interprofessional, and innovative learning environment while engaging in opportunities to go beyond the classroom with hands-on-learning, research, and service.

Program Vision
The Doctor of Physical Therapy program aspires to be recognized as the program of choice for individuals seeking to become competent, effective and ethical physical therapy practitioners with a foundation based in Christian principles and values.

Program Mission
The mission of the University of Mary Hardin-Baylor’s Doctor of Physical Therapy Program is to prepare Doctors of Physical Therapy who demonstrate excellence in clinical practice as they collaborate with the interprofessional health care team, contribute to critical inquiry, advance societal health and wellness, advocate to promote change, and serve as leaders within the profession and community. Addressing the needs of underserved communities in a global society is a guiding principle for program faculty, staff, students and graduates. The program is offered in a Christian environment led by faculty who teach and mentor with integrity, sensitivity and a commitment to excellence.

Philosophy
The faculty body of the University of Mary Hardin-Baylor Doctor of Physical Therapy Program believes the following:

➢ Each member of society should have access to quality health care, including physical therapy services, and should participate to the fullest extent of his/her ability in making informed health care decisions. Physical therapy is a vital part of health care and encompasses all aspects of the movement system. Patients may access the health care system through a variety of entry points, one of which is physical therapy.

➢ Physical therapists participate as members of an interdisciplinary health care team who collaborate and consult with other health care professionals, patients/clients, caregivers and the
community. Physical therapists use an evidence-based approach in all aspects of physical therapy practice.

- Physical therapy education is adaptable, proactive and responsive in meeting the present and future needs of students, the health care system, and society. Physical therapy education includes the incorporation of modern technology and innovation into education and practice. The post-baccalaureate curriculum includes integration and expansion of knowledge in the sciences, the humanities, and applied sciences relevant to physical therapy practice. The PT program prepares self-directed, life-long, collaborative learners who are able to use scientific and analytic approaches to clinical decision-making to achieve optimal patient care.

- Active adult learning is a process by which students employ an ongoing interpretive and reflective process that synthesizes prior and current experiences into new learning. Students enrolled in the program recognize the challenging process involved in developing the requisite knowledge and skills of a physical therapist. Students display a commitment to learning, responsibility, professionalism, critical thinking, problem solving, and sound communication and interpersonal skills.

- Program faculty model professional core values, personal and professional development, scholarship, leadership, and service. Faculty members demonstrate the characteristics of critical thinking, therapeutic presence, commitment to excellence, and acceptance of ambiguity.

- Graduates are autonomous practitioners who are prepared to collaborate in a dynamic health care environment. As lifelong learners, they are committed to advocating for the public welfare, contributing to critical inquiry, serving as leaders and role models, and striving for excellence in all aspects of physical therapy.

**Program Goals and Objectives**

In order to accomplish the mission of the DPT program, the Program will:

1) Provide an innovative and dynamic curriculum that reflects contemporary practice and includes interprofessional and service learning.
   a. The program will coordinate student participation in interprofessional learning activities, including core training and elective experiences, throughout the program.
   b. The curriculum will include a service learning activity in at least one 1st and 2nd year course.
   c. The program will offer at least 5 elective options each year based on faculty and student input.

2) Promote and support diversity in all aspects of the program.
   a. The program will solicit and encourage applications from underrepresented groups in order to promote diversity in every cohort.
   b. The program will offer a variety of academic support opportunities each semester to promote student success.

3) Collaborate with local clinicians to promote continued competence for PTs within the community.
   a. The program will host at least one continuing competency course per year.

4) Address the health and wellness needs of the community.
   a. The program will collaborate with other health care programs to provide pro bono services to the community through the Cru Community Clinic at least one afternoon per week each semester.
5) Promote and support faculty and student development and leadership opportunities.
   a. The program will provide or support at least 10 hours of faculty development activities each academic year.
   b. At least 25% of core faculty will participate in the APTA Educational Leadership Conference each year.
   c. The program will provide support to the student physical therapy organization to promote student participation in professional and leadership activities each year.

In order to accomplish the mission of the DPT program, the Faculty will:

6) Model professional behaviors that reflect commitment to service to the institution, profession and community.
   a. 100% of core faculty will serve on a university, school or department committee within 1 year of employment.
   b. 100% of core faculty will maintain membership in at least 1 professional association each year.
   c. 100% of core faculty who are licensed Physical Therapists will maintain membership in at least 1 APTA section each year.
   d. 50% of core faculty will serve in elected or appointed positions/committees within their profession at the local, state and/or national level each year.
   e. 100% of faculty members who are licensed Physical Therapists will participate in supervision of students in the Cru Community Clinic.

7) Maintain currency in physical therapy practice to contribute to an evidence informed contemporary curriculum.
   a. 100% of faculty members who are licensed Physical Therapists will participate in at least one of the following activities per year:
      i. Complete 10 CCUs in a topic related to an assigned course.
      ii. Conduct a scholarly activity (research project, article, presentation) in a topic related to an assigned course.
      iii. Participate in clinical practice in a physical therapy area related to an assigned course.

8) Participate in scholarly activities to advance the teaching, research, and practice of physical therapy through rigorous inquiry.
   a. 100% of core faculty will submit at least one scholarly product per year to a peer-reviewed journal or professional conference.

In order to accomplish the mission of the DPT program, students will:

9) Demonstrate entry-level competency in clinical practice by the end of the program.
   a. 100% of students will be at entry level for each performance criterion by the end of their final clinical experience.

10) Complete the requirements for the Doctor of Physical Therapy degree.
    a. 90% of students entering the program will graduate from the program within 40 months of matriculation.

11) Demonstrate a commitment to service through community engagement.
    a. 100% of students will participate in patient care in the Cru Community Clinic each year.
    b. 25% of students will exceed the minimum number of volunteer hours required for graduation from the program.
12) Demonstrate a commitment to the profession of physical therapy.
   a. 25% of students will become members of an APTA section during the program prior to
       beginning their full-time clinical experiences.
   b. 90% of students will attend a local, state or national physical therapy conference/meeting by
       the end of the program.

13) Contribute to the body of knowledge in physical therapy.
   a. 25% of students in the final year of the program will participate in presentation of research
       beyond the requirements for graduation (Scholars’ Day, DPT Research Symposium).

In order to accomplish the mission of the DPT program, Graduates will:

14) Demonstrate competent, effective and ethical practice with consideration for serving underserved
    communities.
   a. 95% of graduates will pass the NPTE and achieve licensure.
   b. 100% of graduates seeking employment will be employed within 6 months of passing the
       licensure exam.
   c. 40% of graduates will be employed in settings within underserved communities.

15) Serve as leaders within clinical practice, the profession, and the community.
   a. 25% of graduates will serve as clinical instructors within 2 years following graduation.
   b. 25% of graduates will serve in a leadership role in their clinical practice within 3 years
       following graduation.

Program Accreditation Statement

The Doctor of Physical Therapy Program at University of Mary Hardin-Baylor is accredited by the
Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave. Suite 100,
Alexandria, VA, 22305-3085; telephone: 703-706-3245; email: accreditation@apta.org; website:
http://www.capteonline.org. If needing to contact the program/institution directly, please call (254) 295-
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PROGRAM FACULTY AND STAFF

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Peggie Williamson, PT, DPT  
Darryn Willoughby, PhD

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DPT Program Secretary  
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Faculty Titles and Roles

Academic Faculty Roles

The Program Director (PD) is a licensed physical therapist and experienced academic faculty member employed by the University to lead the DPT Program. The PD oversees all aspects of the program including meeting CAPTE accreditation standards, developing and managing the annual program budget, teaching courses in the program, and engaging in scholarship and service. The PD is also responsible for evaluating, mentoring, and fostering the development of academic faculty and the program as a whole.

The Director of Clinical Education/Assistant Director of Clinical Education (DCE/ADCE) is a licensed physical therapist and academic faculty member employed by the UMHB DPT Program to coordinate the clinical education aspects of the curriculum. The DCE/ADCE is responsible for organizing and planning the clinical experiences for the students as well as communicating with all of the Clinical Facilities about matters that relate to the clinical education. The UMHB DPT program may designate another academic faculty member to assist in decision-making related to clinical education or act in place of the DCE/ADCE in the event the DCE/ADCE are unavailable.

Clinical Faculty Roles

The Clinical Faculty are highly respected physical therapists that provide clinical education opportunities for the student physical therapists during their clinical practicum experiences. The clinical settings and facilities may range from acute care, inpatient rehabilitation, skilled nursing, long-term acute care, nursing homes, outpatient rehabilitation, assisted living, specialty clinics, and home based. Characteristics of effective physical therapists and clinical instructors include:

- professional, caring attitude
- maintaining a positive outlook
- strong interpersonal and communication skills
- confident in their abilities
- organized yet flexible
- empathetic to others
- open to new evidence and concepts
- approachable
- understanding that mistakes provide an opportunity for learning and growth

Site Coordinator of Clinical Education (SCCE) is the individual employed by the clinical facility to coordinate student clinical rotations with a clinical instructor (CI) in the facility. The SCCE determines readiness for clinicians to serve as CIs and communicates with the academic program regarding clinical placements, availability, student performance, and other essential information about clinical education. The SCCE does not have to be a physical therapist.

Clinical Instructor (CI) is an individual employed by the clinical facility who instructs, supervises, and assesses students during their clinical learning experiences. Clinical learning experiences drive the students’ integration and application of academic knowledge into clinical practice. Minimum qualifications for serving as a CI include: current licensure in the state in which employed, one year of experience as a licensed physical therapist, evidence of active participation in formal and/or informal continued education, and a demonstrated ability to communicate strengths and weaknesses, both orally and in writing.
Curriculum Overview
The physical therapy program encompasses 7 semesters over a period of 28 months. The academic calendar for the program may differ from the calendar published by the University. Students will be provided with physical therapy class schedules each year by physical therapy faculty.

Curriculum Outline

<table>
<thead>
<tr>
<th>FALL SEMESTER, 1ST YEAR</th>
<th>18 hrs</th>
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<tbody>
<tr>
<td>PHTH 7711 Human Anatomy</td>
<td>7</td>
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<tr>
<td>PHTH 7412 Functional Anatomy</td>
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</tr>
<tr>
<td>PHTH 7313 Applied Physiology I</td>
<td>3</td>
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<tr>
<td>PHTH 7314 Introduction to Patient Management</td>
<td>3</td>
</tr>
<tr>
<td>PHTH 7126 Evidence Based Practice</td>
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<tr>
<th>SPRING SEMESTER, 1ST YEAR</th>
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<tr>
<td>PHTH 7421 Clinical Neuroscience</td>
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<tr>
<td>PHTH 7422 Therapeutic Interventions</td>
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</tr>
<tr>
<td>PHTH 7423 Applied Physiology II</td>
<td>4</td>
</tr>
<tr>
<td>PHTH 7424 Examination and Evaluation</td>
<td>4</td>
</tr>
<tr>
<td>PHTH 7137 Critical Inquiry I</td>
<td>1</td>
</tr>
<tr>
<td>PHTH 7115 Introduction to Professional Practice</td>
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<tr>
<th>SUMMER SEMESTER, 1ST YEAR</th>
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<tbody>
<tr>
<td>PHTH 7331 Musculoskeletal Rehab I</td>
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</tr>
<tr>
<td>PHTH 7325 Development of Human Movement</td>
<td>3</td>
</tr>
<tr>
<td>PHTH 7335 Integumentary Dysfunction &amp; Physical Agents</td>
<td>3</td>
</tr>
<tr>
<td>PHTH 7333 Professional Communication &amp; Psychosocial Considerations</td>
<td>3</td>
</tr>
<tr>
<td>PHTH 7148 Critical Inquiry II</td>
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<tr>
<th>FALL SEMESTER 2ND YEAR</th>
<th>19 hrs</th>
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<tbody>
<tr>
<td>PHTH 7441 Cardiopulmonary and Acute Care Management</td>
<td>4</td>
</tr>
<tr>
<td>PHTH 7442 Musculoskeletal Rehab II</td>
<td>4</td>
</tr>
<tr>
<td>PHTH 7435 Neuromuscular Rehab I</td>
<td>4</td>
</tr>
<tr>
<td>PHTH 7244 Geriatrics</td>
<td>2</td>
</tr>
<tr>
<td>PHTH 7245 Health Policy</td>
<td>2</td>
</tr>
<tr>
<td>PHTH 7146 Issues in Underserved Communities</td>
<td>1</td>
</tr>
<tr>
<td>PHTH 7156 Critical Inquiry III</td>
<td>1</td>
</tr>
<tr>
<td>PHTH 7136 Clinical Practicum (Winter Term)</td>
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</table>
### SPRING SEMESTER, 2ND YEAR
- **PHTH 7751 Professional Experience I**: 7 hrs
- **PHTH 7345 Neuromuscular Rehab II**: 3 hrs
- **PHTH 7356 Management of Special Populations**: 3 hrs
- **PHTH 7254 Pediatrics**: 2 hrs
- **PHTH 7255 Care Delivery and Practice Management**: 2 hrs

### SUMMER SEMESTER, 2ND YEAR
- **PHTH 7961 Professional Experience II**: 9 hrs
- **PHTH 7162 Wellness and Health Promotion (online)**: 1 hr
- **PHTH 7191 Special Topics (Students select 2 topics)**: 0-2 hrs

### FALL SEMESTER, 3RD YEAR
- **PHTH 7971 Professional Experience III**: 9 hrs
- **PHTH 7172 Professional Seminar**: 1 hr
- **PHTH 7191 Special Topics (Students select 2 topics)**: 0-2 hrs

**Total**: 107 hrs

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### Course Descriptions

**Note**: Syllabi for Clinical Courses are provided in Appendix A.

#### Fall Semester, 1st Year

- **PHTH 7711 Human Anatomy** - Study of the structure and function of systems in the human body; provides an introduction to radiology, histology, and embryology; includes human cadaver dissection. (4 lecture, 9 lab)

- **PHTH 7412 Functional Anatomy** - Introduction to biomechanical principles of human movement; includes mechanical principles of joint movement, posture and gait analysis; integration of anatomy and kinesiology with biomechanics is emphasized. (3 lecture, 3 lab)

- **PHTH 7313 Applied Physiology I** - Part one of a two-part series; study of the physiology of the human body, including function at the molecular, cellular, tissue and systems levels in health and disease, as well as at rest and during work/exercise; addresses integration of physiological responses from multiple systems, cellular physiology, metabolism, and homeostasis; includes introduction to general pharmacology. (3 lecture, 1 lab)

- **PHTH 7314 Introduction to Patient Management** – Introduction to the physical therapy model of clinical practice; includes the role of the physical therapist in health promotion, wellness and prevention, as well as basic patient management and documentation skills. (2 lecture, 3 lab)

- **PHTH 7126 Evidence Based Practice** – Introduction to the concepts of evidence based practice in physical therapy; includes accessing, reviewing, analyzing and critiquing the literature related to physical therapy practice; students will develop ideas for research projects. (1 lecture)
**Spring Semester, 1st Year**

**PHTH 7421 Clinical Neuroscience** – Study of the structure and function of the nervous system across the lifespan; includes cellular, systemic and clinical pathology discussions of peripheral and central neural components; includes basic examination of sensation, perception, cognition and motor control. (3 lecture, 3 lab)

**PHTH 7422 Therapeutic Interventions** – Emphasis on the development of skills in therapeutic interventions, including therapeutic exercise and joint mobilizations. (3 lecture, 3 lab)

**PHTH 7423 Applied Physiology II** – Part two of a two-part series; study of the physiology of the human body, including function at the molecular, cellular, tissue and systems levels in health and disease, as well as at rest and during work/exercise; addresses integration of physiological responses from multiple systems, cellular physiology, metabolism, and homeostasis; includes introduction to general pharmacology. (4 lecture, 1 lab)

**PHTH 7424 Examination and Evaluation** – Introduction to physical therapy examination, evaluation, and differential diagnosis within a clinical decision making framework; includes introduction to diagnostic screening and imaging; incorporates the Guide to PT Practice. (3 lecture, 3 lab)

**PHTH 7115 Introduction to Professional Practice** – Introduction to physical therapy as a profession, core values, ethics and laws, professional behavior, communication; provides an overview of program expectations. (1 lecture)

**PHTH 7137 Critical Inquiry I** – Exploration of research methodologies utilized in physical therapy and health care research, including research design and statistical analysis. Students will implement research projects in collaboration with faculty. (1 lecture)

**Summer Semester, 1st Year**

**PHTH 7331 Musculoskeletal Rehab I** – In-depth study of examination, evaluation, and intervention strategies for patients/clients with spine and upper extremity musculoskeletal problems across the lifespan; includes orthotics and bracing techniques, manual therapy; includes principles of prevention, diagnosis, prognosis, and outcomes; investigates relationship between pharmacological management and physical therapy interventions. (2 lecture, 3 lab)

**PHTH 7325 Development of Human Movement** – Study of the development of and changes in human movement throughout the lifespan based on principles of neuroscience, motor control, and motor learning. Tests and measures related to the development of human movement and the analysis of human movement patterns will be used to guide identification of impairments and development of treatment strategies to optimize movement and function. (2 lecture, 3 lab)

**PHTH 7335 Integumentary Dysfunction and Physical Agents** – Study of examination, evaluation and intervention strategies for patients/clients with integumentary and/or vascular problems; includes principles of prevention, diagnosis, prognosis, and outcomes; addresses management of wounds and investigates relationship between pharmacological management and physical therapy interventions. Includes development of skills in physical agents and electrotherapeutic modalities (2 lecture, 3 lab)

**PHTH 7333 Professional Communication & Psychosocial Considerations** – Introduction to key elements of professional communication, including foundations of communication, interpersonal and conflict resolution
skills, and principles of teaching and learning; addresses study of individual response to illness and disability in the context of psychological, cultural, ethnic, social, and lifespan factors, as well as psychological behavior models in relation to physical therapy management; includes opportunity for service learning project. (3 lecture)

PHTH 7148 Critical Inquiry II – Continued exploration of research methodologies and application of scientific method to physical therapy; students will implement research projects in collaboration with faculty. (1 lecture)

**Fall Semester, 2nd Year**

PHTH 7441 Cardiopulmonary and Acute Care Management – In-depth study of examination, evaluation and intervention strategies for patients/clients with cardiovascular and/or pulmonary problems with emphasis on those in the acute setting; includes principles of prevention, diagnosis, prognosis, and outcomes; investigates relationship between pharmacological management and physical therapy interventions. (3 lecture, 3 lab)

PHTH 7442 Musculoskeletal Rehab II – Advanced study of examination, evaluation and intervention strategies for patients/clients with spine and lower extremity musculoskeletal problems across the lifespan; includes orthotics and bracing techniques, manual therapy; includes principles of prevention, diagnosis, prognosis, and outcomes; investigates relationship between pharmacological management and physical therapy interventions. (3 lecture, 3 lab)

PHTH 7435 Neuromuscular Rehab I – In-depth study of examination, evaluation and intervention strategies for patients/clients with neuromuscular problems across the lifespan; includes principles of prevention, diagnosis, prognosis, and outcomes; investigates relationship between pharmacological management and physical therapy interventions. (3 lecture, 3 lab)

PHTH 7244 Geriatrics – In-depth study of examination, evaluation and intervention strategies for older adults; incorporates theories of aging with principles of prevention, diagnosis, prognosis and outcomes; investigates the unique aspects of pharmacology in the elderly; includes opportunity for service learning project. (1.5 lecture, 2 lab)

PHTH 7245 Health Policy – Overview of current health care environment, existing payment and health care delivery systems, development of public policy and legislation, and scope of physical therapy practice; will include exploration of local, state and national influences and factors. (2 lecture)

PHTH 7146 Issues in Underserved Communities – Overview of major issues in underserved communities, including rural and impoverished areas; exploration of demographic, economic, and societal influences and factors impacting health care in underserved areas; includes opportunity for service-learning project. (1 lecture)

PHTH 7156 Critical Inquiry III – Continued exploration of research methodologies and statistical analysis of physical therapy research; students will continue to implement research projects and conduct data analysis in collaboration with faculty. (1 lecture)

PHTH 7136 Clinical Practicum – Introduction to clinical practice through clinical observation/reflection and opportunity to practice basic skills learned during the first year of the program; consists of 80 hours of supervised clinical exposure. (80 clinical hours)
**Spring Semester, 2nd Year**

PTHT 7751 Professional Experience I – First of three clinical experiences, consists of 8 weeks of full-time supervised clinical practice; emphasizes integration and application of learned physical therapy skills, knowledge and behaviors in a patient care environment. (320 clinical hours)

PTHT 7345 Neuromuscular Rehab II - Advanced study of examination, evaluation and intervention strategies for patients/clients with neuromuscular problems across the lifespan; includes discussion of rehabilitative and assistive technologies; includes in-depth exploration of current body of literature for the practice of physical therapy with the designated populations. (2 lecture, 3 lab)

PTHT 7254 Pediatrics - In-depth study of examination, evaluation and intervention strategies for children and adolescents; incorporates study of normal development with principles of diagnosis, prognosis and outcomes; investigates the unique aspects of pharmacology in children and adolescents. (1.5 lecture, 2 lab)

PTHT 7356 Management of Special Populations – Case-based study of examination, evaluation and intervention strategies for patients/clients with complex medical problems spanning multiple systems. Special topics include amputation, spinal manipulation, pelvic floor dysfunction, peripartum management, chronic pain, oncology, lymphedema, and orthotics and prosthetics. (2 lecture, 3 lab)

PTHT 7255 Care Delivery and Practice Management Issues – Exploration of issues facing autonomous practitioners including strategic planning, financial management, personnel management, resource management, marketing strategies, legal considerations for health care delivery, conflict resolution and clinical negotiation. (2 lecture)

**Summer Semester, 2nd Year**

PTHT 7961 Professional Experience II – The second of three clinical experiences; consists of 11 weeks of full-time supervised clinical practice; emphasizes progressing integration and application of learned physical therapy skills, knowledge and behaviors in a patient care environment. (440 clinical hours)

PTHT 7162 Wellness and Health Promotion – Exploration of fitness, wellness, and health promotion strategies in physical therapy; includes discussion of physical activity, nutrition, medical and complementary approaches to wellness, and risk factor/behavior modification; exploration of attitudes toward health, wellness, and disability and their impact on patient care. (1 lecture/online)

PTHT 7191 Special Topics - A course designed to permit the offering of topics of current interest in physical therapy. Students will select two topics- 1 credit each. Prerequisite: permission of DPT faculty advisor. (1 lecture) NOTE: Special Topics courses may be taken during Summer or Fall semesters during the last year of the program.

**Fall Semester, 3rd Year**

PTHT 7971 Professional Experience III – The last of three clinical experiences; consists of 11 weeks of full-time supervised clinical practice; emphasizes development of entry-level physical therapy skills, knowledge and behaviors in a patient care environment. (440 clinical hours)

PTHT 7172 Professional Seminar – Focus on the culmination of student clinical and professional development; preparation for licensure examination and graduate clinical practice; discussion of issues related to maintaining and expanding professional competence in physical therapy practice. (1 lecture)
Additional Curriculum Components

Service Learning/Cru Community Clinic

Service learning involves learning activities that combine traditional teaching and learning with meaningful community service. Service learning is an integral part of the DPT curriculum, and students will have several opportunities to complete service learning activities during the program in selected courses. Students will also provide supervised patient care at the university’s pro bono Cru Community clinic (https://go.umhb.edu/health-sciences/cru-community-clinic).

Interprofessional Education

Interprofessional education (IPE) is an experience that “occurs when students from two or more professions learn about, from, and with each other” (World Health Organization, 2010). The IPE curriculum at UMHB incorporates values/ethics, roles/responsibilities, interprofessional communication, and teams/teamwork. In addition, the IPE curriculum utilizes TeamSTEPPS® to provide a framework of tools to facilitate communication and teamwork skills in health care professional students. Students in the DPT program must complete the IPE core curriculum and at least 2 IPE elective experiences.

Research Project

Critical inquiry is an important aspect of physical therapy practice, and students will be required to complete a series of courses and a research project. Students will learn the basics of research methods as well as the importance of critical inquiry to current physical therapy practice during PHTH 7126 – Evidence Based Practice. Students will also develop ideas for a research project in collaboration with faculty members. Students will complete a series of 3 Critical Inquiry courses that will culminate with a presentation of a research project during the last semester. The purpose of the research project is to familiarize students with clinical research and instill in them a desire to participate in critical inquiry as clinicians.

Comprehensive Examinations

Students will complete the first comprehensive examination after the first 3 semesters of the program. This examination serves as a formative assessment of the student’s retention of first year foundational information. Feedback from this examination will be provided to the student to identify areas of needed focus for review in order to facilitate learning through the remainder of the program.

During the 5th semester of study, students will complete another comprehensive examination using the Practice Exam and Assessment Tool (PEAT). The purpose of this examination is to establish a baseline of the student’s level of preparation for the National Physical Therapy Examination and to familiarize students with the format and difficulty level of the licensure examination. Students who do not meet the program’s expected score on the comprehensive examination or specific sections of the examination will be required to create a guided study plan in collaboration with their faculty advisor. The guided study plan will be related to areas of deficiency identified by performance on the comprehensive examination. The student and advisor will select the specific activities that must be completed prior to graduation. In order to graduate, the student must complete the selected activities.
NOTE: This section is provided to clinical facilities so clinical faculty may be informed of the DPT Program general policies for students.

**Employment While Participating in the DPT Program**

Enrollment in the physical therapy program is a full-time commitment, and employment during the academic year is not recommended. If a student chooses to be employed while enrolled in the program, academic attendance, performance and participation standards will not be altered to accommodate employment. Students should be aware that the physical therapy program may occasionally require evening or weekend classes and activities.

A student who is employed as a physical therapy aide or technician must be aware that during the course of that employment, he/she is not acting in any capacity as a UMHB physical therapy student. A student may not wear a name tag or any other item identifying him/her as a UMHB physical therapy student while on duty at their place of employment.

*If a clinical facility wishes to employ a DPT student who is currently participating in a clinical experience, please contact the DPT Director of Clinical Education or Assistant Director of Clinical Education.*

**Background Check**

All incoming students must have a background check, which includes records of criminal activities and other items that may warrant further review, prior to first semester enrollment. The background check must also be conducted prior to beginning full-time clinical experiences in the second year of the program and may be required for specific clinical facilities. Enrollment and continued status in the DPT program are contingent upon satisfactorily passing all criminal background checks. Students will be responsible for the costs of background checks.

**Liability Insurance**

Student professional liability insurance is provided by the University at no additional cost to the student. The insurance will cover students during assigned clinical experiences as part of required UMHB DPT program academic coursework. The insurance does not cover activities outside of enrollment or a course requirement, such as other volunteer or work activities.

**APTA Membership**

Each student is required to join and maintain membership in the American Physical Therapy Association throughout the program. Students are also strongly encouraged to join an APTA Section in an area of interest (student costs for sections range from $0 - $50). Membership in the APTA provides students with access to publications, meetings, and other professional activities. Membership in a professional association is an important part of professional development.
Health and Training Policies

The DPT Program is both academic and experiential. Therefore, throughout the entire course of the program, students must demonstrate more than cognitive abilities. Areas of student evaluation include freedom from physical and mental health problems that, even with reasonable accommodation, would interfere with occupational functioning. Upon receiving an offer of admission, DPT students must complete the Essential Functions Statement to demonstrate physical, mental and emotional qualifications sufficient, with or without reasonable accommodation, to meet the academic and technical requirements of the physical therapy profession.

The purpose of the following health policies is to protect the student in the classroom and clinical setting as well as to protect the clients with whom the DPT Program student will be working.

*Note: No student will be allowed to start a full-time clinical experience unless he/she has presented satisfactory proof of current CPR training and required vaccinations.*

Immunizations

The program requires that all students maintain immunizations as required by state law and as recommended by the CDC for healthcare workers. Therefore, all DPT students must submit proof of completed immunizations or titers as applicable prior to program orientation, and must update verification (a) prior to participation in clinical education experiences, and (b) as requested thereafter during enrollment in the program.

The university assumes no responsibility for the effectiveness, contraindications, or adverse effects of required vaccinations. Always consult your own healthcare provider if you have questions about vaccinations.

<table>
<thead>
<tr>
<th>REQUIRED:</th>
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<tbody>
<tr>
<td>Measles (rubeola), Mumps, Rubella (German Measles)</td>
<td>Proof of 2 dose MMR vaccination OR positive antibody titer</td>
</tr>
<tr>
<td>Chicken Pox (Varicella)</td>
<td>Proof of 2 dose varicella vaccination OR positive antibody titer</td>
</tr>
<tr>
<td>Tetanus/Diphtheria (Tdap/Td)</td>
<td>A minimum of one dose of <em>tetanus/diphtheria/pertussis</em> vaccine (Tdap) is required. In addition, one dose of a tetanus-containing vaccine must have been received within the last 10 years. Td vaccine is acceptable substitute if Tdap is medically contraindicated.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Positive antibody titer; if student does not have immunity, the student is required to obtain a two-dose or three-dose Hepatitis B vaccination series, with a repeat titer 1-2 months later.</td>
</tr>
<tr>
<td>Meningococcal</td>
<td><em>MPSV</em> or <em>MCV4</em>. As of January 1, 2014, the State of Texas requires all first-time students (or transfer students if 21 years or younger) to obtain the meningitis vaccine or booster within five years prior to a student’s admission date.</td>
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<table>
<thead>
<tr>
<th>RECOMMENDED:</th>
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<tbody>
<tr>
<td>Hepatitis A</td>
<td>Two doses are recommended.</td>
</tr>
<tr>
<td>Influenza</td>
<td>UMHB does not require the flu vaccine; however, the Human Anatomy Lab is located at Baylor Scott &amp; White Health (BSWH) Temple campus, and BSWH does require it. In order to participate in Human Anatomy Lab, students must meet this requirement.</td>
</tr>
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<tr>
<td>COVID-19</td>
<td>UMHB does not currently require the COVID-19 vaccine; however, it is required by BSWH for participation in the Human Anatomy Lab, located at Baylor Scott &amp; White Health (BSWH) Temple campus. In order to participate in Human Anatomy Lab, students must meet this requirement. Specific information will be sent to each student regarding timelines. This vaccine may be required by other facilities that host our DPT students for internships.</td>
</tr>
</tbody>
</table>

**Tuberculosis Screening**

All students must be screened for tuberculosis (TB) before beginning clinical experiences. The student upon admission to the DPT Program will provide evidence of a negative TB skin test or a negative chest x-ray if the skin test is positive. The student having a negative TB skin test upon admission to the program must complete a two-step TB skin test (a) within 60 days prior to the start of the first clinical rotation, (b) annually, and if applicable (c) immediately and incrementally following any known exposure, as indicated by the health department.

The student who has had a negative skin test and converts to positive will be referred to the Bell County Health Department or his/her private physician for follow-up care. The student must contact the university’s Student Disability Services office regarding any follow-up care, and evidence of a negative chest x-ray must be provided to the Disability Services Office within 30 days of the positive skin test or as indicated by the health department.

The student having a documented positive TB skin test upon admission or at any point during the time enrolled in the program, must provide the program with evidence of a negative chest x-ray taken within the last 2 years. Negative chest x-rays more than 2 years old must be repeated. Students with a positive TB skin test must complete a Texas Department of State Health Services (TDSHS) symptom questionnaire annually.

**Health Care Provider CPR/AED Training**

The student must have successfully completed Healthcare Provider CPR instruction. Documentation of current CPR course completion must be on file in EXXAT prior to program orientation. The DPT Program requires Healthcare Provider CPR to be renewed before the beginning of the semester if the renewal date expires anytime during the current semester. Failure to provide this documentation before the semester starts means that the student will not be allowed to register.

**Changes in Health Status**

Any currently enrolled DPT student who has a change in his or her health status (other than a minor temporary condition) that may impact the student’s ability to perform required activities as outlined in the DPT Program’s Essential Functions form must promptly contact the university’s Student Disability Services office to discuss options and possible accommodations.

**Affiliated Clinical Facility Requirements**
Various clinical facilities affiliated with the DPT Program may have specific requirements which must be met before students are permitted to care for clients within the given facility. Because requirements are agency specific and are subject to frequent change, more detailed information will be provided in individual course syllabi and/or by the clinical facility (prior to the start of clinical experiences when possible). This section outlines the student’s responsibility for the minimal requirements. Clinical facilities may have other requirements that are not listed below.

1. **DRUG SCREENING** – All students must successfully complete a negative drug screening prior to beginning clinical experiences. Testing location and other information will be provided prior to the testing time period. The Mayborn College of Health Sciences drug and alcohol policy is located in Appendix B.

2. **CERTIFICATION REGARDING SUBSTANCE ABUSE** – Students admitted to clinical experiences may be asked by a clinical facility to certify in writing that they are not engaging in any substance abuse behaviors. The student’s signature will acknowledge that in “for cause” situations, the facility may require the student to submit to additional drug screening. The refusal to sign this acknowledgement will result in the student being denied access to the clinical facilities that require this acknowledgement.

### Essential Functions (Technical Standards)

Physical therapy is a demanding profession that requires a wide range of cognitive, sensorimotor, communication, and behavioral skills. A physical therapist is expected to independently perform all aspects of the physical therapy role. Core segments of the program include clinical experiences in which the student will be required to participate in and demonstrate proficiency in providing therapeutic services. Graduates of the UMHB DPT program who pass the licensure examination will be prepared to enter practice in a variety of settings and perform all responsibilities of the professional role. Based upon the expectations and requirements of the profession, this Essential Functions Statement includes a list of essential functions/skills that must be met for entry into and progression through the program.

The list of skills is illustrative and does not represent an all-inclusive listing of the functions of a physical therapist. Reasonable accommodations may be requested to enable an individual with disabilities to achieve these essential functions. The Essential Functions Statement is included in Appendix C.

### Faculty as Student Healthcare Providers

Any individual who is in any capacity as faculty (academic, clinical, adjunct, CI, guest lecturer, or other paid or unpaid status) must not act as healthcare providers for the program students except as a basic responder in an emergency situation. Students are to be directed to their primary care provider, emergency department, or other health care provider.

### Students With Special Needs (Disability Accommodations)

The UMHB Student Handbook and website provide specific information for students with special needs. Students who are otherwise qualified for a university program or course and who desire accommodation(s)
for a disabling condition are responsible for providing acceptable documentation in a timely manner prior to the period of stated need. Contact:

Disability Services  
UMHB Box 8437  
900 College Street  
Belton, Texas 76513  
Office: (254) 295-4731  
Email: disabilityservices@umhb.edu

Students who have been granted disability accommodations by UMHB that are also needed for a clinical setting must present an approved UMHB Letter of Accommodation to the clinical facility. Students should be aware that many clinical facilities may not be able to provide the same accommodations for student clinical experiences that have been provided by UMHB for the academic portion of the DPT program. Students should promptly contact the Student Disability Services office directly to discuss any issues or concerns with a clinical facilities’ ability to implement student accommodations granted by UMHB or if a student requires different accommodations for the clinical experience.

**Student Expectations**

Students in the DPT program are expected to demonstrate consistent professional and ethical conduct, attend all classes/clinical experiences punctually, participate in all laboratory and additional learning experiences, and complete/submit all assignments on time. Students will abide by the policies of the university, the graduate school, and the program.

Each student is responsible for reading all materials distributed electronically to his/her UMHB student email address or through Canvas notifications/announcements. This will be the principal means of communication regarding program information. The university expects that every student will receive e-mail at his or her university email address and will read email on a frequent and consistent basis. A student’s failure to receive and read university communications in a timely manner does not absolve that student from knowing and complying with the contents of such communications.

Students will practice various therapeutic techniques in the course of required lab and, occasionally, lecture or classroom courses. In order to provide students both a complete perspective on various therapies and the opportunity to learn specific skills, students are expected to practice physical therapy techniques on one another. Any required participation in such exercises will be under the supervision of university faculty, instructors, or clinicians. A student who is uncomfortable with any classroom or lab exercise should discuss his or her concern with the instructor or DPT Program Director.

**Professional Behaviors**

Professionalism is the conduct or qualities that characterize a profession or a professional person. Students in the DPT program must learn the professional behaviors that are required to be a competent and caring practitioner, in addition to academic knowledge and psychomotor skills. The Normative Model of Physical Therapist Professional Education states that behavior is equal in importance to knowledge and skill for a clinician. The professional behaviors development process begins upon matriculation into the DPT
program, continues through graduation, and provides the foundation for exemplary career professionalism. Examples of expected professional behaviors for students include, but are not limited to, integrity, accountability, respectful consideration for others, punctuality, active participation in educational activities, personal and academic preparedness, contributing to a positive environment within and outside of the classroom, and professional appearance. Program faculty clearly communicate expectations to students through written materials and verbal instruction, and students will be evaluated and graded on their professionalism in both academic and clinical courses.

**Professional Appearance**

**Dress Code**

Students are required to dress in a manner that maintains the image of a professional physical therapist while in the clinical setting. The trunk region should be covered at all times and in all body positions in clinical situations. As representatives of UMHB, students should be guided by professionalism, modesty, and good taste in choice of attire each day. Students are prohibited from wearing clothing or exhibit any tattoo that displays sexually suggestive materials or advocates alcohol, drug use, profanity, tobacco, racism or other concepts in conflict with the University's Christian principles. Students are to follow specific guidelines for professional dress as determined by their assigned clinical facility.

**Personal Appearance and Habits**

Students are expected to demonstrate exemplary grooming and hygiene. Students will abide by the following guidelines at all times:

1. Hair must be neatly groomed or styled; extreme hairstyles or colors are not acceptable. Long hair should be tied back to avoid interference with lab or patient care activities.
2. Fingernails must be clean, well-maintained, and trimmed. Fingernails should not extend beyond the tip of the finger.
3. Beards must be well-maintained and neatly trimmed. Beards may interfere with the proper use of certain required safety equipment, such as particulate respirator masks.
4. Facial make-up should be professional. No body odors (including smoke) should be detectable.
5. Perfumes, colognes, and aftershaves should be used sparingly or not at all.
6. Jewelry piercings other than in the ears is prohibited during academic and clinical activities. Earrings are limited to no more than 2 per ear, and long earrings may not be worn. Any jewelry that might interfere with patient simulation or patient care should be avoided.
7. Students are not to eat/drink/chew gum while in clinical or laboratory settings.

**Use of Personal Technology**

Use of personal technology devices for anything other than academic purposes in the classroom, lab, or clinical setting during instructional or patient care time is prohibited. Students must refrain from using cell phones, tablets, laptops and similar devices for non-educational purposes (i.e. messaging, games, email, web browsing) during class and clinical time. A faculty member may instruct the student to put the device away or may direct the student to leave the classroom. The faculty member may choose the action deemed
most appropriate for the situation.
If a student is expecting an emergency phone call, the student must notify the faculty member prior to the beginning of class or clinical time. The student must step outside of the room before answering an emergency phone call, or wait until a more appropriate time to return the call.

Social Media
Students should refer to the UMHB Student Handbook policy on the use of social media. Students in the Doctor of Physical Therapy program are expected to exercise discretion in the use of social media and respect the professional reputation of the student, faculty, and program. Students are not permitted to post any course related materials on any public website or social media or send such materials to another person within or outside of the DPT program (e.g. students in the same or different cohort, clinical instructors, friends). Course materials include, but are not limited to, photos/videos of instructor lectures or demonstrations; photos/videos of faculty, students, volunteers or others during any type of learning activity; homework assignments, quizzes, or examinations; any materials related to research projects. Discussion of tests and other course assessment techniques through these types of venues is also prohibited. Students who violate academic integrity standards through social media will be subject to appropriate sanctions under the Academic Integrity policy.

Violation of Program Policy
Students who violate DPT program policies, rules and procedures will be subject to sanctions, remediation, dismissal from a clinical facility, and program dismissal.
Incidents of student misconduct as outlined in the UMHB Student Handbook will also be referred to the UMHB Dean of Students.

Human Subjects/Volunteers in Program Activities
Policies regarding patient/client rights within the clinical setting are established by that institution, and should allow the clients to refuse to participate in clinical education.
Philosophy of Clinical Education
The UMHB DPT program considers Clinical Education to be an essential part of the curriculum and overall development of the student physical therapist (SPT). It is the program’s desire to work with clinical faculty and facilities to provide clinical education opportunities that support the mission of our program. Clinical education provides each student with the opportunity to shape and develop their patient care skills in an active treatment environment under the guidance of practicing clinicians. Through the integration of scientific background knowledge, problem solving, communication and interpersonal skills, students learn to make professional decisions regarding physical therapy. Students learn to develop their professional judgment and application of critical thinking within a nurturing environment that provides them the opportunity to seek advice from practicing clinicians.

Arrangement of Clinical Experiences
In preparation for clinical practicum experiences, students are exposed to the clinical setting through the Cru Community Clinic on campus. Students begin in the clinic during the 1st semester in the program, where they observe second-year students providing patient care under faculty supervision. Beginning in the 2nd semester of the program, students begin to work with clinic patients with gradually increasing patient care responsibilities over the next 3 semesters.

The clinical practicum experiences are 32 weeks in total. The initial clinical rotation is a part-time experience of 80 hours and will take place during the fourth semester of the program. The primary intent of this rotation is to provide the student with an opportunity to begin to experience the clinical setting with the knowledge and skills they have obtained during their first year in the program. The 3 full-time clinical experiences are respectively 8, 11, and 11 weeks in length. They occur after the majority of the didactic curriculum is complete. Patient management courses are completed prior to the final 3 clinical placements. The program requires each student to complete one outpatient and one inpatient full-time clinical placement.

The student physical therapist will have successfully completed the outlined curriculum below prior to beginning the respective clinical experiences. Syllabi for each clinical experience are located in Appendix A.

<table>
<thead>
<tr>
<th>Clinical Rotation</th>
<th>Prerequisite UMHB DPT Curriculum</th>
</tr>
</thead>
</table>
| PHTH 7136 Clinical Practicum (2 weeks – 80 hours) | PHTH 7711 Human Anatomy  
PHTH 7412 Functional Anatomy  
PHTH 7313 Applied Physiology I  
PHTH 7314 Introduction to Patient Management  
PHTH 7126 Evidence Based Practice  
PHTH 7115 Introduction to Professional Practice  
PHTH 7137 Critical Inquiry I  
PHTH 7421 Clinical Neuroscience  
PHTH 7422 Therapeutic Interventions  
PHTH 7423 Applied Physiology II |
Clinical Facility Criteria

Clinical facilities will be determined and retained by their delivery of high-quality patient care services, sensitivity to student needs, reliable acceptance of students for clinical education experiences and regular and timely communication with the UMHB DPT Program. Clinical facilities in geographically appropriate areas and clinical sites that provide distinctive opportunities for students to practice in specialized areas of physical therapy will be developed when such additions will enhance student opportunities. The program aim is to assure that each student is exposed to a variety of high-quality clinical settings; therefore, it is imperative to retain clinical experience sites that have historically provided outstanding clinical education opportunities.

Clinical Facility Considerations

1. Facility must hold appropriate licensure and accreditation by local, state, or federal entities.
2. Staffing must be adequate for the patient load and types of disabilities encountered.
3. Types and numbers of patients are adequate to meet the general or specific needs of the students.
4. Administration’s attitude toward clinical education, inclusive of recognition of the time and effort required by the staff, promotes the clinical education program.
5. Atmosphere is conducive to learning as demonstrated through the availability of supervision, space, equipment, and educational resources.
6. Facility demonstrates incorporation of physical therapy with other services in the facility.
7. Personnel policies encourage continuing education and staff willingness to participate with clinical education.

8. Facility must be able to establish a written clinical affiliation agreement with the UMHB DPT Program.

The Clinical Affiliation Agreement

The Clinical Affiliation Agreement is the contract between the academic program and clinical facility. It details the responsibilities of UMHB DPT Program, the DCE/ADCE, the Facility and its staff, as well as the student, related to Clinical Education. A facility cannot be used unless an executed clinical affiliation agreement is on file and current.

Establishing a Clinical Education Site

Students may propose clinical facilities to be considered for potential addition to existing clinical education sites. The acquisition must be based on the needs of the clinical education program as a whole. Students wishing to suggest a site should speak to the DCE, ADCE, or other designated faculty member. The student should provide the information necessary on the Proposed Clinical Facility Information Form (Appendix D). Ideally, the facility should be located within central Texas and/or in close proximity to previously established active clinical facilities. The clinical facility must meet the clinical facility criteria previously listed. Final decisions regarding the use of clinical facilities for student clinical experiences are at the sole discretion of the university.

Steps for Initiating Potential Clinical Education Sites

To initiate the process for attaining new clinical facilities, students are to speak with the DCE or ADCE. Upon approval, the student may contact the site, ask for the appropriate contact information for the SCCE or rehab director/owner if the SCCE is not available or the site does not have a designated SCCE. The Proposed Clinical Facility Information Form (Appendix D) should be used to document the site information and appropriate contact information. This form should be given to the DCE or ADCE.

The DCE or ADCE will contact the SCCE/Rehab director to learn more about the site and to discuss how to proceed. Sites should be willing to accept future UMHB students, not just the student making the request. The DCE or ADCE will collect information necessary to determine if the site is a good match for the DPT Program and its students. If the site is a good match, a standard UMHB clinical facility agreement will be sent to the SCCE. If the agreement is acceptable, it is signed and returned to UMHB. If the facility requires changes to the agreement or has its own agreement, the amended agreement may require additional review by UMHB’s legal department prior to signing.

Program Responsibilities to the Clinical Facility

1. Assure that all students selected for participation in the Program have satisfactorily completed all portions of the University’s curriculum that are a prerequisite for participation in the Program.

2. Develop criteria for the evaluation of the performance of University students participating in the Program and provide those criteria, with appropriate reporting forms, to the Facility personnel and University personnel who are responsible for supervising those students.

3. Assign grades to students participating in the Program.
4. Inform all University students and personnel participating in the Program that they are required to comply with the rules and regulations of the Facility while on the premises of the Facility and comply with the requirements of Federal and State laws and regulations related to Facility, including without limitation, privacy laws.

5. Provide information requested by Facility related to students participating in the Program unless prohibited by Federal or State law. The University shall provide the Facility with name(s) of each student assigned to the Facility, as well as scheduled assignment dates (to be agreed upon by University and Facility).

6. Assign a faculty representative to coordinate the Program activities at the Facility, in collaboration with the Facility.

7. Provide the Facility with the current curriculum, clinical experience period and dates, course objectives, and syllabus of the Program, as well as all forms regarding students’ clinical experience and instructions for completion of these forms, if applicable.

8. Maintain a commercial general liability insurance policy and a professional liability insurance policy each in the amounts of $1,000,000 each occurrence and $3,000,000 in the annual aggregate for its personnel and students who participate in the activities of the Program.

9. Other responsibilities may be specified in the fully executed affiliation agreement between the Program and Facility. It is each entity’s responsibility to adhere to specific requirements.

**Responsibilities of Clinical Faculty**

The UMHB DPT Affiliation Agreement outlines the responsibilities for each entity involved in the clinical education experience. Below are specific expectations of the Site Coordinator of Clinical Education (SCCE) or designated individual, and the Clinical Instructor (CI). The clinical education site will designate one member of the professional physical therapy staff to serve as the SCCE or fulfill the SCCE responsibilities. The SCCE is responsible for assigning a specific CI for each PT student.

**SUPERVISION GUIDELINES & MODELS:** UMHB DPT program supports planned and strategic clinical experiences applicable for the level of knowledge, previous clinical experience and learning style of each student. Weekly objectives agreed upon by the student and CI assist with formative evaluation, tracking progress and can be adjusted as needed. Consistent constructive and affirmative feedback strengthen student learning and help clarify CI expectations. UMHB will provide information, forms and tools for use during the clinical experience to help streamline expectations.

UMHB believes each facility, SCCE and CI should explore use of a variety of models to meet the students’ and site expectations for clinical education. While most students work 1 to 1 with a CI, alternative models may include 1 CI to 2 or more students, 2 part-time CIs to 1 student, or the use of PT residents and fellows to assist the CI in working with students. A student may also rotate between 2 services at the same facility, such as pediatric and adult.

**SCCE (or designated individual) Responsibilities**

1. Maintain files containing curriculum content, insurance forms, physical forms and contract information for the UMHB DPT program.
2. Remain current with changes and trends in clinical education, and ensure that clinical faculty take advantage of courses and seminars offered by affiliated programs.

3. Ensure that each therapist chosen as a Clinical Instructor (CI) meets the minimum requirements, which include:
   a. holding current licensure in the state in which employed
   b. employment as a licensed physical therapist for one year
   c. evidence of active participation in formal and/or informal continued education, and
   d. demonstrated ability to communicate strengths and weaknesses, both orally and in writing.

4. Respond in a timely manner to requests for student placement and confirmation of student placements. For multi-site facilities, maintain communication with the various sites to determine appropriate assignment of students.

5. Provide regularly updated information about the facility to the DCE or ADCE; revise CSIF as needed (Appendix E) to keep information accurate and current.

6. Ensure that each PT student receives an orientation to the facility, including facility policies and procedures relevant to student training, prior to the student participating in patient care.

7. Ensure that students receive communication from the facility at least 2 weeks prior to the clinical experience.

8. Request any additional student records other than TB skin test and Hepatitis B vaccine (such as MMR, physical exam, background checks, CPR, etc.) from the student, DCE, or ADCE.

**CI Responsibilities**

1. Complete free online webinar about utilizing the CPI, which is available through the APTA (instructions in Appendix F). Upon successful completion, the CI will receive 2 hours of continuing education through the APTA. This does not need to be repeated when supervising subsequent students. The CPI is used only during fulltime clinical experiences.

2. Organize and plan the student’s program to include clinical work, in-services, clinics, rounds, and other learning experiences as available:
   a. Establish a client caseload and assist in formulating the student’s schedule.
   b. Introduce students as such to patients/clients and provide access to pertinent background information.
   c. Assure that individual patients have the opportunity to opt-out of the clinical education experience.

3. Provide appropriate supervision for each student and arrange for supervisory coverage by another PT during any CI absence.

4. Deliver clinical supervision and instruction in the form of assessment and intervention demonstration utilizing hands-on techniques.
5. Provide quality learning experiences in the areas of patient care, research, and administration. Become familiar with the student’s curriculum and level of education/training by reviewing information provided by the academic institution prior to the student’s arrival. (see Appendix G – J for more detail)

6. Discuss the clinical education goals and expectations of the student for the facility including those of the academic institution. Introduce student to forms and procedures of the physical therapy facility.

7. Offer an advantageous learning environment that encourages the student to ask questions and share insights. Provide opportunities for student demonstration of his/her level of understanding of the theoretical concepts underlying the interventions. Provide timely feedback through constructive criticisms and guidance for improvement. Although not required, written feedback to the student beyond the use of the CPI at midterm and final is strongly encouraged, especially for students who are experiencing difficulty.

8. Review and discuss the student’s examination and intervention techniques, treatment rationale, long-term and short-term objectives. Constructively review documentation of examinations, consultations, progress/daily notes and justifications for insurance coverage of recommended equipment.

9. If a student experiences academic difficulty during a clinical experience, the SCCE, CI, and DCE or ADCE will collaborate to develop a learning contract or remediation plan.

10. Perform midterm and final summative evaluations of the student’s performance utilizing the CPI for fulltime clinical rotations. Encourage open and authentic communication with the student in reviewing the evaluations and comparing it to the student’s self-evaluation (see Appendix H for CI instructions, Appendix I for definitions of rating anchors).

11. Communicate with the DCE or ADCE at UMHB during the midterm visit or as needed (Appendix J). Provide specific feedback to DCE, ADCE or faculty about the student’s performance, and include feedback about perceived strengths and weaknesses of the academic program concerning clinical education.

12. Submit the completed CPI or other student performance assessment tool to the DCE or ADCE at UMHB at the conclusion of the clinical experience.

Rights and Privileges of Clinical Faculty

Clinical faculty members of the UMHB physical therapy program have the following rights and privileges associated with their voluntary participation in PT clinical education:

1. Continuing Education or Competency Units (CCUs): Approved by the state of Texas for CIs of full-time clinical rotations as follows:
   a. 5 CCUs for 6-11 weeks of one full-time clinical experience (240 - 440 hours)
   b. 10 CCUs for 12 weeks or longer of one full-time clinical experience (480+ hours)
   c. Maximum of 10 CCUs for PTs per renewal period. Contact DCE for more information.
2. In-Service Presentations: The Director of Clinical Education or other faculty may provide in-service presentations on site at clinical education sites (when mutually appropriate) for clinical instructor development.

3. Clinical Instructor Presentations and Training: The UMHB DPT Program will host clinical instructor workshops at the university periodically for clinical instructor development. Such courses will provide continuing education for those clinicians serving as clinical instructors.

4. Consultation in planning and implementing clinical experiences.

5. Student-led in-services or special projects on a topic agreed upon by the CI to meet the needs of the affiliating site.

6. Potential opportunity to serve on the DPT Advisory Committee and/or DPT admissions interviews.

7. Potential consultation and/or collaboration with UMHB DPT faculty members on research projects.

8. Potential requests to participate in labs and lectures in the curriculum.

Texas Consortium for Physical Therapy Clinical Education

The University of Mary Hardin-Baylor DPT Program is a member of the Texas Consortium for Physical Therapy Clinical Education. The primary purpose of this group is to coordinate all aspects of physical therapy clinical education in Texas. The Consortium functions with the financial support from the participating Universities. The Consortium has reduced the time, effort and cost of maintaining quality clinical education for the state’s physical therapy students. In addition, The Consortium provides continuing education opportunities and training workshops for Clinical Instructors as well as SCCE and DCEs/ADCEs from all parts of the nation.

Texas Consortium Awards

Each year the consortium honors several Outstanding Clinical Educators from around the state who are APTA members, have an active contract with at least two Consortium programs and have taken students for 2 or more years. The winners are announced at the TPTA Annual Conference. Sites may nominate themselves for the Exemplary Clinical Education Site award, honoring a department or clinic that has provided outstanding, innovative clinical education experiences for students. Applications will be posted on The Texas Consortium website when applicable.

Clinical Instructor Certification and Credentialing Courses

The Texas Consortium provides continuing education opportunities and training workshops for Clinical Instructors as well as Academic Coordinators of Clinical Education from all parts of the nation. The CI Certification Course consists of two parts: Part I is a six-hour online course and Part II is a half-day onsite/virtual course. CCUs are given. Part I must be completed prior to taking Part II. CI Certification courses are given throughout the state each year and at TPTA Annual Conference. To check on upcoming courses or to register for a course, see The Texas Consortium website, www.TexasConsortium.org.

The American Physical Therapy Association also provides a 2-day, CI Credentialing course called the Credentialed Clinical Instructor Program (CCIP) and a subsequent Advanced CI course. UMHB DPT program will periodically host a credentialing course for the CIs/SCCEs affiliated with our clinical education program.
The Student Physical Therapist

Definition of Student Physical Therapist (SPT)

A student physical therapist is a graduate-level learner who participates in clinical education to practice what he or she has learned in the Doctor of Physical Therapy Program. The student physical therapist is required to introduce him/herself as a student and sign all documentation with the designation of SPT during clinical rotations. A patient has the right to refuse treatment by an SPT and/or participation in clinical education practices.

Selection of Clinical Experience/Practicum

Students complete a comprehensive survey to provide information on their clinical preferences. The DCE, ADCE, or designated faculty is responsible for assigning the clinical placements and will use the available requests, student interests, and curriculum design to determine the assignments. Clinical sites that offer first come first serve slots will potentially be assigned as needed by the DCE or ADCE.

Rescheduling a Clinical Experience

In the event a student is unable to begin an arranged clinical experience, the student must submit a written request to the DCE, ADCE or designated faculty, along with proper documentation, prior to the starting date to request rescheduling of the rotation. Rescheduling of the postponed rotation will be at the discretion of the DCE, ADCE or designated faculty and potentially the clinical facility. Assurance of the same clinical placement is not feasible if rescheduling occurs.

Student Responsibilities Prior to Clinical Experiences

1. INTRODUCTION LETTER: The student is responsible for sending a letter or email of introduction to the clinical facility prior to start date.

2. STUDENT PROFILE: The student is responsible for the completion of a Student Profile, which is part of the online database system used by UMHB DPT Clinical Education. The Student Profile seeks to give the prospective CI additional information about the student, which may not be apparent in the letter of introduction.

3. CLINIC CONTACT: The student is responsible for completing a telephone or email contact with the designated individual at the assigned clinical facility two to four weeks prior to their scheduled arrival at the site.

4. STUDENT GOALS: The student is responsible for the development of a list of personal and professional goals prior to each clinical experience, and the student is encouraged to share this with their CI. The purpose of this assignment is to have the student reflectively review his/her clinical education needs and take an active role in determining objectives for each clinical experience related to individual professional goals.

Prerequisites for Participation in Clinical Education

(including Health and Wellness Requirements)

1. ACADEMIC PERFORMANCE: Students must have earned a grade of C or higher in all physical therapy coursework. Any student on academic probation due to an overall GPA below a 3.0 may not enroll in a full-time clinical education experience.
2. **REGISTRATION**: Students must be officially registered for clinical education courses before they can begin a clinical education experience/practicum. Each student's name must appear on the class roster in order to begin the clinical experience/practicum.

3. **INFORMATION ABOUT CLINICAL EDUCATION SITES**: The DCE/ADCE or designated faculty will inform students of the location of information related to each clinical facility. Students should review available information related to their assigned clinical site. It is the student’s responsibility to respond to any specific request made by the facility that has been approved by the program. If a student has not been contacted by their CI or the facility 2 weeks prior to the clinical experience, the student should contact the facility or CI and notify the DCE/ADCE.

4. **REQUIRED PAPERWORK/TESTING**: The student must meet immunization and other requirements of the school and clinical facility as set by the clinical affiliation agreement. Students will undergo a criminal background check at companies/providers approved by UMHB prior to their first semester in the program and prior to the 1st clinical experience at the student’s expense. In addition, students will undergo a drug screen at companies/providers approved by UMHB prior to their first clinical practicum at the program’s expense. If a clinical facility for a later clinical experience requires a more recent criminal background check or drug screen, the student is responsible for the cost of providing these to the clinical facility, with a copy provided to the DPT Program Director.
   a. Proof of health insurance (if required by clinical facility), biographical data forms, current CPR certification, and results of current TB tests must be submitted by the date assigned by the DCE, ADCE or designated faculty.
   b. Up-to-date immunizations (see chart pages 16).
   c. Both CPR certification and TB tests must be current through the final day of the clinical experience or internship.

5. **HIPAA AND OSHA TRAINING**: Students are required to complete training on OSHA, Universal Precautions, Blood Borne Pathogens, body mechanics and HIPAA regulations. This will be scheduled for DPT students prior to clinical placements.
   a. Students failing to complete the scheduled training will be required to provide evidence of completion of alternative training.
   b. Students who do not complete or provide documentation of appropriate training will not be eligible to attend their next clinical experience.

**NOTE**: The DCE, ADCE or designated faculty member may cancel a student’s placement at a clinical facility if the student fails to submit all the required documentation in a timely manner.

**Background, Health and Wellness Requirements for Students**
(See also Health and Training Policies section of this manual for immunization requirements)

<table>
<thead>
<tr>
<th>Background Check</th>
<th>Completed prior to entrance to program, prior to 1st clinical, and any site-specific requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Screen</td>
<td>Completed prior to 1st clinical and any site-specific requirement</td>
</tr>
<tr>
<td>CPR Certification</td>
<td>Must be current through end of clinical rotation</td>
</tr>
</tbody>
</table>
### HIPAA Training

1st year courses

### Blood-Borne Pathogens Training

1st year courses

### OSHA Training

1st year courses

### Liability Insurance

Provided by UMHB

### Proof of Medical Insurance

Only if required by the clinical facility, HIGHLY RECOMMENDED

**NOTE:** If a clinical facility has other specific requirements regarding background, health/wellness and immunizations, the student will be provided with that information by the Program and is responsible for being in full compliance with those requirements.

**Student Responsibilities during Clinical Experiences**

The following are requirements for the students during the clinical experience. This list is not inclusive and subject to change.

1. **STUDENT PHYSICAL THERAPIST:** The student must identify him/herself as a “student physical therapist” to any patient with whom he/she is involved in care. The SPT must ensure that the patient understands the patient’s right to decline participation in clinical education practices.

2. **HOUSING & TRAVEL DURING CLINICAL EXPERIENCES:** All arrangements and expenses pertaining to housing and travel during clinical experiences is the responsibility of the student. UMHB DPT program will provide the student(s) with any information available regarding site-specific housing. When possible, student’s preferences are taken into consideration for determining clinical rotation selections but specific selection cannot be guaranteed.

3. **UPDATE SITE AND CI INFORMATION:** The student is to update this information during the first week in the clinic for review by the DCE, ADCE or designated faculty. The update should include the contact information of the CI and student, working hours, department location and dates/times when the CI is not available. This information is used to schedule midterm visits or phone calls. Appropriate signatures may be required by the CI or SCCE at the site.

4. **PERIODIC UPDATES:** Each student will be required to submit scheduled updates or self-assessment of his/her own performance to the DCE, ADCE or designated faculty. The form does not have to be reviewed by the CI. The CI is encouraged to utilize a weekly written feedback tool to increase student accountability and tracking toward predetermined objectives, as well as aiding in early identification of concerns.

5. **CONFIDENTIALITY:** It is the policy of the UMHB DPT Program that all patient information is treated with the appropriate level of confidentiality and adheres to the clinical facility’s policies, which may include appropriate HIPAA regulations. This includes, but is not limited to, information shared during class presentations, labs and lectures. Patient releases should be obtained for images/videos and any information to be used in the academic and/or research setting.

   a. Students are required to abide by the clinical facility’s policy on confidentiality.
b. Students who believe they have witnessed a violation of the patient confidentiality policy should contact their CI/SCCE or the course instructor, depending upon the setting of the incident.

c. The CI/SCCE or course instructor should discuss the situation with the party(s) involved and inform them of the facility’s policy on confidentiality.

d. This discussion should be documented and placed in the appropriate file at the clinical facility and in the clinical education file in the academic setting.

e. If a student on a clinical experience is involved with repeated violations, the CI/SCCE should report the information to the DCE, ADCE or designated faculty member.

f. The DCE, ADCE, or designated faculty member and the CI/SCCE will discuss an appropriate plan of action for repeated violations in the clinical facility.

6. PROFESSIONAL BEHAVIORS: Students are expected to demonstrate professional behavior at all times during clinical experiences. Considerations related to professional behavior include, but are not limited to:

   a. CELL PHONES: Cell phones should be turned off while in the clinical environment and stored away from the patient care areas. If the cell phone is used during a break, it should be turned back off at the end of the break.

   b. SOCIAL MEDIA/TECHNOLOGY: Students should exercise extreme caution when using electronic and social media. Patient or clinical circumstances should not be discussed through these or other inappropriate means.

7. MIDTERM CONFERENCE: The DCE, ADCE or designated faculty member may utilize a variety of methods, including site visit, video teleconferencing, phone call, and/or email communication, to perform periodic and midterm conferencing. The student and the CI will be interviewed about the ongoing clinical experience.

8. STUDENT SELF-ASSESSMENT: All students are required to complete a self-assessment using the Clinical Performance Instrument (CPI) at the midterm and final points of the fulltime clinical experience. Program faculty believe that the practice of self-assessment during clinical experiences will contribute to the development of entry-level physical therapists capable of ongoing and regular self-assessment.

9. STUDENT EVALUATION OF THE CLINICAL FACILITY: The student will complete the APTA’s Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction at the end of the rotation. Students are encouraged to share the information with their CI(s) following the final evaluation. This form affords feedback to the site about the clinical experience and the form also provides information to future UMHB DPT students and the academic faculty about a specific site. The form will only be shared with other students after the approval of the DCE, ADCE or designated faculty member.

10. ATTENDANCE REQUIREMENTS:

   a. Attendance during clinical practicums and professional experiences is mandatory. Absence for any reason must be reported to DCE, ADCE or designated faculty and CI at the facility
prior to time of absence. Throughout the entirety of the clinical education experiences a student will be allowed to miss no more than a total of 5 days for illnesses, emergencies, and unforeseen circumstances. Any additional days missed must be made up during that clinical experience or during a later rotation as determined by the CI/SCCE and DCE/ADCE or designated faculty.

b. When the student cannot attend clinical on a day that it is scheduled, the student must immediately notify the clinical facility as well as the faculty member designated as the course instructor. The student should obtain a telephone number and discuss the procedure of notifying the clinical facility and faculty for unexpected absences. Failure to notify the clinical facility prior to the beginning of the scheduled clinical day is unacceptable and may place the student and clinical placement in jeopardy. The student should notify the course instructor as per the course guidelines. The student should then present the faculty with a plan to complete the lost clinical time within the DPT Program’s rules regarding absence limitations. The student must complete the hours within the prescribed time frame. Failure to complete clinical hours will result in an incomplete for the course. Students are not to share or switch clinical days/times with other students.

c. In the event of inclement weather students are to follow the attendance policies of the facility to which they are assigned. It is expected that students will use their best judgment in regards to their own personal safety.

11. INSURANCE SPECIFIC GUIDELINES: It is the ultimate responsibility of the student to adhere to any student supervision guidelines that may be imposed on the clinical facility by various insurance companies or provider networks. This should be clarified during orientation to the facility or possibly prior to beginning the clinical experience.

**Medicare Guidelines**: Students will likely have clinical experiences at clinical facilities that accept Medicare and are therefore subject to Medicare rules and regulations. Students have been instructed in Medicare regulations during academic coursework regarding the student role under Part A and B. For up-to-date Medicare guidelines, refer to the APTA document: Medicare Guidelines Regarding Student Supervision. It is expected that all Clinical facilities and CIs adhere to appropriate rules and regulations regarding student patient contact. Please contact the DCE, ADCE or designated faculty if you need assistance with clarification on Medicare guidelines.

1) **INCIDENTS AT CLINICAL FACILITY**: DPT Program students involved in any accident or other incident in the clinical facility which could adversely affect patient care should report the incident promptly to the clinical facility and the university faculty member for the course. The faculty member must be informed of any written report for which the student is responsible prior to the student leaving the clinical facility. The student and faculty should also document the incident for the student’s clinical evaluation.

**Basic Problem & Conflict Management between Student and Clinical Facility**

If the student feels that an experience is not meeting expectations and needs, it is the student’s responsibility to take positive action. Each student has the responsibility to seek help in resolving a problem from the CI or the SCCE at the facility, and/or from the DCE, ADCE, or designated faculty. Students
Identification of the problem is the first step in the process, a step that definitely requires considerable thought and objectivity and which may require assistance. Communication is vital.

In the event that the persons involved agree that the conflict cannot be resolved, the student may be removed from the site. The student will be reassigned to another clinical experience site as soon as an appropriate clinical facility can be secured. In this occurrence, a grade of IP (in progress) will be assigned until the student completes the clinical experience at the new clinical facility.

To avoid unnecessary conflicts of interest, students should not participate in clinical experiences at clinical facilities where they have volunteered or worked in the past five years. Students will not be assigned to a clinical facility where a relative is employed within the physical therapy department of that facility.

Steps to Conflict Resolution Between Student and Clinical Facility

Students that perceive a conflict has happened or is developing with a staff person, clinician or CI should proceed in the following suggested manner:

1. **Approach the person** involved and **ask to have a meeting** in private or during office hours.
2. **Come to the meeting prepared** with a list of facts (avoid vague perceptions or opinions).
3. **Be respectful** and **listen**, allow the person to complete their point before commenting.
4. **The meeting should involve forming a plan of action for both parties**. Conflicts may not resolve in one meeting and a certain amount of compromise might be required to come to a successful resolution.
5. **Contact the DCE, ADCE** or designated faculty to make them aware of the situation. They may become involved if requested or if they feel it is appropriate.

If a student believes that he/she is experiencing unlawful discrimination or harassment at a clinical facility, he/she should immediately report such concerns to UMHB through the university’s published reporting system, as outlined on page one of this handbook.

Dismissal from a Clinical Facility

A student can be dismissed from a clinical facility by their own request, the request of the CI/SCCE, or determination of the DCE, ADCE, or other designated faculty. The appropriate action will be determined by the university based on the cause of the dismissal from the clinical facility as well as the totality of the student’s conduct and performance.

Evaluation of Clinical Education

Clinical Education Grading Criteria

Clinical courses in the DPT curriculum will utilize a grade of CR (credit) or NC (no credit). In certain circumstances, a grade of IP (in progress) may be assigned if the clinical rotation is not completed by the end of a semester.
The grade in each course is determined by the course instructor. Specific course requirements for grading will be included in each course syllabus. The DCE or ADCE will assign grades for clinical education courses based on feedback provided by the clinical instructor(s). Clinical performance will be evaluated using the Physical Therapist Clinical Performance Instrument (PT CPI) for all fulltime clinical experiences. The syllabus for each clinical course will outline performance expectations on the PT CPI or other specified assessment tool.

Professional conduct is a component of academic and clinical performance and will be evaluated accordingly. Program faculty will regularly assess student professional conduct using the Professional Behaviors form and professional standards outlined in the APTA Code of Ethics, Guidelines for Professional Conduct and the Texas Practice Act. Clinical Faculty may also be required to assess a student’s professional behaviors.

**Student Evaluation**

During each fulltime clinical rotation, the CI will use the Physical Therapy Clinical Performance Instrument (CPI) for the Midterm and Final summative evaluation of the student. Each particular clinical experience will have specific requirements outlined on the syllabus. For the initial part-time clinical rotation, an abbreviated Student Evaluation Form will be utilized.

**Physical Therapy Clinical Performance Instrument (PT CPI or CPI)**

The CPI has been developed by the APTA for evaluation of the student clinical performance during clinical affiliations. It is available in online format for the CI and student to complete. The CPI utilizes a categorical, ordered rating system with narrative to rate the 18 performance criteria. The student and CI will separately rate the student’s performance. Assessments should be shared in a formal evaluation conference between the student and CI at both the midterm and final week of the clinical placement. It is the student’s responsibility to assure the evaluations are completed and submitted to the DCE, ADCE, or designated faculty.

**Clinical Experience and Clinical Instruction Evaluation**

Each student is required to complete the APTA’s Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction. The form should be initiated at the time of the midterm and completed during the final week of the placement and shared with the CI during the final evaluation conference. The completed form provides demographic information on the CI(s) (General Information), an assessment of the clinical instructor’s performance (Section 2), the overall quality of the clinical experience (Section 1) and the adequacy of the student’s academic preparation (overall summary appraisal). Completed forms are to be submitted to the DCE or ADCE by the established due date.

The DCE, ADCE, or designated faculty will perform a review of available documents and communication to rate the performance of the CI and SCCE. The CI and SCCE are encouraged to perform self-assessment.

**Evaluation of the DCE and ADCE**

The student, CI/SCCE, and academic faculty will have the opportunity to evaluate the performance of the DCE/ADCE. Feedback will be solicited through formal and informal means. This feedback is vital for growth and improvement to better the clinical education experience.
PHTH 7136 – Clinical Practicum Syllabus

Instructor: Dr. Jenise Engelke, PT, DPT Director of Clinical Education
Office: Hardy 135
Office Phone: 254.295.4927
Cell Phone: 254.541.0884
E-mail: jengelke@umhb.edu
Office Hours: TBD

Instructor: Dr. Kristi Trammell, PT, DPT, NCS Assistant Director of Clinical Education
Office: Hardy
Office Phone: 254.295.4938
Cell Phone: 806.570.4082
E-mail: ktrammell@umhb.edu
Office Hours: TBD

Note: The DCE, ADCE or other designated faculty will be on-call after regular business hours.

Description of Course

Course Name, Number and Section: PHTH 7136 – Clinical Practicum Term: Winter 2022
Catalog Description: Introduction to clinical practice through clinical observation/reflection and opportunity to practice basic skills learned during the first four semesters of the program; consists of approximately 80 hours of supervised clinical exposure.
Prerequisite(s): Successful completion of all DPT courses from the previous semester.
Time/Location Course Meets: November 28 to Dec 9, 2022 (dates may be varied depending on your clinical site)

Course Objectives:

1. Demonstrate professional behavior related to Patient Care
   a. Display concern for patient safety
   b. Exhibit respect for confidentiality of patients
   c. Seek informed consent for patient care
   d. Demonstrate selected physical therapy examination and intervention skills as deemed appropriate by the clinical instructor.

2. Demonstrate professional behavior related to Facility Guidelines and Operations
   a. Develop a working knowledge of the documentation process in the clinical setting
   b. Abide by facility policy and procedures
3. Demonstrate professional behavior related to Personal Actions
   a. Value the role of professionalism in clinical practice
   b. Maintain professional appearance
   c. Apply knowledge of communication skills to the clinical setting (i.e. awareness of body language and non-verbal communication, being an active listener, working effectively in a team)
   d. Assume responsibility for self-directed learning (i.e. raising relevant questions, accepting constructive criticism and acting upon recommended changes)
   e. Participate in and demonstrate accurate self-assessment (i.e. Accepting responsibility for own actions, complete written self-assessment)

**Program Student Learning Outcomes Addressed in This Course:**
1) Students will demonstrate competence in clinical practice by the end of the program.

**Credit Hours:** One credit hour.

**Credit Hour Definition:** The University of Mary Hardin-Baylor policy requires a minimum of forty-five (45) clock hours for each semester credit hour for internships, clinical and field experiences.

**Mode of Delivery:** Course will utilize experiential learning under the supervision of a Physical Therapist clinical instructor and guidance of the Director of Clinical Education.

**Textbooks and Other Materials**

- **Required:**
  - Physical Therapy Kit (provided by the program)
  - Other text/materials as recommended by clinical site

**Academic Integrity**

The UMHB policy on academic integrity applies to all courses. Please refer to the policy on academic integrity which is published in the UMHB Graduate Catalog and in the student handbook.

**Academic Appeals**

Students may appeal any academic decision that is arbitrary, capricious, or unfair. For an appeal to succeed, the student must show that the decision was clearly erroneous or that the university failed to follow its policies or rules. Please see the UMHB Graduate Catalog for instructions about filing a grade appeal.

**Drops and Withdrawals**

An instructor at UMHB cannot drop or withdraw you from a course. If you find it necessary to drop a course, you must officially drop the course through the Registrar’s office. If you stop attending a course without officially withdrawing from it, you will receive an automatic “F” in the course. Before you drop a course, speak with the DPT Program Director before contacting the Registrar. Full details regarding withdrawal from a course or withdrawal from the university are available in the UMHB Graduate Catalog.
Students with Disability Services and Accommodations

It is the student’s responsibility to request disability accommodations. If you require an accommodation for a disability, contact Disability Services, as early as possible in the term. More information about accommodations and disability-related support is available on the Disability Services Page of the UMHB website.

Priority of the Catalog

The Graduate Catalog provides information about the rules and policies of the University of Mary Hardin-Baylor. Should a discrepancy between this syllabus and the Graduate Catalog be discovered, the policy stated in the Graduate Catalog has priority.

Assignments and Grading

Clinical rotations utilize a grade of CR (credit) or NC (no credit). In certain circumstances, a grade of IP (in progress) may be assigned if the clinical rotation is not completed by the end of a semester.

Students must complete approximately 80 hours of supervised clinical exposure and all of the following assignments.

Late assignments will not be accepted. A student who must be absent on the day an assignment is due should email the completed assignment to the instructor on the due date prior to class time. Extenuating circumstances may be considered on an individual basis at the instructor’s discretion.

CI Contact Info: Student enters CI contact info utilizing a survey link provided in canvas course.

Supervisor Info: Student enters CI details into EXXAT system under their placement.

Student Self Pre-Assessment: Each student will complete this one page form prior to the clinical rotation. A copy should be given or sent to the DCE or designated faculty as well as the student’s clinical instructor.

Update Note: Each student will complete a weekly note detailing their experience from that week.

CI/Site Evaluation: Each student will complete the “Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction” form at the completion of their clinical rotation. This information is to be shared with the clinical site and the DCE.

Student Post-Assessment: The student will complete the PHTH 7136 Clinical Practicum Evaluation rating and Professional Behavior Assessment based on their self-assessment of their performance during this clinical experience.

Student Evaluation and Assessment:

The Director of Clinical Education will assign grades (credit, no credit or incomplete) for clinical education courses based on feedback provided by the clinical instructor(s). The “PHTH 7136 Clinical Practicum Evaluation”, “Midterm Site Visit or Call Form”, and “Professional Behavior Assessment for CI” will be utilized during the formal assessment for this clinical practicum. Clinical rotations utilize a grade of CR (credit) or NC (no credit). In certain circumstances, a grade of IP (in progress) may be assigned if the clinical rotation is not completed by the end of a semester.
**Attendance**

Course attendance and punctuality are expected behaviors and contribute to determining readiness for clinical practice. Students are expected to attend all special and regularly scheduled lectures, labs, and clinical sessions and be on time. If a student must miss class or be tardy for any reason, the student must notify the instructor prior to the start of class or clinical time. The instructor may be notified through email, voice mail on office phone, or voice mail on main DPT department number - (254)295-4940. Texting another student and asking him/her to notify the instructor is not acceptable professional behavior.

Students with excused absences granted by the DPT faculty will be permitted to make up work that was missed and should coordinate with faculty as soon as they return from the absence. Students should request excused absences from faculty in advance unless extreme circumstances prevent advance communication.

Students should promptly contact the Student Disability Services office directly to request excused absences for serious medical conditions. Such approved disability accommodations are not applied retroactively.

Students should promptly contact the Title IX office directly to request excused absences for pregnancy.

Refer to the UMHB Graduate Catalog for additional information regarding absences.

**Please note that regular, on-time attendance in class, laboratory, and clinicals is an important component of professional behavior. Students may be penalized on the professionalism component of a course grade for being tardy or for non-participation in learning activities due to missing class, or students may receive an academic alert or academic warning for unexcused absences.**

**Use of Personal Technology**

Use of personal technology devices for anything other than academic purposes in the classroom, lab, or clinical setting during instructional or patient care time is prohibited. Students must refrain from using cell phones, tablets, laptops and similar devices for non-educational purposes (i.e. messaging, games, email, web browsing) during class and clinical time. A faculty member may instruct the student to put the device away, or may direct the student to leave the classroom. The faculty member may choose the action deemed most appropriate for the situation.

If a student is expecting an emergency phone call, the student must notify the faculty member prior to the beginning of class or clinical time. The student must step outside of the room before answering an emergency phone call, or wait until a more appropriate time to return the call.

**Outline/Course Schedule**

Note: The schedule may be altered at the discretion of the professor. Students will be informed in advance of scheduling changes that affect student grades.
### Schedule of Course Activities:

<table>
<thead>
<tr>
<th>Due Date</th>
<th>Assignment</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/17/2022</td>
<td>Clinical Pre-brief</td>
</tr>
<tr>
<td>11/21/2022</td>
<td>Student Self-Assessment</td>
</tr>
<tr>
<td>11/21/2022</td>
<td>Survey: Readiness for IPE</td>
</tr>
<tr>
<td>11/28/2022</td>
<td>Anticipated clinical start date</td>
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<tr>
<td>11/30/2022</td>
<td>Supervisor Information / CI Details</td>
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<tr>
<td>12/3/2022</td>
<td>Week 1 Update</td>
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<td>12/8/2022</td>
<td>PTSE 1 / PTSE 2 Completion</td>
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<tr>
<td>12/8/2022</td>
<td>Self/CI Assessment</td>
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<tr>
<td>12/10/2022</td>
<td>Week 2 Overview</td>
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PHTH 7751 – Professional Experience I Syllabus

Course Instructors:

<table>
<thead>
<tr>
<th>Dr. Jenise Engelke, PT, DPT</th>
<th>Dr. Kristi Trammell, PT, DPT, NCS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director of Clinical Education Office: Hardy 135</td>
<td>Assistant Director of Clinical Education Office: 113</td>
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<td>Office Phone: 254.295.4927</td>
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</tr>
<tr>
<td>Office Hours: by appointment</td>
<td>Office Hours: by appointment</td>
</tr>
</tbody>
</table>

Note: The DCE, ADCE or other designated faculty will be on-call after regular business hours.

Description of Course

Course Name, Number and Section: PHTH 7751, Professional Experience I, All Sections

Term: Spring 2023

Catalog Description: First of three clinical experiences, consists of 8 weeks of full-time supervised clinical practice; emphasizes integration and application of learned physical therapy skills, knowledge and behaviors in a patient care environment. (320 hours)

Prerequisite: Successful completion of all PHTH courses in previous semester with a grade of C or better.

Time/Location Course Meets: March 6, 2023 – April 28, 2023 (8 weeks)

Credit Hour Definition: The University of Mary Hardin-Baylor policy requires a minimum of forty-five (45) clock hours for each semester credit hour for internships, clinical and field experiences.

Credit Hours: Seven (7) credit hours.

Clock Hours: Forty (40) hours per week for 8 weeks (320 hours total).

Mode of Delivery

This course will utilize experiential learning under the supervision of a Physical Therapist clinical instructor and guidance of the Director of Clinical Education. Student will also engage in assignments focused on reflection, self-assessment, and evidence-based practice.

This course may incorporate video recordings made in real time or pre-recorded and posted for you to access. You may use these recordings only for your own instruction and study. You are prohibited from recording any video session or meeting except with the instructor’s express written consent. You may not forward, post, alter, or republish all or any part of a recording relating to this class. A violation of this policy is misconduct under the University’s code of conduct and may result in sanctions as provided in the Student Handbook, up to and including expulsion.
Course Objectives:
The student will be assessed as having achieved **Intermediate performance (defined below)** on all 18 performance criteria on the Clinical Performance Instrument (CPI) that correspond to the following objectives.

**Intermediate (defined by CPI):**
requires clinical supervision less than 50% of the time managing patients with simple conditions, and 75% of the time managing patients with complex conditions
proficient with simple tasks and is developing the ability to consistently perform skilled examinations, interventions, and clinical reasoning
able to maintain 50% of a full-time physical therapist’s caseload

Student will be assessed as having achieved intermediate performance (clinical supervision less than 50% of time for simple conditions, 75% of time for complex conditions; maintain 50% of PT load) via the below objectives:

Practices in a safe manner that minimizes risk to the patient, self, and others (consistent with Intermediate rating on the CPI).

Demonstrates professional behavior in all circumstances of clinical practice seeking guidance if needed when confronted with novel situations (consistent with Intermediate rating on the CPI).

Demonstrates accountability with established ethical, legal, and professional standards of physical therapy practice with minimal guidance (consistent with Intermediate rating on the CPI).

Communicates consistently in typical clinical situations with pertinent stakeholders, seeking guidance if needed (consistent with Intermediate rating on the CPI).

Determines delivery of physical therapy services with consideration for patients’ cultural differences, value system, and needs (consistent with Intermediate rating on the CPI).

Completes self-assessment to expand clinical and professional performance development, seeks feedback, and integrates information from past assessment data with minimal reminders or guidance (consistent with Intermediate rating on the CPI).
Identifies current physical therapy knowledge, theory, and best evidence to direct clinical judgment including the patient’s values and perspective in patient management (consistent with Intermediate rating on the CPI).

Recognizes the potential need for further examination or consultation by a physical therapist or referral to another health care professional (consistent with Intermediate rating on the CPI).

Performs an uncomplicated physical therapy examination completing a clear patient history and appropriate systems review and tests and measures with minimal guidance (consistent with Intermediate rating on the CPI).

Evaluates data from the uncomplicated patient examination to make clinical decisions that are effective, efficient, culturally competent, and evidence-based with minimal guidance (consistent with Intermediate rating on the CPI).

Determine the diagnosis and prognosis that guides future patient management in straightforward patient cases (consistent with Intermediate rating on the CPI).

Establishes and adjusts a physical therapy plan of care that is safe, effective, patient-centered, and evidence-based with 50% or less assistance (consistent with Intermediate rating on the CPI).

Performs standard physical therapy interventions in a competent manner (consistent with Intermediate rating on the CPI).

Educate others (patients, caregivers, staff, students, other health care providers, business and industry representatives, school systems) in straightforward scenarios using relevant and effective teaching methods with minimal guidance (consistent with Intermediate rating on the CPI).

Produces quality documentation in a timely manner to support the delivery of physical therapy services for typical patient situations with minimal guidance (consistent with Intermediate rating on the CPI).

Collects data from selected outcome measures in a manner that supports accurate analysis of straightforward individual patient outcomes (consistent with Intermediate rating on the CPI).

Gains experience in the financial management (budgeting, billing, and reimbursement, time, space, equipment, marketing, and public relations) of the physical therapy service consistent with regulatory, legal, and facility guidelines requiring moderate assistance or less from CI (consistent with Intermediate rating on the CPI).

Interacts with interprofessional team, support staff, and/or assistants according to legal standards and ethical guidelines with the patient’s objectives considered (consistent with Intermediate rating on the CPI).

**Textbooks and Other Materials**

The student should have educational material appropriate for their designated clinical site setting available during their rotation.

It is the student’s responsibility to ensure that he/she has met the immunization requirements of the program and their assigned clinical site, to maintain a copy of these items with the UMHB DPT program at all times, and to keep these items current. The students are to take a copy of the original documents to their clinical site.
Academic Integrity

The UMHB policy on academic integrity applies to all courses. Please refer to the policy on academic integrity which is published in the UMHB Graduate Catalog and in the student handbook.

Academic Appeals

Students may appeal any academic decision that is arbitrary, capricious, or unfair. For an appeal to succeed, the student must show that the decision was clearly erroneous or that the university failed to follow its policies or rules. Please see the UMHB Graduate Catalog for instructions about filing a grade appeal.

Drops and Withdrawals

An instructor at UMHB cannot drop or withdraw you from a course. If you find it necessary to drop a course, you must officially drop the course through the Registrar’s office. If you stop attending a course without officially withdrawing from it, you will receive an automatic “NC” in the course. Before you drop a course, speak with the DPT Program Director before contacting the Registrar. Full details regarding withdrawal from a course or withdrawal from the university are available in the UMHB Graduate Catalog.

Students with Disability Services and Accommodations

It is the student’s responsibility to request disability accommodations. If you require an accommodation for a disability, contact Disability Services, as early as possible in the term. More information about accommodations and disability-related support is available on the Disability Services Page of the UMHB website.

Priority of the Catalog

The Graduate Catalog provides information about the rules and policies of the University of Mary Hardin-Baylor. Should a discrepancy between this syllabus and the Graduate Catalog be discovered, the policy stated in the Graduate Catalog has priority.

Attendance

Attendance during clinical practicums and professional experiences is mandatory. Absence for any reason must be reported to DCE, ADCE or designated faculty and CI at the facility prior to time of absence. Throughout the entirety of the clinical education experiences a student will be allowed to miss no more than a total of 5 days for illnesses, emergencies, and unforeseen circumstances. Any additional days missed must be made up during that clinical experience or during a later rotation as determined by the CI/SCCE and DCE/ADCE or designated faculty.

When the student cannot attend clinical on a day that it is scheduled, the student must immediately notify the clinical facility as well as the faculty member designated as the course instructor. The student should obtain a telephone number and discuss the procedure of notifying the clinical facility and faculty for unexpected absences. Failure to notify the clinical facility prior to the beginning of the scheduled clinical day is unacceptable and may place the student and clinical placement in jeopardy. The student should notify the course instructor as per the course guidelines. The student should then present the faculty with a plan to complete the lost clinical time within the DPT Program’s rules regarding absence limitations. The student must complete the hours within the prescribed time frame. Failure to complete clinical hours will result in an incomplete for the course. Students are not to share or switch clinical days/times with other students.
In the event of inclement weather students are to follow the attendance policies of the facility to which they are assigned. It is expected that students will use their best judgment in regards to their own personal safety.

Students should promptly contact the Student Disability Services office directly to request excused absences for serious medical conditions. Such approved disability accommodations are not applied retroactively.

Students should promptly contact the Title IX office directly to request excused absences for pregnancy.

Refer to the UMHB Graduate Catalog for additional information regarding absences.

Please note that regular, on-time attendance in class, laboratory, and clinicals is an important component of professional behavior. Students may be penalized on the professionalism component of a course grade for being tardy or for non-participation in learning activities due to missing class, or students may receive an academic alert or academic warning for unexcused absences.

**Use of Personal Technology**

Use of personal technology devices for anything other than academic purposes in the classroom, lab, or clinical setting during instructional or patient care time is prohibited. Students must refrain from using cell phones, tablets, laptops and similar devices for non-educational purposes (i.e. messaging, games, email, web browsing) during class and clinical time. A faculty member may instruct the student to put the device away, or may direct the student to leave the classroom. The faculty member may choose the action deemed most appropriate for the situation.

If a student is expecting an emergency phone call, the student must notify the faculty member prior to the beginning of class or clinical time. The student must step outside of the room before answering an emergency phone call, or wait until a more appropriate time to return the call.

Cell phones should be turned off while in the clinical environment and stored away from the patient care areas. If the cell phone is used during a break, it should be turned back off at the end of the break.

Students in the Doctor of Physical Therapy program are expected to exercise discretion in the use of social media and respect the professional reputation of the student, faculty, and program. Students are not permitted to post any course related materials on any public website or social media or send such materials to another person within or outside of the DPT program (e.g. students in the same or different cohort, clinical instructors, friends). Course materials include, but are not limited to, photos/videos of instructor lectures or demonstrations; photos/videos of faculty, students, volunteers or others during any type of learning activity; homework assignments, quizzes, or examinations; any materials related to research projects. Discussion of tests and other course assessment techniques through these types of venues is also prohibited. Students who violate academic integrity standards through social media will be subject to appropriate sanctions under the Academic Integrity policy.

**Professional Demeanor & Dress Code:** (Refer to the Student Handbook)

Students are required to dress in a manner that maintains the image of a professional physical therapist while in the clinical setting. The trunk region should be covered at all times and in all body positions in clinical situations. As representatives of UMHB, students should be guided by professionalism, modesty, and good taste in choice of attire each day. Students are prohibited from wearing clothing or exhibit any tattoo that displays sexually suggestive materials or advocates alcohol, drug use, profanity, tobacco, racism
or other concepts in conflict with the University’s Christian principles. Students are to follow specific guidelines for professional dress as determined by their assigned clinical facility.

**Personal Appearance and Habits:**

1. Students are expected to demonstrate exemplary grooming and hygiene. Students will abide by the following guidelines at all times:
   2. Hair must be neatly groomed or styled; extreme hairstyles or colors are not acceptable. Long hair should be tied back to avoid interference with lab or patient care activities.
   3. Fingernails must be clean, well-maintained, and trimmed. Fingernails should not extend beyond the tip of the finger.
   4. Beards must be well-maintained and neatly trimmed. Beards may interfere with the proper use of certain required safety equipment, such as particulate respirator masks.
   5. Facial make-up should be professional. No body odors (including smoke) should be detectable.
   6. Perfumes, colognes, and aftershaves should be used sparingly or not at all.
   7. Jewelry piercings other than in the ears is prohibited during academic and clinical activities. Earrings are limited to no more than 2 per ear, and long earrings may not be worn. Any jewelry that might interfere with patient simulation or patient care should be avoided.
   8. Students are not to eat/drink/chew gum while in clinical or laboratory settings.

**Assignments and Grading**

Clinical rotations utilize a grade of CR (credit) or NC (no credit). In certain circumstances, a grade of IP (in progress) may be assigned if the clinical rotation is not completed by the end of a semester. Timely completion of all assignments is expected. Should a student experience extenuating circumstances requiring an extension of an established due date, the student should contact designated faculty prior to established deadline to discuss.

**Failure to complete assignments fully or timely will result in a grade of No Credit (NC) or In Progress (IP) being assigned for the clinical grade. Student must earn a minimum of 23 points through completion of assignments and other course requirements. A student will earn two points for each assignment that is turned in on time and fully complete. One point will be given for assignments that are turned in within 48 hours past the due date and/or partially completed. A zero will be given for failure to turn in an assignment or an assignment turned in over 48 hours past the due date.**

There are a total of 12 assignments in the course, plus points allotted for professional behaviors / interactions / communications for a total of 28 points. The midterm CPI, final CPI, and post-survey will not be given points but are expected to be turned in on time and complete.

**CPI Training Certificate:** Students will complete training on the Clinical Performance Instrument via the APTA Learning Center and upload a copy of their course completion certificate.

**Student Self Pre-Assessment:** Each student will complete this one-page form prior to the clinical rotation. Specific details will be provided via Canvas. Students are encouraged to share their self-assessment with their clinical instructor for discussion.
Updates: Each student will complete a note detailing their experience from the previous one to three weeks and submit to the DCE/ADCE or designated faculty via Canvas. See details in Canvas for specific questions to answer and due dates/times. Additional phone/zoom updates may be scheduled.

Clinical Project/Presentation: Each student will complete a special project, case report presentation or in-service presentation during the clinical. The topic must be approved by the CI and the DCE/ADCE or designated faculty. Submission of the project/presentation must be made to the DCE/ADCE or designated faculty via Canvas as well as the clinical site.

CI/Site Evaluation: Each student will complete the “Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction” form during the clinical rotation.

Surveys: Each student will complete surveys related to interprofessional education as a means to evaluate readiness for interprofessional practice prior to rotation and competency at end of rotation. Other surveys to gather student feedback on clinical rotations may be assigned as needed.

Professional Behaviors/Interactions/Communications: Students are expected to maintain professional behaviors at all times and demonstrate timely, efficient, and professional communications with the university and clinical site personnel. Instances of failure to meet these standards will result in point deductions in this category.

CPI Training Certificate 2 points
Student Self-Assessment 2 points
CI Details 2 points
IPE Surveys (x2) 4 points
Periodic Update (x3) 6 points
Inservice/Special Project (Approval & Submission) 4 points
PTSE Completion (x2) 4 points
Professional Behaviors/Interactions/Communications 4 points

TOTAL POINTS 28 points

Outline/Course Schedule

Note: The schedule may be altered at the discretion of the professor. Students will be informed in advance of scheduling changes that affect student grades.
<table>
<thead>
<tr>
<th>Due Date</th>
<th>Assignment</th>
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<tbody>
<tr>
<td>3/5/2023</td>
<td>CPI Training Certificate</td>
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<tr>
<td>3/5/2023</td>
<td>Student Self-Assessment</td>
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<tr>
<td>3/5/2023</td>
<td>Survey: Readiness for IPE</td>
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<tr>
<td>3/8/2023</td>
<td>Supervisor Information / CI Details</td>
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<tr>
<td>3/12/2023</td>
<td>Week 1 Update</td>
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<tr>
<td>3/19/2023</td>
<td>Week 2 Update</td>
</tr>
<tr>
<td>3/26/2023</td>
<td>Approval of Inservice /Special Project</td>
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<tr>
<td>3/31/2023</td>
<td>Midterm CPI</td>
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<tr>
<td>4/16/2023</td>
<td>Week 6 Update</td>
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<tr>
<td>4/23/2023</td>
<td>Inservice / Special Project Submission</td>
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<tr>
<td>4/23/2023</td>
<td>PTSE 1 / PTSE 2 Completion</td>
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<tr>
<td>4/23/2023</td>
<td>Survey: Competency in IPE</td>
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<tr>
<td>4/28/2023</td>
<td>Final CPI</td>
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<tr>
<td>4/28/2023</td>
<td>PE#1: Post-Survey</td>
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PHTH 7961—Professional Experience II Syllabus

Course Instructors:

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Office</th>
<th>Phone</th>
<th>Email</th>
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<tbody>
<tr>
<td>Dr. Jenise Engelke, PT, DPT</td>
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<td>254.295.4927</td>
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<td></td>
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<td>E-mail: <a href="mailto:jengelke@umhb.edu">jengelke@umhb.edu</a></td>
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<tr>
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<tr>
<td>Dr. Kristi Trammell, PT, DPT, NCS</td>
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<td>Office Hours: by appointment</td>
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Note: The DCE, ADCE or other designated faculty will be on-call after regular business hours.

Description of Course

Course Name, Number and Section: PHTH 7961, Professional Experience II, All Sections

Term: Summer 2023

Catalog Description: The second of three clinical experiences; consists of 11 weeks of full-time supervised clinical practice; emphasizes progressing integration and application of learned physical therapy skills, knowledge and behaviors in a patient care environment. (440 clinical hours)

Prerequisite: Successful completion of all PHTH courses in previous semester with a grade of C or better.

Time/Location Course Meets: May 8, 2023 – July 21, 2023 (11 weeks)

Credit Hour Definition: The University of Mary Hardin-Baylor policy requires a minimum of forty-five (45) clock hours for each semester credit hour for internships, clinical and field experiences.

Credit Hours: Nine (9) credit hours.

Clock Hours: Forty (40) hours per week for 11 weeks (440 hours total).

Mode of Delivery

This course will utilize experiential learning under the supervision of a Physical Therapist clinical instructor and guidance of the Director of Clinical Education. Student will also engage in assignments focused on reflection, self-assessment, and evidence-based practice.

This course may incorporate video recordings made in real time or pre-recorded and posted for you to access. You may use these recordings only for your own instruction and study. You are prohibited from recording any video session or meeting except with the instructor’s express written consent. You may not forward, post, alter, or republish all or any part of a recording relating to this class. A violation of this policy
is misconduct under the University’s code of conduct and may result in sanctions as provided in the Student Handbook, up to and including expulsion.

**Course Objectives:**

The student will be assessed as having achieved a minimum of **Advanced Intermediate performance (defined below)** on all 18 performance criteria on the Clinical Performance Instrument that correspond to the following objectives. **It is highly recommended that students aim to achieve Entry-Level performance (also defined below).**

**Advanced Intermediate (defined by CPI): REQUIRED level of achievement for this rotation**

A student who requires clinical supervision less than 25% of the time managing new patients or patients with complex conditions and is independent managing patients with simple conditions. At this level, the student is consistent and proficient in simple tasks and requires only occasional cueing for skilled examinations, interventions, and clinical reasoning.

The student is capable of maintaining 75% of a full-time physical therapist’s caseload.

Students will be assessed as having achieved Advanced Intermediate performance (clinical supervision less than 25% of time for new or complex patients, independent managing patients with simple conditions; maintain 75% of PT load) via the below objectives:

Practices in a safe manner that minimizes risk to the patient, self, and others.

Demonstrates professional behavior in all circumstances of clinical practice.

Maintains accountability with established legal and professional standards and ethical guidelines of physical therapy practice.

Communicates consistently in simple and complex situations.

Adapts delivery of physical therapy services with consideration for patients’ cultural differences, value system and needs.

Completes and values self-assessment to expand clinical and professional performance development, seeks feedback and integrates information from past assessment data.
Applies current knowledge, theory, clinical judgment and the patient’s values and perspective in patient management with less than 25% assistance from CI.

Concludes with each patient encounter the patient’s need for further examination or consultation by a physical therapist or referral to another health care professional 75% of the time.

Performs a full physical therapy examination using appropriate tests and measures in allotted timeframe 75% of the time.

Evaluates data from the patient examination to make clinical decisions in 75% of the time.

Determines the diagnosis and prognosis that guides future patient management 75% of the time.

Establishes a physical therapy plan of care that is safe, effective, patient-centered and evidence-based in 75% or more of the standard PT caseload.

Performs physical therapy interventions in a competent manner in 75% of greater of the full PT caseload.

Educates others (patients, caregivers, staff, students, other health care providers, business and industry representatives, school systems) using relevant and effective teaching methods.

 Produces quality documentation in a timely manner to support the delivery of physical therapy services in 75% of the full PT caseload.

Collects and analyzes data from selected outcome measures in a manner that supports accurate analysis of individual patient and group outcomes 75% of the time.

Participates in the financial management (budgeting, billing, and reimbursement, time, space, equipment, marketing, public relations) of the physical therapy service consistent with regulatory, legal and facility guidelines 75% of the time.

Supervises support staff and/or assistances according to legal standards and ethical guidelines with the patient’s objectives considered and less than 25% supervision from the clinical instructor.

OR

**Entry-Level (defined by CPI): RECOMMENDED level of achievement for this rotation**

- A student who is capable of functioning without guidance or clinical supervision managing patients with simple or complex conditions.
- At this level, the student is consistently proficient and skilled in simple and complex tasks for skilled examinations, interventions, and clinical reasoning.
- Consults with others and resolves unfamiliar or ambiguous situations.
- The student is capable of maintaining 100% of a full-time physical therapist’s caseload in a cost-effective manner.
Textbooks and Other Materials

The student should have educational material appropriate for their designated clinical site setting available during their rotation.

It is the student’s responsibility to ensure that he/she has met the immunization requirements of the program and their assigned clinical site, to maintain a copy of these items with the UMHB DPT program at all times, and to keep these items current. The students are to take a copy of the original documents to their clinical site.

Academic Integrity

The UMHB policy on academic integrity applies to all courses. Please refer to the policy on academic integrity which is published in the UMHB Graduate Catalog and in the student handbook.

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Students may appeal any academic decision that is arbitrary, capricious, or unfair. For an appeal to succeed, the student must show that the decision was clearly erroneous or that the university failed to follow its policies or rules. Please see the UMHB Graduate Catalog for instructions about filing a grade appeal.

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Priority of the Catalog
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In the event of inclement weather students are to follow the attendance policies of the facility to which they are assigned. It is expected that students will use their best judgment in regards to their own personal safety.

Students should promptly contact the Student Disability Services office directly to request excused absences for serious medical conditions. Such approved disability accommodations are not applied retroactively.

Students should promptly contact the Title IX office directly to request excused absences for pregnancy.

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Students in the Doctor of Physical Therapy program are expected to exercise discretion in the use of social media and respect the professional reputation of the student, faculty, and program. Students are not permitted to post any course related materials on any public website or social media or send such materials to another person within or outside of the DPT program (e.g. students in the same or different cohort, clinical instructors, friends). Course materials include, but are not limited to, photos/videos of instructor lectures or demonstrations; photos/videos of faculty, students, volunteers or others during any type of learning activity; homework assignments, quizzes, or examinations; any materials related to research projects. Discussion of tests and other course assessment techniques through these types of venues is also prohibited. Students who violate academic integrity standards through social media will be subject to appropriate sanctions under the Academic Integrity policy.

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Students are required to dress in a manner that maintains the image of a professional physical therapist while in the clinical setting. The trunk region should be covered at all times and in all body positions in clinical situations. As representatives of UMHB, students should be guided by professionalism, modesty, and good taste in choice of attire each day. Students are prohibited from wearing clothing or exhibit any tattoo that displays sexually suggestive materials or advocates alcohol, drug use, profanity, tobacco, racism or other concepts in conflict with the University’s Christian principles. Students are to follow specific guidelines for professional dress as determined by their assigned clinical facility.

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3. Fingernails must be clean, well-maintained, and trimmed. Fingernails should not extend beyond the tip of the finger.
4. Beards must be well-maintained and neatly trimmed. Beards may interfere with the proper use of certain required safety equipment, such as particulate respirator masks.
5. Facial make-up should be professional. No body odors (including smoke) should be detectable.
6. Perfumes, colognes, and aftershave should be used sparingly or not at all.
7. Jewelry piercings other than in the ears is prohibited during academic and clinical activities. Earrings are limited to no more than 2 per ear, and long earrings may not be worn. Any jewelry that might interfere with patient simulation or patient care should be avoided.
8. Students are not to eat/drink/chew gum while in clinical or laboratory settings.

**Assignments and Grading**

Clinical rotations utilize a grade of CR (credit) or NC (no credit). In certain circumstances, a grade of IP (in progress) may be assigned if the clinical rotation is not completed by the end of a semester. Timely
completion of all assignments is expected. Should a student experience extenuating circumstances requiring an extension of an established due date, the student should contact designated faculty prior to established deadline to discuss.

**Failure to complete assignments fully or timely will result in a grade of No Credit (NC) or In Progress (IP) being assigned for the clinical grade. Student must earn a minimum of 21 points through completion of assignments and other course requirements. A student will earn two points for each assignment that is turned in on time and fully complete. One point will be given for assignments that are turned in within 48 hours past the due date and/or partially completed. A zero will be given for failure to turn in an assignment or an assignment turned in over 48 hours past the due date.** There are a total of 11 assignments in the course, plus points allotted for professional behaviors / interactions / communications for a total of 26 points. The midterm CPI, final CPI, and post-survey will not be given points but are expected to be turned in on time and complete.

**Student Self Pre-Assessment:** Each student will complete this one-page form prior to the clinical rotation. Specific details will be provided via Canvas. Students are encouraged to share their self-assessment with their clinical instructor for discussion.

**Updates:** Each student will complete a note detailing their experience from the previous one to three weeks and submit to the DCE/ADCE or designated faculty via Canvas. See details in Canvas for specific questions to answer and due dates/times. Additional phone/zoom updates may be scheduled.

**Clinical Project/Presentation:** Each student will complete a special project, case report presentation or in-service presentation during the clinical. The topic must be approved by the CI and the DCE/ADCE or designated faculty. Submission of the project/presentation must be made to the DCE/ADCE or designated faculty via Canvas as well as the clinical site.

**CI/Site Evaluation:** Each student will complete the “Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction” form during the clinical rotation.

**Surveys:** Each student will complete surveys related to interprofessional education as a means to evaluate readiness for interprofessional practice prior to rotation and competency at end of rotation. Other surveys to gather student feedback on clinical rotations may be assigned as needed.

**Professional Behaviors/Interactions/Communications:** Students are expected to maintain professional behaviors at all times and demonstrate timely, efficient, and professional communications with the university and clinical site personnel. Instances of failure to meet these standards will result in point deductions in this category.

<table>
<thead>
<tr>
<th>Category</th>
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<td>CI Details</td>
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<td>IPE Surveys (x2)</td>
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<td>Periodic Update (x3)</td>
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<td>Inservice/Special Project (Approval &amp; Submission)</td>
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<tr>
<td>PTSE Completion (x2)</td>
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<td>Professional Behaviors/Interactions/Communications</td>
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<tr>
<td><strong>TOTAL POINTS</strong></td>
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Student Evaluation and Assessment:
The Director of Clinical Education/Assistant Director of Clinical Education will assign grades for clinical education courses based on feedback provided by the clinical instructor(s). The electronic CPI will be utilized during the formal assessment for this clinical experience by the student and the clinical instructor at the midterm and final week.

Outline/Course Schedule
Note: The schedule may be altered at the discretion of the professor. Students will be informed in advance of scheduling changes that affect student grades.

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<thead>
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<td>5/7/2023</td>
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<td>Survey: Readiness for IPE</td>
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<td>5/10/2023</td>
<td>Supervisor Information / CI Details</td>
</tr>
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<td>5/14/2023</td>
<td>Week 1 Update</td>
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<td>5/28/2023</td>
<td>Week 3 Update</td>
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<td>6/4/2023</td>
<td>Approval of Inservice /Special Project</td>
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<td>Midterm CPI</td>
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<td>Week 7 Update</td>
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<td>7/9/2023</td>
<td>Inservice / Special Project Submission</td>
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<td>7/16/2023</td>
<td>PTSE 1 / PTSE 2 Completion</td>
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<td>7/16/2023</td>
<td>Survey: Competency in IPE</td>
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<tr>
<td>7/21/2023</td>
<td>Final CPI</td>
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<tr>
<td>7/21/2023</td>
<td>PE#2: Post-Survey</td>
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PHTH 7971—Professional Experience III Syllabus

Course Instructors:

<table>
<thead>
<tr>
<th>Instructor</th>
<th>Office</th>
<th>Office Phone</th>
<th>Cell Phone</th>
<th>E-mail</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Jenise Engelke, PT, DPT</td>
<td>Hardy 135</td>
<td>254.295.4927</td>
<td>254.541.0884</td>
<td><a href="mailto:jengelke@umhb.edu">jengelke@umhb.edu</a></td>
<td>by appointment</td>
</tr>
<tr>
<td>Director of Clinical Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dr. Kristi Trammell, PT, DPT, NCS</td>
<td>113</td>
<td>254.295.4938</td>
<td>806.570.4082</td>
<td><a href="mailto:ktrammell@umhb.edu">ktrammell@umhb.edu</a></td>
<td>by appointment</td>
</tr>
<tr>
<td>Assistant Director of Clinical Education</td>
<td></td>
<td></td>
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</table>

Note: The DCE, ADCE or other designated faculty will be on-call after regular business hours.

Description of Course

Course Name, Number and Section: PHTH 7971, Professional Experience III, All Sections

Term: Fall 2022

Catalog Description: The last of three clinical experiences; consists of 11 weeks of full-time supervised clinical practice; emphasizes progressing integration and application of learned physical therapy skills, knowledge and behaviors in a patient care environment. (440 clinical hours)

Prerequisite: Successful completion of all PHTH courses in previous semester with a grade of C or better.

Time/Location Course Meets: August 15, 2022 – October 28, 2022 (11 weeks)

Credit Hour Definition: The University of Mary Hardin-Baylor policy requires a minimum of forty-five (45) clock hours for each semester credit hour for internships, clinical and field experiences.

Credit Hours: Nine (9) credit hours.

Clock Hours: Forty (40) hours per week for 11 weeks (440 hours total).

Mode of Delivery

This course will utilize experiential learning under the supervision of a Physical Therapist clinical instructor and guidance of the Director of Clinical Education. Student will also engage in assignments focused on reflection, self-assessment, and evidence-based practice.

This course may incorporate video recordings made in real time or pre-recorded and posted for you to access. You may use these recordings only for your own instruction and study. You are prohibited from recording any video session or meeting except with the instructor’s express written consent. You may not forward, post, alter, or republish all or any part of a recording relating to this class. A violation of this policy is misconduct under the University’s code of conduct and may result in sanctions as provided in the Student Handbook, up to and including expulsion.
Course Objectives:

The student will be assessed as having achieved **Entry-Level Physical Therapist** performance on all 18 performance criteria on the Clinical Performance Instrument that correspond to the following objectives.

1. Practices in a safe manner that minimizes risk to the patient, self, and others.
2. Demonstrates professional behavior in all circumstances of clinical practice.
3. Maintains accountability with established legal and professional standards and ethical guidelines of physical therapy practice.
4. Communicates consistently in simple and complex situations with consideration of a patient's values and beliefs.
5. Adapts delivery of physical therapy services with consideration for patients' diversity, cultural differences, value systems and needs, while demonstrating professionalism and integrity and utilizing contemporary and evidence-based practice.
6. Completes and values self-assessment to expand clinical and professional performance development, seeks feedback and integrates information from past assessment data.
7. Applies current knowledge, theory, clinical judgment and the patient's values and perspectives in patient management.
8. Determines with each patient encounter the patient's need for further examination or consultation by a physical therapist or referral to another health care professional.
9. Performs a thorough physical therapy examination using appropriate tests and measures.
10. Evaluates data from the patient examination to make clinical decisions.
11. Determines the diagnosis and prognosis that guides future patient management.
12. Establishes a physical therapy plan of care that is safe, effective, patient-centered, and evidence-based with specific timeframe.
13. Performs physical therapy interventions in a competent manner.
14. Educates others (patients, caregivers, staff, students, other health care providers, business and industry representatives, school systems) using relevant and effective teaching methods.
15. Produces quality documentation in a timely manner to support the delivery of physical therapy services.
16. Collects and analyzes data from selected outcome measures in a manner that supports accurate analysis of individual patient and group outcomes.
17. Participates in the financial management (budgeting, billing and reimbursement, time space, equipment, marketing, public relations) of the physical therapy service consistent with regulatory, legal and facility guidelines.
18. Directs and supervises support staff and/or assistants according to legal standards and ethical guidelines with the patient's objectives considered.
Entry-Level (defined by CPI)

• A student who is capable of functioning without guidance or clinical supervision managing patients with simple or complex conditions.

At this level, the student is consistently proficient and skilled in simple and complex tasks for skilled examinations, interventions, and clinical reasoning.

• Consults with others and resolves unfamiliar or ambiguous situations.

• The student is capable of maintaining 100% of a full-time physical therapist’s caseload in a cost-effective manner.

Textbooks and Other Materials

The student should have educational material appropriate for their designated clinical site setting available during their rotation.

It is the student’s responsibility to ensure that he/she has met the immunization requirements of the program and their assigned clinical site, to maintain a copy of these items with the UMHB DPT program at all times, and to keep these items current. The students are to take a copy of the original documents to their clinical site.

Academic Integrity

The UMHB policy on academic integrity applies to all courses. Please refer to the policy on academic integrity which is published in the UMHB Graduate Catalog and in the student handbook.

Academic Appeals

Students may appeal any academic decision that is arbitrary, capricious, or unfair. For an appeal to succeed, the student must show that the decision was clearly erroneous or that the university failed to follow its policies or rules. Please see the UMHB Graduate Catalog for instructions about filing a grade appeal.

Drops and Withdrawals

An instructor at UMHB cannot drop or withdraw you from a course. If you find it necessary to drop a course, you must officially drop the course through the Registrar’s office. If you stop attending a course without officially withdrawing from it, you will receive an automatic “NC” in the course. Before you drop a
course, speak with the DPT Program Director before contacting the Registrar. Full details regarding withdrawal from a course or withdrawal from the university are available in the UMHB Graduate Catalog.

**Students with Disability Services and Accommodations**

It is the student’s responsibility to request disability accommodations. If you require an accommodation for a disability, contact Disability Services, as early as possible in the term. More information about accommodations and disability-related support is available on the [Disability Services Page of the UMHB website](#).

**Priority of the Catalog**

The Graduate Catalog provides information about the rules and policies of the University of Mary Hardin-Baylor. Should a discrepancy between this syllabus and the Graduate Catalog be discovered, the policy stated in the Graduate Catalog has priority.

**Attendance**

Attendance during clinical practicums and professional experiences is mandatory. Absence for any reason must be reported to DCE, ADCE or designated faculty and CI at the facility prior to time of absence. Throughout the entirety of the clinical education experiences a student will be allowed to miss no more than a total of 5 days for illnesses, emergencies, and unforeseen circumstances. Any additional days missed must be made up during that clinical experience or during a later rotation as determined by the CI/SCCE and DCE/ADCE or designated faculty.

When the student cannot attend clinical on a day that it is scheduled, the student must immediately notify the clinical facility as well as the faculty member designated as the course instructor. The student should obtain a telephone number and discuss the procedure of notifying the clinical facility and faculty for unexpected absences. Failure to notify the clinical facility prior to the beginning of the scheduled clinical day is unacceptable and may place the student and clinical placement in jeopardy. The student should notify the course instructor as per the course guidelines. The student should then present the faculty with a plan to complete the lost clinical time within the DPT Program’s rules regarding absence limitations. The student must complete the hours within the prescribed time frame. Failure to complete clinical hours will result in an incomplete for the course. Students are not to share or switch clinical days/times with other students.

In the event of inclement weather students are to follow the attendance policies of the facility to which they are assigned. It is expected that students will use their best judgment in regards to their own personal safety.

Students should promptly contact the Student Disability Services office directly to request excused absences for serious medical conditions. Such approved disability accommodations are not applied retroactively.

Students should promptly contact the Title IX office directly to request excused absences for pregnancy.

Refer to the UMHB Graduate Catalog for additional information regarding absences.

**Please note that regular, on-time attendance in class, laboratory, and clinicals is an important component of professional behavior. Students may be penalized on the professionalism component of a**
course grade for being tardy or for non-participation in learning activities due to missing class, or students may receive an academic alert or academic warning for unexcused absences.

Use of Personal Technology

Use of personal technology devices for anything other than academic purposes in the classroom, lab, or clinical setting during instructional or patient care time is prohibited. Students must refrain from using cell phones, tablets, laptops and similar devices for non-educational purposes (i.e. messaging, games, email, web browsing) during class and clinical time. A faculty member may instruct the student to put the device away, or may direct the student to leave the classroom. The faculty member may choose the action deemed most appropriate for the situation.

If a student is expecting an emergency phone call, the student must notify the faculty member prior to the beginning of class or clinical time. The student must step outside of the room before answering an emergency phone call, or wait until a more appropriate time to return the call.

Cell phones should be turned off while in the clinical environment and stored away from the patient care areas. If the cell phone is used during a break, it should be turned back off at the end of the break.

Students in the Doctor of Physical Therapy program are expected to exercise discretion in the use of social media and respect the professional reputation of the student, faculty, and program. Students are not permitted to post any course related materials on any public website or social media or send such materials to another person within or outside of the DPT program (e.g. students in the same or different cohort, clinical instructors, friends). Course materials include, but are not limited to, photos/videos of instructor lectures or demonstrations; photos/videos of faculty, students, volunteers or others during any type of learning activity; homework assignments, quizzes, or examinations; any materials related to research projects. Discussion of tests and other course assessment techniques through these types of venues is also prohibited. Students who violate academic integrity standards through social media will be subject to appropriate sanctions under the Academic Integrity policy.

Professional Demeanor & Dress Code: (Refer to the Student Handbook)

Students are required to dress in a manner that maintains the image of a professional physical therapist while in the clinical setting. The trunk region should be covered at all times and in all body positions in clinical situations. As representatives of UMHB, students should be guided by professionalism, modesty, and good taste in choice of attire each day. Students are prohibited from wearing clothing or exhibit any tattoo that displays sexually suggestive materials or advocates alcohol, drug use, profanity, tobacco, racism or other concepts in conflict with the University’s Christian principles. Students are to follow specific guidelines for professional dress as determined by their assigned clinical facility.

Personal Appearance and Habits:

1. Students are expected to demonstrate exemplary grooming and hygiene. Students will abide by the following guidelines at all times:
2. Hair must be neatly groomed or styled; extreme hairstyles or colors are not acceptable. Long hair should be tied back to avoid interference with lab or patient care activities.
3. Fingernails must be clean, well-maintained, and trimmed. Fingernails should not extend beyond the tip of the finger.
4. Beards must be well-maintained and neatly trimmed. Beards may interfere with the proper use of certain required safety equipment, such as particulate respirator masks.
5. Facial make-up should be professional. No body odors (including smoke) should be detectable.
6. Perfumes, colognes, and aftershaves should be used sparingly or not at all.
7. Jewelry piercings other than in the ears is prohibited during academic and clinical activities. Earrings are limited to no more than 2 per ear, and long earrings may not be worn. Any jewelry that might interfere with patient simulation or patient care should be avoided.
8. Students are not to eat/drink/chew gum while in clinical or laboratory settings.

Assignments and Grading

Clinical rotations utilize a grade of CR (credit) or NC (no credit). In certain circumstances, a grade of IP (in progress) may be assigned if the clinical rotation is not completed by the end of a semester. Timely completion of all assignments is expected. Should a student experience extenuating circumstances requiring an extension of an established due date, the student should contact designated faculty prior to established deadline to discuss.

Failure to complete assignments fully or timely will result in a grade of No Credit (NC) or In Progress (IP) being assigned for the clinical grade. Student must earn a minimum of 23 points through completion of assignments and other course requirements. A student will earn two points for each assignment that is turned in on time and fully complete. One point will be given for assignments that are turned in within 48 hours past the due date and/or partially completed. A zero will be given for failure to turn in an assignment or an assignment turned in over 48 hours past the due date. There is a total of 12 assignments in the course, plus points allotted for professional behaviors / interactions / communications for a total of 28 points. The midterm CPI, final CPI, and post-survey will not be given points but are expected to be turned in on time and complete.

Student Self Pre-Assessment: Each student will complete this one-page form prior to the clinical rotation. Specific details will be provided via Canvas. Students are encouraged to share their self-assessment with their clinical instructor for discussion.

Updates: Each student will complete a note detailing their experience from the previous one to three weeks and submit to the DCE/ADCE or designated faculty via Canvas. See details in Canvas for specific questions to answer and due dates/times. Additional phone/zoom updates may be scheduled.

Interprofessional Communication Reflection: Students will be asked to complete an interprofessional communication interaction and provide detail and reflection based upon instructions provided in Canvas.

Clinical Project/Presentation: Each student will complete a special project, case report presentation or in-service presentation during the clinical. The topic must be approved by the CI and the DCE/ADCE or designated faculty. Submission of the project/presentation must be made to the DCE/ADCE or designated faculty via Canvas as well as the clinical site.

CI/Site Evaluation: Each student will complete the “Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction” form during the clinical rotation.

Surveys: Each student will complete surveys related to interprofessional education as a means to evaluate readiness for interprofessional practice prior to rotation and competency at end of rotation. Other surveys to gather student feedback on clinical rotations may be assigned as needed.

Professional Behaviors/Interactions/Communications: Students are expected to maintain professional behaviors at all times and demonstrate timely, efficient, and professional communications with the
university and clinical site personnel. Instances of failure to meet these standards will result in point deductions in this category.

Student Self-Assessment: 2 points
Cl Details: 2 points
IPE Surveys (x2): 4 points
Periodic Update (x3): 6 points
Inservice/Special Project (Approval & Submission): 4 points
Interprofessional Communication Reflection: 2 points
PTSE Completion (x2): 4 points
Professional Behaviors/Interactions/Communications: 4 points
TOTAL POINTS: 28 points

Student Evaluation and Assessment:
The Director of Clinical Education/Assistant Director of Clinical Education will assign grades for clinical education courses based on feedback provided by the clinical instructor(s). The electronic CPI will be utilized during the formal assessment for this clinical experience by the student and the clinical instructor at the midterm and final week.

Outline/Course Schedule
Note: The schedule may be altered at the discretion of the professor. Students will be informed in advance of scheduling changes that affect student grades.

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<td>8/14/2022</td>
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<td>Survey: Readiness for IPE</td>
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APPENDIX B: MAYBORN COLLEGE OF HEALTH SCIENCES DRUG AND ALCOHOL POLICY

DRUG AND ALCOHOL POLICY FOR MAYBORN COLLEGE OF HEALTH SCIENCES STUDENTS

Purpose and Scope
This policy applies to all MCHS students who participate in clinical learning experiences as a required component of their coursework/degree plan.

The purpose of this Drug and Alcohol Policy is:

1. To deter drug and alcohol use among MCHS students by providing information, testing, and resources, and to provide discipline if necessary;
2. To protect MCHS students, patients, fellow students, faculty, staff, and others with whom they have contact from potential injury as a result of the misuse of drugs and alcohol;
3. To provide a testing program to identify any MCHS students who are improperly using drugs and to assist them, through the provision of resources, before they injure themselves or others or become physiologically or psychologically dependent;
4. To provide a mechanism to support MCHS students if confronted with the pressure to use drugs and alcohol; and
5. To foster safety and integrity in UMHB’s MCHS programs.

Information for all UMHB students on the physiological and psychological dangers inherent in the misuse of drugs and alcohol and the health related risks inherent in the misuse of drugs and alcohol, as well as available resources, can be found at: CLICK HERE

MCHS students are expected to use good judgment at all times to ensure a positive educational and clinical experience. MCHS students must understand the importance of their personal choices and responsible behavior with regard to drugs. Good judgment dictates that MCHS students remove themselves from situations involving alcohol and drugs to avoid possible sanctions.

Any student enrolled in a MCHS program is choosing to abide by all terms of this policy and consents to all aspects of this policy.

This policy is not to be construed as a contract between UMHB and MCHS students. However, signed consent and notification forms shall be considered confirmation of the MCHS student’s agreement to the terms and conditions contained in this policy and shall be a condition of participation in the MCHS programs requiring clinical education experiences.

UMHB reserves the right to update or change this policy at any time, and will notify MCHS students of any changes or revisions.

General
The university is committed to the spiritual, mental, social, and emotional development of students and believes that
growth in these areas is greatly impaired by mind-altering substances. Education and learning are especially impaired by alcohol abuse and other drug use. It is the goal of the university to provide an alcohol and drug-free environment in which to live, work, and learn, to discourage the use of alcohol and drugs and to promote sobriety. The UMHB community cares deeply about the health and safety of our students. Furthermore, UMHB recognizes the heightened dangers associated with alcohol and drug use. The consequences of life choices and decisions that students make extend far beyond the college experience.

Therefore, the possession, use, sale, purchase, manufacturing, or distribution of alcohol, illegal or controlled substances, mind or perception altering drugs, or the misuse of chemicals such as glues or solvents, is strictly prohibited on campus and at all university sponsored events, trips, and off-campus clinical educational assignments. Intoxication or impairment, on or off campus is a violation of the Student Standards of Conduct. Any student who engages in conduct that violates the UMHB Student Standards of Conduct or federal, state, or local laws is subject to discipline, whether or not civil or criminal penalties are also imposed for such conduct.

The only exception is the lawful use of prescription medications by the person for whom the medication was intended or the reasonable use of over-the-counter medications for their intended purpose. If MCHS students are taking prescription medications that may impair their ability to safely provide patient care, operate equipment or other safety-sensitive educational activities, he/she is required to recuse him/herself from that activity and discuss implications with their program director/dean (no underlying medical information need be provided during this discussion). The student may be referred to UMHB’s Disability Services Office to determine what, if any, reasonable accommodation may be provided. See section on Medical Exceptions for more information regarding prescription medications.

Refusal to Participate

MCHS students are free to decline to consent to drug testing under this policy. However, it will be understood that any MCHS student (a) who declines to participate in testing or (b) who does not sign the required forms in conjunction with this policy is voluntarily and immediately withdrawing from participation in the MCHS program, in which case the university’s applicable grading, housing withdrawal (if applicable), and refund policies shall apply.

Mandatory Disclosure of Arrest or Legal Citations

Except for traffic violations (i.e. speeding ticket, parking tickets), all UMHB students are required to self-report to the dean of students (or to submit the report by another legitimate source such as spouse or legal counsel) the existence of any charge or indictment or information filed in connection with an alleged violation by the student of any federal, state, or local statute, rule, or regulation punishable as a crime (including but not limited to those associated with alcohol or drug use/possession/distribution) within three (3) calendar days of charges being filed.

Additionally, MCHS students must report the matter directly to their program director or dean within three (3) calendar days of the charges being filed.

UMHB Alcohol Policy

The university is committed to the spiritual, mental, social and emotional development of students and believes that growth in these areas is greatly impaired by mind-altering substances. Education and learning are especially impaired by alcohol abuse and other drug use. It is the goal of the university to provide an alcohol and drug-free environment in which to live, work, and learn, to discourage the use of alcohol and drugs and to promote sobriety. The UMHB community cares deeply about the health and safety of our students. Furthermore, UMHB recognizes the heightened dangers associated with alcohol and drug use. The consequences of life choices and decisions that students make extend far beyond the college experience.

Alcohol consumption is highly discouraged at all times. However, these are clear policy violations:
Texas state law sets the minimum age for the purchase and drinking of alcoholic beverages at 21 years of age. Underage drinking is a violation of state law and university policy.

The university’s policy on alcohol can be located at: https://go.umhb.edu/students/student-handbook

Drug Testing Program for MCHS Students

UMHB reserves the right to test any MCHS student for drugs at any time. Test results become a part of the MCHS student’s record and are subject to FERPA. Test results will not be disclosed except in accordance with this policy or as otherwise permitted by law. UMHB will outsource specimen collection, drug testing and secondary drug testing/medical officer review to a certified drug-testing vendor of its choice.

Drug Testing Procedure:

1. MCHS students selected for any type of drug testing, which may include pre-program admission, periodic, reasonable suspicion, reinstatement and/or follow-up drug testing will be personally notified by the program director or dean or his/her designee of the exact time and location of the test 1-2 hours prior to the test.

2. The MCHS student must then report to the collection site, within 15 minutes of their scheduled test.

3. Upon entering the collection station, the MCHS student will provide a photograph identification.

4. The MCHS student will be given directions on specimen collection by a collector who is an employee or agent of the certified drug testing vendor.

5. The MCHS student will be required to empty all pockets and remove any excessive clothing (i.e. hoodies, jackets, stocking caps, gloves, caps).

6. The MCHS student will be required to wash his/her hands.

7. The MCHS student will then enter the collection room and will void (under observation by a collection site employee of the same gender as the MCHS student, if required by UMHB). Urine samples of at least 100 ml, preferably 200 ml, must be given by the MCHS students under the observation of the collector. The only specimens accepted will be the ones given at this time and place.

8. The MCHS student will give their sample to the collector, where the sample will be split into two (2) identical containers in the presence of the MCHS student [A & B samples]. In the full presence of the MCHS student, labels will be placed over the two containers, sealing them with a tamper-proof seal and identification number. The MCHS student will confirm that their identification number matches the same identification number on the samples and the laboratory’s Chain of Custody Control Form. The MCHS student will initial and date the labels. The MCHS student will complete and sign the laboratory’s Chain of Custody Control Form.

9. If the specimen is incomplete or inadequate, the MCHS student must remain in the collection area under observation of the collector or his/her designee until the sample is collected.

10. All positive tests will be re-tested using the second (split) sample originally collected, unless there is clear indication that the positive test was caused by a medical prescription previously disclosed in writing by the MCHS student. The certified vendor will provide expertise in making such a determination. If the second test is negative, the first test will be considered negative.

Alcohol Testing Procedure: The procedure for alcohol testing will be determined by the laboratory.

Reasons for Testing
**Periodic drug testing** will be required for all MCHS students. Some programs may require post-acceptance, pre-enrollment testing. Additionally, certain hospitals and other clinical facilities where MCHS students participate in clinical experiences may require testing at certain times during a student’s participation in clinical experiences and/or written verification from the university of students’ periodic drug test results.

**Voluntary Testing:** A MCHS student may voluntarily request drug or alcohol testing from the university’s approved testing site if he/she wishes to present test results to the MCHS program (for example, during a review of a student conduct matter). The MCHS student should submit a request for voluntary testing directly to the program director or dean (do not contact the testing site directly). The university will schedule the test at the certified laboratory of the university’s choosing. If the voluntary test results are positive, the student may not recant and the university will impose appropriate sanctions based on the voluntary test results.

**Reasonable Suspicion Testing:** MCHS students may be drug and/or alcohol tested if there is reasonable suspicion of drug or alcohol use. Any UMHB student, faculty or staff member may report certain signs, symptoms, or changes in behavior that may cause him or her to suspect drug or alcohol use. Faculty and staff have a duty to quickly report any suspicions to the program director or dean, or other university administrator, who shall then determine appropriate action. However: If the suspicious behavior involves imminent danger to self or others while the student is on campus, the UMHB Campus Police should be notified immediately. If the suspicious behavior involves imminent danger to self or others while the student is participating in clinical experiences at an off-campus site, the facility’s security or the local police department should be notified immediately.

**Definition of Reasonable Suspicion**

Reasonable suspicion will be based on the observation of behavior or conduct, or the presence of certain physical and emotional characteristics or patterns, which are symptomatic of the use of certain drugs or alcohol. Reasonable suspicion includes, but is not limited, to:

1. Violation of state laws or university regulations. Examples include but are not limited to arrest or legal citation for DUI, violent conduct, assault and sexual assault, vandalism, theft.
2. Behavior changes or unexplained fluctuations in moods (i.e. inappropriate irritability, hostility, anxiety, anger or withdrawal).
3. Outward signs such as staggering, uneven gait, balance problems, slurred speech, excessive laughing or crying, odor of marijuana or alcohol, presence of drug paraphernalia, or the presence of a drug or alcohol itself.
4. Chronic fatigue or loss of vitality, decreased interest or effort in classes and clinical experiences, prolonged illness or injuries, unexpected weight and/or strength gains or losses.

In addition, should a MCHS student attempt to avoid notification of drug testing, either by avoiding calls/messages from the MCHS personnel, turning off cell phone, skipping class, or leaving town, the university may deem such behavior as reasonable suspicion.

**Procedures for Determining Reasonable Suspicion**

**Assessment:** If there is no apparent imminent danger to self or others, the MCHS student may be required to immediately vacate the areas of the facility populated by patients, students or others while an assessment is made. A faculty member may call upon another qualified faculty member or a trained clinical site employee (if applicable), if one is readily accessible, to assist in assessing reasonable suspicion.

If reasonable suspicion exists or if further consultation is prudent, the faculty member will immediately notify the program director or dean, or his/her designee. The program director or dean or his/her designee will decide whether the MCHS student should be (a) removed from the educational site as a safety measure and/or (b) referred for
immediate testing based on the reasonable suspicion standard, after evaluating the available information. This may or may not include direct observation of the MCHS student.

If the program director or dean, or his/her designee approves the testing, they will immediately schedule the test (to occur ideally within 1-2 hours) directly with the certified lab, notify the MCHS student, and arrange or coordinate transportation for the student to the testing site. If the MCHS student misses the scheduled test, he/she will be subject to university and MCHS sanctions, including suspension or dismissal from the MCHS program. The MCHS student will be given the opportunity to respond, either by phone, in person, or in writing if time allows, by presenting information he/she wants the program director or dean to consider. This is an opportunity to present information only, not to challenge the scheduling of a required drug or alcohol test.

**Transportation:** If there are no conditions or behaviors that would jeopardize the safety of the driver, when circumstances warrant, transportation will be provided to and after testing by university faculty or staff so that the MCHS student does not potentially endanger him/herself or others by operating a vehicle. Under no circumstances will another UMHB student provide transportation. The MCHS student is expected to fully cooperate in the transportation process.

If the university cannot provide transportation, assistance will be provided to the MCHS student in contacting a relative or friend to provide transportation to and after testing. If the MCHS student refuses transportation assistance and leaves the site against instructions, university may contact the local police to report a concern of a potentially impaired driver. If the student resides on campus, the dean of students will be notified that a potentially impaired student will be returning to campus housing (awaiting the test results if the MCHS student has been tested). The university may inspect the MCHS student’s campus housing for the presence of drugs or alcohol.

**Cessation of participation during a period of Reasonable Suspicion:** In the event of reasonable suspicion that improper drug or alcohol use may endanger the safety or health of the MCHS student or of patients, other students, faculty or staff of the university or of a clinical facility, The program director or dean, or his/her designee may place the MCHS student on an interim suspension status (classroom participation, clinical participation or both), awaiting the outcome of any testing.

Regardless of whether the MCHS student resides in campus housing, the dean of students will be notified so that he/she can assess if the MCHS student should be provided with additional instructions or interim safety measures (such as a temporary suspension from participation in athletics, student organizations or other university events or programs), awaiting the test results. The program director or dean will notify the dean of students of the test results.

If the test is negative, the MCHS student will be afforded the opportunity to make up any academic assignments missed during the interim suspension period.

**Sanctions and Interventions**

**Sanctions:** For any violation of this policy, the MCHS student will be required to attend and fully cooperate in a meeting with the program director or dean to explain the policy and answer questions. Sanctions will normally be communicated to the MCHS student at this meeting, unless further deliberation is required.

**For any violation of this policy, at a minimum:** The MCHS students will be required to attend initial counseling with a licensed UMHB counselor. The purpose of the counseling is to provide assistance, direction, and resources for MCHS students.

Ongoing treatment sessions and counseling may be required at the UMHB student Counseling Center or through referral to a community treatment resource. The nature and extent of counseling and/or other medical intervention that may be required will depend on the nature of the individual’s drug or alcohol involvement and the opinion of the professional counselor providing the counseling.

The MCHS students shall be responsible for any counseling service fees that may apply. The MCHS student will submit
written proof of attendance (redacted of any protected health information) to the program director or dean within 24 hours of completion of each session.

The dean of students will be notified, in order to review the impact of the policy violation (as applicable) to the student’s work-study assignment, possible inspection of his/her campus residence and other possible student misconduct.

**For Policy Violations Involving Alcohol:** In addition to the actions listed above, violations of the university’s policy on alcohol, including violations of the law while intoxicated, will result in sanctions. Legal citation from a law enforcement officer includes (but is not limited to):

1. Driving under the influence of drugs or alcohol
2. Public intoxication by drugs or alcohol
3. Underage possession of alcohol

Sanctions may include a period of or permanent suspension from the MCHS program and/or suspension or expulsion from the university.

**For Policy Violations Involving Test Protocol:** A MCHS student who does not report for their scheduled test, is more than 15 minutes late for their scheduled test, or does not follow collection protocol as determined by the laboratory will be subject to disciplinary action, up to and including permanent suspension from the MCHS program and/or suspension or expulsion from the university.

A MCHS student who attempts to substitute, manipulate, mask, or intentionally dilute a urine specimen will be subject to disciplinary action including permanent suspension from the MCHS program and/or suspension or expulsion from the university.

A MCHS student who falsely identifies him/herself as another MCHS student during the testing process will be subject to disciplinary action including permanent suspension from the MCHS program and/or suspension or expulsion from the university.

**For Positive Drug Test – 1st Offense:** For Positive Drug Test of Cocaine, Opiates, Heroine, PCP, and similar drugs will result in permanent suspension from the program.

A positive test of other drugs (including but not limited to marijuana) will result in suspension from the MCHS program for a minimum of 1 academic semester, up to and including permanent suspension.

The student will be referred to the dean of students for review of further sanctions, which may include suspension or expulsion from the university.

**Reinstatement Process:** Any MCHS student who is suspended for a first offense of this policy must reapply for program (and possibly university) admission, if eligible, as outlined in the program’s student handbook or other university publication. In addition to those requirements, the following will apply:

**Reinstatement Testing:** For safety, individuals who are reapplying for program admission due to violations of this policy must, at his/her own expense, undergo a reinstatement drug test at a certified lab of the university’s choosing, prior to being considered for reinstatement in the MCHS program. A positive reinstatement test will be considered a second positive test for purpose of sanctions outlined in this policy.

**Reinstatement clearance by a qualified Physician:** For safety purposes, individuals who are reapplying for program admission due to violations of this policy must, at his/her own expense, undergo and submit the results of a physical exam by a qualified Physician to determine fitness for participation in the MCHS program prior to being considered for reinstatement for participation in the MCHS program.

**Reinstatement clearance by UMHB Counselor:** For safety, the UMHB Counselor must concur that the individual’s
behavioral condition warrants reinstatement, whether or not the prescribed course of counseling has been completed.

**Follow-Up Testing:** MCHS students who test positive or who self-refer (see Self-referral section of this policy for more details) may be required to re-test at any time during his or her participation in the MCHS program with or without notice as determined by the program director or dean, or as recommended by counselors involved with the MCHS student’s counseling, in order to monitor if the MCHS student has refrained from further violations of this policy. If subsequent testing is positive (allowing for systemic dissipation of the drugs which resulted in the first positive, if applicable), it will be considered a second positive test for purpose of sanctions outlined in this policy.

**For Positive Drug Test – 2nd Offense:** Immediately upon notification of the second positive test result, the MCHS student will be dismissed from the MCHS program. The MCHS student will be referred to the dean of students for review of further sanctions, which may include suspension or expulsion from the university.

**Exceptions**

**Medical Exception:** UMHB recognizes that prescription drugs are used for legitimate medical purposes. Accordingly, UMHB allows exceptions to be made for those MCHS students with a documented medical history demonstrating a need for regular use of a lawfully prescribed substance that results in a positive drug test. It is recommended that the student have proof of the prescription available as supporting evidence.

Although every effort will be made through the certified lab’s MRO process to clear a student’s positive drug test the student asserts is caused by a lawfully prescribed drug, the student may experience a delay in participating in clinical rotations, due to various outside clinical site rules. UMHB is not responsible for any impact such delay might have on the student’s academic progress.

**Self-Referral Exception** (for disclosure PRIOR to receiving notification of selection for drug testing - Safe Harbor Program): Any MCHS student may refer himself/herself for evaluation or counseling by contacting the program director or dean. This arrangement is called Safe Harbor because no MCHS program or university sanctions are imposed upon the MCHS student who has made a personal decision to seek professional assistance. The university reserves the right to limit academic participation and/or impose other interim safety measures in the event the MCHS student is participating in program elements requiring patient contact or other safety-sensitive elements. While it is not considered a sanction under these circumstances, the MCHS student may experience delayed academic progress as a result of these interim measures, and university policies regarding grading and refunds will apply. A MCHS student may not initiate Safe Harbor after they have been informed of their participation in an impending drug test.

Upon entry of the Safe Harbor program, the MCHS student will undergo drug testing in order to establish baseline levels for any substances. The MCHS student will be required to have an initial consultation with the UMHB Counseling Center to determine an appropriate treatment plan. A MCHS student will be permitted to remain in the Safe Harbor Program for a reasonable period of time, not to exceed sixty (60) days, as determined by the treatment plan.

A MCHS student whose participation in the program has been limited as described above will not be permitted to return to participation in the MCHS program until the counselor has interviewed the MCHS student following the conclusion of the recommended treatment (or stage of treatment, as applicable) and has determined that reentry is appropriate. The MCHS student will be required to undergo reinstatement drug testing as part of the reentry evaluation. Failing to complete the treatment recommended by the counselor, having a positive drug test result after entering the Safe Harbor Program that is determined to be a result of new drug use, or having a positive result on a reinstatement drug test will be deemed a first offense under this policy, Safe Harbor will end and appropriate sanctions will be imposed. A MCHS student may enter Safe Harbor only one time in his/her enrollment in the MCHS program. If the MCHS student regains his or her eligibility to participate in the MCHS program, he or she may be required to undergo unannounced follow-up tests at the discretion of the program director or dean and/or the UMHB counselor. A positive drug test result at any time after satisfactorily completing the Safe Harbor Program will count as the first positive drug test result.

Self-Referral (for disclosure at any point AFTER receiving notification of selection for drug testing but prior to receiving
drug test results):

Any MCHS student who, upon being notified for selection of drug testing, admits to a violation of this policy, will still be required to take the drug test. If the test result is positive, the sanctions outlined in this policy will apply. Mandatory participation in counseling, reinstatement drug testing and follow-up testing will be required regardless of the test result.

**Testing Appeal and Request to Reconsider Sanctions**

For safety purposes, the sanctions imposed shall be immediately implemented. Testing appeals and/or requests to reconsider sanctions do not delay this implementation.

**Testing Appeals:** When a student’s sample tests positive for a prohibited substance, the University has established a standard review procedure with its testing laboratory. The positive sample is sent to a second, outside certified laboratory for a confirmatory test which examines for the substance identified in the first drug screening. If the confirmatory test is also positive, then the test is reported to the University as a positive drug test.

**When Appeal Is Available:** There is no appeal or MRO review for a positive test indicating use of marijuana. If a student has a test which is positive for any other prohibited substance and he/she has disclosed, as required by University policy, that he/she is using a prescription medication, the student may, within 24 hours following receipt of the notice of the positive test, appeal the result in writing to the Program Director or Dean (as applicable to the student’s program) by requesting the testing laboratory's Medical Review Officer (MRO) to review the test results. The cost of this review by the MRO is borne by the student unless a medical exception applies (see policy section regarding Medical Exceptions).

Upon the student’s request for MRO review, the Program Director or Dean will:

- formally request the laboratory to arrange MRO review
- notify the Dean of Students that an MRO review has been requested, and of the results.

MRO review findings will be final regarding the results of the drug test and no further appeal regarding the test results is allowed.

**Request to reconsider sanction:**

Students may not request reconsideration for sanctions imposed by MCHS for a positive drug test. Only sanctions imposed for alcohol violations or for violations of drug testing protocol (i.e. masking, failure to report/to report to test within 15 minutes of scheduled test time, etc.), may be reconsidered at the student’s request.

**Step One:** MCHS students who wish to request an eligible reconsideration of a sanction must submit a written request to the program director or dean within five (5) business days of receiving notice of the sanction imposed. A committee comprised of the program director or dean, and at least two MCHS program faculty members who were not involved in the incident review or sanction process will review the sanction. The decision made by this committee will normally be communicated to the MCHS student within five (5) business days of the meeting.

**Step Two:** MCHS students who wish to request a reconsideration of the committee’s decision must do so in writing to the MCHS Executive Dean within five (5) business days of receiving notice of the committee’s decision. The MCHS Executive Dean may interview anyone who may have pertinent information and request information or counsel from other persons as deemed appropriate. The MCHS Executive Dean will provide a written decision to the MCHS student and the program director or dean within a reasonable time, normally within ten (10) days after receiving the written request, although the university’s schedule may require a longer period of time. The MCHS Executive Dean may affirm the decision of the committee, make a different determination of the facts, or change any sanctions imposed on the
student. The decision of the MCHS Executive Dean is final.

Any MCHS student who is interviewed as a part of a disciplinary proceeding shall treat any information disclosed to the MCHS student in the course of the interview as confidential. A violation of this rule of confidentiality is misconduct which is subject to discipline.

A MCHS student who is unable or unwilling to participate in the disciplinary process remains subject to discipline and sanctions. Students are always entitled to consult legal counsel or any other advisor, but no advisor is entitled to attend or participate in any university meeting or interview.

 Appeals for sanctions imposed by the dean of students under the Student Conduct policy should follow the appeal process outlined in the Student Handbook.

Dr. Colin Wilborn Executive Dean

Date of Origin: July 22nd 2021
Revised: August 2, 2021
Revised: November 3, 2021
Physical therapy is a demanding profession that requires a wide range of cognitive, sensory, and motor skills. A physical therapist is expected to independently perform all aspects of the physical therapy role. Core segments of the program include clinical experiences in which the student will be required to participate in and demonstrate proficiency in providing therapeutic services. Graduates of the UMHB DPT program who pass the licensure examination will be prepared to enter practice in a variety of settings and perform all responsibilities of the professional role. Based upon the expectations and requirements of the profession, this Essential Functions Statement includes a list of essential functions/skills that must be met for entry into the program and progression through the program. The following list of skills is illustrative and does not represent an all-inclusive listing of the functions of a physical therapist. Reasonable accommodations may be requested to enable an individual with disabilities to achieve these essential functions.

The Doctor of Physical Therapy Student must possess:

Observational skills (including vision, hearing, and somatic sensation) sufficient to perceive all information necessary for effective patient/client management inclusive of functional use of vision, hearing, olfaction and tactile sensations.

- Observe lecture and laboratory demonstrations
- Read and interpret equipment dials, assessment graphs, patient charts, professional literature, and notes from patients, physicians, and other health professionals
- Effectively evaluate auditory information during assessment of lungs, heart, pulses, blood pressure, and joints.
- Observe another individual at a distance greater than 20 feet as well as near proximity and be able to notice movement patterns, facial expressions, etc.
- Monitor and assess physical, emotional, and psychological responses of another individual
- Determine and comprehend dimensional and spatial relationships of structures
- View video, graphics and written word on the computer screen or DVD monitor
- Perform a physical assessment through hands-on application that may include palpation of anatomical structures, assessment of muscle tone, temperature, depth, etc.
- Monitor and interact with patients, other professionals and families through a variety of media
- Hear and react appropriately to alarms, emergency signals, timers and cries for help
- Hear verbal instructions, audio, video, DVD or computer media in the classroom, lab or clinic
Communication ability sufficient to appropriately communicate in verbal, nonverbal, and written formats with all individuals when engaged in physical therapy practice, research, and education, including patients, clients, families, care givers, practitioners, consumers, payers, and policy makers.

- Receive, write and interpret written and verbal communication in a timely manner
- Effectively communicate with other individuals
- Use appropriate verbal, nonverbal, and written communication
- Demonstrate interpersonal skills as needed for productive classroom discussion, respectful interaction with classmates and faculty, and development of appropriate therapist-patient relationships.

Motor ability sufficient to safely perform the job of a physical therapist in a wide variety of settings.

- Move within rooms and from room to room, including maneuvering in small spaces around equipment and other individuals
- Move up and down stairs/ramps/curbs with other individuals
- Perform a thorough examination of another individual, including but not limited to palpation, auscultation, percussion, movement of limbs and spinal segments, and manipulation of tools commonly used for screening/testing
- Perform interventions on another individual, including but not limited to moving another individual’s body parts; moving another individual’s body for transfers, gait, positioning, mobilization; moving, maneuvering, applying and adjusting clinical equipment; and effectively guiding, facilitating, inhibiting, and resisting movement and motor patterns
- Perform assessment and intervention techniques with proper positioning, hand placement, direction and amount of force
- Transfer, move, and assist another individual in walking and other daily activities without injury to other or self
- Participate in lecture, lab, and other learning activities for 30+ hours per week, including but not limited to maintaining an upright posture for up to 8 hours in an average academic day
- Legibly record information for academic and clinical learning and patient care activities, including but not limited to written assignments, exams, evaluations, progress notes, and other required materials in a medical record
- Perform specific physical tasks, including but not limited to lifting up to 50 pounds, twisting, bending, stooping, squatting, crawling, reaching above shoulder level, kneeling/half-kneeling, pushing/pulling, using hands repetitively, grasping, demonstrating manual and finger dexterity, and coordinating verbal/manual instruction

Intellectual-conceptual, integrative and quantitative abilities sufficient to use integrative and quantitative abilities and make decisions. These cognitive skills are critical for the physical therapist to make clinical decisions during the examination, evaluation, diagnosis, prognosis, and intervention activities for patient/client management. Students must be able to:
• Apply critical thinking processes to his/her work in the classroom and clinical settings
• Retain and use information in order to solve problems, evaluate patients, and generate new ways of processing or categorizing symptoms
• Organize, prioritize, analyze, and evaluate detailed and complex information within a limited time frame

Behavioral and social skills sufficient to
• Fully use his/her intellectual ability, exercise good judgment, and complete all responsibilities related to the academic and clinical requirements of the program
• Comply with the ethical standards of the profession
• Cope with the mental and emotional rigors of a demanding educational program within the set time constraints
• Acknowledge and respect individual values and opinions in order to foster harmonious working relationships with others
• Accurately self-assess abilities, accept criticism, and assume responsibility for maintaining professional behavior
• Cope with the stress of heavy workloads, demanding patients, and critical clinical situations while continuing to function effectively
• Interact appropriately with individuals from all levels of society, ethnic backgrounds, and belief systems

Lab and Classroom Exercises: Students will practice various therapeutic techniques in the course of required lab and, occasionally, lecture or classroom courses. In order to provide students both a complete perspective on various therapies and the opportunity to practice, students are expected to practice physical therapy techniques on one another. Any required participation in such exercises will be under the supervision of university faculty, instructors, or clinicians. Any student who is uncomfortable with any classroom or lab exercise should discuss his or her concern with the DPT Program Director.

ESSENTIAL FUNCTIONS ACKNOWLEDGEMENT AND AGREEMENT
I acknowledge that I am able to perform the Essential Functions identified above with or without reasonable accommodations. If I require any accommodation, I understand that it is my responsibility to contact the university's Director of Counseling, Testing and Health Services and comply with the University's policy on requesting accommodations.

_______________________________________  ________________________
Print Name                                  UMHB Student ID #

_______________________________________  ________________________
Student Signature                           Date
# UMHB DPT Proposed Clinical Facility Information Form

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<th><em>Date:</em></th>
<th><em>Person completing form:</em></th>
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<tr>
<th>Interest in UMHB Clin Affiliation</th>
<th>Yes or No</th>
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<td>If Yes: use UMHB affiliation agreement OR their OWN</td>
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<th><em>Contact person or SCCE:</em></th>
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<td>Director:</td>
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<td>Other locations:</td>
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<th>Have they had other students?</th>
<th>Yes or No; If Yes list types of students:</th>
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<th>Rotation preferences</th>
<th>Part-time and/or Intermediate/Advanced/Final</th>
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<th>Contact info for Contract:</th>
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Date Contract Signed and Signed by

*BOLD information* to completed by individual submitting form to DCE or ADCE (see pg. 23 for more information)
APPENDIX E: CSIF WEB INSTRUCTIONS FOR SCCE

Updating Your CSIF

1. Log in to CSIF Web and click the 20XX CSIF Web Surveys tab on your home page.

2. From the Current Site Surveys page, use the drop-down to select the clinical site you wish to edit.

3. Click one of the red topic names to access the sections that need to be completed or click directly on one of the sections to edit that particular section.

4. In the Action column, click Edit Now to enter or revise information associated with a particular section if you clicked directly on a particular section earlier, that section opens and is immediately editable.

5. To complete the CSIF, fill in the information.
   - Note: CSIF Web has an Auto-Save feature. When you enter in data or select information from a list or drop-down, the data automatically saved when you move on to the next field. This is indicated by a spinner, and then a green checkmark.

6. At the end of each section, look for the "Section Sign Off" message. Click the box that says: "This section has been completed. If you do not click the "This section has been completed" box for each section, those sections will be "In Progress". The Last Update column shows the Date and Time that the section was last updated.

7. Click another topic tab to continue completing the CSIF, or, if you are finished editing the CSIF, click Log Out.

https://help.liaisonedu.com/Clinical_Assessment_Suite_Help_Center/CSIF/Cl/Updating_Your_CSIF
APPENDIX F: PT CPI ONLINE TRAINING AND ASSESSMENT FORM

Quick Start Guide for the CPI Web Training Modules and Assessment

FOR NEW USERS

Access to PT and PTA CPI Web will only be provided if you complete the training session and complete the PT and PTA CPI/WEB Assessment (CPI Assessment). You will only have to complete the CPI Assessment once. However, you are encouraged to review the freely-available training modules prior to each supervised student.

This document contains instructions on how to access the required:
I. CPI New User Training Modules (Training Modules) on the Clinical Assessment Suite Help Center (hosted by Liaison International)
II. CPI Assessment on the APTA Learning Center

PT and PTA CPI New User Training Modules

- The self-guided training includes PowerPoint modules to help you successfully use the CPI Web.
- You can complete the training module-by-module or all at once.
- They are accessible anytime and the training is FREE.

The Training Modules can be accessed in 2 ways:

1. From the Home Page of the Clinical Assessment Suite Help Center
   a. Navigate to the Clinical Assessment Suite Help Center at:
      https://help.liaisonedu.com/Clinical_Assessment_Suite_Help_Center
   b. Click on the “Click here”
      (for quick access to the CPI New User Training Modules)

2. From the CPI New User Training Modules webpage:
   a. Navigate to the CPI New User Training Modules at:
      https://help.liaisonedu.com/Clinical_Assessment_Suite_Help_Center/Customer_Support_and_Resources/Webinars_and_Downloads/CPI_Training_Files
Quick Start Guide for the CPI Web Training Modules and Assessment

b. To access the PT Web CPI Training Module, click on the “APTA Physical Therapist (PT) CPI” link.

CPI New User Training Modules

Clinical Assessment Suite: New User Training Files

<table>
<thead>
<tr>
<th>File</th>
<th>Description</th>
</tr>
</thead>
<tbody>
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<td>This is the first step in your journey to becoming a physical therapist.</td>
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CPI New User Training Modules

Clinical Assessment Suite: New User Training Files

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After clicking any of the access links described above, you will be taken to the first slide of the pdf file of the Training Modules where you can scroll to advance the slides.

Continued on website:
APPENDIX G: SAMPLE LEARNING ASSIGNMENTS FOR THE SPT DURING CLINICAL EXPERIENCES

Ideas for assignments for Students during a clinical placement:

1. Get to know the student
   a. Learning style or personality inventory (there are free tests/tools available online)

2. Orientation
   a. Lay-out any non-negotiable expectations (ie. dress code, no texting, no unrelated social reading “People Magazine”, etc)
   b. Site specific policies and procedures/manuals
   c. Safety Considerations/guidelines

3. Review the programs objectives for that clinical placement
   a. Write specific short term objectives to help achieve the long-term objectives. (please contact the program Director of Clinical Education if you have having difficulty with this).

4. Daily/Weekly planning and debriefing
   a. Utilize Weekly planning tool (don’t be afraid to have the student fill this out)
   b. Have student write a weekly or daily SOAP note on their experience (Not about a specific patient). This can give insight into what a student may feel he or she is struggling with as well as other areas that need to be addressed from his or her self-assessment.
   c. Journaling

5. Paper Patients
   a. Scenarios that you have written up designed to improve the student’s ability to perform critical thinking, communication, problem solving, and interpersonal skills.
   b. If you do not have any case studies a student could be assigned to come up with some scenarios for future students.
      i. Include aspects related to:
         1. examination,
         2. developing plan or care,
         3. interventions,
         4. ethical considerations,
         5. patient and family education needs,
         6. inter-professional communication, and
         7. discharge needs/recommendations

6. Interdisciplinary Opportunities
   a. Shadowing another therapist (OT, PTA, SLP etc)
   b. Spending part of a day with admin staff to see more of the behind the scenes aspect
   c. Observe a pertinent surgery or even find online videos that relate to patient scenarios or professional behaviors.

7. Provide a list of specific resources to review/discuss (have future students expand the list)
   a. Journal Reviews- What new knowledge can the student help provide
   b. Search for new testing/examination, apps, interventions, etc.

8. Special projects
   a. In-services
   b. Developing a booklet or pamphlet that may be provided to other clinicians or patients

9. For full-time students have them be the primary therapists for a selected patient form ‘start to finish’ based on the complexity of the patient and his or her needs.

https://cpi2.amsapps.com
APPENDIX H: PT CPI WEB 2.0 INSTRUCTIONS FOR CI

Logging in to CPI Web

1. To log in to the site, navigate to https://cpi2.amsapps.com
2. Enter your username and password
   - Your username is your email address
   - If you don’t know your password, click Forgot User Name or Reset New Password. Enter your email address to receive an email with further instructions. Note: The link included in the email expires after 24 hours. Prior to logging in, close out of the site from your internet browser. If your session expires, repeat the steps above to receive another email.

Changing PT CPI Web Password:

- It is highly-recommended that you change your password after you log in.
- Note that your password is case sensitive and must be typed in exactly as it appears in the information box.

https://cpi2.amsapps.com
## APPENDIX I: CPI ANCHOR DEFINITIONS

### DEFINITIONS OF PERFORMANCE DIMENSIONS AND RATING SCALE ANCHORS

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>DEFINITIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Performance Dimensions</strong></td>
<td></td>
</tr>
<tr>
<td>Supervision/Guidance</td>
<td>Level and extent of assistance required by the student to achieve entry-level performance.</td>
</tr>
<tr>
<td></td>
<td>- As a student progresses through clinical education experiences, the degree of supervision/guidance needed is expected to progress from 100% supervision to being capable of independent performance with consultation and may vary with the complexity of the patient or environment.</td>
</tr>
<tr>
<td>Quality</td>
<td>Degree of knowledge and skill proficiency demonstrated.</td>
</tr>
<tr>
<td></td>
<td>- As a student progresses through clinical education experiences, quality should range from demonstration of limited skill to a skilled performance.</td>
</tr>
<tr>
<td>Complexity</td>
<td>Number of elements that must be considered relative to the task, patient, and/or environment.</td>
</tr>
<tr>
<td></td>
<td>- As a student progresses through clinical education experiences, the level of complexity of tasks, patient management, and the environment should increase, with fewer elements being controlled by the CI.</td>
</tr>
<tr>
<td>Consistency</td>
<td>Frequency of occurrences of desired behaviors related to the performance criterion.</td>
</tr>
<tr>
<td></td>
<td>- As a student progresses through clinical education experiences, consistency of quality performance is expected to progress from infrequently to routinely.</td>
</tr>
<tr>
<td>Efficiency</td>
<td>Ability to perform in a cost-effective and timely manner.</td>
</tr>
<tr>
<td></td>
<td>- As the student progresses through clinical education experiences, efficiency should progress from a high expenditure of time and effort to economical and timely performance.</td>
</tr>
<tr>
<td><strong>Rating Scale Anchors</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Beginning performance</strong></td>
<td>• A student who requires close clinical supervision 100% of the time managing patients with constant monitoring and feedback, even with patients with simple conditions.</td>
</tr>
<tr>
<td></td>
<td>• At this level, performance is inconsistent and clinical reasoning* is performed in an inefficient manner.</td>
</tr>
<tr>
<td></td>
<td>• Performance reflects little or no experience.</td>
</tr>
<tr>
<td></td>
<td>• The student does not carry a caseload.</td>
</tr>
<tr>
<td><strong>Advanced beginner performance</strong></td>
<td>• A student who requires clinical supervision 75% – 90% of the time managing patients with simple conditions, and 100% of the time managing patients with complex conditions.</td>
</tr>
<tr>
<td></td>
<td>• At this level, the student demonstrates consistency in developing proficiency with simple tasks (e.g., medical record review, goniometry, muscle testing, and simple interventions), but is unable to perform skilled examinations, interventions, and clinical reasoning skills.</td>
</tr>
<tr>
<td></td>
<td>• The student may begin to share a caseload with the clinical instructor.</td>
</tr>
<tr>
<td><strong>Intermediate performance</strong></td>
<td>• A student who requires clinical supervision less than 50% of the time managing patients with simple conditions, and 75% of the time managing patients with complex conditions.</td>
</tr>
<tr>
<td></td>
<td>• At this level, the student is proficient with simple tasks and is developing the ability to consistently perform skilled examinations, interventions, and clinical reasoning.</td>
</tr>
<tr>
<td></td>
<td>• The student is capable of maintaining 50% of a full-time physical therapist’s caseload.</td>
</tr>
<tr>
<td><strong>Advanced intermediate performance</strong></td>
<td>• A student who requires clinical supervision less than 25% of the time managing new patients or patients with complex conditions and is independent managing patients with simple conditions.</td>
</tr>
<tr>
<td></td>
<td>• At this level, the student is consistent and proficient in simple tasks and requires only occasional cueing for skilled examinations, interventions, and clinical reasoning.</td>
</tr>
<tr>
<td></td>
<td>• The student is capable of maintaining 75% of a full-time physical therapist’s caseload.</td>
</tr>
<tr>
<td><strong>Entry-level performance</strong></td>
<td>• A student who is capable of functioning without guidance or clinical supervision managing patients with simple or complex conditions.</td>
</tr>
<tr>
<td></td>
<td>• At this level, the student is consistently proficient and skilled in simple and complex tasks for skilled examinations, interventions, and clinical reasoning.</td>
</tr>
<tr>
<td></td>
<td>• Consults with others and resolves unfamiliar or ambiguous situations.</td>
</tr>
<tr>
<td></td>
<td>• The student is capable of maintaining 100% of a full-time physical therapist’s caseload in a cost-effective manner.</td>
</tr>
<tr>
<td><strong>Beyond entry-level performance</strong></td>
<td>• A student who is capable of functioning without clinical supervision or guidance in managing patients with simple or highly complex conditions, and is able to function in unfamiliar or ambiguous situations.</td>
</tr>
<tr>
<td></td>
<td>• At this level, the student is consistently proficient at highly skilled examinations, interventions, and clinical reasoning, and is capable of serving as a consultant or resource to others.</td>
</tr>
<tr>
<td></td>
<td>• The student is capable of maintaining 100% of a full-time physical therapist’s caseload and seeks to assist others where needed.</td>
</tr>
<tr>
<td></td>
<td>• The student is capable of supervising others.</td>
</tr>
<tr>
<td></td>
<td>• The student willingly assumes a leadership role* for managing patients with more difficult or complex conditions.</td>
</tr>
</tbody>
</table>
APPENDIX J: MIDTERM SITE VISIT OR CALL FORM

University of Mary Hardin-Baylor  
Doctor of Physical Therapy Program  

Professional Experience Midterm Site Visit or Call Form:

CI and Student at Midterm

<table>
<thead>
<tr>
<th>Date:</th>
<th>Time:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>PHTHI MIDTERM</th>
<th>Visit or Call</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Name</td>
<td></td>
</tr>
<tr>
<td>Faculty Advisor:</td>
<td></td>
</tr>
<tr>
<td>Clinical Facility:</td>
<td></td>
</tr>
<tr>
<td>Clinical Site City:</td>
<td>State:</td>
</tr>
<tr>
<td>Time Zone:</td>
<td>PST</td>
</tr>
<tr>
<td>Student’s Number:</td>
<td></td>
</tr>
<tr>
<td>Student’s Email:</td>
<td></td>
</tr>
<tr>
<td>CI 1st &amp; Last Name:</td>
<td></td>
</tr>
</tbody>
</table>

Faculty or designated representative making visit/call:
Record of messages left:

With each visit/call, please ask the CLINICAL INSTRUCTOR the following questions:

1. How is the student performing with regard to each of the following?
   a. Foundation knowledge:

2. Have you completed the midterm assessment? Yes | No | Date:

3. How did the student’s assessment compare/contrast with your assessment?

4. Are there any items on the CPI in which the student is at risk for performing below required threshold by the end of the rotation? Ex: supervision/delegation of support personnel

5. Is there anything you need from UMHB Physical Therapy Program?

ADDITIONAL COMMENTS:
**Professional Experience Midterm Site Visit or Call Form:**

*University of Mary Hardin-Baylor*
*Doctor of Physical Therapy Program*  

**With each visit/call, please ask the STUDENT the following questions:**

1. Are you in a place where we can talk privately?  
   - YES  
   - NO  
   *(If not, offer an opportunity for the student to call you back when able to talk privately)*

2. How is the student feeling about his/her own:
   - Foundation knowledge preparation for this setting:
   - Clinical skills development in this setting: (documentation, treatment intervention, # of assessments done)
   - Professional abilities:

3. Have you completed the midterm assessment?  
   - Yes  
   - No  
   - Date:  

4. How did the CI's assessment compare/contrast with your assessment?

5. Are there any items in the CPI about which you are concerned or need to talk about how to demonstrate?

6. Has the level of supervision provided been appropriate for you?

7. Are there any concerns you have about the clinical instruction you are receiving?

8. Would you describe your CI as “exceptional”?  
   - Yes, why?

9. Additional concerns or comments:

**Follow Up:**

- Advisor has/will follow up this call in this manner:
- Advisor requests follow up by the DCE with regard to the following:

Is this a site that you recommend we visit in the near future?  
- YES  
- NO

Other Comments: ____________________________________________________________

Faculty Signature: ___________________________  Date: ___________________________