

Clinic

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Section I: Introduction to the Moravian University Doctor of Physical Therapy Program

Preface

The Doctor of Physical Therapy Clinical Education Handbook has been designed to maintain an effective, efficient, high-quality Doctor of Physical Therapy (DPT) Clinical Education Program at Moravian University. This document will serve as a required and referenced text for all courses throughout the DPT Program. Furthermore, the Physical Therapy Faculty and Clinical Educators will use this manual as a guide for administrative and professional decisions pertaining to the clinical education component of the curriculum. It is imperative that DPT students be knowledgeable of all content in this manual. Any questions about the content of this document should be

1111 North Fairfax Street, Alexandria, VA 22314
Phone: (703) 706-3245
Email: accreditation@apta.org

The Doctor of Physical Therapy program at Moravian University is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; telephone: 703-706- 3245; email: accreditation@apta.org website: <http://www.capteonline.org>). If needing to contact the program/institution directly, please call (610) 625-7217 or email wynarczukk@moravian.edu

National Council for State Authorization Reciprocity (SARA)
Moravian University's membership in NC-SARA allows students to perform their clinical experiences in states other than Pennsylvania. Each state has the legal authority to determine requirements and process for a prof32A

models of professional behaviors to DPT students as they develop patient management competencies. Clinical education fosters professional growth and development of clinical faculty, strengthens the community of physical therapy, stimulates advances within the profession, and has positive impacts on local and global communities.

Clinical education experiences will serve to develop competent DPT students who:

- 1) Apply behaviors consistent with the APTA Code of Ethics and APTA Core Values;
- 2) Demonstrate effective communication during clinical and professional interactions and adapt communication styles based on individual differences;
- 3) Practice in a safe manner that minimizes risk to patient/client, self, and all others;
- 4) Demonstrate cultural competence and recognize psychosocial factors that may impact clinical and interprofessional interactions;
- 5) Execute initiative; implement constructive feedback; contribute to a positive work environment, and utilize appropriate resources for problem solving during clinical interactions;
- 6) Apply evidence-based examination and evaluation techniques for patients including but not limited to history taking, systems review, differential diagnosis, and recognizing contraindications for further tests and measures;
- 7) Determine appropriate diagnosis, prognosis, plans of care, and discharge criteria for patients with regular outcomes assessment;
- 8) Apply and modify evidence-based intervention strategies and educational approaches based on patient response.

Section IV: Structure of Clinical Education Program

Moravian University's Physical Therapy Program has a total of 3 part-time integrated clinical experiences (ICE) and 3 full-time clinical education experiences (CEE) throughout the curriculum. The ICE will occur while students are completing their didactic coursework, and will be in a setting that allows application of content while simultaneously exposing students to diverse patient populations across the lifespan. The first full-time CEE occurs at the end of the first year of the program with the final two CEE's upon completion of all didactic coursework.

Integrated Clinical Experience

DPT 760 Integrated Clinical Experience & Interprofessional Education I (2 credit hours)

The first ICE course occurs in the Fall semester of year one and includes interprofessional seminars, course work focusing on professionalism, documentation, and exercise prescription and 6 four-hour experiences in an outpatient facility. The anticipated model will be two students to one CI. Refer to syllabus in [Appendix 2](#).

DPT 761 Integrated Clinical Experience & Interprofessional Education II (2 credit hours)

The second ICE course occurs in the Spring semester of year one and includes interprofessional seminars, clinical preparedness, documentation, exercise progression

- 8) Provides regular feedback to the student regarding areas of strength, areas of further development, and ways to help progress;
- 9) Completes required student assessment for the experience;
- 10) Serve as the student's instructor and mentor;
- 11) Communicates with the student, SCCE, and DCE regarding areas of concern for the student in a timely manner;
- 12) Collaborates with the SCCE and DCE in order to develop an appropriate action plan as needed; and
- 13) Provides feedback to the SCCE and DCE to help improve the clinical education program.

Clinical Instructor and Site Clinical Coordinator of Clinical Education Rights and Privileges

The CI and SCCE are entitled to the following rights and privileges from Moravian University. These are subject to change, with additional privileges provided by the University.

- 1) The SCCE/CI has the right to deny taking a student.
- 2) The SCCE/CI has the right to terminate a clinical experience with a student at any time.
- 3) The SCCE/CI will be offered free and/or discounted continuing education opportunities.
- 4) The SCCE/CI's will be considered for adjunct, guest lecture and lab assistant positions as they are available.
- 5) The SCCE/CI's may be asked to provide input into our curriculum and development of our program.

Student Expectations

Clinical education is a vital part of the DPT curriculum and development of entry-level practitioners. Moravian University DPT students are expected to follow both the DPT program and site-specific requirements including the following:

- 1) Contacting the clinical site to verify required documents;
- 2) Abiding by all policies and procedures of the facility;
- 3) Dressing in a professional manner consistent with the clinic's required dress code;
- 4) Wearing a name badge which is visible above the waist;
- 5) Demonstrating professional behaviors during all clinical interactions;
- 6) Displaying behaviors consistent with the *APTA Code of Ethics* and *APTA Core Values* in all interactions with patients/clients, families, and other health care practitioners;
- 7) Always practicing in a safe manner that minimizes risk to patient/client, self, and all others and follows Health and Safety Precautions;

may discuss the issue with the Dean of the

criminal background check will be repeated at a minimum on a yearly basis. However, a background check may be required more frequently based on site-specific clinical requirements. Evidence of completion of background checks will be stored in the Exxat© data management system. These include: FBI Federal Criminal History Record (ACT 114), Pennsylvania State Police Criminal Records Check (ACT 34), and Pennsylvania Child Abuse History Clearance (ACT 151).

Students are also responsible for the costs of any additional required criminal background checks as required by the School of Rehabilitation Sciences or the student's clinical education site. All background checks will be maintained in the Exxat database. Students will allow the administrative assistant to release the information to their clinical site as needed.

Drug and Alcohol Policy

Alcohol Usage

Any student who chooses to consume alcoholic beverages will not be under the influence of alcohol during any academic or clinical education experience. Students who are perceived by the faculty or CI/SCCE to exhibit potential abuse of alcohol, evidenced by student behavior which includes, but is not limited to: excessive tardiness, slurred speech, the odor of alcohol on the breath, and lack of coordination will be referred to the DPT Program Director and/or Moravian University Health Center for appropriate intervention and referral. Additionally, students who appear to be under the influence of alcohol during any clinical education experience will be immediately removed from the clinical education site and will be referred to the DPT Program Director. Students who violate this

the

Student Professional Liability Insurance

Moravian University carries their own policy that provides professional liability insurance for all students during CEE. In addition, all students are highly encouraged to have individual personal liability insurance based upon DPT program requirements. Liability insurance can be obtained through Health Care Providers Service Organization (HPSO) and information is available at: <http://www.hpso.com/>.

Required Immunizations and Medical Testing

Students are required to submit up-to date records without exemptions, of the following:

- 1) Two-step TB test (or negative chest x-ray)
- 2) Hepatitis B series
- 3) Measles, Mumps and Rubella (MMR)
- 4) Tetanus, Diphtheria and Pertussis (TDaP)
- 5) Varicella (or documentation of disease history from a healthcare provider)
- 6) Annual Influenza Immunization - under extenuating circumstances can meet with the DCE

Please note, that due to the recent global pandemic, some clinical sites require the COVID-19 Vaccine. If a student chooses not to get the vaccination, that may limit the number of clinical sites available, and may even delay or prevent graduation if a site that does not require vaccination can not be identified for student placement.

All information related to immunizations and medical testing will be maintained in the Exxat database. Students will allow the administrative assistant to release the information to their clinical site and the information will be sent securely through Exxat.

Communicable Disease Policy

During completion of clinical education experiences, exposure to patients suffering from communicable diseases is inevitable. As such, students completing clinical education experiences should carefully follow clinical sites and Centers for Disease Control and Prevention guidelines to prevent the transmission of communicable diseases. However, even when following such safety guidelines, it remains possible that students may contract communicable diseases. As a student enrolled in a graduate health professions program, requiring clinical education experiences, students must assume the risk of such exposure.

A communicable disease is an illness due to a specific infectious agent which can be transmitted from one individual to another. A communicable disease may be transmitted directly from one person to another without physical contact with the infected person. It may be transmitted indirectly when an object transmits the organism. Objects of transmission may be clothing, linens, utensils, food, water, milk, air, soil or insects.

Students that are determined by a physician as having an active communicable disease will be required to take a medical leave of absence from class and/or CEE until cleared

by the same physician. At that time, the student will determine, with the PD and DCE, a plan to make up the academic or clinical education requirements.

Examples of communicable diseases are:

- 1) Rubella (3-day measles)
- 2) Rubeola (9-day measles)
- 3) Meningitis - viral and bacterial
- 4) Hepatitis A
- 5) Varicella (Chicken Pox)
- 6) Tuberculosis (TB)
- 7) Influenza

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Incomplete Clinical Education Experiences

As per Moravian University policies, a student may Withdraw from a clinical education experience. A withdrawal from a clinical education experience will alter the progression of that student within the DPT program. If the class is dropped after the drop/add date determined by Moravian University, the student will still incur the cost of the class.

If a student is unable to begin a clinical education experience, they will be given the opportunity to participate in that experience during the next regularly scheduled clinical experience.

Students 

if a student is unsuccessful in completing a clinical education experience. The learning plan will vary depending on the specific needs of the student. It is not designed to be punitive in nature but rather to facilitate successful completion of a clinical education experience. It is an objective plan including specific goals and time]

Moravian University to track clinical education documents and relevant clinical education information. This includes but is not limited to:

- 1) Information provided by students previously placed at the clinical site which outlines information

including all clinical education experiences.

- 3) Collared/dress shirt in
- a) This does not have to be a Moravian University Physical Therapy shirt if the clinical education site provides site-specific attire to be worn
 - b) Shirts must be tucked in during all clinical education experiences.

Exceptions are made for shirts specifically designed to not be tucked in.

- 4) Inappropriate shorts (mid-thigh and longer shorts)
- a) Mesh or athletic shorts are unacceptable
 - b) Jeans and jeans shorts are unacceptable

- 5) Clean, basic (ie neutral color, no graphics) shoes/sneakers with socks
- a) No open-toed or open-heeled shoes

- 6) Hats may be worn for outdoor events only and should be removed

- c. Appropriate socks, stockings or hose should be worn based on footwear selection
5. Hats should not be worn
6. Tattoos determined by the Program Director to be considered insensitive or otherwise offensive should be covered
7. Jewelry should be discreet and limited in number

Cell Phone Usage

Personal cell phones in the clinic setting are disruptive and considered unprofessional. They are not permitted in any clinic settings. Students who use cell phones during their CEE may be dismissed from the clinic that day and subject to a Professional Behavior Corrective Action Plan (PB-CAP) ([Appendices 17-18](#)).

Please discuss with the CI, in advance, any extenuating circumstance in which a student feels that a cell phone is required.

Social Media Policy

Social media and networking policy

- 1) Moravian University recognizes that social media sites are a part of the University's culture, and that a great deal of professional networking occurs on these sites. As Moravian University DPT program promotes professional interactions between clinicians and patients, students in the DPT program should remember that information posted online may remain there forever and may be seen by faculty, staff, CIs or future employers. Students in the DPT program are strongly encouraged to utilize social media in a manner that reflects the professional standards expected of a physical therapist.
- 2) In maintaining this professional interaction, the program prohibits DPT students from interacting with current patients/clients using social media. Physical therapy students should not accept nor request any interaction involving social media with any current patient or client, regardless of whether the physical therapy student is directly responsible for the patient's care. Furthermore, it is unacceptable for DPT students to interact through social media, text message, or electronic mail with pl

utilizes a social media platform for professional networking or engagement with students, specific guidelines for appropriate behavior will be provided. Students are not permitted to utilize social media to communicate with the instructor in any way other than the manner in which the faculty member has instructed.

- 6) Clinical sites often have their own policies and procedures related to electronics and social media, and students in these clinical settings will be accountable to the rules of the clinical partner.

Inclement Weather

Students will be required to discuss the specific clinical site inclement weather policy with the CI/SCCE. They are expected to abide by the clinic policy, not Moravian University's policy. If Moravian University is closed due to inclement weather but the clinical site remains open, the student is expected to attend the clinical experience for that day. Ultimately, the student should exercise their judgment regarding safe travel to the clinical site for the day. If a day is missed due to weather, the DCE must be notified within 24 hours. Time may have to be made up if it exceeds one day away from the clinic.

Patient/Client Right to Refuse Treatment from a Student

It is the patients/clients right to decide if a student will perform their treatment or not. All students will respect the right of the patient/client to refuse treatment from a student physical therapist. If the clinical site has a more stringent policy in place, that will supersede this policy.

All students must clearly identify themselves as a student and obtain consent to work with the patient/client. If the patient/client is a minor, then consent will be obtained from the guardian.

Clinical Site Cancellation Policy

Unfortunately, there may be instances where a clinical education site needs to cancel a scheduled clinical experience. In the event that this occurs, the DCE will review with the student their interests prior to determining alternate site availability. Additional sites will be contacted if needed. The DCE will make all efforts to replace a clinical site as soon as possible, but length of time may vary depending on the availability of clinical sites. All efforts will be made to keep the clinical site within the same setting and geographical location, but this is not a guarantee. Students should be prepared to travel or commute to sites as necessary.

Assignment of Integrated and Clinical Education Experience Sites

Assignment to ICE sites will occur based on site availability, student fit and interest, and geographic location of the student. If a student worked or performed shadowing hours greater than 40 hours at a specific site, they will be unable to perform an ICE.

Assignment of CEE will be mul

concern will be addressed with discussion. If the complainant's concern is not addressed, they will be referred to the Associate Dean of the School of Rehabilitation Sciences and follow the policy on complaints outside of due process available at: <https://www.moravian.edu/rehab/contact/complaints-outside-of-due-process>. If the complaint is directly related to accreditation status, the complainant may contact the Commission on Accreditation of Physical Therapy Education at: 1111 North Fairfax Street, Alexandria, VA, 22314; phone: 703-706-3245; or email: accreditation@apta.org.

Student Site Clinical Placement Refusal

The DCE will assign clinical sites based on multiple factors as noted above. If a student refuses a site that they are assigned to, they must provide a written statement as to why they are refusing. They will then need to meet with the DCE to review this information. The student will not be guaranteed a placement site. If a site is not able to be secured in a timely manner, this will delay student progression within the program, and ultimately graduation.

Student Responsibility Regarding Clinical Site Placements

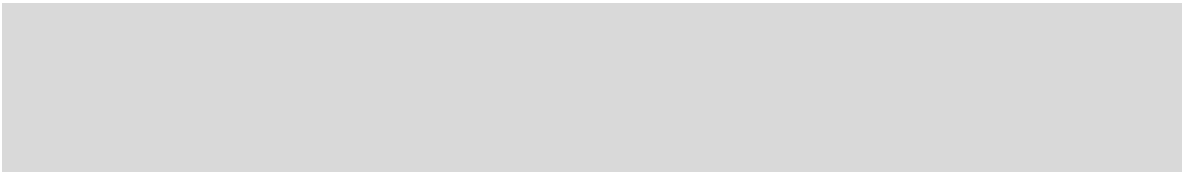
Students are often required to complete applications or other necessary steps in order to secure a clinical placement. These must be completed in a timely manner. If a student fails to follow the required steps they may not be assigned to a clinical placement which will delay progression within the program, and potentially delay graduation. Additionally, if a student requests a specific clinical placement site, and the DCE or other clinical education staff are unable to secure this placement 3 months prior to placement start date, the DCE will assign an alternative placement.

Assignment of Speciality Clinical Sites: Pelvic Health

Although Moravian University's DPT program recognizes that the pelvic health subspecialty of the PT profession is growing and we want to support interest and clinical education experiences within this avenue of physical therapy, it requires skill that may be considered beyond entry level. The goal of Doctor of Physical Therapy Education is to prepare our students for entry-level clinical practice. Therefore, if a student would like to complete a full-time clinical education experience at a pelvic health clinic, the student must have:

1. Demonstrated a strong full-time clinical experience in an outpatient orthopaedic setting, which has been substantiated on the Clinical Internship Evaluation Tool and corroborated after a conversation with the clinical instructor from DPT 800.
2. Demonstrated strong performance in DPT 730/731, demonstrating a final grade of greater than or equal to a 90%].
3. Demonstrated a high level of emotional maturity and emotional intelligence as evidenced by TEIQue-SF.
4. A cumulative GPA of 3.5 at time of application.

This course will



| | | | |
|---|--|---|---|
| <p>3) Demonstrate proper stress, time and resource management, open mindedness, and take accountability for actions.</p> | <p>7D5: Practice in a manner consistent with the APTA <i>Core Values</i>.</p> | <p>Team-based activities, assigned readings, guided instruction, lab instruction and CI mentoring</p> | <p>CI Professional Behaviors Assessment and student reflections</p> |
| <p>4) Recognize effective communication skills and flexibility in communication style during all interactions in clinical and classroom environments including feedback sessions with the interprofessional team.</p> | <p>7D7: Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers.</p> | <p>Team-based activities, assigned readings, online training module, guided instruction, lab instruction and CI mentoring</p> | <p>CI Professional Behaviors Assessment and student reflections</p> |
| <p>5) Demonstrate an awareness of diversity during all clinical interactions, including but not limited to patient/clients, families, and the interprofessional team.</p> | <p>7D8: Identify, respect, and act with consideration for patients'/clients' differences, values, preferences, and expressed needs in all professional activities.</p> | <p>Team-based activities, assigned readings, online training module, guided instruction, lab instruction and CI mentoring</p> | <p>CI Professional Behaviors Assessment and student reflections</p> |
| <p>6) Demonstrate respect and compassion during all patient and professional interactions.</p> | | | |

7) Demonstrate
initiative and
flexibility;
implement
constructive
feedback;
contribute to

9) Prepare complete and concise clinical documentation while adhering to regulatory guidelines.

7D32: Complete accurate documentation related to 7D15 - 7D30 that follows guidelines and specific documentation formats required by state practice acts, the practice setting, and other regulatory agencies.

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| 12) Critically appraise the implications and potential outcomes of various history taking scenarios | <p>7D7: Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers.</p> <p>7D17: Obtain a history and relevant information from the patient/client and from other sources as needed.</p> <p>7B: Communication; clinical reasoning</p> | Team based activities, assigned readings, guided instruction, CI mentoring | History Taking Team Assignment; CI Professional Behaviors Assessment and student reflections |
|---|--|--|--|

Grading Procedures:

| Course assignments | Quantity | Percent of Grade |
|---|----------|------------------|
| Billing Assignment | 1 | 15% |
| Interprofessional Event (IPE) Reflection | 1 | 20% |
| Integrated Clinical Experience (ICE) Reflections | 2 | 2x10% = 20% |
| Documentation assignment | 1 | 20% |
| CI Professional Behaviors Continuum Assessment | 1 | 5% |
| DPT 761 ICE Preference Survey | 1 | 10% |
| Completion of Clinical Education Required Documents by Due Date | 1 | 10% |
| | | Total: 100% |

The course will use the following guidelines to convert numerical scores to letter grades:

| | | | | | | | |
|----------|-----------|----------|-----------|----------|-----------|----------|----------|
| A | B+ | B | C+ | C | D+ | D | F |
|----------|-----------|----------|-----------|----------|-----------|----------|----------|

Written examinations

The following policies exist to ensure examination integrity and to maintain a fair and equitable testing environment for all students enrolled in the DPT Program. Students are entitled to approved testing accommodations and are strongly encouraged to work with the Moravian University Office of Disability & Accommodations (ODA; formerly known as the Accessibility Services Center) to secure them. Students with approved testing accommodation(s) should meet with the course instructor before the test administration date to discuss how accommodations will be honored. Most written examinations in the DPT Program are delivered using Lockdown Browser® unless otherwise stated by the course instructor. Electronic devices are not permitted unless otherwise authorized by the course instructor.

If a student needs to leave and re-enter the classroom during the examination, they should speak to the examination administrator. In general, students should plan to remain in the classroom, laboratory, or computer lab where the examination is administered throughout the examination period.

After the examination, all examination materials (including test booklets, examinations, scratch paper, answer sheets, etc.) must be returned to the examination administrator unless otherwise instructed. If examinations need to be administered remotely, Lockdown Browser will be used with the camera feature enabled, and an environmental scan must be completed before starting the examination. Students should seek out a space in which they will not be disturbed, which does not violate their privacy. If a student has difficulty finding this space, they should communicate with the course instructor to get assistance in arranging one. Students will not be permitted to take screenshots or photos during remote examinations and are not allowed to use any resources while taking the examination, i.e., books, notes, etc., unless otherwise authorized by the instructor.

Violation of any examination policy is grounds for dismissal from the testing area, failure of the examination, failure of the course and/or dismissal from the DPT Program.

Written assignments/discussion boards

If an assignment is not completed on time, students will still have the opportunity to earn full or partial credit unless otherwise noted by the instructor and syllabus.

Academic dishonesty and plagiarism

The DPT program follows the established guidelines in the Moravian University Academic Code of Conduct for all issues related to academic dishonesty or plagiarism. The Academic

Moravian College expects students to recognize the positive effect on academic success of class attendance and participation. All students are expected to attend all meetings of the courses in which they are enrolled; any absence is incurred at the student's own risk. The classroom is the center of academia and students are expected to attend all classes and laboratory sessions.

1. In the case of an absence (excused or unexcused), the student is responsible for all material presented and assigned.
2. In the age of technology, Zoom may be used in some circumstances in lieu of in-person classes. This is at the discretion of the instructor. If classes are being held in-person, the expectation is that students will be on campus for such classes. It is up to the discretion of the instructor to permit a student to participate in a class via Zoom if classes are in-person for that day.
3. Failure to attend class sessions or tardiness without an excused absence will require the student to meet with the faculty member except in extenuating circumstances. In the case of student tardiness, faculty have the right to ask a student to leave class for the day. It is expected that if this were to occur, students will remain professional and honor the faculty member's request without causing further disruption. If there is a pattern of unexcused absences or tardiness, faculty may opt to deduct two points from the final course grade.
4. Failure to meet clinical requirements during integrated clinical experiences may result in failing the class. Students are expected to be present for all clinical experiences during the integrated clinicals except in cases of extenuating circumstances. If extenuating circumstances exist, the DCE and the student will meet to determine the most appropriate course of action.

Emergencies and illnesses do happen. Please note that if you are unable to attend your clinical experience for or

professionally. It is not appropriate to send a professional email message that does not use appropriate grammar, spelling and punctuation. Whenever possible, students should communicate with faculty, staff and clinical instructors via email. However, faculty, staff and clinical instructors reserve the right to allow students to contact them via their cell phones when timely communication is necessary. The instructors will outline the terms of this communication and students will be expected not to abuse these terms.

Disability Support Services

Moravian University strives to create a

Opportunity, Harassment, and Non-Discrimination Policy at
www.moravian.edu/policy/harassment-discrimination

Tentative Course Outline:

| Date | Topic | Readings | Assessment (Due at start of class on date listed unless otherwise noted) |
|------------------------|--|--|--|
| Class 1 8/30/2024 | Clinical Education Orientation, Exxat & Syllabus/assignment review | Clinical Education Handbook and Syllabus | Class from 8-10am in SMRC 119 |
| Class 2 9/06/2024 | IPE Session 1 History Taking | Readings posted to Canvas | 1-4 pm |
| Class 3 9/13/2024 | Communication, Learning Styles and History Taking Team Assignment | Readings posted to Canvas | Class from 1-3 SMRC 119 |
| Class 4 9/20/2024 | IPE Session 2 | Readings posted to Canvas | 1-4 pm |
| Class 5 09/27/2024 | Introduction to Therapeutic Exercise | Readings posted to Canvas | Class from 8-11am SMRC 119 |
| Class 6 10/04/2024 | Integrated Clinical Experience | Readings posted to Canvas | |
| Class 7 10/11/2024 | IPE Session 3 | Readings posted to Canvas | 1-4 pm |
| Class 8 10/18/2024 | Integrated Clinical Experience | Readings posted to Canvas | IPE Reflection due |
| Class 9 10/25/2024 | Integrated Clinical Experience | Readings posted to Canvas | Midterm ICE Reflection due |
| Class 10 11/01/2024 | | | |

Appendix 3: DPT 761 Integrated Clinical Experience and Interprofessional Education II

Moravian University
School of Rehabilitation Sciences
Doctor of Physical Therapy
Semester 3

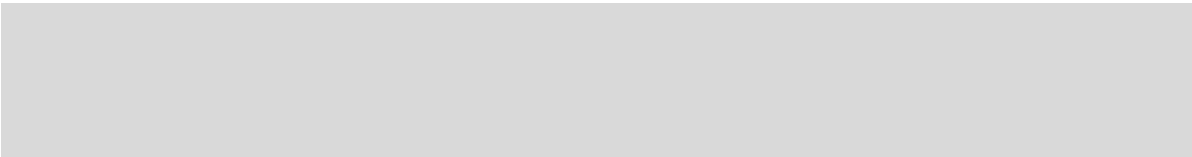
Course: DPT 761
Course Title: Integrated Clinical Experience and Interprofessional Education II
Credit Hours: 2 Credit Hours
Prerequisites: DPT 730/735/740/745/750/760
Clock Hours: Lecture/Clinical: 4 hours per week (on-site and off-site)

| | | |
|---------------|--|--|
| Instructor: | Lori Madiara, PT, DPT, MSHA | Alison Roll, PT, DPT, TPS |
| Office: | SMRC 209 | SMRC 265 |
| Office Phone: | (610)737-7072 | (610) 625-7234 |
| Email: | maderal@moravian.edu | rolla@moravian.edu |

Course Description:

This course is the second in a series of three part-time integrated clinical education experiences and interprofessional seminars. Students will deve

Professional Behaviors Assessment.



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| | and resource management, open mindedness, and take accountability for actions. | consistent with the <i>APTA Core Values</i> . | assigned readings, guided instruction, lab instruction and CI mentoring | <i>Assessment</i> , peer feedback, CI rubrics and student reflection |
| 4) | Apply effective communication skills and flexibility in communication style during all interactions in clinical and classroom environments including feedback sessions with the interprofessional team. | 7D7: Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers. | Team-based activities, assigned readings, guided instruction, lab instruction and CI mentoring | <i>Professional Behaviors Assessment</i> , peer feedback, CI rubrics, and student reflection |
| 5) | Display an awareness of diversity during all clinical interactions, including but not limited to patient/clients, families, and the interprofessional team. | 7D8: Identify, respect, and act with consideration for patients'/clients' differences, values, preferences, and expressed needs in all professional activities. | Team-based activities, assigned readings, online training module, guided instruction, lab instruction and CI mentoring | Peer feedback, CI rubrics and student reflection |
| 6) | Demonstrate respect and compassion during all patient and professional interactions. | | | |
| 7) | Display initiative and flexibility; implement constructive feedback; contribute to a | | | |

positive work
environment;

| | | | |
|---|---|---|--|
| | by state practice acts, the practice setting, and other regulatory agencies. | and CI mentoring | |
| 11) Practice in a safe manner that minimizes risk to patient/client, their families, caregivers, and self using proper body mechanics during gait and guarding. | 7D19: Select, and competently administer tests and measures appropriate to the patient's age, diagnosis and health status including, but not limited to, those that assess:mobility (including locomotion). | Team-based activities, assigned readings and guided instruction | CI Readiness Assessment; Therapeutic exercise assignment |
| 12) Construct an appropriate treatment plan based upon identified patient/client impairments. | 7D27: Competently perform physical therapy interventions to achieve state | | |

and nonthrust techniques)
g. motor function (balance, gait, etc)
h. patient/client education
i. therapeutic exercise

13) Demonstrate lifelong learning practices and teaching in the clinical setting.

7D15: Identify career development and lifelong learning opportunities, including the role of the physical therapist in the clinical education of physical therapist students.

Team-based activities, assigned readings, online training module and CI mentoring

Professional Behaviors Assessment

14) Utilize behaviors consistent with



| | | |
|--------------------------|---|-------------|
| Documentation Assignment | 1 | 20% |
| | | Total: 100% |

The course will use the following guidelines to convert numerical scores to letter grades:

| | B+ | B | C+ | C | D+ | D | F |
|-----|--------|--------|--------|--------|--------|--------|-----------|
| 90% | 87-89% | 80-86% | 77-79% | 70-76% | 67-69% | 60-66% | Below 60% |
| 4.0 | 3.3 | 3.0 | 2.3 | 2.0 | 1.3 | 1.0 | 0.0 |

Examinations, Practicals, and Assessments Grading

- Students who receive a grade lower than 75% on any assessment (written or clinical) during the first semester or lower than 80% in remaining semesters (2-8) are required to meet with the instructor no later than 72 hours following the assessment to discuss opportunities for improvement and discuss any b

Course Guidelines & Expectations: Please refer to the Moravian University DPT Program Handbook for specific details regarding classroom and laboratory guidelines and expectations.

Written examinations

The following policies

Fully confidential reporting options include licensed professionals in the Counseling and Health Centers, as well as the chaplains in Spirituality and Inclusion. Survivors are encouraged to seek immediate assistance by contacting the Advocates at (484) 764-9242. For more information, including grievance procedures, please view the Equal Opportunity, Harassment, and Non-Discrimination Policy at www.moravian.edu/policy/harassment-discrimination

Tentative Course Outline:

| Date | Topic | Readings | Assessment |
|--------|--|---------------------------|--|
| Week 1 | Introduction to Levels of Clinical Care; Documenting the Re-evaluation | Readings posted to Canvas | <i>Professional Behaviors Assessment</i> |
| Week 2 | Therapeutic Exercise Review; Prescription and Progression | Readings posted to Canvas | Documentation Worksheet |
| Week 3 | Virtual ICE Session | | Therapeutic Exercise Prescription |
| Week 4 | IPE Session 1 | | |

Appendix 4: DPT 860 Integrated Clinical Experience and Interprofessional Education III

Moravian University
Department of Rehabilitation Sciences
Doctor of Physical Therapy
Semester 5 (Fall 2024)

Course: DPT 860
Course Title: Integrated Clinical Experience and Interprofessional Education III
Credit Hours: 2 Credit Hours
Prerequisites: DPT 800/851
Clock Hours: Lecture/Clinical: 4 hours per week (onsite and off-site)

Instructor: Lori Madiara PT, DPT, MSHA
Office: SMRC 209
Office Phone: (610) 737-7072 (cell)
Student Hours available via phone, zoom or in person upon request

Email: madiaral@moravian.edu

Course Description:

This course is the third in a series of three part-time integrated clinical education experiences and interprofessional seminars. Students will develop an awareness of the competencies required for interprofessional care and advance knowledge and application of clinical skills and professional behaviors in preparation for terminal clinical education experiences.

Required Texts:

American Physical Therapy Association. *Guide to Physical Therapist Practice 4.0*. APTA, 2023. Available at: <http://guidetoptpractice.apta.org/>

Quinn L, Gordon J. *Documentation for Rehabilitation: A Guide to Clinical Decision Making in Physical Therapy*. Elsevier: 2016. ISBN: 978-0323312332

Additional References:

American Physical Therapy Association. *APTA Code of Ethics*. APTA, 2019.

American Physical Therapy Association. *APTA Professionalism in Physical Therapy: Core Values*. APTA, 2009.

Articles and papers from professional journals in rehabilitation sciences.

Teaching Methods:

This course will utilize a variety of teaching methods and active student learning activities, including but not limited to Case reviews, Clinical experiences, Clinical simulations, Demonstrations, Discussions, Guest speakers, Interprofessional case reviews, Laboratory demonstrations and practice, Lectures, Media/video programs, Observations, Patient case discussions, Problem solving activities, Reading assignments, Reflections, Team projects, Team-based learning, Video observations and reflections.

Course Objectives: At the conclusion of this course, students will be able to successfully:

| Objective | CAPTE DPT Educational Competency (CAPTE, 2017) | Instructional Method(s) | Assessment Method(s) |
|--|--|-------------------------|----------------------|
| 1) Integrate behaviors consistent with the <i>APTA Code of Ethics</i> in all interactions with patients/clients, families, and the interprofessional team. | t n | | |

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| <p>3) Select appropriate behaviors related to proper stress, time and resource management, open mindedness, and take accountability for actions.</p> | <p>7D5: Practice in a manner consistent with the <i>APTA Core Values</i>.</p> | <p>Team-based activities, assigned readings, guided instruction, lab instruction and CI mentoring</p> | <p>CI Professional Behavior Continuum Assessment, ICE and IPE student reflections</p> |
| <p>4) Implement effective communication skills and flexibility in communication style during all interactions in clinical and classroom environments including feedback sessions with the interprofessional team.</p> | <p>7D7: Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers.</p> | <p>Team-based activities, assigned readings, online training module, guided instruction, lab instruction and CI mentoring</p> | <p>CI Professional Behavior Continuum Assessment, Telehealth Assignment, ICE and IPE student reflections</p> |
| <p>5) Demonstrate respect and compassion during all patient and professional interactions.</p> | <p>7B: Communication</p> <p>7D8: Identify, respect, and act with consideration for patients'/clients' differences, values, preferences, and expressed needs in all professional activities.</p> | <p>Team-based activities, assigned readings, online training</p> | |

6) Display initiative, flexibility, implement constructive feedback, contribute to a positive work environment, utilize appropriate resources for problem solving, and recognize the importance of interprofessional care and teamwork.

7) Distinguish impairments, activity limitations, diagnosis that guides further treatment, and participation restrictions based on the International Classification of Functioning (ICF).

7D39: Participate in patient-centered interprofessional collaborative practice.

7D21: Use the International Classification of Function (ICF) to describe a patient's/client's impairments, activity and participation limitations.

Team-based activities, assigned readings, online training module and CI mentoring

Team-based activities, assigned readings, guided instruction, lab instruction

CI Professional Behavior Continuum Assessment, ICE and IPE student reflections

CI Professional Behavior Continuum
Assessment

1

5%

Total: 100%

The course will use the following guidelines to convert numerical scores to letter grades:

| A | B+ | B | C+ | C | D+ | D | F |
|-----|--------|--------|--------|--------|--------|--------|-----------|
| 90% | 87-89% | 80-86% | 77-79% | 70-76% | 67-69% | 60-66% | below 60% |
| 4.0 | 3.3 | 3.0 | 2.3 | 2.0 | 1.3 | 1.0 | 0.0 |

Examinations, Practicals, and Assessments Grading

1. Students who receive a grade lower than 75% on any assessment (written or clinical) during the first semester or lower than 80% in remaining semesters (2-8) are required to meet with the instructor no later than 72 hours following the assessment to discuss opportunities for improvement and discuss any barriers to learning. It is the student's responsibility to arrange a meeting with the

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Students must successfully pass this course with an 80% or higher to progress to the next semester in the program.

Course Guidelines & Expectations: Please refer to the Moravian University DPT Program Handbook for specific details regarding classroom and laboratory guidelines and expectations.

Written examinations

The following policies exist to ensure examination integrity and to maintain a fair and equitable testing environment for all students enrolled in the DPT Program. Students are entitled to approved testing accommodations and are strongly encouraged to work with the Moravian University Office of Disability & Accommodations (ODA; formerly known as the Accessibility Services Center) to secure them. Students with approved testing accommodation(s) should meet with the course instructor before the test administration date to discuss how accommodations will be honored. Most written examinations in the DPT Program are delivered using Lockdown Browser® unless otherwise stated by the course instructor. Electronic devices are not permitted unless otherwise authorized by the course instructor.

If a student needs to leave and re-enter the classroom during the examination, they should speak to the examination administrator. In general, students should plan to remain in the classroom, laboratory, or computer lab where the examination is administered throughout the examination period.

After the examination, all examination materials (including test booklets, examinations, scratch paper, answer sheets, etc.) must be returned to the examination administrator unless otherwise instructed. If examinations need to be administered remotely, Lockdown Browser will be used with the camera feature enabled, and an environmental scan must be completed. Of

The DPT program follows the established guidelines in the Moravian University Academic Code of Conduct for all issues related to academic dishonesty or plagiarism. The Academic Code of Conduct may be found in the University Catalog and is available at: <https://www.moravian.edu/handbook/campus-life/code-of-conduct>.

Attendance and punctuality

Moravian College expects students to recognize the positive effect on academic success of class attendance and participation. All students are expected to attend all meetings of the courses in which they are enrolled; any absence is incurred at the student's own risk. The classroom is the center of academia and students are expected to attend all classes and laboratory sessions.

1. In the case of an absence (excused or unexcused), the student is responsible for all material presented and assigned.
2. In the age of technology, Zoom may be used in some circumstances in lieu of in-person classes. This is at the discretion of the instructor. If classes are being held in-person, the expectation is that students will be on campus for such classes. It is up to the discretion of the instructor to permit a student to participate in a class via Zoom if classes are in-person for that day.
3. Failure to attend class sessions or tardiness without an excused absence will require the student to meet with the faculty member except in extenuating circumstances. In the case of student tardiness, faculty have the right to ask a student to leave class for the day. It is expected that if this were to occur, students will remain professional and honor the faculty member's request without causing further disruption. If there is a pattern of unexcused absences or tardiness, faculty may opt to deduct two points from the final course grade.
4. Failure to meet clinical requirements during integrated clinical experiences may result in failing the class. Students are expected to be present for all clinical experiences during the integrated clinicals except in cases of extenuating circumstances. If extenuating circumstances exist, the DCE and the student will meet to determine the most appropriate course of action.

Emergencies and illnesses do happen. Please note that if you are unable to attend your clinical experience for the day you will report that information to your CI and/or SCCE as soon as possible. It is expected that you will directly call the CI. An email or text message

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Fully confidential reporting options include licensed professionals in the Counseling and Health Centers, as well as the chaplains in Spirituality and Inclusion. Survivors are encouraged to seek immediate assistance by contacting the Advocates at (484) 764-9242. For more information, including

Week 13

1 [REDACTED]

Appendix

Course Objectives: At the conclusion of this course, students will be able to successfully:

| Objective | CAPTE DPT Educational Competency (CAPTE, 2017) | Instructional Method(s) | Assessment Method(s) |
|--|--|-------------------------|----------------------|
| 1) Select behaviors consistent with the <i>APTA Code of Ethics</i> in all interactions with patients/clients, families, caregivers, and other healthcare practitioners including adherence to laws and regulations and protection of vulnerable populations. | 7D1: Adhere to legal practice standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management. 7D2: Report to appropriate authorities suspected cases of abuse of vulnerable populations. 7D3: Report to appropriate authorities suspected cases of fraud and abuse related to the utilization of and payment for physical therapy and other health care services. 7D4: Practice in a manner consistent with the <i>APTA Code of Ethics</i> . | BA | Clinical mentorship |
| 2) Select behaviors consistent with the <i>APTA Core Values</i> in all interactions with patients/clients, families, caregivers, and other healthcare practitioners. | 7D5: Practice in a manner consistent with the <i>APTA Core Values</i> . | BA | Clinical mentorship |
| 3) Initiate effective communication skills and flexibility in communication style | 7D7: Communicate effectively with all stakeholders, including patients/clients, family | BA | Clinical mentorship |

during all clinical interactions, patient/client history taking, and feedback sessions with the interprofessional team.

members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers.

- 4) Demonstrate appropriate behaviors, show respect and compassion related to clients', families' and b sion

management and
prognosis.

- 8) Apply appropriate
examination
techniques to assess
mental status and
identify activity and
participation

assessment of posture, balance testing, and testing of muscle performance.

patient's age, diagnosis, and health status.

13) Apply appropriate examination techniques to assess mobility and gait/locomotion including determination of need for assistive technology.

7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status.

SI

Clinical mentorship

14) Use clinical decision making and differential diagnosis to evaluate

| | | | |
|---|---|----|---------------------|
| participation restrictions while determining plan of care using principles of best practice and patient-centered care. | patient/client perspective, the environment, and available resources. | | |
| | 7D11: Identify, evaluate and integrate the best evidence for practice with clinical judgment and patient/client values, needs, and preferences to determine the best care for a patient/client. | | |
| | 7B: Clinical reasoning | | |
| 17) Utilize clinical decision making to determine a PT diagnosis, prognosis, patient goals, and anticipated outcomes based on data from examination. | 7D22: Determine a diagnosis that guides future client/patient management. | KI | Clinical mentorship |
| | 7D23: Determine patient/client goals and expected outcomes within available resources (including applicable payment sources) and specify expected length of time to achieve the goals and outcomes. | | |
| | 7B: Clinical reasoning | | |
| 18) Apply principles of safe biomechanics and best practice when choosing and executing interventions related to the prescription, application, fabrication, or modification of assistive technology. | 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes. | SI | Clinical mentorship |
| 19) Differentiate the most appropriate therapeutic modality and safely administer | 7D27: Competently perform physical therapy interventions to | SI | Clinical mentorship |

| | | | |
|---|--|----|---------------------|
| proper parameters of the chosen therapeutic modality based on patient presentation. | achieve patient/client goals and outcomes. | | |
| 20) Apply principles of safe body mechanics and best practice when choosing and implementing interventions addressing functional mobility, self-care, activity limitations and participation restrictions, balance and gait retraining while considering patient presentation. | 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes. | SI | Clinical mentorship |
| 21) Apply principles of safe body mechanics and best practice when selecting and performing manual therapy interventions, including but not limited to non-thrust mobilization, thrust manipulation thrust, neural mobilization, and soft tissue techniques while considering patient presentation. | 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes. | SI | Clinical mentorship |
| 22) Apply principles of safe biomechanics and best practice when selecting therapeutic exercise and aerobic capacity/endurance exercise while considering patient presentation. | 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes. 7A: Exercise science | SI | Clinical mentorship |

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| 23) Demonstrate effective teaching strategies when educating clients, family members, and caregivers related to their physical therapy diagnosis, prognosis, interventions, and relationship to activity limitations and participation restrictions. | 7D12: Effectively educate others using teaching methods that are commensurate with the needs of the learner, including participation in the clinical education of students. | SI | Clinical mentorship |
| 24) Explain the need for changes in plan of care based on patient response during/after interventions and modify or adjust the interventions as appropriate. | 7D30: Monitor and adjust the plan of care in response to patient/client status. | KI | Clinical mentorship |
| 25) Select appropriate criteria for discharge, discontinuation of plan of care, or progression along care continuum. | 7D26: Create a discontinuation of an episode of care plan that optimizes success for the patient in moving along the continuum of care. | KI | Clinical mentorship |
| 26) Analyze progress towards patient/client goals, monitor progress towards discharge and assess patient/client outcomes. | 7D31: Assess patient outcomes, including the use of appropriate standardized tests and measures that address impairments, functional status and participation. | KI | Clinical mentorship |

27) Perform accurate, concise and appropriate EHR patient documentation including billing procedures.

7D32: Complete accurate documentation related to 7D15 - 7D30 that follows guidelines and specific documentation formats required by state practice acts, the practice setting, and other regulatory agencies.

KI

Clinical mentorship

7D42 Participate in the financial management of the practice setting, including accurate billing and payment for services rendered.

28) Determine when delegation to support staff (PTA/aide) is appropriate

32) Describe practice management and quality services.

7D38: Participate in activities for ongoing assessment and improvement of quality services.

KI

Clinical mentorship and guided instruction

7D43: Participate in practice management, including marketing, public relations, regulatory and legal requirements, risk management, staffing and continuous quality improvement.

33) Respond effectively to patient/client environmental emergencies in the practice setting.

7D33: Respond effectively to patient/client and environmental emergencies in one's practice setting.

SA

Clinical mentorship

34) Recognize risks to patient or healthcare provider safety and



| | | |
|--|---|-------------|
| Mid-Term <i>Clinical Internship Evaluation Tool</i> (CIET) | 1 | Met/Not Met |
| Mid-Term Clinical Experience <i>Professional Behaviors Assessment</i> | 1 | Met/Not Met |
| Mid-Term <i>Clinical Reasoning Assessment Tool</i> (CRAT) | 1 | Met/Not Met |
| Final <i>Clinical Internship Evaluation Tool</i> (CIET) | 1 | Met/Not Met |
| Final Clinical Experience <i>Professional Behaviors Assessment</i> | 1 | Met/Not Met |
| Discussion Board Posts | 4 | Met/Not Met |
| Complete clinical site procedures and assignments (i.e drug testing, compliance training, etc) | 1 | Met/Not Met |
| Update clinical site information in Exxat | 1 | Met/Not Met |
| | | Pass/Fail |

although the grade will ordinarily reflect the lateness. Any deviation from this policy is at the discretion of the course instructor. All assignments must be submitted electronically unless previously approved by the professor.

Academic dishonesty and plagiarism

The DPT program follows the established guidelines in the Moravian University Academic Code of Conduct for all issues related to academic dishonesty or plagiarism. The Academic Code of Conduct may be found in the University Catalog and is available at:

<https://www.moravian.edu/catalog/academic-regulations/academic-code-of-conduct>

Attendance & Punctuality

Moravian University expects students to recognize the positive effect on academic success of clinic attendance and punctuality. All students are expected to attend all meetings of the courses in which they are enrolled; any absence is incurred at the student's own risk.

- 1) In the case of an absence (excused or unexcused), the student is responsible for what they may have missed in the clinic that day. They are allowed 1 excused absence from the clinic. If more than 1 absence has occurred, they will discuss with both their CI and DCE related to mak1 t

Tentative Course Outline:

| Date | Topic | Assessment |
|---------|---------------------|--|
| Week 1 | Clinical experience | Clinical site procedures and assignments due |
| Week 2 | | Discussion board post (Lifelong learning) due |
| Week 3 | | |
| Week 4 | | |
| Week 5 | | Discussion board post (Impact of health care policy on today's clinical practice) due |
| Week 6 | | Midterm CIET and Midterm <i>Professional Behaviors Assessment</i> due |
| Week 7 | | CRAT deadline |
| Week 8 | | |
| Week 9 | | Discussion board post (Use of health informatics in physical therapy practice) due |
| Week 10 | | |
| Week 11 | | Discussion board post (Personal definition of practice management based on real-life examples) due |
| Week 12 | | Final CIET and Final <i>Professional Behaviors Assessment</i> due |

Syllabus Changes: The course instructor reserves the right to modify the course syllabus in order to adjust to the learning needs of the students. Students will be notified of any changes prior to implementation. If the need arises, each student is responsible for clarifying any course expectations with the instructor.

Competency (CAPTE,
2017)

- 1) Integrate behaviors consistent with the APTA Code of Ethics in all interactions with

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| and other healthcare practitioners. | 7B: Ethics and values | | |
| 3) Integrate effective communication skills and flexibility in communication style during all clinical interactions, patient/client history taking, and feedback sessions with the interprofessional team. | 7D7: Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers. 7B: Communication | Clinical mentorship | CIET, <i>Professional Behaviors Assessment</i> |
| 4) Display cultural competence and respect for diversity in all clinical interactions, including but not limited to patient/clients, families, caregivers and the interprofessional team. | 7D8: Identify, respect, and act with consideration for patients'/clients' differences, values, preferences, and expressed needs in all professional activities. | Clinical mentorship | CIET and <i>Professional Behaviors Assessment</i> |
| 5) Demonstrate initiative, flexibility, implement constructive feedback, contribute to a positive work environment, utilize appropriate resources for problem solving, and recognize the importance of patient-centered interprofessional care and management. | 7D39: Participate in patient-centered interprofessional collaborative practice. | Clinical mentorship | CIET, <i>Professional Behaviors Assessment</i> and CRAT |

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|---------------------|---|--|----------------------------|----------------------|
| <p>8 2 3 6)</p> | <p>Perform a thorough chart review including but not limited to patient complaints, medical conditions/status, pertinent lab values, precautions, diagnostic tests, communications and systems review using this information to participate in the case management process.</p> | <p>7D17: Obtain a history and relevant information from the patient/client and from other sources as needed. 7D36: Participate in the case management process.</p> | <p>Clinical mentorship</p> | <p>CIET and CRAT</p> |
| <p>7)</p> | <p>Recognize psychosocial factors that may impact patient/client management and prognosis.</p> | <p>7A: Psychosocial aspects of health and disability</p> | <p>Clinical mentorship</p> | <p>CIET and CRAT</p> |
| <p>8)</p> | <p>Organize examination techniques efficiently and effectively for all patient/client cases including but not limited to systems review, differential diagnosis, and recognizing contraindications for further tests and measures.</p> | <p>7D18: Perform systems review.</p> | <p>Clinical mentorship</p> | <p>CIET and CRAT</p> |
| <p>9)</p> | <p>Choose and perform appropriate examination techniques to assess activity and participation restrictions including</p> | <p>7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status.</p> | <p>Clinical mentorship</p> | <p>CIET and CRAT</p> |

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| consideration of biopsychosocial and environmental factors. | | | |
| 10) Construct an examination plan using best practice and safe psychomotor skills to assess aerobic capacity/endurance and ventilation and respiration or gas exchange. | 7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status. | Clinical mentorship | CIET and CRAT |
| 11) Construct an examination plan using best practice and safe psychomotor skills to assess anthropometric characteristics, circulation (arterial, venous, lymphatic), and integumentary integrity. | 7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status. | Clinical mentorship | CIET and CRAT |
| 12) Construct an examination plan using best practice and safe psychomotor skills to assess cranial and peripheral nerve integrity including those that examine pain, sensory integrity, reflex integrity, and motor function. | 7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status. | Clinical mentorship | CIET and CRAT |
| 13) Construct an examination plan using best practice and safe psychomotor skills | 7D19: Select and competently administer tests and measures appropriate to the patient's age, | Clinical mentorship | CIET and CRAT |

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| to assess skeletal integrity, joint mobility & integrity, muscle performance, and range of motion. | diagnosis, and health status. | | |
| 14) Construct an examination plan using best practice and safe psychomotor skills for observation and assessment of posture, balance testing, and muscle performance. | 7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status. | Clinical mentorship | CIET and CRAT |
| 15) Construct an examination plan using best practice and safe psychomotor skills to assess mobility and gait/locomotion including determination of the need for assistive technology. | 7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status. | Clinical mentorship | CIET and CRAT |
| 16) Construct an examination plan using best practice and safe psychomotor skills to assess mental functions, neuromotor development, and sensory processing. | 7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status. | Clinical mentorship | CIET and CRAT |
| 17) Apply appropriate clinical reasoning and evaluation of examination data to classify impairments in body structure and | 7D20: Evaluate data from the examination (history, health record, systems review, and tests and measures) to make clinical judgments. | Clinical mentorship | CIET and CRAT |

function, activity limitations and participation restrictions and to determine the need to perform additional special tests and measures.

7D21: Use the International Classification of Function (ICF) to describe a patient's/client's impairments,

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|---|---|---------------------|---------------|
| | and other appropriate individuals. | | |
| | 7B: Clinical reasoning | | |
| 20) Utilize appropriate clinical decision making to characterize a PT diagnosis, prognosis, patient goals, and anticipated outcomes based on examination data. | 7D22: Determine a diagnosis that guides future client/patient management. | Clinical mentorship | CIET and CRAT |
| | 7D23: Determine patient/client goals and expected outcomes within available resources (including applicable payment sources) and specify expected length of time to achieve the goals and outcomes. | | |
| | 7B: Clinical reasoning | | |
| | 7C: Differential diagnosis | | |
| 21) Use principles of safe biomechanics and best practice to select and execute interventions related to airway clearance techniques while considering patient presentation. | 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes. | Clinical mentorship | CIET and CRAT |
| 22) Use principles of safe biomechanics and best practice to select and execute interventions related to the prescription, application, fabrication, or modification of assistive technology. | 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes. | Clinical mentorship | CIET and CRAT |
| 23) Differentiate the most appropriate | 7D27: Competently perform physical | Clinical mentorship | CIET and CRAT |

facilitation techniques, and soft tissue techniques.

- 27) Use principles of safe biomechanics and best practice to select and execute therapeutic exercise and aerobic conditioning while considering patient presentation.

27) Consistently perform physical therapy interventions and

7D42: Participate in the financial management of the practice setting, including accurate billing and payment for services rendered.

34) Appropriately and safely delegate to support staff (PTA/Aide) based on patient need, support staff ability, state law, federal regulations, and facility guidelines.

7D25: Determine those components of the plan of care that may, or may not, be directed to the physical therapist assistant.

Clinical mentorship

Professional Behaviors Assessment

35) Determine provision of appropriate supervision and consistency of communication with the PTA and support personnel regarding delegated components of the plan of care.

7D29: Delineate, communicate and supervise those areas of the plan of care that will be directed to the PTA.

Clinical mentorship

Professional Behaviors Assessment

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| reform and how they impact practice. | on the healthcare environment and practice. | and guided instruction | |
| 39) Explain components of practice management and quality improvement. | 7D38: Participate in activities for ongoing assessment and improvement of quality services. 7D43: Participate in practice management, including marketing, public relations, regulatory and legal requirements, risk management, staffing and continuous quality improvement. | Clinical mentorship and guided instruction | Discussion board post |
| 40) Apply knowledge of health informatics to the healthcare environment. | 7D40: Use health informatics in the healthcare en | Clinical mentorship and guided instruction | Discussion board post |
| 41) Recognize and appropriately intervene in patient/client environmental emergencies in the practice setting. | 7D33: Respond effectively to patient/client and environmental emergencies in one's practice setting. | Clinical mentorship | CIET |
| 42) Assess safety risks for self, patients/clients and the environment and recommend strategies to minimize risk. | 7D37: Assess and document safety risks of patients and the healthcare provider and design and implement strategies to improve safety in the healthcare setting as an individual and as a member of the interprofessional healthcare team. | Clinical mentorship | CIET |

Course Guidelines & Expectations: Please refer to the Moravian University DPT Program Clinical Education Handbook for specific details regarding clinical guidelines and expectations.

Grading Procedures:

| Course assignments | Quantity | Percent of Grade |
|---|----------|------------------|
| Mid-Term <i>Clinical Internship Evaluation Tool</i> (CIET) | 1 | Met/Not Met |
| Mid-Term Clinical Experience <i>Professional Behaviors Assessment</i> | 1 | Met/Not Met |
| Mid-Term <i>Clinical Reasoning Assessment Tool</i> (CRAT) | 1 | Met/Not Met |
| Final <i>Clinical Internship Evaluation Tool</i> (CIET) | 1 | Met/Not Met |
| Final Clinical Experience <i>Professional Behaviors Assessment</i> | 1 | Met/Not Met |
| Discussion Board Posts | 4 | Met/Not Met |
| Following clinical site set procedures and assignments (i.e drug testing, compliance training, etc) | 1 | Met/Not Met |
| Update clinical site information in Exxat | 1 | Met/Not Met |
| | | Pass/Fail |

PASS/FAIL: Students must complete all necessary assignments along with achieving the benchmark of “Always” and “At the Level for Familiar Patients” on the *Clinical Internship Evaluation Tool* and *Clinical Experience Professional Behaviors Assessment* to achieve a PASS. The Director of Clinical Education (DCE) ultimately determines the final grade for the clinical experience based upon CIET data and feedback provided by the clinical instructor(s).

Remediation Policy:

If a student is unsuccessful in meeting the required scores for the *Clinical Internship Evaluation Tool* and *Clinical Experience Professional Behaviors Assessment*, they will receive a failing grade and will need to meet with the DCE to develop a learning contract. Until the clinical education experience is successfully remediated they will not be able to progress through the program. Students will only be able to fail one clinical experience prior to being dismissed from the program.

Written assignments/discussion boards

Assignments not completed on time will result in automatic lowering of the grade by

10% each day until submitted (unless otherwise noted on the syllabus). If assignments are more than two days late, they will not be accepted and a “zero” will be assigned. Assignments are due at the beginning of class or lab on the due date. Emergencies do arise and make-up work may be negotiated with the instructor (at his or her discretion), although the grade will ordinarily reflect the lateness. Any deviation from this policy is at the discretion of the course instructor. All assignments must be submitted electronically unless previously approved by the professor.

Academic dishonesty and plagiarism

The DPT program follows the established guidelines in the Moravian University Academic Code of Conduct for all issues related to academic dishonesty or plagiarism. The Academic Code of Conduct may be found in the University Catalog and is available at:

<https://www.moravian.edu/catalog/academic-regulations/academic-code-of-conduct>

Attendance & Punctuality

Moravian University expects students to recognize the positive effect on academic success of clinic attendance and punctuality. All students are expected to attend all meetings of the courses in which they are enrolled; any absence is incurred at the student's own risk.

- 1) In the case of an absence (excused or unexcused), the student is responsible for what they may have missed in the clinic that day. They are allowed 1 excused ä .

Within 24 hours of an absence in the clinic, it is required that you inform the DCE of your absence and the reason for it. It is acceptable to email the DCE regarding an absence in the clinical setting.

Please note- it is expected that the student will work the hours that their CI(s) work. This may mean that they are required to work on weekends, holidays, and evening hours. Students should plan accordingly.

Use of Moravian email/electronic communications

- 1) Students are required to check their Moravian University email accounts and Canvas on a daily basis (including vacations and holidays). Important class and program information will be posted on Canvas and/or sent via email

Moravian University faculty are committed to providing a learning environment free from harassment and discrimination, including sexual harassment/violence under Title IX. Should a student disclose a concern of this nature, the faculty member is obligated to inform the Executive Director for Equity and Compliance (Title IX Coordinator), who will assist the student in determining support measures and resolution options. Reports can be made online anytime at www.moravian.edu/titleix. Fully confidential reporting options include the University Chaplains and professionals in the Counseling and Health Centers. Survivors are encouraged to seek immediate assistance by contacting the Advocates at (484) 764-9242. For more information, including grievance procedures, please view the Equal Opportunity, Harassment, and Non-Discrimination Policy at www.moravian.edu/policy.

Tentative Course Outline:

| Date | Topic | Assessment |
|--------|---------------------|---|
| Week 1 | Clinical experience | Clinical site procedures and assignments due |
| Week 2 | | Discussion board post (How does your CI exemplify lifelong learning?) due |
| Week 3 | | Discussion board post (Health Care Policies and clinical decision making) due |
| Week 4 | | Midterm CIET and Midterm <i>Professional Behaviors Assessment</i> due |
| Week 5 | | Discussion board post (The need of health informatics in today's clinical practice) due; CRAT deadline |
| Week 6 | | |
| Week 7 | | Discussion board post (Quality improvement assessment) due |
| Week 8 | | |
| Week 9 | | Final CIET and Final <i>Professional Behaviors Assessment</i> due; Clinical Site information sheet due final clinical day |

Syllabus Changes: The course instructor reserves the right to modify the course syllabus in order to adjust to the learning needs of the students. Students will be notified of any changes prior to implementation. If the need arises, each student is responsible for clarifying any course expectations with the instructor.

Appendix 7: DPT 940 Clinical Education Experience III

Moravian University
School of Rehabilitation Sciences
Doctor of Physical Therapy
Semester 8

Course: DPT 940
Course Title: Clinical Education Experience III
Credit Hours: 8 Credit Hours
Prerequisites: DPT 811/865/870/875/880/885/861
Clock Hours: 35-40 hours per week

Instructor: [To be determined]
Office:



| | Competency (CAPTE, 2017) | | |
|--|--|---------------------|---|
| 1) Exemplify behaviors consistent with the <i>APTA Code of Ethics</i> and legal requirements in all interactions with patients/clients and families including vulnerable populations and other healthcare practitioners. | 7D1: Adhere to legal practice standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management. | Clinical mentorship | CIET |
| | 7D2: Report to appropriate authorities suspected cases of abuse of vulnerable populations. | | |
| | 7D3: Report to appropriate authorities suspected cases of fraud and abuse related to the utilization of and payment for physical therapy and other health care services. | | |
| | 7D4: Practice in a manner consistent with the <i>APTA Code of Ethics</i> . | | |
| | 7D6: Implement, in response to an ethical situation, a plan of action that demonstrates sound moral reasoning congruent with core professional ethics and values. | | |
| | 7B: Ethics and values | | |
| 2) Exemplify behaviors consistent with the <i>APTA Core Values</i> in all interactions | 7D5: Practice in a manner consistent with the <i>APTA Core Values</i> . | Clinical mentorship | CIET and <i>Professional Behaviors Assessment</i> |
| | 7B: Ethics and values | | |

importance of
patient-centered
interprofessional
care.

- 6) Perform a thorough and efficient chart review and history including but not limited to patient complaints, medical conditions/status, pertinent lab values, precautions, diagnostic tests, communications and systems review using this information to participate in the case management

differential diagnosis, and recognizing contraindications for further tests and measures and interventions or need for referral or consultation by another healthcare professional.

healthcare professional.

- 9) Employ appropriate examination techniques to assess activity limitations and participation restrictions including functional status, self-care and civic, community, domestic, education, social life, work life and environmental factors.

7D19: Select and administer tests and measures appropriate to the patient's

MK

assess anthropometric characteristics, circulation (arterial, venous, lymphatic), and integumentary integrity.

diagnosis, and health status.

12) Select and execute appropriate examination techniques to assess cranial and peripheral nerve integrity including those that examine pain, sensory integrity, reflex integrity, and motor function.

7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status.

Clinical mentorship

CIET and CRAT

13) Select and execute appropriate examination techniques to assess skeletal integrity, joint mobility & integrity, and range of motion.

competently

| | | | |
|--|--|----------------------------|----------------------|
| <p>need to perform additional special tests and measures.</p> | <p>describe a patient's/client's impairments, activity and participation limitations.</p> | | |
| <p>18) Formulate a PT diagnosis, prognosis, expected outcomes, appropriateness of care, plan of care, duration of interventions, and patient goals for patients across the lifespan.</p> | <p>7B: Clinical reasoning 7D16: Determine when patients/clients need further examination or consultation by a physical therapist or referral to another health care professional. 7D22: Determine a diagnosis that guides future patient/client management. 7D23: Determine patient/client goals and expected outcomes within available resources (including applicable payment sources) and specify expected length of time to achieve the goals and outcomes. 7D24: Establish!</p> | <p>Clinical mentorship</p> | <p>CIET and CRAT</p> |

| | | | |
|--|---|----------------------------|-------------|
| <p>achievement of goals to determine appropriateness for discharge, discontinuation of plan of care, or progression along the care continuum for patients across the lifespan.</p> | <p>plan that optimizes success for the patient in moving along the continuum of care.</p> | <p>Clinical mentorship</p> | <p>CIET</p> |
| <p>20) Critically analyze appropriate evidence-based care, clinical knowledge and theory to create and defend a patient-centered plan of care based on patient presentation.</p> | <p>7D10: Apply current knowledge, theory, and professional judgment while considering the patient/client perspective, the environment, and available resources. 7D11: Identify, evaluate and integrate the best evidence for practice with clinical judgment and patient/client values, needs, and preferences to determine the best care for a patient/client. 7B: Evidence-based practice, clinical reasoning</p> | <p>Clinical mentorship</p> | <p>CIET</p> |
| <p>21) Use principles of safe biomechanics and best practice to select, justify and execute appropriate airway clearance techniques while considering</p> | <p>7D27: Competently perform physical therapy interventions to</p> | <p>Clinical mentorship</p> | <p>CIET</p> |

patient
presentation.

- 22) Use principles of safe biomechanics and best practice to select, justify and execute appropriate therapeutic modalities and apply proper parameters of the chosen therapeutic modality while considering patient presentation.
- 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes.

| | | | |
|---|--|---------------------|---------------|
| considering patient presentation. | | | |
| 25) Select, justify and execute interventions related to integumentary repair and protection based on best practice while considering patient presentation. | 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes. | Clinical mentorship | CIET and CRAT |
| 26) Use principles of safe biomechanics and best practice to select, justify and execute manual therapy interventions including but not limited to non-thrust mobilization, thrust manipulation techniques, neural mobilization, facilitation techniques, and soft tissue techniques. | 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes. | Clinical mentorship | CIET and CRAT |
| 27) Use principles of safe biomechanics and best practice to select, justify and execute therapeutic exercise and aerobic conditioning while considering | 7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes. | Clinical mentorship | CIET and CRAT |

| | | | |
|---|--|---------------------|---------------|
| patient presentation. | <p>7D12: Effectively educate others using teaching methods that are commensurate with the needs of the learner, including participation in the clinical education of students.</p> <p>7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes.</p> | Clinical mentorship | CIET and CRAT |
| <p>28) Integrate effective teaching strategies when educating clients, family members, and caregivers related to their physical therapy diagnosis, prognosis, interventions, and relationship to activity limitations and participation restrictions.</p> | | | |
| <p>29) Demonstrate entry-level skill in monitoring changes in patient/client status and modifying or adjusting the interventions or plan of care as appropriate.</p> | | | |

and implement
strategies to
minimize risk.

the healthcare setting
as an individual and as
a member of the



receive a failing grade and will need to meet with the DCE to develop a learning contract. Until the clinical education experience is successfully remediated they will not be able to graduate.

Written assignments/discussion boards

Assignments not completed on time will result in automatic lowering of the grade by 10% each day until submitted (unless otherwise noted on the syllabus). If assignments are more than two days late, they will not be accepted and a “zero” will be assigned. Assignments are due at the beginning of class or lab on the due date. Emergencies do arise and make-up work may be negotiated with the instructor (at his or her discretion), although the grade will ordinarily reflect the lateness. Any deviation from this policy is at the discretion of the course instructor. All assignments must be submitted electronically unless previously approved by the professor.

Academic dishonesty and plagiarism

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<https://www.moravian.edu/catalog/academic-regulations/academic-code-of-conduct>

Attendance & Punctuality

Moravian University expects students to recognize the positive effect on academic success of clinic attendance and punctuality. All students are expected to attend all meetings of the courses in which they are enrolled; any absence is incurred at the student's own risk.

- 1) In the case of an absence (excused or unexcused), the student is responsible for what they may have missed in the clinic that day. They are allowed 1 excused absence from the clinic. If more than 1 absence has occurred, they will discuss with both their CI and DCE related to making up the missed clinic days. Refer to the communicable disease policy in relation to absences due to illness.
- 2) If more than 1 absence has occurred, a plan will be developed between the SCCE, DCE, and CI. This will include attention to extenuating circumstances.
- 3) Failure to attend clinical experiences or tardiness without an excused absence will require the student to meet with the DCE except in extenuating circumstances. In the case of student tardiness, the CI will have the right to ask a student to leave the clinic for the day. It is expected that if this were to occur, students will remain professional and honor the CI's request without causing further disruption. If there is a pattern of unexcused absences or tardiness, a meeting with the DCE will occur and a Professional Behavior Corrective Action Plan (PB-CAP) will be created.
- 4) Failure to meet clinical requirements during integrated clinical experiences may result in failing the class. Students are expected to be present for all clinical

experiences during the integrated clinicals except in cases of extenuating circumstances. If extenuating circumstances exist, the DCE and the student will meet to determine the most appropriate course of action.

Emergencies and illnesses do happen. Please note that if you are unable to attend your clinical experience for the day you will report that information to your T

works with students confidentially and does not disclose any disability-related information without the student's permission. To contact the Accessibility Services Center (ASC), located in the lower level of Monocacy Hall, call 610-861-1401, or email asc@moravian.edu.

Title IX

Moravian University faculty are committed to providing a learning environment free from harassment and discrimination, including sexual harassment/violence under Title IX. Should a student disclose a concern of this nature, the faculty member is obligated to inform the Executive Director for Equity and Compliance (Title IX Coordinator), who will assist the student in determining support measures and resolution options. Reports can be made online anytime at www.moravian.edu/titleix. a 0 .
(



Week 12

Discussion board post (CI for a day reflection) due

Week 13

Week 14

Week 15

Final CIET and Final *Professional Behaviors Assessment* due;
Clinical Site information due final clinical day

Syllabus Changes: The course instructor reserves the right to modify the course syllabus in order to adjust to the learning needs of the students. Students will be notified of any changes prior to implementation. If the need arises, each student is responsible for clarifying any course expectations with the instructor.

Appendix 8: Clinical Internship Evaluation Tool

Clinical Internship Evaluation Tool

Student Name: _____

Student ID Number: _____ **Year of Graduation:** _____

Clinical Facility: _____

Type of Rotation: _____ **Date:** _____

Midterm: _____ **Final:** _____ **or One-Year Affiliation Quarter (specify):** _____

Days Absent: _____ **Days Made Up:** _____

Clinical Instructor: _____

Clinical Instructor's Phone Number: _____

Clinical Instructor's Email: _____

Clinical Instructor Assessment _____ **or Self-Assessment** _____

Clinical Instructor Only:

Completed Basic

Credentialing Course? ___ **Yes** ___ **No**

Completed Advanced Course? ___ **Yes** ___ **No**

Other Credentials: _____ **Years of Clinical Experience** _____

Please Return to: Alison Roll, PT, DPT
 Director of Clinical Education
 Program of Physical Therapy
 1441 Schoenersville Road,
 Bethlehem, PA 18018

To Contact DCE:

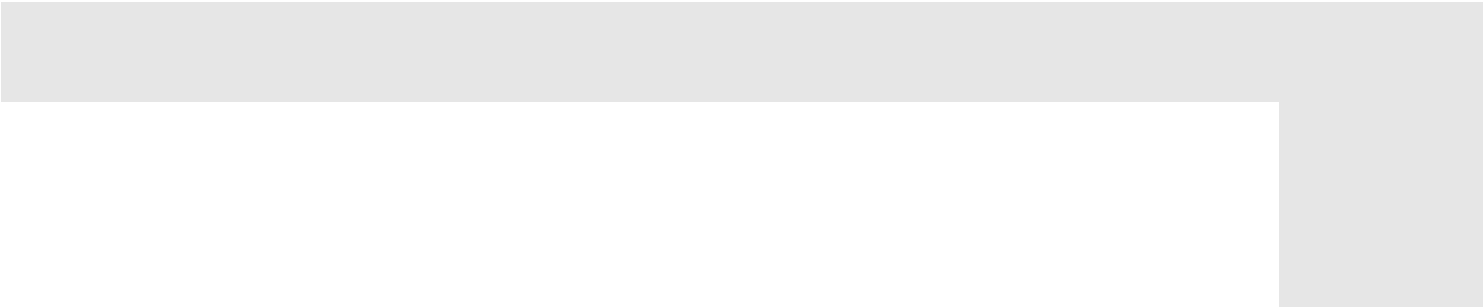
Observed” on these beha

Familiar presentation: Could include

Please score the student on _____ items as follows:

Student requires Guidance from their clinical instructor to

affiliation are the minimal expectations for the affiliation so if they are not meeting them, then they are not performing at a satisfactory level. Please let the DCE know immediately if there is a problem in any area of _____ or the student is not meeting their clinic _____ the



| | | | | | | |
|--|--|--|--|--|--|--|
| Safety Precautions(e.g. Universal /Standard Precautions) | | | | | | |
| 2. Takes appropriate measures to minimize risk of injury to self (e.g. appropriate body mechanics) | | | | | | |
| 3. Takes appropriate measures to minimize risk of injury to patient (e.g. chooses correct level of assist) | | | | | | |
| Comments: | | | | | | |
| <p>Met Clinical Benchmarks for Safety Yes No</p> | | | | | | |

| PROFESSIONAL ETHICS | | | | | | |
|---|--|--|--|--|--|--|
| <p>1. Demonstrate compliance with all regulations regarding patient privacy, confidentiality, and security. (e.g. HIPAA, DOH, PA PT Practice Act)</p> | | | | | | |
| <p>2. Demonstrates positive regard for patients/peers during interactions</p> | | | | | | |
| <p>3. Demonstrates cultural competence; shows tolerance of and sensitivity to individual differences</p> | | | | | | |

| | | | | | | |
|---|--|--|--|--|--|--|
| 4. Adheres to ethical and legal standards of practice, including Practice Act and APTA Code of Ethics | | | | | | |
| 5. Maintains appropriate appearance and attire in accordance with the facility's dress code | | | | | | |
| 6. Maintains appropriate professional conduct and demeanor as per the Code of Professional Conduct | | | | | | |
| 7. Demonstrates awareness of patients' rights and responsibilities | | | | | | |

Comments:

Met Clinical Benchmarks for Professional Ethics Yes No

STUDENT NAME: _____

| STANDARDS & BENCHMARKS | | | RATING | | | |
|---|-------|--------|-----------|------------------|--------|--------------|
| PROFESSIONAL BEHAVIORS | Never | Rarely | Sometimes | Most of the Time | Always | Not Observed |
| INITIATIVE | | | | | | |
| 1. Recognizes and maximizes opportunity for learning | | | | | | |
| 2. Implements constructive criticism | | | | | | |
| 3. Utilizes available resources for problem solving | | | | | | |
| 4. Is a positive contributor to the efficient operation of the clinic | | | | | | |

| | | | | | | |
|---|--|--|--|--|--|--|
| through the demonstration of teamwork and flexibility | | | | | | |
| Comments: | | | | | | |
| Met Clinical Benchmarks for Initiative Yes No | | | | | | |
| COMMUNICATION SKILLS | | | | | | |
| _____ | | | | | | |
| 1. With patients and families/caregivers | | | | | | |
| 2. With healthcare professionals (e.g. MD, nurses, insurance carriers, case managers, OT, ST, etc.) | | | | | | |
| _____ | | | | | | |
| 3. Documentation standards (e.g. concise, accurate, legible; conforms with standard procedures) | | | | | | |

4. With professionals (e.g. documentation, letters, plans of care, etc.)

5. With patients and families/caregivers (e.g. patient home programs, etc.)

Comments:

Met Clinical Benchmarks for Communication Yes No

Student signature:

Date:

Clinical Instructor signature:

Date:

STUDENT NAME: Please compare the student to the competent clinician who is able to skillfully manage patients in an efficient manner to achieve an effective outcome. (Refer to page 3 for RATING definitions)

STANDARDS & BENCHMARKS

RATING

PATIENT MANAGEMENT

**Well
Below**

Below

**At
That
Level
I for
Fami
liar
Patie
nts**

**At
That
Level
for all
Patien
ts**

Above

EXAMINATION

1. Obtains an accurate history of current problem
2. Identifies problems related to activity limitations and participation restrictions using standardized outcomes instruments when available
3. Performs systems review and incorporates relevant past medical history
4. Generates an initial hypothesis
5. Generates alternative hypotheses (list of differential dx)
6. Selects evidence-based tests and measures to confirm or disconfirm hypotheses
7. Recognizes contraindications for further tests and measures
8. Demonstrates appropriate psychomotor skills when performing tests and measures

EVALUATION

1. Makes correct clinical decisions based on the data gathered in the examination (confirms/disconfirms initial and alternative hypotheses)
2. Identifies impa... o

| | | | | | |
|--|--|--|--|--|--|
| 3. Administers further tests and measures as needed for appropriate clinical decision making | | | | | |
| DIAGNOSIS/PROGNOSIS | | | | | |
| 1. Determines a diagnosis for physical therapy management of the patient | | | | | |
| 2. Determines expected outcomes (using standardized indices of activity limitations and participation restrictions where applicable) of physical therapy interventions (goals) | | | | | |
| 3. Selects appropriate physical therapy interventions or makes appropriate consultations or referrals | | | | | |
| 4. Determines appropriate duration and frequency of intervention; considers cost effectiveness | | | | | |
| 5. Determines criteria for discharge | | | | | |
| INTERVENTION | | | | | |
| 1. Adheres to evidence during treatment selection | | | | | |
| 2. Applies effective treatment using appropriate psychomotor skills | | | | | |
| 3. Incorporates patient/family education into treatment | | | | | |
| 4. Incorporates discharge planning into treatment | | | | | |
| 5. Assesses progress of patient using appropriate measures | | | | | |

6. Modifies intervention according to patient/client's response to treatment
7. Recognizes when expected outcome has been reached and makes appropriate recommendations
8. Recognizes psychosocial influences on patient management

STUDENT NAME:

Please comment here on the specific areas of concern or areas of strength.

Examination:

Met Clinical Ben]

Place an "X" in the box which best describes the student.

0 1 2 3 4 5 6 7 8 9 10

2. Is the student performing at a level that is satisfactory for his/her current level of education?

_____ Yes_____

_____ No_____

Summative Comments: _____

Student Signature:_____

Date:

Clinical Instructor Signature:___

Date:

Adapted from: Fitzgerald, L.M., Delitto A. & Irrgang J.J. (2007). Validation of the Clinical Internship Evaluation Tool, *Physical Therapy*, 87(7),844–860.

Appendix 9: Clinical Education Experience Professional Behavior Assessment

In addition to filling out the CIET, we ask that the CI also fills out this form to ensure that our students are

Unable

|-----|-----|-----|-----|-----|-----|-----|-----|

Comments:

**Appendix 10: Clinical Reasoning Assessment Tool (CRAT)
Clinical Reasoning Assessment Tool**

Identifier: _____ Date: _____

Indicate if you are the: **Faculty** **Learner**

Assessment: **Competency** _____ **Practical** _____ **ICE I/II CAPE 1/2**
CE I/II/III

_____ – identifies appropriate foundational knowledge and information related to the International Classification of Functioning, Disability, and Health (ICF) Framework. Content knowledge is the knowledge the resident brings to the case, not the knowledge the patient brings/shares. In addition, this is just the

Sample behaviors to assess:

- 1) Identifies appropriate foundational knowledge integral to patient’s health condition including biological and physical (anatomy, histology, physiology, kinesiology, and neuroscience).
- 2) Determines relevant ICF components as they relate to the patient case (identifies the patient’s health condition, body structure and function limitations, activity limitations, participation restrictions, and personal and environmental factors).

VISUAL ANALOG SCALE (please mark)

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Beginner

Intermediate

Competent

Proficient

| | | | |
|--|---|---|--|
| Limited evidence of content and foundational knowledge and identification of patient-related ICF components | Moderate evidence of content and foundational knowledge and identification of patient-related ICF components | Strong evidence of content and foundational knowledge and identification of patient-related ICF components | Comprehensive evidence of content and foundational knowledge and identification of patient-related components |
|--|---|---|--|

Comments:

_____ – ability to determine appropriate test/measure/intervention and psychomotor performance of an intervention/test/skill. (When to perform skill, What skills to perform, and How to perform skill)

Sample behaviors to assess:

- 1) Determines appropriate test/measure/intervention to perform
- 2) Demonstrates the ability to safely and effectively perform test/measure/intervention

(hand placement, patient positioning, palpation, force production, safety, use of equipment)

Appendix 11: CI Student Readiness Assessment

CI Student Readiness Assessment

Thank you for spending time with our students. Your time, expertise and interest are very important to them. It will help them develop into competent entry level practitioners. We ask that you take a few minutes to fill out the following student readiness assessment. Your time and feedback are very important to the growth and development of our students. For any questions, please direct them to the Director of Clinical Education, Alison Roll (rolla@moravian.edu)

The below rubric has been adapted from the American Council of Academic Physical Therapy's document and paper on student readiness for Clinical Experiences, called "Student Readiness for the First Full-Time Clinical Experience." Please use the rating scale below to mark where the student is in the following areas.

Student has basic knowledge of the material/skill/behavior and would require guidance to apply it appropriately in the clinical setting.

Student understands how to apply the material/skill/behavior safely and consistently in simple situations and would require guidance to apply the concept or perform the task in more complex situations.

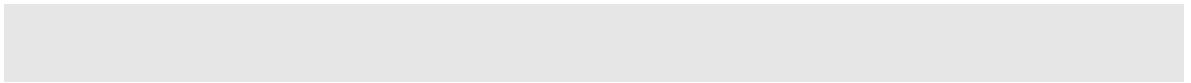
Student can integrate the knowledge/skill/behavior safely and independently in all (simple and complex) clinical situations and is able to identify the need for guidance appropriately.

**At least
familiar**

WOLE

| | | | |
|---|--|--|--|
| seeking out resources, including support from others when needed, to assist in implementation of the plan | | | |
| Students should utilize constructive feedback by: | | | |
| being open and receptive, verbally/non-verbally | | | |
| implementing actions to address issues promptly | | | |
| reflecting on feedback provided | | | |
| Students should demonstrate effective communication abilities within the following groups: | | | |
| diverse patient populations | | | |
| families and other individuals important to the patients | | | |
| healthcare professionals | | | |
| Students should exhibit effective verbal, non-verbal and written communication abilities to: | | | |
| listen actively | | | |
| demonstrate polite, personable, engaging and friendly behaviors | | | |
| independently seek information from appropriate sources | | | |
| build rapport | | | |
| seek assistance when needed | | | |
| engage in shared decision-making with patients | | | |
| demonstrate empathy | | | |
| use language and terminology appropriate for the audience | | | |
| introduce one's self to CI, clinical staff, and patients | | | |
| Students should be prepared to engage in learning through demonstrating: | | | |
| accountability for actions and behaviors | | | |
| resilience/perseverance | | | |
| cultural competence and sensitivity | | | |
| an eager, optimistic and motivated attitude | | | |
| respect for patients, peers, healthcare professionals and community | | | |
| open-mindedness to alternative ideas | | | |

self-care to





Comments:

3. Emotional Intelligence

Lacks self-reflection
Does not cope with
challenge/conflict/uncertainty
Lacks emotional stability
Lacks humility
Displays unearned confidence or conceit

Exceptional self-reflection
Copes with challenge/conflict/uncertainty
Demonstrates emotional stability
Is humble
Displays commensurate confidence



Comments:

4. Communication & Interpersonal Skills

Ineffective verbal/non-verbal communication
Lacks active listening skills
Inappropriate behavior (hostile, aggressive,
etc.)

Communicates effectively

Appendix 13: Peer Professional Behavior Continuum Assessment

After spending time with your peer partner in the clinic, please rate them on the following continuum below related to their performance. Your constructive feedback will help improve their performance in the clinical setting. It is encouraged that explanations of ratings are provided for each category. The likert scale ranges from 1-10, with 1 meaning that they do not display these characteristics and 10 meaning that they are exemplar. Please explain any ratings that are at a 6 or below and at a 9 or above.

Peer Professional Behavior Continuum Assessment

1. Collaboration & Teamwork



-----|-----|-----|-----|-----|-----|-----|-----|-----|

Comments:

3. Communication & Interpersonal Skills

| | |
|--|---|
| Ineffective verbal/non-verbal communication Lacks active listening skills Inappropriate behavior (hostile, aggressive, etc.) | Communicates effectively (verbal and non-verbal) with others Uses active listening skills Displays professional appropriate behavior at all times |
| ----- ----- ----- ----- ----- ----- ----- ----- ----- | |
| Comments: | |

4. Critical Thinking

| | |
|--|---|
| Unable to formulate logical questions to treatment interventions/evaluations Unable or challenged with identifying, generating and evaluating elements of logical argument Unable or challenged with utilizing, analyzing and critically evaluating scientific evidence Unable or challenged when determining the impact of bias on the decision making process | Able to logically question treatment interventions/evaluations Able to identify, generate and evaluate elements of logical argument Able to utilize, analyze and critically evaluate scientific evidence Able to determine the impact of bias on the decision making process |
| ----- ----- ----- ----- ----- ----- ----- ----- ----- | |
| Comments: | |

Appendix 14: Professional Dispositions, Behaviors and Essential Functions

The Commission on Accreditation of Physical Therapy Education accredits professional training programs in physical therapy and requires institutions to ensure that students demonstrate entry-level clinical performance prior to graduation. Accredited programs must provide evidence that their graduates have acquired the knowledge and skills necessary for eligibility to sit for the National Physical Therapy Examination (NPTE) and upon passing the examination, enter into the profession of physical therapy. As a result, all students admitted to the program must be able to demonstrate the following essential functions with or without reasonable accommodations.

Essential competencies include the ability to meet the cognitive, affective and psychomotor requirements of the curriculum. Examples of tasks related to these essential competencies include the following:

- 1) Comprehend, retain, integrate, synthesize, and apply information to meet curricular and clinical demands;
- 2) Display mature, empathic, and effective relationships with clients and faculty/staff while maintaining professional boundaries;
- 3) Display affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care;
- 4) Communicate professionally, intelligibly, and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds. This includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively;
- 5) Possess reading and writing skills sufficient to meet curricular and clinical demands. Students must be able to understand and speak the English language at a level consistent with competent professional practice;
- 6) The ability to adjust to changing situations and uncertainty in clinical situations;
- 7) Sufficient postural and neuromuscular control, sensory functions, -

These professional dispositions, behaviors and essential functions are developmental, meaning you are not necessarily expected to demonstrate these immediately. However, as you move through the program and receive instruction and education on these skills, you are expected to gradually become proficient in these professional competencies.

You are expected to progress from awareness and understanding to demonstrating, mastering and integrating the following professional dispositions, behaviors and essential functions. Successful progression through the program requires students to progress in these behaviors and functions throughout the program.

- 1) Professionalism: The ability to maintain appropriate hygiene, dress, and demeanor and to follow program policies and procedures.
- 2) Collaboration: The willingness and ability to work together with students, clinical & academic faculty, other healthcare professionals and patients/clients.
- 3) Honesty/Integrity: The ability to demonstrate moral excellence and trustworthiness.
- 4) Respect: The ability to demonstrate consideration and regard for self and others regardless of ethnicity, age, sexual orientation, gender, or religious affiliation. The University's Equal Opportunity, Harassment, and Non-Discrimination statement specifies non-discrimination on the basis of

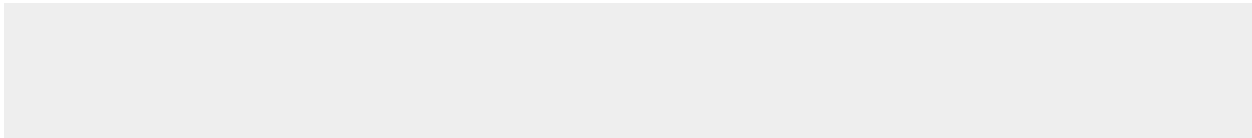
Appendix 15: Learning Plan Example

Student responsibilities

1. Assist in developing an appropriate learning plan that meets current needs.
2. Develop a detailed schedule that has you working on contract goals and objectives regularly.
3. Take the initiative to contact your CI or the DCE immediately to get the assistance you need (with, for example, motivation, resources, feedback).
4. Meet with your CI regularly and DCE as needed to review progress and discuss material.

Clinical Instructor responsibilities

1. Assist in developing the learning plan and ensure its



Appendix 16: DPT Professional Behavior Corrective Action Plan

In addition to the expectations stated in the Moravian University student code of conduct, all DPT students are also held accountable to standards of professional behavior that are reflective of the *APTA Core Values and Code of Ethics*.

If a faculty member, clinical instructor, director of clinical education or peer identifies and documents a problem with a student's professional behavior or inability to maintain a standard within the realm of acceptable professional behavior, the student may be placed on the Professional Behavior Corrective Action Plan (PB-CAP). However, if the event is *egregious* enough to warrant suspension or dismissal per the Moravian University student code of conduct, a student will not be given the opportunity to enter into this plan and will be immediately dismissed from the DPT program. Examples for this action include but are not limited to: felony conviction; pleading no contest for behaviors that would prohibit the granting of a physical therapy license; behaviors that jeopardize the welfare of patients, aggressive behavior towards peers or educators, or other behaviors that are determined to be non-remediable. If the event is determined to be remediable and does not violate the Moravian University student code of conduct, they will be allowed to enter into the PB-CAP.

The PB-CAP has two steps:

Step 1: If the student identifies a problem with a faculty member, director of clinical education and professional

determine that the student has not satisfactorily remediated the behavior as defined



Comments:

4. Compassion

| | |
|--|--|
| Lacks empathy and compassion Is not sensitive to others' needs Does not acknowledge or value the influence of social stigmas | Displays empathy and compassion Is always sensitive to others' needs Acknowledges and seeks to alleviate social stigma |
|--|--|



Comments:

5. Responsibility

| | |
|---|---|
| Lacks personal responsibility for actions Does not recognize limits or seek help Does not recognize others' needs Does not confront problematic behavior | Always takes responsibility for actions Recognizes limits and seeks help Recognizes and responds to others' needs Confronts problematic behavior |
|---|---|



Comments:

6. Reverence for Learning

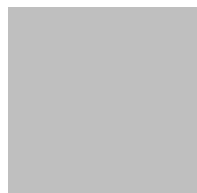
| | |
|--|---|
| Does not take responsibility for learning Does not welcome and utilize constructive criticism Does not identify or acknowledge learning barriers | Takes responsibility for learning Values and implements changes based on constructive criticism Acknowledges and identifies learning barriers |
|--|---|

Is additional

Appendix 20: Midterm Site Visit Form

**Moravian University
Doctor of Physical Therapy
Site Visit Form**





| | |
|---|--|
| 6. Number of hours student works (typical week): _____ % of time spent with the CI during the day _____ Additional hours spent at site outside of working hours _____ Additional hours spent preparing at home | |
| Do you believe that the expected workload is reasonable? Why or why not? | |

Faculty Signature: _____

Date: _____

Appendix 21: Physical Therapy Student Evaluation Form

PHYSICAL THERAPIST STUDENT EVALUATION:

CLINICAL EXPERIENCE
AND
CLINICAL INSTRUCTION

specific learning experience. The development of this tool was based on key assumptions for the purpose, need for, and intent of this tool. These key assumptions are described in detail below. This tool consists of two sections that can be used together or separately: Section 1-Physical therapist student assessment of the clinical experience and Section 2-Physical therapist student assessment of clinical instruction. Central to the development of this tool was an assumption that students should actively engage in their learning experiences by providing candid feedback, both formative and summative, about the learning experience and with summative feedback offered at both midterm and final evaluations. One of the benefits of completing Section 2 at midterm is to provide the CI and the student with an opportunity to modify the learning experience by making midcourse corrections.

Key Assumptions

The tool is intended to provide the student's assessment of the quality of the clinical learning experience and the quality of clinical instruction for the specific learning experience.

The tool allows students to objectively comment on the quality and richness of the learning experience and to provide information that would be helpful to other students, adequacy of their preparation]

Department in completing this project. We are especially indebted to those individuals from the Clinical Education SIG who willingly volunteered their time to develop and refine these tools. Comments and feedback provided by academic and clinical faculty, clinical educators, and students on several draft versions of this document were instrumental in developing, shaping, and refining the tools. Our gratitude goes out to all of those individuals and groups who willingly gave their time and expertise to work toward a common voluntary PT and PTA Student Evaluation Tool of the Clinical Experience and Clinical Instruction.

Ad Hoc Group Members: Jackie Crossen-Sills, PT, MS, Nancy Erikson, PT, MS, GCS, Peggy Gleeson, PT, PhD, Deborah Ingram, PT, EdD, Corrie Odom, PT, DPT, ATC, and Karen O'Loughlin, PT, MA

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General Information

Student Name

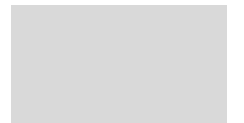
Academic

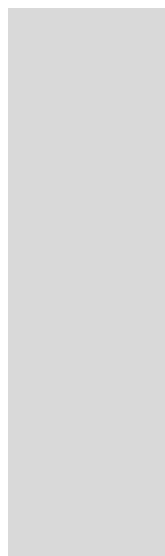
however

ECF/Nursing Home/SNF
Federal/State/County Health
Industrial/Occupational Health Facility
Orientation

School/Preschool Program
Wellness/Prevention/Fitness Program
Other

4. Did you receive





14. In

of

- 20. What do you believe were the strengths of your physical therapist academic preparation and/or coursework for *this clinical experience*?
- 21. What curricular suggestions do you have that would have prepared you better for *this clinical experience*?

SECTION 2: PT STUDENT ASSESSMENT OF CLINICAL INSTRUCTION

Information found in this section is to be shared between the student and the clinical instructor(s) at midterm and final evaluations. Additional copies of Section 2 should be made when there are multiple CIs supervising the student. Information contained in Section 2 is confidential and will not be shared by the academic program with other students.

Assessment of Clinical Instruction

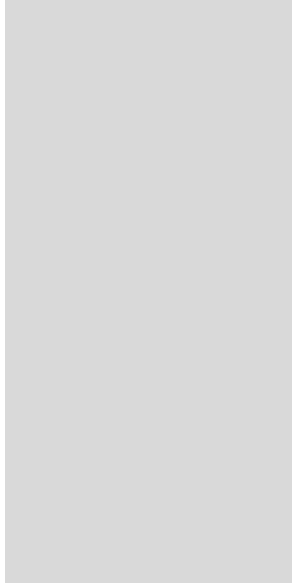
- 22. Using the scale (1 - 5) below, rate how clinical instruction was provided during this clinical experience at both midterm and final evaluations (shaded columns).

1=*Strongly Disagree* 2=*Disagree* 3=*Neutral* 4=*Agree* 5=*Strongly Agree*

6
Provision of Clinical Instruction

Midterm

The CI clearly explained your student responsibilities.
 The CI provided responsibilities that were within your scope of knowledge and skills.
 The CI facilitated patient-therapist and therapist-student relationships.
 Time was available with the CI to discuss patient/client management.
 The CI served as a positive role model in physical therapy practice.
 The CI skillfully used the clinical environment for planned and unplanned learning experiences.
 The CI integrated knowledge of various learning styles into student clinical teaching.
 The CI made the formal evaluation process constructive.
 The CI encouraged the student to self-assess.



23. Was your CI'(s) evaluation of your level of performance in agreement with your self-assessment?

| | | | | | |
|----|--------------------|-----|----|------------------|-----|
| | Midterm Evaluation | Yes | No | Final Evaluation | Yes |
| No | | | | | |

24. If m dterm

Thank you for sharing and discussing candid feedback with your CI(s) so that any necessary midcourse corrections can be made to modify and further enhance your learning experience.