# Clinic

# **Table of Contents**

Section I: Introduction to the Moravian University Doctor of Physical Therapy	
Program	5
Preface	5
Mission Statement	5
Accreditation	5
National Council for State Authorization Reciprocity (SARA)	6
Section II: Purpose of the Clinical Education Handbook	6
Section III: Philosophy of Clinical Education	7
Section IV: Structure of Clinical Education Program	7
Integrated Clinical Experience	7
Clinical Education Experiences	8
Clinical Evaluation Assessment Tools	8
Clinical Internship Evaluation Tool (CIET)	8
Clinical Education Experience Professional Behaviors Assessment	
(CEEPBA)	8
Clinical Reasoning Assessment Tool (CRAT)	9
CI Student Readiness Assessment	9
CI Professional Behavior Continuum	9

SECTION VII: Student Requirements	14
Expenses/travel Related to Clinical Education	14
Criminal Background Check	15
Drug and Alcohol Policy	15
Medical Marijuana Policy	17
Student Professional Liability Insurance	17
Required Immunizations and Medical Testing	17
Communicable Disease Policy	17
Tuition Costs Due to Extension of Clinical Education Experience	19
Student Injury	19
Personal Health Insurance	19
OSHA/Bloodborne Pathogen Training	19
HIPAA Training	20
CPR	20
Section VIII: Academic Requirements for Clinical Education	20
Grading Procedures	20
Student Readiness for Clinical Education Experiences	20
Incomplete Clinical Education Experiences	21
Unsuccessful Clinical Education Experiences	21
Learning Plans	21
Section IX: Resources Available for Students	22
Section X: General Clinical Education Policies	23
Clinical Sites and Supervision	23
Communication with Clinical Site	24
Attendance & Punctuality	24
Attire	25
Cell Phone Usage	27
Social Media Policy	27
Inclement Weather	28
Patient/Client Right to Refuse Treatment from a Student	28
Clinical Site Cancellation Policy	28
Availability of Integrated and Clinical Experience Sites	28
Assignment of Integrated and Clinical Education Experience Sites	29
DCE/Faculty Clinical Site Visits	29
Clinical Site Evaluation	29
Complaints	30
Student Site Refusal	30

Student Responsibility Regarding Clinical Site Placements	30
Assignment of Speciality Clinical Sites: Pelvic Health	30
Appendix 1: DPT Clinical Education Program Handbook Student Agreement	32
Appendix 2: DPT 760 Integrated Clinical Experience and Interprofessional Education I	33
Appendix 3: DPT 761 Integrated Clinical Experience and Interprofessional Education II	43
Appendix 4: DPT 860 Integrated Clinical Experience and Interprofessional Education III	54
Appendix 5: DPT 800 Clinical Education Experience I	64
Appendix 6: DPT 900 Clinical Education Experience II	80
Appendix 7: DPT 940 Clinical Education Experience III	97
Appendix 8: Clinical Internship Evaluation Tool	116
Appendix 9: Clinical Education Experience Professional Behavior Assessmen	nt133
Appendix 10: Clinical Reasoning Assessment Tool (CRAT)	138
Appendix 11: CI Student Readiness Assessment	141
Appendix 12: CI Professional Behavior Continuum Assessment	144
Appendix 13: Peer Professional Behavior Continuum Assessment	147
Appendix 14: Professional Dispositions, Behaviors and Essential Functions	150
Appendix 15: Learning Plan Example	153
Appendix 16: DPT Professional Behavior Corrective Action Plan	155
Appendix 17: Professional Behavior Continuum	157
Appendix 19: Two Week Check In Form	160
Appendix 20: Midterm Site Visit Form	162
Appendix 21: Physical Therapy Student Evaluation Form	166

# 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;
- 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

- 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/Cl'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;
- 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 the

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 the country of the content of the DPT Program Director. Students who violate this

#### 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: <a href="http://www.hpso.com/">http://www.hpso.com/</a>.

#### 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.

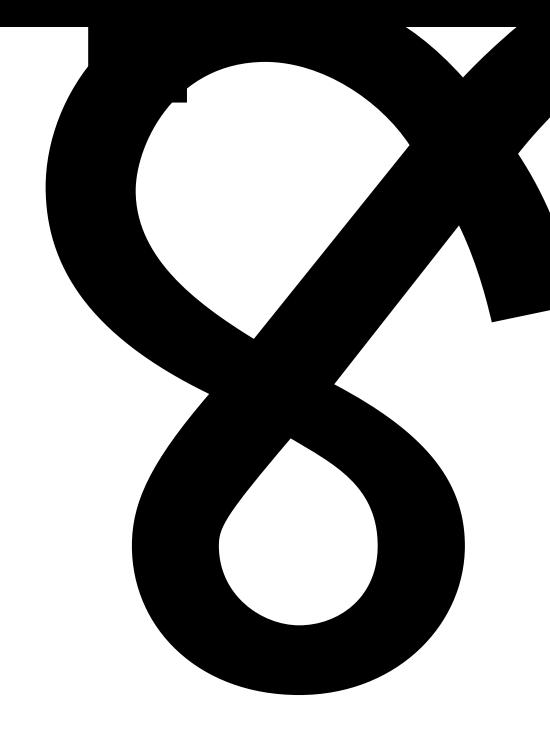
A communicable disease is an illness due to a specific infectious agent which can be transmitted from one individual to another. A communicable disease may be transmitted directly from one person to another without physical contact with the infected person. It may be transmitted indirectly when an object 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



## 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.

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

E Q areshogning all clinical education experiences. in 3) Collared/dressnebtrt in a) Tillois doesnowteblave to be a Moravian University Physical Therapy shirt if op ( must R File Albital edingation site by pointer 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. Mast c) T-shirts are not acceptable noul shorts (w 4) Thata at long each doubt the thee ts GXULQJ a) Mesh or athletic shorts are unacceptable %riezall b) Jeans addliteats shorts are shautebytable 5) Clie at a local or one to de singular length of the system of the sys a) No open-toed or open-heeled shoes

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

- Appropriate socks, stockings or hose should be worn based on footwear selection
- 5. Hats should not be worn
- 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

- 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 remainexperin, the student is expected with 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 sites as necessary

thienica

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: <a href="https://www.moravian.edu/rehab/contact/complaints-outside-of-due-process">https://www.moravian.edu/rehab/contact/complaints-outside-of-due-process</a>. 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: <a href="mailto:accreditation@apta.org">accreditation@apta.org</a>.

#### 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.

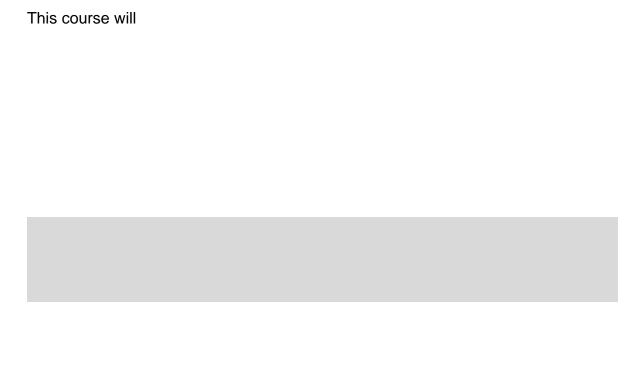
#### Student Responsibility Regarding Clinical Site Placements

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 subspeciality 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 <u>TEIQue-SF</u>.
- 4. A cumulative GPA of 3.5 at time of application.



- Demonstrate proper stress, time and resource management, open mindedness, and take accountability for actions.
- 7D5: Practice in a manner consistent with the APTA *Core Values*.
- Team-based activities, assigned readings, guided instruction, lab instruction and CI mentoring Team-based

CI Professional Behaviors Assessment and student reflections

- 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.
- 7D7: Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers.

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

lab

instruction

mentoring

and CI

CI Professional Behaviors Assessment and student reflections

- 5) Demonstrate 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.

7B: Communication

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

CI Professional Behaviors Assessment and student reflections

6) Demonstrate respect and compassion during all patient and professional interactions.

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.

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

**Grading Procedures:** 

Grading Procedures.		
Course assignments	Quantity	Percent of Grade
Billing Assignment	1	15%
nterprofessional 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	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 Â

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:

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

deve — deve

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

**Tree** 

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

the

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)

In Structor M & N 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 parting integrated clinical education experiences and interprofessional seminars. Students will deve

Professional Behaviors Assessment.

and resource management, open mindedness, and take accountability for actions.

consistent with the APTA Core Values.

readings, guided instruction. lab instruction and CI mentoring Team-based activities. assigned readings, guided instruction.

and CI

mentoring

assigned

Assessment, 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. 7D8: Identify, respect, and act

Professional Behaviors *iAnsışıl* Ass*ı* Anent, peer feedback, CI rubrics, and student reflection lab instruction

5) Display an awareness of diversity during all clinical interactions, including but not limited to patient/clients, families, and the interprofessional

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

team.

6) Demonstrate respect and compassion during all patient and professional interactions.

7) Display initiative and flexibility; implement constructive feedback; contribute to a

Peer feedback, CI rubrics and student reflection

positive work environment;

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.

by state practice acts, the practice setting, and other regulatory agencies. 7D19: Select.

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

and CI

mentoring

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
achieq 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+	В	C+	С	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

4. 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 discussion portunities 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 <a href="https://www.moravian.edu/policy/harassment-discrimination">www.moravian.edu/policy/harassment-discrimination</a>

### Tentative Course Outline:

Date	Topic	Readings	Assessment
Week 1	Introduction to Levels of Clinical Care; Documenting the Re-evaluation	Readings posted to Canvas	Professional Behaviors Assessment
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: <a href="http://guidetoptpractice.apta.org/">http://guidetoptpractice.apta.org/</a>

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:**

56 of 176 Return to Table of Contents 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 APTA Code of Ethics in all interactions with patients/clients, families, and the interprofessional team.	ţ	n		

- 3) Select appropriate behaviors related to proper stress, time and resource management, open mindedness, and take accountability for actions.
- 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.
- 5) Demonstrate respect and compassion during all patient and professional interactions.

7D5: Practice in a manner consistent with the *APTA Core Values*.

7D7: Communicate effectively with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers, and policymakers.

7B: Communication

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, guided instruction, lab instruction and CI mentoring

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

CI Professional Behavior Continuum Assessment, ICE and IPE student reflections

CI Professional Behavior Continuum Assessment, Telehealth Assignment, ICE and IPE student reflections

TetrueBased
activities,
assigned
readings,
opline training
traini

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.

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

Team-based activities, assigned readings, online training module and CI mentoring CI Professional Behavior Continuum Assessment, ICE and IPE student reflections

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

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, guided instruction, lab instructioning c

CI Professional Behavior Continuum Assessment 1

5%

Total: 100%

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

bF¿QbdQv%À ¿Ao uĐ € €

Α

Oľ

İS

Α	B+	В	C+	С	D+	D	F
90%	87-89%	80-86%	77-79%	70-76%	67-69%	60-66%	3elow 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
  - Agt D

### 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 comp<sup>\*</sup> Of

, \ R X

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 **55066** as possible. In expected that you will directly call the CI. An email or text believe c 2

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

1

### 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 APTA Code of Ethics 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 APTA Code of Ethics.	BA	Clinical mentorship
2) Select behaviors consistent with the APTA Core Values in all interactions with patients/clients, families, caregivers, and other healthcare practitioners.	7D5: Practice in a manner consistent with the APTA Core Values.	BA	Clinical mentorship
Initiate effective communication skills and flexibility in communication style	7D7: Communicate effectively with all stakeholders, including patients/clients, family	ВА	Clinical mentorship

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

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

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

- 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.

- 13) Apply appropriate examination techniques to assess mobility and gait/locomotion including determination of need for assistive technology.
- 14)Use clinical decision making and differential diagnosis to evaluate

patient's age, diagnosis, and health status.

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

SI

Clinical mentorship

		1	<del> </del>
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. 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	KI	Clinical mentorship
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

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.	КІ	Clinical mentorship

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

7D32: Complete KI 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.

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

Clinical mentorship

32) Describe practice management and quality services.

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

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

7D33: Respond effectively to patient/client and environmental

emergencies in one's

practice setting.

Clinical mentorship and guided instruction

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

practice setting.

34) Recognize risks to patient or healthcare provider safety and

SA

ΚI

Clinical mentorship

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

 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

#### Tentative Course Outline:

remative 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  Professional Behaviors  Assessment 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</i> Behaviors Assessment 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)

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

	and other	7B: Ethics and values		
	healthcare	76. Ethics and values		
	practitioners.			
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, Professional Behaviors Assessment
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 Professional Behaviors Assessment
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, Professional Behaviors Assessment and CRAT

   & 5 <sup>9</sup>	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.	7D17:Obtain a history and relevant information from the patient/client and from other sources as needed. 7D36: Participate in the case management process.	Clinical mentorship	CIET and CRAT
7	Process.  Recognize psychosocial factors that may impact patient/client management and prognosis.	7A: Psychosocial aspects of health and disability	Clinical mentorship	CIET and CRAT
8	) 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.	7D18: Perform systems review.	Clinical mentorship	CIET and CRAT
9	) Choose and perform appropriate examination techniques to assess activity and participation restrictions including	7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status.	Clinical mentorship	CIET and CRAT

		Г	
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

to assess skeletal integrity, joint mobility & integrity, muscle performance, and range of motion.  14) Construct an examination plan using best practice and safe psychomotor skills for observation and assessment of posture, balance	diagnosis, and health status.  7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status.	Clinical mentorship	CIET and CRAT
testing, and muscle performance.			
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,

		ı	T
	and other appropriate individuals.		
	7B: Clinical reasoning		
20) Utilize appropriate	7D22: Determine a	Clinical	CIET and CRAT
clinical decision	diagnosis that guides	mentorship	
making to	future client/patient	·	
characterize a PT	management.		
diagnosis,	7D23: Determine		
prognosis, patient	patient/client goals and		
goals, and	expected outcomes		
anticipated	within available		
outcomes based on	resources (including		
examination data.	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	7D27: Competently	Clinical	CIET and CRAT
safe biomechanics	perform physical	mentorship	
and best practice to	therapy interventions		
select and execute	to achieve		
interventions	patient/client goals and		
related to airway	outcomes.		
clearance			
techniques while			
considering patient			
presentation.			
22)Use principles of	7D27: Competently	Clinical	CIET and CRAT
safe biomechanics	perform physical	mentorship	
and best practice to	therapy interventions	·	
select and execute	to achieve		
interventions	patient/client goals and		
related to the	outcomes.		
prescription,			
application,			
fabrication, or			
modification of			
assistive			
technology.			
23) Differentiate the	7D07_0	Oli et e e l	OIET . LODAT
באוויסופוווומנפ נוופ	7D27: Competently	Clinical	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.

perform physical therapy interventions tall apy X and

# patiene

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

٧,

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 consiste RTA 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

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:** 

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

 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 <a href="www.moravian.edu/titleix">www.moravian.edu/titleix</a>. 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 <a href="www.moravian.edu/policy">www.moravian.edu/policy</a>.

#### 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
		Professional Behaviors Assessment
	_	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 Professional
		Behaviors Assessment 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 APTA Code of Ethics 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.  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 APTA Code of Ethics.  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	Clinical mentorship	CIET
2) Exemplify	7D5: Practice in a	Clinical	CIET and
behaviors	manner consistent	mentorship	Professional
consistent with the	with the APTA Core		Behaviors
APTA Core Values	Values.		Assessment
in all interactions	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 approprientitiests administer tests and measures appropriate to the patient's

		Γ	· · · · · · · · · · · · · · · · · · ·
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.	7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status.	Clinical mentorship	CIET and CRAT
14) Select and execute appropriate examination techniques to assess mobility and gait/locomotion including determination of the need for	7D19: Select and competently administer tests and measures appropriate to the patient's age, diagnosis, and health status.	Clinical mentorship	CIET and CRAT

need to perform additional special tests and measures. describe a patient's/client's impairments, activity and participation

limitations.

7B: Clinical reasoning

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.

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: Establisb!

Clinical CIET and CRAT mentorship

achievement of goals to determine appropriateness for discharge, discontinuation of plan of care, or progression along the care continuum for patients across the lifespan.

plan that optimizes success for the patient in moving along the continuum of care.

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.

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

21) Use principles of safe biomechanics and best practice to select, justify and execute appropriate airway clearance techniques while considering

7D27: Competently perform physical therapy interventions to

Clinical CIET mentorship

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

patient presentation.

- 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.
- 29) Demonstrate
  entry-level skill in
  monitoring
  changes in
  patient/client
  status and
  modifying or
  adjusting the
  interventions or
  plan of care as
  appropriate.

7D12: Effectively educate others using teaching methods that are commensurate with the needs of the learner, including participation in the clinical education of students.
7D27: Competently perform physical therapy interventions to achieve patient/client goals and outcomes.

Clinical mentorship

CIET and CRAT

and implement the healthcare setting strategies to as an individual and as minimize risk. the healthcare setting as an individual and as

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

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 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 <a href="https://www.moravian.edu/titleix.">www.moravian.edu/titleix.</a> a .

Week 12	Discussion board post (CI for a day reflection) due
Week 13	
Week 14	
Week 15	Final CIET and Final <i>Professional</i> 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: Fin	nal:or One-Year Affiliation Quarter (specify):
Days Absent:	Days Made Up:
Clinical Instructor:	
Clinical Instructor's P	hone Number:
Clinical Instructor's E	mail:
Clinical Instructor Ass	sessment or Self-Assessment
_	? Yes No
•	Course? Yes No
Other Credentials:	Years of Clinical Experience
Please Return to: Alis	on Roll, PT, DPT Director of Clinical Education Program of Physical Therapy 1441 Schoenersville Road, Bethlehem, PA 18018

To Contact DCE:

117 of 176 Return to Table of Contents

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 Precautio ns(e.g. Universal /Standar d Precautio ns)				
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:  Met Clinical Benchm	narks for Safety	Yes No		

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

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	Nev er	Rare ly	So me- time s	Mo st of the Tim e	Alway s	Not Observed
INITIATIVE						
Recognizes and maximizes     opportunity for learning						
2. Implements constructive criticism						
Utilizes available resources for problem solving	400					
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 N	No		
COMMUNICATION SKILLS				
With patients and families/caregivers				
2. With healthcare				
professionals (e.g. MD, nurses, insurance carriers, case				
managers, OT, ST, etc.)				
<del></del>				
<ol> <li>Documentation standards</li> <li>(e.g. concise, accurate, legible;</li> </ol>				
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 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)

Student signature:\_\_\_\_\_ Date:\_\_\_\_

Clinical Instructor signature:\_\_\_

STANDARDS & BENCHMARKS			RATING		
PATIENT MANAGEMENT	Well Belo w	Belo w	At Tha t Leve I for Fami liar Patie nts	At That Level for all Patien ts	Above

Date:

#### **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)
- 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**

- 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			
Adheres to evidence during treatment selection			
2. Applies effective treatment using appropriate psychomotor skills			
3. Incorporates patient/family education into treatment			
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.

2. Is the student performing at a level that is satisfactory for his/her current level of education?
Yes No
Summative Comments:
**************************************
Clinical Instructor Signature: Date:
Adapted from: Fitzgerald, L.M., Delitto A. & Irrgang J.J. (2007). Validation of the Clinica Internship Evaluation Tool, <i>Physical Therapy</i> , 87(7),844–860.

0 1 2 3 4 5 6 7 8 9 10

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

		-	-		-				
Commer	nts:								

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

identifier:		Date:	
•	are the: Faculty Le Competency		ICE I/II CAPE 1/2
			and information related
Content knowledge is			alth (ICF) Framework. e, not the knowledge the
biological and ph 2) Determines relev health condition,	riate foundational knowl ysical (anatomy, histology ant ICF components as body structure and fund personal and environme	tion limitations, activity lin	y, and neuroscience). case (identifies the patient's
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:	1	I	
111		ability to determine appr	-
test/measure/intervent	tion and psychomotor	performance of an inter	vention/test/skill. (When

1) Determines appropriate test/measure/intervention to perform

to perform skill, What skills to perform, and How to perform skill)

Sample behaviors to assess:

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/be havior 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

more

seeking out resources, including			
support from others when needed, to			
assist in implementation of the plan			
Students should utilize constructive	e feedback by	<b>!</b>	
being open and receptive,			
verbally/non-verbally			
implementing actions to address			
issues promptly			
reflecting on feedback provided			
Students should demonstrate effect	tive communi	cation abilities	within the
following groups:	i		
diverse patient populations			
families and other individuals			
important to the patients			
healthcare professionals			
Students should exhibit effective ve	erbal, non-ver	bal and	
written communication abilities to:	T	Г	
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	L		
Students should be prepared to eng	jage in learni	ng through dei	monstrating:
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			
เนนลง	1		

self-care to

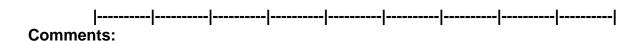


#### **Comments:**

## 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



### 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	5
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
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; tectivelly elSufficient postural and neuromuscular control, sensoryalcuretitis, 2

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.
- 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

OIJ

## **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.

<b>ติ€เอลหน่า⊌</b> €3that the studen	t has not satisfac	ctorily remediated	the behavior as defined

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	Takes responsibility for learning Values and implements changes based on constructive criticism Acknowledges and identifies learning

## 159 of 176 Return to Table of Contents

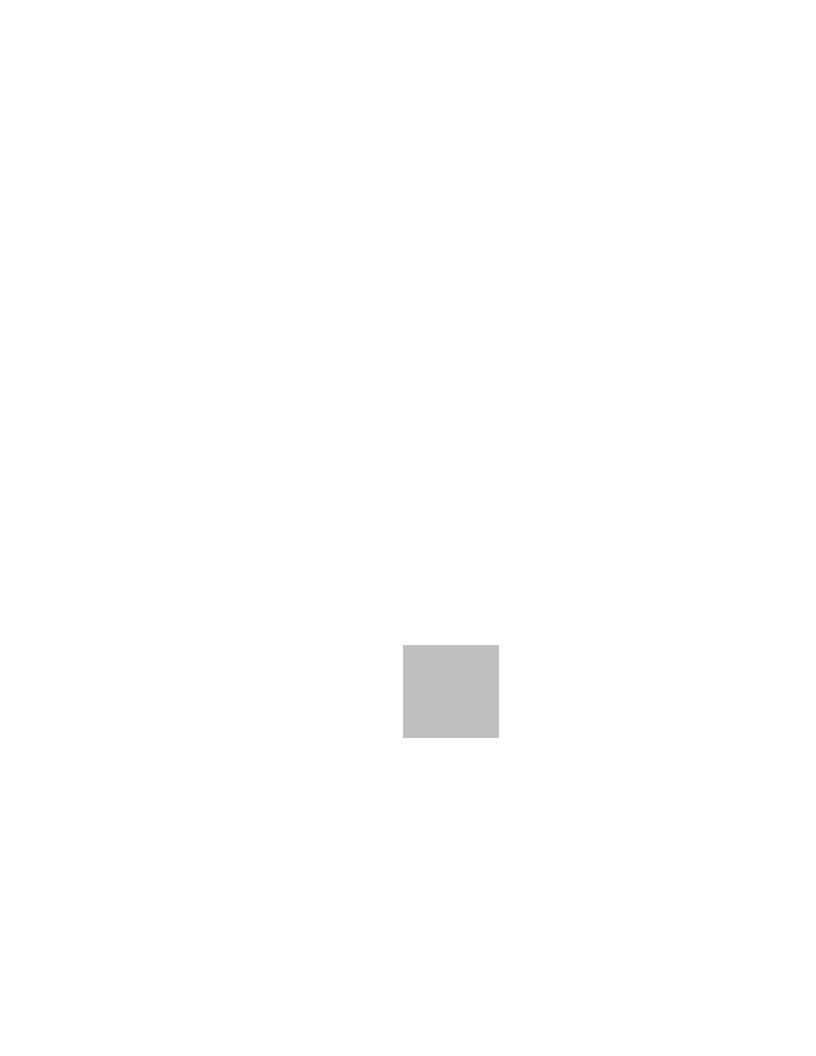
barriers

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:	

# **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 ]

Srh those

artment in complet this project. We are esp cially indebt to those indiv uals n SIG who willingly volu ered their Clinical Educa e to develop a ese tools. Cor edback prov emic and clinical fact climical 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.

GCS,

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

©2003 American Physical Therapy Association. All rights reserved. Duplication of this form in its entirety is permitted; however, any revision, addition, or deletion is prohibited.  ${}^{\text{ISCN}|\xi\lambda'}$ 

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

- 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

Provision of Clinical Instruction

Midter m 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 Cl'(s) evaluation of your level of performance in agreement with your self-assessment?

Midterm Evaluation Yes No Final Evaluation Yes

No

**₹**en 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.