

TRINE
UNIVERSITY
School of Health Sciences

**Doctor of Physical Therapy
Clinical Education Faculty Handbook**

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The University reserves the right to change and to make exceptions to the provisions of this Handbook at any time and to apply any change or to make an exception applicable to any clinical education faculty member. This Handbook is neither a contract nor an offer to enter into a contract.

**Trine University
 Doctorate of Physical Therapy (DPT)
 Clinical Education Faculty Handbook
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Section 1: Program Information

Mission and Vision Statements

	Mission	Vision
University	Trine University promotes intellectual and personal development, through professionally focused and formative learning opportunities, preparing students to succeed, lead, and serve.	Trine will be the very best mid-sized private university, contributing to local and regional economic and cultural development. We will be characterized as engaged, dynamic, growing, and adding value.
School of Health Sciences	The School of Health Sciences at Trine University, by providing high quality, professionally focused and formative learning opportunities, enables its students, graduates and faculty to make a positive impact on the health and wellness of their communities through service, leadership, and scholarship.	The School of Health Sciences at Trine University will be a recognized as a premier provider of health science education, adding value to the lives of its graduates and community members.
Physical Therapy Program	The Doctor of Physical Therapy Program at Trine University, by providing high quality, professionally focused, physical therapy education, enables its graduates and faculty to make a positive impact on the healthcare needs of their communities through service, leadership, and scholarship.	The Doctor of Physical Therapy Program at Trine University will be a recognized as a premier provider of physical therapy education, adding value to the lives of its graduates and community members.

DPT Program Philosophy

Physical therapists have an obligation to their patients, communities and profession, to promote and maintain high moral, ethical and clinical practice standards. Doctors of physical therapy have a responsibility to promote evidence based practice and to expand, evolve and refine the profession’s knowledge base. Students of physical therapy must assume the responsibility of learning while faculty members must create and nurture an environment that motivates learning through active involvement. For this reason, we endorse learning activities that bring real-world challenges into the classroom, and students to the real world of physical therapy practice. We place a high value on faculty members who, as role models and mentors, help students to cultivate self-awareness, interpersonal skills, professional behaviors, and passions for service and lifelong learning.

“Education is not the filling of a pail, but the lighting of a fire.”

~ W.B. Yeats

Program Goals and Outcomes

Upon completion of all requirements of the Trine University Doctor of Physical Therapy program, students will:

Goal 1. Be prepared for entry level physical therapy practice in a variety of settings to **make a positive impact on the healthcare needs of their communities through service, leadership, and scholarship.**

Student Outcome 1a: Demonstrate the ability to utilize the evidence-based knowledge and skills necessary for entry-level physical therapist practice.

Student Outcome 1b: Demonstrate behaviors consistent with the American Physical Therapy Association's Code of Ethics for the Physical Therapist.

Student Outcome 1c: Have participated in efforts to meet the health needs of people locally, nationally, or globally.

Student Outcome 1d: Demonstrate the ability to make substantive contributions to the physical therapy profession through service, leadership or scholarship.

Graduates of the Trine University Doctor of Physical Therapy program will:

Goal 2: Be engaged in ethical, competent, and professionally rewarding physical therapy practice.

Graduate Outcome 2a: Be employed as a physical therapist within six months of completing the national and state licensure examinations.

Graduate Outcome 2b: Obtain employment consistent with personal and professional goals within two years of completing the national and state licensure examinations.

Graduate Outcome 2c: Be judged by employers as successful in demonstrating ethical, entry-level competence in various settings and in using evidence to guide practice.

Faculty of the Trine University Doctor of Physical Therapy program will:

Goal 3: Advance the profession and inform their teaching through service, leadership, and scholarship.

Faculty Outcome 3a: 100% of program faculty will have a record of scholarly inquiry and dissemination of knowledge consistent with the expectations of the University and those published by CAPTE.

Faculty Outcome 3b: 100% of program faculty will engage in activities such as service, leadership, advocacy, and scholarship, which support the interests of the physical therapy profession and the health needs of people locally, nationally or globally.

Goal 4: Demonstrate a commitment to the utilization of best practices in education, continuous professional development, and the promotion of evidence-based approaches to physical therapy practice.

Faculty Outcome 4a: 100% of program faculty will utilize self and peer evaluations as part of achieving their professional development goals.

Faculty Outcome 4b: 100% of program faculty will participate in professional development activities, such as professional conferences, continuing education, and consumption of published literature, that address areas of identified need and ensure currency of expertise.

The Trine University Doctor of Physical Therapy program will:

Goal 5: Continually assess, develop, and improve the curriculum.

Program Outcome 5a: Utilize feedback from program stakeholders for development and improvement of the curriculum.

Program Outcome 5b: Achieve and maintain CAPTE accreditation.

Goal 6: Demonstrate a commitment to the physical therapy profession by facilitating collaborative activities for continuous professional growth in its communities.

Program Outcome 6a: Host a minimum of one Northeast Indiana Physical Therapy Association district meeting per year.

Program Outcome 6b: Each year, 10% of the program faculty members will engage in collaborative, interdisciplinary research within the community.

Program Outcome 6c: The program will support interprofessional education in the Fort Wayne community.

DPT Curriculum Plan of Study

Fall 1 | Credit Hrs.

DPT 5111 CARE I | 1
DPT 5124 Anatomy of Movement I | 4
DPT 5134 Applied Physiology I | 4
DPT 5143 Clinical Practice I | 3
DPT 5152 Health Behavior Science | 2
DPT 5162 Professional Development I | 2

Total: 16 hrs.

Summer 1 | Credit Hrs.

DPT 5311 CARE III | 1
DPT 5352 Pharmacology | 2
DPT 5362 Outcome Assessment | 2
DPT 5343 Clinical Practice III | 3
DPT 5372 Evidence Based Practice I | 2

Total: 10 hrs.

Spring 2 | Credit Hrs.

DPT 6211 CARE V | 1
DPT 6224 Musculoskeletal PT II | 4
DPT 6233 Neuromuscular PT II | 3
DPT 6242 Cardiopulmonary PT | 2
DPT 6252 Lifespan II: Geriatrics | 2
DPT 6272 Evidence-Based Practice III | 2
DPT 6282 Healthcare Delivery I | 2
DPT 6291 Anatomy Seminar II | 1

Total: 17 hrs.

Fall 3 | Credit Hrs.

DPT 7118 Clinical Internship I | 8
DPT 7128 Clinical Internship II | 8

Total: 16 hrs.

Spring 1 | Credit Hrs.

DPT 5211 CARE II | 1
DPT 5224 Anatomy of Movement II | 4
DPT 5234 Applied Physiology II | 4
DPT 5243 Clinical Practice II | 3
DPT 5254 Applied Neuroscience | 4

Total: 16 hrs.

Fall 2 | Credit Hrs

DPT 6111 CARE IV | 1
DPT 6124 Musculoskeletal PT I | 4
DPT 6134 Neuromuscular PT I | 4
DPT 6142 Imaging & Laboratory Testing | 2
DPT 6152 Lifespan I: Growth & Development | 2
DPT 6172 Evidence Based Practice II | 2
DPT 6191 Anatomy Seminar I | 1

Total: 16 hrs.

Summer 2 | Credit Hrs.

DPT 6314 Clinical Practicum | 4
DPT 6342 Orthotics and Prosthetics | 2
DPT 6352 Primary Care Practice | 2
DPT 6362 Professional Development II | 2
DPT 6382 Healthcare Delivery II | 2

Total: 12 hrs.

Spring 3 | Credit Hrs.

DPT 7214 Clinical Internship III | 14
DPT 7262 Professional Development III | 2

Total: 16 hrs.

TOTAL CURRICULUM HOURS: 119 hrs.

DPT Program Course Description

Fall 1

DPT 5111 CARE I

Clinical Application and Reflection Experience (CARE) I is the first in a series of five courses that are integrated with didactic instruction in the first five semesters of the DPT curriculum. Students work in teams with a physical therapist clinical instructor to practice and refine skills, employ clinical problem-solving, participate in reflective group discussions and assume professional roles in various clinical patient care settings. Students are expected to demonstrate skills and apply knowledge obtained from concurrent and previous coursework.

DPT 5124 Anatomy of Movement I

Systems and regional approaches to gross human anatomy are combined with principles of kinesiology to enable an in-depth study of the anatomical components and principles of function. The material covered in this course includes anatomy and kinesiology of the upper extremities, head, and neck. Classroom and online lectures are complemented by laboratory experiences that include study of prosected human cadavers, and instructional palpation of live humans.

DPT 5134 Applied Physiology I

This is the first of two courses in which students study applied physiological concepts. This course focuses on the physiological and functional responses and adaptations of the human body to exercise, and the influences of structural and physiological changes with growth, aging, nutrition, drugs, and disease. The primary focus will be on the musculoskeletal and cardiopulmonary systems, and systems of energy production, delivery and balance. Learning occurs through lecture, discussion, and laboratory experiences.

DPT 5143 Clinical Practice I

Students learn through lecture, discussion, and guided practice important skills for patient management in clinical practice. Examples of these skills include: Effective patient interviewing and documentation; assessment of impairments including vital signs, sensation, reflexes, and pain; safe and effective positioning and draping; managing wheelchairs and other equipment; safe assistance with gait and transfers; and the therapeutic application of superficial heat and cold. Students are also introduced to theoretical models that guide clinical decision making, including patient management, clinical reasoning, disablement, and evidence-based practice models.

DPT 5152 Health Behavior Science

Students will explore and analyze how human actions, cognitions, communications, and environment affect health, chronic disease, and quality of life across the lifespan. Students will explore evidence and strategies for health promotion through education, policy change, development and implementation of programs, and evaluation of impact and outcomes.

DPT 5162 Professional Development I

This is the first of a series of three professional development courses whose focus is the professional socialization process. Students will learn about the profession of physical therapy, including its history, and future directions. Topics of emphasis include professional codes of ethics and conduct, laws relative to PT practice, therapeutic communication, cultural competency, stress management and conflict resolution.

Spring 1

DPT 5211 CARE II

Clinical Application and Reflection Experience (CARE) II is the second in a series of five courses that are integrated with didactic instruction in the first five semesters of the DPT curriculum. Students work in teams with a physical therapist clinical instructor to practice and refine skills, employ clinical problem-solving, participate in reflective group discussions and assume professional roles in various clinical patient care settings. Students are expected to demonstrate skills and apply knowledge obtained from concurrent and previous coursework.

DPT 5224 Anatomy of Movement II

Systems and regional approaches to gross human anatomy are combined with principles of kinesiology to enable an in-depth study of the anatomical components and principles of function. The material covered in this course includes anatomy and kinesiology of the thorax, pelvis and lower extremities. A study of the anatomy of the heart and lungs is also included. Classroom and online lectures are complemented by laboratory experiences that include study of prosected human cadavers, and instructional palpation of live humans.

DPT 5234 Applied Physiology II

This is the second of a two course series in which students study applied physiological concepts. This course focuses on the normal physiology of the endocrine, GI, renal, and reproductive organ systems, as well the influences of physiological changes with growth, aging, nutrition, drugs, and disease.

DPT 5243 Clinical Practice II

Students learn through lecture, guided practice, literature reviews, case-based discussion, and documentation assignments, important skills for patient management in clinical practice. Examples of these skills include: assessment of range of motion, muscle performance, and posture; the therapeutic use of passive, active-assisted, and manually resisted motion; and the design and implementation of therapeutic exercise programs. An emphasis is placed on the integration of examination findings, current scientific evidence, and sound clinical reasoning to guide the use of therapeutic exercise for prevention and rehabilitation of movement dysfunction and disability.

DPT 5254 Applied Neuroscience

Students are introduced to the structure and function of the nervous system. An emphasis is placed on the sensory and motor systems involved in motor control and key concepts required for clinical practice. Through lecture and laboratory instruction, the gross and cellular organization of the nervous system are presented, along with its relationship to the somatic and visceral systems, and the reception, transmission, and integration of information at multiple levels. Clinical manifestations of dysfunction of major neural elements are discussed.

Summer 1

DPT 5311 CARE III

Clinical Application and Reflection Experience (CARE) III is the third in a series of five courses that are integrated with didactic instruction in the first five semesters of the DPT curriculum. Students work with a physical therapist clinical instructor to practice and refine skills, employ clinical problem-solving, participate in reflective group discussions and assume professional roles in various clinical patient care settings. Students are expected to demonstrate skills and apply knowledge obtained from concurrent and previous coursework.

DPT 5352 Pharmacology

An integrated study of pharmacology presenting the pharmacodynamics and pharmacotherapeutics of common classes of drugs which include anti-inflammatory, analgesic, muscle relaxant, psychotropic, anti-microbial, and diabetic medications. Factors emphasized include indications, contraindications, adverse reactions, and the implications for physical therapy care.

DPT 5362 Outcome Assessment

This course explores approaches to the appraisal of health, functional outcomes, and the effectiveness of physical therapy interventions. Students study specific metrics utilized for outcomes assessment, and analyze common health and rehabilitation outcomes measures in terms of reliability, validity, clinical utility, and cost effectiveness. A working knowledge of these topics is developed through lecture, discussion and case-based examples.

DPT 5343 Clinical Practice III

Students learn through lecture, guided practice, literature reviews, case-based discussion and treatment plan development, important skills for patient management in clinical practice. Examples of these skills include: the selection and use of deep thermal, electrodiagnostic, electrotherapeutic, and mechanical, modalities (including massage) for various impairments and functional limitations. An emphasis is placed on the integration of examination findings, current scientific evidence, and sound clinical reasoning to guide the use of therapeutic interventions for prevention and rehabilitation of movement dysfunction and disability.

DPT 5372 Evidence Based Practice I

Students will study the theoretical foundations of evidence-based practice and develop a framework to support sound clinical reasoning. They will learn how to search, retrieve and organize scientific evidence from sources of knowledge such as library and internet-based sources. Following an introduction to psychometrics and principles of measurement in healthcare, students will learn to critically evaluate current literature to inform clinical decisions.

Fall 2

DPT 6111 CARE IV

Clinical Application and Reflection Experience (CARE) IV is the fourth in a series of five courses that are integrated with didactic instruction in the first five semesters of the DPT curriculum. Students work in teams with a physical therapist clinical instructor to practice and refine skills, employ clinical problem-solving, participate in reflective group discussions and assume professional roles in various clinical patient care settings. Students are expected to demonstrate skills and apply knowledge obtained from concurrent and previous coursework.

DPT 6124 Musculoskeletal PT I

This course is the first part of a two-part series dedicated to study of the musculoskeletal system as it relates to the clinical practice of physical therapy. This course introduces students to musculoskeletal examination, evaluation, diagnosis, prognosis, intervention, standardized assessment, and outcome measurement for impairments, functional limitations, and disability in clients with pathologies of the cervical spine and upper extremities.

DPT 6134 Neuromuscular PT I

In this first of a two course series focusing on the neuromuscular system, students will be introduced to the management of adults with complex CNS and multisystem disorders and co-morbidities. Instruction occurs via lecture, discussion of case scenarios, and guided laboratory practice. The neuropathology of conditions frequently managed by physical therapists is studied with an emphasis on examination, evaluation, diagnosis, clinical decision-making, prognosis, intervention, standardized assessments and relevant outcome measures. The appropriate use of assistive technologies is also explored.

DPT 6142 Imaging and Laboratory Testing

Students study the fundamentals of diagnostic testing procedures used in the evaluation of patients with various disorders and disease processes. Scientific principles underlying clinical laboratory testing and imaging technologies will be explained. Emphasis will be placed on the information obtained through specific testing and medical imaging procedures, its sensitivity and specificity, and its potential to influence the physical therapy examination, interventions, and plan of care.

DPT 6152 Lifespan I: Growth and Development

Students learn through lecture, discussion, and guided practice, the major components of development from birth through adolescence. Theories that support our understanding of development and guide clinical decisions are explored. Emphasis is placed on examination, evaluation and treatment of children with neuromuscular diagnoses and neurodevelopmental delays and disabilities. Also considered are pediatric public laws, child abuse, and therapeutic interactions with families.

DPT 6172 Evidence Based Practice II

Students study principles of experimental, qualitative, and survey research methods and the application of these methods to the field of physical therapy. Emphasis is placed on the function of the research question, hypotheses, study design, sampling, study variables, measurement, reliability, validity, and statistics in the analysis and evaluation of research literature. In addition to descriptive statistics, students are introduced to, linear regression, comparison of means, and categorical data analysis (chi-square and logistic regression). Statistics for comparison of results across studies will also be discussed (e.g., effect size, odds ratio).

DPT 6191 Anatomy Seminar I

The goal of this course is to enable an in-depth study of human anatomy. Students will perform an independent human cadaver dissection project under the supervision of the course instructor. Learning is enhanced as students share their results through formal presentations to their peers and clinical experts.

Spring 2

DPT 6211 CARE V

Clinical Application and Reflection Experience (CARE) V is the final course in a series of five courses that are integrated with didactic instruction in the first five semesters of the DPT curriculum. Students work in teams with a physical therapist clinical instructor to practice and refine skills, employ clinical problem-solving, participate in reflective group discussions and assume professional roles in various clinical patient care settings. Students are expected to demonstrate skills and apply knowledge obtained from concurrent and previous coursework.

DPT 6224 Musculoskeletal PT II

This course is the second part of a two-part series dedicated to study of the musculoskeletal system as it relates to the clinical practice of physical therapy. This course introduces students to musculoskeletal examination, evaluation, diagnosis, prognosis, intervention, standardized assessment, and outcome measurement for impairments, functional limitations, and disability in clients with pathologies of the thoracic spine and lower quarter.

DPT 6233 Neuromuscular PT II

This is the second of two courses which introduce the student to the management of common pediatric neurological and neuromuscular conditions and co-morbidities. Instruction occurs via lecture, discussion of case scenarios, and guided laboratory practice. Relevant neuropathology is studied with an emphasis on examination, evaluation, diagnosis, clinical decision-making, prognosis, intervention, standardized assessments and relevant outcome measures. The appropriate use of assistive technologies is also explored.

DPT 6242 Cardiopulmonary PT

The focus of this course is the physical therapy management of individuals with adults with movement-related cardiovascular and pulmonary conditions including those with significant co-morbidities. Instruction occurs via lecture, discussion of case scenarios, and guided laboratory practice. The pathology of conditions frequently managed by physical therapists is introduced with an emphasis on examination, evaluation, diagnosis, clinical decision-making, prognosis, intervention, standardized assessments and relevant outcome measures

DPT 6252 Lifespan II: Geriatrics

Students study the physiologic and pathologic changes in musculoskeletal, neurological, integumentary, cardiopulmonary and metabolic systems that occur from middle to old age and the consequent effects on physical performance, cognition, behavior, and social and emotional wellbeing. Emphasis will be placed on utilizing a clear understanding of the consequences of aging to plan effective, evidence-based physical therapy intervention for older adults.

DPT 6272 Evidence-Based Practice III

In this course students apply the concepts of evidence-based practice to answer a question relevant to clinical practice. Students work in groups with faculty mentors to identify a question, review the relevant literature, and collect and analyze evidence to determine best practices and/or policies.

DPT 6282 Healthcare Delivery I

This course provides an overview of the American health care system. It will review the system's origins and its various components and how these factors translate into current health care services. Forces influencing healthcare access, cost, and quality will be explored as well as the effects of the current environment on physical therapy practice, research and education.

DPT 6291 Anatomy Seminar II

The goal of this course is to enable an in-depth study of human anatomy. Students will perform an independent human cadaver dissection project under the supervision of the course instructor. Learning is enhanced as student share their results through formal presentations to their peers and clinical experts.

Summer 2

DPT 6314 Clinical Practicum

This is first of four full-time clinical internships during which students are engaged in clinical observation and supervised application of basic examination, evaluation, and intervention skills and procedures. An emphasis is placed on professional behaviors, safe patient handling techniques, analysis of examination findings, individualized treatment planning and progression, and appropriate communication.

DPT 6342 Orthotics and Prosthetics

This course introduces students to the management of patients with amputations, prosthetics, and orthotics. Instruction occurs via lecture, discussion of case scenarios, and guided laboratory practice. Relevant pathology and kinesiology are reviewed with an emphasis on examination, evaluation, diagnosis, clinical decision-making, prognosis, intervention, standardized assessments and relevant outcome measures. The appropriate use of orthotic and prosthetic technologies is also explored.

DPT 6352 Primary Care Practice

This course explores current issues in primary care practice and focuses specifically on aspects of primary care that are crucial to safe and effective practice. Students learn to perform higher level diagnostic screening procedures to identify selected medical diagnoses, and they practice clinical decision making to guide patient management and referral decisions. Students also learn to assess the health needs of individuals, groups and communities in order to develop programs for health, wellness, and injury prevention across the lifespan.

DPT 6362 Professional Development II

This course emphasizes a professional approach to clinically relevant topics such as cultural diversity; child, elder, and domestic abuse; workplace violence and harassment; end of life issues; and mental health concerns. Professional communications and the role of the professional as an educator and lifelong learner are also explored. Students present the results of their Evidence-based practice project in poster or platform format at the School of Health Sciences research forum.

DPT 6382 Healthcare Delivery II

This course focuses on contemporary managerial and leadership issues important to the provision high quality, fiscally sound healthcare. Topics include organizational structures, management principles, leadership and decision-making, quality assurance and accountability, financial and reimbursement concerns, marketing and customer relations, and the regulatory and external environment.

Fall 3

DPT 7118 Clinical Internship I

During this full-time clinical internship, students are engaged in clinical observation and supervised application of basic and comprehensive examination, evaluation, and intervention skills and procedures. An emphasis is placed on integration of professional behaviors, evaluation, physical therapy diagnosis, individualized treatment planning and progression, clinical reasoning, and documentation.

DPT 7128 Clinical Internship II

During this full-time clinical internship, students participate, with supervision, in the provision of major components of physical therapy care including screening, examination, integrative evaluation, differential diagnosis, prognosis, and procedural interventions. Students also design, prepare and provide an educational intervention. An emphasis is placed on the development of entry-level PT competencies and behaviors as students are given opportunities to practice components of the professional physical therapist's role.

Spring 3

DPT 7214 Clinical Internship III

In this final full-time clinical internship students engage in continued supervised application of comprehensive patient management skills including advanced examination, evaluation, diagnosis, prognosis and interventions. Students also provide an educational intervention, and participate in practice management and proper utilization of support personnel. At the completion of this internship students are expected to have demonstrated entry-level physical therapist competency and behaviors.

DPT 7262 Professional Development III

Students participate in distance learning sessions while on their final clinical internship. The emphasis is on sharing and reflecting on aspects of their internship experience pertinent to their development as professionals. Topics emphasized include leadership, interdisciplinary collaboration, quality and safety standards, billing, rules, regulations, laws. Following the internship students will come together on campus for a final week to participate in seminars on topics such as for effective resume writing and interviewing, exam preparation, and professional career planning.

Accreditation Status

Trine University is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools, www.ncahlc.org. Telephone 312.263.0456.

Graduation from a physical therapist education program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, VA 22314; phone; 703-706-3245; accreditation@apta.org is necessary for eligibility to sit for the licensure examination, which is required in all states.

Effective July 29, 2014, Trine University has been granted Candidate for Accreditation status by the Commission on Accreditation in Physical Therapy Education (1111 North Fairfax Street, Alexandria, VA, 22314; phone: 703-706-3245; email: accreditation@apta.org). Candidacy is not an accreditation status nor does it assure eventual accreditation. Candidate for Accreditation is a pre-accreditation status of affiliation with the Commission on Accreditation in Physical Therapy Education that indicates the program is progressing toward accreditation.

Section 2: Clinical Education

Introduction

Students enrolled in Trine University's DPT program will be required to participate in clinical education experiences and internships in addition to the didactic coursework within the curriculum. These experiences will include part-time integrated clinical experience during the first five semesters and four full-time clinical internships. Please see the Clinical Education Section of this handbook for details about the policies and procedures, academic requirements, and rules and regulations of the clinical education process. Any further questions about clinical education should be directed to the Director of Clinical Education (DCE). Changes in the curriculum may occur as a natural result of the curriculum review process that occurs routinely. The Program has a curriculum committee that is responsible for curriculum review, periodic assessment, and recommendation of changes as a result of the assessment process.

Prior to the first day of class, the following documents directly related to the clinical education portion of the DPT program must be copied and submitted to the DCE:

- Current health insurance
- Criminal background check
- Immunization records including required vaccinations and titers
- Results of physical exam
- Results of TB test
- Results of substance abuse test

The Clinical Education team will make copies of these documents to be placed in the student's clinical education file. Any deficiencies in these documents will be communicated to the student upon receiving the documents. Failure to submit these documents prior to the start of the program, could result in the student not being able to participate in clinical, laboratory and classroom activities. Further details on immunizations please are in the Clinical Education Section.

Clinical Education Overview

Clinical education is an essential part of the Trine University Physical Therapy Program. The physical therapists and health care facilities participating in the clinical program are carefully screened and must share the PT Program's mission to have a positive impact on the healthcare needs of their communities through service, leadership, and scholarship.

The clinical experiences consist of two parts: Clinical Application and Reflection Experience (CARE courses) and full-time clinical affiliations. The CARE courses are integrated clinical courses and are placed during the first five semesters of the program. Four clinical affiliation courses exist in the last three semesters: one 4-week clinical practicum (DPT 6314), two 8-week clinical internships (DPT 7118, DPT 7128), and one 14-week clinical internship (DPT 7214).

Students must complete their clinical experiences in three practice areas: inpatient, chronic care, and outpatient that span the four practice patterns- musculoskeletal, neurological, cardiovascular/pulmonary, and integumentary. Students may also participate in more specialized patient care areas including, but not limited to, home health, sports medicine, pediatrics, wellness clinics, hand therapy, burn hospitals or occupational health.

Students participating in clinical rotation are still part of the University and are expected to meet all of the tuition obligations and academic requirements of a student. Students must adhere to the schedule assigned them by their clinical site, including holiday and work schedules.

Defining Acute, Outpatient, and Chronic Care

Acute Criteria:

Doctoral level students will gain experience/exposure in considering all the components of a patient's current condition in this setting including but not limited to:

- Episodes of immediate and severe illness or disability
- Short-term stay
- Co-morbidities
- Medications
- Labs, imaging, and medical screening
- Line management

Outpatient Criteria:

Doctoral level, students will gain experience/exposure in considering all the components of a patient's current condition in this setting including but not limited to:

- Conditions that may no longer be in the acute phase
- Ambulatory patients with injuries that live at home, but are able to be community dwellers with or without assist
- Preventative care that fosters early detection of disease and morbidity, and focuses on keeping patients well in addition to helping them while they are sick
- Medical conditions that do not require hospital admission and can be managed without admission to a hospital
- Insurance reimbursement issues/case management

Chronic Care Criteria:

Doctoral level, students will gain experience/exposure in considering all the components of a patient's current condition in this setting including but not limited to:

- Ambulatory or non-ambulatory patients with injuries/disabilities that reside at a facility
- End goal may be to improve functional level in current environment or return home with or without assist
- Address preexisting or long term illness, as opposed to inpatient which is concerned with short term or severe illness of brief duration
- Self-care, promote health and prevent loss of function
- Medicare and insurance reimbursement issues/case management

Roles and Responsibilities

Director of Clinical Education (DCE)

A licensed physical therapist, employed by Trine University as a core faculty member, whose primary concern is relating the students' clinical education to the curriculum. The DCE is the faculty member of record for the clinical education courses. This coordinator administers the total clinical education program and, in conjunction with the rest of the academic and clinical faculty plans, organizes, develops, facilitates, coordinates, administers, monitors and assesses the clinical education component of the curriculum. In addition, the DCE is responsible for evaluating the students' progress. Responsibilities of the DCE include, but are not limited to:

1. Selecting clinical education sites which will provide quality clinical education for the students.
2. Developing and coordinating the selected clinical education site(s) with the Center Coordinator of Clinical Education (CCCE).
3. Developing, planning, organizing, facilitating, coordinating, supervising, monitoring and assessing the clinical education experiences for each student with the clinical faculty (CCCE and Clinical Instructors (CIs)).
4. Assisting clinical faculty in the development, implementation, and evaluation of quality clinical education programs.
5. Serving the Physical Therapy Program through additional teaching, advising, service, and research activities.

Clinical Education Site/Facility:

A setting in which learning opportunities and guidance in clinical education is provided for physical therapy students. The clinical education site may be a hospital, clinic, school, home-health or other setting that is affiliated with Trine University through a contractual agreement.

Clinical Education Faculty

Those individuals engaged in providing the clinical education components of the curriculum, generally referred to as either CCCEs or CIs. While the educational institution/program does not usually employ these individuals, they do agree to certain standards of behavior through contractual arrangements for their services.

Center Coordinator of Clinical Education (CCCE):

A licensed physical therapist(s) or other qualified individual employed and designated by the clinical education site, who develops, organizes, arranges and coordinates the clinical education program for the site. Responsibilities include, but are not limited to:

1. Identifying, organizing, and coordinating the specific learning experiences available at the clinical education site.
2. Selecting and assigning clinical instructors CIs for each clinical placement and to ensure the CI's readiness to participate in the clinical education process. CCCEs should use the APTA Guidelines and self-assessments to assist CIs in analyzing their preparedness as clinical supervisors and to ensure that they meet minimal competency standards.
3. Coordinating, organizing, directing, supervising, and evaluating the activities of the clinical instructors and the students assigned to that site.
4. Organizing and implementing clinical instructor development programs to enhance clinical education skills and assess ongoing clinical instructor skills. The DCE may assist in the design and implementation of clinical instructor development activities.
5. Maintaining communication with the CI, DCE, and the assigned student during the clinical education experience.
6. Orienting the student to the facility, personnel, its policies and procedures, and expectations for the learning experience or assign responsibility for orientation to a clinical instructor.
7. This person may or may not have other responsibilities at the clinical education site.

Clinical Instructor (CI):

A licensed physical therapist, employed by the clinical education site, who is responsible for the direct instruction, supervision, and evaluation of the physical therapy student in the clinical education setting. Responsibilities of the CI include but are not limited to:

1. Planning the clinical education learning experience for the student using the instructions for the clinical rotation and the student's previous clinical experience as a guide.
2. Providing an opportunity to practice physical therapist skills while being supervised to reinforce knowledge, skills and behaviors acquired in the classroom.
3. Modeling for the student the role of the PT in a clinical setting.
4. Assigning specific cases to the student so the student can perform examinations, interventions, patient education, communication with others, documentation and all other responsibilities associated with the specific cases.
5. Providing ongoing, informal feedback on student's performance, as well as formal, written evaluations so students can discover strengths, areas needing improvement and suggestions for additional learning experiences.
6. Providing an opportunity for the student to participate in departmental activities, including departmental meetings, inservices, case reviews, patient care conferences, rounds, etc.
7. Participating in clinical instructor development programs.
8. Maintaining communication with the CCCE and the DCE as necessary regarding the students' performance.

Minimum Expected Criteria:

The following are characteristics that CIs should possess:

1. The individual must be a licensed Physical Therapist
2. Have 1 year of clinical experience
3. Good communication skills:

As a communicator, the CI should:

- a. Be an active listener
 - b. Communicate with others (students, patients, co-workers) in a non-threatening and tactful manner
 - c. Clearly present ideas/ information to others in a well-organized, concise manner
 - d. Provide constructive feedback to others in a timely manner
4. The ability to provide a positive environment for active student learning.

As a teacher, the CI should:

- a. Establish prioritized objectives for the learning experience with student input
 - b. Clearly explain the student responsibilities
 - c. Provide opportunities for learning within the student's current scope of practice
 - d. Facilitate therapist-student relationships
5. A positive attitude and genuine interest toward teaching.

As a teacher, the CI should:

- a. Be accessible and approachable by others
- b. Be available to the student for discussion of patient management

- c. Be available to the student for periodic discussion of student progress
 - d. Integrate knowledge of various learning styles into clinical teaching
 - e. Use planned and unplanned experiences to promote learning
 - f. Encourage self-assessment in students
6. Good problem solving skills and the ability to facilitate problem solving in others.

As a teacher, the CI should:

- a. Demonstrate problem solving abilities in clinical, interpersonal, interprofessional, and administrative areas
- b. Encourage problem solving in others

7. Exemplary professional behavior.

As a professional role model, the CI should:

- a. Work effectively with peers/other health care team members
- b. Accept responsibility in a positive manner
- c. Display self-confidence, desirable attitudes and the core values of the profession
- d. Be aware of his/her own limitations and show an active interest in further self-development

Student Physical Therapy (SPT):

Prior to the student's arrival at the assigned clinical education site, the student is responsible for:

1. Verifying that physical examination and health screens, immunizations and titers, health insurance, liability insurance, HIPAA training, OSHA training and CPR are current
2. Reviewing information located in the clinical education files which is pertinent to the assigned clinical site.
3. Reviewing the academic program's Student Handbook.
4. Completing pertinent information that is to be included in the student personal data packet prior to the time information is mailed to the facility.

While at the assigned clinical education site, the student is responsible for:

1. Adhering to the policies and procedures, rules and regulations of the clinical education site.
2. Adhering to the clinical education policies of Trine University as stated in the DPT Student Handbook.
3. Introducing him/herself to patients, family members, and other healthcare providers as a Student Physical Therapist
4. Obtaining consent from patients to provide care and actively engaging in physical therapy patient management opportunities.
4. Demonstrating adult learning qualities when participating in professional activities of the clinical education site.
5. Reflecting on the quality of his/her own mastery of professional knowledge, attitudes and skills by completing the required student self-assessments.
6. Evaluating the effectiveness of the clinical education experience at the clinical education site and providing feedback to the clinical education site and clinical instructor by completing the Physical Therapist Student Evaluation: Clinical Experience and Clinical Instructor.

Patients:

Throughout the clinical education process, CIs will select and assign students to work with specific patients who may assist the student in applying knowledge and gaining skills. Patients should grant consent for a student to provide care and may refuse involvement with students at any time during the clinical education process with no risk to their rights and access to care.

Responsibilities of the Clinical Sites, CCCEs and CIs

Agreeing to work with Trine University's DPT students includes taking on certain responsibilities, as well as receiving rights and privileges from interacting with the Trine University School of Health Science. The CCCE Manual on the APTA website is a practical tool to guide CCCEs in administering a student program (<http://www.apta.org/Educators/Clinical/EducatorDevelopment/>). Trine University expects that Clinical Sites, CCCEs, and CIs adhere to the responsibilities as outline in the APTA website Guideline and Self-assessment for Clinical Education (<http://www.apta.org/Educators/Clinical/SiteDevelopment/>).

Rights and Privileges of Clinical Instructors**CARE Clinical Instructors**

The Professional DPT core faculty understand the need to support clinical faculty. In a gesture of thanks, Trine University confers the clinical faculty for the CARE course series the following rights and privileges:

- Financial support towards annual APTA dues
- Recognition as clinical adjunct faculty for the intent of being eligible to receive continuing education credit from the State of Indiana
- Assistance with clinical practice questions
- Assistance with clinical education questions
- Collaboration in research projects
- Financial support for registration to the APTA Basic and Advanced CI Credential Training (first come, first served with limited seating)
- All clinical faculty are invited to attend the formal student poster presentations each year
- Yearly training courses related to clinical education and the Trine DPT program
- Invited to attend Trine University's training sessions for new faculty development
- Permitted to attend faculty meetings
- Invited to serve on DPT program committees
- Annual reviews by the DCE
- Receive quarterly newsletters from Trine University's School of Health Science
- The right of clinical faculty to temporarily or permanently withdraw a student from the facility

Clinical Instructors for Full-time Clinical Affiliations

Clinical faculty volunteer to supervise Trine University DPT students without any form of increased compensation from the university. The Professional DPT core faculty understand the need to support clinical faculty. In a gesture of thanks, Trine University confers the clinical faculty (CCCE/CI) the following rights and privileges:

- Continuing education hours as per the PT State Practice Act of Indiana (Indiana CIs only)
- Assistance with clinical practice questions
- Assistance with clinical education questions
- Collaboration in research projects
- Financial support for registration to the APTA Basic and Advanced CI Credential Training (first come, first served with limited seating)
- All clinical faculty are invited to attend the formal student poster presentations each year
- Invited to serve on DPT program committees

- Receive quarterly newsletters from Trine University’s School of Health Science
- Financial support or preferential registration for Trine University supported continuing education courses
- The right of clinical faculty to temporarily or permanently withdraw a student from the facility

Clinical Education Sequence

Trine University DPT program has five integrated clinical education experiences and four full-time clinical education affiliations. During the integrated clinical experiences students will be placed at local clinical sites in groups with highly qualified clinical instructors, whose focus will be on education. During these experiences students will be exposed to a variety of clinical settings. For full-time clinical affiliations, Trine University dedicates 34 weeks of the curriculum over the course of four full-time experiences. For these affiliations, students are encouraged to travel outside the Fort Wayne area.

Course	Semester	Length
DPT 5111 CARE I	Fall of 1 st Year	4 hours every other week for 14 weeks
DPT 5211 CARE II	Spring of 1 st Year	4 hours every other week for 14 weeks
DPT 5311 CARE III	Summer of 1 st Year	3 hours every week for 10 weeks
DPT 6111 CARE IV	Fall of 2 nd Year	4 hours every other week for 14 weeks
DPT 6211 CARE V	Spring 2 nd Year	4 hours every other week for 14 weeks
DPT 6314 Clinical Practicum	Summer of 2 nd Year	4 weeks full-time
DPT 7118 Clinical Internship I	Fall of 3 rd Year	8 weeks full-time
DPT 7128 Clinical Internship II	Fall of 3 rd Year	8 weeks full-time
DPT 7214 Clinical Internship III	Spring of 3 rd Year	14 weeks full-time

Communication between Trine University and Clinical Sites

Prior to Student Arrival

Request for Placement

In March of each year, in compliance with the Uniform Mailing Date established by the Education Section of the APTA, a Request for Placement Form will be sent to the CCCE for completion for the full-time clinical affiliations. A list of available clinical affiliations is then generated for each full-time rotation. It is important that Trine University has correct CCCE contact information and that any change regarding slot availability be communicated to the DCEs in a timely fashion.

Initial Confirmation of Student Placement

As soon as students are assigned to a site, a Confirmation of Student Placement Form delineating the length and type of rotation will be sent to the CCCE. The CCCE will sign and return the form to the DCE to confirm the placement. Students are given a copy of the signed confirmation form and are encouraged to contact the CCCE and/or the CI to establish personal communication.

Student Packets

About 6-8 weeks before the start of an experience, a packet will be sent to the CCCE which includes student biographical data and other relevant information. It is expected that the student contact the CI 3-4 weeks prior to arrival at the site to provide information on dress code, working hours, parking, etc.

During Clinical Education Experiences

“Fax Back Form”

The student is to complete this form the first day in the clinic and return it electronically to the DCE. The form lists the contact information of the CI and student, working hours, department location and dates/times when the CI is not available. This information is used to schedule midterm visits or phone calls.

Midterm Conference (Site Visit, Phone Call or Email Communication)

Each student and CI receives a visit, phone call or email communication by the DCE or a faculty member to review how the student is progressing during any clinical affiliation that is greater than 5 weeks in length. The online PT Clinical Performance Instrument (CPI) should be completed and reviewed by the CI and student *prior* to the DCE’s visit or phone call.

CI’s are encouraged to contact a DCE at any time with questions or to request an onsite visit. If the DCE cannot be reached, please contact the PT Program Director.

Student Evaluation of the Clinical Site

Students are required to complete the APTA Student Evaluation of the Clinical Site Form at the end of the rotation and share the information with their CI(s) following the final evaluation. This form provides feedback to the site about the experience, and the form also provides information to future Trine University DPT students and the academic faculty about a specific site.

Assignment to Clinical Rotations

Clinical placement decisions are made under the supervision of the Director of Clinical Education based on mandatory course requirements, the individual learning needs of the student, student preferences, and site availability. Placement policy ensures appropriate experiences are integrated with the didactic portion of the Program while still recognizing individual student differences and educational needs. Students are only placed at sites in which there is an active affiliation agreement.

Students are assigned to clinical education experiences in a variety of practice settings. The distribution of clinical placements includes at least one outpatient, inpatient, and chronic care settings. Each type of clinical experience exposes students to differences in: patient problems, acuity, and complexity, clinical skill development, interactions with other health care professionals, practice issues, documentation, and culture.

Requests for clinical slots will be made by the Director of Clinical Education (DCE) beginning March 1 for the next calendar year. Clinical affiliates offer clinical rotations based on their anticipated ability to provide a rotation during a specific time period. Clinical affiliates make this decision based on a multitude of factors, including availability of qualified clinical instructors, adequate staffing, and commitments to other schools. Students can expect that placement options will only exist from a listing of currently affiliating sites. Students will not be permitted to be placed at a site unless there is an affiliation agreement between the site and Trine University. Although students may suggest new sites, it is unlikely that new clinical sites will be established unless the relationship can bring substantial benefit to future program students, as well. Under no circumstance should a student engage in communication with clinical sites, either affiliating or non-affiliating, in attempt to negotiate clinical affiliation agreements, placements options, sway clinical faculty (Center Coordinator of Clinical Education (CCCE) and Clinical Instructor (CI)) decisions regarding student placement, and/or engage in other site recruitment efforts.

Students have the opportunity to provide input into placement decisions by indicating site preferences based on availability. The student may also meet the DCE to discuss site placement options. However The Director of Clinical Education holds ultimate authority for final placement decisions.

Conflicts of Interest

Students shall not be assigned to clinical sites where a real or perceived conflict of interest may affect the educational experience, either positively or negatively. Examples of conflicts of interest with clinical sites may include:

- Previous employment, current employment, and/or offers of employment.
- Family member or significant other employed by the clinical facility, especially in a position of authority.
- Scholarship or student loan recipient from the facility or a corporation that provides physical therapy services in the facility.
- Any previous close affiliation, i.e., accumulating more than 15 hours of volunteer time or work experience prior to entering the Program or while matriculating in the Program.

Students are required to identify any clinics where they may have a conflict of interest. The Director of Clinical Education, in consultation with the clinical site, will reserve the right to create exceptions under extraordinary circumstances. Failure to disclose conflict in interest may result in termination of the clinical rotation and repeating the clinical experience.

Confidentiality and Communication during the Clinical Education Experiences

The faculty of Trine University DPT Program believes all individuals have the right to privacy. The maintenance of confidentiality helps to build trusting relationships and keep lines of communication open. The faculty also believes that protecting individuals from biasing may aid in the teaching-learning process. With this in mind, the Program asks all participants in the clinical education process to support the right of individuals to professional, clear, and confidential communication to maximize the learning potential of all involved. Should problems arise during clinical experiences, the Program recommends the following steps be taken:

1. As soon as a problem is identified, it should be discussed only with the people involved (e.g., between student and clinical instructor).
2. If either person believes other intervention is needed or they are not able to deal directly with one another, either person or both should speak with the Center Coordinator of Clinical Education, if one exists.
3. If the problem cannot be resolved at this level, the CCCE and/or student should contact the Director of Clinical Education.
4. As in any other course in the curriculum, a student may consult with his/her academic advisor and/or contact the Department Chair or other administrative personnel within the School.

We understand that some smaller departments and practices may not have both a CI and CCCE, but the steps should remain essentially the same. In addition, we acknowledge the need for directors and unit supervisors to be notified of any major problems. If any problem develops while the student is on a clinical educational internship the Director of Clinical Education should be notified within 72 hours.

Travel and Living Expenses

By nature of the clinical education experience, students will be traveling to various clinical site locations throughout Indiana and the United States. Although many clinical affiliations are within driving distance from Fort Wayne, it is impossible to schedule local placements for all rotations. Therefore, all students should expect to travel outside of the Fort Wayne area for at least one (1) of the full-time clinical experiences. Students with extreme hardships may request local placements; however, due to the limited availability of clinical sites, the student may experience a delay in course scheduling and thus a delay in graduation. There are no guarantees on location of clinical assignments. Students must be prepared to travel for clinical experiences. Students may also have an opportunity to request international placement, when available.

Students are responsible for all expenses of travel to clinical education sites, including the expense of temporary housing and other living expenses. Students are advised to prepare in advance for this expense. The Program will not arrange housing or other temporary living arrangements for students assigned to out of town clinical experiences. The student clinical facility files may include housing contacts on the Clinical Site Information Form and/or recommendations from previous students, but the student is responsible for making housing arrangements while on clinical placements. Occasionally a clinical site will provide a small stipend for meals and/or housing. This information can be found on the Clinical Site Information Form on file in the office of the DCE.

Clinical Attendance

Clinical attendance is mandatory. Prior to or at the beginning of the internship, the clinical work schedule will be assigned by the supervising clinical instructor (CI). Students will be scheduled within guidelines set forth by the assigned facility's policies and procedures and must be scheduled no less than an average of 40 hours per week. The work schedule must span the entirety of the time period between starting and ending dates of the rotation. Prior authorization from the DCE is required for earlier start dates or later ending dates. The student is responsible for communicating the work schedule to the Director of Clinical Education (DCE) no later than the end of the first week of the clinical affiliation via the "Fax Back Form". Any subsequent changes to the work schedule must be communicated to the DCE at the time they are known.

If the student will be late or absent from clinical, the student must notify both the university and the CI at the facility prior to the scheduled clinical starting time. Any missed time, for any reason, must be made-up and rescheduled at the convenience of the CI. Notification of absence or tardiness to the University should be executed by the student in a timely manner to the DCE. Each occurrence of failure to notify the persons as outlined above and/or failure to complete the required clinical hours constitutes a policy infraction and, therefore, could result in an unsatisfactory grade in the course and possible failure of the clinical internship.

Severe Weather

Students are expected to exercise good judgment regarding safety. In the event of inclement weather, students are expected to adhere to the inclement weather policies of the affiliating clinical site; therefore, unless the clinic is closed, the student is expected to make reasonable effort to attend. Students on full-time clinical assignment will NOT follow the inclement weather closings by the university.

Students participating in on-site or off-site clinical experiences, such as CARE courses, scheduled as part of other didactic coursework will follow the inclement weather closings by the university.

Holidays

Students on full-time clinical assignment are expected to follow the holiday policy of the affiliating clinical site, not the university, when in the clinical setting.

Extenuating Circumstances

Under extenuating circumstances, students may be absent from the clinic without penalty. Such instances require DCE prior approval and the prior approval of the CI as soon as possible depending on the situation. Examples of extenuating circumstances include natural disaster or death of an immediate family member.

Absences which extend beyond 20% of the total contact hours for the course will require the student to be rescheduled for the entire clinical course.

Dress Code

All students must adhere to a uniform dress code when attending clinical rotations. Unacceptable dress or appearance could lead to course failure. Students should contact the facility where they will be performing their clinical internships to inquire about their dress code and should adhere by that dress code. If the facility does not have a dress code, students should wear the PT Program Uniform:

- Men will wear khaki, navy or dark pants and designated short white lab coats, a button-down shirt tucked into the slacks.
- Women will wear khaki, navy or dark pants with a choice of regular or elastic waist, a blouse tucked into slacks, and designated short white lab coat.
- Only students unable to fit comfortably into the lab coat may substitute a larger size white smock.
- Shoes must have no more than a one-inch heel, be closed toed and heeled, be clean, and have non-skid soles. Tie-up shoes must be tied.
- A Trine University nametag must be worn at all times.
- No jewelry other than watches, small earrings, and wedding bands. No visible body piercing, except for the ears, is allowed.
- No colognes, perfumes or heavily scented hair products.
- No hats.
- Clothing must always be neat and clean.
- Hair must be clean and worn in a neat arrangement in accordance with the policy of each clinical facility.
- Nails should be clean and cut no longer than the tips of the fingers. Artificial nails are not allowed.
- No gum chewing or smoking is permitted in any clinical setting.

Evaluation

Evaluation is a necessary and useful tool in education. To be worthwhile it must be done in an honest, continuous, shared process, and the results acted upon. To be effective, the atmosphere must be open, allow for discussion, and encourage opportunities to learn or practice areas of deficiency. Evaluation is a part of the didactic learning on a regular-frequent basis and must also occur in the clinical experience.

Evaluation refers not only to evaluating the student's skills, but also refers to evaluation of the curriculum, the faculty, and the clinical facility. All aspects of the evaluative process should include student input.

CARE Courses

Students will be assessed at the conclusion of their Clinical Application Reflection Experience (CARE) courses using the professional behaviors generic abilities assessment. This assessment will be provided to the students and CARE clinical faculty by the DCE. Students are to be assessed by the CARE clinical instructor, a peer, and themselves. Final grades are assigned by the DCE based upon completion of assigned work and of the generic assessment tools. Grades for the CARE course series are on a satisfactory/unsatisfactory basis. Further information about each course can be found in the course syllabus. Students are also required to complete the Student's Evaluation of a Clinical Education Experience for the CARE courses.

Full-time Clinical Experiences

Students will be evaluated at the conclusion of the four-week experience and at least twice during each experience of six or more weeks. The Clinical Instructor (CI) will assess and review the student's progress once in the middle and at the end of the experience. The student will provide feedback, along with the CI, during a scheduled site visit, telephone conversation, or email with the Director of Clinical Education or another faculty member during each affiliation. The student may, at any time during an affiliation, request additional feedback from either the clinical or academic faculty. It is recommended that formative evaluations be done on a daily and weekly basis in relation to specific patient care areas or in other areas as needed.

Students on full-time clinical experiences will be assessed using the Physical Therapist Clinical Performance Instrument (web based) (CPI). The CPI can be found at <http://www.apta.org/PTCPI/>. The student must be competent at entry-level in each category by the end of the final long term clinical affiliation, DPT 7214. If any problems/questions/comments arise regarding the evaluation process, please do not hesitate to call the DCE or to address the matter during a site visit or midterm phone call. Final grades are assigned by the DCE based upon completion of assigned work and the Physical Therapist Clinical Performance Instrument (CPI). Performance designated below an acceptable level of performance, as indicated in each course syllabus, during full-time clinical experiences will be discussed by the DCE with the Clinical Instructor to re-evaluate performance.

The student is responsible for submitting the Physical Therapist Clinical Performance Instrument (online), the Student's Evaluation of a Clinical Education Experience, and any written assignments or reflections as indicated by the course syllabi at the conclusion of each clinical experience. Final grades for all clinical experiences are on a satisfactory/unsatisfactory basis and assigned by the DCE as per the course syllabi. Failure to complete the CPI, Student's Evaluation of a Clinical Education Experience, or any written assignments or reflections could result in an unsatisfactory grade in the course which would require the student to repeat the course.

All clinical sites and clinical instructors will be evaluated by the student using the Student's Evaluation of a Clinical Education Experience. The Student Evaluation of Clinical Education Experience will be given to the students by the DCE or it can be found on the APTA website at <http://www.apta.org/Educators/Assessments/>. If the need arises, the DCE will also perform informal assessments of the clinical sites and/or clinical instructors. All CARE clinical instructors will be reviewed annually by the DCE.

All clinical education faculty members are encouraged to assess the DCE using the DCE Performance Assessment. This assessment can be found on the APTA website at <http://www.apta.org/Educators/Assessments/ACCE/DCE/> or contact the DCE to receive a copy.

Requirement for Clinical Education Internships

Communication

It is the DCE's responsibility to send to the clinical site the course syllabi, instructions for the clinical instructor, CPI training materials, and verification and/or a certificate of liability insurance approximately 6 weeks prior to the start of the clinical education experience.

It is the student's responsibility to contact the clinical site 4-6 weeks prior to the start of the clinical education experience to determine information regarding location, parking, clinic hours, dress code, etc. The student must submit to the site required up-to-date health information along with verification of health insurance, immunizations, background check, OSHA training, HIPAA training, CPR certification, and any additional information that the site is requesting.

Certificate of Liability Insurance

All students are provided professional liability insurance through the Trine University. Professional liability insurance covers their activities as a physical therapy student in the classroom, laboratory educational experiences and clinical education experiences. *A student's professional liability insurance does not cover the student in activities outside the domain of the Physical Therapy Program (e.g. while employed as a PT aide) or during unsupervised practice of psychomotor skills.* Proof of professional liability insurance by clinical sites is available upon request from the DCE.

Health Insurance

Students will be expected to show proof of coverage for personal health insurance before the start of the program and maintain coverage throughout the professional program. Students are required to submit a copy of their health insurance card annually to the Administrative Assistant. Copies of insurance cards will become part of the students' clinical education file.

Students are often required to show proof of personal health insurance prior to being accepted for clinical placements by clinical sites. Few clinical education centers provide more than emergency treatment for students, and

students are expected to assume responsibility for payment for such services. Information on health care and emergency services available during off campus clinical education experiences is included on each clinical site's CSIF.

Immunizations

Some clinical education sites have **additional health requirements** (flu shots, drug screens, etc.). When these are known in advance, the program will inform the student of any additional health requirements. However, during preparations for upcoming internships, the student is responsible for checking with the CCCE to determine if there are any additional health requirements. It is recommended that this process be initiated approximately 4-6 weeks prior to the start of the clinical to allow adequate time for completion of any additional health requirements.

All expenses incurred in obtaining a physical, necessary laboratory tests, immunizations and additional health requirements are the responsibility of the student.

Required Screenings:

- Annual Tuberculin Screening
 - o 2-step tuberculin Mantoux (completed prior to start of program) – if positive, chest X-ray required;
 - o One-step PPD (tuberculin skin test) for 2nd and 3rd year students only

Required Titers (completed prior to start of the program):

- Mumps titer – * if negative, MMR required
- Rubella titer – * if negative, MMR required
- Rubeola titer – *if negative, MMR required
- Hepatitis B titer – *if negative, Hepatitis B vaccination(s) required
- Varicella titer – *if titer is negative, 2 varicella vaccinations required

Required Immunizations:

- Tetanus/Diphtheria/Pertussis – adult booster required within the past 5 years
- Others as identified above based on outcome of above titers*

Medical Contraindication/Waivers

If there is medical contraindication to any required immunization(s), verification from the primary healthcare provider must accompany the health record. When any medical contraindication exists, a waiver must be signed by the student to acknowledge that inadvertent exposure might occur and to release the clinical site and university from liability in the event of exposure. Appropriate waiver form(s), obtained from the Program, must be signed and on file with the Program.

If a student, for whatever reason, elects to waive an immunization requirement(s), placement in a clinical setting cannot be guaranteed. As such, the student may be deemed unable to complete the required clinical education coursework.

Background Check

All incoming physical therapy students are required to submit to and receive a criminal background check as a condition of enrollment. Instructions for obtaining the initial background screening will be provided to the student at program orientation. Initial screenings are conducted at the expense of the Program through the use of services provided through ADP. The background check consists of the following screens: criminal records search, identity tools, governmental registries search and a smart scan.

The Program will track each student to ensure compliance and to verify presence of a negative criminal record. If a background check identifies a history of criminal behavior, the student may be prohibited from participation in clinical education courses. Cases will be evaluated on an individual basis by the DCE with consultation from the Program Director and/or other University administrative personnel. Any criminal activity in question must be disclosed to the clinical site prior to placement. Clinical sites have the right to refuse placement for any student possessing a history of criminal activity.

All information gathered in the process of criminal background checks is strictly confidential. Information may not be revealed to any other party without written permission from the student. Students will be provided with the results of the background check and, unless otherwise required by the clinical site, will be responsible for sharing this information with the assigned clinical site(s) upon request.

The procurement of any subsequent background screening and/or any additional screening that may be required from the assigned clinical site will be the responsibility of the student. It is the responsibility of the student to learn of any additional and/or supplemental requirements by reviewing the Clinical Site Information Form (CSIF) and/or contacting the Center Coordinator for Clinical Education (CCCE) at the clinical site.

The purpose of the background check policy is to:

1. Promote and protect patient/client safety, as well as the well-being of the campus community.
2. Comply with the mandates of clinical sites which require student background checks as a condition of their written contracts with the Physical Therapy Program, Trine University, as stipulated by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).
3. Promote early self-identification of students who may be “at risk” for not meeting Physical Therapy licensure eligibility requirements in some states due to a felony conviction.
 - Students with an identified history of criminal activity may be at risk for not being able to successfully complete the required clinical education requirements of the DPT program. Successful completion of all designated clinical practicums and clinical internships is a graduation requirement for a DPT degree.
 - In order to ensure that a student with a history of a felony conviction is eligible for sitting for the Physical Therapy licensure exam, the “at risk” student will need to seek clarifying information directly from the licensure board of the state in which s/he wishes to practice. As PT practice laws vary from state to state, it becomes the student’s responsibility to know the laws of individual states regarding policies associated with the awarding of a PT license; the “at risk” student may need to petition the state licensure agency to request a declaratory order/opinion from the licensure agency. Please, see the following website for contact information for the PT licensure agency for each state: www.fsbpt.org

OSHA Training

The Occupational Safety and Health Administration (OSHA) has defined requirements which specify the protective measures all healthcare personnel are required to perform in order to prevent the spread of communicable disease. All students must participate in Blood-borne Pathogens Training prior to participation in clinical and/or patient-related activities; training is provided by the Program. Training includes proper hand-washing, use of personal protective equipment, isolation precautions, and other information targeted at exposure risk reduction. Students must pass a post-training practical examination and receive a certificate of completion to meet this requirement and be allowed to participate in any clinical or patient-related activity.

In the event of occupational exposure to a biohazard while on clinical experience, students are to follow the clinical site’s guidelines for managing, reporting, and documenting the incident. It is the student’s responsibility to inform the clinical instructor of the incident and to seek their guidance in complying with all site-specific policies. If the need arises, clinical sites shall provide students with access to emergency care; however, the student shall be responsible for the cost of all emergency services rendered. The student is not covered under any worker compensation benefit; therefore, the student is also responsible for the cost of any follow-up care as a result of exposure/injury. The Director of Clinical Education should be notified of the incident within 24 hours of occurrence.

In the event of occupational exposure to biohazard while on campus, students are to notify the instructor of record and/or the Program Director as soon as possible. The storage and use of any hazardous materials will be the responsibility of the Program. The Program will follow OSHA guidelines for the storage, use of any hazardous materials and the use of standard precautions.

Students are expected to keep documentation of training as each clinical site reserves the right to require a student to provide proof of training at any time. Clinical sites may also require the student to participate in additional training

HIPAA Training

The Health Insurance Portability and Accountability Act (HIPAA) defines a set of uniform standards relating to the security, privacy, and confidentiality of patient health-related data. All students must participate in HIPAA training prior to participation in clinical and/or patient-related activities; training is provided by the Program. This training orients the student to concepts of confidentiality, appropriate access of information and appropriate release of information procedures for protected health information. Students must pass a post-test and receive a certificate of completion to meet this requirement. Students may not participate in any clinical or patient-related activity unless certification is current.

Students of the Trine University DPT Program have a legal and ethical responsibility to safeguard the privacy of all patients and protect confidentiality and security of all health information. Protecting the confidentiality of patient information means protecting it from unauthorized use or disclosure in any format including: oral/verbal, fax, written, or electronic/computer. Patient confidentiality is a central obligation of patient care. Any breaches in patient confidentiality or privacy may result in disciplinary action, up to and including dismissal from the educational program.

Students are expected to keep documentation of training as each clinical site reserves the right to require a student to provide proof of training at any time. Clinical sites may also require the student to participate in additional training.

Substance Abuse Testing

Students are required to consent to and pass a substance abuse test prior to being placed on clinical education affiliations including CARE courses. Students are required to complete a 5 panel drug screen. . The Program will inform students of locations that offer these services in close proximity to the Trine University Carew location, as well as their respective costs. Students may be required to undergo substance abuse testing at least every 12 months or as required by the healthcare facility. Students who do not complete or do not pass a drug test as required by these facilities will not be allowed to participate in experiential education activities at the facility, and may face sanctions, including possible dismissal from the program.

CPR Certification

All entry-level students in the Trine University DPT program are required to obtain and maintain biennial certification in CPR Life Support for the Healthcare Provider from the American Heart Association. All entry-level students must attend the mandatory CPR classes scheduled during the first month of the first semester of their program of study or in the summer immediately preceding their first semester, and repeat the certification if their program of study extends beyond two calendar years. The Program will inform students of CPR Life Support for the Healthcare Provider courses offered in a facility located in close proximity to the Trine University Carew location, as well as their respective costs. The students will be responsible to sign up, attend and pay the cost of the certification program.

Students not in compliance with CPR requirements are subject to penalty up to and including expulsion from the enrolled clinical course. Under no circumstance will students be allowed to participate in any clinical or patient-related activity unless CPR certification is current.

The student is responsible for submitting subsequent recertification documentation to the Program prior to the expiration date of the previously submitted document. Students are expected to keep personal copies of CPR documentation as each clinical site reserves the right to require a student to provide proof of compliance at any time.

Section 3: Standards of Conduct

APTA Code of Ethics and Core Values

The American Physical Therapy Association (APTA) has adopted Code of Ethics and Core Values for all physical therapists to abide by. It is the responsibility of the student to uphold this code and values in all situations. Failure to uphold the APTA Code of Ethics and Core Values could result in failure of a course or clinical experience. Visit the APTA website (www.apta.org) for APTA Code of Ethics and Core Values.

Trine University DPT students are expected to become student members of the APTA. Students will be highly encouraged to participate in state chapter and national activities. Students who have questions are encouraged to visit the APTA website (www.apta.org) and speak with their advisors for more information.

The APTA is the professional organization for physical therapists in the United States. There are many resources and benefits to being a member both as a student and professional. As a student you may attend the state and national conferences and student conclave all at discounted rates.

Professional Behaviors

Professional behavior is, without exception, required. It is expected that all students demonstrate behaviors consistent with those of healthcare professionals. It is required that all students exhibit these behaviors in the classroom and laboratory settings, during site visits, CARE courses, clinical internships, and service learning activities. Failure to demonstrate these behaviors could result in failure of a course or clinical experience. Professional behaviors include the following

1. **Critical Thinking** - The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision making process.
2. **Communication** - The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.
3. **Problem Solving** – The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
4. **Interpersonal Skills** – The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.
5. **Responsibility** – The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.
6. **Professionalism** – The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.
7. **Use of Constructive Feedback** – The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.
8. **Effective Use of Time and Resources** – The ability to manage time and resources effectively to obtain the maximum possible benefit.
9. **Stress Management** – The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.
10. **Commitment to Learning** – The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

All Trine University DPT students will be expected to:

1. Demonstrate safe performance of activities, sensitivity to individuals, appreciation for alternate points of view, respectful communication, concern for self, cooperation with others and acceptance of personal and corporate responsibility for the coursework should be demonstrated
2. Show respect for facilities and equipment in the School of Health Science and in the clinical education settings.
3. Present an appropriate personal appearance in classrooms, laboratories and Clinical Education settings and at public meetings where their identity as physical therapy students is apparent. Please refer to the Dress Code for details.

Professional behaviors are evaluated by self-assessment, clinical instructors, peers, and faculty. Written clinical instructor comments and instructor observation of student performance provide the basis for counseling on professional behavior. It is expected that most cases of professional misbehavior can be successfully corrected by sensitive discussion and counseling between the faculty and the student. A plan for remediation will be developed and implemented.

The Complaint Process

“Concerns” are issues that may be solved by informal means; “complaints” are formal issues that cannot be solved informally. Students are urged to have a direct and informal approach for settling concerns. Students are encouraged to voice concerns with the support, involvement and/or intervention of university personnel.

If concerns are not handled in a satisfactory manner, then students are urged to file a “Notice of Complaint.” The “Formal Complaint Form” tab is located on the students’ myPortal page along with all similar student information. It is convenient to all students, located in a place specifically designed for student information. Further information instructs students not to use the site for Title IX allegations and redirects them to the appropriate page.

There are four steps to the complaint process:

1. Notice of Complaint
 1. Notice of Complaint
 2. Referral
 3. Solution
 4. Appeal
1. Notice of Complaint

The Notice of Complaint includes pertinent student information which is automatically populated on the form once the student begins the process. The following student information is included on the page: 1) date of submission; 2) name of the student and ID number; 3) local address of the student; 4) facts and documentation for the complaint; 5) phone number; 6) class status; 7) explanation of the complaint. Students must click the submit button to complete the process.
2. Referral

Once submitted, the complaint is forwarded to the Referral Committee which consists of the President’s Chief of Staff, the Executive Assistant to the Office of Academic Affairs, and the Assistant Vice President of Academics (ALO). This committee reviews the complaint and refers it to the appropriate vice president or administrator for action. To ensure confidentiality, only the Committee and the administrator will have access to the complaint information.
3. Solution.

The administrator meets with the student and discusses solutions to the complaint. All support materials must be provided to the administrator by the student. Action must be taken within 10 class days of receiving the notice from the Referral Committee. A response letter, indicating the solution to the complaint, will be sent by the administrator to the student. Information on the complaint data base is also submitted.

4. Appeal.

If the solution is not satisfactory, students may appeal the result within 10 class days of receiving the letter. If filing an appeal, the appeal must be filed within 10 class days of receiving the response letter. The appeal process is outlined in the student handbook.

Filing a Complaint

In order to provide high quality educational experiences, the Physical Therapy Program recognizes the importance of receiving and being open to the merits of any complaint made against the program, the students, and faculty and/or staff. Student complaints involving grades, inequitable treatment, or other situations will be handled by the institution as indicated in the handbook. (see Trine Student Handbook) Complaints concerning any violation of Title IX should refer to the following Trine website <http://www.trine.edu/campus-safety/Sexual%20Misconduct.Assault%20Policy.pdf>. If the Dean is the object of the complaint, the Vice President for Academic Affairs will attempt to resolve the dispute. Students maintain their right to due process by filing all complaints and grievances against the program, its faculty or staff through procedures outlined in the Trine University Student Handbook. Visiting students will operate under the same handbook.

Any complaints of sexual harassment must be handled in accordance with Trine University Title IX policy.

Policies and procedures for handling complaints falling outside of the realm of due process, such as complaints from professional practice education sites, employers of graduates, and the public. Records of complaints about the program, including the nature of the complaint and the disposition of the complaint are maintained by the School of Health Science.

Should a situation occur that would generate a complaint from a professional practice education site, employers of graduates, or the public in general, the School of Health Sciences would take the following steps. The complaint must be submitted in writing to the Dean of the School of Health Sciences and include:

- Name of the complainant (*clinical education site, employer, or member of the public who initiated the complaint*)
- Name of the complainee (*individual whom the complaint is voiced against*) and role in the incident (*unprofessional behavior, inappropriate treatment of a client, or inappropriate verbal exchange between the complainee and other involved individuals*).
- Date and location of incident.
- Detailed description of the incident, complete with the names of all individuals involved.
- Detailed description of any and all action immediately following the incident.

Complaints should be addressed to:

Dean of the School of Health Sciences
Trine University
One University Avenue
Angola, Indiana 46703

Upon receipt of the complaint, the Dean will take the following steps:

- Make a judgment about the complaint to determine if it is legitimate or bona fide
- Verbal contact with the complainant to address and ensure the appropriate action will be taken to address the incident, if warranted.
- Establish a meeting with the complainant, if appropriate.

Careful assessment of the situation will be made requiring any and all pertinent review of all the necessary information. After assessment of the situation, the Dean will respond in writing to the complainant outlining the corrective action(s) to be taken, if warranted. If the situation remains unresolved at this level, the Vice President for Academic Affairs will be notified

Documentation of complaints, follow-up action, and outcome will be kept on file for a period of five (5) years in the Dean's office

If the Dean is the object of the complaint, the Vice President for Academic Affairs will attempt to resolve the dispute

Filing a Complaint about the Program to CAPTE

Physical therapy education programs in the United States are accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), which works in conjunction with the American Physical Therapy Association (APTA) to maintain the standards of the profession. Students, parents, patients, faculty, and other stakeholders may submit a complaint regarding the DPT Program to CAPTE. CAPTE has a mechanism to consider formal complaints about physical therapy education programs that allege a program is not in compliance with one or more of CAPTE's Evaluative Criteria (see website for evaluative criteria specifics

http://www.capteonline.org/uploadedFiles/CAPTEorg/About_CAPTE/Resources/Accreditation_Handbook/EvaluativeCriteria_PT.pdf) or has violated any of CAPTE's expectations related to academic integrity. To contact CAPTE call 703-706-3245 or e-mail accreditation@apta.org. Further information can be found on CAPTE's website <http://www.capteonline.org/Complaints>.

Affirmative Action Statement

Trine University does not discriminate on the basis of race, color, national or ethnic origin, sex, disability, veteran status or age in the administration of any of its educational programs, admissions policies, scholarship and loan programs, athletic and other school-administered programs, or in employment. The University has designated the director of human resources, Jamie Norton, as its Title IX coordinator, and as the person to whom questions regarding the nondiscrimination policies should be directed. Ms. Norton may be contacted as follows:

Jamie Norton
Director of Human Resources
Trine University
One University Avenue
Angola, Indiana 46703
260.665.4111 (Direct)
nortonj@trine.edu

American with Disabilities Act (ADA) Compliance

Ms. Kathie Wentworth, http://www.trine.edu/meet_faculty/kathie_wentworth/default.cfm is the ADA (Americans with Disabilities Act) and Section 504 (of the Rehabilitation Act of 1973) Coordinator for students. Ms. Wentworth's duties include the following:

1. Reviewing documentation for requests for reasonable accommodations;
2. Accepting and assisting in investigating any grievances filed by students who believe they have been subjected to discrimination on the basis of disability;
3. Assist in coordinating the efforts of the University to comply with Section 504 and related disability laws; and
4. Maintaining data and assisting in preparation of notices and reports necessary for University compliance with Section 504 and related disability laws.

Trine University is committed to the full inclusion of individuals with disabilities and to improving the accessibility of our campus, programs and activities. Any student who wishes to request an accommodation, or who has questions about the accommodation process should contact Kathie directly. In addition, you should be aware that the University prohibits retaliation against individuals for engaging in activities protected by the ADA or by Section 504. University faculty and staff shall not discriminate or retaliate against any individual because that individual has advocated on behalf of a disabled student or applicant.

Technical Standards

Student Compliance with Technical Standards

The Doctor of Physical Therapy education program at Trine University prepares physical therapists to serve as primary providers of physical therapy care. This program is a complex and intensive course of study that places specific demands on students that closely resemble the physical and intellectual challenges graduates of the program will encounter as practicing physical therapists. In order to function as clinical physical therapists, individuals must be able to meet certain physical, emotional, intellectual, and communication expectations for performance. This program is designed to prepare students to be entry-level physical therapists.

The purpose of technical standards is to delineate the psychomotor, cognitive and affective skills and abilities deemed essential for matriculation into, continuation in, and graduation from the educational program. Technical standards are necessary to create specific expectations for student performance in the classroom, laboratory and clinical education environments. Students are to familiarize themselves with these essential functions and determine whether or not they are able to perform the specified tasks. Technical standards must be met with or without reasonable accommodations consistent with The Americans with Disability Act, Section 504 of the Rehabilitation Act of 1973.

Psychomotor Skills

Gross and fine motor skills are required to meet the responsibilities of a physical therapist student in a wide variety of educational and clinical settings. A student must be able to perform motor movements required to provide general and emergency care to all patients. These demands include reasonable endurance, strength, equilibrium, and precision. A student must have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, diagnostic maneuvers and procedures, and other diagnostic manual maneuvers in a safe and effective manner. A student must be able to execute general motor movement such as transferring/transporting, gait training, and positioning of patients, physically restraining adults and children who lack motor control, and manual mobilizing techniques.

Observation

Observation is an essential component of evaluation and assessment for a physical therapist student. In general, this requires functional use of vision, hearing and somatic sensation including the ability to perceive position, pressure, movement, weight, and vibration. A student must be able to demonstrate the following observational skills examination of non-verbal patient communication, skin integrity, radiographic findings, graphic representations of data, changes in body position/movement, and gauges on equipment. In the classroom, a student must be able to independently observe and participate in laboratory dissection of cadavers, the microscopic analysis of tissues, and lecture and laboratory demonstrations in all courses.

Communication

Effective and sensitive verbal, non-verbal, and written forms of communication must be demonstrated by a student. This is necessary in order to elicit information, describe changes in mood, activity and posture, assess non-verbal communications, and be able to effectively and efficiently transmit information to patients, fellow students, faculty and staff, and all members of the health care team.

Intellectual, Conceptual, and Integrative Abilities

To effectively solve problems, a student must be able measure, calculate, reason, analyze, integrate, and synthesize information in a timely manner. A student must be able to comprehend three-dimensional relationships and understand the spatial relationships of structures. A student must be able to synthesize knowledge and integrate relevant aspects of the patient history and examination findings in order to develop an accurate physical therapy diagnosis and determine an effective treatment plan within reasonable time constraints imposed by the needs of the patient, the facility, and the standards of care.

Affective, Behavioral, and Social Capabilities

Empathy, compassion, integrity, honesty, concern for others, good interpersonal skills, interest, commitment, and motivation are all required personal characteristics that a student must possess. A student must possess adequate mental and emotional health necessary for the full utilization of his/her intellectual abilities; the exercise of good judgment, academic honesty, maintenance of patient confidentiality, the prompt completion of all responsibilities attendant to the care of patients and course assignments; and the development of mature sensitive, and effective relationships with patients and others. A student must also be able to tolerate taxing workloads, function effectively under stress, adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent in clinical situations. A student is expected to be able to accept and reflect upon appropriate suggestions and criticisms and, if necessary, respond by modifying personal behaviors. A student should also conduct him/herself at all times in a manner consistent with the American Physical Therapy Association Code of Ethics and Guide for Professional Conduct.

Procedure

It is the policy of Trine University not to discriminate against qualified individuals with disabilities, and to provide reasonable accommodations, as required by law. Students with disabilities who wish to request academic adjustments need to meet with the Director of Academic Support Services and provide recent documentation from an appropriate professional source concerning the disability. This documentation must contain a clear diagnosis, tell how the condition affects the student's ability to function, explains what academic adjustments are needed, and show how the disability relates to these adjustments. If a student is eligible for academic adjustments, the student's professors will be notified regarding the requested adjustments. A reasonable academic accommodation is based on documented individual needs, allows the most integrated experience possible, does not compromise the essential requirements of a course or program, does not pose a threat to a person or public safety, does not impose undue financial or administrative burden and is not of a personal nature. The exact nature of a disability will be kept confidential. Visit the disability website for additional information at

http://www.trine.edu/campus_life/student_services/disability_services

The goal of Academic Support Services is to assist all students to become efficient, self-confident, and independent learners. For more information on academic support services, telephone 260-665-4853 or FAX 260-664-4283 or visit the website at

http://www.trine.edu/academics/academic_resources/academic_support_services/default.cfm