



MT. HOOD
COMMUNITY COLLEGE

Physical Therapist Assistant Program

STUDENT HANDBOOK

Graduating Class of 2019

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INTRODUCTION

The Mt. Hood Community College Physical Therapist Assistant Program began in 1968 and graduated its first class in June 1970. It is a two-year, eight-quarter program that admits twenty-four students each summer. Typically, 20-22 students from each cohort complete the program academic requirements and are awarded an Associate of Applied Science (AAS) degree. Graduates are educationally and clinically prepared to accept an entry-level PTA position, and are eligible to take the national PTA licensure exam. Licensure is required in all states to practice as a physical therapist assistant. MHCC PTA graduates have historically done exceptionally well on the licensing exam, consistently exceeding the national average on scoring and on passing rates. Specific information regarding retention rates, graduation rates, and licensure examination dates can be found on our website at www.mhcc.edu/pta.

PROGRAM ACCREDITATION

The Physical Therapist Assistant Program at Mt. Hood Community College has been continuously accredited by the *Commission on Accreditation in Physical Therapy Education* (CAPTE) since June 1970. The most recent accreditation review was completed in April 2015. Contact information for CAPTE is listed below.

The Commission on Accreditation in Physical Therapy Education
1111 North Fairfax Street
Alexandria, Virginia 22314
Phone: [703-706-3245](tel:703-706-3245)
Website: <http://www.capteonline.org>

PROGRAM FACULTY

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Equal Opportunity: Culture of Respect

Mt. Hood Community College is committed to a safe work environment for all employees and students, which includes zero tolerance from bullying, discrimination, and harassment along with the provision of equal opportunity in education and employment. The College shall comply with all local, state and federal laws related to equal opportunity and affirmative action in its employment practices, services, programs and activities. The College is committed to providing an inclusive environment and equal opportunity to all persons and prohibits all forms of discrimination based on age, gender, race, color, religion, physical or mental disability, national origin, marital status, sexual orientation, pregnancy, veteran's status, familial relationship, expunged juvenile record, or other status or characteristic protected by law, or association with individuals in such protected status or characteristic

Non-discrimination

The College promotes non-discrimination by maintaining a respectful working and learning environment free of all forms of discrimination and harassment. It is against district policy for any manager, supervisor, faculty, staff or student to engage in discrimination of any member of the College community based on race, color, religion, ethnicity, national origin, age, sex, marital status, disability or sexual orientation.

Non-bullying / Non-harassment

The College is committed to maintaining a respectful working and learning environment with a zero tolerance policy regarding all forms of bullying or harassment. It is against district policy for any manager, supervisor, faculty, staff or student to engage in bullying, harassment or discrimination of any member of the College community based on but not limited to race, color, religion, ethnicity, national origin, age, sex, marital status, disability or sexual orientation.

Americans with Disabilities Act (ADA) and Amendments

The College, in compliance with Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990 (ADA), (as amended), and other applicable federal and state regulations that prohibit discrimination on the basis of disability, is committed to maintaining employment practices, services, programs and activities that provide equity and access to qualified individuals with disabilities. The College is committed to ensure that all programs, services, and activities are accessible to people with disabilities, including College programs, services, and activities delivered on-line by the College through third-party vendors. All College applicants, students and employees with disabilities are to be able to independently acquire the same information, engage in the same interactions, and enjoy the same benefits and services within the same timeframe as nondisabled applicants and students, with substantially equivalent ease of use; and are not to be excluded from participation in, denied the benefits of, or otherwise subjected to discrimination in any College programs, services, and activities in person and/or on-line.

Reference: MHCC Board of Education Policy 1100

Approval: 3/8/06

Revised: 4/6/10, 4/13/11, 5/13/15

COLLEGE MISSION

The mission of Mt. Hood Community College is ***Transforming Lives, Building Communities***. The core themes of ***Learner Success, Community Pride, and Partner Innovation*** articulate how the mission is accomplished.

PROGRAM MISSION

The PTA Program prepares students for entry-level employment as licensed physical therapist assistants who provide physical therapy services that reflect contemporary practice standards and respond to the individual differences, values, and needs of citizens in our community.

PROGRAM GOALS

The goals of the PTA Program are to:

- Partner with members of the clinical community to ensure that the curriculum is current, comprehensive, and meets workforce needs for entry-level PTAs.
- Provide an inclusive learning environment that supports the needs of individual students from a variety of educational and cultural backgrounds and results in graduation, licensure, and employment as entry-level PTAs.
- Provide students with a foundation for values-based behaviors and standards of ethical conduct expected of physical therapist assistants.

PROGRAM PHILOSOPHY

PTA program faculty strive to employ the highest standards of teaching and learning to guide students toward entry-level employment as licensed PTAs. We collaborate with physical therapy professionals in our community to ensure that our curriculum is relevant, comprehensive, and consistent with contemporary best practice standards. We foster students' ability to think critically and solve clinical problems, model professional values and ethical conduct, and expect our students' behavior to reflect the same. We embrace cultural competence as a necessary skill to ensure best practice by responding to individual and cultural considerations, needs, and values. We believe it is our responsibility to develop graduates who are advocates for individual patients, vulnerable populations, and the physical therapy profession.

STUDENT LEARNING OUTCOMES

A graduate of the Physical Therapist Assistant Program will demonstrate the following knowledge, skill, and behavior consistently and independently under the general supervision of a Physical Therapist:

1. Conduct an effective physical therapy plan of care review with general supervision of a physical therapist.
2. Use data collection methods to inform clinical decisions with general supervision of physical therapist.
3. Perform physical therapy interventions according to the plan of care with general supervision of physical therapist.
4. Demonstrate effective communication with clients, other members of the healthcare team, and the public while functioning under general supervision of the physical therapist.
5. Provide effective patient education.
6. Complete documentation in patient medical record.
7. Manage a full patient caseload equivalent to what is expected of a new graduate.
8. Demonstrate a commitment to professional values and ethics as articulated by core documents and guiding principles advocated by American Physical Therapy Association.

EMPLOYMENT OUTCOME STATEMENT

The job market for PTs and PTAs has historically been strong and graduates in the MHCC PTA class are often actively recruited even prior to graduation. Based on data from the American Physical Therapy Association and the State of Oregon, the job outlook should continue to be strong for the country and for this area.

The MHCC PTA Program maintains a job website for MHCC students and graduates. We hope that this site will serve as a useful way to exchange information about current PTA jobs, particularly when students are off campus. The site is updated on a regular basis, as new job information is received.

Go to:

MHCC home page: www.mhcc.edu/PTA

Find site titled "After Graduation"

Locate "job listings"

Other helpful sites to check for jobs are:

<http://www.opta.org>

www.Craigslist.com

www.monster.com

SALARIES

Based on information from the Bureau of Labor Statistics, the OPTA Salary Survey, and feedback from the Class of 2015, the range of salaries for entry-level PTAs in Oregon is \$22.00-\$28.00/ hour. This figure does not include the value of benefits.

DESCRIPTION OF PTA CURRICULUM

Upon graduation a student will have successfully completed a minimum of 106 credit hours.

- **“Successful completion” is defined as a “C” or higher in all PTA and general education courses required for completion of the PTA Program**
- Students are permitted **a maximum of two attempts in any one course** to achieve a “C” or better grade. The two attempts include failures, withdrawals, audits and P/NP or S/U grades.

The Associate of Applied Science Degree in Physical Therapist Assistant (PTA) includes 78 credits of technical education and 28 credits in general studies for a total of 106 credits.

The following is a description of the **PTA technical courses** in the curriculum:

Fall term, 1 st year:	PTA 105 PTA 101 PTA 101L PTA121	- Introduction to Physical Therapy - PT Interventions 1 - PT Interventions 1 Lab -Clinical Kinesiology
Winter term, 1st year:	PTA 106 PTA 102 PTA 102L PTA122	- Contemporary Issues in PT - PT Interventions 2 - PT Interventions 2 Lab -Manual Techniques
Spring term, 1 st year:	PTA 107 PTA 103 PTA 103L PTA123	- Intro to Clinical Practice - PT Interventions 3 - PT Interventions 3 Lab -Tests and Measures
Summer term, 2 nd year	PTA 251 PTA 261	-Clinical Applications I -Clinical Affiliation I
Fall term, 2nd year:	PTA 201 PTA 201L PTA 262	- PT Interventions 4 - PT Interventions 4 Lab - Clinical Affiliation II
Winter term, 2nd year:	PTA 202 PTA 202L PTA 257	- PT Interventions 5 - PT Interventions 5 Lab - QA and PT Employment
Spring term, 2nd year:	PTA 203 PTA 203L PTA 258 PTA 263	- PT Interventions 6 -PT Interventions 6 Lab -Licensure and Prof Development -Clinical Affiliation III

Each PTA course is taught only once per year and most courses tend to be prerequisites for other courses. The curriculum is designed to provide a foundation of knowledge through the general studies courses. The technical courses provide information specifically relating to physical therapy and each course serves as a building block for other technical courses. Together the general studies and technical courses prepare students for the clinical experience. It is further designed to prepare the PTA to work under the supervision of the physical therapist. A student will gain competency in a subject in the classroom and/or lab before competency in the clinic is expected.

MHCC AAS GENERAL EDUCATION REQUIREMENTS
and
MHCC PTA GENERAL EDUCATION REQUIREMENTS

MHCC requires that students complete a minimum of 13 general education requirements as part of the requirements for an Associate of Applied Science (AAS) Degree. The PTA Program requires that students complete a minimum of 28 general education credits. The additional requirements of the PTA Program reflect coursework judged by the PTA faculty as needed in order for students to meet the Commission on Accreditation of Physical Therapy Education (CAPTE) standards and to be well prepared to succeed as PTAs.

Institutional Requirements

1. 3 credits in Health/Physical Education
2. 3 credits in Communications
3. 4 credits in Mathematics
4. 3 credits in Human Relations
5. Additional PTA degree general education requirements:

General Studies Courses in PTA Curriculum which will satisfy Institutional Requirements

- Any combo of HPE coursework
- WR 121
- MTH 65 or higher
- PSY 201
- BI 121 & BI 122 (8 credits)
- SP115 (3 credits)
- AH 110 Medical Vocabulary (2 credits)

PTA Total General Education Credits: 28
PTA Total Technical Credits: 78

Total credits required for AAS, PTA: 106

PROFESSIONAL BEHAVIOR

WHAT WILL YOU LEARN IN THIS PROGRAM?

The PT Assistant Program curriculum is made up of general education and professional technical courses. The PTA courses have three major components:

1. Knowledge acquisition
2. Skill development
3. Professional behavior.

WHY IS PROFESSIONAL BEHAVIOR IMPORTANT?

It is **one part** of what you must learn to become prepared to successfully enter the workplace. Unlike breathing, professionalism must be learned. It is important because without it you may 1) lose trust and respect of patients and colleagues, 2) become alienated from your clients and colleagues, 3) hurt someone, 4) get sued, 5) get fired, and/or 6) lose your license to practice as a PT Assistant.

Many of you will enter the program having had life experiences, which have taught or given you an understanding of professional behavior. For some of you, this will be more unfamiliar territory. From the first day of classes until the day you graduate, think of every assignment as not just a task to be finished, but as a step towards becoming a successful entry-level PTA. If you take advantage of the opportunities presented to you, you will gain all the knowledge, skills and understanding of professional behavior you will need to be successful.

WHAT IS PROFESSIONAL BEHAVIOR?

For the most part it seems as though professional behavior or conduct are attributes, characteristics or behaviors which fall under the category of common courtesy, respect and common sense. For example, you wouldn't wear a baseball cap (especially backwards) or torn jeans in the clinic. You wouldn't swear or use disrespectful language when speaking to clients, colleagues or other staff. You wouldn't stomp out of the room, slamming the door behind you if you didn't agree with your performance evaluation by your clinical instructor.

Here are some other examples of behaviors, which will help you develop a sense of professionalism, on campus and in the clinic.

1. Displaying self-respect and respect for others including faculty, staff, fellow students and clients (patients)
 - dressing appropriately for the situation
 - using appropriate language
 - addressing people as they choose, i.e., not assuming that everyone wants you to call them by their first name
 - being respectful of each others' personal boundaries; for example, draping appropriately in lab classes

2. Striving to create a positive learning environment for you and fellow students
 - being on time to class
 - being prepared to participate actively in class
 - completing assignments prior to class
 - being adequately rested
 - listening attentively to faculty & fellow students
 - turning off watch alarms and cell phones (unless needed for emergency contacts)
 - clarifying areas of confusion in a timely and appropriate manner in class or during faculty office hours
 - taking responsibility to cover /make-up material you've missed on your own time
3. Striving to project "unconditional positive regard" for clients
 - affirming the person, not necessarily the behavior
 - avoiding actions or language which may be perceived as prejudiced
 - using person "first language," i.e., "person with a knee injury", not "the knee injury in the second booth"
4. Striving to develop the "therapeutic use of self"
 - using clarifying communication
 - treating each "patient" as a person
 - acknowledging and respecting each client's previous experience/expertise
 - establishing and appropriate "professional distance: with clients and clinical staff
 - becoming a role model for clients by demonstrating good posture, body mechanics, and appropriate lifestyle choices regarding exercise, stress management, etc.
5. Developing a commitment to learning by being able to:
 - self-assess, self-correct, and self-direct
 - identify your learning needs
 - continually seek new knowledge and understanding
 - seek new and/or additional sources of information
6. Utilizing constructive feedback by being able to:
 - identify sources of and seek out feedback
 - effectively use feedback for improving personal interaction
 - provide feedback to assist other student learning
 - provide feedback to academic and clinical faculty to improve teaching and learning
7. Developing critical thinking by being able to:
 - question logically
 - identify, generate, and evaluate elements of logical argument
 - recognize and differentiate facts, illusions, assumptions, and hidden assumptions
 - distinguish the relevant from the irrelevant
8. Demonstrating professionalism and responsibility through:
 - exhibiting appropriate professional conduct
 - representing the profession effectively
 - fulfilling commitments
 - being accountable for actions and outcomes

**RIGHTS AND RESPONSIBILITIES
PTA PROGRAM**

RIGHTS

You have the right to...

- be evaluated fairly and objectively

- be treated with dignity and respect
- be treated in a humanistic way
- expect classes to start and end on time

- expect instructors to be prepared
- expect a positive learning experience
- expect a positive learning environment
- expect professional conduct by the faculty
- expect a positive learning attitude
- enjoy the next two years

RESPONSIBILITIES

You have the responsibility to...

- accept critical evaluation
(constructive feedback)
- treat others with dignity and respect
- to treat others humanistically
- be in attendance during the entire class
period
- be prepared for active participation
- contribute to the positive learning experience
- contribute to a positive learning environment
- exhibit appropriate professional conduct
- demonstrate learning attitude
- maintain a sense of humor

CITING SOURCES

Students should follow the official *Publication Manual of the American Psychological Association (6th ed.)* to format written assignments, cite sources, and list references. This manual is most commonly referred to as the "APA manual." The MHCC Library website has links to electronic sources that provide examples for APA citation style at <http://libguides.mhcc.edu/citation/apastyle>.

LICENSURE

To work in Oregon and many other states, a PT Assistant must be licensed. To be eligible to apply for licensure by examination in Oregon, one must :

1. be at least 18 years of age
2. complete all necessary requirements for graduation
3. obtain the signature of the Program Director and the MHCC school seal on the Certificate of Professional Education
4. complete and submit the following to the Oregon Physical Therapy Licensing (OPTLB) :
 - the OPTLB application form, which requires a photo, signature and seal of a notary
 - a check for the non-refundable application fee, made out to the "Physical Therapist Licensing Board"
 - the OPTLB's jurisprudence exam (must be passed with a score of 100%)
 - **VIA THE INTERNET:** the Federation of State of Physical Therapy's (FSBPT) application form and payment. (Note: the FSBPT does not accept personal checks.)
5. upon receipt of the Letter of Authorization from the FSBPT, take and pass the examination. Exams are administered at Prometric Testing Centers. An additional fee must be paid to the testing center.

The actual exam consists of 150 + 50 multiple-choice questions. Your exam score is based on 150 out of the 200 questions administered. The other 50 questions are used by the testing service to determine the passing score on the exam. These questions are for a statistical reference only and have no bearing on your individual exam score. The time allowed for completion of the exam is 4 hours. Content outlines are provided in the Candidate Handbook available on the FSBPT website (www.fsbpt.org)

- Temporary licenses are available in Oregon. You must (1) complete all requirements for graduation from the PTA Program (2) provide a signed Certificate of Education, signed by the PTA Program Director (3) apply to take the licensing exam before you can apply for Temporary Licensure and pay a fee. You do not need to have a job before you apply.

COMPREHENSIVE EXAMINATION

To assist in preparing for the PTA Licensing Exam after graduation, students are encouraged to complete a computer-based comprehensive exam. While there is no way of actually knowing how accurately this "mock board exam" reflects the actual licensing exam, past graduates have found it extremely useful in identifying their areas of content strength and weakness. This information may then be used to help organize review for the actual licensing exam. See the Physical Therapist Assistant Examination Content Outline at <http://www.fsbpt.org/download/CandidateHandbook.pdf>

DEMONSTRATION OF COMPETENCY

Policy: Program faculty determine that students are competent and safe to progress through the curriculum, including the clinical education component. (CAPTE Accreditation Handbook, Criteria 3.2.6)

Procedure:

1. DEMONSTRATION OF ACADEMIC (COGNITIVE DOMAIN) COMPETENCY:

In preparation for safe and effective clinical practice, students must demonstrate academic competency in all areas of the curriculum by earning 70% or better on all content. Students who do not succeed in earning a 70% or better on mid-term exams on the first attempt must do the following:

- Complete an exam analysis worksheet as per the direction of the course instructor
- Meet with the instructor to discuss the findings and strategies for future success.
- Instructor will choose appropriate activity(s) for remediation, and will instruct you in activity(s) in a timely manner following the above discussion.
- The above must be completed to the satisfaction of the course instructor within 10 days of receiving test score.
- Failure to follow through with the above steps will be grounds for failing the course.
- Upon completion of the above actions, the original test score will stand.

Students who fail all exams will fail the course, regardless of additional points earned on quizzes, homework, etc.

2. DEMONSTRATION OF SKILL (PSYCHOMOTOR) COMPETENCY:

Students are required to demonstrate minimum competencies on selected skills, prior to performing these skills in the clinic.

- Lab instructors may assign a fellow student to role-play as a patient, may let you choose your checkout partner, or may bring in members of the community or ask that you bring in a community volunteer to role-play as your patient.
- Checkouts may be required to be video recorded. Students must make a device available for instructor review upon request.
- Each lab checkout must be performed with a minimum competency in order to pass the course. If any major component of the checkout (patient safety, professional behavior and communication, etc) is of concern, you will not pass a checkout. **All checkouts must be successfully passed in order to receive a passing score for the course.**
 - Students must obtain a passing score (70% or more) on EACH checkout in order to pass the course.
 - If a student fails to pass a checkout on the first attempt, s/he is **guaranteed ONE** opportunity to repeat it. The best score possible on the second attempt will be **70%**.
 - Further opportunities to pass the checkout will be granted at the **instructor's discretion** and will involve a plan of remediation agreed upon by the student, the course instructor and the Program Director. Maximum score on a third attempt will be 70%. Consideration for granting a second re-take (third attempt) should include the student's request for another attempt, improvement from attempt #1 to attempt # 2 that demonstrates additional effort and increased skill/understanding/competency on the part of the student.
 - It is the student's responsibility to schedule remediation activities with the instructor.
 - Remediation must be scheduled within one week of the failed checkout.

- Failure to pass the checkout after 3 attempts will result in the student failing the course.

Students who fail all checkouts on first attempt will fail the course, regardless of additional points earned on quizzes, homework, etc.

3. DEMONSTRATION OF COMPETENCY DURING CLINICAL AFFILIATIONS (COGNITIVE, PSYCHOMOTOR & AFFECTIVE):

The primary focus of any clinical experience must be, first and foremost, patient safety. If there is reasonable cause to question a student's ability to provide safe patient care, the student may not be allowed in the clinical setting. If such concern arises after the student has begun the clinical experience, s/he may be removed from the clinical setting. No student will receive a passing grade for the clinical experience if patient safety is a concern.

The clinical experience is designed to facilitate your successful transition from the classroom to clinical practice. As an important part of this process, your clinical instructor (CI) will make two written evaluations of your performance. The midterm evaluation should take place approximately half-way through the clinical affiliation and is usually an excellent time for you and your CI to clarify expectations, to update each other on progress towards initial goals and to strategize how to make the rest of the affiliation optimally enhance your learning. The midterm evaluation should reflect your progress up to the point of the evaluation. Don't be surprised if you find you still need help meeting some of the competencies. After all, you need something to work on the second half of the affiliation! On the other hand, areas that are pointed out to you as being deficient are areas to specifically focus on, in order to assure that you meet all competencies by the end of the affiliation.

The final evaluation is based upon your performance during the entire clinical, with special emphasis on performance from the midterm evaluation to the final. It should reflect your growth as a clinician from the beginning to the end of the clinical.

Regardless of any other factors, if any part of your performance gives concern for patient safety and/or professional misconduct, the academic instructor reserves the right to require remediation or to assign an "F" grade.

The grade for the clinical affiliation course will be assigned by the academic instructor. The grade will be based upon:

- the clinical instructor's evaluation
- discussion between the clinical instructor and the academic instructor
- discussion between the student and the academic instructor
- other academic assignments.

The academic instructor reserves the right to adjust the clinical evaluation based upon discussion with all parties involved.

If the student is not making satisfactory progress in clinic, the academic instructor (ACCE), after discussions with the student and clinical instructor (CI), may recommend the following:

- a. the clinical affiliation will be extended for a set period of time.
- b. the clinical affiliation will be repeated in a different facility.
- c. the clinical affiliation will be terminated

ASSIGNMENT OF GRADES

Policy:

All courses required for graduation from the PTA Program must be completed with a grade of "C" or better. In other words, the grade options for these courses that will meet the course requirement for graduation are A, B, and C.

A grade of "D" will not be an option, as the intent of the professional courses in the PTA curriculum is to establish a minimum acceptable competency level in physical therapy skills and knowledge.

Procedure:

All PTA classes will be graded based on rubrics and/or information provided as established by the course faculty.

Grading of written assignments will be based upon:

- clarity of content
- accuracy of content
- thoroughness of assignment
- completeness of assignment
- neat and readable presentation
- absence of spelling errors, use proper grammar and punctuation
- use of "person first" and non-stereotyping language

All letter graded assignment and course grades in courses with PTA prefix will be based on the following scale:

- A = 90-100 %
- B = 80-89 %
- C = 70-79 %
- F = less than 70%

The use of a percentage scale vs. grading on the curve is consistent with a competency-based philosophy of education. It also, hopefully, will assist in establishing an atmosphere of cooperation vs. competition among students.

RE-SCHEDULING OF EXAMINATIONS AND ASSIGNMENTS

Policy:

It is up to instructor discretion as to whether exams and quizzes can be made up, and if assignments will be accepted after the due date. Loss of points may be a consequence.

All exams and quizzes must be made up within one calendar week of the original date administered. Exceptions to this must have instructor approval. It is the student's responsibility to make arrangements with the instructor for the make-up testing.

All assignments are due **in class** on the day they are due unless stated otherwise by the instructor.

Procedure:

1. As soon as a student is aware of the need to take an examination at a time other than the scheduled date and time, contact the course instructor ASAP.
2. As above, course instructor has final say over whether this is an option.
3. All early or make-up examinations will be taken at the Testing Center during available testing hours unless the course instructor makes other arrangements. It is the responsibility of the student to determine open testing hours in making arrangements with the instructor.

CHALLENGE OF A TEST ANSWER

Policy:

If a student feels that a scored test item is incorrect, the student may request to have an answer re-evaluated.

Procedure:

1. Your request for an exam review, together with comments supporting your answer, **MUST** be in writing. You must also site your source and provide a copy of the page. Deliver these to the instructor's mailbox located in the reception area of the Allied Health Division. The instructor will not respond to verbal comments at this time.
 - For issues regarding specific answers, the instructor will regrade the entire exam, taking into consideration your comments. The instructor is as lenient as possible at the time to the original scoring, therefore, you will need to extremely strong justification of change your score to a higher value. Please note that regrading your entire exam could result in a lower score.
2. Your comments will be returned with the instructor's comments as to why your score did or did not change.
3. If you are still not satisfied, you can arrange a time with the instructor to discuss the question(s). Be prepared to back up your statements with suitable references.
4. The faculty expects professional students to be able to write and speak clearly and accurately. Therefore, excuses such as the following will be unacceptable: What I meant to write/say..., What I wrote/said really means..., I didn't know spelling was important....

The purpose of this policy is to eliminate frivolous arguing for points. If you are confident that your answer is correct do not let this policy intimidate you. If you only need clarification as to what the correct answer is, just ask, you do not have to use the above procedure.

PROGRESSION IN THE PROGRAM

Policy:

Progression in the PTA program is dependent on successful completion of courses in the required sequence with required pre-requisites and co-requisites. The goal of your education in the MHCC PTA Program is to help you develop the knowledge, skills, problem-solving abilities, professional judgment, ethical base and compassion you will need to provide quality health care as a PTA, and do so in a timely manner in which to best assimilate this body of knowledge.

All PTA coursework required for graduation must be completed within 3 years of successful completion of PTA105.

Procedure:

If you do not achieve a "C" or an "S" in any course required for graduation from the PTA Program, progress in the program may be halted. **You should consult with your advisor as soon as you become aware that you are having significant difficulty in a class.** Failure to achieve a "C" or better, or an "S" grade on the second attempt of any course will result in dismissal from the PTA Program.

Failure (not earning a minimum of a "C" grade as defined above) of any course required for graduation from the PTA Program will result in one of the following possible actions:

- (1) dismissal from the program
- (2) retaking the course
- (3) retaking the class with program remediation

Remediation may include, but not be limited to, such activities as:

- (1) completion of a study skills class
- (2) being tested for a learning disability
- (3) counseling, to address issues affecting student's academic difficulties
- (4) proving competency of skills and/or knowledge in courses already successfully completed to date in the program prior to return.

PETITION FOR LEAVE OF ABSENCE

Policy:

It is a program expectation that a student complete the program in 2 years, ideally 7 consecutive terms. If this is not possible, the student needs to contact his/her program advisory immediately regarding this issue.

Procedure:

1. Student meets with program advisor.
2. Program Director and faculty review the student's scholastic record and make a recommendation to PD re: granting permission to continue in program beyond the 2-year period.
3. PD meets with student to share recommendation.
4. If student is granted permission to continue, a plan of action will be drawn up which may include remediation (see Progression in the Program policy)
5. Student and PD will complete Leave of Absence paperwork.
6. Students must submit, in writing, their intention to return. This must be received by the Program Director in the term prior to the intended date of return and must include a description of how s/he has resolved any issues or problems identified on the petition. Readmission to the Program is dependent on completion of any conditions agreed to in the revised plan and on availability of student positions

DISMISSAL FROM THE PROGRAM

Policy:

A student can be dismissed from the Physical Therapist Assistant Program for ONE OR MORE of the following reasons:

1. Failure to meet specific course objectives:
 - Receiving a grade of less than a "C" in any PT Assistant program curriculum course or failing to pass any course required for graduation from the PTA Program with a "C" or higher grade in a maximum of 2 attempts. (See "Progression in the PTA Curriculum").
 - See "Progression in the PTA Curriculum" in the PTA Student Handbook for the policies and procedures that should be followed if this occurs.
2. Failure to meet clinical attendance requirements.
 - See "Progression in the PTA Curriculum" in the PTA Student Handbook for the policies and procedures that should be followed if this occurs.
3. Demonstration of a lack of personal integrity, personal ethics, or professional behavior on campus and/or in the clinical facility.

Examples:

Insubordination

- Ignoring assignments, missing due dates
- Frequent absence and or tardiness
- Failure to comply with clinical affiliation requirements
- Disregarding requests of academic/clinical faculty regarding activities in educational setting.

Unacceptable/ Unethical Behavior

- Inappropriate contact with faculty/staff
- Conversation at academic/clinical facility not professional
- Rude/disrespectful to faculty/staff
- Breach of confidentiality
- Plagiarism
- Cheating on quizzes/exams/assignments
- Professional misconduct

Unsafe Practices

- Patient safety ignored
- Personal safety ignored
- Failure to follow OSHA requirements

4. Failure to successfully complete a plan of remediation if placed on leave of absence or professional probation. (See Professional Probation Policy in Student Policy Section)
5. Noncompliance with college and clinical facility policy. (See MHCC Catalog, PTA Student Handbook, and Clinical Facility Policy/Procedure Manual).
6. Noncompliance with college policy on substance abuse. (See Term Schedule section referring to Alcohol & Drug Policy)

Procedure:

Depending on specific circumstances, PD will inform student of dismissal from the program.

DISABILITY ACCOMMODATION POLICY

Policy:

Students in the PTA Program must be physically and mentally able to cope with the rigors of the curriculum and demanding nature of the field of physical therapy. Established academic and clinical requirements essential to the program of instruction apply to all students and cannot be waived. Attempts will be made to accommodate and retain qualified applicants with disabilities unless results of evaluations indicate that given reasonable accommodation an individual will not be able to perform the essential functions required by the program and profession.

It is the student's responsibility to make known any disability in which accommodation in class or testing is being requested. Verification of all disabilities must be made by the Disabilities Services Office.

Procedure:

1. Identify disability through self-disclosure (student)
 - verified by Elizabeth Johnson, Director of Disability Services
2. Identify problems associated with disability
 - student, E. Johnson or faculty
 - focus is on functional problems, not so much the medical problems
3. Determine specific accommodation needs of student as clearly as possible.
 - in academic setting (lecture and lab)
 - in clinical setting
4. Accommodation agreed upon by program faculty
5. Periodic meetings for updates, follow-ups, changes, etc. as needed

ASSIGNMENT OF PROGRAM ADVISOR

Policy:

Each student will be assigned to a faculty advisor. As the name implies, your advisor will provide you with advice regarding course scheduling and your progress through the program. It is recommended that students meet with their advisor once per year in order to complete the necessary forms, and discuss academic progress and standing in PTA and general study courses.

It is important to inform your advisor and/or Program Director of situations which impact your ability to participate fully and effectively in the program. If you feel you could benefit from counseling services beyond the scope of academic advising, your advisor may be able to assist you with a referral to the Academic Advising and Transfer Center.

Each student has the right to have access to all departmental records that pertain to the student. Your assigned advisor keeps advising transcripts. Other student records, such as information provided in the applicant packet, final clinical affiliation evaluations, and immunizations and CPR records are kept in the Program Director's office or the Allied Health Division office.

Procedure:

1. Each student will be assigned a program advisor at orientation.
2. Students will be required to meet with his/her advisor once each year, typically spring term of the first year and winter term of the second year. Program advisors will facilitate the scheduling of these meetings.
3. Students can schedule meetings with their advisor at any time to discuss any issues pertinent to progression in the PTA program.

ATTENDANCE POLICY

Policy:

Overview

The quality of your educational experience in the PTA program at MHCC depends to a large extent on your active participation. Missing classes, arriving late, or leaving early are all behaviors that will impact your opportunity and those of your fellow students, to learn and may ultimately affect your grade or result in your being placed on Professional Probation.

Lecture:

Generally speaking, attendance **is expected**. Due to the large amount of material covered, all of which is not in the book, it would be extremely difficult to do well without consistent attendance. It is the student's responsibility to obtain all information and handouts given in class. **Excessive absence, repeated tardiness, or frequent early departure are considered unprofessional behavior and may lead to a student being placed on Professional Probation.** (See Professional Probation in Student Policies Section). If you need documentation of attendance for financial aid, scholarship or Veterans benefits purposes please notify the instructor at the beginning of the term.

Lab:

Your attendance and participation in lab are very important in establishing a good learning environment for yourself **and** your fellow students. **You are responsible for calling or notifying the lab instructor prior to your being absent.**

It is your responsibility to let the lab instructor know if you arrive late or you have to leave early. If you need documentation of attendance for financial aid purposes, please notify the lab instructor at the beginning of the term.

Clinic:

Clinic attendance is required during all scheduled times. Students will be allowed one missed day during a clinical rotation, and need to notify both the school and the clinic (see procedure below) **Do not attend clinic if you have a fever greater than 100**

If you are unable to attend, call the clinical and academic instructors within the first 1/2 hour of starting time (or earlier). Make-up of missed clinic time beyond one day will be at the ACCE's discretion, based on discussion with the clinical instructor.

If you are going to be late, call clinic as soon as safely able, then notify academic contact once you've arrived at clinic.

Procedure:

1. Course faculty will monitor adherence to attendance policies as outlined above. Is an issue with attendance occurs the course faculty will discuss with student, documents the conversation and the PD will be notified.
2. If attendance or tardiness is a recurrent issue after conversation with course faculty, the issue will be addressed with PD and student with follow-up as indicated, up to and including being placed on professional probation.

CODE OF CONDUCT

Policy:

Many, if not most, situations in physical therapy practice require a high degree of personal integrity. In many instances, patient assessments and implementation of therapy are solely dependent upon the PTA. Not infrequently, patients will share important confidences - privileged information - with you as you are working with them. There will be times when you will need to decide whether or not you and/or your colleagues are delivering patient care in a safe and ethical manner. It is our intent in the MHCC PTA Program to facilitate and support your development as a professional with high ethical standards of conduct.

Lying, concealment, plagiarism, misrepresentation, cheating, forgery, or like behaviors demonstrate a lack of integrity. Therefore, the above behaviors will not be tolerated in class, laboratory, or clinical settings. (See Guidelines for Student Conduct on College website). Violation of professional integrity will have serious consequences and may result in failure of the class and/or dismissal from the PTA Program.

Procedure:

Depending on the specific incident, appropriate action will be initiated by program faculty or the Program Director.

DRESS CODE

Policy:

ON CAMPUS: The goal is to provide a positive learning environment for all students. Clothing that is suggestive or revealing (bare midriffs, etc.) is inappropriate to the lecture/classroom setting; as is any clothing with crude logos, liquor advertisements, etc. Visible body piercing should be limited to not more than 2 earrings per ear. When guest speakers present to the class, students are asked to dress in “business casual”.

You are expected to dress in appropriate lab clothes **prior to the start of each lab class.** During the lab you will take turns with a classmate serving as the clinician and then the patient. While functioning as the patient, students are expected to be suitably undressed in select areas of the body so that their lab partner can observe and palpate the skin in these body regions. While serving as the clinician, you will be asked to palpate selected superficial anatomical structures of the head, neck, trunk and extremities.

Dress code while acting as the clinician would be shirts with conservative neck and waist lines in order to make sure that you are not exposing clefts or cleavage when bending over, kneeling down, or reaching across people. When practicing as a clinician, low-rise shoes with a non-slip sole are required.

Dress code while acting as the patient will need to be appropriate to the activity or the study of the day. Some days this will be shorts and t-shirts, other days may mean bare chests for men and a sports bra for women. At other times, students will be asked to unclothe select body areas under the cover of a hospital gown. These select body areas will need to be exposed, but clinician will apply appropriate draping for modesty for the duration of that activity. In all cases, sweatpants and sweatshirts may be worn over the top of required clothes during lab until such time that they need to be quickly and easily removed.

IN CLINIC: Students are asked to comply with the dress code of the clinic in which they are placed. This will include a lab jacket in some settings. These guidelines were taken from area hospital & clinical dress codes. These requirements are consistent with current professional standards:

- **The student MUST wear a nametag while in clinic.**
- Street clothes should be appropriate to a professional appearance. (Think “business casual”.)
- Denim jeans of any color, low-rise pants, tank tops, mini-skirts, sundresses, sweatshirts, and tee shirts are not appropriate (except with a PT logo during PT month, etc.)
- Necklines need to be conservative. Remember, you are going to be bending over people, kneeling or squatting in front of them as you perform treatments, adjust wheelchairs, etc. *Check yourself in the mirror before you leave the house!*
- All clothing must be clean, ironed, and well mended.
- Shoes need to be comfortable and functional. **If** sport shoes are OK at your clinical site, they should be clean and in good condition. Open-toed sandals are not acceptable at most facilities.
- Socks should be worn.
- Jewelry, especially rings should be kept to a minimum. Avoid dangling earrings, necklaces that could get caught in equipment when you lean down, etc.

- Visible body piercing should be limited to no more than 2 piercings per ear. Nose rings, lip, tongue, eyebrow piercings, etc. should not be worn in clinic.
- Tattoos should be concealed by clothing if possible.
- Fingernails should be short, clean, and preferably, without polish. Artificial nails should not be worn in clinic.
- Hair, sideburns, mustaches &/or beards should be clean & well trimmed.
- Long hair should be pulled back.
- Because any odor can be noxious to individuals who are ill, perfume and cologne should be kept to a minimum.
- Avoid chewing gum while in clinic.

Procedure:

Depending on specific incident, appropriate action will be initiated by program faculty or the Program Director.

PROFESSIONAL PROBATION

Policy:

A consequence of unprofessional behavior is professional probation. The program faculty places great importance in students being able to demonstrate not only successful academic achievement, but professionalism as well. To this end, students will be expected to maintain a satisfactory level of both. Any student demonstrating unprofessional behavior, as defined by the program faculty, may be placed on professional probation. The faculty views this action as a serious attempt to assist the student in successfully completing the program.

If an offense is considered extremely serious by the faculty, the student may be placed on professional probation after the first offense. (See Dismissal from Program Policy in Academic Policies Section)

If a student receives a failing grade in a clinical based on issues relating to professional behavior, they will automatically be placed on Professional Probation. The CPI will serve as the written documentation/notification. Professional behavior expectations described in the PTA Student Handbook and the APTA Clinical Performance Instrument will serve as criteria. Additional criteria will be written, as needed

If the student does not agree to a plan of remediation, the student will be asked to leave the program.

Procedure:

1. Program faculty observes or is informed of an unprofessional behavior.
2. Faculty will request a private meeting with student to discuss the breach of professional behavior and document this meeting. Student is reminded of the possibility of further issue leading to professional probation or dismissal. Student is given the opportunity to respond to concerns.
3. If behavior persists, Program Director, and other staff as needed, meet with student and place student on professional behavior with a plan for remediation. This plan of remediation will be discussed and agreed to by the PD and the student. This plan of remediation includes a summary of action if remediation is successful, and the consequences of failure of remediation.
4. If the student is unable to successfully carry out the plan of remediation, the student will be dismissed from the program.
5. This action is subject to review if extenuating circumstances exist. The student may appeal this decision through the Committee on Student Conduct.

PROGRAM RELEASE FORMS

Policy:

The program will secure, and then maintain release forms for each student, necessary for PTA program operation. These forms will include, but not be limited to:

- Confidentiality
- Consent for Photography, audio and video recording
- Consent to Treat
- Emergency Contact Information
- Honor Code
- Information Verification
- Release of Contact Information to fellow PTA students and faculty
- Use of Student ID number
- Use of Student Mailboxes
- Student Request for Scholarship/Employment Reference
- MHCC General Liability Release Form
- Release of Student Information to Clinical Education Facilities
- Consent to Drug/Alcohol Testing and Criminal Background Check

Procedure:

Program release forms will be provided to students to review and sign when appropriate throughout the program.

Signed release forms will be kept with student files in a secure location in the Program Director's office or with the Educational Administrative Assistant secure files and stored per College Policy beyond a student's graduation from the program.

SOCIAL MEDIA

Policy:

The PTA program recognizes that social media is a commonly used medium used by today's college students. The Program has no control over what students do with non-instructional materials (pictures, videos) outside of the program. Furthermore, the program is not responsible for any images posted on social media websites.

Faculty have the right to make the choice regarding granting permission for students to take video or pictures of instructional activities in their classrooms or labs. Individual faculty will generally make their class policies known in specific course syllabi.

Instructional materials or activities are the intellectual property of the course faculty and thus subject to certain legal protections under the law.

Procedure:

Students are notified of this policy via inclusion in the student handbook which is made available at the time they start the program.

Any student found to be in violation of faculty wishes re: permission to post course materials will be subject to procedures re: breach of professional behavior (see program policies regarding professional probation) and possible legal action taken by faculty in regards to intellectual property rights.

LAB USE FOR INDEPENDENT STUDY

Policy:

Students may have access to the PT lab and equipment for independent study and practice 7 days a week, 6:00 am – 11:30 pm under the following conditions:

1. **It does not interfere with other scheduled activities in the lab.**
2. No equipment may be turned on or used unless the student has been instructed in proper use of the equipment by a course instructor.
3. Equipment should **only be used on MHCC PTA students** who have given you permission to proceed with practice/mock treatment.
4. All equipment is returned to its proper place and the lab is left clean, computer turned off.
5. **All doors are locked upon leaving.**
6. **Any equipment damage must be reported to the instructor or program director immediately.**
7. If a student has a known medical problem that may endanger themselves or others, they will be asked to have two other students, or individuals authorized by the program director, to be present in lab during evenings and weekends.
8. MHCC will be closed 5 holidays during the academic year, and the lab cannot be accessed on those days. See syllabi for closures in any given term.

Procedure:

1. During evenings and weekends you must call Security to unlock the lab. (503-491-7310)
Only individuals who are currently enrolled in the PTA program will be granted admission.
2. **IN CASE OF AN EMERGENCY, CALL SECURITY:**
DIAL 7911 ON A CAMPUS PHONE or use cell phone and call 503-491-7310

LAB COMPUTER USE

Policy:

A networked computer will be available to PTA students in the PTA lab. This computer is primarily for use in instruction, class-related research, and assignments.

1. **NO FOOD ON THE COMPUTER DESK!**

2. **There is no privacy** – your computer lab activity can and will be monitored both locally and remotely, and content is limited to that which is deemed appropriate by program faculty.

3. Use of the computer is on a priority basis:
First priority:
 - Programs only available on this computer (e.g., computerized exercise program, anatomy CD-ROMs)
 - MHCC assignments

Second priority:

- Personal use during class breaks or outside of class time.

NOTE: There are computers available for Internet access and word processing at the MHCC LRC and in various computer labs across campus.

4. No files can be stored on the hard drive of this computer; students must provide their own flash drives.

5. Students must provide their own paper for printing.

6. Notify a PTA faculty member if the printer is out of ink.

Procedure:

1. Be sure and follow the proper procedures for shutting down the computer programs that you have been using and for shutting down the computer before you turn off the power.
 - To shut down the computer follow this sequence:
 - Click on the start button; select "shut down", select "yes".
 - The CPU will be automatically turned off as part of the "shut down" sequence.
 - Turn off the printer and monitor.

2. Report any problems to PTA faculty as soon as possible.

LAB MAINTENANCE AND SAFETY/FOOD AND DRINK POLICY

Policy:

Students and faculty will work toward the maintenance and safety of the PTA lab. This includes maintaining safe practice in dealing with body substances and hazardous materials, ensuring equipment in good working order, safety in working with students and others in simulated experiences.

The PTA lab should be maintained according to standards practiced in the clinical setting.

- **Equipment:** equipment is checked by faculty for proper working order prior to introduction to students in instruction. All electrical equipment is inspected and calibrated annually.
- **Lab Duty:** as outlined in lab syllabi, students will rotate the position of “lab cop.” This duty includes, but is not limited to seeing that the lab is left in order and that certain “housekeeping” chores are completed. The specifics will be reviewed in lab. Assigned days for lab duty will be posted on the bulletin board in lab.
- **Food and Drink:** allowed in the lab. **This is a privilege**, as food and drink are NOT allowed in other classrooms on campus. Please limit your consumption of food and drink to designated breaks, and place lids on all drinks. Drinks should not be placed under treatment tables, as this frequently leads to spills.
- **Laundry:** it is the responsibility of **all** of the 1st year PTA students to be sure that all dirty laundry is washed and that all clean laundry is folded and put in the appropriately marked cupboard in the men’s locker room.
- **Floor Cleaning:** it is the responsibility of **all** of the 2nd year students to be sure that the floors are regularly swept and wet-mopped when needed. Faculty will keep needed floor cleaning supplies in back hallway, and students are to let a faculty member know when new supplies are needed.
- **No shoes on the mats or treatment tables!!!!**

Procedure:

- A designated faculty member will schedule the annual inspection and calibration of program equipment with a qualified vendor.
- All students participate in an orientation to lab which includes general safety procedures, the location of the lab First Aid kit, and the information regarding hazardous materials.
- If you are the last person to leave the lab, please be sure that all interior doors are shut **and locked** and that overhead lights are turned off. **Turn off the computer**

- If you arrive and the lab is not yet opened, you can sign out a key from the Allied Health support staff. Once inside the lab, there are interior keys in the cupboard to open the locker rooms and storage room.

- **Laundry:**

- Key for laundry area is above sink in PTA lab, and washer and dryer are located downstairs in AC1771 (inside AC1772)
- As necessitated by volume, students will move dirty laundry down to washer.
- Students will run washer and dryer per instructions on machine:

Washer

Cycle:	normal/casual
Temp:	warm/cold
Spin speed:	fast
Soil level:	normal

Leave door open when laundry has been removed!

Dryer

Cycle:	normal
Temp:	medium

Clean lint trap after each load.

- Laundry is to be managed outside of class time, before or after class, or on breaks.
- Because multiple students will be taking on the responsibility of laundry in the same day, students may leave messages to each other regarding the status of laundry in washer/dryer on the wipe board provided for this use.
- Students will notify PTA faculty as soon as possible when more laundry detergent is needed, if there are any issues with the function of the washer/dryer, or if there are any issues with the completion of this task.

CRITERIA FOR CLINICAL FACILITY AND STAFF

Policy:

The following is a listing of criteria of factors considered generally desirable for a facility providing clinical education. These are used as a **guide** and not as an absolute, and are designed to provide the student with a good learning experience.

STAFF:

1. PTs and PTAs are currently licensed to practice physical therapy in the State in which the facility is located. If the state does not require licensure, the PTA must be the graduate of an accredited PTA program.
2. Current member of the APTA. (desirable)
3. At least two PTs and/or PTAs in the facility.
4. CCCE and CI have an interest in teaching students.
5. CCCE is actively involved in the educational process at the facility, i.e., in-service training of other health personnel. (desirable)
6. CCCE or CI is willing to give an evaluation of student's performance at least twice during each affiliation.
7. CCCE or CI is willing to make available to students a variety of experiences and resource materials.
8. CI should have a minimum of at least one year of clinical experience. (desirable)
9. CCCE should have a minimum of two years of clinical experience.
10. CCCE and/or CI is willing to attend the annual Clinical Education Workshop sponsored by MHCC as schedule allows.

FACILITY:

1. Has sufficient space and equipment to foster a good learning situation.
2. Has a case load variety or particular areas of specialization desirable for student learning.
3. Recognizes the needs of students and provides reasonable assurance that students will not be used to substitute for clinical staff.
4. Maintains a signed Clinical Facility Agreement with MHCC.
5. Provides access to emergency services. This does not imply that these services will be provided free of charge.
6. In support of APTA policy, is not a referral-for-profit facility.

Procedure:

The PTA Program ACCE (Academic Coordinator of Clinical Education) will use these criteria as a guideline in selecting, evaluating and maintaining quality clinical education sites for PTA students.

REQUIREMENTS FOR STUDENTS ATTENDING CLINIC

Policy:

In order to insure compliance with contractual agreements with clinical facilities and to protect the safety of students and patients, MHCC PTA Program requires the following prior to attendance in clinic.

1. a TB test (PPD) 2-step or Quantiferon Gold
2. verification of Hepatitis B immunization, immunity (titer) or declination
3. verification of Rubeola immunization (or exemption)
4. verification of immunity or immunization for Varicella (Chicken Pox) by titer.
5. verification of up-to-date immunization (within 10 yrs) for tetanus and diphtheria or verification of Tdap immunization.
6. current CPR card (Professional Rescuer) and AED certification
7. current First Aid Card (First Aid for the Workplace or equivalent)
8. criminal Background Check
9. drug screen
10. annual HIPPA training
11. annual completion of blood-borne pathogens training

Failure to complete or provide proof of the above requirements will prohibit a student from participation in clinical education which can delay graduation or lead to program dismissal.

In addition, some clinics may require:

- Additional drug/substance abuse screening
- Additional Criminal Background check
- Additional orientation training prior to arrival at clinic
- Flu shot

Some of the expense of the above is paid for by the facility, but some is the financial responsibility of the student. The Academic Clinical Coordinator for the program will inform students of these additional requirements as known so that students make a fully informed choice when choosing clinical sites.

Procedure:

Program Director is responsible for providing this information to students in a timely manner so that requirements can be met prior to clinical placement.

It is ultimately the student's responsibility to be sure that these requirements are met and *kept current* throughout the PTA program. (for example, CPR, T-dap)

Student Clinical Selection Process

Policy:

PTA students are given an opportunity to provide input as to the assignment of clinical rotations. Each student is required to complete a rotation in the following 2 types of settings, done in no particular order:

- Out-patient
- Skilled nursing

The 3rd rotation is a repeat in one of the above areas, or an experience such as pediatrics, in-patient rehab, or home health.

For the broadest opportunity for exposure, students are encouraged to select from a variety of organizations (i.e. Providence, Kaiser) and outside of those where they may have worked or done extensive volunteer work.

Clinical assignments are done by the program ACCE.

Procedure:

1. Student wishing out of area clinical site placement are encouraged to meet with program ACCE by the deadline established by the ACCE each year in to facilitate exploration in obtaining clinical contracts as appropriate.
2. Under NO circumstances should a student contact any clinical site directly regarding a possible clinical site contract. All communication regarding clinical site development occurs between the program ACCE and the clinical site.
3. ACCE will provide students information on clinical sites, based on previous student evaluations of sites, and current information provided for each clinic. This information will be housed in the PTA lab for easy student access.
4. Students will submit a written request regarding setting types and preferred geographical location to the ACCE.
5. Program ACCE will make final clinical selections and notify students in a timely manner.

Student Orientation to Clinical Facility

Policy:

PTA students will receive an orientation to each clinical site, generally within the first week of the clinical experience. Some clinical sites provide materials for student review prior to the first day of clinic.

1. Discussion of student goals
2. Performance expectations of student
3. Types of patients served/ specialty treatments
4. Parking
5. Dress code
6. Additional enrichment opportunities (e.g., surgery observation, specialty clinics)
7. Safety Policies
8. Site specific HIPAA procedures
9. Documentation systems
10. Resources (patient handouts, protocols, etc.)

Procedure:

1. ACCE will provide each clinical site with student name and contact information prior to clinical rotation.
2. Some facilities may provide orientation material to students ahead of time, mailed or e-mailed to address indicated in contact information.
3. Some facilities require completion of materials prior to start of clinic. In these cases, the ACCE will facilitate these activities so that student can complete them in a timely manner.
4. The student will get this information back to the facility or ACCE in a timely manner as instructed by the ACCE.

Student Evaluation in Clinical Education

Policy:

Students will be evaluated for competency while in the clinical setting. (See Demonstration of Clinical Competency in Academic Policy A) Students will be formally evaluated at mid-term and at the end of the clinical affiliation, and informally during the clinical as deemed appropriate by the clinical instructor. Students will participate in a self-evaluation as well as evaluation by the clinical instructor.

Procedure:

1. ACCE will provide the CI with the appropriate evaluation tool either prior to or via the student at each clinical affiliation.
2. The student and CI will complete the mid-term evaluation. Due dates and delivery of information to the school will occur as per clinical course syllabus.
3. The student and CI will complete the final evaluation. Due dates and delivery of information to the school will occur as per clinical course syllabus.
4. Any issues which arise during the clinical affiliation will be brought to the attention of the ACCE/academic contact for that student ASAP so that timely resolution can be accomplished. (Again, see the Demonstration of Clinical Competency Policy for more information)

Student Evaluation of Clinical Facility and Clinical Faculty

Policy:

The MHCC PTA Program strives to maintain quality sites and faculty for the clinical education portion of the program. Student feedback is an integral part of the ongoing assessment of sites and clinical faculty.

Procedure:

1. **Clinical facility:** PTA students will complete a clinical facility form for each clinical affiliation attended

This document will be completed and handed in to the school as per clinical syllabus instruction. These documents are reviewed by the ACCE and PD, then housed in the student information tubs in the lab for student review.

2. **Clinical faculty:** PTA students will complete clinical faculty assessments for each primary CI in each clinical rotation.
Students will review the CI evaluation and obtain the signature of the CI prior to turning in this form to the school. Clinicians may request a copy of their evaluation for their personal records.

If a student has more than one primary CI, he/she should make copies of this section and complete one for each clinical instructor.

Exposure to Blood-Borne Pathogens

Policy:

PTA students receive annual training on blood-borne pathogens (BBP) per the requirements of clinical contracts, as well as to protect students and the patients they are in contact with. Students are educated regarding what to do in the event of an exposure to a BBP prior to beginning their first clinical experience.

Procedure:

For current program procedure in the event of an exposure, please see the current MHCC Guidelines. These are located in the MHCC PTA Clinical Education Manual on the PTA program website under Clinical Education.

Incident Reporting

Policy:

PTA students are educated as to the possibility that an incident may occur in clinic that needs to rise to the need for an incident report. These reports are ultimately used for continuous quality improvement by health care organizations to insure that patient and employee safety are maximized.

Procedure:

Students will receive information regarding use of incident reports during orientation in each specific facility, and will comply by the requirements of that facility. If asked to complete an incident report during a clinical rotation, details of that incident need to be reported to the ACCE. Policies regarding copies of actual reports to the school will be based on the policies of that facility. Again, this is done for continuous quality improvement on the part of the program.

If an incident occurs that causes injury to a student, that student will need to notify their campus contact ASAP in order to facilitate documentation with the MHCC incident report form.

Insurance Coverage for Clinical Education

Policy:

The school shall provide worker's compensation insurance for its staff and faculty members while on clinical site to the extent such coverage is required by the State in which the clinical site is located.

The school shall keep in full force professional liability insurance in the amount of \$1,000,000 in the aggregate which shall extend to all activities of clinical education.

Procedure:

The school will collect a fee charged to each student in the first clinical education class which will cover the cost of student's liability insurance while in the program. This insurance will provide coverage only for those activities in clinic which are supervised by licensed personnel and are within the scope of practice of both the student and the clinical instructor, and only activities done within the clinical hours being fulfilled for each term.

CLINICAL APPENDICES

You will need the following information for on-going reference throughout the four clinicals in the MHCC PTA Program

THE CLINICAL EDUCATION PLAYERS

Many individuals are involved in the clinical education, each with different and important roles:

Academic Coordinator of Clinical Education (ACCE)

For the most part, one faculty member of the PTA program carries the primary responsibility for coordinating the clinical portion of the program. As Academic Coordinator of Clinical Education (ACCE) she represents the college, provides the indirect supervision of students in the clinic, and works directly with the Clinical Coordinator of Clinical Education (CCCE). Communication and interaction between the Academic Coordinator and the Clinical Coordinator usually relate to such matters as:

- scheduling dates/slots for clinical affiliations
- number of student to be sent to the facility
- name and status (1st or 2nd year) of each student
- special scheduling (i.e., holidays, atypical arrangements, make-ups)
- plans for action when problems arise regarding student performance
- matters involving the contract agreement
- changes within the clinic affecting the student

Clinical Coordinator of Clinical Education (CCCE)

This individual is usually a physical therapist or physical therapist assistant employed by the individual clinical facility who has two or more years of clinical experience. This individual is responsible for arranging for the clinical learning experiences of the students. This usually involves:

- assigning the student to specific PT/PTA staff who will serve as clinical instructor (CI)
- acquiring the necessary signatures of the contract agreement
- completing the necessary forms needed by the program for accreditation purposes
- communicating with the ACCE as necessary
- arranging for a first-day orientation of the student

Clinical Instructor (CI)

This individual is usually a physical therapist or physical therapist assistant with one or more years of clinical experience. This individual provides the direct supervision and evaluation of students. The CI must be willing to work with students and be willing to develop the appropriate environment for learning in the clinic. Their responsibilities are:

- providing appropriate opportunities for "hands-on" learning
- providing appropriate supervision during patient treatment
- completing a midterm and final written evaluation of the student
- giving frequent feedback to the student on their performance
- insuring that patient treatment and safety are not compromised by student learning
- communicating with the CCCE and ACCE regarding student issues

Student

The student is responsible for taking an active role in directing his/her own learning. Student responsibilities include:

- following facility/school policies regarding dress, conduct, hours
- notifying the CI and ACCE when unable to attend clinic (this includes late arrival and early departure)
- making arrangements with the CI to make-up missed clinic time and notifying the ACCE
- communicating frequently with the CI regarding learning needs in clinic
- performing within the scope of practice as stated in the Oregon Law and Rules and Regulations, and the APTA Guide for Conduct of the Affiliate Member.

EXPECTATIONS FOR FIRST CLINICAL ROTATION (PTA261)

During this **first of three** clinical expectations, the program expectations are that by the **end** of this rotation the student will be **capable of**:

1. Plan of care review: identifying pertinent information within the evaluation with moderate feedback and guidance from CI, and be able to communicate a plan for the day, again with moderate feedback and guidance.
2. Intervention and data collection techniques: performing treatment skills and data collection with moderate feedback and guidance of CI.
3. Communication: communicating effectively with patients during instruction with moderate cueing from the CI, and with the clinical instructor in terms of proactively seeking opportunities and soliciting feedback regarding performance.
4. Ability to progress/regress POC: modifying interventions with moderate guidance and feedback from CI.
5. Documentation: taking double the time of CI and requiring moderate feedback regarding content.
6. Productivity standards: participating/seeing a caseload equivalent to 50% that of the CI.

STUDENT CLINICAL EXPECTATIONS FOR SECOND CLINICAL ROTATION (PTA262)

During this **second of three** clinical expectations, the program expectations are that by the **end** of this rotation the student will be **capable of**:

1. Plan of care review: identifying pertinent information within the evaluation with intermittent feedback and guidance from CI, and be able to communicate a plan for the day, again with intermittent feedback and guidance.
2. Intervention and data collection techniques: performing treatment skills and data collection with intermittent feedback and guidance of CI.
3. Communication: communicating effectively with patients during instruction with occasional cueing from the CI, and with the clinical instructor in terms of proactively seeking learning opportunities and soliciting feedback regarding performance.
4. Ability to progress/regress POC: modifying interventions with intermittent guidance and feedback from CI.
5. Documentation: taking 50% longer than the CI and requiring minimal feedback regarding content.
6. Productivity standards: seeing a caseload equivalent to 75% that of the CI.

STUDENT CLINICAL EXPECTATIONS FOR THIRD CLINICAL ROTATION (PTA263)

During this **third of three** clinical expectations, the program expectations are that by the **end** of this rotation the student will be **capable of**:

1. Plan of care review: identifying pertinent information within the evaluation with little to no feedback and guidance from CI, and be able to communicate a plan for the day independently and consistently.
2. Intervention and data collection techniques: performing treatment skills and data collection independently and consistently. Capable of performing under the general supervision of the supervising PT.
3. Communication: communicating effectively with patients during instruction, with the clinical instructor in terms of proactively seeking learning opportunities and soliciting feedback regarding performance, and with other members of the health care team including the supervising PT.
4. Ability to progress/regress POC: modifying interventions independently and consistently. Capable of this skill under the general supervision of the supervising PT.
5. Documentation: taking the same time as the CI and is consistent with quality and content of documentation.
6. Productivity standards: seeing a caseload equivalent to 75% - 100% that of the CI.