

UNIVERSITY OF CONNECTICUT
DOCTOR OF PHYSICAL THERAPY PROGRAM
Clinical Education Policies and Procedures
Student Manual
2016 - 2017

Jon Rizzo, Director of Clinical Education
Phone: (860) 486-0020
Email: jon.rizzo@uconn.edu

Susan Glenney, Academic Coordinator of Clinical Education
Phone: (860) 486-5692
Email: susan.genney@uconn.edu

Rev. 4/14/2016

TABLE OF CONTENTS

Clinical Education Curriculum, Outcomes & Courses	4-8
Roles and Responsibilities –Faculty	9-10
Rights and Privileges of Clinical Faculty	11
Requirements for Enrollment in Practica	11
Placement Policies, Procedures & Cancellations	12-15
Student Responsibilities	15
Travel	14
OSHA	16
Cardiopulmonary Resuscitation and First Aid	16
Criminal Offense Background Investigations	16-17
Health Policies	17-18
Students with Disabilities	18
Health Insurance	18
Personal Property	18-19
Medicare Waiver	19
Professional Liability Coverage	19
Monitoring Student Compliance	19
Procedures during Clinical Experience	19-20
Release of Student Information	20-21
Professional Behavior	21
Patient and Facility Rights	21-22
Practicum Work Schedule and Workload	23
Absences	23
Student Injuries	23-24
Incidents Involving Patients	24
Drug/alcohol Abuse	24
Student Employment During Practica	25
In-service Presentations	25
Clinical Supervision	25
Interpersonal Problem Resolution	26

Contact with the DCE	26
Monitoring Student Performance	27
Unsatisfactory Performance	28
Assessment of Learning	28
Grading Criteria	29
Withdrawal from a Practicum	29-30
Remediation	30
Due Process	30
Student Assessment of Clinical Education	31
Evaluations of CI, DCE & Academic Preparation	31-32

Appendices:

Course Syllabi	34-58
Faculty Evaluation of Student Readiness	59
Call Request Form	60
Placement Request Form	61
Personal Property Waiver	62
Medicare Waiver	63
Release & Authorization for Use & Disclosure Form	64
Practicum Packet Cover Letter	65
In-service Assignment and Evaluation Form	66-67
University Policy on Harassment of Students	68-69
Weekly Planning Form	70
DCE Site Visit Form	71-73
Critical Incident Report	74
Instructions for On-line CPI	75
Student Evaluation of the DCE	76-77

The Clinical Education Curriculum

The role of clinical education in the preparation of Physical Therapy professionals cannot be overstated. The program is committed to excellence in this most important area. Clinical sites are selected based on a history of high quality patient care, a clear statement of dedication to the learning process and practice patterns that are consistent with the program's practice expectations. It is the belief of the faculty that, through clinical application of knowledge gained in the classroom; a student integrates and expands his/her understanding of the clinical reasoning required for patient care.

The program's faculty encourages close relationships with those who assist in the preparation of its students. There exists a partnership whose goal is the development of competent clinicians with strong ethical standards. Interaction with physical therapist role models whose practice is consistent with the program's philosophy is imbedded throughout the curriculum.

Clinical education forms a central theme in the curriculum, incorporated not only as full time clinical practicum courses, but also as integrated clinical experiences imbedded in all clinical science courses.

The clinical education program includes clinical experiences that encompass management of patients representative of those commonly seen in practice across the lifespan, across the continuum of care and in settings representative of those in which physical therapy is commonly practiced.

Clinical Education Serves the Student Best When:

1. Expectations are made clear for everyone involved
2. Accountability to expectations involves frequent opportunities to show competence in specific skills, clinical decision making and professional behavior.
3. Planned opportunities exist for student discovery, guided practice, feedback and growth in applying knowledge, skills and attitudes to real patients/clients.
4. Self-assessment is required and results in plans for growth
5. Opportunities for presentation and discussion of the advantages and disadvantages of multiple, plausible alternative patient/client management plans are considered and applied within the constraints of clinical practice.
6. Clinical faculty hold the student in unconditional positive regard and view their role as teaching coaches

Clinical Education - Expected Student Outcomes

At the end of the final practicum course (PT 5467) each student will demonstrate entry-level ability to:

1. Practice in a safe manner
2. Demonstrate professional behavior in all situations
3. Practice in a manner consistent with established legal and professional standards and ethical guidelines
4. Communicate in ways that are congruent with situational needs
5. Apply current knowledge, theory, clinical judgment, and the patient's values and perspective in patient management
6. Adapt delivery of physical therapy services with consideration for patient's differences, values preferences, and needs
7. Determine when patients need further examination or consultation by a physical therapist or referral to another health care professional
8. Perform a physical therapy patient examination using evidenced-based tests and measures
9. Evaluate data from the patient examination to make clinical judgments
10. Determine a correct diagnosis
11. Establish a physical therapy plan of care that is safe and effective
12. Perform physical therapy interventions in a competent manner
13. Educate others using relevant and effective teaching methods
14. Complete documentation that is timely, complete, and accurate and meets all relevant requirements
15. Analyze data from outcome measures in a manner that supports accurate analysis of individual patient outcomes
16. Perform practice management functions required for entry into the profession.
17. Direct and supervise physical therapist assistants and other support personnel
18. Participate in self-assessment

Clinical Education Courses

Each student must successfully complete a minimum of 33 weeks of full time (approx. 40hrs/wk), supervised clinical practicum experience in approved clinical education settings. These experiences are provided in 3 courses occurring during the final year of the curriculum. Each course is directed toward development of mastery in one of the following areas of practice: acute care, neuro-rehabilitation or outpatient orthopedics. There is no specific sequence for the courses.

All students are required to participate in management of patients across the life span. Patients of all ages, with the exception of young children, will generally be seen during full time practicum courses. Practice with children is required during PT 5458, Pediatrics, and is an optional experience in the neuro-rehabilitation course.

The curriculum also includes clinical practice integrated with academic courses. These part-time integrated clinical experiences offer students the ability to synthesize and apply concepts and techniques at the same time they are taught in the classroom. Observation and/or patient care experiences are provided in settings such as hospitals, rehabilitation centers, outpatient offices, schools and community wellness centers.

Clinical faculty at the on-campus Nayden Clinic provide mentored, hands-on patient management during 2 of the part-time orthopedic integrated clinical experiences (PT 5462, 5463), Additional clinical partners provide mentorship for the part-time rehab/neurologic and acute care integrated clinical experiences (PT 5466, PT 5469). These include but are not limited to Hartford Hospital, Hospital for Special Care, Backus Hospital, and St. Francis Hospital.

Students are required to participate in an organized service learning activity that meets identified community needs.

Clinical Education Course Descriptions (see syllabi in appendix):

PT 5460: Introduction to Clinical Education

Time Offered: Fall, first year

Course Description:

This one credit course is intended to provide students with a foundation for clinical PT experiences and to enhance collaboration with other health care professionals. Concepts of critical thinking, expert practice, experiential learning, collaborative learning and inter-professional practice will be explored. Students will develop an understanding of the importance of inter-professional practice, professional behaviors, self-evaluation and patient centered care using a team-based approach. Student will work collaboratively with nursing students in and out of a simulation lab while developing an understanding of inter-professional patient care and the roles of other professions.

PT 5461: Acute Care Practicum

Time offered: Final year, 10, 11 or 12 weeks

Course Description:

Under close supervision by an experienced, licensed Physical Therapist, students will perform patient management functions for patients in a hospital. The course is held off campus at individually assigned clinical facilities throughout the country. Each student is assigned one or two clinical instructors who are physically present and immediately available for direction and supervision. Through this experience, students learn to apply their didactic education to the management of patients typically seen in the acute care setting.

PT 5462: Internal Integrated Musculoskeletal Clinical Practicum I

Time offered: Second summer

Course Description:

This course is an exercise instruction laboratory and observational clinical practicum within the Nayden Rehabilitation Clinic, a faculty-run PT provider. The course is designed to teach therapeutic exercise and provide the opportunity to practice learned techniques. Students observe PT visits within the clinic and apply therapeutic modalities and therapeutic exercise under the supervision and direction of a licensed physical therapist.

PT 5463: Internal Integrated Musculoskeletal Clinical Practicum II

Time offered: Fall semester, second year

Course Description:

This course is an applied musculoskeletal practicum within the Nayden Rehabilitation Clinic. The course is designed to synthesize and apply information obtained from previous and concurrent academic coursework in a real clinic setting.

PT 5464: Musculoskeletal Practicum

Time offered: Final year, 10, 11 or 12 weeks

Course Description:

Under close supervision by an experienced, licensed Physical Therapist, students will perform all patient management functions for patients in an outpatient orthopedic setting. The course is held off campus at individually assigned clinical facilities throughout the country. Each student is assigned one or two clinical instructors who are physically present and immediately available for direction and supervision. Through this experience, students learn to apply their didactic education to the management of patients with musculoskeletal conditions.

PT 5466: Internal Integrated Neuromuscular Clinical Practicum

Time offered: Spring, third year

Course Description:

This course is an applied neuromuscular practicum within the Nayden Rehabilitation Clinic and off campus facilities. The course is designed to synthesize and apply information obtained from previous and concurrent academic coursework in a real clinic setting.

PT 5467: Neuromuscular Practicum

Time Offered: Final year, 10, 11 or 12 weeks

Course Description

Under close supervision by an experienced, licensed Physical Therapist, students will perform all patient management functions for patients in a setting where the team approach is used to improve the functional abilities of patients with neuromuscular and other conditions. The course is held off campus at individually assigned clinical facilities throughout the country. Each student is assigned one or two clinical instructors who are physically present and immediately available for direction and supervision. Through this experience, students learn to apply their didactic education to the management of adult patients with neurological conditions, amputations, spinal cord injuries and other diagnoses.

PT 5469 Integrated Acute Care Practicum

Time offered: Spring, First year

Course Description:

This course provides students with clinical experience at hospitals and sub acute health care facilities. Students will observe and will assist as appropriate with patient care under the supervision and direction of a licensed physical therapist. The course allows students to integrate and apply the didactic component of the curriculum in an acute or sub acute environment. It is designed to foster the student's appreciation for the multidisciplinary nature of hospital care.

Roles and Responsibilities

Responsibilities of the Director of Clinical Education (DCE)

The DCE is the course instructor of record for all full time practicum courses and awards the course grade. The DCE is responsible for planning, coordinating, facilitating, administering and evaluating the clinical education curriculum and for monitoring each student's performance during full time practicum courses. The DCE serves as a liaison between the physical therapy program and clinical education sites. In cooperation with other academic faculty, the DCE establishes clinical education standards, selects and evaluates clinical education sites, and maintains communication among all parties.

Responsibilities include but are not limited to the following:

- Developing, conducting, coordinating and evaluating the clinical education program.
- Communicating necessary information about the clinical education program to core faculty, clinical education sites, clinical education faculty, and students and facilitating communication about clinical education among these groups as needed.
- Providing feedback to on-campus faculty about student clinical performance and, if necessary suggesting a need for change in academic courses.
- Determining if the academic regulations, policies and procedures related to clinical education are upheld by core faculty, students, and clinical education faculty and taking appropriate corrective actions, when necessary.
- Using information provided by the clinical education faculty and other information as needed to assess student learning in clinical education experiences and assign a course grade.
- Determining if the clinical education faculty and sites are meeting the needs of the program and for taking corrective action when they do not.
- Assessing the performance of clinical instructors who supervise students during full time clinical experiences
- Establishing new clinical education sites
- In cooperation with other core faculty, determining each student's readiness to engage in clinical education, including review of performance deficits and unsafe practices of the student.

Responsibilities of the Academic Coordinator of Clinical Education (ACCE)

The ACCE works with the DCE in establishing clinical education standards, selecting and evaluating clinical education sites, and maintaining communication among all parties.

Responsibilities include:

- Communicating necessary information about the clinical education program to core faculty, clinical education sites, clinical education faculty, and students and facilitating communication about clinical education among these groups as needed.
- Determining if the clinical education faculty and sites are meeting the needs of the program and for taking corrective action when they do not.
- Establishing new clinical education sites

Responsibilities of Clinical Instructors (CI)

The Clinical Instructor (CI) is the student's immediate supervisor and mentor during all full time practicum courses. He/she is employed by the clinical facility and is responsible for formal and informal evaluations of students during the experience.

Responsibilities include:

- Holding a valid PT license and having at least 12 months of clinical experience with the patient population to be seen by the student.
- Valuing the use of evidence in practice and encouraging the student to use critical inquiry effectively
- Demonstrating clinical competence and legal and ethical behavior
- Communicating with the student and DCE in an effective manner
- Modeling behaviors that are consistent with the PT program's values and philosophy.
- Collaborating with students to plan learning experiences that fall within the student's scope of knowledge and skill
- Reading all materials provided relating to the PT Program and seeking clarification where necessary
- Providing effective direct supervision for assigned students
- Providing effective and timely feedback regarding student performance
- Correctly completing the CPI at midterm and the end of each full time clinical practicum
- Submitting all forms/evaluations requested by the program
- Encouraging the student to self-assess
- Making time available to discuss patient/client management with student

Responsibilities of the Center Coordinator of Clinical Education (CCCE)

The Center Coordinator of Clinical Education is employed by the clinical site and manages the site's clinical education program.

Responsibilities include:

- Coordinating the assignments and activities of students in a way that is consistent with the PT Program's curriculum
- Demonstrating ethical and legal behavior
- Communicating with the CI, student and DCE in an effective manner

- Reading all materials relating to the PT program and seeking clarification where necessary
- Monitoring the performance of clinical instructors and students
- Distributing all forms and information sent by the DCE to the student and clinical instructor

Rights and Privileges of Clinical Faculty

- All clinical instructors and CCCE's who provide a full time learning experience may request on line access to the University library. Access is granted during the 12 months period during and following the practicum experience
- The CCCE has the right to schedule student clinicals so that patient care is not adversely affected.
- Clinical Instructors have the right to value the quality of patient management over student learning.
- Clinical faculty should expect prompt and effective communication with the DCE whenever it is needed.
- Clinical faculty may refuse to allow students who are unsafe or incompetent to participate in clinical education at their site.
- Clinical faculty have the right to expect that students assigned to their site have been adequately academically prepared to meet the expectations set for the experience.
- Clinical faculty have the right to expect that students will demonstrate the qualities of adult learners and contribute in a positive way.
- All clinical sites have the right to expect that private business information regarding the site will be held confidential.

Academic Requirements For Enrollment In Clinical Practicum Courses

Prior to the start of full time clinical practicum courses, each student must pass a cumulative examination. The examination is intended to ensure that all students have mastered the curricular content required for the three full time practicum courses. The exam consists of three content areas: medical/surgical, orthopedic, and neurological. In each content area the students will complete (1) a written response related to the case, (2) a practical examination and (3) appropriate documentation for the case. Students must successfully complete testing in all three content areas in order to enter full time clinical training. If a student fails to demonstrate competency in one or more content areas he or she will be permitted to retake the exam up to 2 times at the discretion of the academic advisory committee.

Each student is periodically reviewed by the core faculty to determine readiness for clinical practice. Determination of readiness includes a discussion of whether the student demonstrates an appropriate level of safety, professional and ethical behavior, communication and clinical skill (see appendix for rating form). The DCE often consults with individual faculty for specific information regarding potential performance problems.

Students noted to have potential problems, yet are still considered adequately prepared, are noted by the DCE. These students may meet with the DCE prior to the practicum and discuss strategies to increase the likelihood for success. The DCE will visit the clinical site early in the course and monitor student performance closely. Identified problems will be discussed with clinical faculty as determined by the DCE.

If a student's academic performance, or professional development and/or behavior is judged by faculty to be unsatisfactory, or his/her GPA falls below a 3.0, the student will be referred to the Program's Academic Advisory Committee. The committee then makes a recommendation to the Dean of the Graduate School as to whether the student may progress to participation in full time clinical practica. A student on academic probation because his/her overall GPA is less than 3.0 may register for practicum courses only upon the recommendation of the Academic Advisory Committee and approval of the Dean of the Graduate School. The Academic Advisory Committee will consult with the Director of Clinical Education (DCE) prior to recommending progression into any clinical education experience.

Clinical Education Placement Policies

- Practicum experiences must be in a setting appropriate to the specific course.
- Students are not allowed to contact clinical sites unless they have been assigned there by the DCE.
- A student may not complete a clinical practicum in a facility in which he/she was previously, or is presently, employed.
- Students may not complete a clinical practicum at a facility in which they have, or have had, a significant relationship with the facility's staff, such as a relative working at the same facility.
- Students should expect to travel to practicum sites and are responsible for their own travel arrangements and living expenses.
- Students should expect to complete a minimum of one clinical education experience outside the State of Connecticut and/or away from home.
- When students express a desire for placement in a clinical site, they are responsible for having reviewed all information available for that site. Written information can be found in each site's file in the file cabinets in Koons 102A and on the commitment sheets found in notebooks in the same area.
- Once placed, students will not be allowed to change their placement site except under extremely unusual circumstances.
- On the "Sites Available" list, provided to students before placements, the DCE may indicate sites as "must use." This is a site that has offered a slot for a specific course and requires a student assignment. If no student indicates a desire to complete a practicum at a "must use" site, the DCE will assign a student.
- Students who wish to be assigned to a site that is not already a contracted facility with the University, may ask the DCE to pursue a contract. Such a request must be given to the DCE as early as possible but always before the class placement process is initiated. The DCE will determine if a contract should be pursued.
- While the lottery system described below is generally used as the means for student placement choice, the DCE may choose to change individual student assignments if:

1. The DCE does not feel that the student has demonstrated a skill level high enough for a demanding experience
2. The DCE determines that a student has demonstrated a significant interest in an exceptional clinical site because of future career plans.
3. A student with a disability requires placement in a specific site.

Clinical Education Placement Procedures

Slot request forms (Commitment Sheets) for each calendar year are mailed to all contracted clinical sites on March 1st of the previous year. Before the forms are mailed, students will be given the opportunity to request that the DCE ask a specific site for a slot. Requests can only be made by students who wish to complete an experience at a site that doesn't generally provide a slot.

Slot Request Forms are due back from clinical sites by April 30th, but many sites return them much later or not at all. The forms are used to create a *List of Sites Available* for each course and the lists are distributed to all students.

Placement for the first 2 practicum courses occurs in the fall semester of the second year. Placement for the final practicum course occurs at the end of the spring semester, second year.

A lottery system is used for student selection of their rotations. For use in placements for the first two rotations, each student is randomly assigned a lottery number. Lottery numbers are distributed to each class and posted in Rm. 102.

Lottery numbers are used in the following way:

- For the first rotation the student assigned number 1 will have first choice of a site from the list of sites available, number 2 will have second choice and so on until all students in the class have chosen.
- For the second rotation, the student assigned the highest number will have first choice, the student assigned number 1 will have last choice.
- For the third rotation, the class will be divided into three groups: one group for those who must complete their final rotation in acute care, one for orthopedics and one for neuro-rehabilitation. Each of these groups will have separate lottery numbers which will be randomly assigned after placements have been completed for the first 2 rotations.

Initial communication with students regarding placements is done by the Director of Clinical Education (DCE) in January of the first year. This meeting is used to describe the process for specific requests for the March 1st mailing. A second meeting is held early in the fall of the second year. At this meeting, where student attendance is mandatory, the DCE relates all information students need in order to determine their choices for clinical placements. All questions are addressed. An overview of the three clinical education courses is provided in order to provide students with the ability to strategically select appropriate sites for each experience. This helps the

student with, for example, planning for the cost of travel to one or more of their assignments. Each of the sites available for the first 2 rotations is described.

After the meeting, students meet with the DCE or ACCE to discuss his/her clinical education needs and interests. The DCE/ACCE will discuss the student's academic history, professional interests, barriers to participation in clinical education, ability to travel, and learning needs. The DCE/ACCE will provide information about sites the student should consider and will answer any questions.

During the time that placements are made, students are strongly encouraged to inform the DCE or ACCE as soon as possible when one of their choices has been given as a "first come first served" slot. This means that the site has offered the same slot to other schools and will give it to the school who contacts them first. A call to the site will be made to inquire as to whether the slot is available and the site will be removed from the posted list if it is not. If a student fails to inform the DCE that their choice is a first come first served slot and their turn for placement comes up, they will be placed there even if the DCE has not confirmed the slot.

Students may complete a "Call Request", aka, "yellow sheet" (see appendix) form requesting placement at a contracted site that is not on the "sites available" list. The DCE determines whether such requests will be pursued. If the site agrees to accept the student, the student is placed there, if the site cannot accept the student, the student is informed and must choose a different site. If the DCE/ACCE has not heard back from the site when the student's lottery number is up, the student will be skipped until an answer is received.

Every student is required to submit his/her "Clinical Education Placement Request", aka "Pink Sheet" (see appendix) form, which notes his/her choices to the DCE on the date assigned. There are absolutely no exceptions. After each student has been placed, the chosen site will be deleted from the list for the remaining students. This information will be posted so that students who have not yet been placed will have the opportunity to develop their lists from the sites not taken by previous students.

After all assignments have been completed, the DCE will send a placement letter to the CCCE at each site assigned a student. The letter will include the kind of rotation (e.g. acute care) the assignment is for, the dates of the experience, and the student's name, address, phone number(s) and email address.

Student Contact with Their Assigned Site

Students are not allowed to contact any clinical site regarding a clinical practicum experience until they have been assigned there as a student.

Under no circumstances is it appropriate for students to contact their assigned clinical sites to alter their practicum experience in any way. Any alterations (such as changes in dates) made directly with the clinical site by students, without prior approval from the DCE, may result in cancellation of that clinical education experience. Reassignment will be made following department policies and as clinic availability allows.

Four to six weeks prior to the start of the practicum, students are responsible for calling or emailing the CCCE or CI at the facility to which they have been assigned. Names, phone numbers

and email addresses are available in the clinical education office. This is an opportunity for the student to introduce him/herself and to ask questions. Information needed may include, for example, the dress code, working hours, parking, directions and the name of the CI. Students must carefully read the clinic file prior to calling so that they do not ask questions that the site has answered in writing.

Practicum Cancellations

Occasionally there are sudden, unforeseen changes at a clinical site, such as staff resignations, which require the site to cancel a scheduled placement. The University is not always given adequate advance notice of such events. Students should, therefore, be prepared for changes in their assignment and understand that they need to be flexible in their needs. Students should not make unalterable vacation or employment plans near clinical practicum course times because the dates of the clinical may have to change.

Student Responsibilities Related to Clinical Education

The student is a representative of the University of Connecticut in the clinic environment. The school has written contractual agreements with all the clinical sites that provide opportunities for clinical practice. The contracts require that students comply with all the agency's policies, procedures, rules and regulations. Clinical sites have the authority to terminate a student's experience if the student is not following procedures or is not learning at an acceptable rate. It is anticipated that student behaviors will reflect the standards of the profession and of the University of Connecticut.

Physical Therapist Students are responsible for:

- Adhering to the policies in the University Graduate Catalog, the Program's Academic Policies and the Clinical Education Policies and Procedures
- Complying with clinical site policies, rules and regulations while participating in practicum experiences
- Reading all material placed in their personal mail boxes and posted to their e-mail addresses.
- Any and all personal transportation necessary for clinical education experiences.
- Housing during clinical education experiences.
- Appropriate and professional behavior at all times. When going to a physical therapy clinic or other health facility, students are expected to wear professional clothing or clothing as specified by the site. Hair must be well groomed, of a normal color and must not interfere with patient care. Piercings must be confined to the ears. No artificial finger nails or open-toed shoes are allowed in clinical practice.
- Maintaining current certification in CPR and First Aid as long as they are in the PT program.

- Purchasing liability insurance. The cost of this insurance will be included in the student's regular fee bill from the University.
- Completing all the required health tests and forms required by the program and by their assigned clinical site, in a timely manner.
- Maintaining internet communication with the DCE throughout all full time practicum courses
- During all full time clinicals, students must provide a one hour in-service on an evidence based topic of value to the audience

Travel

Students are generally expected to complete at least one full time practicum outside of the state of Connecticut. The lottery system used for placements usually results in this being the case for everyone. Students must be prepared to leave their campus/local housing for all full time practicum courses.

It is the responsibility of the student to arrange and pay for housing and transportation to his/her assigned site. Some sites provide a list of housing that might be available in the area and a very few provide student housing. Daily travel to practicum sites taking an hour from a residence is not unusual. Students are expected to have a car and valid driver's license.

OSHA Training

The Physical Therapy Program, in cooperation with the Department of Environmental Health and Safety, will provide mandatory annual OSHA Blood Borne Pathogen Standards educational sessions for all students. All students must provide proof of completion of the course every year or they will not be allowed in any clinical environment. This policy must be adhered to for both integrated clinical experiences and for all full time practicum courses.

Cardiopulmonary Resuscitation and First Aid

Current CPR and First Aid training certifications are required throughout the time the student is in the PT program. New students must submit a copy of valid CPR and First Aid cards during the first summer semester to the Clinical Compliance Coordinator of the program. Continuing students must submit a copy of re-certifications in advance of their expiration dates. On-line courses will not be accepted.

Any student whose CPR or First Aid expires before the end of a clinical practicum course will not be allowed to start that course. Missed days for this reason will not be waived; the student will be required to make that time up.

Criminal Offense Background Investigation (CORI) and Drug Testing

Many clinical sites require a CORI and/or drug testing before a student is allowed to work with patients. The Clinical Compliance Coordinator will assist students in getting these done and

will maintain the reports. The reports or letters of attestation may be sent to a student's clinical site on request.

The Clinical Compliance Coordinator maintains the CORI reports and informs the Program Director and the DCE that it was done and was negative. If the report is positive, the DCE is informed and meets with the student to discuss the effect this will have on clinical education courses and site selection. While many clinical sites have not provided specific information about the timing and results of the investigation, students should assume that a positive result of any kind will mean that he/she will not be allowed to practice in any environment that requires the investigation.

Health Policies

Physical Therapy students must be free of communicable disease and in good health in order to be admitted to any clinical environment. Practice in clinical settings where "real" patients will be seen requires that those patients be protected from communicable disease. Students will not be allowed to participate in any clinical education opportunity unless they can demonstrate that they are immune to rubella, measles, mumps and varicella and have received an up to date inoculation for tetanus. Students are also required to obtain a Hepatitis B series of inoculations unless exempted for medical reasons (see more information below)

Every student's health record is maintained by both Student Health Services and the Clinical Compliance Coordinator. Relevant student health information will be provided to clinical sites where the student will provide patient management. The student is required to sign a release form so that this information can be sent to the clinical site.

Prior to any clinical involvement (including part-time integrated clinicals and full time practicum courses), students must have on record with Student Health Services a physical examination which is done during the fall of the first year in the program. The health record must include a urinalysis and blood work for Hemoglobin and Hematocrit; up to date immunization records for Tetanus (preferred TDAP) and Hepatitis B and titers for Measles, Mumps, Rubella, Varicella and Hepatitis B.

A PPD test or Quantiferon Blood test for tuberculosis must be completed during the first-year physical examination and must be done again annually. The health record must include date of planting and reading (with results). If the PPD is read as positive, the record must include documentation of a chest x-ray and/or INH treatment. It is possible to use a Quantiferon blood test instead of a ppd. Some clinical sites require additional PPD reading to be done at specified times. Students are responsible for reviewing the clinic file, working with the Clinical Compliance Coordinator and complying with the clinic's timetable.

The Hepatitis B series (if not done during adolescence) must be completed by the end of the fall semester of the first year of the PT program. If immunizations have been completed within the previous two years, documentation of a Hep B titer (Quantitative, not Qualitative) must be submitted. If the series was completed more than two years ago, a post-titer is not necessary. Students who are exempted for medical or religious reasons must complete and sign a *Declination of Hepatitis B Vaccination form*. Some clinical sites require the full series, so exempted students would not be allowed to participate in clinical education at those sites. Students are

instructed to read the clinic file carefully to ensure that they meet all health requirements mandated by the clinical site.

The Clinical Compliance Coordinator will remind students of required health policies prior to clinical experiences. Students must complete all the necessary health data forms in a timely fashion. Failure to do so will result in delay of the experience. The Physical Therapy Program Director or the DCE may request additional documentation at any time from the student's personal physician if a health problem might be aggravated by clinical experiences or if a health problem might endanger a patient in a clinical setting.

Students are responsible for all of the charges related to the Health Policies, including CORI checks, CPR certification, first aid and required health insurance.

Students should review the Program's Student Manual of Policies and Procedures for further information regarding health policies.

Students with a Disability

Students with a known or suspected disability should refer to the Technical Standards and Assistance section of the Program's *Student Manual of Policies and Procedures*.

If the need for accommodations is deemed appropriate, the **University Program for College Students with Learning Disabilities (UPLD) or Center for Students with Disabilities (CSD)** will generate an academic accommodation request letter, which the student will present to the DCE prior to clinical placement. The DCE will work with the student during placements to find a site that offers the greatest potential for the student's success.

It is the responsibility of the student with a disability to inform the DCE and the clinical site regarding a disability if a reasonable accommodation is needed. The clinical site must provide reasonable accommodations unless it constitutes an undue hardship. Accommodations will be determined individually in consultation with the student, the DCE, the CCCE and the clinical instructor. If the student chooses not to identify him/herself to the DCE or clinical site as having a disability requiring accommodation, no accommodation will be made. The student may not request accommodation after the course has begun.

Health Insurance

All students are required to carry at least the minimum coverage of health insurance as stated in the University's student health policy. It is the student's responsibility to present a completed *Verification of Health Insurance Form* prior to the start of the third full week of classes each year. Students will not be allowed to attend any clinical experience without this documentation on file.

The student will assume responsibility for any medical expenses incurred while participating in the clinical portion of their program.

Personal Property Waiver Form

All students are required to complete a *Personal Property Waiver Form* (see appendix) which indicates that clinical sites are not responsible for loss or damage to student personal property while

on their premises. The *Personal Property Waiver Form* is submitted once prior to the start of the third full week of classes in the first semester of the PT program.

Medicare/Medicaid Exclusion Waiver

All students must attest to the fact that they have never been excluded from participation in any federal health care program, including Medicare and Medicaid. Please see the appendix for the form that must be on file in the Main Office. The form is submitted once prior to the start of the third full week of classes in the first semester of the PT program.

Professional Liability Coverage

All students are required to carry professional liability coverage under the blanket University policy. Students will be billed automatically for this on their University fee bill.

Although the State of Connecticut has statutory protection for students in "field placement programs" (Chapter 53 of the Connecticut General Statutes), many agencies will not accept this as adequate protection. Therefore, the PT Program, on advice of counsel, has required that all students purchase the blanket University malpractice coverage. This is a condition of the contractual agreements with all agencies participating in the clinical education of DPT students.

Procedures for Monitoring Student Compliance with Clinical Education Policies

Records of student compliance with program policies related to the following are monitored by Clinical Compliance Coordinator:

- OSHA training
- HIPPA training
- Personal Property Waiver
- Medicare Waiver
- Maintenance of health insurance
- Release of Medical Information
- CPR certification
- First aid training
- Current health history and immunizations
- Liability insurance coverage
- Any and all site-specific paperwork

The Clinical Compliance Coordinator will describe requirements and compliance procedures to students during their initial orientation upon entry into the program. Students are asked to sign and submit the Release and Authorization for Use or Disclosure of Protected Health Information, Personal Property Waiver and the Medicare Waiver at the orientation meeting. It is made clear to students that they are responsible for maintaining compliance and providing all information to the

right person at the right time. Timely means, for example, that CPR and First Aid certification cards must be provided before the previous one expires.

The Clinical Compliance Coordinator will send notifications to students regarding the scheduling of annual OSHA training and PPD tests as well as periodic CPR training classes. Students are required to submit an OSHA attendance form after every training session. After every PPD test, each student must submit their updated health history and immunization record. The office will review compliance of all students during the fall and spring semester of each academic year and will notify all non-compliant students regarding the need to update their records.

Students who do not follow compliance procedures risk delay or cancellation of their practicum experience.

All faculty teaching academic courses that include clinical practice or observation in affiliating sites are responsible for ensuring that all students demonstrate compliance with program policies and procedures. Faculty should request a compliance report from the Clinical Compliance Coordinator prior to the time the student goes to any clinical site. If a student is found to be out of compliance, he/she should not be allowed to participate in the clinical experience.

Student Forms and Information required prior to each full time practicum

Approximately 4 to 6 weeks prior to the start of each full time clinical education experience, a packet of information about the student and the program will be sent electronically or mailed to the student's assigned site. Please see appendix for the cover letter identifying the material included in the packet. Students are responsible for completing all required forms and submitting them on time for inclusion in this mailing. Students must ensure that they are compliant with all department requirements that relate to practicum courses and that they have done everything necessary to make information available to the Clinical Compliance Coordinator and clinical site.

The following will be included in the packet sent to the site:

- CPR card (copy)
- First aid card (copy)
- Student Data Form (see appendix)
- All relevant health information and all immunization records
- A Criminal Background Investigation Report Letter of Attestation
- Evidence of drug testing if requested by the placement site
- Signed OSHA training form
- signed HIPPA training form

Release of Student Information to Clinical Sites

All students are required to complete a Release and Authorization for Use or Disclosure

of Protected Health Information Form (see appendix) which indicates that the student is authorizing the Clinical Compliance Coordinator to disclose their private health, immunological, criminal background, drug screen and any other information to any and all necessary clinical facilities that the student will be involved with, including Student Health Services. The Form is submitted once prior to the start of the third full week of classes in the first semester of the PT program.

The following personally identifiable information will be disclosed to clinical sites after the student has been placed there for a practicum experience:

- Health and immunization records (with signed release for disclosure)
- Criminal Offense Background Investigation (when requested by the site)
- Results of drug testing (when requested by the site)
- Student directory information including: name, permanent and local address, telephone number, email address and level in the program (e.g. second year).

The following information may be discussed with the CCCE and/or CI at a student's clinical placement site at the discretion of the DCE:

- Any information related to the student's performance during the practicum experience
- Information regarding a student's academic and clinical education history when the site staff has a legitimate educational interest. This information will be limited to that needed for the purpose of planning and improving the student's learning experience.

Clinical sites are not allowed to re-disclose any student's personal information.

Professional Behavior

The Physical Therapy Program faculty has made a commitment to providing opportunities for its students to develop the entry-level skills, knowledge and attitudes needed for exemplary physical therapy practice. An important part of developing into a respected professional is developing a set of behaviors and values that, together with good content knowledge and hands-on skills, position students for success as a physical therapist. It is essential that students demonstrate appropriate professional behaviors throughout their time in the program, both in academic courses and during all clinical courses.

Assessment of professional behavior is used by clinical instructors when describing a student's abilities during clinical education experiences and will be used by the Director of Clinical Education in determining grades for all practicum courses. Failure in this area is the most common reason for an unsuccessful clinical experience.

Patient Rights and Confidentiality of Information:

Any patient has the right to refuse treatment by a student for any reason.

During all practicum experiences, students must identify themselves as a student physical therapist to patients and other health care professionals. A name tag must be worn at all times and must include: the student's first and last name, the words "Physical Therapy Intern" and "University of Connecticut". All documentation performed by the student must be authenticated by a licensed physical therapist and the student's signature must be followed by the title: SPT.

Students participating in clinical practica will be exposed to/work with confidential patient information. They have a moral, ethical and legal responsibility to maintain the confidential nature of this information. Patient information can be shared with only those persons who have legal access to the patient's medical record.

Students are NOT allowed to:

- discuss patient information in public places (e.g., the cafeteria, elevators, lobby, etc)
- make photocopies of any patient records
- use patient information for any purpose other than patient management
- take pictures of patients without written permission from the patient and from the clinical site.
- review records of patients they are not treating

Any unauthorized review or release of confidential information by any student to unauthorized persons will be grounds for immediate course failure and potential dismissal from the program.

All clinical site regulations governing this must be followed. Federal regulations, issued pursuant to the Health Insurance Portability and Accountability Act (HIPAA) of 1996, require that all PT students receive educational sessions on the importance of complying with all relevant federal confidentiality laws. The PT Program will provide the necessary seminars to its students at the beginning of each academic year. This training is to be attended by the student once during their time in the program and the student must sign a form indicating their attendance, their understanding of the information, and their agreement to comply. The signed form is kept on file in the program's main office. Students will not be allowed to register for practicum courses until they have taken the educational session.

Protection of Private Clinical Site Information:

Students must understand that they are not allowed to remove or disclose any business-related information related to a clinical site without permission from that site. This information may relate, for example, to any financial aspect of the business, intervention protocols, or staff information.

Schedule and Workload

The student must participate in the clinical practicum experience to which he/she has been assigned on the dates and during the times for which he/she has been assigned. Generally, students are to be present at the clinical setting approximately 40 hours/week and to work the hours and days that the CI is present. It is not uncommon for students to work more than 40 hrs/wk. A student may be required to be in the clinic on weekends.

The student is expected to fulfill all necessary professional requirements, even when this requires time beyond that regularly scheduled. All assigned work must be completed prior to the end of the course.

Absences

Absences from clinical practica should be extremely rare. Students are expected to request absences in a manner that is consistent with the demands of the profession and of the clinical site. The student is responsible for requesting any required schedule change through contact with their clinical instructor and the DCE. Vacations during practicum courses are not allowed for any reason.

If a student must be absent from a clinical education experience due to unexpected events such as an illness, the Clinical Instructor at the site must be notified as soon as possible, but no less than 60 minutes prior to the start of the work day. If more than 2 days are missed because of illness, the student may be required to make up the missed days. The need to make up any missed time will be decided by the DCE after consultation with the clinical instructor.

For acceptable reasons, students may be allowed up to two days of planned absence with permission from the site and the DCE without having to make up the lost time. Acceptable planned absences would include, for example, attendance at a national or state APTA meeting. If more than two days are missed, students need to arrange to make up the days. Students who hope to attend an APTA or other conference, should seek permission from their CCCE and CI prior to registration for the event in case attendance is not allowed by the site.

In the case of inclement weather the facility's policy will determine whether the student reports to the site. This should be discussed with the Clinical Instructor during the student orientation early in the experience. If more than 2 days of inclement weather forces an absence, the student will have to make up the additional missed days.

Closure of the University or University holidays does not excuse students from attending practicum experiences.

Student injuries/incidents during practicum courses

All students are required to provide the University with documentation of well-being and good health prior to any course work that may include direct, or indirect, patient contact.

Injuries to students which occur at practicum sites are extremely rare. If any injury (such as direct contamination by infectious substances) occurs, the student must call the DCE as soon as it is practicable. The DCE will forward the program's Incident Report which must be completed by both the student and the CI and faxed to the DCE. The DCE maintains the form in a file in his office.

Clinical sites all offer either first aid or complete medical care. The costs of these services is the responsibility of the student.

Decisions regarding any necessary time off are made by the DCE, CI, CCCE, student and the student's health care provider. If a serious injury prevents the student from completing the experience, the course will be re-scheduled when it is possible to do so.

Adverse events involving patients during practicum courses

If an adverse event involving a patient occurs while a student is treating the patient, the student must notify his/her CI immediately. The facility's incident reporting form must be completed according to procedures at the site. The incident report should be faxed to the DCE as soon as possible. Facilities may redact the patient's name if appropriate. The student is required to contact the DCE to describe the incident at the first opportunity.

The DCE will thoroughly discuss the student's role in the incident with all parties involved and make a decision as to whether any further action is required. A student who is found to be uncaring or unsafe may be involuntarily withdrawn from the practicum by either the clinical site or the DCE.

Drug and alcohol abuse and criminal offenses by students

If a student is found to have used alcohol or illegal drugs while participating in any clinical experience, he/she will be immediately removed from the clinic and a U grade assigned for the course. If a student is arrested for a felony offence, or any drug of alcohol related offence, during a practicum course they will be suspended from all clinical activities. Reinstatement requires mutual agreement of the clinical site and program administration. An I grade may be assigned pending the outcome of legal proceedings. A grade of U will be assigned if a student is convicted of a felony of drug related charge. A grade of U may be assigned if students are suspended due to an alcohol related arrest at the discretion of the DCE. The program maintains the right to require random drug / alcohol screens where illegal drug use or alcohol use is suspected. The drug screens will be completed at the student's expense.

Students shown to have used illegal drugs or abused alcohol will be referred to the Doctor of Physical Therapy Program Academic Advisory Committee who will determine whether a recommendation for dismissal will be forwarded to the Graduate School, and the student will be encouraged to participate in counseling services for treatment of the problem.

Student employment

It is recommended that students avoid any employment commitments while participating in full time clinical experiences. This is due to the significant time and energy commitment required during clinical practica. No time away from normal work hours at the clinical site is allowed for employment.

Students are not allowed to work at sites while they participate in any clinical education experience at that site. Students may not be assigned to practicum courses at sites where they have ever worked.

Students who work or volunteer in a physical therapy clinical environment may not represent themselves to others as a student participating in a University of Connecticut practicum course and may not wear their University name tag. Students who work or volunteer in these environments are not covered by the Student Liability Insurance policy.

Student in-service presentations

All students are required to present at least one inservice/lecture during every full time practicum experience. This is the minimal expectation of the program; the clinic may ask a student to perform more than the minimum, such as an additional in-service, peer review, journal article, etc.

Students are responsible for having the audience complete evaluation forms (see appendix) and for requesting that they be forwarded to the DCE with other materials at the completion of the clinical experience. Specific assignments for the presentation will be given to the student prior to the first practicum and a description of the assignment and the evaluation form will be mailed to practicum sites before the student's arrival.

Supervision by the clinical instructor

Students may manage patients **only** under the direct supervision* of a licensed physical therapist with at least one year of clinical experience and demonstrated clinical expertise. Practicum courses are not observation experiences. The student is expected to provide all elements of patient/client management and to follow his / her clinical instructor's direction at all times.

During clinical experiences, students are expected to meet all ethical and legal requirements of the profession. A student who is found to have worked with a patient without on-site supervision by his/her clinical instructor will receive an "Unsatisfactory" grade for the course.

**Direct supervision means (APTA, 2000): "The physical therapist is physically present and immediately available for direction and supervision. The physical therapist will have direct contact with the patient/client during each visit that is defined in the Guide to Physical Therapist Practice as all encounters with a patient/client in a 24-hour period. Telecommunications does not meet the requirement of direct supervision."*

Interpersonal problem resolution

If interpersonal conflict between the student and the CI occurs, it is the student's responsibility to make the first attempts at resolution. This usually involves a private conversation between the parties involved. If the problem is not resolved through this conversation, both the student and the CI should contact the Clinical Compliance Coordinator and the DCE as soon as possible. The Clinical Compliance Coordinator and DCE are responsible for clearly defining the problem and developing a plan for resolution. This may include counseling the student regarding appropriate interpersonal behaviors in the clinic and working with the CI to improve the educational process. The DCE will keep notes of every conversation dealing with problems.

Where interpersonal conflict at the clinical site cannot be resolved, the DCE and CCCE may choose to change the CI or withdraw the student. Please see the University's Policy on Harassment in the appendix.

Contact with the DCE

The University is ultimately responsible for the education of PT Students and the DCE is responsible for maintaining communication among the clinical facility, the student and the program while a student is completing a clinical practicum course. This communication typically takes the form of telephone calls, review of Clinical Performance Instruments, email, on-line student assignments and/or on-site visits.

Students are required to maintain contact with the DCE throughout all full-time practicum courses through telephone, email and HuskyCT weekly discussions.

Active participation in HuskyCT discussions is required of all students. Generally, the DCE will post questions for discussion on Monday or Tuesday and students will be expected to respond by Friday. Students are encouraged to post their own questions or discussion points at any time.

Site visits

Nearly all students are visited during each clinical rotation. A site visit by the DCE/ACCE will always be scheduled if the student is demonstrating performance problems or a visit is requested by the student, the CI or the CCCE. A site visit will be made whenever the DCE has not been to a site before or hasn't been to the site in two years. Typically, site visits will also be arranged whenever the DCE/ACCE will be in the area visiting another site.

The purpose of a site visit may be:

- assessment of clinical instruction
- observation of practices within the clinic

- ensuring that the clinical instructor has adequate knowledge of UConn's curriculum
- ensuring that the clinical instructor is aware of the program's expectations for student performance
- determining whether a clinical site is appropriate for future students
- assessment of student performance
- creating a plan to maximize the student's opportunities for success

Monitoring performance during clinical practica

- Students, CI's and CCCE's are encouraged to contact the DCE/ACCE for any reason by telephone (office, cell and home numbers are provided) or email. This is especially important if there are any problems at the clinical site.
- Clinical instructors monitor student performance on an on-going basis during all clinicals and are expected to communicate their positive and negative impressions with the student on a daily basis.
- All students are required to participate in online discussions with their classmates and the DCE/ACCE. No confidential information about patients or student performance is allowed during the discussions. If a student has a private point to discuss with the DCE/ACCE, he/she should do so via phone or email.
- Short evaluation forms (see appendix) are emailed to every CI at the clinical site within the first week of the course along with a request to return them to the DCE. These forms are used by the DCE in monitoring early performance and determining the need for a visit or phone call.
- Weekly planning forms (see appendix) are provided to each CI prior to the student's arrival. Directions for the use of the form are provided on the form. If the student or CI note that the student is not meeting the planned objectives, both should notify the DCE/ACCE. The DCE/ACCE will follow up as indicated. If the student feels that the weekly plan does not provide for an acceptable learning experience, he/she should discuss this with the CI and should also call the DCE/ACCE for help.
- During site visits, the DCE/ACCE will meet with the student and CI at the same time to encourage appropriate communication and to ensure that both parties are aware of the other's opinions and plans. Both the student and the CI are strongly encouraged to share their thoughts on how things are going and how things may need to change in order to enhance the student's learning experience.

Unsatisfactory Performance During Practica

If a student demonstrates unsatisfactory performance during the practicum, the CI, student and CCCE where appropriate, must notify the DCE/ACCE as soon as the problem is identified. The DCE will discuss the problem with the student in a timely manner and offer strategies for improving performance. The DCE/ACCE will assist the clinical faculty in clarifying the problem behaviors and developing a plan intended to enhance the student's opportunity for success. This plan will be written by the DCE/ACCE and disseminated to the student and others as appropriate. Generally, the DCE/ACCE will contact the student and CI on a weekly basis to monitor compliance with the plan and to help resolve problems. This continues until the problem is resolved. Frequent discussions among the student, CI, CCCE and the DCE help to keep the student on track. Site visits during clinical practicum courses by the DCE may be frequent in situations where the student is having difficulty or is in danger of failing.

Where unusual or frequent unsatisfactory performance is observed, the CI will be encouraged to complete a "Critical Incident Report" (see appendix). This report includes a description of the situation in which the performance occurred, a description of the performance and a list of consequences which would result if the behavior continues. The CI and/or CCCE must review the report with the student and the student must sign it. The student's signature denotes that he/she has read and understood the report. All critical incident reports must be sent to the DCE as soon as possible. The DCE will respond to both the CI and student and attempt to remediate the problem by offering teaching and learning strategies.

Assessment of student learning

Students are required to complete a self-assessment, using the Clinical Performance Instrument (APTA, 2006), at midterm and again at the end of every clinical. It serves as a reflective process for the student and is expected to encourage self-directed learning and performance improvement. Students must take the CPI training course and pass the test in its use before their first rotation.

The Clinical Instructor (CI) will evaluate the student and provide frequent, informal feedback throughout the experience. The CI will provide a formal evaluation using the APTA's on-line Clinical Performance Instrument (CPI) (see appendix) at midterm and at the completion of the practicum. The CI must take and pass the CPI training course before using it. The DCE will review all completed CPI evaluations. Students and CI's are required to keep the DCE informed regarding progress toward the course objectives. Whenever necessary, the DCE will confer with students and CI's regarding the need for change in their performance and will monitor performance on an ongoing basis.

The DCE/ACCE is responsible for determining whether the CPI was completed correctly by the CI. This is done by comparing the score on the VAS with the comments, comparing the CPI notations with information gathered through discussions between the DCE and the CI, comparing the noted student performance with the student's academic and clinical history, and through discussions with the student. The DCE may choose to observe the student working with patients if

that seems necessary to insure proper grading. Where the DCE/ACCE feels that the form may not have been completed correctly, she will contact the CI to discuss any discrepancy and will correct the form based on this discussion.

Grading criteria

Students are assigned a final grade of S (Satisfactory) or U (Unsatisfactory) by the Director of Clinical Information (DCE). Scores on the CPI, along with all other relevant information will be used by the DCE to provide a course grade. Other relevant information may include, but is not limited to: answers to questions posed by the DCE regarding specific patient interactions involving the student, the DCE's experience with the CI or site, the student's caseload, the student's past academic and clinical performance and the learning emphasis areas for the course.

The student must receive a grade of "S" in order to successfully complete practicum courses. A grade of U signifies failure in the course and necessitates a recommendation by the Academic Advisory Committee to the Graduate School as to whether or not the student should be permitted to continue graduate study. Generally, but not always, a student who receives a grade of Unsatisfactory in a clinical practicum will be allowed to repeat it. In this case, graduation will be deferred until the course has been repeated. If a grade of unsatisfactory is awarded for two practica, the student will be dismissed from the program.

Withdrawal from a clinical education practicum

Voluntarily withdrawal by the student from a clinical practicum course is allowed until the midterm CPI is completed. If there are extenuating circumstances such as an illness, withdrawal may occur at any time.

The student must notify the DCE, CCCE and CI at least 48 hours prior to voluntary withdrawal. If the withdrawal occurs prior to midterm, it will result in a "W" (withdrew) as the course grade. At the discretion of the DCE, some extenuating circumstances may result in a grade of Incomplete (I). After a withdrawal, the student will be allowed to repeat the course. The DCE, in consultation with the student and the Program Director, will develop a plan so that the student can repeat the practicum course at an different site. The new site must offer the same area of practice (acute care, outpatient orthopedics or rehab.) as the original site. The curricular sequence of courses mandates that the student will continue in the curriculum during the summer after normal graduation.

A student may be **involuntarily withdrawn** from a clinical education course at any time at the discretion of the DCE and/or the request of the clinical site if he/she consistently demonstrates poor performance or is determined to be unsafe with patients. Such performance must be substantiated by documentation of specific incidences representative of the problem behaviors. This documentation must reflect that the student has not demonstrated improvement in attaining satisfactory competence in the objectives or appropriate positive change in the behaviors cited, within a mutually determined time by the clinical instructor, student, and DCE. In the case of involuntary withdrawal, a grade of "U", Unsatisfactory, will be awarded for the course and it will

have to be repeated. The program's Academic Advisory Committee and the DCE may recommend a plan for remediation or dismissal from the program. The student must agree to a remediation plan acceptable to all parties prior to being permitted to continue in the program. Failure to comply with a remediation plan will result in a recommendation for dismissal. The curricular sequence of courses mandates that the student will continue in the curriculum during the summer after normal graduation.

Remediation

Following a withdrawal or a grade of Unsatisfactory, a plan for remediation will be developed. Upon the recommendation of the Program's Academic Advisory Committee, the plan will include specific activities and competencies which must be met before the student will be allowed to participate in another practicum experience. This commonly includes supervised practice at the Nayden Clinic, review of academic coursework and/or individual counseling.

Due process

Students may appeal a grade of "U" in a practicum course using the same method used for academic courses.

The University of Connecticut's Graduate School policies regarding students who feel aggrieved or uncertain about whether or not they have been treated fairly by a faculty or staff member have several routes that can be taken to seek resolution or redress. Because many difficulties can result from misunderstandings, clear communication and informal mediation are believed to be the most effective and least anxiety-provoking mechanisms to resolve student grievances. Usually, the first approach is for the student to request a meeting with the PT Program Director in order to state the problem and to attempt a direct solution.

If that proves unsatisfactory or should such a meeting seem undesirable given the particular circumstance, there are several choices. Sometimes appropriate mediation can be provided by other faculty or staff in the program or school. Alternatively, the student may consult with the Director of the Graduate Program, the Department Head, or the Dean, usually in that order. It is the responsibility of the academic administrator, then, to gather the facts in the case and seek a mutually acceptable resolution. All faculty and staff in the School report ultimately to the Dean and formal action can be taken at that level, if appropriate. In the event that the initial collection of facts suggests a violation of law or of explicit university policy concerning prejudice or harassment, the administrator will immediately consult with appropriate staff in Human Resources or the Chancellor's Office regarding appropriate action.

Student assessment of their clinical experience

Students are required to complete the "Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction" APTA, 2003(see appendix), for every full time practicum course. No grade will be awarded until the form has been returned to the DCE. The DCE reviews the form and follows up with any problems identified by the student. The form is filed in the clinic's file and is

available for review by future students. The DCE summarizes student assessment of their preparation and reports it to the faculty.

Evaluation of the clinical instructor

The “*Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction*” APTA, 2003 includes an evaluation of the CI. This evaluation should be completed at midterm and again during the final interview. The student should not discuss his/her assessment of the CI until after the CI and student have reviewed the CPI written by the CI and the self assessment written by the student. This sequence ensures that CPI scores have nothing to do with the student evaluation of the CI. The DCE reviews the final evaluation and determines whether any further action is needed with the CI or clinical site.

Students are encouraged to be completely honest in their feedback to the CI, but there may be times when the student feels unable to do so. It is for this reason that the DCE sends each student a new copy of the CI evaluation form after the clinical has ended. The original form is discarded and the new one takes its place.

When the DCE notes significant problems with the performance of a clinical instructor, the problems must be remediated or the CI will not be allowed to work with program students again. Problem performance of the CI is discussed with the CCCE who participates in the development of the remediation plan. A remediation plan must be specific to the problems identified, but may take the form, for example, of instruction in proper clinical instruction and supervision, correct use of the CPI, or request that the CI attend a Clinical Instructor Training Course. Specific problems are written by the DCE and the action plan is described in writing. Sometimes, it may be necessary to eliminate the clinical instructor or site as an option for clinical practicum courses.

Student evaluation of the DCE

After completion of each practicum course, students are given an evaluation tool (see appendix) for the DCE in electronic format. Students complete the form and send it to the Clinical Compliance Coordinator who summarizes them for each course. The DCE/ACCE do not see individual student responses. Summary information is given to the DCE/ACCE and included in his/her annual portfolio which is evaluated by the Program Director.

Student evaluation of their academic preparation

The “Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction” APTA, 2003 includes a brief section regarding academic preparation for the practicum. From this form, the answers to the following questions are summarized in a report called “Student Evaluations” and presented to the faculty:

- What specific qualities or skills do you believe a physical therapist student should have to function successfully at this clinical education site?

- If, during this clinical education experience, you were exposed to content not included in your previous physical therapist academic preparation, describe those subject areas not addressed.
- What do you believe were the strengths of your physical therapist academic preparation and/or coursework for *this clinical experience*?
- What curricular suggestions do you have that would have prepared you better for *this clinical experience*?

Student Evaluation reports for every clinical course are prepared by the DCE and discussed at a subsequent faculty meeting. A report summarizing the results for each 3 year period is also prepared and discussed at the faculty meeting. Faculty members are encouraged to consider change in their courses if the report indicates this is necessary. Follow up forms are maintained by the chair of the curriculum and courses committee to ensure that any necessary follow-up plan is implemented.

APPENDICES

**UNIVERSITY OF CONNECTICUT
DEPARTMENT OF PHYSICAL THERAPY
COURSE SYLLABUS**

Course Title and Number: PT 5460: Introduction to Clinical Education

Description: This course is intended to provide knowledge regarding appropriate learning methods as well as practical and procedural aspects of integrated and full-time clinical physical therapy educational experiences. Topics include review of clinical setting types, Bloom's taxonomy, experiential learning, critical thinking, transfer of knowledge from classroom to clinic, expert vs. novice practice, and interdisciplinary practice. Students will also develop an understanding of the American Physical Therapy Association's Clinical Performance Instrument as well as appropriate goal-setting during clinical education.

Department offering Course: Physical Therapy

Semester and Year: Fall 1st Year 2015

Credit Hours: 1.0

Instructor(s): Jon Rizzo ;

Clock Hours: Lecture: Monday, 2:00 PM- 4:00 PM

Course Prerequisites: Students must be in good academic standing and be granted consent of the Department to enroll.

Course Objectives:

1. Review the types of clinical environments physical therapists commonly practice in and the types of patients served in these settings.
2. Develop theoretical knowledge of Bloom's Taxonomy, experiential learning, critical thinking, transfer of learning, expert vs. novice PT practice and apply knowledge to mock patient situations and cases.
3. Develop an understanding of interdisciplinary practice in PT settings.
4. Develop practical knowledge of the APTA Clinical Performance Instrument (CPI) and goal setting in clinical environments.

Teaching Methods: Instructional strategies such as lecture, discussion, student group presentations, and attendance at Interprofessional Dean's Day held at the UConn.

Learning Experiences: Classroom, Dean's Day at UConn.

Methods of

Evaluation/Grading: Class Participation- 25%
Attendance at Dean's Day- 25%
Group Video Presentation Project- 40%
Final Examination- 10%.

Required Text: APTA Guide to the Physical Therapist Practice 3.0. Available online at:
<http://guidetoptpractice.apta.org>

Additional Readings will be provided on HuskyCT

Recommended Texts: None.

Academic Policies: All students are expected to abide by the academic policies of the University, Graduate School and Physical Therapy Department as related to their conduct in this course (i.e. attendance, academic integrity, professional behavior, etc.).

Inclement Weather Policy:

In the event that classes are canceled on the Storrs campus due to weather, students should not report to lecture or other scheduled activities. If weather compromises safe travel and classes are not canceled, students and the course instructor are advised to use discretion. In these circumstances, if the student and course instructor agrees that safe travel is compromised, class will be cancelled.

Students with Disabilities Policy:

Please contact me during office hours to discuss academic accommodations that may be needed during the semester due to a documented disability. If you have a disability for which you wish to request academic accommodations and have not contacted the Center for Students with Disabilities (CSD), please do so as soon as possible. The CSD engages in an interactive process with each student and reviews requests for accommodations on an individualized, case-by-case basis. The CSD collaborates with students and their faculty to coordinate approved accommodations and services. The CSD is located in Wilbur Cross, Room 204 and can be reached at (860) 486-2020 or at csd@uconn.edu. Detailed information regarding the process to request accommodations is available on the CSD website at www.csd.uconn.edu.

Policy Against Discrimination, Harassment and Inappropriate Romantic Relationships:

The University is committed to maintaining an environment free of discrimination or discriminatory harassment directed toward any person or group within its community – students, employees, or visitors. Academic and professional excellence can flourish only when each member of our community is assured an atmosphere of mutual respect. All members of the University community are responsible for the maintenance of an academic and work environment in which people are free to learn and work without fear of discrimination or discriminatory harassment. In addition, inappropriate Romantic relationships can undermine the University’s mission when those in positions of authority abuse or appear to abuse their authority. To that end, and in accordance with federal and state law, the University prohibits discrimination and discriminatory harassment, as well as inappropriate Romantic relationships, and such behavior will be met with appropriate disciplinary action, up to and including dismissal from the University. More information is available at <http://policy.uconn.edu/?p=2884>.

**UNIVERSITY OF CONNECTICUT
DEPARTMENT OF PHYSICAL THERAPY
COURSE SYLLABUS**

Course Title and Number: PT 5461, Acute Care Practicum

Description: Under close supervision by an experienced, licensed Physical Therapist, students will perform patient management functions for patients in a hospital. The course is held off campus at individually assigned clinical facilities throughout the country. Each student is assigned one or two clinical instructors who are physically present and immediately available for direction and supervision. Through this experience, students learn to apply their didactic education to the management of patients typically seen in the acute care setting.

Department offering Course: Kinesiology

Semester and Year: Spring, Second year in the program

Credit Hours: 8

Instructor: Jon Rizzo

Office: Koons, Rm 102

Phone: 486-0020

Clock Hours: Students work approximately 40 hrs/week in a clinical setting

Course Prerequisites: Students must be in good academic standing and be granted consent by the department to enroll

Course Objectives:

In a hospital setting, by the end of the course, the student will:

1. Practice in a safe manner that minimizes risk to patient, self, and others.
2. Demonstrate professional behavior in all situations
3. Practice in a manner consistent with established legal and professional standards and ethical guidelines
4. Communicate in ways that are congruent with situational needs.
5. Adapt delivery of physical therapy services with consideration for patients' differences, values, preferences and needs
6. Participate in self-assessment to improve clinical and professional performance
7. Determine with each patient encounter the patient's need for further examination or consultation by a physical therapist or referral to another health care professional
8. Perform a physical therapy patient examination.
9. Evaluate data from the patient examination to make clinical judgments
10. Establish a plan of care that is safe, effective, and patient-centered
11. Perform physical therapy interventions in a competent manner.
12. Educate others (patients, family, caregivers, staff, students, other health care providers) using relevant and effective teaching methods.

13. Produce quality documentation in a timely manner
14. Manage resources (e.g., time, space, and equipment) to achieve goals of the practice setting.

Learning emphasis areas:

1. Safety of both self and others
2. Competent management of infection control procedures
3. Understanding the culture of the hospital and the roles of the workers found there
4. Development of their own motor skills during patient mobilization
5. Competent decision making for patient discharge

Framing scenario

By the end of the experience, the student will safely and competently manage routine patients (e.g. patients who were admitted for a total knee replacement) throughout the patients' admission and will recommend appropriate discharge plans. The student will demonstrate the ability to do this independently even though facility policies may prohibit the student from being alone with patients. The student will require supervision or assistance managing more complex patients. The student will manage approximately 8-10 patients in a typical 8 hour day with varying levels of CI assistance.

Evaluation of Student Performance

The Clinical Instructor (CI) will evaluate the student and provide informal feedback to the student throughout the experience. The CI will provide a formal written evaluation using the APTA's on-line Clinical Performance Instrument (CPI) at midterm and at the completion of the practicum. Students are required to complete a self assessment, using the CPI, at both midterm and at the end of the experience. The DCE will review all written evaluations. Students and CI's are required to keep the DCE informed regarding progress toward the course objectives. Whenever necessary, the DCE will confer with students and CI's regarding the need for change in their performance and will monitor performance on an ongoing basis.

Grading Criteria: Students are assigned a final grade of S (Satisfactory) or U (Unsatisfactory) by the Director of Clinical Information (DCE). Scores on the CPI, along with all other relevant information will be used by the DCE to provide a course grade. Other relevant information may include, but is not limited to: answers to questions posed by the DCE regarding specific patient interactions involving the student, the DCE's experience with the CI or site, the student's caseload, the student's past academic and clinical performance and the learning emphasis areas for the course.

Along with other relevant information, the following CPI scores will be used to describe passing performance; scores below "passing" may result in course failure. Scores that meet the passing criteria may result in a grade of unsatisfactory if the DCE believes that the CI completed the CPI incorrectly.

Students must achieve a score of "entry level" on all CPI criteria.

CPI criteria **not** used in grading for this course = clinical reasoning, diagnosis and prognosis, outcomes assessment and direction and supervision of personnel

**UNIVERSITY OF CONNECTICUT
DEPARTMENT OF PHYSICAL THERAPY
COURSE SYLLABUS**

Course # and Title: PT 5462: Internal Integrated Musculoskeletal Clinical Practicum I – (1 Credits)

Course Description: This course is an active-observational clinical practicum located at the Nayden Rehabilitation Clinic and the University of Connecticut Health Center--New England Musculoskeletal Institute (NMSI). Students will observe and participate in treatment sessions within the clinics and apply physical agents and therapeutic exercises under the supervision and direction of a licensed physical therapist. This course will allow students to integrate and apply the academic components of PT 5452, Therapeutic Exercise and Physical Agents, in real-world outpatient physical therapy clinics.

Department Offering Course: Department of Kinesiology

Semester and Year: 2nd Year, Fall

Credit Hours: 1.0

Course Director and Instructor(s): *Director:* Jeremy Vigneault. *Instructors:* Nayden Clinical Faculty (Barbara Boucher, Maryclaire Capetta, Laurie Devaney, Jon Rizzo, Jeremy Vigneault) UCHC Clinical Staff: (Nancy Craven, Greg Gomlinski, Sean Riley, Brian Swanson, Vin Tufolo)

Course Hours: Last 6 weeks of semester. Scheduled course: Tuesday 12:00-4:00pm; Thursday 12:00-4:00pm; Friday 1:00-4:00pm. *Please refer to Observation Schedule for individual times as scheduled times may differ.

Course Prerequisites: Students must be in good academic standing and be granted consent of the program to enroll.

Course Objectives: Following participation in this course the student should be able to:

1. Display professional behaviors consistent with those identified by the Physical
2. Therapy Program, the University of Connecticut, and the American Physical Therapy

Association.

3. Provide rationale for the selection of physical agents and therapeutic exercise in clinical practice.
4. Instruct patients with musculoskeletal/neurological dysfunction in the use of therapeutic exercise in a manner which meets professional standards.
5. Apply physical agents to patients with musculoskeletal/neurological dysfunction in a manner which meets professional standards.
6. Document legibly and accurately the administration of therapeutic exercise and physical agents, including all parameters, in a patient's medical record.
7. Assess patient tolerance to exercise and physical agents.
8. Identify patient compensations to therapeutic exercise.
9. Incorporate the concept of self efficacy, wellness and health promotion in the management of patients with musculoskeletal and neurological dysfunction.

Teaching Methods: Direct patient care observation and/or participation when applicable.

Learning Experiences: Students will observe and participate when applicable in the treatment of patients with a variety of musculoskeletal and neurological disorders at the Nayden Rehabilitation Clinic and the University of Connecticut Health Center--New England Musculoskeletal Institute (NMSI). Students will be encouraged to observe and participate in various aspects of treatment, with particular attention to therapeutic exercise and therapeutic modality interventions.

Method of Content Evaluation and Grading:

1. Completion of hours:
 - a. Rubrics (Therapeutic Exercise, Modalities, Documentation/Communication) graded at end of each 3 week rotation. [60% of Grade]
2. SOAP documentation emailed to director. [15% of Grade]
3. Customized HEP program for given musculoskeletal condition. [25% of Grade]

Completion of assigned observation hours is required to pass this course. In addition, six (6) Weekly email logs will be utilized to assess active observation and participation (100%). One email per week will be sent to the course director, Jeremy Vigneault, in a "SOAP" note format documenting a patient's treatment with *absolute and total HIPPA compliance*.

Grading criteria to be used in the course:

A+=97-100 A=93-96.9 A-=90-92.9 B+=87-89.9 B=83-86.9 B-=80-82.9
 C+=77-79.9 C=73-76.9 C-=70-72.9 D+=67-69.9 D=63-66.9 D-=60-62.9
 F=<60

Professional behavior is expected and if not demonstrated will affect your grade. The instructor should be notified of impending absence. Extended absences must be approved by the Associate Department Head. The University's policies as outlined in the *Academic Integrity in Graduate Education and Research* (Graduate Catalog 2009-2010, p 237-239) will be enforced.

Instructional References Recommended:

Therapeutic Modalities For Musculoskeletal Injuries. Denegar CR, Saliba E, Saliba S.. Champaign, IL. Human Kinetics. 2006.

Resistance training Instruction. Aaberg E, Champaign, IL. Human Kinetics. 2007.

Summary Matrix, Hours and Contact Information:

<u>Instructor</u>	<u>Content</u>	<u>Observation Hours</u>
Clinical Observation	Observational	24

Nayden Clinic Phone: 486-8080

Nayden Clinic Fax: 486-8081

Email: jeremy.vigneault@uconn.edu and jeremy.vigneault@gmail.com

Office Hours are by appointment with Content Instructor

Academic Policies: All students are expected to abide by the academic polices of the University, Graduate School and Physical Therapy Program as related to their conduct in this course (i.e. attendance, academic integrity, professional behavior, etc.

**UNIVERSITY OF CONNECTICUT
DEPARTMENT OF PHYSICAL THERAPY
COURSE SYLLABUS**

Course Title and Number: PT 5463- Internal Integrated Musculoskeletal Clinical Practicum II

Description: This course is an applied musculoskeletal clinical practicum within the Nayden Rehabilitation Clinic. The course is designed to synthesize and apply information obtained from previous courses in a real orthopedic clinical setting.

Department offering Course: Physical Therapy

Semester and Year: Fall 2nd Year 2015

Credit Hours: 2.0

Instructor(s): Jon Rizzo;

Clock Hours: Practicum: Tuesday: 8:30 PM-5:50 PM; Thursday/Friday: 11:30 AM-5:30 PM.

Course Prerequisites: Students must be in good academic standing and be granted consent of the Department to enroll.

Course Objectives:]

1. Communicate effectively with the patient to obtain data relative to impairments in body structure and function, ability to perform necessary physical activities, and participate in normal home, work, and recreational roles..
2. Demonstrate professional behaviors in all situations by displaying initiative, being punctual, wearing appropriate attire, seeking and accepting feedback, and delivering care to patients that demonstrates compassion as well as maintenance of privacy and dignity.
3. Apply the best available evidence to support the management of patients with musculoskeletal dysfunction.
4. Perform examinations on selected patients with musculoskeletal dysfunction.
5. Devise interventions for selected patients with musculoskeletal dysfunction based on their impairments, functional limitations, and disabilities.

Teaching Methods: Participating in direct musculoskeletal physical therapy patient care under a

licensed Physical Therapist as well as corresponding assignments and practical exams based on these patients are the methods utilized in this course.

Learning

Experiences: Primary learning experiences will occur in the clinical setting. Additional learning opportunities occur via assignments and practical exams.

Methods of

Evaluation/Grading:

2 Practical Examinations- 15% each

Concept Map- 15%

Annotated Bibliography- 15%

Clinic mini-CPI Assessment Grade- 40%

Required Reference:

APTA Guide to the Physical Therapist Practice 3.0. Available online at:
<http://guidetoptpractice.apta.org>

Additional Reading:

1. **Orgnero, Vallieres, Bell. (2006). Concept Mapping: A Knowledge Development Strategy Utilizing Principles of Adult Learning. University of Connecticut.**
2. **Zigmont, J. (2007). Concept Mapping: Competency Tools for Effectively Treating Patients. JEMS, 32 (11), 28-32.**

Recommended Texts: Please utilize the internet and other resources as necessary.

Academic Policies: All students are expected to abide by the academic policies of the University, Graduate School and Physical Therapy Department as related to their conduct in this course (i.e. attendance, academic integrity, professional behavior, etc.).

Inclement Weather Policy:

In the event that classes are canceled on the Storrs campus due to weather, students should not report for assigned integrated clinical practicum experiences. If weather compromises safe travel and classes are not canceled, students, course instructors, and clinical instructors are advised to use discretion. In these circumstances, if the student and course or clinical instructor agrees that safe travel is compromised, the assignment for the day is canceled.

Students with Disabilities Policy:

Please contact me during office hours to discuss academic accommodations that may be needed during the semester due to a documented disability. If you have a disability for which you wish to request academic accommodations and have not contacted the Center for Students with Disabilities (CSD), please do so as soon as possible. The CSD engages in an interactive process with each student and reviews requests for accommodations on an individualized, case-by-case basis. The CSD collaborates with students and their faculty to coordinate approved accommodations and services. The CSD is located in Wilbur Cross, Room 204 and can be reached at (860) 486-2020 or at csd@uconn.edu. Detailed information regarding the process to request accommodations is available on the CSD website at www.csd.uconn.edu.

Policy Against Discrimination, Harassment and Inappropriate Romantic Relationships:

The University is committed to maintaining an environment free of discrimination or discriminatory harassment directed toward any person or group within its community – students, employees, or visitors. Academic and professional excellence can flourish only when each member of our community is assured an atmosphere of mutual respect. All members of the University community are responsible for the maintenance of an academic and work environment in which people are free to learn and work without fear of discrimination or discriminatory harassment. In addition, inappropriate Romantic relationships can undermine the University’s mission when those in positions of authority abuse or appear to abuse their authority. To that end, and in accordance with federal and state law, the University prohibits discrimination and discriminatory harassment, as well as inappropriate Romantic relationships, and such behavior will be met with appropriate disciplinary action, up to and including dismissal from the University. More information is available at <http://policy.uconn.edu/?p=2884>.

Sexual Assault Reporting Policy:

To protect the campus community, all non-confidential University employees (including faculty) are required to report assaults they witness or are told about to the [Office of Diversity & Equity](#) under the [Sexual Assault Response Policy](#). The University takes all reports with the utmost seriousness. Please be aware that while the information you provide will remain private, it will not be confidential and will be shared with University officials who can help. More information is available at <http://sexualviolence.uconn.edu/>.

Note: All pertinent materials related to following elements of the class can be found on HuskyCT.

Components:

1. Clinical Experiences

- a. **UCHC Patient Care: Assisting UHC Staff with caseload of musculoskeletal patients. Expectations for progression of clinical skills are as follows:**
- i. **Students will be expected to progress to independent performance of Subjective portion of Initial Evaluations (Practical 1). UHC staff will provide guidance as needed for the Objective portion.**
 - ii. **Students will also be expected to progress to independent performance of returning patient treatment sessions (Practical 2).**

Assessment of students' performance: The Mini-CPI form will be used reciprocally to both rate student performance in the clinic and the experience itself (ability of clinic and CI to provide ample learning opportunities). The Mini-CPI form and corresponding instructions are located on HuskyCT.

Missed sessions: Students may miss one UHC clinical day without needing to reschedule. Only illness or other emergencies are acceptable. The second missed day (and missed days thereafter) needs to be rescheduled through Jon. *Contact Jon if you anticipate missing your session.* He will ensure your CI is notified. Make-up sessions will occur at UHC or the Nayden Clinic depending on availability/scheduling.

2. Assignments

Please submit both assignments electronically by email. Please name the files with the assignment type and your name. (Example: Annotated Bibliography- John Doe.doc). Check schedule below for due dates.

- a. **Annotated Bibliography:**
- i. **An Annotated Bibliography is a list of citations of articles, books, or documents followed by a brief (150 words or less) descriptive and evaluative paragraph, the annotation. The purpose of the annotation is to inform the reader of the relevance, accuracy, and quality of the source cited. The annotation is to give the reader some insight as to whether he or she should read the complete work. Therefore, there is a "critical aspect" of the article that makes it much different than simply writing a summary or an abstract. Some critical aspects could be the author's experience with the topic (has he written about the topic before?), the research methods used for an empirical work (number of subjects, use of control group, etc.), discussion extensiveness (Are there implications for practice stated?, Do they state reasons for unexpected results?). You can also include how individual articles within your AB are similar or different than others you have included. Additional general information on ABs can be found at:**

University) <http://www.library.cornell.edu/olinuris/ref/research/skill28.htm> (Cornell

- ii. **The annotated bibliography assignment will be used as a tool to learn more about a type of patient or condition. You will review 3-5 articles (Year 2000 or later) that relate to a patient you treated at UCHC. For our purposes, each annotation will be 200-250 words. The "theme" of the articles should center on that patient's diagnosis or some other factor tied to it (for example, an impairment that is associated with the diagnosis).**
- i. **Annotated Bibliography Guidelines, Samples, and Rubric are located in HuskyCT**

a. Concept Map:

- i. **Concept mapping was originally developed to help researchers understand how children think while learning. They are to provide a graphical presentation of your thought process to identify the discrete concepts that make up our patient's conditions and the links between those concepts. From a practical perspective, concept maps can contribute to learning of virtually any topic. Instead of memorizing facts or elements discretely, your brain goes through a process of relating the elements for better understanding.**
- ii. **The concept map assignment will require a student to develop a map based on a patient you worked with at UCHC. Components of the map will include the mechanism of injury, pathology, impairments, functional limitations, disabilities, goals, and treatments, but there is NO specific format that students must adhere to. It allows you to be somewhat creative in linking your concepts while staying within the context of evidence-based relationships.**
- iii. **Concept maps can be done by hand, with Microsoft PowerPoint, or with a free application called CMap Tools. The link to download Cmaps is:**

<http://cmap.ihmc.us/conceptmap.html>

The CMaps website also has a lot of additional information regarding construction of concept maps, etc.

- iv. **Concept map Guidelines, Samples, and Rubric are located on HuskyCT**

3. Practical Exams:

a. Interview Practical

For this practical, the student will review a chart for a mock New Patient and conduct a subjective interview based on the information. The student will be expected to document the evaluation (and will have time to finish note following the encounter). The student will be asked questions and will be given feedback following the evaluation. Grading will be based on completeness of the evaluation, professional behaviors, time management, and responses to questions.

i. Interview Practical Guidelines and Rubric are located on HuskyCT

a. Treatment Practical

For the second practical, the student will conduct a treatment session on a mock returning patient. The scenario assumes that the treating therapist is ill, allowing the student to be cast as the “substitute” PT. The student will review the patient’s chart and previous treatment notes before taking the patient through the day’s session. The student can continue or discontinue previous treatments, advance previous treatments, and/or add new interventions. Modification of the treatment depends on the student’s judgment, the mock patient’s answers to questions, and the patient’s response to treatment during the session. The student will be asked questions and will be given feedback following the treatment session. The student will document the session (and will be given time to finish documentation after the session). Grading will be based on the student’s ability to perform interventions and/or instruct on interventions accurately, professional behaviors, time management, and responses to questions.

i. Treatment Practical Guidelines and Rubric are located on HuskyCT

**UNIVERSITY OF CONNECTICUT
DEPARTMENT OF PHYSICAL THERAPY
COURSE SYLLABUS**

Course Title and Number: PT 5464, Musculoskeletal Practicum

Description: Under close supervision by an experienced, licensed Physical Therapist, students will perform all patient management functions for patients in an outpatient orthopedic setting. The course is held off campus at individually assigned clinical facilities throughout the country. Each student is assigned one or two clinical instructors who are physically present and immediately available for direction and supervision. Through this experience, students learn to apply their didactic education to the management of patients with musculoskeletal conditions.

Department offering Course: Kinesiology
Semester and Year: Summer, Second year in the program
Credit Hours: 8

Instructor: Jon Rizzo
Office: Koons, Rm 102
Phone: 486-0020

Clock Hours: Students work approximately 40 hrs/week in a clinical setting

Course Prerequisites: Students must be in good academic standing and be granted consent by the department to enroll

Course Objectives:

In an outpatient orthopedic setting, by the end of the course, the student will:

1. Practice in a safe manner that minimizes risk to patient, self, and others.
2. Demonstrate professional behavior in all situations
 1. Practice in a manner consistent with established legal and professional standards and ethical guidelines
 2. Communicate in ways that are congruent with situational needs.
 3. Adapt delivery of physical therapy services with consideration for patients' differences, values, preferences and needs
 4. Participate in self-assessment to improve clinical and professional performance
 5. Apply current knowledge, theory, clinical judgment and the patient's values in patient management
 6. Determine with each patient encounter the patient's need for further examination or consultation by a physical therapist or referral to another health care professional
 7. Perform a physical therapy patient examination.
 8. Evaluate data from the patient examination to make clinical judgments
 9. Determines a diagnosis and prognosis that guides patient management
 10. Establish a plan of care that is safe, effective, and patient-centered

11. Perform physical therapy interventions in a competent manner.
12. Educate others (patients, family, caregivers, staff, students, other health care providers) using relevant and effective teaching methods.
13. Produce quality documentation in a timely manner
14. Collects and analyzes data from selected outcome measures in a manner that supports accurate analysis of individual patient outcomes
15. Manage resources (e.g., time, space, and equipment) to achieve goals of the practice setting.
16. Directs and supervises personnel to meet patient's goals and expected outcomes according to legal standards and ethical guidelines

Instructional Strategies: Students will spend 10-12 weeks, approximately 40 hours/week managing patients under the immediate supervision of a licensed physical therapist in an outpatient orthopedic setting.

Students are required to participate in weekly internet discussions with the course instructor and their classmates.

Students are required to perform a self assessment at the middle and end of the course.

Students will present a lecture/in-service on an evidence-based topic agreed upon by the student and site staff.

Learning Emphasis Areas:

1. Safety of both self and others
2. Competent performance of initial examinations and development of the plan of care
3. Time management
4. Appropriate use of evidence
5. Appropriate progression of patients

Framing Scenario

By the end of the experience, students will safely and competently manage moderately complex patients independently from admission to discharge.

Their final caseload will be 8-10 visits/day. This will include managing up to 2 patients at a time and timely completion of all documentation and communication.

The student will require mentoring for patients with complex problems or ambiguous clinical presentations.

Evaluation of Student Performance

The Clinical Instructor (CI) will evaluate the student and provide informal feedback to the student throughout the experience. The CI will provide a formal written evaluation using the APTA's on-line Clinical Performance Instrument (CPI) at midterm and at the completion of the practicum.

Students are required to complete a self assessment, using the CPI, at both midterm and at the end of

the experience. The DCE will review all written evaluations. Students and CI's are required to keep the DCE informed regarding progress toward the course objectives. Whenever necessary, the DCE will confer with students and CI's regarding the need for change in their performance and will monitor performance on an ongoing basis.

Students are expected to achieve a score of "entry level" for every CPI criteria.

Grading Criteria: Students are assigned a final grade of S (Satisfactory) or U (Unsatisfactory) by the Director of Clinical Information (DCE). Scores on the CPI, along with all other relevant information will be used by the DCE to provide a course grade. Other relevant information may include, but is not limited to: answers to questions posed by the DCE regarding specific patient interactions involving the student, the DCE's experience with the CI or site, the student's caseload, the student's past academic and clinical performance and the learning emphasis areas for the course. Along with other relevant information, the following CPI scores will be used to describe passing performance; scores below "passing" may result in course failure. Scores that meet the passing criteria may result in a grade of unsatisfactory if the DCE believes that the CI completed the CPI incorrectly.

**UNIVERSITY OF CONNECTICUT
PHYSICAL THERAPY PROGRAM
COURSE SYLLABUS**

Course Title and Number: PT 5466: Internal Integrated Neuromuscular Clinical Practicum

Description: A clinical experience that provides students the opportunity to integrate interventions learned in PT 5456 and PT 5457 in a clinical setting. Students will utilize examination and intervention skills in the development and implementation of plans of care for patients with various neuromuscular conditions.

Department Offering Course: Physical Therapy

Semester and Year: Spring of third year

Credit Hours: 2

Instructor(s):

Justin Laferrier, PT, PhD, OCS, SCS, ATP, CSCS Koons Hall 114 860-486-0017 justin.laferrier@uconn.edu	Deborah Bubela, PhD, PT, PCS Koons Hall 212 860-486-1995 deborah.bubela@uconn.edu
--	--

Clock Hours:

Flexibly in combination with PT 5466 Internal Integrated Neuromuscular Clinical Practicum, classes will be held on Tuesday and Thursday 12:30 – 5:00.

Course Prerequisites: None - Student must be in good academic standing and be granted consent of the Department to enroll.

Course Objectives:

By the end of the course, the physical therapy student will be able to:

1. Integrate normal and abnormal neurological information in the assessment of persons with neurological dysfunction.
2. Identify a variety of outcome measures that have evidence to support their use with persons with neurologic conditions.
3. Select appropriate outcome measures based on a patient's condition and presentation.
4. Administer a variety of outcome measures that are appropriate for persons with neurologic conditions.
5. Collect and analyze data which measures impairments, functional limitations, and disability related information about the client with a neurological dysfunction.
6. Utilize outcome measures to develop treatment plans and long term prognosis of persons with

neurologic conditions.

7. Integrate outcome measure results into physical therapy decisions with an appreciation for the emotional and social realities faced by patients' with neurological problems and their families.
8. Demonstrate appropriate and effective verbal and written communication with respect to patient assessment and intervention.
9. Demonstrate professional behavior during all interactions with patients, families, health care professionals, instructors and peers.
10. Refer patient to access patient services which the therapist is unqualified to provide.
11. Analyze the effectiveness of the patient care provided during throughout the time of the course.
12. Assess personal and professional growth in order to identify continuing education needs.

Teaching Methods:

Teaching methods will include demonstration, psychomotor skill development and repeated practice with peers and persons with a variety of neurologic conditions.

Learning Experiences:

Students will learn about outcome measures and interventions for persons with neurologic conditions through laboratory and clinical experiences. Students will have opportunities to select and administer examinations, develop treatment plans, and deliver interventions for persons with a variety of actual neurological conditions under direct academic and clinical faculty supervision. Pairs of students will rotate through all available participants with neurologic conditions. At least one student will be required to document in a medical chart format within 24 hours after seeing each participant. Students will also be required to verbally describe the participant condition and plan of care to the student therapist who will be delivering the next upcoming session.

Methods of Evaluation/Grading:

Lab Practical I	20%
Assessment and Intervention	50%
Evaluation	} Peer Review	
Progress Notes		
Verbal report - Rounds		
Lab Practical II	25%
Professional Behavior	5%

Texts:

Required

O'Sullivan S & Schmitz T. *Improving Functional Outcomes in Physical Rehabilitation*. F.A. Davis Co. Philadelphia, PA, 2010. ISBN-13: 978-0-8036-2218-0.

O'Sullivan S, Schmitz T, & Fulk GD. *Physical Rehabilitation, 6th Ed.* Philadelphia, PA. F.A. Davis Co. Philadelphia, PA, 2014. ISBN 978-0-8036-2579-2.

Supplemental

Umphred D, Lazaro R, Roller M, & Burton G. *Neurological Rehabilitation, 6th Ed.* Elsevier-Mosby, St Louis, MO, 2013. ISBN 978-0-323-07586-2.

Shumway-Cook A & Woollacott M. *Motor Control Translating Research into Clinical Practice, 4rd Ed.* Williams & Wilkins, Baltimore, MD, 2012. ISBN 9781451117103.

Required Readings: See Outline of Course

**UNIVERSITY OF CONNECTICUT
DEPARTMENT OF PHYSICAL THERAPY
COURSE SYLLABUS**

Course # and Title: *PT 5467, Neuromuscular/Rehabilitation Practicum*

Course Description: Under close supervision by an experienced, licensed Physical Therapist, students will perform all patient management functions for patients in a setting where the team approach is used to improve functional abilities and prevent disability. The course is held off campus at individually assigned clinical facilities throughout the country. Each student is assigned one or two clinical instructors who are physically present and immediately available for direction and supervision. Through this experience, students learn to apply their didactic education to the management of adult patients with neurological conditions, amputations, spinal cord injuries and other diagnoses requiring relatively lengthy rehabilitation services.

Credit Hours: 8

Instructor: Jon Rizzo

Office: Koons, Rm 102

Phone: 486-0020

Clock Hours: Students work approximately 40 hrs/week in a clinical setting

Course Prerequisites: Students must be in good academic standing and be granted consent by the department to enroll

Course Objectives (From CPI, APTA, 2006):

In a setting using a team-based approach to management of patients with neuromuscular and other disabling conditions, the student will:

1. Practice in a safe manner that minimizes risk to patient, self, and others.
2. Demonstrate professional behavior in all situations
3. Practice in a manner consistent with established legal and professional standards and ethical guidelines
4. Communicate in ways that are congruent with situational needs.
5. Adapt delivery of physical therapy services with consideration for patients' differences, values, preferences, and needs
6. Participate in self-assessment to improve clinical and professional performance
7. Apply current knowledge, theory, clinical judgment, and the patient's values and perspective in patient management
8. Determine with each patient encounter the patient's need for further examination or consultation by a physical therapist or referral to another health care professional
9. Perform a physical therapy patient examination using evidence-based tests and measures

10. Evaluate data from the patient examination (history, systems review, and tests and measures) to make clinical judgments
11. Determine a diagnosis and prognosis that guides future patient management
12. Establish a physical therapy plan of care that is safe, effective, patient-centered, and evidence-based
13. Perform physical therapy interventions in a competent manner
14. Educate others (patients, caregivers, staff, students, other health care providers, business and industry representatives, school systems) using relevant and effective teaching methods
15. Produce quality documentation in a timely manner to support the delivery of physical therapy services
16. Collect and analyze data from selected outcome measures in a manner that supports accurate analysis of individual patient and group outcomes
17. Participate in the financial management (budgeting, billing and reimbursement, time, space, equipment, marketing, public relations) of the physical therapy service consistent with regulatory, legal and facility guidelines.
18. Direct and supervise personnel to meet patient's goals and expected outcomes according to legal standards and ethical guidelines

Instructional Strategies: Students will spend 10-12 weeks, approximately 40 hours/week managing patients under the immediate supervision of a licensed physical therapist in a comprehensive rehabilitation setting. Students are required to participate in weekly online discussions with the course instructor and their classmates. Students are required to perform an online self assessment at the middle and end of the course. Students will present a lecture/in-service on an evidence-based topic agreed upon by the student and site staff.

Learning Emphasis Areas:

1. Safety of both self and others
2. Effective participation in the team approach
3. Management of patients for a relatively long period of time while developing engaging and effective interventions
4. Appropriate use of evidence

Framing Scenario

By the end of the experience, students will safely, competently and independently manage patients with both non-complex and complex conditions.

The student may consult others to resolve unfamiliar or ambiguous situations.

The student will efficiently manage a caseload of 4-6 inpatients or 6-10 outpatients while completing all tasks on time.

Evaluation of Student Performance

The Clinical Instructor (CI) will evaluate the student and provide feedback throughout the experience. The CI will provide formal written feedback using the APTA's on-line Clinical Performance Instrument (CPI) at midterm and at the completion of the practicum. Students and CI's are required to keep the DCE informed regarding progress toward the course objectives. The DCE will confer with students regarding the need for change in their performance. Students are required to complete a self assessment, using the CPI at both midterm and at the end of the experience.

Students are expected to achieve a score of "entry level" for every CPI criteria.

Grading Criteria: Students are assigned a final grade of S (Satisfactory) or U (Unsatisfactory) by the Director of Clinical Information (DCE). Scores on the CPI, along with all other relevant information will be used by the DCE to provide a course grade. Other relevant information may include, but is not limited to: answers to questions posed by the DCE regarding specific patient interactions involving the student, the DCE's experience with the CI or site, the student's caseload, the student's past academic and clinical performance and the learning emphasis areas for the course.

Along with other relevant information, the following CPI scores will be used to describe passing performance; scores below "passing" may result in course failure.

**UNIVERSITY OF CONNECTICUT
DEPARTMENT OF PHYSICAL THERAPY
COURSE SYLLABUS**

Course Title and Number: PT 5469 Integrated Acute Care Practicum

Description: This course provides students with clinical experience at hospitals and sub acute health care facilities. Students will observe and will assist as appropriate with patient care under the supervision and direction of a licensed physical therapist. The course allows students to integrate and apply the didactic component of the curriculum in an acute or sub acute environment. It is designed to foster the student's appreciation for the multidisciplinary nature of hospital care.

Department Offering Course: Kinesiology: Program in Physical Therapy

Year and Term: First Year, Third Term

Credit Hours: 1.0

Instructors: Staff

Clock Hours: Tuesday 8:30-10:30 or Thursday 8:30-10:30

Course Prerequisites: Students must be in good academic standing and be granted consent of the Program to enroll.

Course Objectives:

By the end of the course, the physical therapy student will:

10. Display professional behaviors consistent with those identified by the Physical Therapy Program, the University of Connecticut, and the American Physical Therapy Association.
2. Analyze the role of the physical therapist with consideration of other relevant team members in the acute care setting.
3. Demonstrate basic skills needed for management of a non-complex patient (e.g. systems review, examination, intervention, communication and documentation).
4. Perform all items on clinical performance checklist (e.g. positioning, transfers, mobility training, transport, and management of equipment).
5. Evaluate the evidence for examination procedures used to diagnose and evaluate patients in the acute care setting.
6. Practice in a safe manner that minimizes the risk of patients, self and others.
7. Assess patient response to care.
8. Comply with all policies and procedures defined in Clinical Education Policies and Procedure Student Manual including but not limited to health policies, professional behavior and patient and facility rights.

Teaching Methods: **Observation and practice under the direction/supervision of a physical therapist.**

Learning Experiences: **Students will observe and participate when appropriate in the examination and treatment of patients with a variety of acute care disorders at designated health care facilities. Students will be provided with the opportunity to observe and participate as appropriate in various aspects of acute health care, primarily physical therapy examination and intervention, with particular attention to safe patient care and mobility in the acute care setting.**

Method of Content Evaluation and Grading:

Grading criteria: **Students are assigned a final grade of S (Satisfactory) or U (Unsatisfactory) by the Course Coordinator. A student must complete the following requirements in order to receive a (S) Satisfactory grade in this course:**

- 4. Completion of hours and successfully complete all activities on the clinical performance checklist:**
 - **Documentation of required observations/activities verified by supervising clinicians must be submitted to the Course Coordinator at the end of each 4 week rotation.**
- 5. Participation in weekly email discussion with classmates and Course Coordinator: Specific required assignments emailed to the Course Coordinator will include evidence of the ability to document a patient care session in a “SOAP” note format with *absolute and total HIPPA compliance* and a discussion of evidence for examination procedures used to diagnose and evaluate patients in the acute care setting.**

The instructor should be notified of impending absence. Extended absences must be approved by the Program Director. The University’s policies as outlined in the *Academic Integrity in Graduate Education and Research* (<http://catalog.grad.uconn.edu/academicintegrity.html>) will be enforced.

STUDENT READINES FOR CLINICAL EDUCATION

FACULTY EVALUATION

STUDENT _____ **DATE** _____

Please describe your impressions regarding the student's performance by indicating whether you agree or disagree with the statements below. Please consider all representative behaviors before answering.

Agree /Disagree

1. The student demonstrates professional and ethical behavior _____

Representative behaviors:

- Takes responsibility for own actions
- completes scheduled assignments in a timely manner
- demonstrates initiative
- demonstrates integrity in all interactions
- values dignity of patients as individuals

2. The student demonstrates safe practice _____

Representative behaviors:

- establishes a safe working environment (eg removes obstacles in patients' way)
- demonstrates awareness of contraindications and precautions for each patient
- recognizes physiological and psychological changes in patients
- uses acceptable techniques for safe handling of patients (eg body mechanics, guarding)

3. The student communicates effectively _____

Representative behaviors:

- verbal and nonverbal communication is appropriate for the situation
- initiates communication in difficult situations
- interprets and responds to nonverbal communication of others
- communicates in ways patients can understand
- accepts feedback without defensiveness

4. The student's clinical skills are at an expected level _____

Representative behaviors:

- presents a cogent and concise arguments for clinical decisions
- demonstrates an ability to make clinical decisions in ambiguous situations
- obtains a complete patient history
- performs appropriate systems review
- selects and conducts tests and measures consistent with patient's history and chief complaint
- makes correct clinical judgments
- synthesizes examination data and establishes correct diagnosis
- establishes a safe and effective plan of care
- performs interventions effectively, efficiently, fluidly and in a technically competent manner

4. The student is expected to have no significant problems _____

- consider any behaviors not included above

Comments:

DOCTOR IN PHYSICAL THERAPY PROGRAM
AFFILIATION CALL REQUEST
(a.k.a.: the Yellow Sheet)

NAME _____ DATE _____

Instructions for this form:

- **CAREFULLY REVIEW THE INFO IN THE SITE'S FILE FIRST!!!**
- *Can be used for first choices ONLY*
- *If the site agrees to place you, you WILL be going there—NO TAKE BACKS*

Facility name (*As it appears on the contract list*):

Address, Phone, Website:

Contact Name (if available), Phone & Email:

Rotation # -- Check One:

- #1 (July-Sept 10 weeks) #2 (Oct-Dec 11 weeks) #3 (Jan-April 12 weeks)

Characteristics which would make you more attractive to this facility (i.e., you are an ATC, have been an aide, are from that city or wish to move there, etc.):

Do not write in the space below

DOCTOR IN PHYSICAL THERAPY PROGRAM
CLINICAL PLACEMENT REQUEST FORM
(a.k.a.: the Pink Sheet)

NAME _____ Lottery # _____

Local Address:

Home Address (if different):

Cell Phone:

Best Email:

For 2nd & 3rd Rotations

Site of 1st Clinical (July-Sept): _____

Site of 2nd Clinical (Oct-Dec): _____

List ALL viable choices for your clinical practicum site, in descending order. Be sure that the site has offered us a slot. The later your number, the more choices you should provide (*up to 8*).

1) _____

5) _____

2) _____

6) _____

3) _____

7) _____

4) _____

8) _____

Do not write in the space below

PHYSICAL THERAPY PROGRAM

PERSONAL PROPERTY WAIVER

I understand that during clinical experiences the assigned clinical education agency is not responsible for loss or damage to my personal property.

Student's Name:

(print clearly)

Signature:

PeopleSoft ID#:

Date:

PLEASE return this form to the attention of

Rachel Chasse-Terebo

Koons Room 111A

Physical Therapy Program

358 Mansfield Road, Unit 2101

Storrs, CT 06269-2101

PHYSICAL THERAPY PROGRAM
MEDICARE EXCLUSION WAIVER

I have never been convicted of a criminal offense related to health care and/or related to the provisions of services paid for by Medicare, Medicaid or another federal health care program. I further attest that I have not been excluded from participation in any federal health care program, including Medicare and Medicaid. In addition I am not the subject of a disciplinary action resulting in revocation or suspension of any license, certification, permit or other approval necessary to perform my clinical duties.

Student's Name:

(print clearly)

Signature:

PeopleSoft ID#

_____ **Date:** _____

Permanent Address:

**PLEASE return this form to the attention of
Rachel Chasse-Terebo
Koons Room 111A
Physical Therapy Program
358 Mansfield Road, Unit 2101
Storrs, CT 06269-2101**

Release and Authorization for Use or Disclosure of Protected Health Information

Student Name _____

Date of Birth _____

PeopleSoft ID # _____

I hereby authorize the University of Connecticut Doctor of Physical Therapy Program to use or release my medical information and to disclose a copy of the specific health information identified below to any agency requiring said information for students to have learning experiences in their facilities.

As per my request, the purpose of this disclosure is for documentation of my health in order for me to participate in educational experiences conducted by the University of Connecticut. By signing below, I specifically authorize the use or disclosure of the following health information:

- ✓ Immunization reports, titers or documentation of disease incidence for measles, mumps, rubella, varicella, tetanus-diphtheria(within 10 years) and hepatitis B;
- ✓ Meningococcal vaccine and flu vaccine;
- ✓ Physical examination including urinalysis and blood work for Hemoglobin and Hematocrit
- ✓ Tuberculosis blood tests or TB skin tests;
- ✓ Influenza, if applicable.

The following items must be initialed to be included in this request for use or disclosure:

- | | |
|--|--|
| <input type="checkbox"/> HIV/AIDS related information | <input type="checkbox"/> Drug & Alcohol treatment information |
| <input type="checkbox"/> Mental health information | <input checked="" type="checkbox"/> Background Check information |
| <input checked="" type="checkbox"/> Drug screening information | <input checked="" type="checkbox"/> Fingerprinting information |

I understand that disclosure of this information carries with it the potential for unauthorized re-disclosure, and once information is disclosed it may no longer be protected by federal or state privacy regulations. I hereby expressly release, discharge and hold harmless the University of Connecticut and the State of Connecticut, and any employees, officials and successors of these entities, from any and all claims or liabilities which I may have or assert have arisen from the release or disclosure of my medical information. I expressly intend that this release binds me, if I am alive, and my estate, family, heirs, administrators, personal representatives or assigns, if I am deceased. I expressly acknowledge that this release is a covenant not to sue the University of Connecticut or the State of Connecticut, or their officials or employees or their successors.

I understand that I may revoke this authorization at any time, provided that I do so in writing, except to the extent that action has already been taken upon this authorization. This release and authorization remains valid unless revoked in writing.

This release is valid for the entire time that I am pursuing a DPT degree at the University of Connecticut.

Signature of Student

Print Name

Date Signed

Letter sent to clinical site before student arrival
DOCTOR IN PHYSICAL THERAPY PROGRAM

To: CCCE name
Address
City, state

From: DCE
Physical Therapy Program
358 Mansfield Road, Unit 1101
Storrs, Connecticut 06269-1101
Phone: (860) 486-0020
E-mail: jon@uconn.edu
Fax: (860) 486-1588

Dear CCCE:

Enclosed are the materials your clinical instructor **CI NAME** will need for the upcoming outpatient orthopedic clinical practicum from **DATES** for **STUDENT NAME** in your **LOCATION** clinic.

In this packet you will find the following:

1. Instructions for the online Clinical Performance Instrument for CIs
2. Student requirements for in-service/case presentation (*blue*)*
3. Weekly planning forms (*yellow*)*
4. Course description for the Musculoskeletal Practicum

****Please mail the blue and yellow forms back at the end of the student's affiliation in the envelope provided.***

On **DATE** I emailed you **STUDENT's**:

- Student Data Form
- Health records, including immunizations
- Criminal Background Letter of Attestation from YEAR
- Evidence of current CPR training and health insurance coverage
- Proof of instruction in OSHA (Blood-borne Pathogens) and HIPAA
- Medicare Exclusion and Personal Property Waivers

As well as our:

- 2014 UConn Certificate of Liability Insurance
- DPT Program Guiding Principles, Policies and Procedures

If anything is missing or you have questions, please call us.

Rachel C. Chassé-Terebo
860.486.1854 or rachel.chasse@uconn.edu

As always, we appreciate your support of UConn's DPT Program

**PHYSICAL THERAPY PROGRAM
INSERVICE/CASE PRESENTATION**

All students are required to complete and present an oral in-service presentation during each of their affiliations.

Prior to the fourth week of the affiliation, the CI and the student should choose a topic of interest to both the facility staff and the student. The topic is expected to be one where recent evidence can be used to assist staff in clinical decision-making. The student is expected to present new, evidence-based information to the audience. It is generally expected that the presentation will take about an hour including all questions and discussions. The student is responsible for providing handouts, including a bibliography and outline, to all participants. The Director of Clinical Education (DCE) may ask to be present for the presentation.

This presentation is an important part of the University of Connecticut curriculum. If questions arise regarding this assignment it is imperative that the student and/or CI call the DCE as soon as possible.

A separate evaluation form for the student's presentation is enclosed, please be sure to review it while planning the session with the student. Multiple copies have been provided so that everyone in the audience can evaluate the presentation.

PHYSICAL THERAPY PROGRAM

INSERVICE EVALUATION FORM

STUDENT _____ DATE _____

TOPIC _____

Agree Disagree

1. The student chose a topic that was of interest to the audience. _____

2. Use of Evidence:

a) The student presented recent evidence which may be useful in clinical decision making _____

b) The student provided a well-researched rationale for patient management choices _____

c) The bibliography was complete _____

3. Presentation Skills:

a) A clear and complete outline was provided _____

b) Educational objectives were appropriate and clear _____

c) The student articulated his/her ideas in a clear and logical way _____

d) The student demonstrated a thorough knowledge of the content _____

e) Tone and inflection were effective _____

f) Questions were answered appropriately _____

COMMENTS:

PROTECTION OF STUDENTS AND STAFF FROM DISCRIMINATION AND HARASSMENT DURING OFF-CAMPUS EXPERIENCES

It is necessary for students in many programs to complete practica or internships within outside organizations. Employees also may be assigned to work at external sites as a part of their job duties. The University's legal and ethical obligations to protect the civil rights of students and staff extends to those settings.

Below are policy guidelines developed in cooperation with several Deans whose students customarily complete practica with other agencies as part of their academic programs. Your cooperation in administering the guidelines is appreciated. Should you need advice or assistance, please consult with the Office of Diversity and Equity (860-486-2943)

I. Inclusion of University Policies in Contracts or Agreements with External Agencies.

A. All contracts with suppliers of services must include reference to the Governor's Executive Orders 3 and 17, and specific language is required. These Executive Orders cover nondiscrimination, as does C.G.S. Section 4a-60.

B. Other sections of the statute govern the conduct of state agencies in their normal functions.

1. C.G.S. Section 46a-71 prohibits discrimination in the delivery of service; forbids state agencies to become parties to agreements with entities that discriminate (or fail to bar discrimination); requires state each State agency to analyze all of its operations to ascertain possible instances of noncompliance with the policy sections 46a-70 to 46a-78, inclusive, and to initiate comprehensive programs to remedy any defect found to exist; and requires every State contract or subcontract for construction on public buildings or for other public work or for goods and services to conform to the intent of Section 4a-60.

2. C.G.S. Section 46a-75 prohibits discrimination in the provision of educational and vocational programs; require state agencies to encourage the fullest development of students' or trainees' potential, and encourage expansion of training opportunities under these programs so as to involve larger numbers of participants from those segments of the labor force where the need for upgrading levels of skills is greatest. The statutes do not require that contracts, agreements, memoranda of understanding, et cetera, include reference to B (1) & (2). We prefer to include a brief reference to these obligations to assure that the agencies with whom we deal are well informed of the University's commitment to its statutory obligations.

C. The President's policies on nondiscrimination, affirmative action, and discriminatory harassment should be made a part of such contracts. It suffices to attach the most current versions to the agreements.

II. Internal Procedures for University Unit Entering Agreements.

- A. The school/unit should receive and review assurance that the external agency has strong nondiscrimination policies and complaint procedures.
- B. Each out-placed student should be advised of his or her civil rights, including the right to be free of racial, religious, and sexual harassment; and should be informed of the existing mechanisms for handling complaints in these areas.
- C. The Dean or Director should appoint a staff member to serve as chief contact person or advisor for, (a) reviewing civil rights policies and procedures noted in II (A) and (B) above, and (b) pursuing complaints filed as per II (D) & (E). The identity of the individual fulfilling a similar role in the external agency should be known to school officials and students.
- D. Procedures regarding handling complaints of discrimination and harassment registered by our students should be articulated and, preferably, made a part of the agreement.
- E. Complaint procedures should be formal (i.e., consistent, fair, and amenable to review) and should include the following elements:
1. Publication of the appointed staff person's identity (noted in II (C) above).
 2. Means by which an aggrieved person may file a complaint, formal or informal, and may inform the unit of his or her desired resolution.
 3. Means by which the school/unit may be assured that the complaint is treated properly by the external agency. "Properly" is defined as the standard for remedies imposed in similar complaint situations filed against an internal party.
 4. Protection of the complainant from retaliation must be assured.
- F. Formal and informal complaints should be recorded in a manner that allows the unit to review agencies' conduct in this area prior to renegotiating agreements.
- G. ODE is to be consulted on a case-by-case basis. If an employee of the University is accused of discriminatory conduct, ODE must be apprised of the complaint. ODE may handle these complaints itself or may advise the designated representative of the school or unit.

Reviewed: 11-03

**PHYSICAL THERAPY PROGRAM
WEEKLY PLANNING FORM**

Instructions for the clinical instructor:

This form should be used weekly for planning the student's learning experience. Please complete all sections, give it to the student, and arrange a time to discuss it toward the end of each week. The student should be encouraged to have input into the objectives for the upcoming week.

At the end of the affiliation, please return all forms to the DCE with the other materials.

Affiliation week number: _____

Accomplishments this week:

Last week's objectives were: _____met _____partially met _____not met

Comments:

Objectives for next week:

CI's signature: _____ Date: _____

Student's signature _____ Date: _____

CLINICAL PRACTICUM
STUDENT PROGRESS EVALUATION

STUDENT: _____ **DATE:** _____ **Week #:** _____

SITE: _____ **CI:** _____

Method (Circle): Phone call Site Visit

Reason (Circle): Routine Site Request Student Request Problem(Describe: Part VI)

Type (Circle): Acute Ortho Rehab
Specialized: _____

Part I- CPI

1. Has the CI read his/her rights and responsibilities? Y N (discuss if No)
2. Has CI worked with a UConn student before? Y N
3. Has CI used CPI before? Y N (instruction required?)

Part II- Patient Care

1. Caseload & Supervision:

- a. How many patients does CI usually see in an average day? _____
Is this same caseload now being shared with the student? Y N
- b. How many patients is the student primarily responsible for? _____
- c. CI Level of supervision (Circle one):
Less than Expected Appropriate More Than Expected

2. Diagnoses of patients seen (Circled item= common diagnosis/satisfactory performance, Line through item= care of diagnosis needs improvement):

Acute Care: Jt Replace; Med Surg (Cardiac, Pulm); Spine post-op (laminectomy, etc); Fx care, Falls; Deconditioning; Pneumonia; Trauma; Neuro (Stroke, Park., MS, ALS);
other: _____

Orthopedic: Spine Dx: post-op, Fx, disc, stenosis, fusion, other: _____

UE Dx: post-op, Fx, soft tissue injury, dislocation, other: _____

LE Dx: post-op, Fx, soft tissue injury, other: _____

Other Dx: Vertigo, Women's Health, Jt Replace, other: _____

Neuro/Rehab: SCI, CHI/TBI, CVA, Trauma, Parkinson's, M.S., ALS, other: _____

3. Clinical Skills Required (Circled item= common intervention/satisfactory performance, Line through item= intervention skill needs improvement):

- a. Initial examination: ROM, MMT, History, Vitals, Special Tests, Mobility/Gait Assessment, Cognition, Outcome Measures, other: _____
- b. Evaluation/Synthesis of findings:
- c. Interventions: Exercise, Manual, Gait and Transfer Training, Modalities, Patient Education, Progression/Creativity, other: _____
- d. Discharge plans: Reasoning regarding “when”, destination, education of patient and caregivers, other: _____
- e. Communication: General initiation, interprofessional, supervisory
- f. Documentation (circle one):
 - Less help needed Appropriate More help needed
 - Paper EMR

Part III- Strengths and Challenges

Strengths	Challenges

Part IV- Learning Opportunities

- 1. In-service:
 - Topic: _____ Date: _____
- 2. Additional Learning Opportunities (Circle any that apply):
 - Surgery Interprofessional Care/Co-treat Special Units (ICU, pediatrics)
 - Special Interventions (aquatic, O & P, home eval, wheelchair eval)
 - Other: _____

Part V- Additional Information Provided

- a. Description of the curriculum Y N
- b. Framing scenario described Y N
 - Does the CI or student have concerns about whether the student will perform as described in the scenario? (if yes, describe in Part VI) Y N
- c. Passing criteria for the course Y N
 - Does CI have concerns about whether the student will meet the criteria? Y N
- d. “Entry Level” definition discussed Y N
- e. Is there anything the site/CI needs in order to improve their clinical education program?

Part VI- Clinical Performance Issues/Problems (if any)

1. Description:

2. Plan:

3. Follow-up:

a. Resolved? Y N

b. Further Actions Needed? Y N

Describe actions:

**PHYSICAL THERAPY PROGRAM
CRITICAL INCIDENT REPORT**

STUDENT _____

TODAY'S DATE _____ **DATE OF INCIDENT** _____

INSTRUCTIONS: *CI's should use this form whenever a student demonstrates significantly problematic behavior or problem behaviors that have continued after attempts at correction. A new form should be used for each occurrence and faxed to the Clinical Compliance Coordinator at (860)486-1588. Please describe what you observed (e.g. patient fell), what the student did wrong (e.g. did not use a gait belt) and the consequences if the behavior continues (e.g. if it happens again, ACLINICAL COMPLIANCE COORDINATOR will be asked to visit). The student should be allowed to respond, if he/she wishes, on a separate sheet that will be attached to this one.*

PERFORMANCE OBSERVED:

PROBLEM PERFORMANCE:

CONSEQUENCES/PLAN:

STUDENT SIGNATURE _____
(Signature Denotes that you have read and understood)

CLINICAL INSTRUCTOR _____

PT CPI Web 2.0 Instructions for Students

Login to PT CPI Web 2.0 at <https://cpi2.amsapps.com>

1. Your username is your email address provided to the school you are working with.

2. If you had a password in PT CPI Web 1.0, it should still work in 2.0. If you did not have a password, or forgot your password, please click on the 'I forgot or do not have a password' link and follow the instructions to set/reset your password.

PLEASE NOTE:

Make sure to close out of any internet browsers containing PT CPI Web 2.0 prior to a Clinical Compliance Coordinator using the link in your email as this may result in an error when trying to set/reset your password.

Update Information (*If you've previously have done this, please go to Editing the CPI*)

1. Click on the 'My Info' tab to update your information. You must update the APTA Data Release Statements found in the Data Authorization section.

2. When you are done editing, hit 'Update'.

Verify APTA Training/Start the CPI (*If you've previously have done this, please go to Editing the CPI*)

1. Click on your site's name in the 'My Evaluations' section on your home page or click on the Evaluations tab and then hit 'Edit'.

2. You are prompted to verify if you have completed the APTA PT CPI Training. If you have completed the training, please click the 'I have completed the APTA PT CPI online training and assessment.' button.

a. If you have not completed the training, please follow the directions on the page to take the APTA PT CPI Training.

b. If the email address you took the training with is different than your username, you will be prompted to enter the email address registered with APTA.

c. If you are having issues verifying you've completed the training, please contact PT CPI Web Support at ptcpiwebsupport@academicmanagement.com. Please provide your name, email address used to take the training, and the date you passed the training.

Editing the CPI

1. Once you have verified you have completed the APTA PT CPI Training, you will see all 18 sections of the CPI.

a. You can edit one section at a time by clicking on 'Edit Now' to the right of the CPI.

b. You can edit all sections at the same time by clicking on 'Edit All' at the top of the Edit column.

2. Click on 'View Sample Behaviors', 'View Introduction', and 'View Instructions' to view the details of how to fill out the CPI.

3. Mouse over any underlined word to view an APTA glossary definition. This is available for the Performance Dimensions and the Anchor Points on the APTA Rating scale.

If you have any questions, comments or run into any issues using PT CPI Web, please contact Support at ptcpiwebsupport@academicmanagement.com.

4. Add comments to the comment box and select the rating for the student on the slider scale.

5. When you are done editing a section, click on the 'Section Sign Off' box and hit 'Save'.

Be sure to save your work!! If you leave the page without saving, your comments could be lost!!

Signing off on the CPI

1. Once all sections are marked as 'Completed', please sign-off on your CPI. You can signoff on the CPI by clicking on the 'Evaluations' tab and clicking on the 'Sign Off' link.

2. Once you sign off on your CPI, you are unable to edit it further. Your CI will be able to see your CPI only if they have also signed off on their CPI.

Viewing your CPI with your CI and Signing-Off on your CI's CPI

1. Click on the 'Evaluations' tab.

2. Click on 'View' in the Actions column.

3. Use the filters to see the comments from both student and CI at once.

4. In the 'Evaluations' tab you will see a link to sign-off on your CI's CPI indicating you've discussed the performance with your CI.

Additional Features:

Adding Post-Assessment Comments to the CPI:

1. In the 'Evaluations' tab you will see a link to sign-off on your CI's CPI indicating you've discussed the performance with your CI. Once you and your CI have signed-off on each other's CPI, you can add overall comments by clicking on 'View' and adding comments

**DPT PROGRAM
Student Evaluation of the DCE/ACCE**

Directions: The purpose of this evaluation is to assist the DCE/ACCE in the assessment of his/her performance and to improve the clinical education program. Please rate performance on a scale of 1 to 5 as described below by circling your response; additional comments can be added in the space provided. The form should be returned to Rachel Chasse-Terebo who will summarize the information for review by the DCE/ACCE and the Director. The DCE/ACCE will *NOT SEE* individual evaluation forms.

N	1	2	3	4	5
does Not	Strongly	Disagree	Neutral	Agree	Strongly
Apply	disagree				agree

Part I: Planning for your practicum

Please check to whom your comments relate: **Sue Glenney** **Jon Rizzo**

Information about available clinical sites was disseminated in an effective and timely manner.	N	1	2	3	4	5
Adequate information (file and verbal) about clinical sites allowed me to make informed selections.	N	1	2	3	4	5
I was provided with an opportunity for individual counseling prior to making my selection.	N	1	2	3	4	5
The DCE/ACCE was approachable and supportive throughout the clinical placement process	N	1	2	3	4	5

Part II: Preparation for your practicum

Please check to whom your comments relate: **Sue Glenney** **Jon Rizzo**

I was given adequate orientation to the policies and procedures related to clinical education	N	1	2	3	4	5
Expectations for my clinical performance were made clear.	N	1	2	3	4	5
The DCE/ACCE provided me with adequate means to contact her during my clinical experience.	N	1	2	3	4	5

Part III: Interactions during your practicum

Please check to whom your comments relate: Sue Glenney Jon Rizzo

I was contacted as often as was needed .	N	1	2	3	4	5
I was encouraged to share any issues or concerns I had during this clinical experience.	N	1	2	3	4	5
Help was provided to address any concerns I had during this clinical experience.	N	1	2	3	4	5
Appropriate attempts were made to facilitate the resolution of any conflicts which were encountered during this clinical experience.	N	1	2	3	4	5
Help was provided in a timely manner.						
Problems with my site/CI were managed effectively						

During my clinical Sue Glenney Jon Rizzo

Made a: site visit phone call neither

YOUR COMMENTS ARE APPRECIATED!!!

(please feel free to use the back of this page)