



OHIO
UNIVERSITY

Ohio University – Division of Physical Therapy

Student Policy and Procedure Manual

For the Class of 2021

May, 2018

TABLE OF CONTENTS

Preface	2
Mission Statement.....	2
Curricular Philosophy	2
Policy Concerning Accreditation	3
Curricular Goals.....	3
Essential Functions.....	5
Professional/Ethical Behavior.....	6
Curricular Information.....	7
Grading.....	11
Examinations.....	12
Retention/Dismissal Policy	16
Curricular Deceleration.....	22
Facility and Equipment.....	23
Student Responsibilities In The Laboratory	24
Student Research.....	25
Student Grievance.....	26
Academic Advisement.....	27
Intellectual Property.....	27
Part-Time Status	28
Leave Of Absence	28
Class Responsibilities	29
Clinical Treatment by Faculty.....	30
Work Outside of Division.....	30
Graduate Assistantship	30
Disability, Accommodations, Health and Wellness.....	31
Medical Emergencies.....	31
Licensure.....	32
Nondiscrimination	33
Confidentiality	33
Revision Of The Policy And Procedure Manual	34
Mission and Philosophy of Clinical Education	35
Description of Clinical Education	35
Clinical Education Definitions	35
Roles and Responsibilities of Participants	37
Student Requirements.....	39
Criminal Background Check	40
Health Requirements.....	41
CPR.....	42
Dress Code.....	43
Attendance	43
Clinical Affiliates	44
Communication with Clinical Affiliates	46
Clinical Experiences	48
Introductory Letter	49
Registering for Clinical Education Courses	49
Grading	50
Practicum Visits	53
Student Withdrawal Policy	55
Statement Concerning Disability.....	55

PREFACE

This manual is designed for students enrolled in the College of Health Sciences and Professions, School of Rehabilitation and Communication Sciences, Division of Physical Therapy. The policies and procedures presented here apply to the entire academic curriculum of the program, i.e. didactic and clinical education portions.

All physical therapist students are expected to use these policies and procedures **throughout** their participation in the professional curriculum. This manual applies to your class year. These policies will be reviewed at least annually by faculty and students and will be revised as necessary.

DIDATIC EDUCATION POLICIES AND PROCEDURES

I. MISSION STATEMENT:

The School of Physical Therapy is dedicated to excellence and leadership in preparing future physical therapists with the knowledge, behavior, and skills required to function as movement specialists within the diverse roles of the contemporary health care environment. We provide students (entry-level and post-professional residents) with the foundation to become expert clinicians through rigorous preparation built upon evidence-based practice principles, critical thinking, altruism, integrity, ethical conduct, and professional responsibility. Faculty, students, and residents engage in the generation and dissemination of research and scholarship that advances the practice of physical therapy. We strive to enrich the community through clinical outreach.

II. CURRICULAR PHILOSOPHY

The faculty believes that students are individuals with unique characteristics and attributes. This diversity of knowledge and life experiences enhances the teaching-learning process by stimulating discussion and emphasizing multiple perspectives. Graduates are expected to be generalists who are capable of functioning in any health care environment as movement specialists. We are committed to producing a graduate who is a critical thinker, a lifelong learner, a teacher, a communicator, and a problem solver, as well as one who respects the rights and dignity of all patients/clients and health care team members.

The curriculum is planned so that experiences progress from simple to complex. Students are encouraged to develop habits of critical inquiry and use of evidence as a basis for practice. We believe that the combination of case studies, lectures, laboratory experiences, and clinical experiences cultivates the knowledge and skills required of competent physical therapists. Our dynamic curriculum enables students to explore specific areas of interest while maintaining a commitment to the basic and clinical sciences, and applying that information to the development of a rationale for examination, assessment, diagnosis, prognosis, intervention, documentation of outcomes, and prevention of risk. We expect students to be active learners and to apply current learning with past learning, as each course in a series builds upon the previous one. To facilitate independent learning and encourage a problem solving approach, the faculty believes that students should participate in early part-time and full-time clinical experiences during the didactic portion of the curriculum. This goal is achieved, in part, in conjunction with Ohio University Therapy Associates (OUTA), a group of clinicians affiliated with the School of Rehabilitation and Communication Sciences, who serve southeastern Ohio and mentor our students. We believe that students should have the opportunity to participate in the research process through working with faculty mentors in their labs.

Faculty believe that through this exquisite balance between scholarly and clinical preparation, we produce a graduate who is an ethical and effective member of an interdisciplinary team which includes the patient, family, and other professionals and who is able to accept the challenge of an ever-changing health care delivery system.

III. POLICY CONCERNING ACCREDITATION

Many programs within the College of Health Sciences and Professions have the requirement that the program is accredited by a national organization. The accrediting body for the Division of Physical Therapy is the Commission on Accreditation in Physical Therapy Education (CAPTE). In order to sit for the licensing examination in the profession of physical therapy, the students must have graduated from a program which is accredited by this body.

Because of the profound importance of accreditation to our students, it is incumbent on the administration of the division and the college to do all that is necessary to continue to participate in the accreditation process. It is the specific responsibility of the Program Director (Associate Director of Physical Therapy), in concert with the Director of the School of Rehabilitation and Communication Sciences, the Dean of the College of Health Sciences and Professions, and the Executive Vice-President and Provost of Ohio University, as the chief academic officer, to make certain that the program remains in good standing with CAPTE. Further information about accreditation can be found on the CAPTE website:
www.capteonline.org.

IV. CURRICULAR GOALS

A. The student will be able to assume the role of a competent clinician in the contemporary health care environment

- a. The student will examine, evaluate and assess a patient to be able to formulate a physical therapy diagnosis and prognosis based on history, signs and symptoms
- b. The student will plan and implement an appropriate plan of care with regard to effectiveness, reimbursement constraints, and accessibility of physical therapy services
- c. The student will document findings in an objective and complete manner
- d. The student will apply principles of teaching/learning to assist the patient in his/her own care and prevention of secondary impairments
- e. The student will utilize outcome tools and assess the outcomes of the care provided and compare them, when possible, to standardized outcomes
- f. The student will participate in the delivery of patient-centered inter-professional collaborative care.

B. The student will assume the role of a problem solver

- a. The student will consider the unique characteristics and values of the individual and approach assessment and treatment in a culturally competent manner

- b. The student will generate multiple hypotheses concerning the nature of the patient problem, plan an evaluation to test those hypotheses, and generate solutions for intervention
 - c. The student will re-evaluate and revise the plan of care based on the outcomes achieved or not achieved
- C. The student will be a critical thinker as demonstrated by participation in evidence-based practice and research.**
- a. The student will analyze physical therapy research according to stringent criteria to determine the best approaches to assessment and treatment
 - b. The student will plan assessment and intervention based on pertinent research in our field
 - c. The student will be able to use CAT analysis to address clinically relevant questions
- D. The student will participate in life-long learning and professionalism.**
- a. The student will pursue new and/or refined ideas of practice and skills through self-study, literature review, and taking advantage of electives and/or continuing education opportunities
 - b. The student will contribute personal strengths and/or resources toward growth of the profession by becoming involved in professional activities
 - c. The student will work toward autonomous practice
 - d. The student will function as a vital member of an interdisciplinary healthcare team
 - e. The student will be involved in societal concerns which reflect personal and professional commitment to physical therapy issues
- E. The student will be an educator and a communicator.**
- a. The student will engage in effective and culturally sensitive teaching and communication as evidenced by sharing information through effective oral, written, and non-verbal communication with patients, peers, supervisors, caregivers, team members and the community
- F. Students will exhibit professional behaviors consistent with the American Physical Therapy Association's (APTA) Code of Ethics (Appendix). In addition, students are expected to be at entry level in the following professional competencies: (Please see Appendices)**
- a. **Commitment to Learning:** the ability to self-assess and correct and self-direct; to continually seek new knowledge
 - b. **Interpersonal skills:** ability to interact effectively with patients, families, colleagues and other health care professionals

- c. **Communication Skills:** the ability to communicate effectively for varied audiences and purposes
 - d. **Effective Use of Time and Resources:** the ability to obtain maximum benefit from a minimum investment of time and resources
 - e. **Problem solving:** ability to recognize and define problems, analyze data and to develop and implement solutions
 - f. **Professionalism:** the ability to exhibit appropriate professional conduct
 - g. **Responsibility:** the ability to fulfill commitments and be accountable for actions and outcomes
 - h. **Critical thinking:** the ability to question logically, to identify and evaluate elements of logical arguments; to recognize and differentiate facts, illusions, and assumptions and to distinguish relevant from non-relevant
 - i. **Use of Constructive Feedback:** the ability to seek out and effectively use feedback and provide feedback
 - j. **Stress Management:** the ability to identify sources of stress and develop appropriate coping behaviors
- G.** Students will be aware of, and work toward attainment, of the core values for the profession which include: **accountability, altruism, compassion/caring for patients, integrity, professional duty, excellence, and social responsibility.**

V. ESSENTIAL FUNCTIONS

The faculty recognizes the intellectual, social, observational, and physical demands that are required of the students in the program. These demands are not arbitrary but reflect the demands of the profession of physical therapy.

Every student must be able to perform all of the essential functions with or without reasonable accommodations. Recognizing the federal and state laws regarding disabilities and our program philosophy, the faculty is committed to providing reasonable accommodations for students with disabilities to allow them to complete the curriculum. These accommodations are based on individual need, the essential functions, the need to insure public safety, and the financial and administrative burden placed on Ohio University and clinical affiliates. The reasonable accommodations must keep the responsibility for the patient care and safety on the student rather than removing the professional responsibility from the student and placing it on the agent that is assisting the student. Please see Section XXIV for more details.

Students must be able to demonstrate the essential functions listed below with or without reasonable accommodations. The faculty defines the essential functions as follows:

- A. Communication skills:** communicate effectively – delivery and receipt of information that is accurate, concise, comprehensible and timely including verbal, nonverbal, and written. Examples include:
 - a. Document in medical records
 - b. Conduct patient/family education
 - c. Establish a rapport with a variety of individuals (medical professionals, patients, families, and community members)
- B. Sensory skills:** perceive/discriminate signs of disease, injury, or other abnormalities that can be derived visually, tactilely, and by sound. Skills must be performed accurately and efficiently in a timely manner. Examples include but are not limited to:

- a. Recognize pathology on a medical image
 - b. Recognize and palpate signs of tissue injury, such as inflammation
 - c. Ability to feel and grade the amount of tissue resistance to motion
 - d. Respond to auditory cues as signs of distress
 - e. Evaluate abnormal movement and gait patterns
- C. Motor skills:** physically move oneself and a patient in three dimensional space safely to discern motor function and to deliver treatments. Skills must be performed accurately and efficiently in a timely manner. Examples include but are not limited to:
- a. Deliver appropriate grade for joint mobilization
 - b. Range of motion and strength assessment
 - c. Safely assist a patient with mobility
- D. Intellectual skills:** demonstrate the cognitive capacity to comprehend, memorize, analyze, and synthesize material presented in coursework in an accurately, efficiently, and timely manner. Examples include but are not limited to:
- a. Demonstrate critical thinking to evaluate information and make clinical decisions regarding diagnosis, prognosis, and treatment strategies
 - b. Apply didactic information to familiar and unfamiliar clinical situations
- E. Behavioral skills:** demonstrate affective stability and successful coping strategies in order to function effectively in stressful, time sensitive, and unpredictable situations. Examples include but are not limited to:
- a. Respond appropriately to individuals of all ages, genders, races, socio-economic, religious, and cultural backgrounds
 - b. Possess coping strategies with regard to the stress of heavy workloads, demanding patients, and life threatening clinical situations
 - c. Recognize and respond appropriately to potentially hazardous situations
 - d. Protect the safety, confidentiality, and well-being of patients, faculty, and classmates
- F. Professional skills:** demonstrate ethical qualities of compassion, empathy, altruism, integrity, responsibility, tolerance, and respect for differences. Examples include but are not limited to:
- a. Abide by the APTA Code of Ethics, Standards of Physical Therapy Practice, and the core values
 - b. Participate in self-evaluation through reflection
 - c. Accept constructive feedback and respond with suitable action

VI. PROFESSIONAL/ETHICAL BEHAVIOR

- A.** Students are expected to exhibit professional behaviors during all didactic and clinical educational experiences that are consistent with the *Code of Ethics of the American Physical Therapy Association*. Students should become familiar with the principles of the Code and interpretive guidelines. In addition, students are expected to demonstrate the competencies and core values as delineated above.

- B. Students are expected to participate fully in all of the experiences which a faculty member deems appropriate for helping the students to learn the art and skills of a physical therapist. However, if a student has moral or religious objections to a particular activity, s/he should feel free to notify the instructor so that accommodations can be made if possible. If the student feels uncomfortable about participating in an activity, s/he should make the instructor aware of it and a decision should be made by the instructor concerning the activity. If the issue is still unresolved, the student should speak with the Program Director without feelings of reprisal. Student privacy should always be respected. It is never part of an academic goal to demean a student.

Many times, students will be asked to perform procedures on a "lab" partner or classmate in order to learn that skill which the professor is teaching. **Every student must sign an informed consent in order to participate in laboratory activities.** Every student is also obligated ethically to treat every other student with extreme care and concern so that they "do no harm".

- C. Students are expected to abide by the Ohio University Honor Code which can be found at http://www.ohio.edu/students/honor_code/. Infractions of the Honor code can lead to serious repercussions including dismissal from the program.
- D. Membership in one's professional association is one means of demonstrating professional behavior. Therefore, students are required to maintain a current student membership in the APTA throughout their enrollment in the program. It is the student's responsibility to join the APTA and provide proof of membership to the Clinical Education Records Manager for the Division of Physical Therapy for each year that s/he is in the program. Failure to maintain membership is a serious breach of conduct. The student should refer to the section titled **Procedure for Professional Behavioral Difficulties/Dismissal** for potential consequences.
- E. Active participation in APTA and Ohio Physical Therapy Association (OPTA) sponsored conferences and meetings is expected of all students during their enrollment in the program.
- F. Professionalism and professional behavior also apply when using social media (defined as any virtual hub where users interact; samples include but are not limited to Facebook, Twitter, YouTube, and LinkedIn). All posting must adhere to the university's Social Media Guidelines found on the university's website, to FERPA and HIPAA rules and regulations, and to the APTA's Standards of Conduct in the Use of Social Media found on the APTA's website. We urge students to consider the impact of postings and "likings" on their professional image. Remember that no posting is ever truly deleted. Any breach of professional behavior including violations of university guidelines and/or FERPA and HIPAA regulations can result in student reprimands up to and including program dismissal.

VII. CURRICULAR INFORMATION

A. Division of PT Courses

Satisfactory completion of the following courses is defined as attaining a grade of C or better in graded courses (**C- is not acceptable**) or a CR in credit/fail courses:

Course number and title	Credit hours
PT 7011 Anatomy Dissection - Extremities	5
PT 7012 Anatomy Dissection – Spine/Trunk	5
PT 7031 Clinical Skills & Examination I – Foundations	2
PT 7032 Clinical Skills & Examination I – Applications	3
PT 7041 Clinical Skills & Examination II – Foundations	2
PT 7042 Clinical Skills & Examination II – Applications	3
PT 7111 Clinical Medicine in Physical Therapy	3
PT 7120 Cardiopulmonary in PT	3
PT 7130 Acute Care in PT	3
PT 7140 Pharmacology	2
PT 7150 Imaging in PT	2
PT 7301 Orientation & Introduction to PT	2
PT 7311 Communication & Documentation	2
PT 7400 Evidence-based Practice	3
PT 7500 Neuroanatomy for PT	2
PT 7510 Systems & Behavioral Neuroscience	3
PT 7521 Stroke/TBI: Foundations	2
PT 7522 Stroke/TBI: Clinical Applications	3
PT 7525 Balance and Vestibular	2
PT 7531 Chronic & Progressive Disabilities – Foundations	2
PT 7532 Chronic & Progressive Disabilities – Clin Apps	3
PT 7651 Physical Agents	4
PT 7655 Wound Care for PT	2
PT 7701 Tissue Mechanics – Non-contractile	2
PT 7702 Tissue Mechanics – Contractile/TherEx	3
PT 7711 Foundations of Orthopedics: Upper Quarter	2
PT 7712 Clinical Applications: Upper Quarter	3
PT 7721 Foundations of Orthopedics: Lower Quarter	2
PT 7722 Clinical Applications: Lower Quarter	3
PT 7731 Foundations of Orthopedics: Spine	2
PT 7732 Clinical Applications: Spine	3
PT 7810 Health Promotion and Wellness	2
PT 7920 Practicum (part-time)	1
PT 8150 PT Synthesis	2
PT 8320 Regulation & Reimbursement	2
PT 8330 Business Planning & Implementation	2
PT 8341 Professional Development Synthesis	2
PT 8411 Pediatrics – Foundations	2
PT 8412 Pediatrics – Clinical Applications	3
PT 8510 Rehabilitation Management	2
PT 8740 PT Seminar	2
PT 8760 Manual Therapy I	4
PT 8770 Manual Therapy II (elective)	4
PT 8920 Practicum (8 weeks)	5
PT 8921 Practicum (14 weeks)	10
PT 8922 Practicum (8 weeks)	6
PT 8923 Practicum (8 weeks)	6
Electives	6-14

Elective courses will be offered in the fall semester of the third year. Students will be able to select coursework that will help to enhance their depth of knowledge and improve their skill levels in areas of specialization. Students are encouraged to discuss electives with their academic advisor to develop a plan that will help the student reach his/her educational and professional goals. A minimum of 10 total credit hours must be taken during this term.

Students that have been involved with the development, implementation, and presentation of an original research project may receive elective credit for this project (up to 3 credit hours). The student's research advisor must approve this elective and will provide the student with the appropriate information to obtain this credit.

If a student would like to take a course outside of the program as an elective, s/he must petition the faculty to allow that course to be counted as an elective. This process is started with the academic advisor.

B. Professional Development Portfolio

The Professional Development Portfolio (PDP) is a curricular requirement designed to foster core practice values and professional behaviors in graduate physical therapist students. Students are required to participate in experiences from four different models of practice: volunteerism, project, intervention, and professionalism. A culmination of student activities will be presented during coursework in the fall of the third didactic year.

C. Repeating a Course:

A course may be repeated only with approval of the faculty in the Division of Physical Therapy, except for an Independent Study. Both the initial grade and the grade obtained in the repeated course continue to be used to determine the student's GPA. Students may not repeat a course in which they have received a passing grade simply to improve the course grade.

D. Faculty/Course Evaluation

- a. The faculty believes that students should evaluate their academic performance, the courses taught each term, and curricular content. Therefore, at the end of each term all students are expected to evaluate each course. Students will be sent an e-mail when the course evaluations are available. Students should follow the instructions on the e-mail to complete the evaluation process.
- b. While these evaluations are anonymous, the faculty will still not receive the evaluations until AFTER the final course grades have been submitted. The faculty will use these assessments to make appropriate changes to the course for the following year.
- c. Student responsibility relative to the evaluation process includes:
 1. providing feedback to faculty in a professional and objective manner regarding the **course and its delivery**
 2. use of slang, profanity and derogatory statements is **prohibited**

3. honest assessment of course materials with awareness of how much the student actually made use of suggested resources
 4. providing suggestions for improvement
 5. recognizing that faculty have the primary expertise for necessary content which is often required by the accrediting organization (CAPTE)
 6. accurate evaluation of the entire course, not a single incident or assignment
- d. Students will evaluate the whole curriculum prior to graduation. This final evaluation **MUST** be completed prior to graduation day.

E. Course syllabus and handouts

Course instructors place all class handouts and syllabi on "Blackboard". Students are responsible for obtaining class handouts prior to the class period in which they are to be used. Students **may not** use the Physical Therapy copier to print handouts from Blackboard.

F. Course taping

The taping (audio and/or video) of classes with the PT prefix by students is not allowed without the consent of the course instructor. It is the student's responsibility to approach the instructor to receive this permission. Taping without the verbal or written permission of the instructor of record will be considered a serious breach of conduct and will result in one or more of the following consequences:

- a. reporting to the faculty for consideration of repercussions
- b. failure of course
- c. submission to the Office of Community Standards and Student Responsibility

G. Informed consent for patients

If a patient or a patient's image is to be used for teaching purposes, the patient must sign an informed consent form agreeing to evaluation and treatment and/or the use of his/her image for teaching as a protection of the patient's privacy. All patients must be thoroughly informed regarding what they will be requested to do and which information will be shared with a group or class of students. Patients have the right to refuse to perform any task during a class session and have the right to refuse to be photographed or videotaped. A licensed physical therapist must be present whenever a student or student group is evaluating or treating a patient or someone with a disability. The patient is always to be protected from any injury while students or faculty are working with him/her. Informed consent forms are located in the main office (see the Administrative Assistant). The signed consent forms will be kept within the Division of PT in a locked filing cabinet.

VIII. GRADING

A. Grading system

The following are **letter grade equivalencies** used in the Division of Physical Therapy.

A	=	100 - 93%
A-	=	92 - 90%
B+	=	89 - 85%
B	=	84 - 80%
B-	=	79 - 77%
C+	=	76 - 74%
C	=	73 - 70%
C-	=	69 - 67%
D+	=	66 - 64%
D	=	63 - 60%
D-	=	59 - 55%
F	=	54% or less

Students are required to complete all courses prefixed with "PT" with a grade of C (70%) or better and a "CR" in all credit/no credit courses. This policy reflects minimum satisfactory mastery of the subject content. The above grading system reflects the competency based curriculum of the PT program where 70% has been deemed as passing by the faculty. Receiving a grade of C- or lower in a graded course or an "F" in a credit/no credit course is considered a failing mark for graduate school at Ohio University. Students receiving a failing grade should refer to Section X Retention/Dismissal Policy in this manual.

B. Components of Course Grades:

- a. Professional Behavior: attitude, knowledge, and performance contribute to course grades. All courses with a PT prefix mandate that students exhibit professional behavior. Instructors will inform students of how these three components contribute to the overall course grade. This information will be found in course objectives and grading policies as stated in the syllabus for each course.
- b. Attendance: students are expected to attend all class lectures, laboratories, and course related clinical experiences. Content missed through absences from lecture, lab, or clinic must be made up. **Course grades may be lowered by the course instructor for excessive absences.**
 1. If the student must miss a class time, the **student** is responsible for the following in every course with a "PT" prefix:
 - ii. notifying the course instructor prior to the absence; or if prior notification is impossible, immediately following the absence.
 - iii. meeting with the course instructor(s) within 24 hours of return.
 - iv. arranging to make up the missed work within one week of the absence. This stipulation applies to all components of a course: assignments, quizzes, practicals, exams, etc.

2. In the case of student absences, the **course instructor** is responsible for the following in every course with a “PT” prefix:
 - i. identifying absences and absence patterns
 - ii. meeting with the student with habitual absences and the student's advisor
 - iii. referring students with habitual absences to the faculty
3. It is the student's responsibility to make up missed work. The content and format of the remedial work is up to the discretion of each individual faculty member. The course instructor retains the right to refuse to create remedial work for student absences especially unexcused absences. Information should be found in your class syllabus.
4. **Faculty strongly discourage students from making personal plans** (such as vacations, outside work commitments, family reunions, weddings, etc) **requiring absence from class during a term. Personal plans are not considered an excused absence.** This stipulation is especially important during final examination weeks.

IX. EXAMINATIONS

- A. Final Exam week extends the entire time that the University indicates for exam week. Students are expected to be available during that entire time which means up to 5:00 pm on the Friday of exam week. **Do not make commitments to attend other events or leave early during Finals Week.**
- B. If a student is unable to attend an examination s/he must notify either the instructor or the school office prior to the examination. If prior notification is impossible the student must contact the course instructor **within 24 hours**. Failure to contact the instructor in a timely manner can result in a zero score for the examination.
- C. If a student becomes ill during an examination, s/he should notify the instructor at that time.
- D. For all assessments (written and practical), students cannot have any electronic devices with them at the examination station unless approved by the course instructor(s). Electronic devices include computers, tablets, phones, watches, etc. The course instructor will notify the students of the disposition of electronic devices during test times.
- E. **Makeup examination:** Makeup of a practical or written exam due to an **excused** absence is at the discretion of the course instructor. An excused absence occurs when the course instructor has agreed that the student should not take an examination; for example, an illness, death in the immediate family, or religious observance. Attending weddings and going on vacations are generally NOT considered excused absences.
 - a. A makeup examination **or** a zero grade is given at the discretion of the instructor for those students who miss a scheduled examination.

- b. If an examination is missed, the student is responsible for:
 - 1. contacting the instructor to determine if a makeup examination can occur
 - 2. if a makeup examination is allowed, arranging with the instructor the time and date for the makeup
 - 3. completing the makeup examination on the scheduled examination date
 - 4. make-up examinations must be completed within 1 week of the originally scheduled exam unless special permission has been granted by the course instructor
 - c. If an examination is missed, the instructor has the sole responsibility of determining if a makeup examination will be given. If a makeup examination is allowed, then the instructor is responsible for:
 - 1. creating a make-up examination that is comparable in depth and difficulty to the original
 - 2. arranging a time and date for the makeup examination with the student
 - 3. supervising the makeup examination with the student
 - 4. grading the makeup examination
- F.** A zero grade will be assigned for an examination or assignment in which the student has demonstrated academic dishonesty in any form. In addition, a faculty member has the right to refer the student to the Office of Community Standards and Student Responsibility, give a failing grade for the course, and/or refer the student to the faculty to deal with the situation.
- G. Written examinations**
- a. In each course prefixed with "PT" the grade for the final written examination must be at least 70% to successfully pass the course. This condition is a minimum requirement as policy for the program. However, the course instructor may require more than the minimum in his/her course. If so, that information shall be clearly stated in the course syllabus.
 - b. Remediation should be undertaken after a failure on a major exam and can take many forms at the discretion of the faculty member for the course. Remediation is operationally defined as an opportunity to learn course material that was considered deficient at the time of the major exam. The remediation process does not provide a mechanism to alter a grade on a test. For example, it may involve review of an examination with the opportunity to correct any mistakes; it may involve self-study; it may involve scheduled discussions with the faculty member responsible for the course, etc.
 - c. Re-takes (or makeups) on written examinations in physical therapy courses will be permitted **only** at the discretion of the faculty member responsible for the course and is only offered in the case of failure of a major exam. An exam re-take is operationally defined as an assignment of comparable difficulty and depth to the original exam that

provides the opportunity to alter the grade received on the failed major exam. A re-take may be in written or verbal form. An example of an exam re-take is an alternate version of the original exam. A re-take is not necessarily given in every course. Please refer to the course syllabus for further information.

- d. If a re-take examination is given, the student must pass the test (score of 70% or better) on the second attempt in order to pass the course. If the retake is successful, the original test score will be replaced by a 70%.
- e. Failure of a re-taken final written exam constitutes failure in the course. If a student fails a re-take on the final written exam and has passed the other components of a course, a grade of C- will be given. At this point, the student has the right to appeal the course grade or will be referred to the faculty. Refer to section X for further information.
- f. If a student fails both the midterm and final examinations on the first take for one course, the instructor of record may recommend additional course work or fail the student from the course even if a successful retake has occurred for the examination(s). Failure to pass both examinations on the first take can indicate a serious lack of understanding of the material on the part of the student. The determination of the student's understanding of the course material will be the purview of the instructor of record.

H. Practical Examinations

- a. In each course with practical examinations that assess clinical skill performance and clinical judgment, all parts of the major practical examination (not mini-practical) must be passed with a minimum of 70% in order to successfully complete the course.
- b. If a student receives less than 70%, the student may be permitted to retake the examination **once** in an attempt to achieve a passing grade. Retakes of practical examinations are at the discretion of the instructor of record. Practical retakes can include the whole or portions of the original practical examination. The course instructor will notify the student in advance of the composition of the retake practical examination. The student must pass the retake practical examination with a score of 70% or better. As with written examinations, the original test score will be replaced with a **70%**.
- c. **Only one re-take of a major practical exam will be permitted** per course prefixed with "PT".
- d. Failure on a retaken major practical examination constitutes failure in the course. If a student fails a major practical exam after the re-take but has passed the remaining elements of a course, the student will receive a C- for the course and will be referred to the faculty.
- e. If a student demonstrates a pattern so that major practicals are re-taken **in two courses**, the student will be referred to the faculty for discussion. The faculty can decide to:
 - 1. allow the student to continue without repercussions

2. require the student to pass all subsequent major practical examinations on the first attempt
3. require the student to retake coursework including the whole course
4. dismiss the student from the program
5. select another option that better fits the individual situation

I. On-line test/examination/quiz

- a. All rules for on-line assessments are the same as for the standard paper/pen test or examination.
- b. Unless specifically stated in the course syllabus or by the course instructor, all tests/examinations/quizzes are to be taken individually – **no group work**.
- c. The student is not allowed to surf the web while the assessment is up.
- d. **No assessment materials are to be reproduced in any way, i.e. copied, e-mailed, downloaded, screenshot, etc.**
- e. Failure to follow the above rules can result in failing a quiz/test/examination, receiving a failing grade for the course, or dismissal from the program.

J. Mini-practicals

- a. Mini-practicals are short, task specific assessments of skill performance. They are independent of environment and patient population. They are designed as a mechanism to evaluate the student's psychomotor techniques throughout a clinically centered course. These assessments facilitate the instructor's information regarding the student's progress through the course in a timely manner.
- b. Failure on mini-practicals can occur when one of the following conditions is present:
 1. a performance that places the "patient" in jeopardy
 2. more than one major error is committed
 3. technique is ineffective
- c. A passing grade must be obtained on the technique. Failures on mini-practicals must be retaken prior to the last day of the course. The student must successfully demonstrate proficiency of the skill in order to successfully pass the course. Failure of more than 3 mini-practicals on the first attempt in one course will necessitate a meeting between the instructor(s) and the student to discuss remediation plans.

K. Final examinations

- a. At the beginning of each term, the faculty will develop a final examination schedule for courses that begin with the "PT" prefix. The dates and times of these exams may or may not coincide with the published University final exam schedule for that term. The faculty will attempt to use the entire examination week in order to give students sufficient time to study for each examination.

- b. All final examinations will occur during the OU dedicated final examination week. Final examinations CANNOT be given during the last week of classes.
- c. **Do NOT plan on leaving early during any final examination week.**

L. Didactic coursework and clinical education

A student may not go to a clinical practicum, either part-time or full-time if the student has not successfully completed all prior course work, i.e. received a grade of C or better. A student may not attend a clinical practicum if s/he has not met the basic requirement of a 3.0 cumulative GPA.

In split terms, the instructors of record will calculate final course grades by noon on the Friday following final examinations. If a student has not passed a course in the split term, s/he will not be allowed to begin his/her clinical education experience on the following Monday.

X. RETENTION/DISMISSAL POLICY

A. Academic difficulty

- a. Students in the DPT program must obtain a grade of C or higher in all coursework with a "PT" prefix and a passing grade (CR) in all clinical practica. The following policy serves as a **guideline** for the faculty, Program Director, and School Director in decision-making for students receiving a grade less than C (i.e., C- and below) in any course or a failing grade in a clinical practicum.
- b. **Please note that the instructor assigned to a class has full responsibility for grading that class and other faculty and the Program Director shall not interfere with that instructor. The faculty, Program Director, and the School Director do not become involved until after a grade is issued.**
- c. The Division's faculty is committed to making every effort to retain students who have been accepted into the program. However, if a physical therapist student's record shows evidence of any of the following, s/he will be subject to faculty review and the faculty will make a decision, based on the individual case, regarding the outcome for the student.
 - 1. In courses with a PT prefix, any grade less than C in a graded course or an F in a credit/fail course
 - 2. Failure to achieve a cumulative 3.0 GPA or greater
 - 3. Evidence of lack of appropriate professional behaviors in either the clinic or classroom settings. These include, but are not limited to, tardiness, absence from or lack of participation in laboratory or clinical sessions, academic dishonesty, inappropriate dress, uncleanliness, rude or offensive behavior, and inappropriate behavior towards peers, faculty, staff, and/or general public.

4. Failures in multiple courses
5. Evidence of academic misconduct

B. Appeal of a grade for academic performance

- a. Every student at the university is accorded the right of appeal. The first decision a student should make when a failing grade is received is whether or not to appeal a course grade. Guidance on this decision can be sought from your academic advisor, the Program Director, and/or the Associate Dean for Research and Graduate Studies, College of Health Sciences and Professions.
- b. The procedure for appealing a grade is student-initiated with the instructor of record for the course. In cases of grade appeals, the “burden of proof” is on the student. The student is expected to provide evidence for deserving a higher grade based on unfair treatment of the student. A concerted effort should be made in the discussion with the instructor to resolve the grade issue at this level.
- c. If no satisfaction is received from the instructor, the student may file a formal appeal to the School Director in writing within 15 calendar days after receiving notice of the disputed grade. The student uses the “Form for Student to Appeal a Grade Assigned for Academic Performance” which can be found on the College’s website under Policies and Forms. Additional supporting documentation may be required/advisable. The student is directed to consult with his/her academic advisor, the Program Director, the Associate Dean for Research and Graduate Studies, and/or the University Ombudsman when starting this process. Once the paperwork is filed, the School Director will convene a committee to hear, deliberate, and rule on the appeal. The student and instructor of record will be interviewed by the committee. All documents will be shared with both parties. There is considerably more detail on this process including all time-lines on the College website. The student is **strongly** encouraged to review all policies and forms on the college website regarding grade appeals.
- d. If the student is dissatisfied with the committee’s decision, s/he may appeal to the College Dean. That process is delineated on the College website.
- e. If a clinical education experience is scheduled in the term immediately following submission of a grade appeal, the clinical education experience may need to be rescheduled depending on the timing of the appeal filing, processing, and adjudication. The student is responsible for working with the Director of Clinical Education to arrange alternative scheduling of the clinical experience pending the outcome of the appeals process.

C. Procedure for a failing grade in any course with PT prefix

If no appeal is filed or an appeal is unsuccessful, the student will be referred to the PT faculty by the instructor of record. Prior to faculty deliberation of the student’s status, the student will be asked to submit a written statement to the faculty delineating the reason for his/her prior poor course work as well as a plan for improving his/her future academic performance. The student may be asked or may request to speak before the faculty prior to deliberation. The student should seek guidance from his/her academic advisor regarding this process.

During deliberations, the faculty will consider the following **options** for a student receiving a grade below C in any course or a failing grade in a clinical practicum:

a. **Decide that the student will be dismissed from the physical therapy program.**

If the faculty decides that the student should be dismissed from the Division of Physical Therapy, the Program Director will inform him/her and will then explain options, such as the student's right to appeal the decision. If the student wishes to appeal the faculty's decision, the student should follow Student Appeal Procedures as issued by the College of Health Sciences and Professions and which can be found on the College's website under Policies and Forms. The student is **strongly** encouraged to review the College documents and to seek guidance from the Associate Dean for Research and Graduate Studies, College of Health Sciences and Professions.

Reinstatement is **not** automatic under this condition. The student will not be eligible to reapply to the program until the next admission cycle. At reapplication, the student must produce evidence that s/he is now able to complete the program.

b. **Decide that the student will be placed on academic probation until the course in question is offered again during the curriculum.** The faculty may stipulate requirements for the student during the probationary period. The faculty will consider applying any of the following conditions (this is not an inclusive list – other conditions may apply based on the individual situation):

1. During the probationary period, the student will be required to complete appropriate remedial study decided on by the faculty and will abide by the conditions established. If the remedial course is at an institution other than Ohio University, the student may be required to present a syllabus to the faculty prior to receiving permission. Please note that coursework taken at other academic institutions will not alter the cumulative GPA and, therefore, may not be deemed appropriate.
2. Additional selected graduate coursework from units other than Physical Therapy may be taken during the probationary period. These courses will be selected in consultation with the faculty of the Division of Physical Therapy.
3. Successfully repeat the course with the failing grade the next time it is offered.
4. Decelerate within the PT curriculum.

NOTE: If the student fails to successfully complete a repeated academic course with a C or better, does not fulfill the probationary period requirements, or does not complete a repeat clinical practicum with a passing grade, the student may be **dismissed** from the Division of Physical Therapy.

If the student wishes to appeal the faculty's decision, the student should follow Student Appeal Procedures as issued by the College of Health Sciences and Professions and which can be found on the College's website under Policies and Forms. The student is **strongly** encouraged to review the College documents and to seek guidance from the Associate Dean for Research and Graduate Studies, College of Health Sciences and Professions.

D. Procedure for failure to achieve a cumulative 3.0 GPA or greater

The following guidelines will be used by the Division of Physical Therapy to determine whether academic probation is required or when you will no longer be permitted to enroll.

- a. **Minimum Credit Hours:** To determine whether probation applies, the student must register for and complete a minimum of 10 semester hours (9 semester hours is required to enroll full-time in the summer term) in the physical therapy curriculum.
- b. **Criterion for Probation:** Upon registering for and completing at least 10 semester hours (9 if summer enrollment), you will be placed on probation if the cumulative GPA falls below 3.0, as reflected on your Official Grade Report. If your cumulative GPA falls below 3.0, you will be granted a one-time, one-term probation during the subsequent term.

NOTE: If your Official Grade Report contains an Incomplete (I) or a Progress Report (PR), it is possible for your probationary status to change. If the change of an "I" or "PR" to a letter grade causes your cumulative GPA for the prior term to **fall below 3.0**, you will be placed on probation. Conversely, if the change of "I" or "PR" to a letter grade causes your cumulative GPA for the prior term to **meet or exceed 3.0**, you will be removed from probation.

- c. **GPA at the end of the Probationary Term:**

1. **Cumulative GPA below 3.0:** If you receive a term-GPA of less than 3.0 at the completion of your probationary term, you will be dismissed from the program.
2. **Cumulative GPA below 3.0:** If your term GPA is above a 3.0 at the completion of your probationary period and your cumulative GPA has improved, you may petition to receive one additional term to raise your cumulative GPA to a 3.00 or better. The decision to petition for an additional term must be approved by the faculty and the dean of the College. If the cumulative GPA is raised to at least a 3.00 by the end of the additional term, you will remain in the program as long as your cumulative GPA stays at or above a 3.00 (see section e below). If your cumulative GPA remains below a 3.00 by the end of the additional term, you will be dismissed from the program.
3. **Cumulative GPA 3.0 or better:** If your cumulative GPA is at least 3.0 at the completion of your probationary term, you will be taken off academic probation and continue on in the program. See section "e" below for restrictions.

- d. **Notification:** The Program Director will notify you in writing at the beginning of the probationary period(s). In the case of a dismissal, a letter will be mailed to you at your local address on file in the division or with the university. Failure to keep either the division or the university current as to your local address does not negate the dismissal notice.

If students who are dismissed from the DPT program wish to be considered for readmission, they must apply for admission in a subsequent class/year.

- e. **Continuation:** Once the cumulative GPA is raised to a 3.0 or better, the student must maintain the cumulative GPA at or above a 3.0 for the duration of the program. If the cumulative GPA falls below a 3.0 at the end of any subsequent term, the student will be dismissed from the program.
- f. If at any time in the curriculum it becomes mathematically impossible to raise the cumulative GPA above a 3.0, the student will be dismissed from the program.

E. Procedure for evidence of lack of appropriate professional behaviors

- a. **Initial/single occurrence – no remediation to date:** When it is perceived that professional standards (this includes any of the Professional Behaviors for the 21st Century and/or APTA Core Values) are not being met, the instructor or responsible person will communicate the identified problem to the student. The student will be informed within a reasonable time via personal communication or a letter from the instructor or responsible person explaining in detail which standard is not being met and how it is not being met. The student will be given the opportunity to remediate the problem through use of self-assessment and generation of a remediation plan submitted by the student to his/her advisor and the Program Director. The plan will be further refined with the student if it is not satisfactory. If no progress on the problem is identified within the decided upon time-frame or if repeated breaches of professional behaviors continue to occur, the faculty will be informed of the situation. See below for procedures in this instance.
- b. **Repeated occurrence – failed remediation to date:** When repetitive and/or significant breaches in professional standards or lack of progress in self-remediation occur, the issue will be brought to the faculty as a whole.
 - i. The student will be notified within a reasonable time via a written notice by the Program Director. The notification will provide sufficient detail of the specific standard not being met and how it is not being met, as well as action taken to date.
 - ii. The student will be given sufficient time to prepare and present his/her side in a written statement that will be submitted to the faculty for consideration at the next regularly scheduled faculty meeting. The faculty will consider requests by the student to attend the meeting or the faculty may require the student to present at the meeting.
 - iii. During deliberations, the faculty will consider the following possible sanctions. Note that other sanctions could be considered based upon the individual case.
 - 1. expressions of concern
 - 2. warnings of possible penalties
 - 3. placement on probation
 - 4. academic suspension
 - 5. dismissal from the Division of Physical Therapy

- iv. The student will be informed in writing of the outcome of the meeting by the Program Director.
- v. The student has the right of appeal of the faculty decision. The process for this situation is similar to a grade appeal. The details and process can be found on the College website under Policy and Forms – “Appeal of a Disciplinary Penalty”. The student is **strongly** encouraged to read all the material on the website and to seek guidance from the Program Director, the Associate Dean for Research and Graduate Studies at the College, and the University Ombudsman.

F. Procedure for multiple course failures

In courses with a PT prefix, failure to achieve a final grade of ‘C’ or better in graded courses or a CR in credit/fail courses in more than one course will result in dismissal from the program.

G. Procedure for evidence of academic misconduct

- a. As students in the Division of Physical Therapy, you are expected to conduct academic assignments in a fair and honest manner. Any form of academic misconduct **will not** be tolerated. Students will be expected to conform to the Ohio University Student Code of Conduct which can be found on the website for the Office of Community Standards and Student Responsibility.
- b. A faculty member has the authority to grant a failing grade in cases of academic misconduct, as well as referring the case to the Office of Community Standards and Student Responsibility. If you have committed any act of misconduct as determined by the judgment of the faculty member, the physical therapy faculty, or by the Office of Community Standards and Student Responsibility, serious action, which may include failure of the work or failure in the course, formal disciplinary action, including suspension or expulsion, may be taken against you. The Office of Community Standards and Student Responsibility, the University Hearing Board, and the University Appeal Board have the authority to take formal disciplinary action against a student. However, the Office of Community Standards and Student Responsibility, the University Hearing Board, and the University Appeal Board have no authority to modify a grade given by a faculty member.

- c. In cases of academic misconduct, the course instructor is responsible for:

Notifying the student(s) involved and the Program Director regarding the action taken with respect to academic misconduct. This action may include:

- i. granting a lower grade in the course
- ii. failing the student in the course
- iii. granting an F or a “0” grade on a project/assignment/quiz/test/examination
- iv. referring to the Office of Community Standards and Student Responsibility

- d. If the instructor refers to the Office of Community Standards and Student Responsibility for violation of the Student Code of Conduct, then that Office may take action with a procedural interview and/or hearing. This hearing may result in:
 - 1. expulsion
 - 2. suspension
 - 3. probation or other sanction
 - 4. case dropped due to insufficient evidence
 - e. If the student disagrees with the sanction or procedure, s/he may file a written appeal within 7 days to the University Appeal Board. If not resolved, under extremely unusual circumstances, there may be a final review by the President.
- H. Legal issue:** If a serious felony offense occurs **during** the physical therapy program, a student may be dismissed from the program. Infractions that place the personnel of the program (faculty, staff, and students) at risk will not be tolerated. If the student continues on in the program, s/he cannot be guaranteed clinical placements and approval to sit for the licensure examination.
- I. Appeal:** The student always has the right to appeal a faculty decision. The student should follow Student Appeal Procedures as issued by the College of Health Sciences and Professions and which can be found on the College's website under Policies and Forms. The student is **strongly** encouraged to review the College documents and to seek guidance from the Associate Dean for Research and Graduate Studies, College of Health Sciences and Professions.

XI. CURRICULAR DECELERATION

- A.** A decelerated curriculum (4 years in length) can be considered during the first 2 terms of the Physical Therapy curriculum. This change in the curriculum can be initiated by the student or the faculty. Potential reasons for choosing deceleration are:
- 1. academic difficulty such as a cumulative GPA below 3.0 or receiving a non-passing grade in a course with PT prefix. In these instances, the Retention/Dismissal Policy of this manual still applies.
 - 2. personal conditions such as health issues or learning disabilities.
 - 3. other conditions/issues
- B.** If the deceleration plan is being requested by the student, s/he should initiate this process through his/her academic advisor.
- C.** Before a decelerated curriculum can be implemented, it must be approved by the faculty.
- D.** The Program Director in conjunction with the faculty will create an individualized course grid identifying the new curricular plan for the deceleration. It will be the student's responsibility to work with the Program Director and the Director of Clinical Education to implement the new plan.

XII. FACILITY AND EQUIPMENT

- A. The exercise equipment in the Division of Physical Therapy was purchased for the purpose of student instruction, research, and patient care related activities so student use of therapeutic, research, and instructional equipment for recreational purposes cannot be permitted even though the faculty support and promote physical fitness. Ping Center/WellWorks are well equipped to meet student needs in this arena.
- B. Student use of the physical therapy facilities and equipment in Grover Center for study, research, and/or practice of techniques is encouraged by the faculty. The key pads located on the exterior door of the Division and on the Neuro Lab should be used for access during non-working hours. For safety reasons, students are encouraged to work in groups so that individuals are not left alone in the building at any time.
- C. To gain entrance to rooms without keypads after hours, students must obtain a key from staff or faculty of the Division. The key **MUST** be returned to the Administrative Associate before noon the following day or future use will be prohibited. Failure to abide by this policy will result in the privilege of unsupervised access being revoked. Graduate assistants who have keys to various rooms should not take on the privilege of letting other students into those rooms without the express permission of a faculty member. Violation of this rule can result in the revocation of the assistantship.
- D. At no time are the doors to the Physical Therapy department to be propped open or left unlocked after 5:00 PM. Violators will be asked to leave. **Safety of students in the building is our primary concern in this public area.**
- E. Students are not permitted in the main office including the copy room after hours or when staff is not present due to the sensitive nature of some materials on desks or in files.
- F. Students are not to practice with hazardous equipment or perform high risk procedures without faculty supervision. Seek instructor approval to practice with equipment.
- G. Students wishing to use equipment and/or facilities for non-curriculum related activities should submit a request to the Program Director.
- H. Students are responsible for the replacement of any item that is lost or damaged while in their possession/use.
- I. **Grover Center** is open from 6:00 a.m. - 9:00 p.m., Monday through Friday. Weekend hours are 9:00 a.m. - 6:00 p.m. If students wish to have access to Grover beyond the regular operation hours, they must be in the building by the time in which the doors are locked. Students can enter the building after it has closed by using their access codes on the Richland Avenue door. You are urged to observe normal caution when using the building outside normal hours. Generally, it is best to have **more** than one student present at all times. This is for your safety, so please observe this rule.
- J. Students wishing to make **copies** should go to the Grover Computer Lab, Room E-211. Copy machines are located in the computer lab and are also dispersed throughout Grover Center in the hallways. The price for copying/printing is posted in the Computer Lab.

Due to the availability of copy machines throughout Grover Center, students may **NOT** use the Physical Therapy copy machine, unless permission is granted by faculty or staff of the Division of Physical Therapy. **Any graduate assistant who abuses his/her role within the division of physical therapy to copy personal documents will lose the graduate assistantship.**

XIII. STUDENT RESPONSIBILITIES IN THE LABORATORY

- A.** In courses with a skills component, students will be expected to display professional conduct during lab sessions. In addition, the student is expected to participate fully in lab; therefore, students will sign an **informed consent** (see Appendix) which indicates that they realize that they will be expected to practice and will allow classmates to practice upon them.
- B.** Promptness to labs is required. Repeated lateness may result in dismissal from a lab session. In such instances, the student will be responsible for obtaining the information covered during that lab from classmates. In addition, the instructor of record may decrease the course grade because of a pattern of lateness.
- C.** Students should be **appropriately dressed** for the particular lab activity planned for that day, and may be asked to leave if attire is inappropriate. For teaching labs, gym shorts or pants and easily removable shirts are required. Women should wear bathing suits and/or shorts and t-shirt. Cover-ups may be brought to the lab if the room is cold. Long hair should be pinned back and jewelry should be removed (i.e., dangling earrings, sharp rings, long chains, multiple bracelets, etc.). You may be asked to trim your nails when participating in massage or manual therapy. Course instructors will notify you if any other requirements are necessary prior to the lab session.
- D.** If a patient lab is scheduled, a guest speaker is expected, or when students visit a professional office/clinic, students must be in professional attire. Revealing attire should be avoided at all times.
- E.** A **professional atmosphere should be maintained in lab at all times.** Subjects should be properly draped and positioned. Dignity of subjects should be respected, and comfort and safety always should be considered.
- F.** It is **all** students' responsibility to clean up the labs after class, when used outside of class time, and after practical examinations. All labs must be left in the following condition:
 - a. treatment tables returned to the appropriate lab
 - b. treatment tables spaced around room
 - c. treatment tables raised to the highest position in the ortho lab
 - d. clean pillowcases on pillows
 - e. all floor mats hung correctly on designated hooks
 - f. stools and chairs placed on top of each treatment table in the ortho lab
 - g. all supplies and equipment returned to appropriate storage areas

- h. all wheelchairs belong collapsed and in a line in the neuro lab
 - i. all trash must be placed in the waste basket
 - j. all modalities except for cold packs, hot packs, & paraffin bath should be unplugged
 - k. table tops should be wiped clean after each use
 - l. all dirty linen should be placed in the laundry cart
- G.** Failure to keep the labs clean can result in the lowering of a lab grade for **ALL** students at the discretion of the course instructor(s).
- H.** To use equipment/supplies off-site, students must have permission from a PT faculty member. It is the student's responsibility to see that any borrowed equipment is returned without damage. Students are responsible for all repairs if equipment is damaged.
- I.** **Laundry** is done by the first year students. A washing machine and dryer are available on the third floor for use by our program (see Administrative Associate for the policy). Laundry must be done at a minimum of once each week.

XIV. STUDENT RESEARCH

- A.** The Division is unable to provide financial support for the purchase and/or construction of research equipment, travel, mailing and/or printing costs for students engaged in research activities. Therefore, faculty and research advisors must ensure that students are aware of any expenses involved and that students may be responsible for the expenses incurred.
- B.** Sources of funding for student research:
- a. Graduate Student Senate (GSS) sponsors funds for travel to a national meeting for research reasons. Application forms can be found on the Graduate Student Senate website. Funds are awarded based on a lottery system.
 - b. The Office of the Vice-President for Research sponsors a Student Enhancement Award (SEA) to encourage undergraduate and graduate student research. The awards are made yearly in the spring. Guidelines for proposal development can be found on the website for the VP for Research. You must have a faculty research advisor in order to apply for this award.
 - c. The College of Health Sciences and Professions is another potential source of funding for student travel to professional conferences. Availability of funds and application forms can be found on the website for College.
- C. Authorship of published papers:** If a paper has the potential to be published, the research advisor, and the student(s) should meet to determine the rules for authorship, including who will be responsible for changes requested to the paper, and which journals will be considered. Journals will have guidelines regarding who may be considered an author depending upon the work that has been done.

- a. If the research is a faculty idea and/or a continuation of a faculty member's project and the student only assists in data collection, the student should not expect authorship.
- b. Generally, if the research has been the student's idea and the student has followed through with every step of the process including IRB approval, methods, data collection and analysis, and discussion, the student would ordinarily be the first author. This assumes that the student has also done the work necessary to prepare the paper for publication. In this case, if a student has not published or attempted to publish a paper within 1 year, the faculty advisor has the right to prepare the paper for publication and submit it with the student included as an author.
- c. A faculty member always has the right to allow the student's name to be listed as first author if the student has done a significant amount of work and the advisor considers the paper as coming from his/her laboratory with the advisor listed as last author.
- d. Students should not be excluded from authorship if they have contributed significantly to the project; however, if a student has been paid to work on the research project, there is no expectation for authorship.

XV. STUDENT GREIVANCE

It is the policy of the Division of Physical Therapy and the College to be fair and judicious in all matters pertaining to student affairs. From time to time, certain students may feel that they have been treated unfairly and may wish to file a grievance. Please note that the policy for appealing a grade is different from this policy. The student is directed to use the following resources to file a grievance: Program Director, Associate Dean of Research and Graduate Studies for the College of Health Sciences and Professions, the university Office of Equity and Civil Rights Compliance, and the university Ombudsman.

If a parent, patient, clinical coordinator for clinical education, employer or anyone with direct association with the Division of Physical Therapy at Ohio University has a complaint concerning the Division's policies, procedures, or actions, that person may contact the Program Director of the Division of Physical Therapy by setting an appointment time, by telephone, or in writing. Depending on the nature of the complaint, the Program Director will first attempt to address the issue by meeting with the complainant or speaking with that person by telephone. If no satisfaction can be achieved, the complainant will be asked to write a formal letter indicating the specific concerns to be addressed. The Program Director must respond to the formal letter of complaint within a three week period of time. The Program Director may consult with the faculty, depending on the nature of the complaint to determine a solution. The Program Director will then notify the complainant of the decision in writing. Any complaint must be offered in a manner that facilitates a timely and confidential response. A response to an anonymous e-mail address is not satisfactory since there is no way to know if the response was received by the appropriate person. If no satisfaction is still achieved at the level of the Program Director, the complainant may then appeal the decision, in writing, to the Dean of the College of Health Sciences and Professions. The Dean must respond within a period of three weeks by stating the decision in writing. The Dean may choose to appoint an ad hoc committee within the College to study the issue and advise on a decision. The Dean will communicate the final decision in writing to the complainant.

If students have exhausted all of their due processes within the Division of Physical Therapy and the College of Health Sciences and Professions and wish to register a complaint about the program with CAPTE, the contact information can be found on the website for the American Physical Therapy Association, www.apta.org.

XVI. ACADEMIC ADVISEMENT

- A.** The Program Director assigns students to their faculty advisor during the first semester of the program.
- B.** The faculty will meet with each advisee at least one time per year. It is the responsibility of the student to make an appointment to speak with his/her advisor. Your academic advisor is your advocate while in the program. The faculty strongly encourages you to keep your advisor up-to-date on your academic progression through the program regardless of other faculty that you may consult. This policy reflects the belief of the faculty that academic advisement enhances student performance.
- C.** Advisors are responsible for yearly reviewing the DARS reports with their advisees to determine that the student is on-track for graduation.
- D.** Advisors are responsible for making certain that all PR grades are changed prior to graduation to facilitate the audit process.
- E.** If a student encounters academic difficulty, the advisor must meet with the student to assess the situation and help develop a plan for progress through the program. For example, if the cumulative GPA falls below a 3.0, the advisor will help calculate the grades necessary for the student to rectify the situation.
- F.** The faculty advisor will document all meetings regarding academic issues in the student's permanent program record.
- G.** Your academic advisor is your escort for graduation.
- H.** An advisor or advisee may request a change of the relationship. The party interested in the change needs to apply to the Program Director. Change requests will be considered for a variety of conditions such as an untenable relationship or the development of a close research mentoring relationship.

XVII. INTELLECTUAL PROPERTY

- A.** Intellectual property created, made, or originated by a faculty member shall be the sole and exclusive property of the faculty, author, or inventor, except as s/he may voluntarily choose to transfer such property in full or in part.
- B. Copyrights**
 - a.** The term "*copyright*" is understood to mean that bundle of rights that protect original works of authorship fixed in any tangible medium of expression, now known or later developed, from which they can be perceived, reproduced, or otherwise communicated, either directly or with the aid of a machine or device.

- b. “*Works of authorship*” (including computer programs) include, but are not limited to the following: literary works, audiovisual works, sound recordings, and graphic works.
- c. “*Tangible media*” include, but are not limited to, books, periodicals, manuscripts, films, tapes, and disks.

C. Patents

The term “*patent*” is understood to mean that bundle of rights that protect inventions or discoveries which constitute any new and useful process, machine, manufacture, or composition of matter, or any new and useful improvement thereof.

D. Division of Physical Therapy Policy

- a. In the context of lecture materials (e.g. PowerPoint slides, video files, and other materials), the course instructor holds all relevant copyrights to those materials and they may not be reproduced or used for other purposes without the written consent of the course instructor.
- b. In the context of research activities (e.g. grants, manuscripts, specific assays or research methods, software, and hardware developments), these items are assumed to be under the ownership of the laboratory director and may not be used or reproduced without the written consent of the laboratory director. Any exceptions to this rule are under the purview of the laboratory director.
- c. Failure to abide by these policies will result in the student being referred to the entire faculty of the Division of Physical Therapy for reprimand which can include suspension or termination from the program.

XVIII. PART-TIME STATUS

The professional curriculum of the Division of Physical Therapy has been structured such that each successive term is built on information, knowledge, skills and attitudes obtained in previous courses. Students are thus encouraged to maintain full-time status to complete the curriculum in three academic years.

However, there may be situations where students might elect or be required (due to failure of a course) to assume a part-time status. If this situation presents itself, the student will meet with his/her advisor and the Program Director to design an appropriate plan of study.

XIX. LEAVE OF ABSENCE

- A. A leave of absence may be granted to a student for any of the following reasons:
 - a. Medical or psychiatric reasons
 - b. Family or personal emergencies
 - c. Financial stress
 - d. Military duty

- e. Prolonged illness or injury which prohibits sufficient participation to meet minimum course requirements and/or essential functions
- B. A student on leave of absence must notify the Program Director, in writing, at least 10 weeks prior to the expiration of the leave, whether or not s/he intends to return to the DPT program. A leave of absence is viable for a **maximum of one year**. Leaves of absence may be renewed upon written request of the student for a maximum of an additional year at the discretion of the faculty.
- C. Failure to notify the Program Director as outlined above will be considered withdrawal from the Division of Physical Therapy. If the student later wishes to return, s/he must re-apply for admission. This application will be evaluated along with those submitted by new applicants.

XX. CLASS RESPONSIBILITIES

- A. Each class will elect officers and committee chairs at the beginning of the second term in the program (Fall Semester). A separate policy and procedure manual has been developed to help the officers with their responsibilities.
- B. The Program Director will appoint a new class advisor each summer when a new class enters the program. That faculty advisor will work with the class officers to make certain that the class is following university, college, and school policies in providing for the needs of the class.
- C. The advisor is to act as a counselor to the class for their fund raising efforts and any professional activities in which they take part. It is NOT mandatory that the class fund-raise except for the events listed in section E below. It is the decision of the class as a whole to determine fund-raising activities beyond these events. The faculty would caution the class to carefully consider the time required for fund-raising in light of the academic load of the physical therapy curriculum.
- D. Funds that the class raises are for their use. Typical events for which classes have used the money are their graduation banquet at the end of the third year, to help support costs associated with the review course, the composite class picture that must be presented to the Division of Physical Therapy, and costs of cap and gown upon graduation.
- E. Each class is financially responsible for the following items. The faculty advisor is the class' resource for involvement in each of these.
 - a. **Scholarship fundraising:** organizing and implementing a community event. Proceeds go to the Joy Boyd or Cynthia Norkin Scholarship Funds.
 - b. **Wheelchair Rugby Tournament:** organizing and implementing a community event to raise awareness of disabilities. Proceeds go to the wheelchair rugby team after expenses.
 - c. **Pittsburgh-Marquette Challenge:** grassroots fund-raising effort created by students to help support the APTA Research Foundation. As a professional responsibility, each class is required to donate to the challenge. Classes often do this on a yearly rotating basis.

- d. **Composite class picture:** each class is expected to provide the Division with a matted and framed 13.5" x 9.5" composite class picture suitable for hanging. See examples in the department.

XXI. CLINICAL TREATMENT BY FACULTY

A faculty member will only examine/screen a student in the event that they have an injury or condition in which participation/practice by other students on affected joint or body part could cause or be potentially harmful to the student. i.e. Manual/Ortho. If a student is having an issue that is not related to the course/courses being taught, depending on their insurance plan, they may need to see their primary care provider or they may see a therapist of their choosing to have a full evaluation.

XXII. WORK OUTSIDE OF DIVISION

On occasion, the students in the PT program are approached to work as aides for clients in the community. With enrolment into a professional health care program, it is very important that these types of aide positions do not cross the boundary of functioning as a licensed healthcare giver but without the license – a situation that could lead to an inability to obtain a license upon graduation. To help safeguard our students, we require any student interested in working as an aide to discuss this position with the faculty member in charge of the service learning component of our curriculum. The faculty member will work with the student to ensure an appropriate work environment.

XXIII. GRADUATE ASSISTANTSHIPS

All graduate students receiving a Graduate Assistantship (GA) must register for at least 12 graduate credit hours per term. A GA includes tuition and stipend and requires weekly hours of work. The amount of the tuition waiver, stipend, and work requirement will depend upon the type of GA – full or partial. The terms of the GA will be detailed in the letter of offer.

Students must apply to receive GA positions in the Division of PT (see the Administrative Associate). GA positions are awarded for one year. However, the GA may be renewed based on student job performance, mentor evaluation, and available funding. Re-appointment is not automatic. Graduate assistants are not funded during terms with full-time clinicals because the student is off campus and unable to work.

Graduate Assistants are to be treated respectfully in terms of their assignments. **Classes take precedent over work assignments.** If difficulties arise in a work situation, the graduate assistant should make an appointment with the Program Director to discuss the issue(s).

Effect of GPA on Graduate Appointments or Scholarships: A cumulative GPA of 3.33 or better is a requirement of the Division for students to maintain their appointments. If your cumulative GPA falls below 3.33, you will be given one term to raise your cumulative GPA to 3.33. If the cumulative GPA is not at least a 3.33 at the end of this term, then the appointment/scholarship will be forfeited. If the cumulative GPA falls below a 3.0, you will be placed on probation as described in the section titled Retention/Dismissal Policy. While on probation you are not eligible to receive any university funding (stipend or scholarship).

XXIV. DISABILITY, ACCOMMODATIONS, HEALTH AND WELLNESS

If a student has a permanent disability that will affect their ability to complete any of the essential functions outlined in Section V of this handbook in the didactic and/or clinical environment, s/he is required to register the disability with the University Office of Equity and Civil Rights Compliance through Student Accessibility Services. This Office will provide the student with a letter delineating appropriate accommodations. A copy of this letter should be given to the Program Director, DCE/ADCE, and all current course instructors. Upon receipt of the letter, the faculty will attempt to make all reasonable accommodations to assist the student in his/her learning. **The faculty is unable to provide accommodations without this letter from the Office of Equity and Civil Rights Compliance.** The faculty will make every effort to provide reasonable accommodations. The student must still be able to perform all essential functions with or without accommodations.

If the accommodations are requested for clinical education, DCE/ADCE in conjunction with Student Accessibility Services will assist the student in determining and requesting reasonable accommodations PRIOR to clinical placement. A clinical site may not be able to provide the requested accommodations and alternative sites may need to be considered. There is no guarantee that geographic or site specific preferences can be honored. While every attempt will be made to find a clinical site that can provide requested accommodations, there is no guarantee that any one site will be able to provide all requested accommodations.

If, during enrollment in the DPT program, a student develops a permanent or temporary disability that affects his/her physical, sensory, psychological, behavioral or cognitive abilities, the student is responsible for disclosing this disability to the DCE/ADCE and the Program Director. This includes any serious illness, hospitalization, accident, surgery, or mental health crises that results in a permanent or temporary inability to perform the essential functions outlined in Section V of this handbook. Students must obtain a medical release from their physician, mental health clinician or service provider prior to returning to the didactic or clinical education component of the curriculum. This release form (see Appendix) must include information about the medical and/or psychological condition, treatment(s) provided, follow-up recommendations, and an assessment of the student's ability to meet the essential functions with or without accommodations. If needed, the release to return to the DPT program must include a listing of physical, sensory, psychological, behavioral or cognitive limitations the student is still experiencing. The DCE/ADCE and Program Director in conjunction with Student Accessibility Services will assist the student in determining and requesting reasonable accommodations for the remainder of the DPT program in both academic and clinical settings as needed.

XXV. MEDICAL EMERGENCIES

- A. When medical emergencies occur in Grover Center in the Division of Physical Therapy, our first responsibility is to the person in distress. The closest faculty member should be notified and brought to the person in distress. If no faculty member is available, call WellWorks (3-2662) as they have a technician who is taught to respond to medical emergencies. If necessary, life-saving or other procedures should be taken immediately including calling 911.
- B. If the individual is a student or research subject, a member of the faculty must accompany the student/subject to the emergency room at OhioHealth O'Bleness Memorial Hospital if that is needed.

- C. As soon as possible, the Program Director of PT should be notified and kept apprised of any and all complications/outcomes.
- D. The student's immediate family shall be notified if the student is unable to communicate. If able to communicate, the student's permission will be solicited prior to notifying any family member.
- E. The event should be documented with an Incident Report (see the Administrative Associate). All Incident Reports should be kept in the student's permanent academic file.
- F. The student must present a "Readiness to Return" form (see Appendix) completed by his/her physician prior to resuming class work/practicum. The form must indicate that the student is able to resume all aspects of the physical therapy curriculum.

XXVI. LICENSURE

- A. Licensure is required in order to practice physical therapy in the United States. All graduates must take the Physical Therapist Licensing Examination (NPTE) which is offered by the Federation of State Boards of Physical Therapy (FSBPT) to become a licensed physical therapist. It is now offered in computerized format only on set dates each year. You will find the test dates and application information on the FSBPT website (www.fsbpt.org).
- B. During the first year of the program, each student will be entered into the FSBPT database. It is the student's responsibility to complete his/her profile on this website after receipt of notification e-mail. This step is mandated by FSBPT and will affect the student's ability to register for the licensure examination.
- C. Each student must apply for candidate status by completing an application form for the state where s/he intends to work upon graduation. Licensing packets are available on-line from the website for each state board. Students will be expected to take the responsibility for obtaining information regarding licensure in the states in which they wish to practice.
- D. **Please note that conviction of a felony in the past may prevent an individual from obtaining a license.**
- E. Many states now have a provision allowing students to sit for the licensure examination up to 90 days prior to their scheduled graduation date. It is the student's responsibility to obtain information on his/her state of interest. To qualify for the pre-graduation testing, the Program Director must complete an intent-to-graduate form. Since the faculty through the Program Director must attest to the student's standing in the program, it is the faculty's decision regarding the ability of each student to sit for early licensure testing and not the student's preference.
- F. **The Division will not complete a form for pre-graduation testing for any student that has been on academic probation at any time during the course of the DPT curriculum.**
- G. Approval for pre-graduation testing can be rescinded based upon performance difficulties occurring during the final clinical practicum. Clinical education takes precedence over the

early testing. Each student's first priority must be the educational component of the final clinical which should be chosen to challenge the student's knowledge and skills.

- H. All students are eligible to sit for the licensing examination post-graduation.
- I. It is the student's responsibility to obtain all forms necessary for application for a PT license from the state in which s/he intends to practice.
- J. For all students regardless of exam date, the Program Director of PT must complete a form verifying graduation from an approved and accredited program. This form cannot be completed until the student has successfully finished his/her final clinical practicum and the curriculum survey.
- K. Students have the option of scheduling a review course prior to the licensure testing date(s). Plans must be made in conjunction with the Program Director in order to use school facilities. Payment for the course is the responsibility of each student although at times, class funds may be used.

XXVII. NONDISCRIMINATION

- A. Ohio University does not discriminate on the basis of race, color, religion, national origin, sex, disability, sexual orientation, gender identity or expression, age, or military veteran status in its employment practices or in the provision of educational programs and services. The Office of Institutional Equity monitors all processes/practices at the University to ensure compliance.
- B. Ohio University actively promotes recruitment and retention of multicultural and disadvantaged students into the health professions.
- C. Ohio University prohibits sexual harassment of students, faculty, or clinical staff, including the creation of an uncomfortable environment due to sexual innuendo. All University and Clinical Education facility employees and students are responsible for compliance.
- D. Specific concerns or complaints regarding any type of harassment or discrimination should be brought to the attention of the Program Director of Physical Therapy. If satisfaction is not received, concerns should then be directed to the Director of the School of Rehabilitation and Communication Sciences, the Dean of the College of Health Sciences and Professions, and/or to the University Ombudsman.

XXVIII. CONFIDENTIALITY

- A. The Division of Physical Therapy adheres to the University policy regarding confidentiality of student records (FERPA) and federal HIPAA standards regarding privacy of personal health information. No educational records will be maintained that are not directly related to the basic purposes of the University. All policies and practices governing the collection, maintenance, review and release of records will be based upon the principles of confidentiality and the student's right to privacy, consistent with the Family Educational Rights and Privacy Act of 1974 (FERPA). This policy shall govern the collection, maintenance, review and release of student records on the Athens and regional campuses of Ohio University.

- B. A student is herein defined to mean any person for whom the University maintains educational records or personally identifiable information but does not include a person who has not been in attendance at the University or any of its regional campuses. (See the Student Records Policy in the Graduate Catalog for specific details).
- C. Faculty members are unable to speak with any family members of our adult students (over the age of 18 years) regarding academic or health reasons without written permission from the student. The only exception to this rule is if the student is in jeopardy of harming him/herself or others.
- D. Under FERPA, faculty have a “need to know” any information that would place the student in jeopardy either physically or academically. It is the policy of this program to inform all faculty in the division of student issues that can adversely impact a student’s outcome through the program. This information will be kept confidentially within the faculty.

XIX. REVISION OF THE POLICY AND PROCEDURE MANUAL

- A. Revision of this *Policy and Procedure Manual* by the faculty will occur as needed throughout the academic year.
- B. Any revisions made during the academic year will be presented to the student body for comments and questions in the term that the revisions are made. While the students’ opinions will be considered, the final decision on the revisions to the *Policy and Procedure Manual* belongs to the faculty of the Division.
- C. Implementation of the revisions will take place one term following the presentation to the student body.
- D. At the students’ request, revisions can be implemented sooner if written consent is acquired from all current students affected by the change(s).
- E. At a minimum, the *Manual* will be reviewed and revised yearly by the faculty.

CLINICAL EDUCATION POLICIES AND PROCEDURES

I. MISSION AND PHILOSOPHY OF CLINICAL EDUCATION

The clinical education curriculum strives to provide a variety of quality clinical learning experiences in order to prepare students for their role as an autonomous, evidence-based professional practitioner. These experiences include exposure to various practice settings and patient/client populations that are representative of current practice. Geographic diversity in clinical placements is encouraged.

II. DESCRIPTION OF CLINICAL EDUCATION

The clinical education component of the curriculum includes a part-time integrated clinical experience (ICE) and three full-time clinical experiences, which are interspersed with the didactic portion of the 3-year curriculum.

A. Part-time ICE provides students with the opportunity to practice clinical skills outside the classroom under the guidance of a physical therapist mentor concurrently with didactic coursework. This allows students the opportunity to bring practical knowledge, skills and experiences back to the classroom. The goals of this fluid exchange with the real world are to prepare students for their first full-time clinical experience and to provide a relevant context for the academic content. This experience will occur during Spring Semester of the first year. These experiences take place in local, rural clinical education facilities.

B. Full-time clinical education experiences (also called clinical practicum) provide students with a supervised, concentrated course of study in the clinic environment between didactic coursework. These experiences allow students to apply theory and develop clinical and professional skills learned during the didactic portion of the curriculum. Skills in professionalism, patient/client management and practice management are progressively advanced from the first full-time clinical practicum through the terminal clinical practicum in order for students to achieve entry-level clinical skills, professionalism, clinical reasoning, decision-making, and patient/practice management.

- a. The first full-time clinical education experience (8 weeks) occurs in the latter part of fall semester in year two of the program.
- b. The intermediate full-time clinical education experience (14 weeks) occurs in summer semester between year 2 and year 3 of the program.
- c. The terminal full-time clinical education experience (16 weeks total) occurs during spring semester of the final year and may be completed as one 16-week experience or two 8-week experiences.

III. CLINICAL EDUCATION DEFINITIONS

To ensure proper communication, the essential components of the clinical education team are defined:

A. Academic Program

The accredited educational unit that provides the entry level curriculum leading to a doctor in physical therapy degree (DPT).

B. Clinical Education Site

An accredited or approved health care facility that, through a legally negotiated clinical education agreement with the academic facility (also called an affiliation agreement), provides DPT students with a learning laboratory and patient contact for the development of professional skills.

C. Director of Clinical Education (DCE)

The person employed by the academic institution who plans, organizes, directs, supervises, and evaluates the clinical education component of the DPT curriculum. For our program, the DCE's contact information is:

Janice Howman, PT, DPT, MEd
Ohio University
College of Health Sciences and Professions
Division of Physical Therapy
Grover Center W-297
Athens, OH 45701
Email: howman@ohio.edu
Phone: 740-593-1614
Fax: 740-593-0293

D. Assistant Director of Clinical Education (ADCE)

This person is also employed by the academic institution and assists the DCE with planning, organizing, directing, supervising and evaluating the clinical education component of the DPT curriculum. For our program, the ADCE's contact information is:

Paula DeLorm, PT, DPT, CEEAA
Ohio University
College of Health Sciences and Professions
Division of Physical Therapy
Grover Center W-285
Athens, OH 45701
Email: delorm@ohio.edu
Phone: 740-593-0024
Fax: 740-593-0293

E. Site Coordinator of Clinical Education (SCCE)

An employee of the clinical education site who is responsible for organizing directing and coordinating the clinical education program for the site. They determine who will serve as clinical instructors for students and provide supervision/assistance to both the clinical instructor and student during clinical education experiences. The SCCE is the primary liaison for the academic program's DCE, ADCE and students when arranging and preparing for clinical education placements. The SCCE may be a physical therapist (PT), physical therapist assistant (PTA), another healthcare provider or an administrative/clerical employee of the clinical facility.

F. Clinical Instructor (CI)

The licensed PT employed by the clinical education site who is designated by the SCCE to directly instruct, supervise, guide and evaluate the assigned DPT student during their clinical education experiences.

G. Student Physical Therapist (SPT)

The student enrolled by the academic program for a course of study leading to a DPT degree who participates in both didactic and clinical coursework.

IV. ROLES AND RESPONSIBILITIES OF PARTICIPANTS

A. Director of Clinical Education (DCE) and/or Assistant Director of Clinical Education (ADCE)

1. Role: To develop, organize, supervise, and coordinate the clinical education curriculum of the physical therapy education program.
2. Responsibilities:
 - a. To select clinical education sites that will provide quality clinical education experiences for students and enhance availability of diverse clinical learning experiences
 - b. To coordinate student placements with the SCCE of selected clinical education sites
 - c. To develop, organize, direct, supervise, coordinate and evaluate the part-time ICE and full-time practicum experiences of each individual student
 - d. To coordinate open communication among the DCE/ADCE, SCCE, CI, and student
 - e. To assign grades for clinical education courses within the DPT curriculum based on student performance during clinical education experiences after reviewing the student's and CI's evaluations
 - f. To assist in developing, documenting and monitoring learning plans for students experiencing difficulty during clinical education experiences
 - g. To keep faculty informed of students' progress and report on identified deficiencies in the curriculum
 - h. To continually assess the quality and effectiveness of clinical education experiences occurring at affiliated clinical education sites
 - i. To help develop, implement, and evaluate clinical faculty and collaborate on professional development activities for clinical faculty

B. Site Coordinator of Clinical Education (SCCE)

1. Role: To collectively organize, direct, supervise, coordinate, and assess activities of all DPT students assigned to their site by academic programs.
2. Responsibilities:
 - a. To identify, organize, develop and coordinate specific learning experiences at their facility
 - b. To coordinate student placements with the DCE/ADCE
 - c. To communicate onboarding requirements to students and assist as needed with preparations for beginning a clinical education experience
 - d. To oversee the direction, supervision, coordination, and evaluation activities of students assigned to their clinical education site
 - e. To evaluate and develop clinical education faculty, which may include collaborating with academic programs and clinical education consortia on professional development activities for their clinical faculty
 - f. To participate in clinical education faculty development programs
 - g. To maintain communication with the DCE/ADCE, CI and assigned students during the Practicum (i.e., notification of student problems and progress)

C. Clinical Instructor (CI)

1. Role: To directly supervise, mentor and evaluate activities of an assigned DPT student
2. Responsibilities:
 - a. To assist with identification and development of learning experiences and resources for students
 - b. To identify, organize, and coordinate specific learning experiences within their clinical education facility for each student
 - c. To provide honest, objective formative feedback to the SPT on an ongoing basis and formal summative feedback to the SPT and academic program as requested
 - d. To organize, direct, supervise, coordinate, and evaluate the activities of DPT students under their supervision
 - e. To participate in clinical education meetings and other clinical faculty development programs
 - f. To maintain communication with the DCE/ADCE, SCCE, and assigned students during clinical education experiences (i.e., notification of student problems and progress)

D. Student Physical Therapists (SPT)

1. Role: To prepare, study, and actively engage in clinical learning experiences.
2. Responsibilities:

Prior to arrival at the assigned clinical education site:

 - a. To pass all didactic courses preceding the part-time ICE or full-time clinical education experiences with a C or better grade. Students receiving a grade below C will not be permitted to attend a part-time or full-time clinical education experience until appropriate remediation is completed and a passing grade is achieved.
 - b. To maintain a 3.0 cumulative GPA. Students are required to have a cumulative GPA at/above 3.0 to participate in full-time clinical education experiences.
 - c. To register for the clinical education course.
 - d. To review information related to their assigned clinical education site that is found on the secured Blackboard clinical education web page, which includes but is not limited to the clinical education agreement and Clinical Site Information Form (CSIF).
 - e. To review the School's academic policy and procedures manual.
 - f. To review the Laws and Rules governing the Practice of Physical Therapy in the state where the clinical education site is located.
 - g. To complete all requirements of the academic facility and the assigned clinical education site as outlined in policies and procedures, the clinical education agreement and CSIF within stated deadlines.
 - h. To complete an introduction letter and student data form to send to the assigned clinical education site. The introduction letter is to be sent at least 8 weeks prior to beginning the clinical education experience. If requested, the student will provide the DCE/ADCE with a copy by an assigned date.
 - i. To send (or take in on the first assigned day) to the clinical education site all required health and immunization records, proof of CPR or other certifications, copy of the professional liability insurance certificate and any other requirements as outlined by the clinical education site.
 - j. To provide a copy of all requirements, forms and updates to the Program's Clinical Education Record Manager. Students will not be able to start a full-

time internship if they fail to provide evidence of requirements/updates at least 2 business days prior to the start date of their clinical education experience.

- k. To arrange and pay for personal travel and accommodation expenses.

While at the assigned clinical education site:

- a. To adhere to all policies of the clinical education site and academic program including but not limited to dress code, attendance, confidentiality, etc.
- b. To adhere to the rules and regulations of the clinical education site and its physical therapy department.
- c. To adhere to the rules and regulations of Ohio University and the Division of Physical Therapy.
- d. To adhere to the Laws and Rules governing the Practice of Physical Therapy in the state where the clinical education site is located.
- e. To adhere to APTA Code of Ethics.
- f. To demonstrate behaviors consistent with the Professional Behaviors for the 21st Century and APTA's Core Values.
- g. To complete all assignments given by the clinical education site and academic program including but not limited to monitoring the course Blackboard, responding to emails or phone calls from the DCE/ADCE and in-service education programs assigned by the CI/SCCE, etc.
- h. To participate in professional activities of the clinical education site as requested by the CI and in accordance with the policy established between the facility and School.
- i. To arrange for health services in accordance with the policy of Ohio University in the event of illness or accident. Students are responsible for their own healthcare expenses while at clinical affiliations.
- j. To participate in the evaluation of their clinical performance through completion of the online Clinical Performance Instrument (CPIWeb) at midterm and final evaluations.
- k. To evaluate the effectiveness of the clinical education experience and the CI using the APTA's form *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction*.

Upon completion of experience:

- a. To complete and send a thank you letter to the CI and/or SCCE.
- b. To submit a copy of the evaluation of clinical education site and any other assignments to the DCE/ADCE.
- c. To meet with the DCE/ADCE as needed to review performance, evaluation of clinical education site and/or plan for future clinical experiences.

V. STUDENT REQUIREMENTS

A. Student agreement

- 1. Students will review, sign and adhere to the Student Agreement Form (See Appendix) throughout their enrollment in the DPT curriculum.
- 2. Students will acknowledge that given the nature of the health care field they are at increased risk for exposure to infectious disease due to contact with patients, blood, and other bodily fluids. Students must comply with the clinical education site's policies and procedures related to prevention of injury, isolation

and protective precautions. In the event of injury or exposure to infectious organism, the student will follow the clinical education site's protocol for reporting and treatment and will notify the CI, SCCE and DCE/ADCE. Costs incurred for evaluation and treatment will be student's responsibility.

3. Students will comply with the DPT program's health, immunization, criminal background check, and professional liability insurance requirements, including submission of required records to the program's clinical education Records Manager by established deadlines. The student is responsible for all fees associated with obtaining these requirements.
4. Students will receive general Health Insurance Portability and Accountability Act (HIPAA) training as part of their academic preparation. For each clinical education site that a student attends for their clinical education experiences, they are required to learn and abide by the facility's HIPAA policies and procedures to ensure confidentiality of patient's protected health information (PHI).
5. Students will receive general OSHA Bloodborne Pathogen training as part of their academic preparation. For each clinical education site that a student attends for their clinical education experiences, they are required to learn and abide by the facility's Infection Control policies and procedures and their Exposure Control Plan.

B. Criminal Background Check

Because many clinical education sites are required by law to perform background checks on all personnel who have contact with patients and because PT licensing boards require background checks, the Division of Physical Therapy requires all students to complete the StudentCheck Criminal Background Check for Healthcare Students online through PreCheck, Inc. This StudentCheck is completed during the Summer semester of the first year but in some instances students may request and be granted an extension to Fall semester of the first year. All background checks must be completed by the end of Fall semester of the first year of the program. If a student does not submit a Criminal Background Check by this deadline, they will not be eligible to participate in the part-time ICE in Spring semester which will delay progression in the curriculum which, in turn, will delay graduation. Some students will need to have additional background checks depending on the requirements of the clinical education site they are assigned to for their full-time clinical education experiences. The PreCheck StudentCheck includes the following:

- Criminal History Investigation (7 years, unlimited counties)
- Sexual Offender Registry/Predator Registry
- Social Security Number Verification
- Positive Identification National Locator with Previous Address
- Maiden/AKA Name Search
- Medicare/Medicaid Sanction Search, through National Healthcare Data Bank (Office of Inspector General Search, General Services Administration Search and FDA Debarment Check)
- National Wants and Warrants Submission
- Investigative Application Review (by Licensed Investigator)
- National Healthcare Data Bank (NHDB) Sanction Report
- Misconduct Registry Search
- Executive Order 13224 Terrorism Sanctions Regulations

Students are responsible for the cost of this background check (currently \$49.50). The background checks are done completely online at www.PreCheck.com (see Appendix for instructions for obtaining your background check).

The completed background check reports are made available online only to the PT program's DCE/ADCE, Program Director and clinical education Records Manager. Reports will be permanently archived online with PreCheck. Printed copies can be made available to the student upon request. If a clinic site requests a copy of the report, it is preferred that the student deliver the report. The academic program will only provide a copy of the report to a student's clinical education site if specifically requested by the site or student. Students acknowledged and agreed to the release of this information to the clinical education site when they signed the Student Agreement Form at orientation on the first day of the program.

In the event that any criminal history, sanctions, debarments, exclusions, suspensions or other adverse results are reported, the offense(s) will be discussed with the student, the PT Program Director, DCE/ADCE, Ohio University Office of Legal Affairs (if indicated), Ohio University Office of Community Standards and Student Responsibility (if indicated), and/or other authorities as necessary to determine the best course of action. Students cannot be guaranteed clinical placement or retention in the DPT program if criminal history, sanctions, debarments, exclusions, suspensions or other adverse results are detected. If a student has any questions or concerns about this policy, they should address the issue with either the program's DCE/ADCE or Program Director.

C. Health Requirements and Release of Information

Completion of student's health record, including a physical examination, a two-step TB skin test (PPD), immunization history and Hepatitis B vaccination or declination, is required during summer semester of the first year (see Appendix for forms). Students who have never received or who are not up-to-date on their immunizations will be required to catch up on immunizations based on the current recommendations of the Centers for Disease Control (CDC). Students who do not obtain the recommended immunizations cannot be guaranteed clinical placements. Physical examinations and one-step TB tests must be repeated annually until graduation. A copy of each student's health requirements will be maintained in a secured file cabinet in the PT program's front office. Students are required to maintain a copy of their health records, which they will need to share with their clinical education sites upon request.

Some clinical education sites have additional requirements including but not limited to varicella verification, vaccination or titer, fingerprint criminal background checks and drug testing. The student is responsible for obtaining whatever requirements are listed by their clinical education site, any costs associated with these requirements and for providing the clinical education Records Manager with a copy of the information. Students will not be able to start a part-time ICE or any of their full-time clinical education experiences if they fail to provide evidence of requirements (both the academic program's and the clinical education site's requirements) and/or updates at least 2 business days prior to the start date of the clinical experience.

Students testing positive on any TB skin test will be required to have follow-up Interferon Gamma Release Assay (IGRA) testing (T-Spot testing). This blood test is more accurate in identifying true positive results.

If this follow-up T-Spot testing is negative:

- No further testing is required by the academic facility but some clinical education sites may also require proof of a negative chest x-ray.
- Annual updates will be completed using T-Spot testing.

If this follow-up T-Spot testing is positive:

- A chest x-ray and follow-up with a physician and/or TB clinic is required
- Annual updates will be completed through use of a TB symptoms questionnaire

Students with history of a positive TB skin test and documented negative T-Spot or chest x-ray within the year prior to entering the PT Program will be screened annually using T-Spot testing. If at any time symptoms suggestive of TB disease develop, the student will then be required to undergo medical evaluation and treatment as indicated. Students undergoing medical treatment for TB may continue in the academic program as long as they provide documentation of compliance and ultimate completion of treatment with satisfactory resolution of disease.

D. CPR Certification

Each student shall hold a current CPR certification for a professional rescuer by the end of the summer semester of the first year. This CPR certification must remain current until graduation. Students are required to meet the CPR certification standards of the clinical education site to which they are assigned. Students are responsible for all costs associated with obtaining and maintaining CPR certification. The student is responsible for providing the clinical education Records Manager with a copy of their current CPR certification card. Students will not be able to start a part-time ICE or any of their full-time clinical education experiences if they fail to provide evidence of CPR certification at least 2 business days prior to the start date of the clinical experience.

E. Professional Liability Insurance

By the end of the first summer semester, DPT students are required to have professional liability insurance. The DCE is responsible for obtaining the group policy to cover all DPT program students. Students pay for their professional liability insurance coverage through their program fees.

F. Transportation and Lodging

Students are responsible for providing their own transportation and lodging for all learning experiences associated with the clinical education component of the DPT curriculum. Part-time ICE courses entail travel up to a maximum drive of 90 minutes, one way from the main campus therefore, students must have access to a car or other means of transportation to get to clinical sites. Full-time clinical education experiences may be in a location that necessitates arranging for housing as well as commuting considerations. While some clinical education sites may offer assistance for determining travel and housing arrangements, most do not. Students are ultimately responsible for making travel and housing arrangements as well as for all costs associated with living expenses during all of their full-time clinical education experiences.

In the event of a cancellation of a full-time clinical education experience, every attempt will be made to find an alternative clinical education site in the vicinity of travel and accommodation arrangements. If there are no alternative clinical education sites available, the student will be responsible for any lost travel expenses or cancellation penalties.

G. Clinical Dress Code

Students are expected to comply with each facility's policies and procedures for proper attire and personal appearance during clinical affiliations. This may include but not be limited to wearing a white lab jacket, scrubs, dress pants, dress shirt or blouse of appropriate length to cover abdominal area, and comfortable low-heeled shoes. Name badges are required. A well-groomed and professional appearance must be maintained at all times while at the clinical education site. This includes but is not limited to cleanliness, well-kept and professional hairstyle, limited and appropriate body piercings, and limited tattoos preferably in areas covered with clothing. Failure to comply with proper dress code and personal appearance requirements can result in removal from a clinical education site or in a failing grade being assigned for the clinical experience. The student is responsible for all costs associated with the clinical dress code.

H. Attendance

1. Term of Completion

Students are expected to complete their full-time Practicum courses during the regularly scheduled term. Exceptions may be granted in certain situations such as:

- a. An involvement with the ROTC Program or any involvement as an active or retired member of the Armed Forces
- b. Major illness, non-elective surgical procedure or significant personal/family crisis
- c. The DCE/ADCE, in consultation with the faculty, determines a need to alter the clinical experience dates

Students approved for an altered clinical education sequence will work individually with the DCE/ADCE to determine clinical placements.

2. Full-time clinical education experiences

The physical therapy student is expected to follow the schedule of their CI(s) for a full-time work week (considered 40 hours/week). In situations where CI's full-time work schedule is less than 40 hours/week, practicum experiences can be supplemented with other learning activities provided by the clinical education site (ie: observing surgeries, following specialists, participating in conferences or journal clubs, etc.) or additional projects can be assigned by the clinical education site or academic program that enhance student learning to make up the additional hours. Student's schedules while on full-time clinical education experiences should not be expected to always be a typical Monday through Friday 8am-5pm as many clinical education sites have staggered schedules to ensure physical therapy services are provided 7 days/week and for extended hours. It is likely that students will work some extended days (10 and 12 hours) and weekends during at least some of their clinical education experiences.

Students are expected to attend all days of their scheduled full-time clinical practicum. Under certain conditions, arrangements may be made for making up time lost due to a legitimate absence. Legitimate absences include but are not limited to: illness, death in the immediate family, religious observance, and University sponsored activities. Rescheduling make up time is the responsibility of the student in consultation with the CI and/or SCCE. The DCE/ADCE must be notified in the event of any absence exceeding two consecutive days.

3. Part-time ICE

The physical therapy student is expected to attend the assigned clinical experience at times designated by the DCE/ADCE or CI. The CI may choose appropriate, alternate times/days of clinical instruction that will optimize the experience for the student. Under certain conditions arrangements may be made for making up time lost due to a legitimate absence. Legitimate absences include but are not limited to: illness, death in the immediate family, religious observance, and University sponsored activities. Rescheduling make up time is the responsibility of the student in collaboration with the CI. Make-up time cannot be guaranteed.

I. **Site-specific onboarding requirements and costs**

Some clinical education sites have additional onboarding procedures that include site-specific activities such as completion of orientation or training modules, taking quizzes over orientation information, or having a representative of the academic program attest to completion of health and criminal background check requirements. If the clinical education site has notified the DCE about their onboarding process, the information will be available on the Clinical Education Blackboard. Some clinical education sites send the onboarding directions directly to the student. The clinical education Records Manager is available to assist students in completing the onboarding requirements but the student is responsible for determining onboarding requirements and requesting assistance or verification of completion.

Additionally, some clinical education sites charge for the cost of a student's onboarding either by billing the student directly or billing the academic facility. The Cleveland Clinic Foundation has instituted a \$50.00 onboarding fee for any student completing a clinical education experience at any of their healthcare facilities. For Ohio University DPT students, this fee is charged to our College and is paid for by the Division of PT from the student's program fees.

VI. **CLINICAL AFFILIATES**

A. **Affiliation agreements for clinical education of physical therapy students**

A legally executed, written affiliation agreement is made between the academic facility and the clinical education site for the clinical education of DPT students. The responsibilities of the academic facility, clinical education site and student are outlined in this agreement. These formal agreements are completed either through use of Ohio University College of Health Sciences and Profession's standard agreement (see Appendix) or the clinical education site's Agreement form. The physical therapy student **must** be aware of and comply with all the responsibilities outlined in these Agreements.

B. **Current listing of clinical affiliates**

A listing of all clinical education sites that have a current affiliation agreement with Ohio University's Division of Physical Therapy is available on the program's Clinical Education Blackboard. The DCE/ADCE strive to maintain a diverse group of clinical affiliates to provide learning opportunities in a variety of practice settings in various geographic regions.

C. **New clinical affiliates**

The DCE/ADCE screens possible clinical education sites to ensure high quality learning experiences for DPT students in a variety of settings. The DCE/ADCE is

responsible for determining the interest of possible clinical education sites and screening possible sites through:

1. A tour of the clinical education site and the Physical Therapy Department and/or
2. Completion of the CSIF including the accreditation and ownership status of the clinical education site and/or
3. Telephone communication with the SCCE regarding learning experiences available, accreditation and ownership status of the clinical education site, and educational philosophy of the clinical education site staff

The DCE/ADCE will add a clinical education site to the program's clinical education affiliates only if it will add quality learning experiences and/or strengthen the overall clinical education curriculum in terms of providing additional opportunities in practice settings or geographic regions that have limited representation among the current clinical education affiliates. Every effort will be made to exclude referral for profit clinics from the program's clinical affiliations due to the ethical concern with these practices. The final decision for selecting new clinical education sites rests with the DCE/ADCE in collaboration with the Program Director and faculty.

C. Development and coordination of clinical affiliates

Development of the selected clinical education sites results from interaction between the academic faculty and clinical faculty. This process is coordinated by the DCE/ADCE and SCCE.

The DCE/ADCE is responsible for the following:

1. Determining, in cooperation with the SCCE, if the clinical education site will be utilized for part-time ICE or full-time clinical education experiences, or both
2. Ensuring that the relationship between the academic facility and clinical education site is formalized through development of a legally executed, written affiliation agreement
3. Setting up a system of communication through:
 - a. Initial sharing of information between the academic facility and the clinical education site including discussion of each party's educational philosophies, learning objectives, student performance expectations, learning experiences desired and available, didactic and clinical education curriculum sequence and other general information (ie: definitions of clinical education terms, student supervision issues, etc.).
 - b. Formal site visits or teleconferences by the DCE/ADCE or other faculty representation during practicum experiences as needed
 - c. Annual or bi-annual clinical education newsletters from the academic facility to SCCE/CIs to share information about program updates, upcoming programs or clinical education events, regional/national clinical education news items, etc.
 - d. Annual availability correspondences between the DCE/ADCE and SCCEs to plan clinical placements
 - e. Reciprocal exchange of email announcements regarding clinical faculty development opportunities, clinical education resources, continuing education opportunities for faculty/students, residency application announcements, job opportunities for students, etc.

- f. Collaborative work between the academic faculty and clinical education faculty on special projects (ie: presentations, research, innovative clinical education activities, etc.)
- g. Ongoing informal networking on a continual basis

E. Correspondence/communication with clinical affiliates

All correspondence and communication with the clinical education site in regards to becoming an affiliated clinical site with Ohio University's Division of Physical Therapy and for determining clinical placements will be made through the DCE/ADCE. Students are not to be in contact with a clinical education site until after placements are completed and they have received confirmation of their placement from the clinical education Records Manager.

When developing their request lists for full-time clinical education experiences, students may want to gather general information about a potential new clinical education site (ie: facility name/location/website, contact information for owner, PT manager or SCCE). This can only be done through information that is accessible to the general public, such as the site's website, informational brochures, flyers, etc. Students are not allowed to contact any clinical education site (new or established) for the purpose of soliciting a placement for a clinical education experience. If a student is interested in completing a full-time clinical education experience at a clinical education site that is not currently affiliated with the academic program, they must meet with the DCE/ADCE to discuss the possibility. It is the DCE/ADCE's responsibility to determine if the site will be contacted to discuss the possibility of developing a clinical education partnership.

F. Clinical education faculty rights and privileges

1. Clinical education faculty have the right to refuse or cancel placement of a student based on their availability and to request immediate withdrawal of a student whose performance is unacceptable or creating undue risk. The privileges provided to clinical faculty include special invitation to College, School, Division and Consortium events, including but not limited to the PT program's social events at conferences, scholarship opportunities through the Ohio-Kentucky Consortium and continuing education courses.
2. Clinical education faculty development
Ohio University's Division of Physical Therapy is dedicated to continually advancing their clinical education partnerships and the quality of clinical teaching and learning. The following opportunities and resources are available to our clinical partners as part of our efforts to continually enhance student's learning in the clinical environment:
 - a. The DCE/ADCE are available throughout all clinical experiences to answer questions, provide guidance, share resources, etc. to assist CIs, SCCEs and students through their clinical learning. If a routine site visit is made, the DCE/ADCE will share information/resources with the CI and/or SCCE in addition to reviewing the student performance and clinical site. If a routine visit is not planned, CIs and students are given an opportunity to request a visit or teleconference.
 - b. The DCE/ADCE will coordinate, teach, or assist with providing the APTA Credentialed Clinical Instructor Program for our clinical affiliates upon request

as long as mutually acceptable dates can be established. Generally, the DCE/ADCE will provide/assist with 1-2 programs per year.

- c. In collaboration with other PT programs in Ohio and Kentucky, the DCE/ADCE will assist with the Ohio-Kentucky Consortium's annual clinical education faculty development workshop.
- d. The DCE/ADCE or clinical education Records Manager will share information about clinical education resources, news, scholarships, etc. related to clinical education faculty development on an ongoing basis. The Ohio-Kentucky Consortium's website at <http://www.okptce.com/> is one example of a resource for clinical education information that is regularly updated and frequently shared with clinical faculty.
- e. The DCE/ADCE routinely ask SCCE/CIs about special clinical education projects that the academic program may be able to assist with. Recent collaborative projects have included developing a presentation for a national meeting that show-cased an exceptional clinical education program at an affiliating clinical education site, developing a trial experience for implementing the 2:1 model in a large acute care hospital and developing a "pre-residency" final internship model. Students are encouraged to discuss ideas for collaborative projects that they become aware of while at a clinical education site with the DCE/ADCE.

F. Clinical affiliates that employ only one licensed physical therapist

DPT students MUST have on-site supervision from a licensed physical therapist whenever they are interacting/working with patients at the clinical education site; therefore, backup supervision must be available at all clinical education sites that employ only one licensed physical therapist. This backup system is to be utilized only on a short-term basis and only in emergency situations when the assigned CI must be absent. In these cases:

1. The SCCE/CI is responsible for the following:
 - a. Notifying the student of the backup procedure during orientation
 - b. Notifying the student of the backup CI for the involved day
 - c. Notifying the backup CI of the need to supervise the student for the involved day
 - d. Notifying the DCE/ADCE of the backup supervision or change of CI if the change will be for more than a few days
2. The student is responsible for the following:
 - a. Working under the supervision of the backup CI for the involved days
 - b. Notifying the DCE/ADCE of the backup supervision or change of CI if the change will be for more than a few days and if the SCCE/CI have not notified the DCE/ADCE
3. The backup CI is responsible for the following:
 - a. Organizing, directing, supervising, and evaluating the activities of the student for the involved days
 - b. Reporting to the SCCE and/or DCE/ADCE the outcome of the student's activities

VII. CLINICAL EXPERIENCES

A. Clinical education placement process

1. Part-time ICE

The DCE/ADCE will assign students to their part time ICE placement within the month proceeding the start date. ICE placements occur at one of two local affiliates who the academic program has closely partnered with in recent years for the development of the ICE experience. Currently, all ICE students are placed with a CI at a clinic setting of either First Settlement Physical Therapy or Ohio University Therapy Associations (both companies have various locations throughout SE Ohio and Western WV). If these clinical affiliates are unable to meet the capacity needs for ICE placements, other local clinical partners will be contacted and trained to ensure continuity and sustainability of the ICE experience.

2. Full-time clinical education experiences

The clinical education philosophy of the program is for each student to obtain well-rounded and diverse clinical education experiences. To assist in achieving this, each student will be required to complete practica in different types of settings across the continuum of care. This will allow exposure to a variety of patient populations (ie: musculoskeletal, neuromuscular, cardiopulmonary, integumentary, etc.) across the lifespan. Students are encouraged to complete all practicum courses in different practice settings but they may, at the most, repeat one type of experience.

Students are **required** to complete at least one practicum course in an inpatient setting (acute care, inpatient rehab, SNF, etc.) and one in an outpatient orthopedic setting. Students are not typically placed in advanced and specialty practice settings (ie: dance medicine, Women's Health, pediatrics, etc.) until their terminal clinical internship. Different types of practice settings include but are not limited to:

- a. Critical care, ICU, Acute Care (inpatient)
- b. SNF/ECF/Sub-acute (inpatient)
- c. Rehabilitation Centers (inpatient)
- d. Ambulatory Outpatient Clinics (outpatient)
- e. Home Health/Hospice (may be inpatient or outpatient)
- f. Wellness/Fitness or Industry (outpatient)
- g. School-based Pediatrics (may be inpatient or outpatient)

The DCE/ADCE is responsible for assigning students to their full-time clinical education experiences with input from the student. The placement philosophy is to provide the best possible placement for the entire cohort based on the resources available. Every attempt will be made to ensure diverse learning situations at the appropriate complexity level for each student. The placement process will be guided by the educational needs of students and the availability of clinical sites. Matching a student to their desired geographical location or to a specific site cannot be guaranteed.

Students will not be placed in clinical education sites where they have completed a significant amount of volunteer hours, been previously employed, have received scholarship assistance or have personal/familial connections with the physical therapy staff. Students will also be prohibited from completing a full-time clinical education experience at a clinical education site where they have a commitment of future employment or Residency. Students will be asked to honestly disclose these past and

future relationships/commitments when they submit their requests for clinical placement during the placement process.

Once a clinical placement has been confirmed with a clinical education site, the DCE/ADCE will not replace a student to a different clinical education site unless the clinic site cancels their offer. If the clinical education site cancels the offered rotation, the DCE/ADCE will work with the student to find an acceptable alternative site based on the educational needs of the student and the available resources with no guarantee that geographic or site-specific preferences can be obtained.

B. Introductory and thank you letters

The student is required to send an introduction letter and/or a student data sheet to the SCCE at the clinical education site at least 8 weeks prior to starting a full-time clinical experience. At the completion of a clinical experience, the student shall send a thank you letter to his/her CI and SCCE. The student data sheet is used to provide a quick reference of pertinent information. The letters and student data sheet includes the following components (see the Appendix for a sample copy of the student data sheet and letter content):

1. general statistics
2. transportation and housing status
3. health/health insurance and immunization records
4. liability insurance
5. special interests
6. clinical experience
7. personal goals

C. Registering for clinical education courses

If a student is NOT registered for a part-time ICE or full-time clinical education experience prior to the first day of the experience, the DCE/ADCE, with the authority of the Physical Therapy Program Director, *will require the student to leave a clinical facility immediately* until he/she is registered. Student professional liability insurance will not cover the student on assignment if he/she is not registered for a clinical education course.

D. Student evaluation of clinical education experience

Student evaluation of the clinical education experience is used to assist with the development of the clinical education facility, to assist future students in making decisions regarding clinical placements, to provide data for accreditation requirements and as part of the program's curriculum assessment.

The APTA Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction form (Appendix) is to be completed by each physical therapy student during the last week of the part-time ICE and full-time clinical education experiences. This form is to be shared with the CI and turned in to the DCE/ADCE by the established deadlines for each clinical education experience. Aggregate reports with de-identified data from multiple years of student evaluations are shared with SCCEs to assist them in assessing and continually developing their CIs and clinical education program.

E. Grading system for clinical education experiences

1. Part Time ICE

The grading for the part-time ICE course is based upon a credit/fail system. To obtain credit for the course, the physical therapy student must have completed between 50-56 hours in an assigned clinic, meet expectations as described in the course syllabus and submit required evaluation forms to the DCE/ADCE by the end of the semester.

The student's performance is evaluated by the CI at the end of the experience using the part-time clinical Final Evaluation form. The evaluation should be shared with the student at a mutually determined time.

Students will track their skill performance and development using the Student Checklist to provide continuity of learning between clinic days. No midterm evaluation is required during a part-time ICE but students are encouraged to have a midterm discussion with their CI about their performance and the plans for the duration of the ICE. At the end of the ICE, students will complete a self-assessment using the part-time clinical Final Evaluation form. The student will also evaluate the clinical experience and the clinical instructor using the APTA Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction form. This evaluation, the Student Checklist and self-assessment are to be shared with the CI at the time of the final evaluation. Both the student evaluation of the clinic and the final self-assessment shall be filled out prior to the mutually agreed upon meeting time.

If the student is not performing at a satisfactory level at any time during the clinical experience, the CI and/or student should contact the DCE/ADCE immediately. The student, CI and DCE/ADCE will work together to determine the potential problems and propose solutions to alleviate problems and improve performance. If the student continues to perform at an unsatisfactory level at the time of the final evaluation, the DCE/ADCE, in consultation with the CI, will determine if the student should receive credit for the part-time ICE experience.

If the student continues to perform at an unsatisfactory level at the time of the final evaluation, the CI, the SCCE, and the DCE/ADCE will consult regarding the student's final grade. If needed, the DCE/ADCE will also consult with program faculty to determine the student's final grade. Failure to receive credit in the part-time ICE experience will result in the student receiving either a PR or F grade. Final responsibility for grade assignment rests with the DCE/ADCE (whoever is instructor of record).

- a. If the student receives a PR grade, the student will be given the opportunity to extend their clinic time or complete a second ICE experience. Completion of the second ICE experience will result in one of the following outcomes:
 - i. Successfully meeting expectations. If, after completion of the extended/second ICE, the student demonstrates the required performance expectations, the grade for the original ICE experience will be changed to a CR (credit).

- ii. Unable to meet expectations. If, after completion of the extended/second ICE, the student is still unable to meet the required performance expectations, the grade for the original ICE will be changed to an F (fail). For failure of a course with a PT prefix, see the retention/dismissal policy (Section X).
- b. If the student receives an F grade, the student will be referred to the faculty per the retention/dismissal policy (Section X).

When student performance is not meeting expectations in a part-time ICE:

- a. The DCE/ADCE is responsible for the following:
 - i. Reviewing the completed part-time clinical Performance Evaluations
 - ii. Assigning either a credit, incomplete, or failing grade to the student clinical experience based upon attendance, meeting of performance expectations and submitting required forms/assignments by the established deadlines
 - iii. Withdrawal of a student from their assigned clinical education experience when, in the DCE/ADCE's judgment, the clinical experience does not meet the students' needs or when the CI determines that the student cannot meet performance goals at the facility
 - iv. Setting up a remedial or repeat ICE experience
- b. The CI is responsible for the following:
 - i. Immediately notifying the DCE/ADCE of any clinical problems or performance issues
 - ii. Completing and reviewing the part-time ICE Final Evaluation form with the student at the end of the clinical assignment
 - iii. Sending the Final Evaluation form to the DCE/ADCE at the end of the clinical assignment if the student is unable to return the document
- c. The physical therapy student is responsible for the following:
 - i. Completing the Student Checklist, the part-time ICE Final Evaluation form and the APTA Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction form
 - ii. Completing the DCE/ADCE evaluation report, upon the request of the academic facility
 - iii. Completing and submitting any other assigned course work
 - iv. Submitting the CI and student's Final Evaluation forms to the DCE/ADCE by the established deadline

2. Full-time clinical education experiences

The grading for all full-time Practicum courses is based upon a credit/fail system. To obtain credit for the Practicum, the physical therapy student must complete all attendance requirements, satisfactorily meet all of the performance objectives and submit all assignments by the deadlines specified. Please refer to each course syllabus for further details.

The student's performance is evaluated by the CI at the midterm and at the end of the experience using the APTA's online Clinical Performance Instrument (CPI Web). The student will also evaluate their clinical performance using the CPI Web as a self-assessment at the midterm and final. These evaluations are shared and discussed with their CI at a mutually determined time.

In addition, the student will evaluate the clinical experience and the clinical instructor using the APTA's Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction form. This evaluation is also shared at the midterm and final evaluation meetings. The CPI Web and the student evaluation of the clinic shall be filled out prior to the mutually agreed upon meeting time.

If the student is not performing at a satisfactory level at any time during the clinical experience, the CI, SCCE and/or student should contact the DCE/ADCE immediately. All parties involved, including the student, will work together to determine the best plan of action for alleviating problems and improving performance.

If the student continues to perform at an unsatisfactory level at the time of the final evaluation, the CI, the SCCE, and the DCE/ADCE will consult regarding the student's final grade. If needed, the DCE/ADCE will also consult with program faculty to determine the student's final grade. Failure to receive credit in any Practicum course will result in the student receiving either a PR or F grade. Final responsibility for grade assignment rests with the DCE/ADCE (whoever is instructor of record for the Practicum course).

If the student receives a PR grade, the student will be given the opportunity for a remedial or extended clinical experience. In this case, the student will meet with their faculty advisor and the DCE/ADCE to determine the most appropriate form of remediation and/or extension. Completion of the remediation and/or extension will result in one of the following outcomes:

- a. Successfully meeting expectations of the clinical practicum. If, after remediation and/or extension of the clinical practicum, the student demonstrates the required performance expectations for that level of clinical experience, the grade for the practicum course will be changed to a CR (credit) and the student will be permitted to move on to the next full-time practicum course in the series at the next available semester that it is offered. Students will receive an individualized letter from the Program Director or DCE notifying them of their post-remediation status and outlining any recommendations, concerns, or restrictions that the faculty may have for the remainder of their enrollment in the academic program. **Students will only be provided with one opportunity for a remediation or extension of a practicum course.** If the student has not achieved a CR grade in a subsequent practicum course by the designated end date of that clinical experience, then an F grade will be assigned.
- b. Unable to meet expectations of the clinical practicum. If, after remediation and/or extension of the clinical practicum, the student is still unable to meet the required performance expectations for that level of clinical experience, the grade for the practicum course will be changed to an F (fail). Failure of a practicum course represents academic difficulty necessitating review following the Division of Physical Therapy's retention/dismissal policy (see Section X).

Successful completion of full-time practica I, II, III and IV are required for students to be eligible for graduation.

When student performance is not meeting expectations in a full-time clinical education course:

- a. The DCE/ADCE is responsible for:
 - i. Reviewing the CPI Web and course assignments
 - ii. Assigning a grade to the student based upon attendance, review of the CPI Web and course assignments, and consultation (if applicable) with the student's CI and SCCE
 - iii. Withdrawal of a student from their assigned clinical education experience when, in the DCE/ADCE's judgment, the clinical experience does not meet the students' needs or when the DCE/ADCE determines that the student cannot meet performance goals at the facility
 - iv. Setting up a remedial or repeat clinical education course if indicated
- b. The SCCE or his/her designee (the CI) is responsible for the following:
 - i. Immediately notifying the DCE/ADCE of clinical problems
 - ii. Working with the student and DCE/ADCE to develop objectives, provide learning activities, give feedback, and provide assistance to improve student performance
 - iii. Completing and reviewing the CPI Web with the student at a mid-point and the end of the Practicum
 - iv. Ensuring that the CPI Web is accessible to the DCE/ADCE at the end of the Practicum course
- c. The physical therapy student is responsible for the following:
 - i. Immediately notifying the DCE/ADCE of clinical problems
 - ii. Working with the CI and DCE/ADCE to develop objectives, complete learning activities, study, practice, share feedback, etc to improve performance
 - iii. Completing a self-assessment using the CPI Web at the mid-point and the end of the practicum
 - iv. Completing and submitting any other assigned course work by the established deadlines
 - v. Debriefing with the DCE/ADCE to discuss final grade

F. Practicum visits

Full-time practicum courses will be conducted as distance learning courses. The DCE/ADCE will monitor each student through electronic communications and web-based platforms (ie: email, Blackboard and CPI Web). Teleconferences and/or site visits will be scheduled when student or clinical education site issues arise and randomly for routine assessment and relationship building with clinical education sites. The DCE/ADCE, CI, SCCE or student can initiate a request for a teleconference or site visit at any time during a part-time ICE or full-time clinical education experience.

If a teleconference or site visit is planned, it will be scheduled with the student, the DCE/ADCE, the CI, and/or the SCCE at a mutually agreed upon time. If the DCE/ADCE is not available, the academic facility representative should be a faculty member who understands the clinical education policies and procedures and the current clinical education situation.

1. The DCE, ADCE or academic program representative are responsible for the following:
 - a. Establishing and facilitating the means of communication such as developing the Blackboard discussion board or digital dropbox, scheduling the practicum visit or telecommunication conference with the SCCE and/or CI, etc.
 - b. Requesting a teleconference or site visit if indicated
 - c. Facilitating discussion of the following topics during a telephone conference or site visit:
 - i. Types of learning experiences (diagnosis seen, treatment techniques observed and practiced, evaluation techniques observed and practices, and other specific learning experiences)
 - ii. Degree and type of interaction with the CI (observation, supervised, independent)
 - iii. The student's performance (strengths, areas needing improvement).
 - iv. The student's academic preparation (additions, deletions, modifications)
 - v. The student comments about the clinical experience (types of learning activities and degree/type of supervision)
 - vi. If any problem(s) is determined, then discussing with the SCCE/CI and student possible solution(s) to the problem(s)
 - d. Documenting the practicum visit or telecommunication conference (see Appendix)
 - e. Maintaining records of the student, CI or SCCE communication within the student's file
 - f. Relaying any necessary information to the academic faculty
2. The SCCE and/or the CI are responsible for:
 - a. Requesting a teleconference or site visit if indicated
 - b. Coordinating the date and time of the practicum visit or teleconference with the student and DCE/ADCE
 - c. Completing the evaluation form of the student's performance or informally assessing the student PRIOR to the DCE/ADCE's arrival or teleconference
 - d. Meeting the DCE/ADCE to discuss:
 - i. The student's performance
 - ii. The learning experiences available and provided
 - iii. The student's academic preparation
 - iv. Any problems or issues encountered and potential solutions
3. The student is responsible for:
 - a. Responding to the DCE/ADCE's email or Blackboard requests for information and updates on clinical progression
 - b. Contacting the DCE/ADCE at any time during the rotation if he/she has any concerns and requesting a teleconference or site visit if indicated
 - c. Informally assessing their clinical learning experience PRIOR to the DCE/ADCE's arrival or teleconference
 - d. Meeting the DCE/ADCE to discuss:
 - i. Types of learning experiences available and provided
 - ii. Degree/type of interaction with the SCCE and/or CI
 - iii. Their own performance
 - iv. Their academic preparation
 - v. Any problems or issues encountered and potential solutions

G. Student withdrawal policy

Student withdrawal from a clinical education site may occur for the following reasons:

1. Unsatisfactory student performance - according to the CI/SCCE, the student demonstrates activities or characteristics that are detrimental to the clinical site in carrying out its health care responsibilities or the student's performance is considered so poor that it is unreasonable to expect passing expectation will be achieved. Under these circumstances:
 - a. The SCCE is to direct the request for student withdrawal to the DCE/ADCE. If the DCE/ADCE is not available the request should be made to the Physical Therapy Program Director.
 - b. The PT program will respond to the request in a timely fashion.
 - c. Depending upon the situation, the student may be advised to withdraw from the course. In this instance, the student will receive a WF or WP grade based on review of the student's performance during the time which they did attend the clinical experience.
 - i. Students receiving a WP grade will be allowed to repeat the clinical course but replacement in a new CEF in the same term of withdrawal cannot be guaranteed.
 - ii. Students receiving a WF grade will be referred to faculty for deliberation. See Retention/Dismissal Policy (Section X).
 - d. If the student is not advised to withdraw from the course, then the student will receive an F grade and will be referred to faculty for deliberation per the Retention/Dismissal Policy (Section X).
2. Unsatisfactory clinical educational experience - Upon assessment of the DCE/ADCE, the clinical educational experience does not meet the needs of the student. Under these circumstances:
 - a. The DCE/ADCE will meet with the SCCE and determine the necessity of student withdrawal from the clinical education site
 - b. Every attempt will be made to find a replacement clinical education site to allow the student to proceed with their clinical education experiences on schedule but replacement in the same term of withdrawal cannot be guaranteed

VIII. DISABILITY, ACCOMODATIONS, HEALTH AND WELLNESS

See Section XXIV for details and information.