Preface

The purpose of this Clinical Education Handbook is to provide Center Coordinators of Clinical Education (CCCEs), Clinical Instructors (CIs) and students a guide to the Clinical Education Program at Illinois Central College. Included in this handbook are the College and PTA Program mission and philosophy, general program information, and policies and procedures specific to clinical education.

A Note of Appreciation to All CCCEs and CIs

Thank you for your commitment to the process of clinical education and for providing quality experiences for ICC PTA students. As a member of the program’s clinical faculty, I value your expertise and interest in the instruction of our students. I encourage you to provide program feedback as well as attend PTA program workshops and faculty development offerings.

The rights accorded to our clinical faculty are described in the Clinical Education Policies and Procedures section of this handbook. If there is anything I can do to assist you, please do not hesitate to contact me.

Alice Gold-Pearce, PT, ACCE
Professor
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<th>Phone</th>
<th>Email</th>
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## State and National Organizations

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<td>American Physical Therapy Association (APTA)</td>
<td>1111 North Fairfax Street, Alexandria, VA 22314-1488</td>
<td>(800) 999-APTA (2782)</td>
<td><a href="http://www.apta.org">www.apta.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>(703) 684-7343</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>(703) 683-6748</td>
<td></td>
</tr>
<tr>
<td>Illinois Physical Therapy Association (IPTA)</td>
<td>905 N Main St, Naperville, IL 60563</td>
<td>(630) 904-0101</td>
<td><a href="http://www.ipta.org">www.ipta.org</a></td>
</tr>
<tr>
<td>Commission on Accreditation in Physical Therapy Education (CAPTE)</td>
<td>1111 North Fairfax Street, Alexandria, VA 22314-1488</td>
<td>(800) 999-2782</td>
<td><a href="http://www.capteonline.org">www.capteonline.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>(217) 785-0820</td>
<td><a href="mailto:accreditation@apta.org">accreditation@apta.org</a></td>
</tr>
<tr>
<td>Illiniois Department of Financial and Professional Regulation</td>
<td>320 W Washington 3rd Floor, Springfield, IL 62786</td>
<td>(888) 473-4858</td>
<td><a href="http://www.idfpr.com">http://www.idfpr.com</a></td>
</tr>
<tr>
<td>Federation of State Boards of Physical Therapy (FSBPT)</td>
<td>124 S West St, Third floor, Alexandria, VA 22314</td>
<td>(703) 299-3100</td>
<td><a href="http://www.fsbpt.org">www.fsbpt.org</a></td>
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<tr>
<td></td>
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<td>(703) 299-3110</td>
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College Information

Accreditation
Illinois Central College is accredited by the Higher Learning Commission of North Central Association of Colleges and Schools.

Equal Opportunity/Affirmative Action
Illinois Central College is accredited by the Higher Learning Commission. It is the policy of this College that no person, on the basis of race, color, religion, gender, national origin, age, disability, sexual orientation, or veteran's status, shall be discriminated against in employment, in educational programs and activities, or in admission. Inquiries and complaints may be addressed to the Vice President of Diversity, International and Adult Education, Illinois Central College, 1 College Drive, East Peoria, Illinois 61635-0001, (309) 694-5561.

Source: 2018-2019 College Catalog, p 7
http://icc.edu/academics/catalog/

Health Careers Department Information

Mission Statement
The mission of the Health Careers Department is to:
1. Enable students to attain knowledge, professional skills, and general education for successful entry-level employment in a health career;
2. Serve as a resource for the educational and employment needs of the health care community.

To fulfill its mission, the Department:
1. Promotes student access through equal opportunity admission policies;
2. Offers educational opportunities for students of diverse backgrounds by providing both certificate and associate degree programs;
3. Provides career advisement and supports career recruitment in the community;
4. Assures quality instruction by meeting professional accreditation standards, promoting faculty continuing education, and providing access to current technologies;
5. Provides general education and career education courses in preparation for successful employment and life-long learning;
6. Cooperates with community agencies to offer appropriate clinical and field experiences, and to promote safe practices;
7. Offers continuing education opportunities to meet personal and professional goals of updating employment skills and additional specialization.

Source: Health Careers Booklet, p 52
Program Overview

Accreditation
The program has been accredited since its initial accreditation in 1971 with its most recent accreditation in 2016. The PTA program at Illinois Central College is accredited by the Commission on Accreditation of Physical Therapy Education (CAPTE) of the American Physical Therapy Association, 1111 N. Fairfax Street, Alexandria, VA 22314; telephone: (800) 999-2782; email: accreditation@apta.org; website: www.capteonline.org. CAPTE is responsible for establishing criteria for physical therapy educational programs and conducts accrediting activities designed to ensure that educational programs meet minimum entry-level criteria. CAPTE may be contacted to file any concerns about the program.

This program prepares students to be entry-level PTAs who function effectively in an ever-changing healthcare environment. The program consists of five sequential semesters of classroom and clinical education courses. Upon successful completion of the program, graduates are eligible to take the national licensing examination.

Degree Awarded
Upon completion of program requirements, the student is awarded an Associate in Applied Science (AAS) degree in Physical Therapy. This degree typically is not designed for transfer to the doctorate physical therapy degree.

Mission
The mission of the PTA Program is to provide knowledge and skills and to develop attitudes which prepare graduates to function as an entry-level PTAs who will work under the direction and supervision of the physical therapist to meet the needs of the community in a variety of clinical settings.

Philosophy
Faculty members believe that educational opportunities should be provided to prepare students for entry-level positions as a PTA. The curriculum for the Associate of Applied Science degree in Physical Therapy is designed to meet accreditation standards and to provide a foundation in technical PTA courses and general education courses for both personal and professional growth. Additionally, the curriculum is designed to support and integrate the College’s core values and achievement of general education goals.

Educational objectives are developed to align knowledge, skills, and affective behaviors with appropriate classroom, lab, and clinical education opportunities. As the student progresses through the program, opportunities are provided to allow for increased responsibility for patient care under the direction and supervision of a physical therapist. Achievement of program goals and learning objectives are assessed using a variety of methods to enhance student success with the licensure exam and career as a PTA.
Program Outcomes
Upon completion of the program, the graduate will:
1. Pass the PTA licensure examination to allow eligibility for state licensure/certification as a PTA.
   **Objective:** 90% of students completing the program will pass the PTA licensure examination.
2. Demonstrate skills necessary to practice as an entry-level PTA under the direction and supervision of the Physical Therapist.
   **Objective:** 90% of students starting the program will graduate with the skills required for entry-level practice.
3. Obtain employment as an entry-level PTA.
   **Objective:** 90% of graduates will be employed as a PTA within 12 months of graduation.
4. Be satisfied with the program’s curriculum to prepare them for the role as an entry-level PTA.
   **Objective:** 90% of graduates will rate their preparation to function as an entry-level PTA at least 3.0 (0-4 scale).
5. Demonstrate satisfactory work-performance in those skills necessary as an entry-level PTA.
   **Objective:** 90% of employers will rate graduate performance at least 3.0 (0-4 scale) as safe, effective, and ethically sound to function as an entry-level PTA.
   **Objective:** 90% of graduates will indicate they have participated in some type of continuing education activity within 12 months of graduation.

Program Goals
Upon completion of the program, the graduate will:
1. Perform interventions under the direction and supervision of the physical therapist in a safe, ethical, legal, and effective manner.
2. Recognize the need for continued personal and professional growth to ensure competence in current practices of physical therapy.
3. Demonstrate sensitivity to individual and cultural differences in all aspects of physical therapy services.
4. Demonstrate social responsibility, citizenship, and advocacy through the participation in community and service organizations and activities.
5. Meet the employment needs for physical therapist assistants in the community.
6. Utilize critical thinking skills to progress, modify, and/or withhold interventions based on patient status as determined through observation, data collection, and problem-solving skills.

Current Outcomes
For the class of 2017, 79% of admitted students graduated from the program; 100% of graduates who were seeking employment and responded to surveys were employed as PTAs; 100% passed the licensure exam.

Program Length Layout
The program starts in the fall semester and continues for three additional semesters with a summer session prior to the fall semester of the sophomore year. The layout is shown in Appendix B.

Curriculum Framework
The curriculum guidelines set forth by CAPTE integrate all aspects of PTA education including; didactic/theory, technical skills (lab and clinical education), and professional behavior expected of the PTA. The PTA program places emphasis on all three areas throughout the entire program in order to develop competent entry-level PTAs:
1. Theory: The classroom portion of the curriculum is taught in traditional face-to-face and/or online/hybrid format. This requires students to have access to the internet. Computers with internet access are available throughout the ICC campus.

2. Technical Skills/Lab: The lab portion of the program is designed for students to learn the technical skills of a PTA. Once concepts and interventions are learned in the classroom, they are to be practiced in the lab setting as appropriate under supervision of faculty. Students are required to demonstrate proficiency in many data collection skills and interventions prior to entering the clinical setting.

3. Clinical Education: The purpose of clinical education is to give students exposure and “real world” experience in physical therapy with a clinical instructor (CI) who is a PT or PTA. Students learn about the PT/PTA relationship, apply classroom knowledge and interventions, and develop professional behaviors in the clinical environment under the direction and supervision of a PT. Clinical education experiences occur in a variety of physical therapy settings to meet the needs of each student and overall learning objectives.

Suggested Course Sequence
Please see Appendix A

Graduation
The student must fulfill the graduation requirements of the College for the Associate of Applied Science Degree. The student is responsible for knowing the requirements as defined in the College Catalog and petitioning for graduation by the due date. For May graduates, the due date is February 1. More information about graduation will be provided to students as appropriate.
Clinical Education Definitions

1. *Illinois Central College (ICC)*
   Academic institution which provides the program to educate students as an entry-level PTA.

2. *Academic Program*
   The accredited educational program which provides the curriculum to prepare students as an entry-level PTA.

3. *Clinical Site*
   The health care facility that provides the PTA student with learning opportunities and patient contact for the development of physical therapy skills.

4. *Clinical Faculty (CF)*
   The health professional (PT or PTA) who has agreed to provide instruction for ICC PTA students by serving as a Center Coordinator of Clinical Education (CCCE) or Clinical Instructor (CI). Clinical faculty are not employed by ICC.

5. *Academic Coordinator of Clinical Education (ACCE)*
   The person employed by the academic facility who develops, organizes, supervises, and coordinates the clinical education component of the physical therapy curriculum.

6. *Center Coordinator of Clinical Education (CCCE)*
   The person employed and designated by the clinical facility to organize, direct, supervise, coordinate, and evaluate the clinical education program in that facility.

7. *Clinical Instructor (CI)*
   The licensed physical therapist (PT) or physical therapist assistant (PTA) employed by the clinical site who is designated by the CCCE to supervise and evaluate the activities of the PTA student.

8. *Clinical Site Information Form (CSIF)*
   The document which is completed by the CCCE at the CF and provides information about the clinical site for the program ACCE and students.

9. *Physical Therapist Assistant Clinical Performance Instrument (PTA CPI)*
   The web-based developed clinical assessment tool.

10. *Physical Therapist Assistant (PTA)*
    An individual who has graduated from an accredited PTA program who provides physical therapy services under the direction and supervision of the physical therapist.

Clinical Education General Information

Student Status
Students participating in clinical experiences are not considered employees of the clinical site and will not receive compensation for services provided under the direction and supervision of the CI. Students are not allowed in the clinical site in a student capacity except during clinical hours.

Clinical Placement and Schedules
Clinical placements are determined by the program Academic Coordinator of Clinical Education (ACCE) and may change at any time. In the event a clinical experience is cancelled, the ACCE will work to reassign the student to another facility.

Every effort is made to honor student preferences for the type of practice setting for the final clinical course but is not guaranteed. It is the expectation that students will have a variety of experiences and will be placed in one inpatient experience (such as hospital based or long-term care facility) and one outpatient experience. Occasional exceptions to this may exist and are guided by program goals and the academic needs of the student.

Clinical placements are based on several criteria including but not limited to: placement in the program (freshman or sophomore level), type of experience needed, clinical instructor experience, and facility availability. While driving distance is considered, it is not a primary criterion for placement.

The clinical schedule (hours worked) is determined by the clinical facility and confirmed by the ACCE. Students are not permitted to alter the clinical schedule without ACCE involvement. If such an activity occurs without the ACCE knowledge, the student may be suspended from the experience or dismissed from the program.

Employment and the Clinical Site
In order to provide students with unique and fair learning experiences, students will not be allowed to participate in clinical experiences at a clinical site in which they have previously been employed within the department of physical therapy, are currently employed, or have already committed to employment as a PTA upon graduation. The student should meet with the ACCE if there are any concerns regarding conflicts of interest.

Travel Expectations
While current clinical facility locations are located in Illinois, students should expect to travel up to 90 minutes, one way, to the assigned clinical site. This time will vary based on other circumstances such as inclement weather.

Student Supervision
PTA students may be supervised by a licensed PTA or PT. When a licensed PTA is the clinical instructor, a PT must be on-site for the duration of the clinical education experience. Students are not allowed to provide patient interventions when a PT is not on-site. If the assigned CI is absent, the facility must provide an alternative person to supervise the student. If the student arrives to the clinical facility and there is not a PT on-site, the program ACCE is to be notified immediately to discuss the situation. Additional information can be found within the APTA document, Summary of Medicare Guidelines for Student Supervision on the program website: http://icc.edu/academics/catalog/health-careers/physical-therapist-assistant

Clinical Attendance Policy
Students are expected to report to the clinical facility on time, properly dressed, and prepared to carry out clinical assignments. The academic calendar is published well in advance to allow planning for personal events. The student must contact both the program ACCE and CI by a telephone call of any absence. The student is required to make up any missed clinical hours at a mutually agreed upon time, which must occur during the experience time frames. The program ACCE must also be notified and agree to established make-up plan for final approval.
For students completing a school-based experience, missed clinical days such as during school holidays (but the College is open) are known in advance. The ACCE will develop a plan to schedule these missed days.

More than one missed clinical day will result in an incomplete (I) grade; however, extenuating circumstances will be evaluated by the program ACCE.

**Patient Rights**
Patients have the right to know that they are being treated by a student and may refuse treatment by the student. The clinical instructor has the responsibility to obtain patient consent for treatment provided by the student and to introduce the student as such. Additionally, students are required to introduce themselves to patients, staff, and others as a “Student Physical Therapist Assistant” at all times and receive informed consent from the patient prior to treatment. Should a patient pursue their risk-free right to refuse treatment from a PTA student, this should be graciously acknowledged. It is the student’s responsibility to coordinate with the CI an alternative plan for the patient’s care.

**Clinical Facility Rights**
Any clinical site has the right to refuse or terminate a current clinical schedule to students and faculty. Any issues or concerns should be directed to the ACCE.

**Termination of a Clinical Experience**
A clinical experience may be terminated for any of the following reasons, but not limited to:

1. Unsatisfactory performance; including unsafe behaviors, attendance issues, or behavioral concerns.
2. Health status that is detrimental to the successful completion of the clinical experience.
3. Determination that continuance in the experience is not in the best interest of the site, ICC, or the student.

When the CI and/or ACCE recommend(s) a student be withdrawn from a clinical experience as a result of one of the situations listed above, the following procedure should be followed:

1. The CI will document the incident(s) and notify the ACCE immediately.
2. The student will meet with the CI and/or CCCE and ACCE. A written document will be drawn up by the ACCE or program faculty defining the problem(s) with an action plan and given time frames. This document will be reviewed with the student and he/she must sign the document to acknowledge it has been reviewed with him/her. Failure to comply with the conditions set forth in the action plan may result in additional clinical requirements or a clinical failure with dismissal from the clinical experience.
If a student is removed from the clinical setting, the ACCE, in consultation with the Program Director, reserves the right to determine whether the student will be counseled/coached, tutored in problem areas, rescheduled in another site, or recommended to be dismissed from the program. Students have the right to appeal this decision following the appropriate appeals processes for the College. Clinical agencies and/or faculty have the right to remove a student from the clinical site but not from the program.

Inclement Weather
Under normal circumstances, College closure is announced through ICC’s MyAlert system and other media such as the College website, Facebook pages, and local news outlets.

If the College is closed prior to start of the clinical day, the student should not attend clinic. However, the student needs to notify the clinical instructor of their absence. The student will not be required to make up these missed clinical hours.

If the student is already at the clinical site and the College closes, the student is to use their judgment whether to remain at the clinical site or leave. Student safety is a priority, and it may be safer to remain in the clinic until the weather situation passes, or it may be safer to leave the clinical site. The student will not be required to make up these missed clinical hours, but the student must notify the ACCE as soon as possible.

In the event that the College is not closed and the student chooses to not attend clinic due to adverse conditions in their geographical area, the student needs to contact the ACCE and their clinical instructor about their absence. The student will be required to make up these missed clinical hours.

Clinical Dress
- White, hip-length lab coat with three-quarter length sleeves
- Buttoned, tailored shirt or solid polo shirt with a collar and no emblem or logo
- Solid-colored dress slacks (such as black, navy, brown, gray, khaki)
- ICC Health Careers patch – Available at ICC Bookstore. The patch needs to be placed on the left sleeve, one inch down from the center of the shoulder seam.
- ICC Student Photo ID tag
- Clean, athletic or solid dress shoe with no heels or elevated soles; no sandals or open-toe shoes allowed
- Solid-colored socks
- Wristwatch

The student may also need to follow other requirements specific to the clinical site.

Other clinical dress guidelines:
1. The attire must be clean and nonwrinkled.
2. Shoes must be clean and in good repair.
3. The ICC name tag is to be worn at all times to clearly identify one as a PTA student. The student may also be requested to wear a facility-issued name tag. The facility name tag needs to be returned at the end of the experience and ICC name tag at the end of the program.
4. Jewelry is to be limited to a wristwatch and wedding band/rings. Cell phones are not appropriate to monitor time. No other types of rings are allowed. Students with pierced ears may wear small earrings only. Visible body stud jewelry (rings or studs in nose, tongue, lips, eyebrows, etc.) is not allowed. Tattoos must be covered as much as possible.

5. To maintain asepsis, the student’s hair must be clean, neat, and worn away from the face when working in the lab and clinical facilities. Male students must keep beards and mustaches clean, neat, and trimmed; otherwise, male students must be clean shaven. Hair decorations should be kept to a minimum. Hair color must be of a natural color such as brown, black, or blonde. Hair color such as pink, blue, orange, etc., are not acceptable and must be covered up during the clinical experience.

6. Makeup is to be minimal and avoid excessive eye makeup. Fingernails must be short and unpolished. Cologne or perfumes are to be avoided.

7. Good personal hygiene is essential; regular bathing and use of deodorants are necessary. Mouthwash or breath fresheners may be used as needed. Gum or tobacco chewing is not permitted.

8. Students must abide by clinical safety rules and observe standard and blood borne pathogen precautions. Personal protective equipment must be worn in accordance with facility policy and procedures.

9. Pants are to be high enough (normal rise) and shirts long enough to be tucked in so that no skin is exposed during treatment interventions.

Clinical Costs
The student is responsible for all costs related to clinical education and may have additional costs specific to a clinical facility. These costs include but are not limited to: travel and housing expenses, uniforms, medical/health, and any additional requirements of the facility.

Liability Insurance
The College provides liability insurance coverage for students enrolled in clinical education courses. The cost is covered under Health Careers fees.

Accident Reports
If there is an accident or injury to a student during a clinical session, the student must immediately notify the CI and ACCE, who will discuss the issue further and complete the required documentation. College-related documentation will be maintained in the student’s program file. Any further actions will depend on the nature of the incident. Please see the Health Careers Pages for specific procedure and forms for exposure to blood or body fluids.

Transportation and Parking
Transportation to the clinical facility and related parking fees, as appropriate, are the responsibility of the student. The student should have a contingency plan for transportation in case of car problems or inclement weather. Appropriate parking areas at each facility will be identified, and students are expected to follow parking rules and procedures for the assigned clinical facility.
Health and Medical

Cardiopulmonary Resuscitation (CPR)
Students are required to submit proof of current CPR certification, which must be maintained until graduation from the program. This certification may come from formal classes offered by hospitals, community health agencies, the American Red Cross for Healthcare Providers, the American Heart Association Basic Life Support, Illinois Central College (HLTH 041), and other sources. Certifications through online sources are not accepted.

Medical Insurance
Students are not required to have medical insurance while in the program. However, it is strongly recommended as students are financially responsible for any medical care, treatment, or examination needed for any issues that arise while on campus or during clinical education experiences.

Medical Conditions
Program faculty do not review physical examination records, and it is the student's responsibility to notify program faculty of any medical conditions and/or medications which may affect performance in the classroom, laboratory, or clinical settings. While not mandated, the student is strongly encouraged to notify program faculty prior to each semester and, as appropriate, inform clinical faculty of any pertinent medical conditions which may affect performance.

If the student develops a medical condition during the program that affects clinical or academic performance, the student may continue in the program provided the student:
1) Submits a written statement from a physician verifying the nature of the medical condition, limitations and duration of restrictions, and confirmation of the student's ability to continue in the program to the Program Director.
2) Notifies program faculty and, as appropriate, clinical faculty.
3) Meets all didactic and clinical objectives and requirements.

Physical Examination Requirements
A physical examination by a physician or other health care professional as allowed by law is required upon admission to the program. The following documents need to be submitted to Illinois Work Injury Resource Center (IWIRC) by the designated date:

1) signed physical examination form and
2) complete immunization record.

Up-to-date immunizations or records need to include:
- MMR (measles mumps, rubella)
- tetanus
- current 2-step TB test
- Hepatitis B. (3-injection series)
- Varicella immunity
- Flu (seasonal)

The student will NOT be allowed to participate in clinical education until this requirement is met unless a waiver for specific conditions is signed.

Readmitted students must have a completed physical examination form within two years, including verification of immunization, on file before attending clinical courses. It is the student's responsibility to review the immunization record to confirm immunization requirements are met.
Skills Competency
Throughout the program, students are tested on many interventions and data collection skills, which are demonstrated either through a skills checklist or practical examination (Appendix C). Students practice each skill with simulated patient scenarios under supervision in the classroom laboratory. Each skill is then verified as competent by program faculty prior to student participation in clinical education.

Clinical Grading
1. The ACCE makes the final grade determination for all clinical education experiences.
2. Program faculty will have communication with the student and CI during each rotation through an onsite clinical visit, email correspondence, or phone or other electronic communication.
3. The PTA Clinical Performance Tool (PTA CPI) is the evaluation tool used for all clinical courses.
4. Clinical performance is formally discussed at the midterm and final points of the experience using the PTA CPI.
5. Both the CI and the student will complete the PTA CPI at the midterm and final points of the experience. The student should notify the ACCE if the student is in disagreement with or there are significant discrepancies with the scoring.
6. Each course needs to be passed for the student to progress in the program. See each course syllabi for the criteria to pass that specific course.
Performance Expectations for Clinical Courses
PTA CPI Performance Dimensions and Rating Scale Anchors*

**Advanced Beginner Performance Level**
The student requires:

a: 75-90% direct supervision from CI for simple or non-complex conditions.
b: 100% direct supervision from CI for new or complex conditions.

**Intermediate Performance Level**
The student requires:

a: <50% direct supervision from CI for simple or non-complex conditions.
b: 50-75% direct supervision from CI for new or complex conditions.

**Advanced Intermediate Performance Level**
The student requires:

a: The student is independent with general supervision from CI for simple or non-complex conditions.
b: The student requires <25% supervision from CI for new or complex conditions.

**Entry Level Performance Level**
The student is independent with simple and complex conditions with general supervision from CI.

*See PTA CPI for full definitions of Performance Dimensions and Rating Scale Anchors.

**Definitions for Degree of Supervision from the Clinical Instructor**

**Direct supervision:** The CI is physically present and immediately available for direction and supervision of tasks related to patient/client management. The direction and supervision is continuous throughout the time the tasks are performed.

**General Supervision:** The CI is physically present and immediately available for direction and supervision of tasks related to patient/client management. The direction and supervision is less than continuous and determined by the level of patient/client complexity.

(Source: Supervision definitions modified from APTA, Levels of Supervision HOD P06-00-15-26)
In order to receive a **passing grade** for the course, the student must meet the following criteria:

1. On the PTA CPI, the following **minimum thresholds** must be met **by the end of each course**:

<table>
<thead>
<tr>
<th>Course</th>
<th>CPI Criteria #1-6</th>
<th>CPI Criteria #7-14</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHTA 130</td>
<td>Near or at Intermediate Performance Level</td>
<td>Near or at Advanced Beginner Performance Level</td>
</tr>
<tr>
<td>PHTA 230</td>
<td>Near or at Advanced Intermediate Level</td>
<td>Near or at Intermediate Performance Level</td>
</tr>
<tr>
<td>PHTA 232</td>
<td>Near or at Entry Level Performance</td>
<td>Midterm: Near or at Advanced Intermediate Performance Level</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Final: Near or at Entry Level Performance</td>
</tr>
</tbody>
</table>

2. Turn in clinical assignments by established dates. Failure to submit all required materials by the due date will result in an incomplete (I) grade, unless extenuating circumstances prevail.

3. Complete the required number of clinical education hours for each experience.

When a student has repeated incidents of unsatisfactory, unacceptable or unsafe practice; or unprofessional or unacceptable conduct in the clinical setting; the following procedure will be used:

1. The incidents will be documented by the CI and/or ACCE.
2. The student will meet with the ACCE to discuss the issue; a counseling form will be completed and placed in student’s file with the student also provided a copy.
3. If the student does not meet the criteria in accordance with the established plan of action, the problem will be reviewed again with the student and involved faculty with the Program Director also present. As needed, the Dean of Health Careers may also be involved.

Continued failure to comply with the conditions set forth in these discussions and documentation may result in an unsatisfactory (U) grade and dismissal from the program.

**Repeat Option**

If a student does not meet the criteria to receive a passing grade for the initial experience, the student will receive an **incomplete (I) grade** with one repeat option offered to the student. This clinical experience must be repeated at a different clinical site and may occur after the semester ends and/or when the ACCE has established a repeat experience. The student must meet all of the established criteria to receive a passing grade of the repeat experience to remain in and progress in the program. If the student receives a non-passing grade for the repeat clinical experience, an additional repeat is not permitted, and the student will not progress in the program.
Clinical Faculty Appointment

A. Clinical Instructor Selection Criteria
   • licensed as a PT or PTA.
   • have at least one year experience in clinical practice.
   • demonstrate an interest in providing clinical education to PTA students.
   • comply with the appropriate responsibilities as outlined in the “Clinical Instructor Roles and Responsibilities” section of this handbook.
   • complete a self-assessment using APTA document, Guidelines and Self-Assessment for Clinical Education on the program website:
     http://icc.edu/academics/catalog/health-careers/physical-therapist-assistant

B. Clinical Faculty Rights and Privileges
   The clinical faculty appointee shall:
   • have access to Illinois Central College Library with checkout privileges.
   • be invited to attend program and department multidisciplinary clinical education (CE) workshops.
   • For Illinois, be awarded continuing education units for supervising clinical education experiences per the State of Illinois Physical Therapy Practice Act: Up to 5 hours of CE credit may be obtained by being a clinical instructor for either PT or PTA students. Credit will be earned based on hours of cumulative student clinical instruction, with 1 hour of CE credit per 120 student hours. CE credit hours for clinical instruction will be awarded by the student’s academic institution.

   An ICC CE certificate will be issued by the ACCE at the end of each academic year. It is the responsibility of the clinical instructor to maintain a record of CE hours awarded.
Roles and Responsibilities

Student

1. Prior to each clinical experience, the student must:
   a) Fill out a Health Careers Program Student Confidential Clinical Information sheet which will be included with the clinical mailing packet. (Appendix D)
   b) Approximately one week prior to the start of the experience, contact the CI at the assigned clinical site via telephone to verify placement and to obtain information related to parking, transportation, and specific department policies and procedures.
   c) Complete online training for use of PTA CPI.
   d) Log on to CPI web (https://cpi2.amsapps.com) to verify personal information and access.
   e) Have reliable transportation to and from the clinical facility.
   f) Submit to Illinois Work Injury Resource Center (IWIRC) the following current information:
      1) Signed physical examination form
      2) Complete immunization records including:
         - MMR (measles mumps, rubella)
         - Tdap
         - current TB test
         - Hepatitis B (3-injection series)
         - Varicella immunity
         - Flu (seasonal)

2. While at the clinic, the student will:
   a) Conduct self in a professional manner.
   b) Carry out assigned patient care interventions under the supervision of the CI.
   c) Be responsible for reviewing techniques and procedures of assigned interventions.
   d) Understand how the diagnosis, impairments, and treatment interventions relate to the treatment goals for the patient.
   e) Seek input from the CI as needed when difficulties arise during patient care interventions.
   f) Report unusual patient reactions to the CI immediately.
   g) Complete treatment documentation on each patient as directed.
   h) Complete assignments as listed in the clinical syllabus and/or as assigned by the ACCE and/or CI.
   i) Obtain informed consent from patient to allow student involvement in treatment.
   j) Notify CI of skills not yet covered or demonstrated in the classroom requiring direct supervision with the CI physically present and providing feedback.
   k) Contact CI and ACCE in the event of illness or if unable to attend the clinical experience for any reason.
   l) Contact the CI and ACCE in the event of any injury during the clinical experience.
Clinical Instructor

1. Prior to the clinical experience, the CI will:
   a) Complete online training for use of the PTA CPI.
   b) Log on to CPI web (https://cpi2.amsapps.com) to verify personal information and access.
   c) Review student information (Appendix D) and clinical course syllabi (Appendix G).
   d) Plan for student orientation to the clinical facility and staff, including departmental policies and procedures, and complete the orientation checklist. (Appendix E). If there is a facility-specific form, this can be used instead.
   e) Review and be familiar with the list of skills covered prior to the experience or those topics being covered concurrent with the experience. (Appendix C)

2. During the first week, the CI will:
   a) Provide student orientation to the facility and staff including departmental policies and procedures and emergency and safety protocols.
   b) Establish and discuss goals for the clinical experience based upon the course syllabus and the PTA CPI.
   c) Facilitate participation with patient care interventions as appropriate.
   d) Highlight specific precautions and safety measures utilized.

3. During the second and subsequent weeks, the CI will:
   a) Provide planned learning experiences for student participation in patient care.
   b) Demonstrate clinical competence and a willingness to share insights and rationale related to patient care.
   c) Serve as a role model for professional behaviors.
   d) Provide instruction and supervision to the student.
   e) Provide the student with honest constructive criticism of their performance.
   f) Give suggestions to the student for improving performance and monitor student response.
   g) Provide periodic assessment of the student’s progress toward established goals.
   h) Assign treatment tasks within the confines of the student’s academic knowledge and ability. For treatment interventions not yet covered or demonstrated in the classroom, students may participate with these activities under the direct supervision of their assigned CI or other appropriate personnel.
   i) Facilitate and supervise student performance of patient care treatment interventions.
   j) Obtain informed consent from patient to allow student involvement in treatment.
   k) Complete the Clinical Performance Instrument (CPI) at the midterm and final points of the experience and formally review with the student and sign.
   l) Contact the ACCE immediately if there are any questions or concerns regarding the student’s behavior, safety, or skills.
   m) Contact the ACCE with any questions or concerns with completing the CPI or assessing student performance.
Center Coordinator of Clinical Education
1. The clinical site will have a designated CCCE who is responsible for coordinating the assignments and activities of students at the clinical site. The CCCE identifies and selects PTs and PTAs who meet the criteria to serve as a CI for students.

2. The CCCE will:
   a) Provide ACCE with current Clinical Site Information Form (CSIF).
   b) Maintain communication with the ACCE, CI, and the assigned student during the clinical experience.
   c) Delegate the clinical supervision of students to qualified therapists.
   d) Serve as a resource for the CI for providing orientation, establishing goals, setting up learning experiences, and evaluating student performance.
   e) Provide direct feedback to CIs on their performance as clinical instructors.
   f) Participate with the ACCE in developing, implementing, and evaluating clinical faculty development.

Academic Coordinator of Clinical Education
1. The ACCE is responsible for developing and coordinating the clinical education component of the program. In conjunction with the CCCE, the ACCE ensures that CIs are prepared and qualified to supervise students. The ACCE is responsible for communication and scheduling and works directly with program faculty, the Program Director, clinical instructors, and students to arrange for learning experiences that will help the student to develop clinical skills.

2. The ACCE maintains a current signed Clinical Agency Agreement on file for each clinical facility prior to student assignment to that facility.

3. The ACCE ensures that required Medical, CPR, Criminal Background Investigation/ Fingerprint Background Check, 11-panel drug screen, and education on HIPPA and Infectious Diseases/Blood Borne Pathogens are completed prior to clinical experiences.

4. Other specific responsibilities include:
   a) Maintain clinical education files including CSIF.
   b) Provide updated clinical handbook to CCCE/CI annually.
   c) Schedule individual clinical assignments.
   d) Mail clinical materials to the clinical site for each specific student.
   e) Facilitate training for use of PTA Clinical Performance Instrument (PTA CPI).
   f) Perform or delegate to program faculty regular site visits or telephone interviews with each clinical site that has a student.
   g) Assist with problem-solving strategies while students are participating in clinical experiences.
   h) Monitor performance level of students throughout and at the conclusion of all clinical experiences.
   i) Assign final clinical grade based upon CPI, completion of clinical assignments, and completion of required clinical hours.
   j) Provide direct feedback to the CIs and indirect feedback through communication with the CCCE on their performance as clinical instructors. This feedback is based on communication between the ACCE and the CCCE, as well as discussion with the student and the content of the student course evaluation.
   k) Develop, implement, and evaluate clinical faculty development activities.
Clinical Faculty Evaluation and Development

One goal of ICC’s PTA Program is to develop and/or enhance the teaching skills of clinical faculty to facilitate achievement of clinical education objectives and improve effectiveness of clinical faculty. Activities are based on the needs of the program and or clinical faculty.

Guidelines:

1. The CCCE of the clinical facility is responsible for providing ongoing direct feedback to CIs on their performance as clinical instructors. This feedback is to be based on direct observation of the CI and student interaction, as well as discussions between the CCCE and the student.

2. The ACCE is responsible for providing direct feedback to the CIs and indirect feedback through communication with the CCCE on their performance as clinical instructors. This feedback is based on communication between the ACCE and the CCCE, as well as discussion with the student and the content of the student evaluations.

3. The CCCE is responsible for identifying needs for continuing education of the clinical faculty and communication of such needs to the ACCE.

4. The ACCE and program faculty identify clinical faculty development needs through a variety of sources including direct student feedback, course evaluations, during clinical visits or telephone contact, and through clinical surveys and in-service feedback.

A. Education of clinical faculty is an ongoing process with needs determined by various means:

1. The Clinical Faculty Development Survey is completed annually by clinical faculty. Results are compiled and evaluated by the ACCE and Program Director for possible topics for future clinical faculty development activities.

2. Evaluation of Clinical Education Experience
   a. After each clinical education experience, students provide feedback on the experience with the Evaluation of Clinical Education Experience (Appendix F). The ACCE will share information with the CCCE or CI, as appropriate.
   b. Results are tallied and evaluated for common themes which are further discussed for possible topics for future clinical faculty development activities.

3. Clinical Visits
   During clinical visits, which typically occur around the midterm of the experience, faculty inquire:
   a. From the student, includes but not limited to: how the clinical teaching by the CI is going, any areas of concerns, level and quality of clinical supervision.
   b. From the CI, includes but not limited to: how they are planning student learning experiences, questions related to student supervision, how and when to reach the ACCE, and evaluating student performance.
   c. Communication is documented on the Clinical Visit Record form and maintained in the student’s program file.
   d. Upon discussion of midterm clinical visits, the ACCE and Program Director discuss issues or concerns, common themes, and possible topics for future clinical faculty development activities. As appropriate, the ACCE may also provide individualized teaching activities with the CI.

4. Program surveys also provide information about clinical teaching and clinical faculty development needs. These surveys include but are not limited to: graduate surveys, program resource surveys, and the evaluation of clinical experience forms completed after each rotation.
5. As program faculty interact with students and clinical faculty, informal comments from students, CCCEs, and CIs are also a source of information for potential clinical faculty development needs. These comments are shared with the ACCE and program faculty for further discussion.

B. Clinical faculty development occurs throughout the year:

1. Informally, activities are scheduled as a need arises. For example, if a CI is having difficulty with the clinical evaluation tool, the ACCE will schedule time to work with the CI on their specific issue. Any training is documented and maintained by the ACCE.

2. Formally, clinical faculty development is offered through various workshops and/or continuing education. The program hosts an annual Clinical Instructor Workshop for program clinical faculty, which typically occurs during the fall semester.

3. Feedback is obtained following any workshop with comments and trends evaluated, along with any pre- and post-workshop assessment (i.e. pre-test and post-test).

**Program Complaint Procedure**

The PTA Program welcomes comments, suggestions, ideas, and constructive criticism as part of continuous and systematic program evaluation and improvement. Any complaint or concern about the PTA Program or one of its policies, faculty, staff, or students is requested to be in writing. Student complaints outside the scope of the PTA program must be addressed through the grievance procedure as outlined in the College Student Handbook. As appropriate, the complaint/concern will be delivered to the Program Director or the Dean of Health Careers for timely follow-up.

If the nature of the concern falls into the possibility of a formal complaint to the program's accrediting body, contact the Commission for Accreditation of Physical Therapy Education (CAPTE) to discuss the nature of the complaint and to determine what procedures should be taken. CAPTE can be reached by phone at (703) 684-2782, email at accreditation@apta.org, or by fax (703) 684-7343.

Complaints/concerns about a particular individual (faculty, staff, or student) should be addressed with that individual first. If the person with the complaint feels the situation remains unresolved, that person should meet with their advisor or Program Director and submit a written statement of their concern. If further action is necessary, the complaint/concern will be taken to the Dean of Health Careers for further review and follow-up.
A. Students
The PTA program will follow the Formal Student Grievance Policy outlined in the ICC College Catalog. Students who feel they have a legitimate complaint concerning an issue not covered by the College Grievance Policy may appeal to the Program Director, or the ACCE if the issue is related to clinical education. If a satisfactory solution to the problem cannot be reached, the following procedure will be used:

Procedure:
1. The student should take their complaint to the Program Director, Dean of Health Careers, Vice President of Student Services, and finally Vice President for Academic Affairs, in that order.
2. The Program Director will request written documentation of each concern before further action is taken. It is the student's responsibility to provide the requesting party with written verification of their concern.
3. Records of complaints and any action taken will be retained in electronic and/or hard copy by the PTA Program Director and maintained in the PTA Program Director's office for one year after resolution.

B. Clinical Site

Clinical Faculty:
Individuals (such as clinical instructors and center coordinator) who feel they have a grievance concerning a student should first attempt to address the concern with the student. If the situation remains unresolved, the following procedure will be followed:

Procedure:
1. The clinical instructor (CI) should consult with the facility's Center Coordinator of Clinical Education (CCCE) to discuss the nature of the issue and action taken to resolve the issue. If the CCCE is not available, the CI should contact the program ACCE.
2. If a satisfactory solution cannot be reached, the complaint should be taken to the Program Director, Dean of Health Careers, Vice President of Student Services, and finally Vice President for Academic Affairs, in that order.
3. If the clinical faculty has a grievance specific to the PTA Program, they should first address the concern with the ACCE and then with the Program Director. If further discussion is needed, the Dean of Health Careers will be contacted.
4. Records of complaints and any action taken will be retained in electronic and/or hard copy by the PTA Program Director and maintained in the PTA Program Director's office for one year after resolution.
Other Persons:
Individuals (such as patients, staff, or other facility personnel) who feel they have a grievance concerning a student should first attempt to address the concern with the student. If the situation remains unresolved, the following procedure will be followed:

1. The student’s CI or CCCE should be contacted to discuss the nature of the issue and action taken to resolve the issue.
2. If a satisfactory solution cannot be reached, the complaint should be taken to the ACCE and/or Program Director to discuss the complaint and determine an action plan.
3. As indicated, the complaint will be taken to the Dean of Health Careers, Vice President of Student Services, and finally Vice President for Academic Affairs, in that order, for a resolution.

C. Community
Individuals (such as employers of graduates and the general public) in the community who do not have a formal affiliation with ICC or the PTA program are welcome to provide comments. Feedback can be provided directly to the College with the link available on bottom of the College website: Info@ICC.edu. The following procedures will be used for investigation and resolution:

Procedure:
1. The complaint will be forwarded to the PTA Program Director, who will assess the complaint and attempt to resolve the issue to the satisfaction of the person/organization. The Dean of Health Careers will also be notified of the complaint.
2. In the event of unsatisfactory resolution, the complaint will be taken to the following individuals in this sequence:
   a. Dean of Health Careers
   b. Vice President of Student Services and/or Vice President of Academic Affairs
3. Any and all outside complaints will be reported to the Dean of Health Careers by the PTA Program Director and documented.
4. Records of complaints and any action taken will be retained in electronic and/or hard copy by the PTA Program Director and maintained in the PTA Program Director’s office for one year after resolution.
Clinical Courses

Clinical Course Layout
There are 3 clinical courses for 696 hours (2018-2019)

**PHTA 130:** This course includes an introduction to the clinical setting under direct personal supervision by qualified CIs. Students will participate in and observe a variety of patient care interventions used in a physical therapy practice setting.

Placement in curriculum: end of freshman year, spring semester (starting spring 2019)
Schedule: one clinical rotation for 3 weeks, full time
Hours/week: 40 hours/week; 120 hours

**PHTA 230:** This course is a progression of PHTA 130 in which the student develops the ability to initiate treatment interventions and increase clinical problem solving and the understanding of rationale and outcomes. The student will treat more complex patients with continued direct personal supervision by qualified CIs.

Placement in curriculum: sophomore year, fall semester (last offering fall 2018)
Schedule: two different rotations, each for 8 weeks
Hours/week: 16 hours/week (two 8-hour days) for 256 hours

**PHTA 232:** This course is a progression of PHTA 230 in which the student develops consistent proficiency with all aspects of a full time PTA’s patient care workload, under general supervision of qualified CIs. This course is the terminal clinical education experience as it occurs after all program coursework is completed.

Placement in curriculum: sophomore year, spring semester (last offering spring 2019)
Schedule: one clinical rotation, 8-weeks (second 8 weeks)
Hours/week: 40 hours/week (full-time) for 320 hours

Please see Appendix G for course syllabi.
APPENDICES
## Recommended Course Sequence

### Year 1

#### Summer 1

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
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<tr>
<td>BIOL 140</td>
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<tr>
<td>(or BIOL 205 and 206)</td>
<td></td>
</tr>
<tr>
<td>HLTH 121</td>
<td>2</td>
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<tr>
<td><strong>Total</strong></td>
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#### Fall 1

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<td>ENGL 110</td>
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<tr>
<td>PHTA 111</td>
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<tr>
<td>PHTA 116</td>
<td>5</td>
</tr>
<tr>
<td>HEOCC 200</td>
<td>3</td>
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<td><strong>Total Fall 1</strong></td>
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#### Spring 1

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<tr>
<td>COMM 110 or 113</td>
<td>3</td>
</tr>
<tr>
<td>PHTA 112</td>
<td>1.5</td>
</tr>
<tr>
<td>PHTA 118</td>
<td>6</td>
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<td>PHTA 130</td>
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<td><strong>Total Spring 1</strong></td>
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**Total first year:** 37.5
Year 2

Summer 2

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Fall 2

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Spring 2

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Total second year: 32.5-33.5

Program Total: 70-71
General Education CH: = 27-28
Technical Courses CH = 43-44
## Fall 1

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<td>PHTA 111: Lecture T/Th 8:00-8:50</td>
<td>PHTA 116: Lecture MW 8:00-8:50</td>
<td>PHTA 111: Lecture T/Th 8:00-8:50</td>
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<td>PHTA 111</td>
<td>Lecture T/Th 9:00-9:50</td>
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**Appendix B**
### Spring 1

**15-week semester; clinical: extended semester**

**PHTA 112:** 12-week course (hybrid)

**PHTA 118:** Lecture: ThF; Lab: TTh

**PHTA 130:** Full time, 3 week starts in week 16 (+8 lecture hours)

In-person meeting sessions (4) to be announced at the start of the course.

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**Appendix B**
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<th>Time</th>
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Open lab access (faculty must be present)
### Fall 2 [eff 2019]

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## Skills Learned by First-Year Students
(Skills demonstrated through skills checklist competency or practical exam)

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<td><strong>PHTA 111</strong></td>
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<td>Gait Training and Assistive Devices</td>
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<td>Cryotherapy Application</td>
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<td>Soft Tissue and Massage Techniques</td>
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<td>Universal Precautions and Isolation Techniques</td>
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<td>Handwashing, Asepsis, and Sterile Technique</td>
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<td>Sterile Dressing Change</td>
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<td>Pain Assessment/Scales</td>
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<tr>
<td>Anthropometric Characteristics</td>
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<tr>
<td>Introduction to Integumentary Integrity</td>
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<tr>
<td>Wheelchair Management: operation, mobility skills, and proper seating/positioning</td>
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Appendix C
<table>
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<tr>
<th>Introduction to Muscle Energy Techniques and Sacro-iliac Dysfunction</th>
<th>Vital Signs</th>
<th>Patient Education</th>
<th>Communication Skills</th>
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<tr>
<td>Transfer Activities: Sit-stand, pivot transfers, mat to/from w/c</td>
<td>Positioning &amp; Draping</td>
<td>Bed Mobility</td>
<td>Body Mechanics</td>
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<tr>
<td>Normal Posture Analysis</td>
<td>Vital Signs</td>
<td>Patient Education</td>
<td>Communication Skills</td>
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## Skills Learned by Second-Year Students
(Skills demonstrated through skills checklist competency or practical exam)

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<th>Prior to Clinical 3 (PHTA 232)</th>
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<td><strong>Fall: PHTA 218</strong>&lt;br&gt;Concurrent with PHTA 230 (note: last time Fall 2018)</td>
<td><strong>Spring: PHTA 220</strong></td>
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<td>Vital Signs</td>
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<td><em>Electrotherapeutic Modalities:</em>&lt;br&gt;FES, NMES, TENS, IFC, High Volt, Combo US/IFC</td>
<td>Dermatomes and Myotomes</td>
<td>Assessment and Calculation of:&lt;br&gt;Maximum and Target Heart Rate (and percentage)&lt;br&gt;Respiration rate</td>
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<td>Iontophoresis</td>
<td>Deep Tendon Reflexes Testing</td>
<td>Assessment of Cognition, Arousal, &amp; Mental Status</td>
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<tr>
<td>Ultrasound</td>
<td>Assessment related to Integumentary Integrity</td>
<td>Lower Extremity Prosthetic Education</td>
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<tr>
<td>Pulsed Ultrasound</td>
<td>Proprioceptive Neuromuscular Facilitation [PNF]&lt;br&gt;(Diagonals and Techniques)</td>
<td>Lower Extremity Amputee Limb-wrapping</td>
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<tr>
<td>Application of Direct Current for Peripheral Nerve Injuries</td>
<td>Facilitatory and Inhibitory Techniques</td>
<td>Breathing Exercises</td>
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<tr>
<td>Pain Assessment/Scales</td>
<td>Gait and Transfers for&lt;br&gt;for Neurological Diagnoses</td>
<td>Rate of Perceived Exertion&lt;br&gt;(Borg and Modified Borg Scales)</td>
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<tr>
<td>Patient Education</td>
<td>Sensation Testing</td>
<td>Airway Clearance Techniques:&lt;br&gt;Coughing Techniques&lt;br&gt;Postural Drainage</td>
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<tr>
<td>Communication Skills</td>
<td>Developmental Reflexes</td>
<td>Assessment Related to Older Adults&lt;br&gt;and Appropriate Interventions</td>
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<td>Introduction to the Pregnant Client</td>
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<td>Coordination Assessment and Related Interventions</td>
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<td>Advanced Normal Gait</td>
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Appendix C
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<td>Interventions for Commonly Seen Pediatric Diagnoses</td>
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<td></td>
<td>Patient Education</td>
</tr>
<tr>
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<td>Communication Skills</td>
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</table>
Illinois Central College, Freshman / Sophomore, Physical Therapist Assistant Program student,

(Circle one) has successfully completed the following:

- Infection Control and Blood Borne Pathogens orientation
- Basic Life Support for Health Care Providers (CPR) certification.

In adherence to CDC/OSHA recognized guidelines, it is the policy of Illinois Central College that all enrolled Health Career students will comply with physical, immunization, and tuberculosis requirements as listed:

- Physical examination & health history
- Drug screen: 11 channel
- Uniform Conviction Information Act (UCIA) criminal background check
- Latex allergy/sensitivity screen
- Vaccines or proof of immunity, including: Hepatitis B, MMR, Tdap, Varicella
- 2-step Tuberculosis (TB) test
- Seasonal flu vaccine when applicable, or waiver

The College provides professional liability insurance coverage for students, during clinical hours. Students verify, by signed waiver, possession of major medical insurance or acceptance of responsibility for incurred medical care and/or treatment costs.

Illinois Central College Health Career student health information is maintained at IWIRC:

Illinois Work Injury Resource Center
736 SW Washington St. (Wash. & State) Peoria, Illinois
Phone: (309) 497-0300 Fax: (309) 497-0922

Upon facility request, information will be sent to facility.

Contact information, should student need to be reached prior to, or during, clinical experience:

Dates of clinical experience: __________________________________________

Printed Name: ___________________________ Signature: ___________________________

Address: _________________________________ City: __________________ ZIP: _________

Phone: ________________________________ Email: ______________________________

For further information, please contact Illinois Central College, Health Careers, at (309) 690-7530, or:

Academic Coordinator of Clinical Education: Alice Gold-Pearce

Phone: (309) 690-7552 Email: agoldpearce@icc.edu
ICC PTA PROGRAM
CLINICAL EDUCATION EXPERIENCE
ORIENTATION CHECKLIST

Please use the following checklist when providing the ICC PTA student with an orientation to your facility. **The student is to return this list by midterm when faxing midterm comments.**

**Introduction to Personnel**
- [ ] Clinical Instructor (CI)
- [ ] Center Coordinator of Clinical Education (CCCE)
- [ ] Physical Therapy or Rehab Department Manager
- [ ] Physical Therapy Department staff/support personnel
- [ ] Other members of the rehab team

**Orientation of Policies and Procedures**
- [ ] Safety and emergency procedures
- [ ] Infection control procedures
- [ ] Procedures for billing and documentation
- [ ] Procedures for patient discharge
- [ ] Procedures for ordering of equipment
- [ ] Policy related to Patient Privacy and Confidentiality

**Orientation for Delivery of Care**
- [ ] Patient services provided
- [ ] Treatment areas
- [ ] Equipment/supplies
- [ ] Cleaning procedures

**Establish CI/student PTA Relationship**
- [ ] Review written student expectation/goals
- [ ] Review student’s previous clinical and life experience
- [ ] Review student’s preferred learning style(s)
- [ ] CI expectations for clinical made clear
- [ ] Establish mechanism for communication
- [ ] Establish frequency of communication

**Other Topics Discussed**

________________________  _______________________
Signature of CI/Date        Signature of Student/Date
# ILLINOIS CENTRAL COLLEGE
PTA PROGRAM
STUDENT EVALUATION OF CLINICAL EDUCATION EXPERIENCE

**Student Name:** ________________________________________________________________

**Facility Name:** ________________________________________________________________

**Clinical Instructor Name:** ___________________________ Check if: PT _______ PTA ______

**Date Completed:** _______________________________

For these three sections, use the following scale and circle the appropriate number:

4 = Strongly Agree;  3 = Agree;  2 = Disagree;  1 = Strongly Disagree

<table>
<thead>
<tr>
<th>About your clinical instructor (CI):</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>4 3 2 1</td>
<td>1. Knew what was expected of me for this experience (e.g., student education level, objectives of experience, appropriate patient interventions, etc.).</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>4 3 2 1</td>
<td>2. Provided timely and constructive feedback regarding my clinical performance.</td>
<td></td>
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<tr>
<td>4 3 2 1</td>
<td>3. Was effective with clinical teaching skills.</td>
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<td></td>
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<tr>
<td>4 3 2 1</td>
<td>4. Explained new or unfamiliar procedures not yet covered in class.</td>
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<tr>
<td>4 3 2 1</td>
<td>5. Modeled appropriate professional behaviors.</td>
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<tr>
<td>4 3 2 1</td>
<td>6. Was open to communication and receptive to my ideas.</td>
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<tr>
<td>4 3 2 1</td>
<td>7. Encouraged problem solving to challenge and motivated me to learn.</td>
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<tr>
<td>4 3 2 1</td>
<td>8. I recommend this clinical instructor continue in the clinical teaching role.</td>
<td></td>
<td></td>
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<tr>
<td>4 3 2 1</td>
<td>9. Level of supervision provided by CI was appropriate and allowed for effective learning.</td>
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</table>

<table>
<thead>
<tr>
<th>About Program Faculty/ACCE:</th>
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<tbody>
<tr>
<td>4 3 2 1</td>
<td>10. Communicates clearly and in a timely manner to address student and CI needs.</td>
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<tr>
<td>4 3 2 1</td>
<td>11. Responds to matters associated with clinical education in a timely manner.</td>
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<tr>
<td>4 3 2 1</td>
<td>12. Uses site visits or phone calls to obtain feedback about student performance during the experience, CI needs, or other issues.</td>
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</table>

<table>
<thead>
<tr>
<th>About your clinical experience:</th>
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<tbody>
<tr>
<td>4 3 2 1</td>
<td>13. I had opportunity(ies) to speak with the physical therapist for patient-care activities.</td>
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<td></td>
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<tr>
<td>4 3 2 1</td>
<td>14. I had a variety of patient diagnoses and learning opportunities (appropriate for my educational level) for effective learning.</td>
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<tr>
<td>4 3 2 1</td>
<td>15. Staff was supportive and helpful.</td>
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<tr>
<td>4 3 2 1</td>
<td>16. Orientation to facility covered the facility policies and procedures.</td>
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<tr>
<td>4 3 2 1</td>
<td>17. I would recommend this facility to other students.</td>
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<tr>
<td>4 3 2 1</td>
<td>18. This clinical was sequenced appropriately in the curriculum for effective learning.</td>
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<tr>
<td>4 3 2 1</td>
<td>19. This clinical was of appropriate length and duration for effective learning.</td>
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CONTINUE NEXT PAGE
Answer the following questions about your CE and experience:

20. List 2-3 ways in which your clinical instructor was **MOST** effective.

21. List 2-3 ways in which your clinical instructor could improve clinical teaching (i.e., needs more information about blank, etc.). If no areas, you can indicate “none.”

22. List other learning experiences you participated in during this experience (i.e., observed surgery).
INSTRUCTOR INFORMATION

Instructor: Alice Gold-Pearce
Telephone: (309) 690-7552
Email: agoldpearce@icc.edu
Office Hours: Posted on course blackboard site; others by appointment

CLASS INFORMATION

Course Description:
This course includes an introduction to the clinical setting under direct personal supervision by qualified clinical instructors. Students will participate in and observe a variety of patient care interventions used in a physical therapy practice setting.

Credits: 1.5 semester hour

Course Format: 8 clinical hours/week and .5 lecture hours per week equivalent

Contact Hours: 120 clinical hours 8 lecture hours

Teaching Methods:
Supervised physical therapy interventions in a clinical setting

Course Prerequisites:
PHTA 118 with “C” grade or better

Textbook:
None

Additional Materials of Instruction:
1. Course management system
2. Discussion board

Student Assessment:

Methods of Assessment of Student Learning:
1. Participation with discussion board
2. Patient treatment plans
3. Patient care documentation
4. Self-assessment of clinical skills

Evaluation of Student Achievement:
1. The program Academic Coordinator of Clinical Education (ACCE) makes the final grade determination for all clinical education experiences.
2. Program faculty will have communication with the student and clinical instructor (CI) through an onsite clinical visit, email correspondence, or telephone contact.


4. Both the CI and the student will complete the PTA CPI at the midterm and final points of the clinical rotation. The student should notify the ACCE at time of evaluation if the student is in disagreement with or there are significant discrepancies with the midterm and/or final CPI ratings.

5. For the student to progress in the program, a satisfactory or passing grade of a "C" (75% of total points) or better must be earned in this course. In order to receive a passing grade, the student must complete the following:
   a. PTA CPI
   b. Submit clinical assignments by established dates
   c. Required number of clinical education hours

Grading Scale:
A = 93-100%
B = 84-92%
C = 75-83%
D = 66-74%
F = 0-65%

1. Performance Criteria Information
   a. The 14 performance criteria on the CPI describe the essential aspects of clinical work of an entry-level PTA.
   b. Performance criteria items #1-6 are related to behavioral expectations; items #7-13 address patient interventions; item #14 addresses resource management.
   c. Red-flag items have a flag symbol to the left of the performance criterion. The five “red-flag” items (numbered 1, 2, 3, 5, and 7) are considered foundational elements in clinical work. Students may progress more rapidly in the “red-flag” areas than in other performance criteria.
   d. A significant concern related to a “red-flag” performance criterion item warrants immediate attention, more expansive documentation, and a telephone call to the program ACCE. Actions taken to address these concerns may include remediation, extension of the experience with a learning contract, and/or dismissal from the clinical education experience.

2. On the PTA CPI, the following minimum thresholds must be met by the end of the course to pass the course and progress in the program:
   a. Performance Criteria #1-6: Near or at Intermediate Performance Level
   b. Performance Criteria #7-14: Near or at Advanced Beginner Performance Level

Failure to submit to the ACCE or program faculty all required materials by the due date may result in an incomplete (I) grade, unless extenuating circumstances prevail.

If the student fails the clinical experience, the student may be given an option to repeat the experience. However, it must be repeated at a new clinical site and may occur after the semester ends. The student must have a grade of “C” or better in order to pass the repeat experience, pass the course, and to progress in the program. If the student fails the second clinical experience, an additional repeat option is not permitted and the student will be dismissed from the program.
Institutional Learning Outcomes (referenced with each course learning outcome)

**Communication**  
have the ability to transfer information, concepts, emotions to an audience through written, oral, symbolic, aesthetic, and/or nonverbal communication methods that successfully align with their purpose.

**Reasoning**  
identify and solve problems, analyze new information, synthesize and evaluate ideas, and transform ideas into a course of action by using critical, creative, and/or analytical skills.

**Responsibility**  
understand the implications of choices and actions, demonstrate appropriate behaviors in academic/professional contexts, and contribute constructively within the context of community.

**Course Learning Outcomes:**

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

1. develop proficiency in the safe application of simple physical therapy interventions with 75-100% supervision from clinical instructor. (Performance Criteria (PC) # 8-12 from *Clinical Performance Instrument* ([CPI]) (Reasoning)
2. demonstrate expected clinical behaviors in a professional manner with 50-75% input from clinical instructor: (PC #2 from CPI) (Responsibility)  
   a. display respect for patient, family, therapy staff, and other personnel without bias of sex, race, or other affiliation.
   b. maintains patient confidentiality and privacy.
   c. demonstrate skills and attitudes necessary for lifelong learning.
   d. is punctual and dressed appropriately for clinic.
   e. demonstrate flexibility with time and schedule.
   f. accept feedback without defensiveness.
3. practice the development of verbal and non-verbal communication skills in ways that are appropriate to the situation with 50-75% input from clinical instructor: (PC #5 from CPI) (Communication)  
   a. begin to ask appropriate questions to gain knowledge and understand the patient’s diagnosis.
   b. communicate with the supervising physical therapist regarding the patient’s progress.
   c. communicate with the supervising physical therapist when the patient has a change in status or when as treatment is withheld.
   d. communicate with the clinical instructor, patient, family/caregiver, and other healthcare professionals effectively.
4. strive to perform in a manner consistent with ethical guidelines, legal standards and standards of the profession with 50-75% input from clinical instructor: (PC #3 from CPI) (Responsibility)  
   a. maintain all aspects of HIPAA.
   b. apply the APTA Ethical Code of Conduct as the standard for behavior.
   c. recognize situations which pose ethical issues.
5. develop clinical problem solving with 75-100% supervision from clinical instructor: (PC #7 from CPI) (Reasoning)
   a. actively discussing treatment rationale and expected outcomes.
   b. seeking clarification of the therapy plan of care from the supervising physical therapist.
   c. understand situations when the supervising physical therapist needs to be consulted.
   d. recognize when the patient has a change in status.
   e. recognize when a treatment intervention should not be provided.
   f. recognize when a treatment intervention can be modified or progressed within the plan of care.
   g. determine patient readiness for discharge.
   h. identify emergency situations and action to take.

6. develop skills to perform in a safe manner that minimizes the risk to patient, self, and others with 75-100% supervision from clinical instructor. (PC #1 from CPI) (Reasoning)

7. accurately and timely document all aspects of patient care to support skilled PT with 75-100% supervision input from clinical instructor. (PC #13 from CPI) (Communication)

8. begin to identify activities for professional growth with 50-75% input from clinical instructor: (PC # 6 from CPI) (Reasoning)
   a. identify professional strengths and limitations.
   b. establish short and long term goals and plan for success.
   c. accurately assessment clinical performance for self-improvement.
   d. seek out relevant resources and learning opportunities to improve skills.

9. adapt delivery of physical therapy services based on patient differences with 50-75% input from clinical instructor: (PC #4 from CPI) (Reasoning)
   a. begin to understand individual and cultural differences in patients.
   b. develop an awareness of own social and cultural biases in the provision of physical therapy services.
   c. develop skills to be nonjudgmental when patients’ beliefs and values conflict with their own.
   d. communicate in a manner which is respectful and sensitive to cultural differences.

10. practice the development of data collection skills consistent with the plan of care with 75-100% supervision from clinical instructor. (PC#8, #12 from CPI) (Reasoning)

11. demonstrate correct body and lifting mechanics for self and patient safety with 50-75% verbal cues from clinical instructor. (PC#1 from CPI) (Reasoning)

12. begin to function as a team member by with 75-100% supervision from clinical instructor: (PC #14 from CPI) (Communication)
   a. practice effective time management.
   b. begin to interact with other members of the healthcare team.
   c. develop a basic understanding of department operations.

13. participate in education activities with 50-75% input from clinical instructor: (PC #2 from CPI) (Reasoning)
   a. educate patient and family/caregivers.
   b. provide patient education materials based on the plan of care.
   c. educate others in the role of the physical therapist assistant.

14. begin to develop an awareness of social responsibility with 50-75% input from clinical instructor: (PC#2, #3 from CPI) (Responsibility)
   a. places the patient's needs above self-interest.
   b. recognize the importance of promoting the physical therapy profession to the public.
15. develop skills to promote productive working relationships with interprofessional team members. (PC #2 from CPI) (Communication)

16. Orientation to Clinical Education
   a. complete the PTA CPI training module.
   b. demonstrate an understanding of the progressive expectations of the clinical courses.
   c. demonstrate an understanding of all policies and procedures regarding clinical courses.
   d. utilize the ICC PTA Student Handbook and the course blackboard site to reference important clinical information.
   e. appreciate the value of becoming a clinical instructor for professional growth.
   f. provide feedback on the clinical experience and clinical instructor.

Course Schedule:
Monday-Friday, 8:00 a.m.-4:30 p.m. (times may vary based on facility and CI schedule)
INSTRUCTOR INFORMATION

Instructor: Alice Gold-Pearce
Telephone: (309) 690-7552
Email: agoldpearce@icc.edu

Office Hours: Posted on course blackboard site; others by appointment

CLASS INFORMATION

Course Description:
This course is a progression of PHTA 130 in which the student develops the ability to initiate treatment interventions and increase clinical problem solving and the understanding of rationale and outcomes. The student will treat more complex patients with continued direct personal supervision by qualified clinical instructors.

Credits: 2.5 semester hours

Course Format: Sixteen hours clinical hours per week equivalent

Contact Hours: 240 Contact Hours

Teaching Methods:
Supervised physical therapy interventions in a clinical setting

Course Prerequisites:
PHTA 130 with a grade “C” or better

Textbook:
None

Additional Materials of Instruction:
1. Course management system
2. Discussion board

Student Assessment:
Methods of Assessment of Student Learning:
1. Participation with discussion board
2. Patient treatment plans
3. Patient care documentation
4. Self-assessment of clinical skills
Evaluation of Student Achievement:

1. The program Academic Coordinator of Clinical Education (ACCE) makes the final grade determination for all clinical education experiences.
2. Program faculty will have communication with the student and clinical instructor (CI) during each rotation through an onsite clinical visit, email correspondence, or telephone contact.
3. Clinical performance is formally assessed at the midterm and final points of the clinical experience using the Physical Therapist Assistant Clinical Performance Instrument (PTA CPI).
4. Both the CI and the student will complete the PTA CPI at the midterm and final points of the clinical rotation. The student should notify the ACCE at time of evaluation if the student is in disagreement with or there are significant discrepancies with the midterm and/or final CPI ratings.
5. For the student to progress in the program, a satisfactory or passing grade of a "C" (75% of total points) or better must be earned in this course. In order to receive a passing grade, the student must complete the following:
   a. PTA CPI
   b. Submit clinical assignments by established dates
   c. Required number of clinical education hours

Grading Scale:
- A = 93-100%
- B = 84-92%
- C = 75-83%
- D = 66-74%
- F = 0-65%

1. Performance Criteria Information
   a. The 14 performance criteria on the CPI describe the essential aspects of clinical work of an entry-level PTA.
   b. Performance criteria items #1-6 are related to behavioral expectations; items #7-13 address patient interventions; item #14 addresses resource management.
   c. Red-flag items have a flag symbol to the left of the performance criterion. The five “red-flag” items (numbered 1, 2, 3, 5, and 7) are considered foundational elements in clinical work. Students may progress more rapidly in the “red-flag” areas than in other performance criteria.
   d. A significant concern related to a “red-flag” performance criterion item warrants immediate attention, more expansive documentation, and a telephone call to the program ACCE. Actions taken to address these concerns may include remediation, extension of the experience with a learning contract, and/or dismissal from the clinical education experience.

2. On the PTA CPI, the following minimum thresholds must be met by the end of the course to pass the course and progress in the program:
   a. Performance Criteria #1-6: Near or at Advanced Intermediate Performance level
   b. Performance Criteria #7-14: Near or at Intermediate Performance Level
Failure to submit to the ACCE or program faculty all required materials by the due date may result in an incomplete (I) grade, unless extenuating circumstances prevail.

If the student fails the clinical experience, the student may be given an option to repeat the experience. However, it must be repeated at a new clinical site and may occur after the semester ends. The student must have a grade of “C” or better in order to pass the repeat experience, pass the course, and to progress in the program. If the student fails the second clinical experience, an additional repeat option is not permitted and the student will be dismissed from the program.

Institutional Learning Outcomes (referenced with each course-learning outcome)

Communication
have the ability to transfer information, concepts, emotions to an audience through written, oral, symbolic, aesthetic, and/or nonverbal communication methods that successfully align with their purpose.

Reasoning
identify and solve problems, analyze new information, synthesize and evaluate ideas, and transform ideas into a course of action by using critical, creative, and/or analytical skills.

Responsibility
understand the implications of choices and actions, demonstrate appropriate behaviors in academic/professional contexts, and contribute constructively within the context of community.

Course Level Outcomes
By the end of this course, the student will:

1. demonstrate proficiency in the safe application of simple physical therapy procedures and consistency in developing the ability to perform more complex tasks under the direct supervision of qualified instructors. (Performance Criteria [PC] # 8-12 from Clinical Performance Instrument ([CPI]) (Reasoning)
2. demonstrate expected clinical behaviors in a professional manner in all situations. (PC #2 from CPI) (Responsibility)
3. demonstrate successful verbal, non-verbal, teaching and writing communication skills appropriate to the situational needs of patients, other health care professionals and the clinical instructor. (PC#5 from CPI) (Communication)
4. perform in a manner consistent with the established ethical guidelines, legal standards, standard of the profession with minimum clarification from clinical instructor. (PC #3 from CPI) (Responsibility)
5. demonstrate clinical problem solving by initiating treatment rationale and expect outcomes for simple patients and seeking clarification of plan of care for more complex patients, including patient progression and intervention modification. (PC #7 from CPI) (Reasoning)
6. notify the supervising therapist of changes in patient status, readiness for discharge and emergent situations. (PC #7 from CPI) (Communication)
7. consistently perform in a safe manner that minimizes the risk to patient, self, and others under direct supervision. (PC #7 from CPI) (Reasoning)
8. produce quality documentation in a timely manner to support skilled physical therapy services provided with minimum feedback from qualified clinical instructors. (PC #13 from CPI) (Communication)

9. demonstrate the ability to identify professional strengths and limitations, establish short and long-term goals and plan for professional success, and actively seek relevant resources and learning opportunities to improve knowledge skills, and behaviors. (PC #6 from CPI) (Responsibility)

10. adapt communication and behavior in the context of patient individual and cultural differences in patient care. (PC #4 from CPI) (Communication)

11. demonstrate proficiency in data collection skills including, but not limited to: vital signs, goniometric measurements, strength grades, and anthropometric characteristics. (PC #9 from CPI) (Reasoning)

12. effectively organize a patient schedule and treatment session to provide physical therapy services in a time-efficient manner. (PC #14 from CPI) (Reasoning)

13. demonstrate the ability to promote productive working relationships with interprofessional team members with minimal cues from clinical instructor. (PC #2 from CPI) (Communication)

Class Schedule:
40 hours per week; generally, Monday-Friday, 8:00 a.m.-4:30 p.m. but days/times may vary based on facility and CI schedule.
INSTRUCTOR INFORMATION

Instructor: Alice Gold-Pearce
Telephone: (309) 690-7552
Email: agoldpearce@icc.edu
Office Hours: Posted on course blackboard site; others by appointment

CLASS INFORMATION

Course Description:
This course is a progression of PHTA 230 in which the student develops consistent proficiency with all aspects of a full time physical therapist assistant’s patient care workload, under general supervision of qualified clinical instructors.

Credits: Three semester hours

Course Format: 18 clinical hours per week equivalent

Contact Hours: 280 contact hours

Teaching Methods:
Supervised physical therapy interventions in a clinical setting

Course Prerequisites:
PHTA 230 with grade “C” or better

Textbook:
None

Additional Materials of Instruction:
1. Computer-assisted instruction
2. Discussion board

Student Assessment:

Methods of Assessment of Student Learning:
1. Participation with discussion board
2. Patient treatment plans
3. Patient care documentation
4. Self-assessment of clinical skills

Evaluation of Student Achievement:
1. The program Academic Coordinator of Clinical Education (ACCE) makes the final grade determination for all clinical education experiences.
2. Program faculty will have communication with the student and clinical instructor (CI) through an onsite clinical visit, email correspondence, or telephone contact.
3. Clinical performance is formally assessed at the midterm and final points of the clinical experience using the Physical Therapist Assistant Clinical Performance Instrument (PTA CPI).

4. Both the CI and the student will complete the PTA CPI at the midterm and final points of the clinical rotation. The student should notify the ACCE at time of evaluation if the student is in disagreement with or there are significant discrepancies with the midterm and/or final CPI ratings.

5. For the student to progress in the program, a satisfactory or passing grade of a “C” (75% of total points) or better must be earned in this course. In order to receive a passing grade, the student must complete the following:
   a. PTA CPI
   b. Submit clinical assignments by established dates
   c. Required number of clinical education hours

Grading Scale:
A = 93-100%
B = 84-92%
C = 75-83%
D = 66-74%
F = 0-65%

1. Performance Criteria Information
   a. The 14 performance criteria on the CPI describe the essential aspects of clinical work of an entry-level PTA.
   b. Performance criteria items #1-6 are related to behavioral expectations; items #7-13 address patient interventions; item #14 addresses resource management.
   c. Red-flag items have a flag symbol to the left of the performance criterion. The five “red-flag” items (numbered 1, 2, 3, 5, and 7) are considered foundational elements in clinical work. Students may progress more rapidly in the “red-flag” areas than in other performance criteria.
   d. A significant concern related to a “red-flag” performance criterion item warrants immediate attention, more expansive documentation, and a telephone call to the program ACCE. Actions taken to address these concerns may include remediation, extension of the experience with a learning contract, and/or dismissal from the clinical education experience.

2. On the PTA CPI, the following minimum thresholds must be met by the end of the course to pass the course and progress in the program:
   a. Performance Criteria #1-6: Near or at Entry Level Performance
   b. Performance Criteria #7-14:
      Midterm: Near or at Advanced Intermediate Performance Level
      Final: Near or at Entry Level

Failure to submit to the ACCE or program faculty all required materials by the due date may result in an incomplete (I) grade, unless extenuating circumstances prevail.

If the student fails the clinical experience, the student may be given an option to repeat the experience. However, it must be repeated at a new clinical site and may occur after the semester ends. The student must have a grade of “C” or better in order to pass the repeat experience, pass the course, and to progress in the program. If the student fails the second clinical experience, an additional repeat option is not permitted and the student will be dismissed from the program.
Institutional Learning Outcomes (referenced with each course-learning outcome)

Communication
have the ability to transfer information, concepts, emotions to an audience through written, oral, symbolic, aesthetic, and/or nonverbal communication methods that successfully align with their purpose.

Reasoning
identify and solve problems, analyze new information, synthesize and evaluate ideas, and transform ideas into a course of action by using critical, creative, and/or analytical skills.

Responsibility
understand the implications of choices and actions, demonstrate appropriate behaviors in academic/professional contexts, and contribute constructively within the context of community.

Course Level Outcomes:

By the end of this course, the student will:

1. demonstrate consistent proficiency and skill in the safe application of simple or complex procedures under the general supervision of qualified instructors. (Performance Criteria [PC] # 8-12 from Clinical Performance Instrument ([CPI]) (Reasoning)
2. demonstrate expected clinical behaviors in a professional manner in all situations. (PC #2 from CPI) (Responsibility)
3. communicate effectively and consistently in ways that are congruent with the situational needs of all patients, other health care professionals and the clinical instructor. (PC #5 from CPI) (Communication)
4. perform in a manner consistent with the established ethical guidelines, legal standards, standards of the profession at all times. (PC #3 from CPI) (Responsibility)
5. demonstrate consistent clinical problem solving by determining treatment rationale and expected outcomes for simple and more complex patients, including patient progression and intervention modification. (PC # 7 from CPI) (Reasoning)
6. notify the supervising physical therapist of changes in patient status, readiness for discharge and performs appropriately during emergent situations. (PC #7 from CPI) (Communication)
7. consistently perform in a safe manner that minimizes the risk to patient self, and others under general supervision of qualified instructors. (PC #1 from CPI) (Reasoning)
8. consistently produce quality documentation in a timely manner to support the delivery of skilled physical therapy services. (PC #13 from CPI) (Communication)
9. effectively and consistently identify professional strengths and limitations, establish short and long-term goals and plan for success; actively seek relevant resources and learning opportunities to improve knowledge skills, and behaviors. (PC #6 from CPI) (Responsibility)
10. adapt communication and behavior in the context of the patient’s individual and cultural differences in patient care. (PC #4 from CPI) (Communication)
11. demonstrate consistent proficiency in data collection skills including but not limited to: vital signs, goniometric measurements, strength grades, and anthropometric characteristics. (PC #9 from CPI) (Reasoning)
12. consistently organize and schedule a full caseload of patients to provide physical therapy services in an effective and time-efficient manner. (PC#14 from CPI) (Reasoning)
13. understand Continuous Quality Improvement (CQI) measures and how CQI relates to the provision of physical therapy services. (PC #14 from CPI) (Reasoning)
14. effectivley promote productive working relationships with interprofessional team members under the general supervision of clinical instructor. (PC #2 from CPI) (Communication)

Class Schedule:
While generally Monday-Friday, 8:00 a.m.-4:30 p.m. days/times may vary based on facility and CI schedule.
PHTA 230 Teaching Activity

Objective
By the end of this experience, the student will understand the concepts of teaching and presentation skills theories through a professional teaching project.

Grading
The student will be graded by the supervising clinical instructor or other assigned person, as appropriate. The project will be graded on a “pass/fail” basis and is a required component for each PHTA 230 rotations. See attached document for grading criteria.

Assignment Criteria
1. Topic must be appropriate for the clinical setting and approved by both the clinical instructor and academic faculty. Topic should be approved by ACCE by the end of first week of the clinical rotation. If journal article, the abstract must be submitted for approval.
   - Possible options:
     1. Inservice presentation
     2. Professional journal article review
     3. Patient education class (i.e. total joint class, support group, etc.). This activity is outside the normal education provided to patients.
     4. Staff training program (i.e. teaching nursing staff new technique, etc.)

2. The student will submit a copy of handouts (i.e. teaching outline, full journal article, patient education materials, etc.) provided for teaching activity, to program faculty with clinical paperwork (evaluation forms).

3. The student will submit two supporting references in APA format (not required if presenting a journal article).

4. The student will submit an evaluation of teaching activity completed by clinical instructor or other assigned person.

5 The student will submit self-evaluation of teaching activity.
Student Name: __________________________  Date: __________________
Course: ________________________________
Facility: ________________________________
Topic: ________________________________

**Clinical Inservice and/or Teaching Activity Evaluation Tool**

<table>
<thead>
<tr>
<th>A.</th>
<th>Yes</th>
<th>No</th>
<th>N/I</th>
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<tbody>
<tr>
<td>1. Did the student start and end the presentation on time?</td>
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<td>2. Did the presentation follow a logical order?</td>
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<td>3. Did the student use appropriate methods to present topic (i.e., handouts, etc.)?</td>
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<td>4. Did the student appear organized and prepared?</td>
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<td>5. Did the student provide references to support the presentation? (journal article presentation excluded from need for references)</td>
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**B. Strengths of presentation:**

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

**C. Suggestions for improvement:**

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
HEALTH CAREERS
DEPARTMENT
POLICIES &
PROTOCOLS