

CLINICAL EDUCATION HANDBOOK

DEPARTMENT OF PHYSICAL THERAPY



ROSALIND FRANKLIN
UNIVERSITY
of MEDICINE AND SCIENCE

COLLEGE OF HEALTH PROFESSIONS

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MISSION

To serve humanity through the interprofessional education of health and biomedical professionals, and the discovery of knowledge dedicated to improving wellness.

VISION

To be the premier interprofessional health sciences university.

CORE VALUES

Civility · Diversity · Excellence · Innovation
Integrity · Scholarship · Teamwork

LIFE *in* DISCOVERY

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PART 1

PROGRAM SUMMARY

I. PROGRAM OVERVIEW

Physical Therapy is a dynamic healthcare profession. Practitioners must be able to adapt to the quickly changing healthcare system, yet continue to provide outstanding services. The goal of the program is to educate a physical therapist who is able to practice effectively, safely and ethically in any type of healthcare environment.

The RFU curriculum is designed to provide an in-depth and universal view of the profession, with an emphasis on clinical judgment based on current evidence to meet the evolving needs of society in a culturally sensitive manner. It is our desire to guide our students to develop a lifelong commitment to professional growth and the potential to develop into master clinicians while participating in health care management.

Program Highlights:

- Two-and-a-half year unified and integrated entry-level DPT program.
- Includes academic, clinical and research components which allow students to explore specialty areas.
- Designed for active learners who are skilled in critical thinking.
- Group learning settings.

II. PROGRAM MISSION, VISION AND PHILOSOPHY

MISSION: The mission of the Department of Physical Therapy is to educate and prepare physical therapists to serve society through excellence in interprofessional, person-centered, culturally responsive practice, service, discovery, and professional and societal leadership.

VISION: Our Vision is to be recognized for excellence in leadership and innovation in interprofessional education, scientific inquiry, and service to the community and society. Graduates will be recognized as movement specialists engaged in evidence-based, interprofessional, and culturally competent practice to promote health and wellness of all persons.

PHILOSOPHY: The Department of Physical Therapy adheres to the ideal that health care is a right of all persons, and that physical therapy is an essential component of the healthcare system.

The Department of Physical Therapy believes academic and clinical preparation should promote the development of a well-qualified doctoring practitioner for current health care delivery environments, as well as for new and expanded physical therapy roles in future healthcare systems.

In keeping with the responsibilities inherent in being a healthcare professional, every student's sense of professional duty should be fostered to:

1. Deliver quality performance as a healthcare professional,
2. Engage in scientific inquiry and discovery, and
3. Serve as community and societal leaders.

We believe in the importance of innovative education which extends beyond the classroom to serve all members of the community and global society in a manner that is patient/client-centered, collaborative, interprofessional and future focused.

III. CURRICULUM

The Doctor of Physical Therapy curriculum is designed to provide an in-depth and universal view of the profession, with an emphasis on clinical judgment based on current evidence to meet the evolving needs of society in a culturally sensitive manner. Courses are taught to develop comprehensive generalist skills which may be used in a variety of patient care settings and serve as a foundation for later specialization. The curriculum is designed to promote clinical reasoning and clinical judgments using evidence-based practice to provide the best foundation for clinical practice. Case studies, simulation and progressive patient interactions are utilized as effective means of ensuring knowledge synthesis and application to clinical practice.

Courses employ a variety of formats to address multiple learning styles best fit individual student needs. Knowledge, skills and attitudes are acquired and applied through horizontal and vertical integration of content throughout the curriculum. Active learning is emphasized as an important tool to engage students, maximize learning and foster individual responsibility for ongoing learning. Collaborative interprofessional learning among students from multiple professions is productive, encourages cooperation and provides the foundation for future building of interprofessional healthcare teams.

The curriculum is organized as a series of sequential, integrated courses containing seven didactic quarters and three clinical education quarters. Each quarter is identified as a Quarter Module (QM) with a central theme. Early QMs provide a foundation for subsequent QMs. Content is horizontally integrated within a QM and content is vertically integrated throughout the curriculum.

With an emphasis on self-directed learning, critical thinking and problem-solving, students are presented with coursework organized in a series of courses, case studies, direct patient care experiences, and through academic threads woven throughout the curriculum. The Research Portfolio System completed by all students is designed to promote research throughout the curriculum. The Professional Practicum gives the student the opportunity to experience alternative roles in the areas of administration, critical inquiry (research), education or healthcare policy within an individual study construct.

INCORPORATING CLINICAL EDUCATION

Clinical education in the DPT curriculum consists of three full-time clerkships in a variety of practice settings ranging from single-provider practices to large medical systems. Clerkships are designed to provide a range of supervised clinical practice experiences, and to apply, integrate and expand knowledge and skills acquired during the didactic curriculum. Clerkship affiliations are located throughout the country with the majority located in the Chicagoland area. Availability of specific sites may vary from year to year. Students are responsible for arranging their own housing and transportation during clerkships.

DEGREE REQUIREMENTS

- Completion of the above curriculum.
- Acquisition of a minimum cumulative GPA of 2.75.
- Successful completion of all course and program requirements within 2.5 years is anticipated, with up to a maximum of five years from the date of matriculation to complete the degree.

IV. ADMISSIONS

ADMISSIONS VISION STATEMENT

The Department of Physical Therapy is committed to the enrollment of a diverse body of talented students who will fulfill our mission to prepare entry-level physical therapists to serve society through excellence in person-centered practice, service, discovery, and professional and societal leadership. A diversity of backgrounds, preparation and interests is desirable in fostering excellence in patient care, research, education and service to an increasingly diverse society. Utilizing a holistic review admission process, we consider a balance of applicant experiences, personal attributes and characteristics in addition to prior demonstrated academic accomplishments. We are committed to selecting students who have demonstrated dedication to health care and science through health care and service-related employment, volunteer activity or scholarly research; leadership potential as evidenced by participation in community and school service activities; and important noncognitive personal competencies such as strong communication and interpersonal skills, ethical integrity, problem-solving, self-awareness and empathy. The holistic review allows our program to assess an applicant's potential to become a highly competent, diverse and caring physical therapist.

For more detailed information regarding admissions, including prerequisites and other requirements, please visit our website at: rfu.ms/dptappreq

V. PLAN OF STUDY

DOCTOR OF PHYSICAL THERAPY PLAN OF STUDY • 2.5 YEARS, 10 QUARTERS, FULL-TIME STUDY

SUMMER		FALL		WINTER		SPRING	
QM 1	QH	QM 2	QH	QM 3	QH	QM 4	QH
HPTX 563 Clinical Anatomy	10	HPTH 645 Clinical Physiology	6	HPTH 635 Kinesiology/Motor Control I	3	HPTX 579 Neuroscience	5
HPTH 618 Orientation to PT	4	HPTH 646 Fundamentals of Physiology	4	HPTH 636 Kinesiology/Motor Control II	4	HPTH 644 Neurological Clinical Medicine and Pharmacology	3
		HPTH 622 Critical Inquiry I	3	HPTH 634 Orthopedic Clinical Medicine	3	HPTH 640 Clinical Skills IV	5
		HPTH 620 Clinical Skills I	5	HPTH 630 Clinical Skills II	3	HPTH 643 Practice Issues II	2
		HPTH 623 Practice Issues I	1	HPTH 631 Clinical Skills III	3	HPTH 642 Critical Inquiry II	3
		HPTX 529 Foundations for Interprofessional Practice	1	HPTX 529 Foundations for Interprofessional Practice	1	HPTX 532 Leadership in the Healthcare Environment	2
	TOTAL QH: 14		TOTAL QH: 20		TOTAL QH: 17		TOTAL QH: 20
QM 5	QH	QM 6	QH	QM 7	QH	QM 8	QH
HPTH 716 Clerkship I (240)	10	HPTH 720 Clinical Skills V	4	HPTH 718 Clerkship II	14	HPTH 740 Clinical Skills VII	3
		HPTH 724 Advanced Clinical Medicine and Pharmacology	5			HPTH 741 Pediatric Physical Therapy	4
		HPTH 725 Advanced Regional Anatomy	2			HPTH 742 Physical Therapy in the Critical Care Sector	2
		HPTH 721 Clinical Skills VI	3			HPTH 823 Practice Issues IV	3
		HPTH 747 Cardiovascular and Pulmonary Physical Therapy I	3			HPTH 744 Prosthetics/Orthotics	3
		HPTH 743 Practice Issues III	1			HPTH 748 Cardiovascular and Pulmonary Physical Therapy II	2
		HPTH 722 Critical Inquiry III	1			HPTH 749 Critical Inquiry IV	1
	TOTAL QH: 10		TOTAL QH: 19		TOTAL QH: 14		TOTAL QH: 18
QM 9	QH	QM 10	QH				
HPTH 848 Professional Practicum	12	HPTH 835 Clerkship III	12				
		HPTH 843 Practice Issues V	1				
		TOTAL QH: 13					

VI. COURSE DESCRIPTIONS

SUMMER YEAR 1 (QM 1)

HPTX 563 Clinical Anatomy (10 QH)

Both gross anatomy and developmental anatomy are studied in this course. Laboratory time is devoted exclusively to the regional dissection of human cadavers. Supplementary offerings within the course include films, prosected cadavers and bone sets for individual study.

HPTH 618 Orientation to Physical Therapy (4 QH)

This course will explore the healthcare delivery system in general as well as the history of physical therapy; professional, ethical and legal aspects of practice; the current practice of physical therapy; and the physical therapist's role as a practitioner, leader, educator, researcher, and critical thinker in a variety of settings and in wellness and prevention. Medical terminology, prevention and wellness-related screening, and basic palpation techniques will be also introduced.

FALL YEAR 1 (QM 2)

HPTH 620 Clinical Skills I (5 QH)

The emphasis of Clinical Skills I is on the management of the total patient, including the patient's direct needs and related physical therapy responsibilities. Topics include written and verbal communication, patient safety, infection control, physical therapy evaluation, physical assessment and screening, appropriate patient referrals, patient handling skills, positioning, bed mobility, transfers, gait training, selected cardiovascular and pulmonary topics, bandaging, thermotherapy and cryotherapy.

HPTH 622 Critical Inquiry I (3 QH)

Students are introduced to the elements of thought and the logic of critical thinking. Measurement theory and principles as applied to clinical practice and research are studied. The role of the researcher in professional practice is examined. Principles and application of scientific inquiry are emphasized.

HPTH 623 Practice Issues I (1 QH)

This course is an introduction and orientation of the clinical education process and philosophy within the entire curriculum. Requirements and expectations from clinical faculty are discussed. Professional behaviors and clinical decision-making are introduced. Evaluation of self, the clinical setting and clinical faculty is defined. Effective professional communication skills are practiced. Investigation, negotiating, planning and selection of Summer Quarter Module 5 clinical experience Clerkship I is initiated.

HPTX 529 Foundations for Interprofessional Practice (1 QH)

Foundations for Interprofessional Practice is an experiential learning opportunity for students to engage in interprofessional healthcare teams. This interactive course is intended to prepare the healthcare professional student to provide effective interprofessional patient-centered preventative health care through small/large group discussion and problem-solving activities. The curriculum of evidence-based lifestyle health care is focused on the promotion of health and prevention of disease. Through this content, students will learn the roles/responsibilities of other healthcare providers, how to work on teams and practice teamwork, and to communicate interprofessionally to optimally care for themselves and their patients.

HPTH 645 Clinical Physiology (6 QH)

This course will examine theory and application of physiological concepts as related to exercise, physical therapy and rehabilitation. Areas of study include physiology of the connective tissue, integumentary, nervous system, bioenergetics, energy substrate metabolism, endocrinology, cardiovascular physiology, respiratory physiology, chronic disease and exercise, and principles of exercise training. Emphasis will be on human performance and exercise physiology through the lifespan in health, common associated pathologies and lifestyle-related disease processes.

HPTH 646 Fundamentals of Physiology (4 QH)

The fundamentals of human physiology relating to basic cellular function, neurophysiology, the cardiovascular system, respiration, the gastrointestinal system, the renal system and embryology. (Physiological concepts and mechanisms will be organized according to five themes: homeostasis and control systems; biological energy use; structure/function relationships; communication; and pathophysiology.)

WINTER YEAR 1 (QM 3)

HPTH 630 Clinical Skills II (3 QH)

This course introduces basic physical therapy examination, evaluation and intervention skills. The student will begin to formulate goals and an intervention plan based on examination results. Clinical examination, evaluation and intervention principles including range of motion and muscle testing, neurologic assessment, orthopedic special tests, therapeutic exercise, manual therapy, soft tissue mobilization, documentation and posture will be studied. Specific examination, evaluation and intervention skills for the joints of the upper extremity will be presented.

HPTH 631 Clinical Skills III (3 QH)

This course continues with the examination, evaluation and intervention principles introduced in Clinical Skills II. Specific examination, evaluation and intervention skills for the joints of the lower extremity and spine will be presented. The student will also study electromagnetic radiation, lasers, hydrotherapy, ultrasound and pathological gait. This course emphasizes comprehensive physical therapy case management including integration of previous Clinical Skills courses.

HPTH 634 Orthopedic Clinical Medicine (3 QH)

This course is a study of musculoskeletal and orthopedic conditions commonly treated by physical therapists. Course material includes etiology, pathology, clinical manifestations and medical and surgical treatment. This medical course is presented in sequence with clinical evaluation and treatment planning coursework. Case studies will be used to integrate material from these courses.

HPTH 635 Kinesiology/Motor Control I (3 QH)

Principles of tissue mechanics, muscle mechanics and principles and theories of motor control and motor learning are presented, along with methodology for static and dynamic analysis of movement. This information is applied to the prevention and rehabilitation of neuromusculoskeletal disorders.

HPTH 636 Kinesiology/Motor Control II (4 QH)

Principles and concepts of kinesiology are applied to the study of normal human movement, osteokinematic and arthrokinematic joint motion, surface anatomy and muscular control of limb segment motion. These concepts are integrated with principles and theories of motor development, motor learning and motor control within the context of simple and complex motion analysis for joints of the extremities and spine.

SPRING YEAR 1 (QM 4)

HPTH 640 Clinical Skills IV (5 QH)

This course covers the physical therapy examination, evaluation and intervention of persons with neurological disorders. Emphasis is on the development of clinical decision-making and reasoning for the physical therapy management of persons with neurological disorders. Basic concepts and clinical application of electrotherapy are introduced.

HPTH 642 Critical Inquiry II (3 QH)

Descriptive and inferential statistics with relevance to physical therapy and clinical research will be discussed. Instruction includes the use of the computer for statistical analysis. The students will have the opportunity to use statistics for a small pilot study.

HPTH 643 Practice Issues II (2 QH)

This course continues the investigation of practice management and clinical education concepts. Students will reflect, self-assess and discuss objectives and outcomes for the clinical environment through credentialing, and explore clinical performance assessment methods. Additional professional practice topics include payment and documentation issues, discharge planning, direction and supervision of personnel, and advocacy. Students will complete the first of three Comprehensive Examinations.

HPTH 644 Neurological Clinical Medicine and Pharmacology (3 QH)

This course is a problem-based introduction to the medical and pharmacological treatment of neurological conditions commonly treated by physical therapists. This course is coordinated with Neuroscience and Clinical Skills to enable students to examine the structural and functional aspects of the neurological system in tandem with discussion of neurological disorders such as multiple sclerosis, Parkinson's syndrome and cerebral vascular accident. Topics include etiology, pathology, clinical manifestations, and prognosis, as well as medical, surgical and pharmacological treatments with application to physical therapy.

HPTX 579 Neuroscience (5 QH)

Neuroscience is a comprehensive series of lectures on the structure, neurophysiology, function and neurological disorders of the human nervous system. The lectures are complemented by PowerPoint presentations, laboratory demonstrations and clinical correlations.

HPTX 532 Leadership in the Healthcare Environment (2 QH)

This interprofessional course is designed to introduce the student to the concept of leadership within the healthcare environment. The course begins with an overview of leadership styles, and then continues with more specific topics such as building teams, evaluating others, managing finances, managing risk, marketing of health care, and healthcare policy.

SUMMER YEAR 2 (QM 5)

HPTH 716 Clerkship I (10 QH)

This course is the first full-time clinical education experience. The student will engage for a minimum of 35 hours per week at an approved clinical education site for a total of 10 weeks. The student will apply and attain professional knowledge, skills and behaviors in a structured clinical education environment under the supervision of one or more clinical instructors. The experience may take place within a variety of environments, provide a variety of learning opportunities, and include care of patients/clients across the lifespan and practice settings. While the emphasis is on patient-care skills, experiences may also include interprofessional experiences and non-patient care duties such as research, teaching, supervision and administration. Formal student clinical performance assessment will occur midway through and at the end of the experience.

FALL YEAR 2 (QM 6)

HPTH 720 Clinical Skills V (4 QH)

In this course, students integrate and apply various evaluation and treatment approaches for the patient who exhibits neuromusculoskeletal dysfunction. Students will assess evidence for evaluation and intervention approaches for this population of patients. Advanced exercise and manual therapy evaluation and intervention techniques are presented. Students also study electrotherapeutic principles and application for pain and iontophoresis.

HPTH 721 Clinical Skills VI (3 QH)

In this course, students integrate, apply and justify various examination and intervention approaches for the patient who exhibits neuromuscular dysfunction. Synthesis of knowledge is emphasized for refinement and modification of assessment and intervention of the complex patient through case studies.

HPTH 722 Critical Inquiry III (1 QH)

This course prepares students for dissemination and use of research. Students will have the opportunity to present their group research project in both written and platform form, and to critically evaluate case report research. In addition, students will learn to present research in a scientific poster. Students will use concepts of evidence-based practice to evaluate and use empirical evidence in clinical decision-making.

HPTH 724 Advanced Clinical Medicine and Pharmacology (5 QH)

Clinical medicine topics are integrated with neuromusculoskeletal treatment. The student learns to differentiate between those conditions appropriate for physical therapy intervention and those that require referral to other medical specialists. Pharmacological interventions begun in Quarter Module 4 are continued.

HPTH 725 Advanced Regional Anatomy (2 QH)

Students will examine in depth the anatomy of various joint regions of the human body. Anatomical views of pathology via plain film radiographs, MRI and CT scan will be analyzed. Discussions and integration of previous coursework with skeletal models, dissections and/or prosections will be used to improve understanding of normal and abnormal function.

HPTH 743 Practice Issues III (1 QH)

This course analyzes clinical experiences from Clerkship I. Clinical problems and solutions will be discussed. Ethical situations and dilemmas are addressed. Students will practice effective verbal and non-verbal communication skills. Investigation, design and selection of Winter Quarter Module 7 clinical experience Clerkship II are completed.

HPTH 747 Cardiovascular and Pulmonary Physical Therapy I (3 QH)

This is the first of a two-course series focusing on physical therapy management of cardiovascular and pulmonary health. This course covers the physical therapy examination, evaluation and intervention planning for individuals with cardiovascular and pulmonary disorders or dysfunction in different care environments throughout the continuum of care.

WINTER YEAR 2 (QM 7)

HPTH 718 Clerkship II (14 QH)

This intermediate full-time clinical education experience is the second of three Clerkship courses. The student will engage for a minimum of 35 hours per week at an approved clinical education site for a total of 12 weeks. The student will apply and attain professional knowledge, skills, and behaviors in a structured clinical education environment under the supervision of one or more clinical instructors. The experience may take place within a variety of environments, provide a variety of learning opportunities, and include care of patients/clients across the lifespan and practice settings. While the emphasis is on patient-care skills, experiences may also include interprofessional experiences and non-patient care duties such as research, teaching, supervision and administration. Formal student clinical performance assessment will occur midway through and at the end of the experience. Students will also complete a case report assignment as a component of this course.

SPRING YEAR 2 (QM 8)

HPTH 740 Clinical Skills VII (3 QH)

The student will further synthesize and analyze the rehabilitation of clients with complex disorders integrating divergent practice areas into clinical decision-making processes. Topics include geriatrics, pelvic health, lymphedema, oncology, abuse, preventive behaviors and aquatic therapy.

HPTH 741 Pediatric Physical Therapy (4 QH)

This course builds on the knowledge of typical and atypical development from birth through adolescence received in other courses to explore the effects of atypical development on movement acquisition. Physical therapy examination, evaluation and intervention planning and implementation are discussed in reference to infants, children and adolescents across different settings.

HPTH 742 Physical Therapy in the Critical Care Sector (2 QH)

This course presents a focus on patients requiring acute and critical care. It will cover examination, evaluation, interventions and outcome strategies for patients across the lifespan and in different critical care environments. Topics covered include: infection control, clinical emergencies, interprofessional team, patient care in the intensive care unit, laboratory values and advanced line/equipment management, transplantation, burn care, and grieving and loss.

HPTH 744 Prosthetics/Orthotics (3 QH)

The principles of prosthetic and orthotic client management will be discussed with emphasis on examination, evaluation, intervention and interprofessional collaboration and referral.

HPTH 748 Cardiovascular and Pulmonary Physical Therapy II (2 QH)

This is the second of a two-course series focusing on physical therapy management of cardiovascular and pulmonary health. This course covers physical therapy intervention strategies for individuals with primary or secondary cardiovascular and pulmonary disorder or dysfunction. Intervention strategies covered include mobilization, breathing control, ventilatory strategies, airway clearance, patient education and self-management, as well as exercise prescription focused on functional outcomes, strength and endurance components.

HPTH 749 Critical Inquiry IV (1 QH)

This course completes the Critical Inquiry sequence. Advanced measurement principles and topics in research and statistics will be introduced. Students will have the opportunity to present their group research as a poster presentation, participate in the peer review process and finalize a case report manuscript based on reviewer feedback.

HPTH 823 Practice Issues IV (3 QH)

In this, the fourth course in the Practice Issues series, students will explore advanced practice management and professional development concepts. Students will again conduct reflection and self-assessment activities related to clinical education through credentialing. Advanced topics include professional state and federal legislative priorities, business and management, billing and coding, and legal issues. Professional practice topics include sports specialization, dry needling and population health. Students will examine professional development principles related to residencies and fellowships, preparations for the NPTE, resume writing, interviewing skills and non-clinical roles for physical therapists. Students will complete the second of three Comprehensive Examinations.

SUMMER YEAR 3 (QM 9)

HPTH 848 Professional Practicum (12 QH)

The Professional Practicum is a 12-credit, independent study that the student completes in the final year of the Doctor of Physical Therapy program. The purpose of the practicum is for the student to pursue an individual interest within the areas of administration, critical inquiry, education or healthcare policy. Although the focus is in one area, the student must integrate objectives from the other areas. The student, with input from their advisor, designs the project, develops the objectives to guide the experience and is responsible for timely completion of the practicum project. At the end of the 12th quarter, each student will be responsible for an oral and written summary of their project.

FALL YEAR 3 (QM 10)

HPTH 835 Clerkship III (12 QH)

This terminal full-time clinical education experience occurs after the student has completed the didactic curriculum of the physical therapist professional education program. The student will engage for a minimum of 35 hours per week at an approved clinical education site for a total of 12 weeks. Students may return to the academic program for didactic instruction that does not require additional clinical education experiences. The student will apply and attain professional knowledge, skills and behaviors in a structured clinical education environment under the supervision of one or more clinical instructors. The experience may take place within a variety of environments, provide a variety of learning opportunities, and include care of patients/clients across the lifespan and practice settings. While the emphasis is on patient-care skills, experiences may also include interprofessional experiences and non-patient care duties such as research, teaching, supervision and administration. This course is designed so that students gain substantial, relevant clinical experience and skills, engage in contemporary practice and demonstrate competence before beginning independent practice. Formal student clinical performance assessment will occur midway through and at the end of the experience. The expected outcome is entry-level performance at the end of the experience.

HPTH 843 Practice Issues V (1 QH)

This culminating on-campus seminar includes guest presentations, student presentations and faculty panels. It occurs at the end of Fall Quarter, Year 3. Students will present their experiences and activities from HPTH 848 Professional Practicum. In addition, they will correlate and assemble all documents required for the faculty to approve their completion of degree requirements, and meet with representatives from the financial aid office to discuss necessary procedures and topics prior to graduation. Students will reflect upon past experiences in the program, and moving forward as a professional.

VII. CLINICAL EDUCATION GUIDELINES AND EXPECTATIONS OF STUDENTS

Every Doctor of Physical Therapy student from Rosalind Franklin University is expected to conduct themselves in a manner consistent with the APTA Core Values and the Code of Ethics for the Physical Therapist. Likewise, the same is expected of CIs and SCCEs. Students are also expected to abide by all policies, procedures and objectives as outlined in this manual, the Department of Physical Therapy Policies and Procedures Manual and clerkship course syllabi.

Students are expected to abide by all policies and procedures of the clinical education site at which they are placed. This includes abiding by HIPAA and other federal or local regulations in place at the site, as well as the physical therapist practice act of the site state or jurisdiction.

Patients have the right to refuse treatment by a physical therapy student, and students shall not be penalized as a result of patient refusal.

Students are expected to be able to learn and participate in clinical education in a safe and discrimination-free environment. Reasonable measures should be taken and resources provided to encourage each student's personal safety during clinical experiences. For example, this may include education during the student's orientation that is provided by a hospital's safety department. Likewise, students are expected to promote the safety and well-being of all patients, staff and family members they encounter during clinical experiences.

VIII. SKILLS WHICH STUDENTS ARE EXPECTED TO BE COMPETENT IN AND SAFE

Core faculty have determined the following skills as those in which students must demonstrate competent and safe performance prior to engaging in clinical education.

PRIOR TO CLERKSHIP I (QM 5)

Evaluation

- Written/verbal communication
- Professional behaviors
- Vital signs
- Infection control/prevention
- Basic orthopedic examination and evaluation skills of the UE, LE and spine, including range of motion and muscle testing, neurologic assessment, orthopedic special tests, documentation, posture and gait analysis
- Basic neurologic examination and evaluation skills, including functional, motor, sensory and cognitive components, and the use of outcome measures

Screening/Systems Review

- Basic systems screening, including screening for DVT

Intervention

- Patient education
- Basic patient handling skills for persons with orthopedic, neurologic and general medical conditions, including safety, guarding, gait belt use, positioning, bed mobility, transfers, gait training and stairs (with and without assistive devices) and ADLs
- Bandaging
- Physical agents including: thermotherapy, cryotherapy, hydrotherapy, ultrasound and mechanical traction
- Basic orthopedic intervention skills of the UE, LE and spine, including therapeutic exercise, manual therapy (including joint mobilization, grade I-IV, and soft tissue mobilization)
- Basic PT management of persons with neurological disorders, including stroke, balance dysfunction, multiple sclerosis, peripheral neuropathy, Parkinson's disease and spinal cord injury
- Electrotherapy (NMES, biofeedback)

PRIOR TO CLERKSHIP II (QM 7)

All previous skills

Evaluation

- Advanced evaluation and intervention of persons with neuromusculoskeletal conditions, including exercise, spinal and peripheral joint manipulation, functional testing and adverse neural tissue tension
- Evaluation and intervention planning for persons with cardiovascular and pulmonary disorders
- Interpretation of chest radiographs, pulmonary function and arterial blood gas tests
- Auscultation of heart and lungs
- Evaluation of dyspnea and endurance
- Screening for vascular disease
- Assessment of breathing pattern
- Analysis of ECG readings
- Ability to identify gross motor milestones achieved by a child and signs of atypical development
- Ability to identify signs and symptoms of a variety of pediatric orthopedic, neurologic and genetic disorders, and autism
- Gait analysis in patients across the lifespan including children

Screening/Systems Review

- In-depth, comprehensive systems screening
- Screening and evaluation of medications

Intervention

- Advanced intervention of persons with neuromusculoskeletal conditions, including exercise, spinal and peripheral joint manipulation, functional testing, and intervention for adverse neural tissue tension
- Electrotherapy (iontophoresis, IFC, TENS)
- Advanced management of persons with complex neurological dysfunction, including those with TBI, vestibular and gait disorders, as well as ALS, post-polio, Guillain-Barre, glioblastoma, Huntington's disease, myasthenia gravis, and multiple systems atrophy
- Gait assessment and intervention for patients with neurologic dysfunction
- Intervention planning for persons with cardiovascular and pulmonary disorders

PRIOR TO CLERKSHIP III (QM 10)

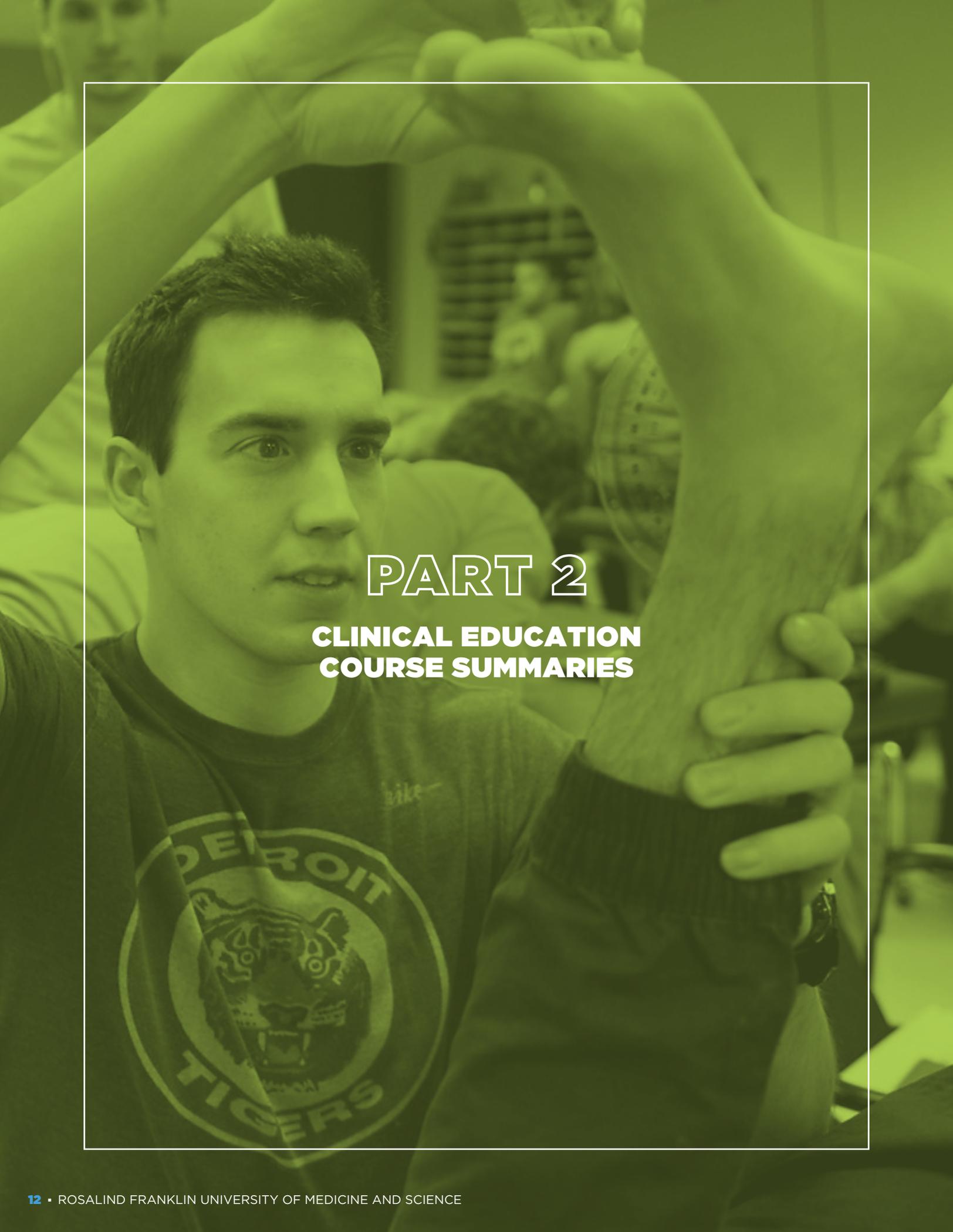
All previous skills

Evaluation

- Examination and evaluation for infants, children and adolescents with a variety of movement disorders and disabilities, to include the following:
 - Standardized assessments
 - MMT, functional strength tests, ROM, reflex integrity and tone assessment
 - Measures of joint integrity and skeletal alignment
 - Movement analysis
 - Positioning and handling
 - Gait and posture assessment in patients following amputation and/or prosthetic fitting
 - Evaluation of a prosthesis
 - Evaluation of a client with amputation
 - Analyze the biomechanics involved with orthotics
- Examination and evaluation of patients in the ICU, including:
 - Lab values
 - Line/equipment management
 - Transplants
 - Burns
 - Clinical emergencies
 - Wound assessment

Intervention

- Development of plan of care for persons with complex disorders, including those related to geriatrics, pelvic health, lymphedema and oncology
- Aquatic therapy
- Development of plan of care and intervention for infants, children and adolescents with a variety of movement disorders and disabilities, to include the following:
 - Strengthening activities and exercise
 - Gait training
 - High-level gross motor activities, including various forms of upright locomotion and static and dynamic balance training
 - Home exercise programs
 - Pain assessment and management
 - Prescription of adaptive equipment
 - Application and adjustment of temporary orthotic devices for persons across the lifespan
 - Selection of appropriate orthotic device for various pathological conditions and age groups (including pediatric clients)
 - Wound management
- Interventions related to cardiovascular and pulmonary conditions, including:
 - Breathing retraining
 - Controlled breathing techniques
 - Relaxation techniques
 - Airway clearance techniques
 - Suctioning of the artificial airway
 - Monitoring and progressing exercise
 - Pain considerations

A young man with dark hair, wearing a Detroit Tigers t-shirt, is looking intently at a hand being held by a medical professional. The background shows a clinical setting with other people and equipment. The entire image has a green tint.

PART 2

CLINICAL EDUCATION COURSE SUMMARIES

IX. CLERKSHIP I OVERVIEW

COURSE DESCRIPTION

This course is the first full-time clinical education experience. The student will engage for a minimum of 35 hours per week at an approved clinical education site for a total of 10 weeks. The student will apply and attain professional knowledge, skills and behaviors in a structured clinical education environment under the supervision of one or more clinical instructors. The experience may take place within a variety of environments, provide a variety of learning opportunities, and include care of patients/clients across the lifespan and practice settings. While the emphasis is on patient-care skills, experiences may also include interprofessional experiences and non-patient care duties such as research, teaching, supervision and administration. Formal student clinical performance assessment will occur midway through and at the end of the experience.

COURSE OBJECTIVES

1. Achieve Intermediate performance on all 18 performance criteria on the APTA Clinical Performance Instrument (PT CPI).
2. Evaluate personal performance, professional behaviors, the learning experience, and clinical instructor(s) using the PTSE, Patient Dx Log and Weekly Planning Forms.
3. Complete and deliver all required documents by completion of the clinical experience, unless otherwise specified in the syllabus.
4. Participate in establishing a safe and effective plan of care by collaborating with appropriate stakeholders, including members of the interprofessional team, patients/clients and family members/caregivers.
5. Consistently adhere to the RFU and the Department of Physical Therapy Professionalism Policy and procedure guidelines and expectations as listed in the course syllabus.

TIMING AND PLACEMENT

This course occurs during the first quarter (summer) of the second year of the program (QM 5), which is generally late May through early August.

COURSE EVALUATION

Evaluation is determined by the DCE or Course Coordinator using multiple methods. The grade of PASS or FAIL is determined by a synthesis of documentation in the PT Clinical Performance Instrument, timely completion of assignments and documentation, and feedback (site visit, email, conference, telecommunication and correspondence) from the student, academic faculty and clinical faculty, and/or other healthcare providers, including the clinical instructor (CI) and/or site coordinator of clinical education (SCCE).

X. CLERKSHIP II OVERVIEW

COURSE DESCRIPTION

This intermediate full-time clinical education experience is the second of three Clerkship courses. The student will engage for a minimum of 35 hours per week at an approved clinical education site for a total of 12 weeks. The student will apply and attain professional knowledge, skills and behaviors in a structured clinical education environment under the supervision of one or more clinical instructors. The experience may take place within a variety of environments, provide a variety of learning opportunities, and include care of patients/clients across the lifespan and practice settings. While the emphasis is on patient-care skills, experiences may also include interprofessional experiences and non-patient care duties such as research, teaching, supervision and administration. Formal student clinical performance assessment will occur midway through and at the end of the experience. Students will also complete a case report assignment as a component of this course.

COURSE OBJECTIVES

1. Achieve Advanced Intermediate performance on all 18 performance criteria on the APTA Clinical Performance Instrument (PT CPI).
2. Evaluate personal performance, professional behaviors, the learning experience and clinical instructor(s) using the PTSE, Patient Dx Log and Weekly Planning Forms.
3. Complete and deliver all required documents by completion of the clinical experience, unless otherwise specified in the syllabus.
4. Participate in establishing a safe and effective plan of care by collaborating with appropriate stakeholders, including members of the interprofessional team, patients/clients and family members/caregivers.
5. Consistently adhere to the RFU and the Department of Physical Therapy Professionalism Policy and procedure guidelines and expectations as listed in the course syllabus.

TIMING AND PLACEMENT

This course occurs during the third quarter (winter) of the second year of the program (QM 7), which is generally mid-November through early February.

COURSE EVALUATION

Evaluation is determined by the DCE or Course Coordinator using multiple methods. The grade of PASS or FAIL is determined by a synthesis of documentation in the PT Clinical Performance Instrument, timely completion of assignments and documentation, and feedback (site visit, email, conference, telecommunication and correspondence) from the student, academic faculty and clinical faculty, and/or other healthcare providers, including the clinical instructor (CI) and/or site coordinator of clinical education (SCCE).

XI. CLERKSHIP III OVERVIEW

COURSE DESCRIPTION

This terminal full-time clinical education experience occurs after the student has completed the didactic curriculum of the physical therapist professional education program. The student will engage for a minimum of 35 hours per week at an approved clinical education site for a total of 12 weeks. Students may return to the academic program for didactic instruction that does not require additional clinical education experiences. The student will apply and attain professional knowledge, skills and behaviors in a structured clinical education environment under the supervision of one or more clinical instructors. The experience may take place within a variety of environments, provide a variety of learning opportunities, and include care of patients/clients across the lifespan and practice settings. While the emphasis is on patient-care skills, experiences may also include interprofessional experiences and non-patient care duties such as research, teaching, supervision and administration. This course is designed so that students gain substantial, relevant clinical experience and skills, engage in contemporary practice and demonstrate competence before beginning independent practice. Formal student clinical performance assessment will occur midway through and at the end of the experience. The expected outcome is entry-level performance at the end of the experience.

COURSE OBJECTIVES

1. Achieve Entry-Level performance on all 18 performance criteria on the APTA Clinical Performance Instrument (PT CPI).
2. Evaluate personal performance, professional behaviors, the learning experience and clinical instructor(s) using the PTSE, Patient Dx Log and Weekly Planning Forms.
3. Complete and deliver all required documents by completion of the clinical experience, unless otherwise specified in the syllabus.
4. Participate in establishing a safe and effective plan of care by collaborating with appropriate stakeholders, including members of the interprofessional team, patients/clients and family members/caregivers.
5. Consistently adhere to the RFU and the Department of Physical Therapy Professionalism Policy and procedure guidelines and expectations as listed in the course syllabus.

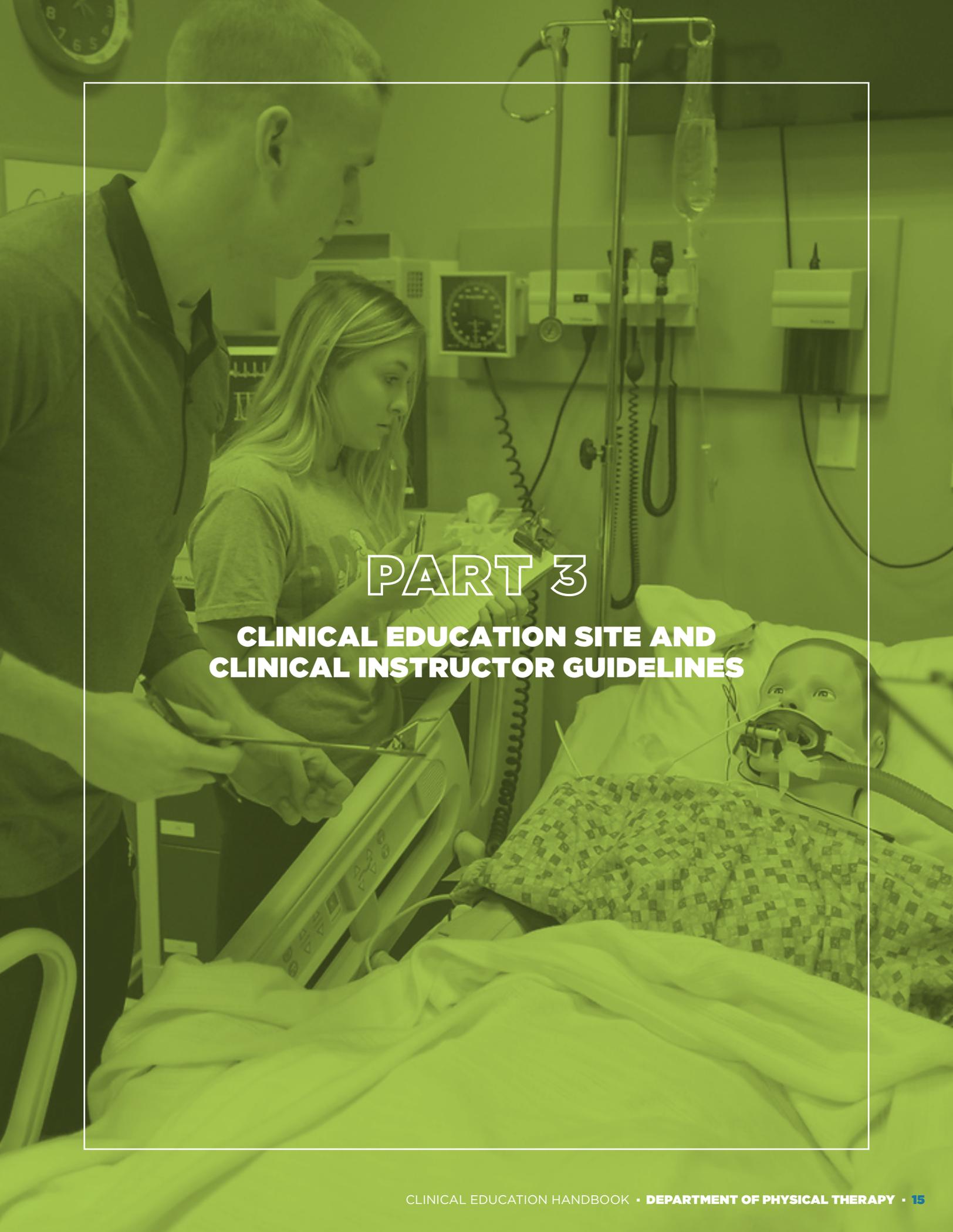
TIMING AND PLACEMENT

This course occurs during the second quarter (fall) of the third year of the program (QM 10), which is generally mid-August through early November.

COURSE EVALUATION

Evaluation is determined by the DCE or Course Coordinator using multiple methods. The grade of PASS or FAIL is determined by a synthesis of documentation in the PT Clinical Performance Instrument, timely completion of assignments and documentation, and feedback (site visit, email, conference, telecommunication and correspondence) from the student, academic faculty and clinical faculty, and/or other healthcare providers, including the clinical instructor (CI) and/or site coordinator of clinical education (SCCE).





PART 3

CLINICAL EDUCATION SITE AND CLINICAL INSTRUCTOR GUIDELINES

XII. CLINICAL SITE EXPECTATIONS AND GUIDELINES

The Physical Therapy Program promotes excellence of each clinical education site with which we partner, and supports those aspects of excellence as outlined by the APTA HOD (HOD G06-19-62-59):

1. Clinical sites engage in collaborative partnerships with academic programs that provide benefit to all stakeholders.
2. The philosophies of the clinical education site and of the provider of physical therapist services and clinical education are compatible with that of the academic institution.
3. Clinical education experiences for students are planned and resourced to meet specific objectives of the academic program, the provider of physical therapist services and the individual student.
4. Physical therapy personnel provide services in a legal and ethical manner.
5. The clinical education site is committed to the principle of equal opportunity and affirmative action as required by federal legislation.
6. The clinical education site demonstrates administrative support of physical therapy clinical education.
7. The clinical education site has a variety of learning experiences available to students.
8. The clinical education site provides an active, stimulating environment appropriate to the learning needs of students.
9. The clinical education site identifies selected support services available to students.
10. The clinical education site defines the responsibilities of physical therapy personnel.
11. The clinical education site has requisite physical therapy personnel to provide an educational program for students.
12. The clinical education site selects a site coordinator of clinical education (SCCE) based on specific criteria.
13. The clinical education site selects physical therapy CIs based on specific criteria as listed in Section XVI of this manual.
14. The clinical education site provides students access to the special expertise of its personnel.
15. The clinical education site encourages clinical educator (CI and SCCE) training and development.
16. The clinical education site supports active career development for its personnel.
17. The clinical education site has an active and viable process of internal evaluation of its affairs, and is receptive to procedures of review and audit approved by appropriate, relevant external agencies and consumers.

XIII. STUDENT ONBOARDING AND ORIENTATION

The SCCE should receive the name of the student 4-6 months before the start date of the academic program.

The academic program or student should reach out to the clinical site 8-10 weeks prior to the start date to provide program and student information.

The site should provide the following information to students prior to their arrival:

- General information about the site including a map of the site with directions (if needed)
- Safety information, including any site-specific safety resources and personal safety guidelines
- General information about the staff and CIs
- Most common patient diagnoses that the student will be exposed to during the clinical experience
- Name and contact information of the clinical instructor(s) the student will be paired with during the clinical experience
- Hours/schedule the student will be expected to follow at the clinical site
- Where and what time to arrive on day one of the clinical experience
- Required dress code
- Site parking
- Food storage/cafeteria at or near the site
- Phone number/email address of contact person for any questions

XIII. STUDENT SUPERVISION

The Physical Therapy Program endorses the positions of the APTA HOD (P06-19-10-06) regarding the provision of services by a physical therapy student:

- Experiential learning focused on development and application of patient- and client-centered skills and behaviors is a crucial component of the education of physical therapists and physical therapist assistants. Clinical instructors and preceptors provide instruction, guidance and supervision that comply with association policy, positions, guidelines and ethical standards, and with jurisdictional laws governing supervision.
- Student physical therapists, when participating as part of a physical therapist professional education curriculum, are qualified to provide services only under the direct supervision of the physical therapist who is responsible for patient and client management.
- Direct supervision means the physical therapist, or the physical therapist assistant when supervising a student physical therapist assistant, is physically present and immediately available for supervision. In both cases, the physical therapist or physical therapist assistant will have direct contact with the patient or client on each date of service. Telecommunication does not meet the requirement of direct supervision.

XV. LEGAL AND ETHICAL EXPECTATIONS FOR CLINICAL EDUCATION SITES

The Physical Therapy Program endorses the positions of the APTA HOD (P06-18-18-28) regarding responsibilities of students, CIs and SCCEs:

- The American Physical Therapy Association (APTA) expects physical therapists, physical therapist assistants and academic programs to provide clinical education that complies with legal and ethical standards for patient and client management; is consistent with the positions, standards, guidelines, policies and procedures of APTA; and promotes professional development. The public and the profession are best served when students communicate information to their academic program regarding clinical education experiences that appear to be in conflict with these positions, standards, guidelines, policies and procedures.

XVI. CLINICAL INSTRUCTOR QUALIFICATIONS AND GUIDELINES

As defined by the Academy of Physical Therapy Education, a Clinical Instructor (CI) is the PT/PTA responsible for the PT/PTA student and for directly instructing, guiding, supervising and formally assessing the student during the clinical education experience. When engaged in full-time clinical education designated to meet the minimum time frame set forth by CAPTE, the CI must be a licensed PT with a minimum of one year of full-time (or equivalent) post-licensure clinical experience.

Clinical instructors may be assessed by students utilizing the Physical Therapy Student Evaluation (PTSE) Form and/or by Program faculty during a site visit as outlined in Section XXII.

In addition, the Physical Therapy Program endorses guidelines for CIs as outlined by the APTA HOD (HOD G06-19-62-59). These guidelines include:

1. The CI is encouraged to be a member of APTA and is active in professional activities.
2. The CI demonstrates clinical competence and legal and ethical behavior that meet or exceed the expectations of members of the physical therapy profession.
3. The CI demonstrates effective communication skills.
4. The CI demonstrates effective behavior, conduct and skill in interpersonal relationships.
5. The CI demonstrates effective instructional skills.
6. The CI demonstrates effective supervisory skills.
7. The CI demonstrates effective performance evaluation skills.
8. The CI seeks opportunities to engage in continuing education related to the role of an educator.

XVII. PHYSICAL THERAPIST CLINICAL PERFORMANCE INSTRUMENT (PT CPI)

The PT CPI is a valid, reliable and multidimensional clinical performance assessment tool utilized to determine if, and how well, a student meets established objectives during clinical education experiences. The Physical Therapy Program utilizes the CPI for student assessment for all clerkship courses, and requires that CIs and students are competent in usage of the instrument. The DCE can assist CIs and SCCEs with any technical or interpretation issues with the CPI. Please note that the CPI is copyrighted by APTA. Below are some helpful links related to the CPI:

- CPI website: cpi2.amsapps.com
- CPI Help Center: help.liaisonedu.com/Clinical_Assessment_Suite_Help_Center/CPI
- CPI support email address: ptcpisupport@liaisonedu.com
- New User Quick Start Guide: help.liaisonedu.com/@api/deki/files/4608/CPI_Quick_Start_Guide_ScnShots_20190120.pdf?revision=1
- Self-Guided Training Course: help.liaisonedu.com/@api/deki/files/3324/PT_CPI_Training_2018.10.25.pdf?revision=2
- New User Training Verification Guide: help.liaisonedu.com/@api/deki/files/7792/New_User_Training_Verification_Guide.pdf?revision=1

XVIII. UNIFORM MAILING DATE

The Physical Therapy Program endorses the uniform mailing date of March 1 as originally implemented by the Clinical Education Special Interest Group (CESIG) of the Academy of Physical Therapy Education of APTA in 1999. The program follows this guidance by sending an annual request for clinical education slots on March 1 of each year. If your clinical site has not received an annual slot request from us, please contact the DCE.

XIX. SAMPLE LEARNING OBJECTIVES

Students are expected to self-assess and set goals prior to and during clinical education experiences, for example, when completing the weekly planning form. CIs are expected to support and guide students through this process as needed. The DCE and SCCE may assist with the development of specific and measurable learning objectives for students.

Learning objectives fit into one of three domains (categories):

1. Cognitive, which covers knowledge of material
2. Psychomotor, which addresses performance of a skill
3. Affective, which includes (but is not limited to) professional behaviors and empathy

Cognitive Domain:

- Develop short- and long-term goals
- Educate the patient/client in examination, evaluation, intervention and plan of care
- Participate in re-examination and plan of care modification

Psychomotor Domain:

- Demonstrate ability to collect data from patient/client interview
- Collect objective data
- Accurately document patient/client encounters in a clear, concise manner
- Apply manual therapy techniques
- Apply therapeutic modalities
- Demonstrate efficient time management skills
- Educate patient/client and their caregivers in home exercise programs

Affective Domain:

- Demonstrate ability to build patient/client rapport
- Effectively communicate with patient/client, CI and other healthcare professionals
- Interact with patients/clients in a culturally sensitive manner
- Demonstrate appropriate verbal and non-verbal communication techniques





PART 4

SELECTED DEPARTMENT POLICIES AND PROCEDURES

XX. STUDENT CREDENTIALING (DETERMINATION OF READINESS FOR CLINICAL EDUCATION)

PURPOSE: To inform students and faculty of the process for determining student readiness to progress to clerkship courses via credentialing.

POLICY: Students must be credentialed by the faculty prior to progressing to clerkship courses.

PROCEDURE:

1. Each student will complete and submit a Credentialing application in a timely manner per instructions given by the DCE. This is part of the course requirements for Practice Issues II and IV.
2. The application will include, but will not be limited to, information related to the following:
 - Cumulative GPA
 - Current or past remediations
 - Exam failures
 - Occurrences of unprofessional behavior
 - Professional Behaviors Instrument self-assessment
 - Self-assessment of areas to strengthen, with long-term goals and specific learning experiences
3. After submitting the Credentialing application, each student will meet with their academic advisor to review the contents of the application.
4. After meeting with each student, the academic advisor will make one of three recommendations:
 - Credentialed: No major concerns related to academic performance, practical exam performance, professional behaviors, etc.
 - *No further action is required.*
 - Deferred Credentialed: Major concerns may include, but are not limited to, professional behaviors, incomplete coursework, multiple exam failures (written and practical) or poor performance on previous clerkships.
 - *Student will be required to complete additional activities to the satisfaction of the faculty*
 - *Start of clerkship courses may be delayed*
 - Not Credentialed: Failure to complete the required preparation to the satisfaction of the faculty (in cases of Deferred Credentialed status) or egregious violations of university, college or department policies/procedures.
 - *This recommendation may result in the student being subject to dismissal from the program.*
5. Final determination of Credentialed status is at the discretion of the Student Evaluation and Progression Committee (SEPC) and may be changed at any time.

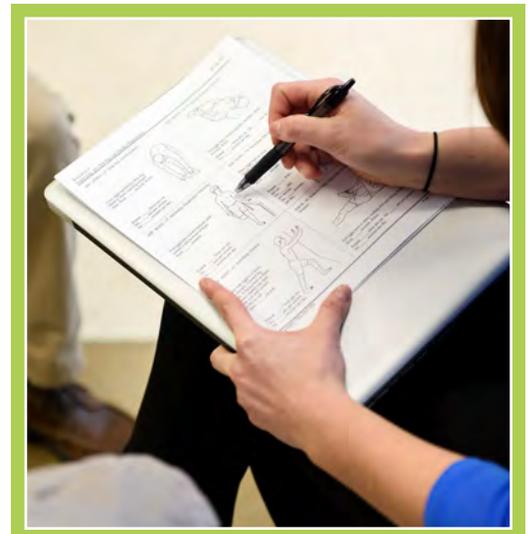
XXI. GRADING OF CLINICAL EDUCATION COURSES

PURPOSE: To outline how clerkship course grades are determined.

POLICY: Clerkship courses are graded as Pass, Fail or Incomplete, per university policy. The DCE, as the course director/coordinator, assigns final clerkship grades. Specific clerkship course expectations will be outlined in the course syllabus.

PROCEDURE:

1. Students are assessed during clerkship courses by their Clinical Instructor (CI) utilizing various sources of information, including, among others, personal accounts of other physical therapists, physical therapist assistants, other professionals, patients/clients and students. Methods of data collection may include direct observation, videotapes, documentation review, role-playing, interviews, standardized practical activities, portfolios, journals, computer-generated tests, and patient and outcome surveys.
2. CIs shall use the clinical performance evaluation tool, Physical Therapist Clinical Performance Instrument (PT CPI).
3. The CI(s) will assess the student's performance and complete the PT CPI at midterm and final evaluation periods.
4. Clerkship course grades are determined primarily based on the PT CPI ratings as documented by the CI at the final evaluation period.
5. When determining clerkship course grades, additional consideration may be given to the following:
 - Performance on CPI "red flag items"
 - Progression of performance from midterm to final evaluations
 - Level of experience within the didactic and clinical components of the curriculum
 - Whether or not the "significant concerns" box was checked
 - Congruence between the CI's narrative midterm and final comments and the ratings provided
6. Grading may also be influenced by adherence to the following:
 - University, college and department policies and procedures
 - The Code of Ethics for the Physical Therapist
 - A negotiated learning contract



XXII. SITE VISITS

PURPOSE: To describe the structure of site visits for clerkship courses.

POLICY: Faculty may make contact with each student and CI during clerkship courses, either in person to the clinical education site, via email, video conference or telephone.

PROCEDURE:

1. The DCE determines the site visit priorities and solicits faculty members to conduct the visits.
2. The site visits may be conducted by the DCE, an academic faculty member from the department or a designated clinical faculty member.
3. During a visit, the faculty member may discuss the following:
 - Student performance and progression
 - Strategies for student and CI improvement
 - The clinical education environment
 - Additional needs of the student, CI or site coordinator of clinical education (SCCE)
4. The site visits will typically occur during the midway point of a clerkship course, but may also occur on an as-needed basis and more than once, if necessary.

XXIII. CONFLICT OF INTEREST

PURPOSE: To avoid potential situations of conflict of interest at clinical education sites.

POLICY: Any clerkship selection where there is a potential conflict of interest involving a student must be approved by the DCE.

PROCEDURE:

1. Students must notify the DCE if there is a potential conflict of interest at a clinical education site prior to commencement of the clerkship.
2. A potential conflict of interest may include, but is not limited to, clinical education sites where students have:
 - Previously observed or volunteered for a prolonged period of time
 - Worked or are currently employed
 - Accepted scholarships or other loan repayment arrangements
 - Contracts for future employment in place
 - Family members and/or friends who are employed at the site

XXIV. MISSED CLINICAL HOURS

PURPOSE: To provide guidance in cases of missed hours in the clinic during a clerkship course.

POLICY: Students must complete the required number of hours and weeks during each clerkship course as stated in the course syllabus. Clinical schedules will be at the discretion of the SCCE, CI and/or DCE.

PROCEDURE:

1. Students must notify the DCE, CI and SCCE in cases of unplanned absences from the clinical education site.
2. If more than two consecutive days are missed due to illness, students must seek medical attention and provide appropriate documentation.
3. Missed time may be made up in the form of a clerkship extension after the originally scheduled end date and/or with additional projects, subject to approval of the SCCE, CI and DCE.
4. Personal requests for time away may be granted at the discretion of the DCE, SCCE and CI.
5. Students may be required to be in attendance at the clinical education site during weekends and/or university holidays.

XXV. PROFESSIONAL AND ETHICAL BEHAVIOR

PURPOSE: To outline what constitutes professional and ethical behavior during clerkship courses.

POLICY: Students will act professionally and ethically at all times during clerkship courses.

PROCEDURE: Professional behaviors include, but are not limited to:

- Demonstrating initiative
- Being punctual and dependable
- Wearing attire consistent with expectations of the practice setting
- Demonstrating integrity in all interactions
- Exhibiting caring, compassion and empathy in providing services to patients
- Maintaining productive working relationships with patients, families, CI and others
- Demonstrating behaviors that contribute to a positive work environment
- Accepting feedback without defensiveness
- Managing conflict in constructive ways
- Maintaining patient privacy and modesty
- Valuing the dignity of patients as individuals
- Seeking feedback from CI related to clinical performance
- Providing effective feedback to CI related to clinical teaching/mentoring
- Identifying oneself as a student physical therapist

XXVI. STUDENT COMPLIANCE

PURPOSE: To outline possible student compliance requirements prior to commencing a clerkship course.

POLICY: Students must ensure compliance with all university and clinical education site requirements and policies prior to commencing a clerkship course, and maintain compliance during a clerkship course.

PROCEDURE:

1. Clinical education site requirements may include, but are not limited to, CPR certification, drug screening, background check, immunizations, examinations or interviews.
2. Clinical education site policies may include, but are not limited to, appearance/dress codes, hours, assignments, specific patient care procedures and acceptable modes of communication.
3. It is the student's responsibility to research each site's requirements and policies, which can typically be done by contacting the SCCE and/or the DCE.
4. Students may be asked by the SCCE and/or DCE, at any time, to produce evidence of having met the compliance requirements.
5. Clinical education sites may refuse placement as outlined in that site's specific affiliation agreement.
6. Lack of compliance may result in delayed commencement of a clerkship course, or removal from the site and a grade of Fail







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