



ALAMO COLLEGES DISTRICT
St. Philip's College

Physical Therapist Assistant Program

Clinical Instructor's Handbook 2021-2022

Division of Health Sciences
1801 Martin Luther King Drive
San Antonio, TX 78203

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Students and employees are required to comply with this policy. Retaliation in any form for having brought a complaint or report of discrimination or harassment based on any protected criteria, including sex and gender, is expressly prohibited. Inquiries or complaints concerning these matters should be brought to the attention of: Linda Boyer-Owens, Associate Vice Chancellor of Human Resources and Organizational Development, Title IX Coordinator, (210) 485-0200. Address: Human Resources Department, 201 W. Sheridan, Bldg. A, San Antonio, Texas 78204.

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WELCOME

Thank you for your interest in the clinical education of our students—your future physical therapist assistants (PTA). You are instrumental in the clinical education of our students. You will guide them in using the academic information they have learned in the classroom and applying it in the “real world” in your clinic.

The purpose of this handbook is to provide the center coordinator of clinical education and the clinical instructor with the information and resources needed to prepare for the clinical experience and to assess the facility’s clinical education program.

St. Philip’s College PTA students complete three clinical courses during the program. The first clinical rotation begins in the summer between the first and second year of the program and comprises 192 hours of clinical experience over five weeks. The final two rotations are in the spring of the second year after all academic instruction is complete. The second rotation consists of 240 hours over six weeks, and the final rotation is 256 hours over seven weeks. The students will encounter a variety of experiences in various physical therapy settings. Students are required to have one inpatient and one outpatient rotation. The third rotation setting is flexible.

All St. Philip’s College Allied Health students must complete required immunizations, a criminal background check, and a drug screening before clinical rotations. They must also have earned certification in basic life support for the healthcare provider and have completed coursework in blood-borne pathogens, tuberculosis, and the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Orientation materials for specific clinicals will be provided; however, if your organization requires additional or specialized training, please contact Shelley Kozel, Academic Coordinator of Clinical Education (ACCE), using the information below.

Please let us know if we can assist you in any way. If you would like a clinical instructor or *PTA Manual for the Assessment of Clinical Skills* (PTA MACS) information session, or if you have any other questions, please contact the ACCE.

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GENERAL INFORMATION

Program Philosophy

The Physical Therapist Assistant (PTA) Program supports the goals and mission of the Allied Health Department, St. Philip's College, and the Alamo Colleges District. Our purpose is to provide our students with a high-quality, attainable education, a curriculum designed to keep pace with the ever-changing healthcare field, and an atmosphere that welcomes diversity of cultures and ideas.

Students are encouraged to develop the skill of self-directed learning as well as an understanding of their role as part of a healthcare team. Faculty shall promote the practice of physical therapy by teaching skills consistent with the profession, by modeling and teaching compassionate care and responsible use of healthcare resources, and by encouraging the highest degree of integrity and ethical standards.

Program Mission and Goals

The mission of the PTA Program is as follows:

Mission of the PTA Program

The PTA Program serves the community by preparing our students for a career in contemporary physical therapy practice while encouraging personal growth, critical thinking, ethical behavior, and lifelong learning.

The goals of the PTA Program are as follows:

Goals of the PTA Program

1. The program will equip each student with appropriate clinical skills necessary to operate as an entry-level practitioner capable of critical thinking and responding to changes in healthcare delivery and increasing technological advances.

Outcome measure: The clinical instructor will certify the student performs at "entry-level" in the *Physical Therapist Assistant Manual of Assessment of Clinical Skills* (PTA MACS) in at least 57 of the 75 skills in sections I – III by the end of the final clinical affiliation.

2. The program will prepare the graduate for securing state licensure to practice as a physical therapist assistant in an ethical and professional manner under the supervision of a physical therapist.

Outcome measure: At least 93 percent of students will pass the Federation of State Boards of Physical Therapy licensure examination within one year of graduation.

3. The program will prepare the graduates for employment in various settings to meet the needs of the physical therapy community.

Outcome measure: Students will affirm employment through responses on the graduate survey given six months after graduation.

4. The program will require each student to serve in his/her community to promote development of lifelong social, professional, and leadership skills.
Outcome measure: Every student will complete three service-learning/civic-engagement activities within the first four semesters.
5. The program will encourage each student to engage in continued professional growth to promote development of a lifelong commitment to maintaining contemporary practice.
Outcome measure: At least 90 percent of students will attend a local, district, or national conference or seminar/workshop given by professionals in the field.
6. The program will provide professional career-development skills in preparation for job placement.
Outcome measure: Each student will complete a portfolio assignment during the program and must score a minimum of 77 points out of a possible 100 (77 percent).
7. The faculty will promote professional collaboration with other healthcare professionals.
Outcome measure: Faculty will coordinate/execute one collaborative event with another healthcare program(s) once per academic year.
8. The faculty will promote development of graduates with high-quality instruction.
Outcome measure: Each faculty member will garner ratings of at least 3 out of 4 on course surveys/evaluations.
9. The faculty will maintain the expertise necessary to teach in their assigned content areas.
Outcome measure: Each faculty member will attend at least one continuing competency/continuing education course in the content he or she teaches every two years.

College Mission, Vision, Values, and Strategic Objectives

The mission, vision, values, and strategic objectives of St. Philip's College are as follows:

Mission of St. Philip's College

St. Philip's College, founded in 1898, is a comprehensive public community college whose mission is to empower our diverse student population through personal educational growth, ethical decision-making, career readiness, and community leadership. As a Historically Black College and Hispanic Serving Institution, St. Philip's College is a vital facet of the community, responding to the needs of a population rich in ethnic, cultural, and socio-economic diversity. St. Philip's College creates an environment fostering excellence in academic and technical achievement while expanding its commitment to opportunity and access.

Vision of St. Philip's College

St. Philip's College will be the best in the nation in Student Success and Performance Excellence.

Values of St. Philip's College

St. Philip's College is committed to building individual and collective character through the following set of shared values in order to fulfill our vision and mission:

Students First – Above all, act in the best interest of the students.

Respect for All – We value courtesy, responsiveness, and appreciation for diversity by treating all people with dignity and kindness.

Community Engaged – We actively work in partnership with our stakeholders by responding to the needs of the community.

Collaboration – We work together to achieve student success.

Can-Do Spirit – We inspire resilience and persistence with a willingness to go above and beyond expectations.

Data Informed – We use quantitative and qualitative data to inform decision-making and achieve student success.

Strategic Objectives of St. Philip's College

Student Success: Provide academic and student support and align labor market-based pathways to achieve student completion.

Leadership: Provide opportunities for St. Philip's College students and employees to develop as leaders.

Performance Excellence: Continuously improve our employees, financial, technological, physical, and other capacities to enhance efficiency and effectiveness.

Reaffirmation: Successful submission of the decennial Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) Response Reports and Quality Enhancement Plan (QEP) Proposal.

Non-Discrimination

The Alamo Colleges District, St. Philip's College, and the Physical Therapist Assistant Program do not discriminate on the basis of race, color, sex, pregnancy, religion, creed, national origin (including ancestry), citizenship status, physical or mental disability, age, marital status, sexual orientation, gender, transgender status, gender identity, gender expression, veteran or military status (including special disabled veteran, Vietnam-era veteran, or recently separated veteran), predisposing genetic characteristics, domestic violence victim status, any other protected category under applicable local, state or federal law, or persons who have opposed discrimination or participated in any complaint process on campus or before a government agency with respect to access, employment programs, or services. Inquiries or complaints concerning these matters should be reported as instructed on the front cover of this document.

Accreditation

St. Philip's College is regionally accredited by the Southern Association of Colleges and Schools Commission on Accreditation (SACSCOC).

St. Philip's College is fully accredited by SACSCOC to award degrees in Associate of Arts, Associate of Science, Associate of Applied Science, and Certificates of Completion. The latest accreditation was awarded in 2017.

The Physical Therapist Assistant Program at St. Philip's College is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE).

CAPTE

Phone: (703) 706-3245

E-mail: accreditation@apta.org

Website: <http://www.capteonline.org>

Address: 1111 North Fairfax Street
Alexandria, Virginia 22314.

This program was first granted accreditation status in 1973 and was most recently reaccredited in 2019.

PHYSICAL THERAPIST ASSISTANT PROGRAM CURRICULUM

Year 1

Semester I – Fall

PTHA 1301	The Profession of Physical Therapy
PTHA 1321	Pathophysiology for the PTA
PTHA 1405	Basic Patient Care Skills
BIOL 2401	Human Anatomy & Physiology I
MATH 1314	College Algebra (or higher pending departmental approval)

Semester II – Spring

PTHA 1413	Functional Anatomy
PTHA 2409	Therapeutic Exercise
PTHA 1431	Physical Agents
BIOL 2402	Human Anatomy & Physiology II

Semester III – Summer

PTHA 2201	Essentials of Data Collection
PTHA 1360	Clinical I – Physical Therapist Assistant
ENGL 1301	Composition I (or higher pending departmental approval)

Year 2

Semester IV – Fall

PTHA 2435	Rehabilitation Techniques
PTHA 2431	Management of Neurological Disorders
One three-hour course of Language, Philosophy & Culture (40) core or Creative Arts (50) core	

Semester V - Spring

PTHA 2217	Issues in Health Care
PTHA 2460	Clinical II – Physical Therapist Assistant
PTHA 2461	Clinical III – Physical Therapist Assistant
PSYC 2301	General Psychology

COURSE DESCRIPTIONS

BIOL 2401 – Human Anatomy and Physiology I

Anatomy and Physiology I is the first part of a two-course sequence. It is a study of the structure and function of the human body including cells, tissues and organs of the following systems: integumentary, skeletal, muscular, nervous and special senses. Emphasis is on interrelationships among systems and regulation of physiological functions involved in maintaining homeostasis. This course fulfills the Life and Physical Sciences foundational component area of the core and addresses the following required objectives: Critical Thinking, Communication, Empirical Quantitative Skills, and Teamwork.

BIOL 2402 – Human Anatomy and Physiology II

Anatomy and Physiology II is the second part of a two-course sequence. It is a study of the structure and function of the human body including the following systems: endocrine, cardiovascular, immune, lymphatic, respiratory, digestive (including nutrition), urinary (including fluid and electrolyte balance), and reproductive (including human development and genetics). Emphasis is on interrelationships among systems and regulation of physiological functions involved in maintaining homeostasis. This course fulfills the Life and Physical Sciences foundational component area of the core and addresses the following required objectives: Critical Thinking, Communication, Empirical Quantitative Skills, and Teamwork.

ENGL 1301 – Composition I

Intensive study of and practice in writing processes, from invention and researching to drafting, revising, and editing, both individually and collaboratively. Emphasis on effective rhetorical choices, including audience, purpose, arrangement, and style. Focus on writing the academic essay as a vehicle for learning, communicating, and critical analysis. This course fulfills the Communication foundational component area of the core and addresses the following required objectives: Critical Thinking, Communication, Teamwork, and Personal Responsibility.

MATH 1314 – College Algebra

In-depth study and applications of polynomial, rational, radical, exponential and logarithmic functions, and systems of equations using matrices. Additional topics such as sequences, series, probability, and conics may be included. This course fulfills the Mathematics foundational component area of the core and addresses the following required objectives: Critical Thinking, Communication, and Empirical Quantitative Skills.

PSYC 2301 – General Psychology

Survey of major topics in psychology. Introduces the study of behavior and the factors that determine and affect behavior and mental processes. This course fulfills the Social and Behavioral Sciences foundational component area of the core and addresses the following required objectives: Critical Thinking, Communication, Empirical Quantitative Skills, and Social Responsibility. (Students may also take **Introduction to Psychology**)

The student must also select one course from the [Language, Philosophy & Culture \(40\) Core](#) or the [Creative Arts \(50\) Core](#).

PTHA 1301 – The Profession of Physical Therapy

Introduction to the profession of physical therapy and the role of the physical therapist assistant (PTA).

PTHA 1321 – Pathophysiology for the PTA

Study of the pathophysiology of diseases/conditions commonly encountered in physical therapy.

PTHA 1405 – Basic Patient Care Skills

The application of basic patient handling, functional skills, communication, and selected data collection techniques.

PTHA 1413 – Functional Anatomy

The relationship of the musculoskeletal and neuromuscular systems to normal and abnormal movement.

PTHA 1431 – Physical Agents

Biophysical principles, physiological effects, intervention efficacy and application of physical agents.

PTHA 2409 – Therapeutic Exercise

Concepts, principles, and application of techniques related to therapeutic exercise and functional training.

PTHA 2201 – Essentials of Data Collection

Data collection techniques used to prepare the physical therapist assistant to assist in patient/client management.

PTHA 1360 – Clinical I - Physical Therapist Assistant

A health-related, work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional.

PTHA 2431 – Management of Neurological Disorders

Advanced course integrating previously learned and new skills/techniques into the comprehensive rehabilitation of selected neurological disorders.

PTHA 2435 – Rehabilitation Techniques

Advanced course integrating previously learned and new skills/techniques into the comprehensive rehabilitation of selected musculoskeletal, neuromuscular, cardiopulmonary, and integumentary disorders.

PTHA 2217 – Issues in Health Care

Organizational patterns, administrative principles, legal and ethical issues in physical therapy, and preparation for licensure and employment.

PTHA 2460 – Clinical II - Physical Therapist Assistant

A health-related, work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional.

PTHA 2461 – Clinical III - Physical Therapist Assistant

A health-related, work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional.

COURSE SEQUENCING

Throughout the curriculum, each Physical Therapist Assistant Program course **must be taken in sequence**. Therefore, these courses can only be taken during the semester in which they are officially listed.

VALUES-BASED BEHAVIORS IN PHYSICAL THERAPY: CORE VALUES

- **Altruism** is the primary regard for or devotion to the interest of patients/clients, assuming responsibility of placing the needs of the patient/client ahead of the physical therapist assistant's self-interests.
- **Compassion and Caring:**
 - Compassion is the desire to identify with or sense something of another's experience; a precursor of caring.
 - Caring is the concern, empathy, and consideration for the needs and values of others.
- **Continuing Competence** is the lifelong process of maintaining and documenting competence through ongoing self-assessment, development and implementation of a personal learning plan, and subsequent reassessment.
- **Duty** is the commitment to meeting one's obligations to provide effective physical therapy services to individual patients/clients, to serve the profession, and to positively influence the health of society.
- **Integrity** is steadfast adherence to high ethical principles or standards; truthfulness, fairness, doing what you say you will do, and "speaking forth" about why you do what you do.
- **PT/PTA Collaboration**
 - The PT/PTA team works together, within each partner's respective role, to achieve optimal patient/client care and to enhance the overall delivery of physical therapy services.
- **Responsibility** is the active acceptance of the roles, obligations, and actions of the PTA, including behaviors that positively influence patient/client outcomes, the profession, and the health needs of society.
- **Social Responsibility** is the promotion of a mutual trust between the physical therapist assistant, as a part of the profession, and the larger public that necessitates responding to societal needs for health and wellness.

GENERIC ABILITIES

Generic abilities are attributes, characteristics, and behaviors that are not specifically part of the physical therapy core knowledge but are required for successful practice in the profession. The ten generic abilities and definitions developed by the University of Wisconsin-Madison are:

1. **Commitment to Learning:** The ability to self-assess, self-correct, and self-direct; to identify needs and sources of learning; and to continually seek new knowledge and understanding.
2. **Interpersonal Skills:** The ability to interact effectively with cultural and ethnic diversity issues.
3. **Communication Skills:** The ability to communicate effectively (e.g., speaking, body language, reading, writing, listening) for varied audiences and purposes.
4. **Effective Use of Time and Resources:** The ability to obtain the maximum benefit from a minimum investment of time and resources.
5. **Use of Constructive Feedback:** The ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.
6. **Problem Solving:** The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
7. **Professionalism:** The ability to exhibit appropriate professional conduct and to represent the profession effectively.
8. **Responsibility:** The ability to fulfill commitments and to be accountable for actions and outcomes.
9. **Critical Thinking:** The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.
10. **Stress Management:** The ability to identify sources of stress and to develop effective coping behaviors.

Developed by the Physical Therapy Program, University of Wisconsin-Madison. May, et al. *Journal of Physical Therapy Education*. 9:1, Spring 1995.

ESSENTIAL ABILITIES

1. **Visual Acuity:**

- a. acute enough to read small printed materials such as a health record/computer screen
- b. acute enough to read small calibrations or symbols such as on a goniometer or modality equipment normally found in a physical therapy clinic
- c. acute enough to obtain visual information including, but not limited to, movement, posture, body mechanics, and gait pattern

2. **Hearing Acuity:**

- a. acute enough to perceive normal level of voice so as to follow instructions and participate in conversation
- b. acute enough to collect sounds produced in the body by use of a stethoscope

3. **Communication:**

- a. verbal expression sound enough to express one's thoughts and distinct enough to communicate using medical terminology and the terminology of physical medicine
- b. able to perceive non-verbal communication such as changes in mood, activity, facial expression, and postures
- c. able to communicate effectively and sensitively; requires the ability to read and write utilizing the English language

4. **Digital Dexterity:**

- a. agile enough to operate the various pieces of modality equipment normally found in a physical therapy clinic
- b. agile and strong enough to administer a variety of massages and other manual therapies

5. **Physical Ability:**

- a. strong and agile enough to lift or assist in lifting persons in excess of 100 pounds on a frequent basis and to assist persons in:
 - 1) climbing
 - 2) balancing
 - 3) stooping
 - 4) kneeling
 - 5) crouching
 - 6) crawling
 - 7) reaching

- b. fine and gross motor skills necessary for administering cardiopulmonary resuscitation

6. **Interpersonal and Behavioral Ability:**

- a. able to complete treatment modalities or procedures within time allotted for patient
- b. able to complete required tasks/functions effectively under stressful conditions
- c. able to utilize problem-solving skills and exercise sound judgment
- d. able to adapt to changing environments in a mature, sensitive and effective manner.

Reference: "Selected Characteristics of Occupations Defined in the Dictionary of Occupational Titles"

CLINICAL POLICIES

A primary objective of clinical assignments is to ensure that each student is exposed to diverse clinical settings/environments during the three rotations. These clinical environments include acute hospital settings, outpatient clinics, nursing homes, home health care agencies, and rehabilitation hospitals.

Clinical Schedule:

Affiliation 1: Summer (Semester III) – five weeks, 192 hours; mid-/late June – mid-/late July

Affiliation 2: Spring (Semester V) – six weeks, 240 hours; late January/early February – mid-March

Affiliation 3: Spring (Semester V) – seven weeks, 256 hours; mid-/late March – mid-May

The academic coordinator of clinical education (ACCE) assigns students to clinical sites with input from the student and the clinical coordinator. Students may not change their clinical assignments or solicit their own clinical assignments, although special situations may be discussed.

The clinical experiences provide directed learning in an assortment of professional and clinical settings.

Clinical Evaluation

The clinical instructor (CI) is responsible for assessing the student's progress at the assigned clinical affiliation using the *Physical Therapist Assistant Manual for the Assessment of Clinical Skills* (PTA MACS). This tool allows for an objective assessment of the student's skills during the clinical rotation. The two progress reports are used for a mid-term and a final assessment of the student. The CI completes the mid-term evaluation, discusses it with the student, and provides it to the academic coordinator of clinical education (ACCE) during the mid-term clinic site visit. The CI completes the summative progress report at the end of the clinical rotation and discusses the results with the student. The ACCE will use the completed forms for review and grade computation.

Occasionally, a student cannot complete a required skill due to a lack of availability in a setting. This is chiefly due to not having specific equipment or patients with particular pathologies in the facility. In that case, the clinical instructor and student will work with the academic coordinator of clinical education (ACCE) to return the student to campus to complete the skill with the ACCE via simulation in the program's lab space.

Physical Therapist Assistant Manual for the Assessment of Clinical Skills (PTA MACS)* **Instruction*

The ACCE, in coordination with EXXAT, provides a training presentation to each site coordinator of clinical education (SCCE) and is also available for direct consultation and instruction. The PowerPoint presentation is also available on the PTA Program's website:

<http://alamo.edu/spc/pta/>

under the tab, "Program Accreditation, Licensure and Information."

Grade Compilation

A combination of skill attainment in the PTA MACS, along with other clinical assignments such as the journal and journal paper, SOAP notes, a patient case study, accurate completion and return of all required forms, and attendance comprise the final clinical grade. In addition, student adherence to policies and procedures and level of professionalism also factor into the final grade assessment.

Clinical Attendance

Regular and punctual clinical attendance is required. Absences are permitted only for unavoidable circumstances, and the **clinical instructor (CI) and Academic Coordinator of Clinical Education (ACCE), Shelley Kozel, must be notified**. Absence is defined as unplanned nonattendance of more than 15 minutes. **Any absence must be made up before the end of the affiliation and at the convenience of the CI. Only one make-up date will be allowed** during each clinical affiliation. Additional make-up time will be at the discretion of the ACCE. If illness causes a consecutive absence of three days or more, the student must obtain a physician's excuse before returning to the clinical site. Students are not required to report to the clinical site on official St. Philip's College holidays. Please see the course grading policy for details of the effect of absences on grades.

The student is required to "clock in" and "clock out" on the timesheet provided. The CI must initial this form at the end of **each week** and sign it at the end of the clinical rotation. The ACCE will inspect this form during the mid-term evaluation, and the student will turn it in at the end of the semester.

The student's work hours during each affiliation should be approximately eight hours per day or 40 hours per week, mirroring the schedule of the CI.

Student absences accrue from the official date of enrollment in the class. **The instructor may drop a student with accumulated absences equivalent to ten percent or more of the total clinical hours without make-up time per PTA Program Procedure-F.6.2.1 Student Responsibility for Success: Program Attendance** (Please see the program's Student Handbook, Appendix E for this procedure. It is available on the program's website).

Clinical Assignments

The program has changed over to the electronic version of the *Physical Therapist Assistant Manual for the Assessment of Clinical Skills* (PTA MACS), so it is accessible from any internet-connected computer via the student's account in the program's clinical software interface (Exxat). The PTA MACS and timesheet must be kept current. The student will write treatment notes during each rotation, and the CI will cosign each of them. The student will also maintain a clinical journal throughout each of the three clinical rotations and must make at least two entries per week. A clinical journal paper (entries and a summary) is due in the Canvas course at the end of each rotation. A clinical case study is assigned during the second rotation. Finally, each student will present an in-service briefing during one of the final two rotations; however, a clinical instructor may require an educational activity during any rotation. This is left to the discretion of the CI at each site.

Clinical Attire

During clinical assignments, students should dress in the professional attire of the physical therapists or physical therapist assistants working in that clinic. For example, if clinic personnel are required or allowed to wear scrubs, the students may do the same if they observe the scrub color requirements of the clinic. Otherwise, students must wear a solid-color, polo-type shirt; Docker-style, khaki pants; athletic shoes (preferably a solid, conservative color) or closed-toe, closed-heel shoes of a conservative color with a non-skid sole. All items should be clean and in good repair. Clothing will cover all visible tattoos and will fully cover the torso when the student is reaching overhead or squatting down.

The student must wear a St. Philip's College picture name tag/ID at all times. Modest jewelry [i.e., a watch with a second hand, one pair of stud/petite earrings (NO other piercings), and a single wedding band] may be worn. The student must not wear dangling earrings, necklaces, or anything that can be pulled. Fingernails must be clean, neatly filed, unpolished, and trimmed short—not extending beyond the fingertips. Hair should be neat, clean, and worn away from the face.

SAFETY AND HEALTH INFORMATION

Immunizations

All students accepted into an Allied Health program at St. Philip's College must present evidence of meeting the following immunization requirements **before beginning the clinical practicum**.

The student must present documentation from a physician or medical clinic of the following immunizations:

- a. **Tetanus, Diphtheria, and Pertussis (TDaP)** – one dose within the last ten years.
- b. **Measles/Mumps/Rubella (MMR)** – proof of either:
 - 1) MMR vaccine (two doses), or
 - 2) blood test (titers) proving immunity.
- c. **Tuberculosis skin test (Mantoux, PPD) or Quantiferon Gold**– must be done within the past year and must be repeated annually (or more frequently if required by a specific clinic site). If positive, the student must complete a questionnaire for symptoms and either a chest x-ray or blood test within the past two years to confirm no active case of tuberculosis.
- d. **Hepatitis B series** – proof of either:
 - 1) hepatitis B vaccine (either 2-dose Hepsivax-B or 3-dose Engerix or Recombivax), or
 - 2) blood test (titers) proving immunity.
- e. **Varicella (Chickenpox)** – proof of:
 - 1) physician-documented history of disease,
 - 2) varicella vaccine (two doses), or
 - 3) blood test (titers) proving immunity.
- f. **Bacterial Meningitis** – proof of vaccination is only required for students under the age of 22.
- g. **Influenza (Flu)** – annual vaccination is required during the fall semester for the spring clinical

Students will upload scans or pictures of the written documentation of the above immunizations, as well as images of other required documents, into their student account in the program's clinical software interface (Exxat). Students are responsible for maintaining original documents regarding their immunizations, receipts for drug screens and criminal background checks, proof of health insurance, and basic life support for the healthcare provider card. Only receipts for, **not results** of, the drug test and background check are required.

Cardiopulmonary Resuscitation (CPR)

All students must have current training in Basic Life Support for the healthcare provider that meets American Heart Association or Red Cross standards and covers cardiopulmonary resuscitation and automated external defibrillator use (two-year card).

Criminal Background Check and Drug Screening

All students must have a clear criminal background check and a clear drug screening before attending clinical rotations. In addition, the clinical site, clinical instructor, or a faculty member of the program may also request a random drug screening at any time.

Students must understand that a clinical site may require drug screening before the start of the clinical rotation. The cost for the criminal background check and drug screening are the responsibility of the student. Program personnel will provide the instructions needed to complete the criminal background check and drug screening. Criminal background checks or drug screening through any other source are not acceptable.

Once the criminal background check and drug screening are completed, the student will scan or photograph the receipts for each and upload them to his or her student account in the program's clinical software interface (Exxat).

Blood and Body Fluid Exposure

Students of the St. Philip's College Physical Therapist Assistant Program have learned risk factors for various diseases and have practiced techniques and precautions to mitigate these risks during academic instruction. It is the student's responsibility to implement standard precautions in all assigned patient care and appropriate precautions per clinical facility policy for specific diseases. See Appendix A – Protocol for Sharp Puncture, Blood or Potentially Infectious Body Fluids Exposure.

Clinic Safety and Competent Practice

Before clinical exposure, all students are introduced to the basic incidents and emergencies that can occur in a hospital or clinical setting, including infection control, alarm codes, and fire safety. They also receive instruction in the following skills: taking vital signs, tests and measures, aseptic technique, wound care, wheelchair use and maintenance, transfer training, gait training, extremity wrapping, physical agents, and manual modalities.

Faculty members evaluate these skills via lab practicals (formal, scenario-based tests) or skill checks (formal/graded or informal/non-graded observation of performance of a skill). Students must pass all lab practicals and formal skill checks with a grade of 77 percent or higher. Additionally, if the student performs any critical safety elements incorrectly during these evaluations, the instructor discontinues the test, and the student fails that skill. The student must retest on that skill until a passing grade is achieved. The student is allowed three attempts to pass the skill.

It is the student's responsibility to maintain a safe environment for patient/client treatment.

Incident Report

An incident is anything happening to a patient, an employee, a visitor, or the student that is out of the ordinary, inconsistent with the facility's usual routine or treatment procedure, or an accident or situation that could cause an accident. In the event of an incident, the student should follow the protocol of the clinical facility, which may include filing an incident report. In addition, the student must complete the St. Philip's College Allied Health Department's Student Clinical Incident/Injury Form. (See Appendix B.)

The student must make every effort to complete the written report within 24 hours of the incident to ensure proper care and follow-up.

Accident/Health Insurance

All students are required to have healthcare insurance. Any healthcare costs incurred while enrolled in the college are the responsibility of the student.

Confidentiality and Privacy Laws

The Family Educational Rights and Privacy Act (commonly referred to as "FERPA") affords all students certain rights and privacies with respect to their own education records. The college and program abide by this law and will not disclose any information about a student or his or her academic performance with any other person unless the student gives written permission.

The Health Insurance Portability and Accountability Act of 1996 (commonly referred to as "HIPAA") provides data privacy and security requirements for safeguarding medical information. Students must adhere to confidentiality requirements in providing patient care at any healthcare facility to which they are assigned. The student may not access, use, disclose, or reproduce any confidential patient information other than what is required for the strict purposes outlined in the student's clinical duties. The student agrees to this policy by signing the Confidentiality Agreement. This document is maintained in the student's file in the program director's office.

All students receive instruction in the role of the physical therapist assistant (PTA) according to:

- 1) the Texas Practice Act and Rules,
- 2) appropriate guidelines for supervision of the PTA and physical therapy aide in various clinical settings, and
- 3) American Physical Therapy Association Standards of Ethical Conduct for the Physical Therapist Assistant.

SUGGESTIONS FOR CLINICAL INSTRUCTORS

1. Familiarize yourself with the *Physical Therapist Assistant Manual for the Assessment of Clinical Skills* (PTA MACS) skills, objectives, and the grading criteria early on in the rotation.
2. Provide an orientation to your facility. Treat the student as you would a new employee and let them know what to expect from day one—what you expect from them and what they can expect from you. Also, ensure you discuss lunch and break times, as well as how long the student is expected to stay at your clinic each day.
3. Meet with the student within the first few days to discuss the skills that they have completed in the PTA MACS (if any) and the skills that they can work on with the expectation to be checked off as entry-level at this clinical rotation site. Set goals and discuss any specific problem areas noted in the PTA MACS (e.g., NI's, U's). Ideally, the clinical instructor (CI) will have a lighter workload in the first two weeks so (s)he can spend more time with the student. Productivity may increase after that as the student takes on increasing patient care responsibility.
4. The student and the clinical instructor should meet regularly. Choose a time of day that works the best for you to have one-on-one time. While this may not be feasible daily, a one-on-one meeting should occur at least weekly. Weekly meetings will suffice if the student has ready access to you for questions that may arise.
5. Help the student succeed by selecting patients that can help them meet the goals you have set. Update the goals as the student meets them and schedule other patients that may help them address the new goals.
6. Allow the student to review all completed patient evaluations and charts before treatment. Follow up by asking them questions concerning the proposed treatment plan and goals, as well as indications, contraindications, and precautions in regards to the upcoming patient treatment.
7. Please remember that students are not employees and should be supervised as such, not “let loose” to treat the patients. Of course, some will require more supervision and feedback than others, but all should receive encouragement and guidance for improvement.
8. The students should be allowed to work with the patients. Once the clinical instructor feels that the student can safely work with patients, he or she should be allowed to do so. If the CI feels that the student cannot safely treat patients after remediation attempts have been made, the academic coordinator of clinical education should be contacted for further direction or removal of the student from the site.
9. Only one person should be rating the student in the PTA MACS. Inconsistencies and confusion sometimes arise when multiple clinical instructors rate the same skill. It is appropriate for more than one person to supervise and instruct the student, but make it clear to the student who will be rating them on the skills in the PTA MACS.
10. A skill performed by the student should be observed several times before a “✓” is given. The use of mock patients (i.e., other staff members posing as patients) can be used to practice skills when appropriate patients are not available. To the extent possible, skills should only be checked off as entry-level if they are performed and evaluated on actual patients.
11. If a student rates an “NI” in a specific area, let him or her know as soon as possible so there is time to correct the deficit. Discuss this with the student and devise a plan to pass the skill at entry level, if possible. This may

involve more practice, more study/research, or possibly counseling from the academic coordinator of clinical education (ACCE).

12. The clinical instructor must provide formal evaluations at mid-term and again at the end of the affiliation. The student and CI should discuss the evaluations after completion. These forms are the five-page pink forms in the PTA MACS.
13. If any student-related problem arises that cannot be quickly resolved, please contact the ACCE for assistance.

EXPECTATIONS FOR A CLINICAL INSTRUCTOR

- ✓ Have at least one year of clinical experience as a licensed physical therapist or physical therapist assistant
- ✓ Become familiar with the *Physical Therapist Assistant Manual for the Assessment of Clinical Skills* (PTA MACS)
- ✓ Demonstrate a desire to work with students
- ✓ Plan a student orientation of the facility
- ✓ Provide the student with the facility policy and procedure information for review
- ✓ Adhere to legal and ethical practice standards
- ✓ Work with the student to develop goals and objectives
- ✓ Plan a variety of learning experiences for the student
- ✓ Provide formal and informal feedback to the student
- ✓ Guide and modify the student learning experiences based on the student's performance
- ✓ Encourage the student to evaluate his/her own clinical experience
- ✓ Note areas that need improvement early in the rotation
- ✓ Discuss problem areas with the site coordinator of clinical education (SCCE) and/or the academic coordinator of clinical education (ACCE)
- ✓ Complete the mid-term and final progress reports in the PTA MACS and discuss the completed mid-term report with the ACCE at the mid-term clinical visit; discuss both progress reports with the student
- ✓ Pursue knowledge and skills in clinical teaching (see links below)
- ✓ Assess your ability as a clinical instructor and identify areas for further development (see American Physical Therapy Association link below)

CONTINUING COMPETENCY UNITS FOR CLINICAL INSTRUCTION

Service as a clinical instructor for five weeks or longer for full-time, entry-level PTA students enrolled in accredited educational programs and completed within the 24 months preceding license expiration is automatically approved for continuing competency units (CCU). The approval number is 90004TX. All of St. Philip's PTA program rotations qualify for five CCUs each. PTs may submit a maximum of ten CCUs, and PTAs a maximum of eight CCUs during the renewal period for this activity. The program will provide the clinical instructor a certificate confirming clinical supervision and the number of weeks supervised. If audited, the licensee must provide this documentation. [See Texas Board of Physical Therapy Examiners Rules, Rule 341.3 (4)(F)]

CLINICAL EDUCATION FACULTY DEVELOPMENT

The following are ways in which clinical instructors (CI) can further develop their skills in clinical instruction:

- Familiarize yourself with this *Clinical Instructor Manual*.
- Improve your understanding of the use of the *Physical Therapist Assistant Manual for the Assessment of Clinical Skills* (PTA MACS) through reading the instructions in the PTA MACS, following the training PowerPoint, or requesting one-on-one instruction with the academic coordinator of clinical education (simply call or e-mail the ACCE at the contact information on page four of this document if you require assistance). The PowerPoint explanation of the use of the PTA MACS can be found on the Physical Therapist Assistant Program's website:

<http://alamo.edu/spc/pta/>

under the tab, "Program Accreditation, Licensure and Information."

- Complete the Texas Consortium for Physical Therapy Clinical Education or APTA CI course to help you better understand teaching and learning, communication and feedback, and the use of the PTA MACS.
- Become a credentialed clinical instructor through:
 - the American Physical Therapy Association (APTA), or
 - the two-part CI certification course through the Texas Consortium for Physical Therapy Educators.

Course content and schedules can be found on their respective websites (listed below). The PTA Program highly recommends that all CIs complete one of these courses.

- Review the APTA document *Guidelines and Self-Assessments for Clinical Education* on the APTA website.

WEBSITES OF INTEREST FOR CLINICAL EDUCATION

St. Philip's College Physical Therapist Assistant Program: <http://alamo.edu/spc/pta>

The Texas Physical Therapy Association: www.tpta.org

Texas Board of Physical Therapy Examiners – most current Practice Act and Rules

<https://www.ptot.texas.gov/page/act-and-rules>

American Physical Therapy Association clinical instructor area, *Guidelines and Self-Assessments for Clinical Education*, access to clinic site information form (CSIF), credentialing courses, etc.:

<https://www.apta.org/contentassets/7736d47f2ec642a3962276d9b02503d2/guidelinesandselfassessmentsforclined.pdf>

<https://www.apta.org/for-educators/assessments/csif>

<https://www.apta.org/for-educators/clinical-education-development>

The Texas Consortium for Physical Therapy Clinical Education conducts a two-part clinical instructor certification course (<http://texasconsortium.org/courses.html>)

- The first part of the course is online. After completing the first part of the course, the clinical instructor will earn six continuing competency units (CCU).
- The second part of the course is completed in person. It is designed to integrate and build upon the foundational knowledge learned in part 1. On completion of the second part of the course, the clinical instructor will earn four CCUs.

Medicare guidelines for student supervision:

<http://www.apta.org/Payment/Medicare/Supervision>

LIST OF APPENDICES

Appendix A – Protocol for Sharp Puncture, Blood, or Potentially Infectious Body Fluids Exposure

Appendix B – Student Clinical Incident/Injury Form - St. Philip's College Allied Health Department

Appendix C – Patient Survey

Appendix D – St. Philip's College-Clinical Education Program Evaluation Form

St. Philip's College

Health Sciences Department

Protocol for Sharp Puncture, Blood, or Potentially Infectious Body Fluids Exposure

Any student who sustains a sharp puncture (e.g., needle stick, glass, blade, etc.) or other exposure to blood or bodily fluids while engaged in a college-sponsored educational program should follow these steps as published by the National Institute for Occupational Safety and Health (NIOSH):

- Wash needle sticks and cuts with soap and water.
- Flush splashes to the nose, mouth, or skin with water.
- Irrigate eyes with clean water, saline, or other sterile irrigants.
- Report the incident to your supervisor.
- Immediately seek medical treatment.

(Source) <http://www.cdc.gov/niosh/topics/bbp/emergnedl.html>

Please keep in mind that drug prophylaxis is time-sensitive (2 – 24 hours), and therefore the student must immediately seek help from the appropriate supervising personnel.

Some medical facilities will treat the student, provide accident forms, and pay for treatment. If not, students who incur a sharp puncture or exposure should go to the nearest emergency room for the appropriate consultation and testing.

The clinical instructor and the academic coordinator for clinical education should be notified as soon as possible after the incident. The instructor will initiate an incident/injury report and evaluate the circumstances of the incident. If the student declines medical treatment, this should be documented and signed by that individual.

STUDENT CLINICAL INCIDENT / INJURY FORM

ST. PHILIP'S COLLEGE - ALLIED HEALTH DEPARTMENT

DATE OF INCIDENT: _____ TIME OF INCIDENT: _____

CLINICAL SITE WHERE INCIDENT OCCURRED: _____

STUDENT NAME: _____

INSTRUCTOR NAME: _____

STUDENT CONTACT INFORMATION: STREET: _____

CITY, STATE, ZIP: _____ PHONE: _____

DESCRIBE WHAT HAPPENED AND THE NATURE OF ANY INJURY:

PLEASE INITIAL ONLY **ONE** OF THE FOLLOWING:

TESTING / TREATMENT WAS DECLINED: _____

TESTING / TREATMENT WAS SOUGHT: _____

FOLLOW UP DATES: 6 WEEKS _____

3 MONTHS _____

6 MONTHS _____

Student Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

St. Philip's College

Patient Survey of the Student Physical Therapist Assistant

Please answer the following questions about the student physical therapist assistant who has worked with you. **Circle the number** that applies most closely to how you feel about the student. This survey is confidential.

When the student physical therapist assistant treated you:

1. The student was polite and courteous.

Comments?

Strongly Agree

Neutral

Strongly Disagree

5

4

3

2

1

2. The student seemed to know what he/she was doing.

Comments?

Strongly Agree

Neutral

Strongly Disagree

5

4

3

2

1

3. The student seemed caring and compassionate.

Comments?

Strongly Agree

Neutral

Strongly Disagree

5

4

3

2

1

After filling this out:

1. Put the survey in the envelope provided.
2. Seal the envelope.
3. Give the envelope to the student to return to the school.

Questions? Call Shelley Kozel, St. Philip's College Physical Therapist Assistant Program, at (210) 486-2429

St. Philip's College—Clinical Education Program Evaluation Form

Please complete this questionnaire as it applies to the Physical Therapist Assistant (PTA) Clinical Education Program at St. Philip's College. This survey is measured on a 5 to 1 scale, 5 being "Strongly Agree," and 1 being "Strongly Disagree."

Name of Facility:

Date:

Type of practice:

- Acute
- Rehab
- Outpatient
- Pediatric
- Other _____

Clinical Instructor name and License #

Q1 The faculty at St. Philip's College are accessible to me when I have any questions and provide ample time for discussing concerns.

- 5
- 4
- 3
- 2
- 1
- Comments _____

Q2 I am satisfied with the feedback that I receive about my facility.

- 5
- 4
- 3
- 2
- 1
- Comments: _____

Q3 When posed with a student with problems, I have been satisfied with the strategies/solutions implemented by the SPC faculty.

- 5
- 4
- 3
- 2
- 1
- N/A. I have not had any student problems.
- Comments: _____

Q4 The communication between the Academic Coordinator of Clinical Education (ACCE) and the Site Coordinator for Clinical Education (SCCE) and/or Clinical Instructor (CI) to place PTA students is effective in meeting my needs.

- 5
- 4
- 3
- 2
- 1
- Comments: _____

Q5 I received information about the mid-rotation progress assessment promptly.

- 5
- 4
- 3
- 2
- 1
- Comments: _____

Q6 I am satisfied with the mid-rotation progress assessment visit procedure used by the program faculty.

- 5
- 4
- 3
- 2
- 1

Comments: _____

Q7 I am satisfied with St. Philip's ACCE's effectiveness in developing, conducting, and coordinating the clinical education program.

- 5
- 4
- 3
- 2
- 1

Comments: _____

Please provide brief written comments on the following questions:

Q8 What topics would be of interest to you in attending a workshop to facilitate clinical education?

Q9 Is there any way that the St. Philip's College faculty can assist you in further developing your skills as a CI?

Q10 What do you consider the strengths and weaknesses of the clinical education policies and/or procedures used by the St. Philip's College PTA Program, for example, attendance policies, grading criteria, extra assignments, etc.?

Q11 Are there areas of the clinical education program in which you would like to become more involved?
