

PT 760 CLINICAL EDUCATION 3 SYLLABUS-SUMMER 2024

Catalog Description

The first of three full-time clinical education experiences. Students practice for 10 weeks under the supervision of a licensed physical therapist.

Credit Hours

5 credits

Student practice ~40 hours per week.

Course Coordinator

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Office hours by appointment; the DCE is available for phone or web meetings with students and clinical instructors (CIs) in the evenings and on weekends during clinical education placements.

Course Prerequisites

Good standing in DPT program.

Per division/program policy, to earn consent to progress to full-time clinical education (PT 760), the student must:

- Be in good standing in the PT program per the division's Committee on Academic & Professional Standards
- Have successfully passed all check-off and practical examinations to date
- Not have any un-remediated professional conduct issues
- Have all health requirements up to date
 - Students must comply with all immunizations, titers, health, background, drug, and health screening requirements outlined in the division's *DPT Student Handbook*. Adherence to these requirements must be documented no later than the preceding March 1. Items (such as TB tests, CPR certifications, and immunizations) must be updated so they do not expire during the clinical experience.
 - Students must comply with any additional immunizations, titers, health, background, and drug, and health screening requirements outlined by the clinic facility. All facility onboarding requirements and tasks must be completed by May 3.

Expected Learning Outcomes

Upon completion of PT 760, the student will be capable of:

- 1. Managing patients with simple conditions, requiring clinical instructor (CI) supervision 75% or more of the time.
- 2. Managing patients with complex conditions, requiring CI supervision 100% of the time.
- Consistently and accurately performing basic physical therapy examination and intervention procedures, such as goniometry, manual muscle testing, medical record review, and simple interventions.

4. Beginning to share a clinical caseload with the CI.

Objectives

Except where noted (***), objectives are taken from the <u>APTA Clinical Performance</u> <u>Instrument for Physical Therapists</u>, version 3.0 (2023).

With CI supervision as noted above, the student:

- 1. Professionalism Ethical Practice
 - a. Practices according to the Code of Ethics for the Physical Therapist
 - b. Demonstrates respect for self, the patient/client, and colleagues in all situations
- 2. Professionalism Legal Practice
 - a. Practices according to legal and professional standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.
- 3. Professionalism Professional Growth
 - a. Accepts and is receptive to feedback
 - b. Participates in planning and/or self-assessment to improve clinical performance
 - c. Contributes to the advancement of the clinical setting through educational opportunities
 - d. Seeks out opportunities to improve knowledge and skills.
- 4. Interpersonal Communication
 - a. Demonstrates professional verbal and nonverbal communication with all stakeholders (e.g., patients/clients, caregivers, intra/interprofessional colleagues)
 - b. Adapts to diverse verbal and nonverbal communication styles during patient/client interactions
 - c. Utilizes communication resources (e.g., interpreters) as appropriate
 - d. Incorporates appropriate strategies to engage in challenging encounters with patients/clients and others
 - e. Facilitates ongoing communication with physical therapist assistants regarding patient/client care
- 5. Interpersonal Inclusivity
 - a. Delivers physical therapy services with consideration for patient/client diversity and inclusivity for all regardless of age, disability, ethnicity, gender identity, race, sexual orientation, or other characteristics of identity
 - b. Provides equitable patient/client care that does not vary in quality based on the patient's/client's personal characteristics (e.g., ethnicity, socioeconomic status)
 - c. ***(For students completing rural clinical education experiences) Deliver services that are
- culturally appropriate in rural, Appalachian residents, groups, and communities 6. Technical/Procedural – Clinical Reasoning
 - a. Strategically gathers, interprets, and synthesizes information from multiple sources to make effective clinical judgments
 - b. Applies current knowledge and clinical judgement leading to accurate and efficient evaluations including: selection of examination techniques, diagnosis, prognosis, goals, and plan of care
 - c. Ensures patient/client safety via medical screening during the episode of care and when making discharge and progression decisions
 - d. Presents a logical rationale for clinical decisions with all stakeholders (e.g., patients/clients, caregivers, intra/interprofessional colleagues).
- 7. Technical/Procedural Examination, Evaluation, and Diagnosis
 - a. Performs evidence-based initial and re-examination tests and measures that are relevant to the practice setting
 - b. Rules out other pathologies and refers to or consults with other healthcare professionals as necessary
 - c. Evaluates data from the patient/client examination (e.g., history, systems review, tests and measures, screening, and outcome measures) to make clinical decisions, including the determination of a diagnosis to guide future patient/client management

- d. ***For students completing rural clinical experiences: Assess the health needs of rural/underserved residents, groups, and communities.
- 8. Technical/Procedural Plan of Care and Case Management
 - a. Establishes a physical therapy plan of care that is safe, effective, patient/client-centered, and evidence-based while also considering prognostic factors
 - b. Adapts plan of care as appropriate by utilizing test and retest measures, outcome measures, and caseload discussions to ensure patients/clients are progressing toward discharge goals.
- 9. Technical/Procedural Interventions and Education
 - a. Selects and performs appropriate physical therapy interventions (e.g., therapeutic exercise, therapeutic activity, neuromuscular re-education, application of modalities, manual therapy) that are evidence-based and completed in a competent and efficient manner
 - b. Consults with interprofessional colleagues as appropriate (e.g., nurse, physician, occupational therapist, speech-language pathologist, orthotist-prosthetist) to seek advice or an opinion
 - c. Educates patients/clients and caregivers using multimodal approach based on patient's/client's learning style
 - d. Educates healthcare team on relevant topics by taking an active role in activities (e.g., journal clubs) or in-service opportunities
 - e. ***(For students completing rural clinical education experiences) Design and implement prevention and health promotion programs for rural/underserved residents, groups, and communities
- 10. Business Documentation
 - Produces quality documentation that includes changes in the patient's/client's status, descriptions and progressions of specific interventions used, and communication among providers
 - b. Maintains organization of patient/client documentation
- 11. Business Financial Management and Fiscal Responsibility
 - a. Identifies financial barriers and limitations to patient/client care (e.g., authorization limits, cost to patient)
 - b. Adjusts plan of care and schedule frequency based on the patient's/client's financial concerns or needs
 - c. Understands nuances of insurance including copay, co-insurance, out-of-pocket max, deductible, etc.
 - d. Appropriately bills patients/clients according to legal guidelines and insurance regulations
 - e. Demonstrates appropriate understanding of other fiscally responsible behaviors, including time management and appropriate use of clinical supplies and equipment when providing physical therapy services.
- 12. Responsibility Guiding and Coordinating Support Staff
 - a. Actively participates in caseload discussions with interprofessional colleagues to optimize patient/client outcomes
 - b. Delegates tasks to support staff as appropriate
 - c. Identifies patient/client complexity model of care when scheduling patients/clients with a physical therapist assistant versus a physical therapist

Course Schedule

The student will follow the work schedule of his/her assigned clinical facility and CI.

The clinical experience begins on Tuesday, May 28 and ends Friday, August 2.

The student's midterm evaluation should be completed on or around the end of the fifth week (June 28); the date/time of the midterm evaluation are at CI's discretion. The final evaluation must be completed on/before the student's last day (August 2).

The student will complete and submit written assignments as outlined below. The student will be provided a checklist of all tasks and assignments with due dates.

Student Evaluation and Grading

Grading will be assigned by the DCE based on CI scores and comments on the American Physical Therapy Association's <u>Clinical Performance Instrument Version 3.0</u>; completion of preparation and onboarding tasks; and submission of written assignments, self-assessments, and surveys.

Clinical Performance Instrument (CPI 3.0)

The CPI is an online tool designed for the assessment of PT students' clinical performance. CPI 3.0 includes 12 performance criteria which correspond to the <u>Learning Objectives</u> listed above. For each criterion, the CI rates the student's performance on a Likert-type scale:

- 1. Beginning Performance
- 2. Advanced Beginner
- 3. Intermediate Performance
- 4. Advanced Intermediate Performance
- 5. Entry-Level Performance
- 6. Beyond Entry-Level Performance

The CI rates the student's performance at both midterm and final. Each performance criterion also includes a box for open text in which the CI should provide comments and examples to support the rating.

To ensure reliability and validity of evaluation, CIs, students, and program faculty are required to complete a <u>training module</u> and demonstrate mastery of use of CPI 3.0 on a module post-test.

Significant Concerns and Critical Incidents:

If, at any point in the clinical experience, the CI has concerns regarding the student's ability to meet the expectations for clinical performance, the CI should contact the course coordinator/DCE immediately. This can be done by phone or email. Another option is to log in to CPI 3.0 and click on the *Significant Concerns* button, which sends an automated message to the DCE. The *Significant Concerns* button may be used whenever the CI feels the student's performance may compromise patient safety, and/or is unacceptable for the clinical experience.

If the CI identifies significant concerns with the student's performance, at midterm or at any point in the experience, the DCE may collaborate with the student and CI if needed to develop an individualized remedial learning plan for improving the student's clinical performance.

To pass PT 760:

At the end of the clinical experience, the student must:

- On CPI 3.0 items/Learning Objectives 1 through 3: earn ratings of at least 3 (Intermediate Performance)
- On CPI 3.0 items/Learning Objectives 4 through 12: earn ratings of at least 2 (Advanced Beginner)

When assigning a course grade, the DCE will review and consider comments and examples provided by the clinical instructor.

The student may not pass the course if there are un-remediated <u>Significant Concerns</u> at the end of the clinical experience.

For calculation of letter grades:

At midterm, the student will earn 30 points if the clinical instructor has not indicated <u>Significant Concerns</u> about student safety, performance, or professional behavior.

The student will earn an additional 40 points at the end of the course if:

- CI ratings <u>AND</u> comments on all 12 performance criteria are consistent with the passing level noted in the preceding section
- CI ratings <u>AND</u> comments do not reflect regression from midterm to final on any of the 12 criteria

If the CI indicates there are <u>Significant Concerns</u> at any point in the experience, the DCE may work with the CI and student to develop a remedial learning plan. If such a learning plans is developed:

- If the conditions of the remedial learning plan are met, the student's final grade will be lowered by one letter grade.
- If the conditions of the learning plan are not met and/or the student does not meet the Expected Learning Outcomes by the end of the experience, the student will earn a failing grade in PT 760.

Additional Assignments and Grading Elements

Thirty percent of the student's grade will be earned through completion of preparation and on-boarding tasks, periodic learning reflections and self-assessments, and completion of surveys used to evaluate students' learning experiences.

Note that ALL assignments must be completed/submitted in order to pass PT 760

Timely, Appropriate, and Independent Completion of Tasks and Assignments – 20 points Students are required to complete several tasks, surveys, and small assignments regarding their clinical learning experiences. Completion of these tasks, surveys and assignments will be recorded and tracked in the SOLE Gradebook. At the end of the semester, the student will be assigned up to 20 points for timely, appropriate and independent completion; an evaluation rubric is available for students in SOLE.

Prior to the clinical experience:

- COMPLETION OF CPI 3.0 ONLINE TRAINING MODULE. All students must complete this training. Due April 15.
- PRE-CLINICAL STUDENT PROFILE AND INTRODUCTORY EMAIL. Each student will complete a student profile using Acadaware. The student will send an introductory email to their CI, attaching their profile. This email message must be cc'd to Dr. Utzman. Due April 15.
- CLINIC ONBOARDING AND ORIENTATION. Students are required to keep their health, immunization, and screening documentation up-to-date in Certiphi/My Record Tracker throughout the DPT program. Many clinical sites have additional requirements for student on-boarding (additional background checks, drug screens, immunization documentation). Students are expected to take initiative and ownership to complete these requirements and submit documentation to the appropriate facility personnel in a timely manner. Clinical education sites and CIs reserve the right to exclude or dismiss students who do not adhere to the practice site's policies and procedures. Students must follow instructions of the clinical site; sites typically provide instructions in the student's placement confirmation and/or handbooks and forms. Due by May 3 (unless an earlier deadline was requested by the clinical site).

During the clinical experience:

- MIDTERM STUDENT EVALUATION OF EXPERIENCE SURVEY (see SOLE for instructions and deadline)
- MIDTERM CPI SELF-ASSESSMENT (see SOLE for instructions and deadline)

At the conclusion of the clinical experience:

- FINAL STUDENT EVALUATION OF EXPERIENCE SURVEY (see SOLE for instructions and deadline)
- FINAL STUDENT EVALUATION OF CLINICAL INSTRUCTOR SURVEY (see SOLE for instructions and deadline)
- FINAL CPI SELF-ASSESSMENT (see SOLE for instructions and deadline)
- STUDENT REPORT OF DIAGNOSES AND CONDITIONS (see SOLE for instructions and deadline)

Learning Experience Planning Forms – 2 @ 2 ½ points each (5 points total)

Each student will complete two Learning Experience Planning Forms. These forms are intended to guide the student in reflective learning, use of feedback, and goal setting. One form will be due after the first two weeks in clinic; the second will be due between the midterm and final CPI evaluations. Forms, instructions, and a grading rubric will be provided in SOLE.

Reflective Journals – 2 @ 2 ½ points each (5 points total)

Each student will complete two journals; one will be due at midterm, the other at the end of the clinical experience. The purpose of the journals is to connect classroom learning to the clinical environment. Instructions, prompts, and a grading rubric will be posted on SOLE.

Letter Grades

Item	Points Possible
CPI 3.0 Midterm Evaluation	30
CPI 3.0 Final Evaluation	40
Reflective Journals (2)	5
Learning Experience Planning Forms (2)	5
Timely, appropriate, independent completion of	20
tasks, assignments, and surveys	
Total:	100

- A: 90 to 100 points
- B: 80 to 89 points
- C: 70 to 79 points
- F: Less than 70 points **OR** the student does not meet the minimum passing criteria for the CPI as described above **OR** the student does not submit all required assignments.

Note that ALL assignments must be completed/submitted in order to pass PT 760

Rural Service Learning Project (for students completing rural clinical experiences)

To meet program requirements, each student must complete at least one full-time clinical experience in a rural community. This can be completed in any of the three full-time clinical education courses (PT 760, PT 770, or PT 780). As part of this requirement, the student will complete a rural service learning project in order to meet course objectives 5c, 7d, and 9e.

If the student completes more than one full-time experience in a rural setting, the student only needs to complete one rural service learning project. In consultation with the DCE, the student may choose which experience during which they will complete the project.

If the rural service learning project is completed in PT 760, the student will earn an additional 10 points, and the grading scale will be adjusted accordingly (99-110 points = A, 88 to 98 points B, 77 points to 87 point = C, <77 points = F.).

Project forms, details, and grading rubric will be posted in SOLE.

Policy on Late Work

All written assignments and surveys noted above must be submitted in order to pass PT 760. If work will be submitted late due to legitimate clinical reasons (CI absence, for example), the student should notify the DCE in advance if possible. Points will be deducted from the student's grade per the grading rubrics for Timely, Appropriate, and Independent Completion of Assignments.

Incomplete Grades

The WVU Graduate Catalog contains the full Incomplete Policy

Attendance

PT 760 is a required component of the DPT program. Attendance is expected and required.

Students assigned to a full-time clinical experience (approximately 40 hours/week) will adhere to the work schedule of the facility rather than the academic calendar of the university.

Absences (2 days or less) are warranted in the case of personal illness, family (parents, spouse, siblings, and children) emergencies, or due to death in the family. The student must notify the CI and/or SCCE prior to the start of the workday and notify the DCE immediately. Students are not permitted to request absences for personal events, job interviews, vacations, outside work/employment, or to work on coursework assignments. Students must request time off for religious observances from the DCE in advance. All absences must be made up.

Students must also notify the DCE if they will not be in clinic on a regularly scheduled day due to an unusual situation (such as, but not limited to, inclement weather or clinic power failure). All absences must be made up.

Students are required to make up missed clinical education time before the last scheduled day of the experience following a plan agreed upon between the CI/SCCE, the DCE, and the student. Arrangements for extending the clinical education experience may be developed at the discretion of the DCE in cooperation with the CI/SCCE to provide the student the opportunity to make up missed time.

Tardiness

Students are expected to be on time and prepared for each clinic day. Like absences, tardiness should occur rarely and only under exceptional circumstances. If a student must be late for clinic, the student must contact his/her CI at the earliest possible opportunity, preferably before the start of the workday. Repeated tardiness may impact the student's CPI ratings and overall course grade; in these cases, the CI is encouraged to contact the DCE.

Student Illness or Injury

If a student has a change in health status (injury, illness, mental health issue) during the clinical experience, they must report the change in health status to the clinical instructor immediately. Any injury or condition that results in a limited or altered ability to perform clinical duties must be reported to the DCE. A release from the student's treating physician may be required before the student is permitted to return to the clinic; this is to assure that the student, patients, and clinic staff are not put at risk. Students and CIs should refer to the WVU PT program's *Essential Functions* policy (link available below).

Required Textbooks and Resources

No formal textbook is required for PT 760. Students are encouraged to have their textbooks, notes and other materials available to them, particularly after clinic hours to enable research and preparation for patient care.

Students should review the DPT Student Handbook, available in SOLE, for policies related to clinical education, including clinic dress code, use of personal cell phones, social media policy, and academic and professional standards.

Program and University Policies

Policy	Link
Essential Function	https://medicine.hsc.wvu.edu/pt/future-students/essential- functions/
WVU DPT Student Handbook	https://sole.hsc.wvu.edu/Site/5843/Folder?InstanceID=1205423
WVU DPT Clinical Education Handbook	https://sole.hsc.wvu.edu/Site/2058/File?InstanceID=1286516 or https://medicine.hsc.wvu.edu/media/369390/clinical-education- handbook.pdf
Inclusivity Statement	https://tlcommons.wvu.edu/syllabus-policies-and- statements#inclusivity
Academic Integrity	https://tlcommons.wvu.edu/syllabus-policies-and- statements#academicintegrity
Academic Standards Policy, Including Academic Dishonesty	https://tlcommons.wvu.edu/syllabus-policies-and- statements#academicstandards
Mental Health Statement – HSC Campus	https://tlcommons.wvu.edu/syllabus-policies-and- statements#mentalhealth-hsccampus