VICTORIA COLLEGE

PHYSICAL THERAPIST ASSISTANT PROGRAM



CLINICAL EDUCATOR'S MANUAL

Update 9/2026

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I. GENERAL INFORMATION

DEFINITIONS:

Academic Faculty**:** Physical therapists or physical therapist assistants employed by Victoria College with the primary responsibility for classroom and laboratory teaching.

ACCE/DCE**:** Academic Coordinator of Clinical Education/Director of Clinical Education. The faculty member of the PTA Program whose primary duties are the development, coordination and evaluation of the clinical education portion of the program.

CCCE**:** Center Coordinator of Clinical Education. This individual may or may not be a physical therapist. They are responsible for the coordination of clinical assignments between the facility and the academic institution. All correspondence between the student and the facility should be directed to the CCCE.

Clinical Site: Health care facilities that provide clinical experiences for students of the PTA Program.

CI: Clinical instructor, clinical educator or clinical supervisor. Provides supervision during the clinical learning experience.

Physical Therapist Assistants: Physical therapist assistants (PTAs) provide physical therapy services under the direction and supervision of a physical therapist. PTAs help people of all ages who have medical problems, or other health-related conditions that limit their ability to move and perform functional activities in their daily lives. PTAs work in a variety of settings including hospitals, outpatient clinics, home health, nursing homes, schools, sports facilities, and more. PTAs must complete a 2-year associate's degree and are licensed, certified, or registered in most states. Care provided by a PTA may include teaching patients/clients exercise for mobility, strength and coordination, training for activities such as walking with crutches, canes, or walkers, massage, manual techniques, and the use of physical agents and electrotherapy such as ultrasound and electrical stimulation.

PROGRAM PHILOSOPHY

The PTA program supports the mission and goals of Victoria College. Our purpose is to provide a multitude of high-quality educational experiences that are relevant for today's ever changing healthcare field. We respect and welcome diversity of culture and ideas while cultivating a supportive and challenging learning environment.

Students are encouraged to develop critical thinking and life-long learning skills to enable them to be a productive and vital part of the healthcare team. Faculty shall model the practice of physical therapy by staying current in their field of expertise and by demonstrating professionalism and the highest level of ethical and legal standards.

PROGRAM MISSION

The program will produce entry-level generalist physical therapist assistants who are capable of performing competent, safe, legal, and ethical interventions under the direction and supervision of a physical therapist. The graduates will possess the skills and values necessary to exhibit an ability to critically think and to complete and continue activities which indicate the development and pursuance of professional growth.

PROGRAM GOALS

1. Graduates will be competent, safe, legal, ethical and effective generalist physical therapist assistants who work under the supervision of a physical therapist and will perform their duties within the scope of practice of a PTA.
2. Graduates will engage in lifelong learning activities for professional growth.
3. Graduates will demonstrate awareness of diversity by cultivating a respectful and collaborative working environment.

4. Graduates and the program will meet the human resource needs of the community.

EXPECTED OUTCOMES

Goal 1: Graduates will be competent, safe, legal, ethical and effective generalist physical therapist assistants who work under the supervision of a physical therapist and will perform their duties within the scope of practice of a PTA.
   a. 90% of graduates will pass the national physical therapist licensure exam on their first attempt.
   b. 90% of students and 100% of graduates will implement a comprehensive physical therapy treatment plan developed by a physical therapist and under the supervision of a physical therapist.
   c. 100% of graduates will work in a manner consistent with their state practice act and APTA's Code of Ethics and Guide for Conduct of the Physical Therapist Assistant.

Goal 2: Graduates will engage in lifelong learning for professional growth.
   a. Students/graduates will be able to assess their strengths and weaknesses to promote professional and personal growth.
   b. Graduates will participate in continuing education programs to update their knowledge and skills.

Goal 3: Graduates will demonstrate awareness of diversity by cultivating a respectful and collaborative working environment.
   a. Students/ graduates will be able to successfully work collaboratively within a healthcare team.
   b. Students/graduates will communicate effectively verbally, non-verbally and in writing, with others for the benefit of patients, colleagues and other members of the health care team.
   c. Students/graduates will demonstrate respect for others and consider others as unique and of value.

Goal 4: Graduates and the program will meet the human resources needs of the community.
   a. 90% of graduates will be employed in a variety of physical therapy settings and 50% will be employed in South Texas service area within six months of graduation.
   b. The Physical Therapist Assistant Program will adjust class size based on community need and available resources.

NON-DISCRIMINATION

Victoria College does not discriminate on the basis of race, color, religion, national origin, gender, sexual orientation, pregnancy, age, disability, genetic information, marital status, amnesty, veteran's status, limited English proficiency, or any other protected characteristic. It is our policy to comply, fully, with the nondiscrimination provision of all state and federal rules and regulations.

ACCREDITATION

Victoria College is accredited by the Commission on Accreditation in Physical Therapy Education of the American Physical Therapy Association (1111 North Fairfax Street, Alexandria, VA 22314; phone: (703) 706-3245; accreditation@apta.org).

II. ACADEMIC INSTRUCTION

PTA CURRICULUM

The Physical Therapist Assistant curriculum is designed in a progressive lock-step manner. The courses listed below must be taken in sequence and an inability to maintain a "C" average of 75%, or better, in any core course, will prohibit the student from continuing in the program.

In addition to the required core courses listed below, the student must also complete the additional credit hours of all support courses to fulfill the requirements for the Associate of Applied Science degree.

Upon program accreditation approval and completion of this PTA curriculum, the students will be awarded an Applied Associate of Science Degree in Physical Therapist Assistant and are eligible to take the Texas State Board Examination for approval as Physical Therapist Assistants.

A.A.S. in Physical Therapist Assistant – Degree Plan

Summer Session I

Course	Lecture/Lab/Ext	Credit Hours
*BIOL 2404 Introductory Anatomy/Physiology	3/3/0	4
**PSYC 2301- General Psychology*	3/0/0	3
SDEV 0301 – Strategies for Success **OR EDUC 1300*	*3/0/0*	*0*

Summer Session II

Course	Lecture/Lab/Ext	Credit Hours
PTHA 1321 – Pathophysiology for PTA	3/1/0	3
**ENGL 1301- Composition I*	*3/0/0*	*3*

Fall I

Course	Lecture/Lab per week	Credit Hours
SPCH 1318 – Interpersonal Communication **OR SPCH 1311 – Introduction to Speech Communication*	*3/0/0*	*3*
**ENGL 2311 – Technical Writing*	*3/0/0*	*3*
PTHA 1413 - Functional Anatomy	2/6/0	4
PTHA 1305 - Basic Patient Care Skills	2/4/0	3
PTHA 2201 - Essentials of Data Collection	1 /4/0	2

Spring I

Course	Lecture/Lab/Ext	Credit Hours
PTHA 1301 – Profession of Physical Therapy*	3/0/0	3
PTHA 1431 - Biophysical Agents	2/6/0	4
PTHA 2409 - Therapeutic Exercise	2/6/0	4
MATH 1314- College Algebra **or*	*3/0/0*	*3*

*MATH 1342 – Elementary Statistical Methods/any other high level math elective from core curriculum***		
PTHA 1191 – Special Topics PTA	0/4/0	1

Summer

Course	Lecture/Lab/Ext	Credit Hours
PTHA 1266 – Practicum I-PTA	0/0/20	2

Fall II

Course	Lecture/Lab/Ext	Credit Hours
PTHA 2531-Management of Neurological Disorders	3/6/0	5
**Humanities/Visual or Performing Arts Elective*	*3/0/0*	*3*
**PSYC 2314 – Human Growth and Development*	3/0/0	3
PTHA 2435 - Rehabilitation Techniques	2/4/0	4

Spring II

Course	Lecture/Lab/Ext	Credit Hours
PTHA 2366 – Practicum II - PTA	0/0/30	3
PTHA 2339 - Professional Issues	3/0/0	3

*Course can be taken before admission into program
**Preferred

Total Credit Hours: 66

PTA COURSE DESCRIPTIONS

PTHA 1301 – THE PROFESSION OF PHYSICAL THERAPY

Introduction to the profession of physical therapy and the role of the physical therapist assistant. This course provides general information regarding the field of physical therapy (P.T.) to those persons who have been admitted into the program or who have an interest in the profession of P.T. The course focuses on the history and development of the profession, its relationship to the health care delivery system in the United States, the settings utilized in the delivery of therapy, and an exploration of the roles and functions of the workers in the field and their part on the healthcare team. The development of the professional organization (American Physical Therapy Association) and its purpose are presented as well as the general ethical, legal principles and state laws relating to the delivery of physical therapy. Also includes the study of medical terms through word origin and structure with an emphasis on terms most commonly addressed in the field of physical therapy.

PTHA 1305 – BASIC PATIENT CARE SKILLS

This course covers the application of basic patient handling, functional skills, communication, and selected data collection techniques. It provides the future Physical Therapist Assistant (PTA) with an exposure to the duties that relate to the PTA scope of practice under the direction and supervision of a physical therapist to include the principles and techniques of basic gait training with assistive devices, universal precautions, treatment preparation, client positioning and clinic maintenance. The course also fosters the development of communication skills and interpersonal relationships with clients and colleagues in the health care field.

PTHA 1321 – PATHOPHYSIOLOGY FOR THE PTA

The study of the pathophysiology of diseases/conditions commonly encountered in physical therapy. This course focuses on the etiology and characteristics of diseases of the body's systems as they relate to physical therapy and includes a consideration of the general principles of tissue injury, inflammation and healing. The course is designed for students enrolled in the Physical Therapist Assistant Program.

PTHA 1413 – FUNCTIONAL ANATOMY

This course introduces the student Physical Therapist Assistant to the relationship of the musculoskeletal and neuromuscular systems to normal and abnormal movement. It also discusses the relationship between physical laws and the biomechanical principles of joint motion as well as the concepts of normal posture and human locomotion contrasted with obvious posture and gait deviations.

PTHA 1431 – BIOPHYSICAL AGENTS

The biophysical principles, physiological effects, intervention efficacy and application of physical agents. It explores the use of thermal and athermal agents, mechanical traction, electrotherapy and electromagnetic modalities as well as vasopneumatic compression. Students continue to use medical terms, charting skills, and role play to foster patient and family teaching as well as a deepening of self-awareness of communication skills and professionalism.

PTHA 2201 – ESSENTIALS OF DATA COLLECTION

The study of data collection techniques used to prepare the physical therapist assistant to assist in patient/client management. The student will perform data collection and measurement techniques specific to physical therapy and within the scope of practice of a Physical Therapist Assistant. The student will utilize critical thinking skills to apply the data collected to decision making and problem solving related to patient management established by a physical therapist in the plan of care. Students continue to use medical terms, charting skills, and role play to foster patient and family teaching as well as communication skills and professionalism.

PTHA 2409 – THERAPEUTIC EXERCISE

An advanced course integrating previously learned and new skills/techniques and focusing on concepts, principles, and application of techniques related to therapeutic exercise and functional training. This course provides the student with a kinesiological based approach to the clinical applications used in the treatment and rehabilitation of the client with musculoskeletal and related diagnoses. An additional focus is on safe, legal, ethical and appropriate use of therapeutic exercise. Physiological and therapeutic effects as well as indications and contraindications of exercise will be included. This course fosters the development of communication skills, interpersonal relationships and professionalism required for the health care field. It also requires a high level of critical thinking skills related to implementing and modifying physical therapy interventions.

PTHA 2435 – REHABILITATION TECHNIQUES

An advanced course integrating previously learned and new skills/techniques into the comprehensive rehabilitation of selected musculoskeletal, neuromuscular, cardiopulmonary, and integumentary disorders. Students continue to use medical terms, charting skills, and role play to foster patient and family teaching as well as communication skills and professionalism.

PTHA 2531– MANAGEMENT OF NEUROLOGICAL DISORDERS

An advanced course integrating previously learned and new skills/techniques into the comprehensive rehabilitation of selected long-term pathologies. This course deals with the principles and clinical application of the functional activities and rehabilitation procedures relating to the management of therapy clients with neurological diagnoses. The course also fosters the development of communication skills, interpersonal relationships and professionalism required for the health care field. It requires a high level of critical thinking related to implementing and modifying physical therapy interventions. This course is for students enrolled in the Physical Therapist Assistant (PTA) Program.

PTHA 2339- PROFESSIONAL ISSUES

A capstone course which engages the student in the discussion of professional issues and behaviors related to

clinical practice and which prepares the student for transition into the workforce. This course provides future physical therapist assistants with principles of organization, management, supervision, productivity levels, and performance evaluations. Other topics include: the legal and ethical aspects of physical therapist assistants' occupation as described in the state board and national association regulations and standards; federal, state and private insurance regulation; professional liability insurance; job hunting skills; and the discussion of issues in the medical field as they impact physical therapy.

PTHA 1266 – PRACTICUM I – PHYSICAL THERAPIST ASSISTANT

Practical, general workplace training supported by an individualized learning plan developed by the employer, college, and student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional for 40 hours a week for a total of 240 clinical hours in the semester. This course provides the Physical Therapist Assistant (PTA) student a supervised application of previously learned techniques and skills in the rehabilitation of patients in a selected clinical facility affiliated with the college. The focus is on safe, legal, ethical and effective use of physical therapy interventions. This course also fosters the development of communication skills, interpersonal relationships and professionalism required for the healthcare field. Supervision of the student from beginning to intermediate level is provided by the staff of the affiliating institution and is coordinated by the college faculty. This course is the first of two Clinical Education courses in the PTA Program.

PTHA 2366 – PRACTICUM 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. This course provides the final semester Physical Therapist Assistant (PTA) student a supervised application of previously learned techniques and skills in the rehabilitation of patients in selected clinical facilities affiliated with the college. The focus is on safe, legal, ethical and effective use of physical therapy interventions. This course also fosters the development of communication skills, interpersonal relationships and professionalism required for the healthcare field. Supervision of the student from beginning to intermediate level is provided by the staff of the affiliating institutions and is coordinated by the college faculty. This course is the second of two Clinical Education courses in the PTA Program. This practicum will include two-6 week rotations for 40 hours a week for a total of 480 clinical hours in the semester. This course is the second of two Clinical Education courses in the PTA Program.

Course syllabi will be provided to the clinic site each year which will outline specific course objectives and lecture/lab content schedules. Information will be provided regarding which courses the student has completed and are in the process of completing. The criteria for successful completion of a course are described below.

III. CLINICAL EDUCATION

PHILOSOPHY

Clinical Practice experience in performance of actual patient care is an essential and vital component of the Physical Therapist Assistant's education. The value of the class in clinical experience is dependent upon the selection and planning of treatment sessions, the quality of supervision and feedback that the student receives as well as the extent to which the student utilizes the learning opportunity.

It is the student's right to receive the clinical experiences necessary to prepare him/her to complete the Program as a "job ready" PT Assistant who is able to enter the profession with the necessary skills to perform in a safe, ethical, proficient manner. It is the student's responsibility to make the most of his/her learning experiences while in the clinic and to actively participate in the planning of the learning experiences and the evaluation of his/her performance.

It is the responsibility of the college program to provide the student with adequate instruction to perform the various duties of a student PTA. The college program is also responsible in determining that the student is competent and

safe in the skills stated in the clinical class objectives before placing the student in the clinic.

GOALS: To meet the Program mission and goals the clinical education portion of the Program will meet the following outcomes:

- The clinical education courses are sequenced appropriately in the curriculum to meet the goals and objectives of the clinical education program.
- The clinical education courses are of appropriate duration and length to meet the goals and objectives of the clinical education program.
- The number and variety of clinical education sites is sufficient to meet the goals and objectives of the clinical education courses in the curriculum.
- Communication with the clinical education sites is sufficient and effective.

SELECTION OF CLINICAL SITES

A variety of clinical experiences are needed to give the student the breadth of learning needed. Therefore, affiliation sites are selected among centers that are public and private, acute and rehabilitative, in-patient and out-patient, orthopedic, neurologically or medically based, adult, geriatric, or pediatric oriented.

The clinical experience must be in a center which meets the requirements for accreditation by the Joint Commission on Accreditation of Hospitals Organization; conditions of participation standards established by the U.S. Social Security Administration Documents related to physical therapy, or such facilities with comparable standards and which are acceptable to the Commission of Accreditation in Physical Therapy Education, APTA.

The PT Service must be under the direction of a PT who meets the educational requirements which would qualify him or her for membership in the American Physical Therapy Association. The ratio of PTA students to staff should be no more than two students per therapist. Clinical facilities should provide adequate space, equipment, and patient exposure to ensure an optimum learning environment for the student. Clinics with only one physical therapist must provide evidence of adequate supervision for students during the absence of the therapist.

The assignment of the students to the various clinical sites includes such considerations as clinic type, student need, student geographical location, and student & clinic personalities. Every effort will be made to provide the student with clinical settings which will foster learning and meet the clinical course objectives.

The clinical faculty must have experience in the area of clinical practice in which they teach and function as positive role models. Clinical educators are expected to maintain their Texas state licensure as a PT or PTA and to pursue professional development. Usage of clinical sites is also determined by the clinical experience, advanced study and previous teaching experience of the clinical faculty. Selection of clinical sites is based on the criteria described in the APTA document *Guidelines: Clinical Education Sites.*

CLINIC INFORMATION

In order to maintain program accreditation and verify that the clinical faculty has the expertise necessary for clinical education, the Commission on Education in Physical Therapy requires that the school maintain a copy of the completed "Clinical Site Information Form" on file. In addition, the Clinical Coordinator of Clinical Education (CCCE) at each facility must provide curriculum vitae for the file (the suggested format can be procured from the PTA Program's Academic Coordinator of Clinical Education (ACCE).

The above-mentioned forms shall be completed prior to receiving students on site initially and said forms shall be updated every five years unless there have been significant changes.

The ACCE will also interact with the clinic and the Dean of Allied Health in the maintenance of an updated clinical contract which is required before students are placed in the facility.

LIABILITY INSURANCE

Students are required to carry liability (malpractice) insurance throughout the two (2) years of the PTA Program. The insurance is included with registration fees. Please refer to your facility's contract/agreement with Victoria College for the particulars regarding liability insurance. The liability insurance coverage does not extend to student employment in a health care setting.

CRIMINAL BACKGROUND CHECKS AND DRUG TESTING

A criminal background check and drug screen is required after acceptance, prior to entrance to the program. The cost is at the applicant's expense and is approximately $70. An applicant with an unsatisfactory criminal background check must complete the Criminal History Evaluation Form on the Texas Board Website at https://www.ptot.texas.gov/page/home, as mandated by the Legislature to determine if they will be eligible to take the licensing examination after graduation. It will cost the individual with the criminal history $50 for this review. It is highly recommended this review of a negative background check be completed before entering the program, but **MUST** be completed before starting the first clinical education experience after beginning the program. Students who do not have clear background checks or negative drug tests may not be able to meet all course objectives which will result in unsuccessful completion of the program.

CONFIDENTIALITY

Students will abide by the HIPAA regulations in all agencies in which they participate in clinical experiences. Students are required to sign a HIPAA agreement at new student orientation which will be enforced through the duration of the program. Each student may be asked to sign an additional Health Information Confidentiality agreement for each applicable clinical agency.

Students who violate the provisions of the Health Insurance Portability and Accountability Act (HIPAA), such as accessing private patient information not pertinent to their role as a student health care provider or violating patient confidentiality, may be dismissed from the program.

All student information and records are considered confidential and may not be given to anyone other than the student, designated clinical instructor or CCCE, or academic institution faculty/administration without written permission from the student. Background checks/drug screens are maintained by Viewpoint and can be accessed by appropriate person at each facility. Specific academic information will not be shared with the clinical facility. Facilities are informed that students have passed all required courses and they are competent and safe to enter the clinical experience.

Course syllabi, degree plan and a skill competency list will be given to the CCCE. General student introductory information will be forwarded to the clinical instructor approximately 2 weeks prior to the clinical experience via secure email.

All information distributed by the clinic site (e.g., administrative information, patient care protocols) may not be removed from the site without permission from the clinical instructor or CCCE.

STUDENT MEDICAL DOCUMENTATION

Students are responsible to provide the online documentation manager system, Viewpoint, the following items, by the appointed due date.

- Completed PTA Program Physical Form
- Immunization support for: MMR, Varicella, and Tetanus/Diphtheria (the latter within the past 10 years), bacterial meningitis, and an annual flu vaccine or declination form.
- Hepatitis B: proof of completion of the vaccine series
- TB Test results completed within the past year (must be regularly updated so as to be current during

clinical courses)

- Current CPR card (Health Care Provider Course level- Example: American Heart Association- BLS provider or American Red Cross CPR for Professional Rescuers). Must be maintained and current during clinical courses.
- Students may not attend clinical courses without the completion of all required paperwork.
- Each student is responsible for maintaining his/her own file with copies of above items for personal records and to be shown to clinical site if requested.
- A COVID Vaccine or Exemption Status: At the discretion of the healthcare facility, proof of COVID vaccination or exemption may be required. All exemptions will be reviewed and handled on an individual basis by VC's Advising & Counseling Services office. The required documents will be uploaded by the applicant into the Viewpoint website by the date indicated on the acceptance letter. This documentation MUST be submitted prior to the first day of the first class in the PTA Program.

Late submission of above items will impact clinical course grade and/or prevent the student from starting or completing a clinical course which will be cause for dismissal from the Program. Reasonable healthcare insurance may be found at APTA.org

WRITTEN AGREEMENTS

Written agreements are in place with each clinical site utilized by the PTA Program for clinical rotations. These agreements are initiated and maintained by the Dean of Allied Health Division. The Dean's office reviews and updates all elements of the written agreement yearly for those clinics that have an annual renewal and every five years for those clinics that have an automatic renewal each year. All contracts are reviewed to ensure that they are unexpired, that the language of the contract is checked for accuracy and are adequate to meet the needs of the program and clinical facility. The PTA Program will strive to maintain a variety of clinical experience to allow the student to achieve the breath of learning in the clinical education portion of the program. Should clinic availability fall below this threshold, the program will decrease the number of students admitted to the program to accommodate the decrease. Students may review these written agreements upon request.

SIGNATURES

Due to the legal aspects of patients' clinical records, entries are signed only by the person writing them. A student will sign his or her first initial and last name followed by SPTA when charting. Example: M. Smith, SPTA. These initials will identify the Applied Associate Degree Physical Therapist Assistant Student throughout the college period.

TRANSPORTATION

Transportation to and from clinical affiliating agencies is the responsibility of each individual student. Designated parking areas for students at the various clinical agencies will be explained at the beginning of each semester. Students assigned to Citizen's Medical Center should park at the College.

SUPERVISION OF PTA STUDENTS

Clinical Practice is regulated by the Commission on Accreditation in Physical Therapy Education and the Texas Board of Examiners. The responsibility for supervision of students is shared between the academic faculty (ACCE) and the on-site clinical supervisor (CI and CCCE). Specific rights and responsibilities of both parties are listed below.

RIGHTS AND PRIVILEGES OF CLINICAL EDUCATORS

The Clinical Educator maintains the rights of any Instructor employed by Victoria College in the area of expectations of appropriate student behavior and support from the faculty of the PTA Program. The Clinical Educator may expect a timely confirmation of student assignment and an appropriate follow up during the student's stay in the facility. (Refer to "Responsibilities' delineation further on in this section).

Also, the CCCE has the right to request the removal of an inappropriate student if all approaches to counseling have proved to be unsuccessful. Documentation of any inappropriate behavior must be submitted to the ACCE as well as documentation supporting counseling sessions. The CCCE has the right to request the involvement of the ACCE during the counseling sessions and may request that the ACCE be present during the student's clinical hours as an observer.

The ACCE has the right to remove the student from a clinical setting which is not able to provide the student with a learning experience through such causes as lack of staffing, personality differences too great to rectify, a decline in treatment volume which prohibits adequate hands-on experience, or a situation in which the ethics of the PT or PTA have been proven to not be upheld. Such removal will be done only after appropriate discussion of the CCCE and ACCE has taken place.

Additionally, students may be subject to immediate dismissal from the program for any of the following:

- Making verbal (non-written) false statements:
- Failing to accurately or intelligibly report and/or document a client's status including signs, symptoms, or responses and the physical therapy care delivered.
- Giving false testimony or other evidence at any official hearing of the College or giving false information [in this case regarding the care of a client] to any faculty or staff member acting in the performance of their duties. (See Victoria College Student Handbook)
- Falsification of client's records: Failing to make entries, destroying entries, and/or making false entries in records pertaining to care of clients.
- Abandoning clients: Leaving a clinical assignment without notifying one's clinical instructor AND ACCE or in the case of emergency another instructor or a member of the PT staff in the assigned clinic.
- Any action which may have a detrimental effect on patients or staff. Withdrawal of students from the clinic may be due to, but not limited to, such behaviors as consistent unsafe clinical practices, substance abuse and/or lewd, indecent, obscene, abusive, or violent conduct.

The CCCE and all clinical instructors have the privilege of the following:

- Use of Victoria College's library during any standard operating hours
- Free parking during any scheduled meetings or events held on the Victoria College campus
- Discounts to continuing education seminar sponsored by the PTA Program at Victoria College, if available

RESPONSIBILITIES OF CLINICAL SUPERVISORS

The Commission on Accreditation in Physical Therapy Education, APTA states that the practitioner in charge of overall supervision of students must be a PT (clinical supervisor). That therapist must be licensed in the State of Texas with at least one year of experience. Exceptions to Texas licensure are: a) PT's working for the Federal Government in Texas who may retain registration in their home state; and b) PT's who have recently applied for licensure in Texas and who possess licensure in another state.

The supervising therapist may designate a staff PT or PTA, licensed in Texas, to serve as the clinical instructor for the student PTA. The designee ideally will: act as a positive role model; have at least one year experience in that setting; and show competency in the particular clinic. The supervising PT must be readily available at all times and should be involved in the evaluation process of the student.

The Clinical Supervisor/Designee:

- Must have sufficient time to devote to clinical education. Department heads may delegate primary responsibilities for clinical education supervision to an interested, qualified staff PT/PTA.

- Shall have the realization that the clinical experience is a class which is an extension of the learning begun in the school classroom and must be willing to plan learning experiences that will provide the students with the opportunity to complete the course objectives as well as:
    a) Develop positive attitudes
    b) Develop professional insight
    c) Practice skills appropriate to their educational level
    d) Practice making professional judgments
    e) Observe and practice the role of physical therapist assistant in service to the patient and patient's significant others
    f) Gain insight and growth in regards to their reactions to illness and disability

- Must be knowledgeable about the role of the PTA and Victoria College PTA Program.

- Shall confer with, teach, and counsel the student to prepare him/her for acceptance of his/her future role as an assistant.

- Shall periodically evaluate the student so that the student is aware of his/her progression and periodically confer with the faculty representative as to the student's progress and development.

- Shall accept responsibility for determining student competency and safety when he/she teaches the student a measurement or treatment procedure that has not been presented and practiced in the academic setting.

All parties involved in the education of the PTA must accept the responsibility of producing a paraprofessional who is safe, professional, and appropriate for this type of profession.

RESPONSIBILITIES OF THE FACULTY SUPERVISORS (ACCE/DCE)

- Shall arrange and confirm the schedule for clinical assignment.

- Prepare and issue student assignments for each facility in as timely a manner as possible and provide a student information sheet.

- Maintain regular contact with the clinical instructor and students in each facility to monitor student progress toward course objectives. A minimum of one face to face or phone meeting to the facility during each student's affiliation will be made, as indicated.

- Confer with the center coordinators or clinical instructors regarding clinical objectives, program development, and problems which might arise in conjunction with clinical experience.

- Counsel students independently, or in conference with the center coordinators and/or clinical instructors, regarding progress in the facilities.

- Determine the final written grade for each student based on the grading criteria as set forth in the course syllabus and PTA MACS. These criteria shall include the student's achievement of the course objectives as evaluated by the clinical faculty.

- Ensure the written student evaluations of the clinic.

- Maintain currency in school files, clinical educator manuals, etc.

- Provide training activities for the clinical instructors on an on-going basis.

CLINICAL ASSIGNMENTS:

In order to be given a clinic assignment the student is required to have passed all courses in the semesters preceding the clinical education course. Students must pass a Year One Cumulative Written Exam BEFORE beginning their first clinical experience which is after the first year of technical education in the program. Students must have passed ALL practical exams in ALL courses preceding the clinical courses.

Clinical assignments are selected by the faculty with input from the student. In selected situations, they will be posted in writing at least two weeks before the clinical experience. This may vary based on the clinical assignment. Students should check with the Academic Clinical Coordinator of Education (ACCE) with any questions or concerns about clinical assignments. It is the responsibility of the student to provide transportation to and from the clinical site. Housing will not be provided by the College or clinical site for the duration of the clinical rotation.

CLINICAL EVALUATION PROCEDURES

Clinical faculty will use the PTA MACS to evaluate the students mid-way through the affiliation as well as at its conclusion. Students are expected to complete their copy of the PTA MACS prior to the mid-term and final evaluations. The evaluations shall be reviewed and both the clinical faculty and the student shall sign the Midterm and Final Progress Report.

Complete instructions for the use of the PTA MACS are located inside its front cover. When completing the PTA MACS, both the clinical faculty and the student should make **specific** comments on each individual skill sheet and on the summative comments sheet at the end of the form.

Informal weekly evaluations should be performed which do not require written notation. If the CI and student are not able to meet each week, the student should perform a weekly self-assessment on which to base his/her feedback to the clinical instructor regarding his/her educational needs. Students are required to complete weekly progress forms that include the clinical instructor's signature. These forms are turned into the ACCE for review.

Students are to provide the clinical supervisor with an evaluation of the facility following each affiliation. This evaluation will provide the facility with the appropriate feedback to maintain clinical education program currency.

STUDENT UNIFORM AND PERSONAL APPEARANCE

- Any student who does not comply with any aspect of the uniform and personal appearance regulations will not be allowed to participate in clinical rotations. Students who are not allowed to participate in clinical rotations will not be able to progress through the Program.
- A professional appearance must be maintained at all times. The uniform shall be a maroon polo shirt with VC logo and black pants (not jeans). Uniforms should be made of non-transparent material (so that undergarments are not easily visible through the outer garment) and fit loosely for freedom of movement and comfort. Slacks or trousers should touch the tops of the shoes.
- Students may wear scrubs or other professional dress if it follows the clinical facility dress code.
- Small studs for pierced ears are permitted for women only. Only one earring may be worn in each ear lobe. No other visible body piercing, including the tongue, is acceptable.
- Shirts designed to be tucked must be tucked in.
- Shoes – No sandals. No shoes with open toes or clogs. Athletic shoes and laces must be clean.
- Name Tags: Photo identification badges will be used during the program. Arrangements for these badges will be explained to you in orientation. Nametags must be worn at all times while in the clinic. The nametag must be clearly visible. ABSOLUTELY NO ADHESIVE TAPE is to be used to cover anything on a nametag.
- Watch: Student must wear a watch in all clinical and laboratory settings. The watch must be capable of measuring seconds, and the wristband must be flexible to allow for adequate handwashing.
- Street clothes must be neat, clean, and unwrinkled.
- No denim of any type or color will be worn.

- No midriffs will be exposed.
- Tattoo coverings should follow clinic policy. No offensive tattoos may be visible. This is at the discretion of the clinic.
- No colored T-shirts in place of polo shirts are allowed.
- Hair should be neat, clean, and should be pulled back from the face so that it does not interfere with the student while performing procedures. Students will maintain good personal hygiene. Cleanliness and grooming are necessary to prevent disease transmission and are an indication of professionalism. Students should avoid extremes in hair styles. Hair styles should be such that they do not invite negative feedback from patients or agency staff.
- Facial hair on men should not impede personal protective equipment. Any facial hair must be fully grown at the beginning of the semester (it must be grown during extended breaks) and be well-groomed and closely trimmed; otherwise, the face will be clean shaven. Facial hair must be able to be completely covered by an O.R. mask or personal protection equipment. The mask or device must be able to have a complete contact seal with clean shaven skin.
- There will be no ribbons, bows, or jewelry worn in the hair. Barrettes or other elastic bands used to keep the hair back must be white or neutral color without excessive ornamentation.
- Jewelry is limited to the watch, wedding and engagement rings, and earrings as described in this policy. Rings are discouraged because they tend to tear gloves that might be worn during patient care.
- Fingernails should be clean, relatively short and well-manicured. Clear, non- chipped nail polish only can be worn with the uniform.
- Artificial nails (including overlays) are not permitted.
- Perfume, cologne, or after shave cannot be worn in patient contact areas.

STUDENT CONDUCT DURING CLINICAL EXPERIENCE/PTA PROGRAM

- The policies and regulations of the affiliating agency(s) must be respected and followed.
- Students should not discuss personal health care needs with their supervising physical therapist in the clinical setting.
- Students should avoid unnecessary and loud conversation at all times. This applies to all areas of the clinical facilities.
- Students are expected to be courteous and respectful to everyone at all times.
- Students should not have personal phone calls or visits on the clinical unit; this includes calls on cell phones. If an emergency call is necessary, the family of the student should know to route this to the college Physical Therapist Assistant Office where student schedules are maintained. An effort will be made to locate the student through the instructor.
- Gum chewing, eating, or smoking is not permitted in the clinical area.
- No use, possession, or distribution of alcohol or illegal substances while on the clinic facility premises.
- Students are to clearly identify themselves as a ***student*** PTA to all patients and staff ***BEFORE*** having any direct patient contact, thereby giving the patient the opportunity to refuse treatment by a student. Patients have the risk-free right to refuse to participate in clinical education.
- The Coordinator of Clinical Education or the Program Director of the Program has the right to request that the Dean of Allied Health Division withdraw a student from the clinical experience if their conduct or work may have a detrimental effect on the clinical facility's patients or staff. Withdrawal of student from the clinic may be due to, but not limited to, such behaviors as unsafe clinical practices, substances abuse and/or lewd, indecent, obscene, abusive, illegal, unethical or violent conduct.
- Follow all standards outlined in the **APTA Code of Ethics for the Physical Therapy Profession:**

  <u>Code of Ethics for the Physical Therapy Profession Preamble</u> (paragraph 1)
  The vision of the American Physical Therapy Association is "transforming society by optimizing movement to improve the human experience." Our profession's charge, as we strive to be an inclusive moral community that is diverse and equitable, is to meet the health needs of all people. APTA is a voluntary professional society that strives both to serve APTA members and to support the profession as a whole. Ethical conduct by physical therapists and physical therapist assistants is vital to the standing of the profession.

1: Respect
Physical therapists and physical therapist assistants shall respect the inherent dignity and rights of all individuals.

2: Integrity
Physical therapists and physical therapist assistants shall act with professional integrity and responsibility, and fulfill their respective legal and ethical obligations.

3: Accountability
Physical therapists and physical therapist assistants shall be accountable for making sound professional judgments and decisions within the scope of practice established by laws and regulations.

4: Maintaining Professional Relationships
Physical therapists and physical therapist assistants shall respect the boundaries of professional, therapeutic, organizational, and personal relationships to promote a safe environment.

5: Compassion and Trust
Physical therapists and physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients and clients.

6: Responsible Business & Organizational Practices
Physical therapists and physical therapist assistants shall promote accountable and truthful organizational behaviors and business practices.

7: Direction & Supervision
Physical therapists and physical therapist assistants shall provide appropriate and timely direction to and communication with anyone over whom they have legal supervisory responsibility.

Disclaimer
This document is an educational summary inspired by commonly accepted ethical principles in physical therapy. It is not a reproduction of the official American Physical Therapy Association (APTA) Code of Ethics. For the official and most current version, consult the APTA website.

DUE PROCESS

Students are to follow the Academic Appeal Process as outlined in Victoria College's Student Handbook to resolve any issue regarding the clinical education experience. The student and Victoria College will follow the due process as outlined by the clinical sites policies and procedures for patient complaints concerning the performance of students.

ATTENDANCE AND TIME SHEET

Students are required to keep a time sheet on which clinic hours are recorded. The clinical supervisor is to sign the time sheet each week to verify the student's attendance. The time sheet shall be returned to school, by the student, every week for review by the faculty supervisor.

All absences must be made up. It is the student's responsibility to arrange for completion of missed hours at the convenience of the clinician and with prior notification of the ACCE and CI. School holidays do NOT require make up.

Students are not to be excused from clinic except in case of illness or emergency. In the event of illness or

emergency, it is the student's responsibility to notify:

1) the clinic as soon as possible
2) the ACCE no later than 8 AM of the day involved. (The program phone is accessible 24 hours a day.)

CLINICAL TARDIES

Should the student realize that he or she will be tardy, the student should notify the clinical instructor as soon as possible. If a student is tardy one hour or less it will equal one hour of absence. If a student is tardy one hour or more it will equal an absence for the amount of time missed.

Failure to comply with this policy will mean dismissal from the program.

School Holidays:

When school holidays occur during clinic rotations, students will not be expected to attend clinic on those days if the facility is open. Clinical supervisors will be notified of school holidays by the ACCE. (Students are not required to make the holiday hours up as they have already been calculated into the total hours).

Clinic Hours

The supervising PT may request that the student alter his/her assigned hours in clinic to accommodate clinic need. It is the student's responsibility to notify the ACCE of any requested change. The student has the right to request an alteration in clinic hours to accommodate special needs; however, no change in hours at the student's request may take place without the prior approval of the ACCE.

MEDICAL RECORDS POLICY

At times students find it necessary to review their patient's previous medical records for completing the plan of care. Under no circumstances are students to make Xerox or other photostatic copies or print computerized copies of any part of patient medical records.

Students should review patient medical records during normal working hours at the clinical facility.

EVALUATION OF STUDENT CLINICAL PERFORMANCE

- Students are provided the clinical evaluation objectives/standards and process as well as the PTA MACS instrument prior to clinical experiences.

- Clinical faculty evaluate the students' performance relative to the objectives/standards. Clinical faculty provide students with verbal and written feedback regarding their performance on a weekly basis. Students have an opportunity to offer their perspective regarding clinical faculty evaluation statements during the weekly conference. Students will also assess their own performance.

- Sampling of knowledge and skills through focused questioning and observation and, grading the implementation of the plan of care established by a physical therapist using the PTA MACS instrument and other written assignments are the processes used to determine if students can deliver safe effective care and meet clinical performance objectives. If a student demonstrates a lack of level appropriate knowledge and/or preparation for skills regarding the patient assignment or previously taught content, a student is questioned and observed more frequently.

- If students do not show steady progress toward meeting the clinical objectives, they are counseled by the clinical instructor (CI), Center Coordinator of Clinical Education (CCCE), and/or Academic Clinical Coordinator of Education (ACCE) and a learning contract is formulated. The learning contract developed by the ACCE, with input from the CCCE/CI and student, will specifically address the deficiencies, learning activities related to correcting the

deficiencies and a time frame for fulfilling the contract. Students must complete all activities stipulated in the learning contract or they will not pass the clinical experience.

- Evaluation conferences are held between clinical instructors and students at midterm and at the end of the rotation or at other times during the semester if a student's performance begins to decline. The Academic Clinical Coordinator of Education (ACCE) is readily available to the students throughout the rotation should the student and/or instructor determine a need for a conference. The ACCE will meet with the student and clinical instructor either electronically or in person at least once during the clinical rotation.

- In addition to criteria defined in the College's general policies, students may be subject to immediate dismissal from the program for any of the following:

    - Making verbal (non-written) false statements:

    - Failing to accurately or intelligibly report and/or document a client's status including signs, symptoms, or responses and the physical therapy care delivered.

    - Giving false testimony or other evidence at any official hearing of the College or giving false information [in this case regarding the care of a client] to any faculty or staff member acting in the performance of their duties. (See Victoria College Student Handbook)

    - Falsification of client's records: Failing to make entries, destroying entries, and/or making false entries in records pertaining to care of clients.

    - Abandoning clients: Leaving a clinical assignment without notifying one's clinical instructor AND ACCE or in the case of emergency another instructor or a member of the PT staff in the assigned clinic.

    - Any action which may have a detrimental effect on patients or staff. Withdrawal of students from the clinic may be due to, but not limited to, such behaviors as consistent unsafe clinical practices, substance abuse and/or lewd, indecent, obscene, abusive, or violent conduct.

GUIDELINES FOR ACCIDENTS/INJURIES IN THE CLINIC SETTING

- A student who is injured or comes in direct contact with blood or body fluids, in the clinical setting, should immediately notify his/her clinical instructor AND ACCE.

- In addition to the institution's required documentation, a Victoria College Allied Health Occurrence Report will be completed (Occurrence Report form can be obtained in PTA office) by the student and submitted to the ACCE for review.

- Students injured in the clinical setting have access to the hospital emergency room or facility utilized by the clinic for medical care. The student is responsible for all expenses charged by the clinical facility in rendering medical care.

- Clinical Instructors should notify the Center Coordinator of Clinical Education or Administrative Supervisor at the agency when a student is requesting access to medical care due to student injury in the facility.

- Before returning to the classroom or clinic a student must obtain a Physician's release stating that he/she can perform all requirements of the PTA Program (refer to course objectives) without restriction.

- Students in the PTA Program are strongly urged to carry a personal health insurance policy. There is a reasonable health insurance plan available for students through the American Physical Therapy Association

(www.apta.org).

INFECTION CONTROL POLICY

I. INTRODUCTION

Concern for the safety of all students, faculty and staff of Victoria College Division of Allied Health is the basis for this infection control policy. There is a significant prevalence of infectious diseases such as HIV and hepatitis B and C which increases the risk of health care workers who will be exposed to blood and body fluids from infected clients. However, it is the belief of those in the health care profession that with the proper education, skills, training, and immunizations, faculty and students can be reasonably protected from risk of infections contracted in the course of health care delivery. Further, it is the purpose of this policy to prevent discrimination against faculty, students and staff who have certain infectious diseases by setting forth some specific protections which the school will provide its constituents.

The information in this policy is based on currently available information and will be updated as new information is forth-coming from the Centers for Disease Control. This policy will be reviewed annually. A copy of the policy will be in all Allied Health Program student handbooks and in the faculty handbooks. It is the responsibility of the faculty members and the students to familiarize themselves with this policy.

Please note that some of the situations mentioned below under the section "Standard Precautions" might not be experienced during the delivery of physical therapy services. This policy is a blanket policy for the Division of Allied Health at Victoria College.

II. ADMISSIONS AND HIRING

No prospective student, faculty member or staff member will be refused admission or employment solely because of a positive reading on diagnostic tests for infectious disease. Further, no HIV screening of applicants will be required for either admission or employment. Specifically, applicants will not be asked for their HIV status, if known, and will not be required to submit to HIV-testing if their antibody status is not known. Persons desiring to be tested voluntarily will be referred to the Victoria City-County Health Department.

Once admitted or employed, persons known to be HIV positive will not be discriminated against in terms of access to usual or normal student or employee activities and privileges over which the Allied Health Division has control.

III. STUDENT AND FACULTY IMMUNIZATIONS

STUDENTS

Upon admission to one of the Allied Health Programs, students are required to submit a history and physical examination. Immunizations must be current.

Immunizations and TB skin testing must be current in order for a student to attend the clinical learning experiences. The student is responsible for submitting proof of immunizations and for keeping them current. Any PPD conversion of a 2nd year student must be reported to the clinical agencies where the student had clinical experiences during the previous year.

Students that have been admitted to the PTA Program are required to complete the Allied Health Clinical Orientation. This will be completed through the Canvas Course "Allied Health Clinical Documentation." All designated assignments should be completed by the due date.

FACULTY

Faculty of the Allied Health Division must have current immunizations and TB testing. Any PPD conversion of a faculty member must be reported to the clinical agencies where the faculty member had clinical experiences during the previous year. Faculty will assume responsibility for meeting the requirements of clinical agencies.

HEALTH INSURANCE

It is highly recommended that faculty and students have health insurance and are responsible for their own individual or family insurance policies.

IV. CLINICAL GUIDELINES FOR FACULTY AND STUDENTS

Victoria College PTA Program provides clinical experiences in which any student may be assigned to deliver care to individuals who are HIV (human immunodeficiency virus) positive or have other communicable diseases. The students will, in all cases, be expected to treat all patients with the same concern and dignity inherent in professional standards of care. They will, at the same time, be expected to follow all guidelines for prevention of HIV and other blood borne pathogens transmission.

Before the first clinical course and prior to any patient contact, all students will be provided with:

1. The most current information on the modes of acquiring and transmitting infectious diseases in the clinical setting.
2. Thorough instruction in standard precautions to minimize transmission of infection.
3. Supervised practice in campus lab prior to actual patient care.
4. Appropriate supervision and monitoring of initial clinical experiences.
5. In addition, allied health students will learn isolation techniques related to the prevention of specific infectious diseases.

Before students will be allowed to attend clinical experience and have patient contact, students must pass a written test on infectious disease control with 100% accuracy.

As students are assigned to clinical agencies, they will be required to follow that agency's infectious disease policies and procedures.

Since needle-stick injuries are the most common form of accidental exposure to blood borne infectious diseases, needles are not to be recapped after patient use but must be placed in a sharps (puncture resistant) container immediately after use. If re-capping must be done, the one-handed "scoop" technique of recapping that is taught to all students must be practiced by all students and faculty in all settings.

Faculty are responsible for ensuring that:

1. Students utilize procedures for handling both accidental exposure and violations of safety guidelines in the care of patients.

2. Personal protective equipment (PPE) and supplies are available to the students to minimize the risk of infection; safety engineered sharps containers must be used by the students and faculty.

3. Disinfection and disposal procedures of the agency are followed.

It is essential that the faculty address student's fears, misinformation, or prejudices in regard to caring for patients with infectious diseases. In those instances where students are apprehensive or refuse to participate in caring for those patients, faculty will provide intensive education and counseling. If refusal persists, career counseling should be pursued to determine whether the student should continue to pursue a career in allied health.

Faculty or students who have open lesions or weeping dermatitis that cannot be covered with an occlusive dressing will refrain from all direct patient care. Students and faculty with any known transmissible infection will not be assigned to immunocompromised patients. Decisions regarding the patient care responsibilities of HIV positive and immunosuppressed students and faculty will be made on a case-by-case basis.

V. INFECTION CONTROL COORDINATOR

Academic Clinical Coordinator or designee will serve as the Infection Control Coordinator who will be responsible for the administrative implementation of this policy including the maintenance of confidential records (documentation of the incident and follow-up procedures that were instituted).

VI. CONTRACTS

It is the responsibility of each clinical facility to provide the appropriate and necessary equipment needed for safe practice. If this equipment is not available, it is the responsibility of the faculty member to remove the students from unsafe practice settings.

VII. NONDISCRIMINATION

No student will be required to cease attending Victoria College or participating in the college functions solely on the basis of diagnosis of a communicable disease. If a review of the facts demonstrate that a student is unable to perform as required or presents a health risk to himself/ herself, the College community, or assigned clients a decision shall be made regarding the student's attendance at the College.

VIII. STANDARD PRECAUTIONS

There is an increasing prevalence of HIV and hepatitis B and C which increases the risk for health care workers who will be exposed to blood and body fluids from infected patients.
With this in mind, it is necessary to consider <u>ALL</u> patients as potentially infected with blood borne pathogens. The following precautions are to apply to all faculty and students of Victoria College Allied Health Programs.

1. Gloves must be worn when touching:
    a. Blood and body fluids
    b. Mucous membranes
    c. Non-intact skin
    d. Handling items or surfaces soiled with blood or body fluids
    e. Performing venipuncture and other vascular access procedures (i.e. DCing IV, A-lines, IMs, etc.)
2. Gloves shall be changed between patients and hands hygiene carried out.
3. Protective eyewear shall be worn when suctioning or at any time droplets of blood or other body fluids might contaminate the eyes of the caregiver.
4. Needles are not to be recapped after patient use but must be placed in a sharps (puncture resistant) container immediately after use.

5. Needles shall not be purposely bent, broken by hand, removed from disposable syringes, or otherwise manipulated by hand.
6. Disposable syringes and needles, scalpel blades, and other sharp items shall be disposed of in the sharps container.
7. Reusable needles and syringes or other sharp items shall be left on the tray without washing and wrapped in plastic for transport to central supply.
8. Clinical agency policy will be followed by students and faculty regarding ready access to CPR masks.
9. Any break in skin integrity of the caregiver will be covered by an occlusive/ protective covering.
10. Gloves that are punctured or torn while in use shall be removed as soon as possible. Hand hygiene is to be carried out and new gloves applied to proceed with the task.
11. Laboratory specimens shall be handled with gloves on and labeled appropriately. (Put in plastic bags for transport to the laboratory.)
12. Soiled linens will be put in bags at the bedside and are not to come in contact with the uniform.
13. Gloves shall be used for providing personal care for all patients and while doing any procedure where contact with blood, or body fluids may be expected (including all times when patient's skin will be punctured i.e., injections).
14. Spills shall be removed with gloved hands and paper towels and then housekeeping should clean and disinfect the area.
15. Gloves are to be worn for post-delivery care of the umbilical cord and until all blood and amniotic fluid have been cleansed from the infant's skin.
16. Gloves must be worn when assisting the nursing mother and baby.
17. The same precautions will apply when administering post-mortem care.

IX. EXPOSURE PROCEDURE

1. In the event of exposure to blood/body fluids, the responsible faculty member will ensure that the student involved in the exposure completes an incident report according to the facility's policy where the exposure occurred and the Allied Health Division Occurrence Report. Information on the Allied Health Division Occurrence Report should contain the same information as on the facility's incident report.
2. Testing of the source patient will be done according to agency protocol and state law. Copies of the source patient's lab work will be forwarded to the student's health care provider. Students who do not have a personal health care provider will be given a list of facilities that can provide follow-up testing and counseling.
3. All expenses for any initial and follow-up testing and care of the exposed student will be paid by the student.
4. Neither the facility where the exposure occurred nor Victoria College is responsible for initial and follow-up testing or counseling of the exposed student.
5. The completed Allied Health Division Occurrence Report will be forwarded to the Allied Health Dean who, in turn, will forward a copy of the report to the Vice President of Student Services.
6. A Post Exposure Testing/ Counseling Form must be completed by the student and kept in a file maintained by the Program Director/Coordinator.
7. Should a student experience exposure or potential exposure to blood or body fluids in a campus laboratory setting, supervising faculty will implement the appropriate policies and procedures.

PREGNANCY POLICY

Students who are, or become, pregnant during their studies in the program must inform the Program Director of their status at the earliest possible time. Pregnancy is a condition that is a contraindication to the reception of several Physical Therapy modalities and as such would limit the person's ability to participate in certain lab situations which could impact the student's grades. Pregnancy could also affect a student's full participation in clinic courses.

The student who is pregnant MUST provide the Program Director with a Physician's (M.D.) release indicating her ability to participate in class and lab activities without restriction at 100% (the student shall present the appropriate course objectives to the physician for his/her consideration).

While the student who is pregnant is attending her clinic rotations, she shall provide each clinic with an updated Physician's release indicating that she is able to participate at 100% (without restriction) as a Student Physical Therapist Assistant. The release shall be based on the objectives of the clinical course and clinic facility policy and shall be updated as the student advances in her pregnancy.

Accelerated or delayed completion of required clinical hours may be requested by the student, but the final decision regarding the feasibility of such a condensed schedule rests with the ACCE and the Program Director. The student may be advised to withdraw from the program and petition for reentry after the birth of the baby. The program will make every effort to locate a clinical site for any person considered to be "at-risk" or at a less than 100% participation level.

Upon delivery of the baby and return to the program's activities, the student shall submit a final clearance from the M.D. allowing for a full return to all expected activities.

STUDENT LEARNING OUTCOMES:

FIRST YEAR (Summer II): PTHA 1266
PREREQUISITES: Admission into the PTA Program; all concurrent PTHA courses within the designated semester are required.

Upon successful completion of the course, the student will:

1. Demonstrate the practice of ethical conduct, reliability, adaptability, and regard for safety in dealing with staff, patients, and patient's families/support system, as well as adhere to legal standards of practice.
2. Read and understands referrals for treatment, therapist evaluations, and progress notes to safely deliver correct physical therapy intervention/data collection techniques within the plan of care with an intermediate level of supervision from the supervising physical therapist.
3. Demonstrate assigned interventions/data collection techniques (see PTA MACS skills list below) safely, correctly and in a timely manner when provided with a physical therapy evaluation, patient goals, plan of care and an intermediate level of supervision from the physical therapist.
4. Monitor and patient responses to intervention and modify intervention within the plan of care and report patient status to the physical therapist with an intermediate level of supervision from the physical therapist.
5. Propose the need for and implement modifications in treatment techniques when presented with patient situations which reflect abnormal response to interventions (including emergency situations) and report patient status to the physical therapist.
6. Instruct patients and their families/caregivers in the necessary information for treatment utilizing cultural humility as directed by the physical therapist at an entry level.
7. Determine and perform appropriate progression of physical therapy intervention that is within the plan of care with an intermediate level of supervision from the physical therapist.
8. Recognize and communicate one's own strengths and limitations through self-evaluation.

9. Perform appropriate and effective written, oral, and non-verbal communication with the patients, family/caregivers and members of the healthcare team.
10. Compose thorough, accurate, logical, concise, timely and legible documentation that follows guideline and specific documentation formats required by the Texas state practice act, the practice setting and other regulatory agencies for each physical therapy intervention utilized within the plan of care.
11. Demonstrate the ability to read and interpret professional literature and apply the information to physical therapy intervention and an educational presentation.
12. Administer standardized questionnaires and perform data collection within the plan of care with an intermediate level of supervision from the physical therapist.
13. Demonstrate a high level of professionalism as demonstrated by a commitment to learning, good communication skills, effective use of time and resources, appropriate use of constructive feedback, responsibility, critical thinking and problem solving, stress management, and safety.
14. Recognizes when interventions should not be provided due to changes in the patient's status and reports this to the supervising physical therapist.
15. Recognizes when the direction to perform an intervention is beyond that which is appropriate for a physical therapist assistant and initiates clarification with the physical therapist.
16. Participate in discharge planning and follow-up with an intermediate level of supervision by the physical therapist.
17. Interact with and instruct other members of the healthcare team with an intermediate level of supervision.
18. Educate patients, families and healthcare professionals about the role of the PTA.
19. Provide accurate and timely information for billing and reimbursement purposes.
20. Describe aspects of organizational planning and operation of the physical therapy service.
21. Participate in quality assurance activities with an intermediate level of supervision by the physical therapist.
22. Recognize the role of the PTA in the clinical education of PTA students and prepares to assume that role.
23. Demonstrate how psycho-social issues, age, cultural or socioeconomic background can:
    a) effect the PTA/patient relationship, b) effect how the patient may respond to treatment, and c) how to modify intervention approach.
24. Recognize when the direction to perform an intervention is beyond that which is appropriate for a PTA and initiates clarification with the physical therapist.
25. Demonstrate the ability to interview patients/clients, caregivers, and family to obtain current information related to prior and current level of function and general health status (e.g. fatigue, fever, malaise, unexplained weight loss).
26. Apply the International Classification of Functioning, Disability, and Health (IFC) to describe a patient's impairments, activity, and participation.
27. Analyze and communicate observed healthcare disparities or social determinants of health-related barriers to the supervising PT and healthcare team.
28. Demonstrates patient education and patient-related instruction to patients, family members and caregivers to achieve patient outcomes based on the plan of care established by a physical therapist exhibiting cultural humility and social determinants of health.

Activities in which the student may participate in order to fulfill the above objectives may include, and not be limited to: presenting an in-service presentation; researching and reporting on professional literature; assisting in the development and deliverance of small group instruction; writing a college-level report, case study with accompanying home exercise program, or article review(s); participating in clinical research projects; composing self-evaluation reports.

<u>SECOND YEAR (Spring Semester): PTHA 2366</u>
PREREQUISITES: Admission into the PTA Program; all concurrent PTHA courses within the designated semester.

COREQUISITES: PTHA 2339

Completion of all support courses should be completed in the semester prior to initiating final clinical practicum: (see pp. 5-6 for courses).

Upon successful completion of the course, the student will:

1. Demonstrate the practice of ethical conduct, reliability, adaptability, and regard for safety in dealing with staff, patients, and patient's families/support system as well as adhere to legal standards of practice.
2. Read and understands referrals for physical therapy intervention, therapist evaluations and progress notes to safely deliver correct interventions/data collection techniques at an entry level of ability and supervision from the supervising therapist.
3. Demonstrate assigned interventions/data collection techniques (see PTA MACS skills list below) safely, correctly and in a timely manner when provided with a physical therapy evaluation, patient goals, plan of care at an entry level of supervision from the supervising physical therapist.
4. Monitor patient responses to interventions and modify interventions as appropriate within the plan of care and report patient status to the physical therapist with an entry level of supervision/input from the supervising therapist.
5. Propose the need for and implement modifications in intervention techniques when presented with patient situations which reflect abnormal response to interventions (including emergency situations) and report patient status to the physical therapist.
6. Instruct patients and their families/caregivers in the necessary information for treatment utilizing cultural humility as directed by the physical therapist at an entry level.
7. Determine and perform appropriate progression of physical therapy intervention that is within the plan of care with an entry level supervision from the physical therapist
8. Recognize and communicate one's own strengths and limitations through self-evaluation.
9. Perform appropriate and effective written, oral and non-verbal communication with the patients, family/caregivers and members of the healthcare team, payors, and consumers.
10. Compose thorough, accurate, logical, concise, timely and legible documentation that follows guidelines and specific documentation formats required by the Texas State Practice Act, the practice setting and other regulatory agencies for each physical therapy intervention utilized within the plan of care.
11. Utilize professional medical literature to incorporate new and alternative solutions for enhanced physical therapy outcomes under the direction and supervision of the physical therapist.
12. Demonstrate the ability to read and interpret professional literature and apply the information to physical therapy intervention and a educational presentation.
13. Administer standardized questionnaires and perform data collection at an entry level.
14. Demonstrate a high level of professionalism as demonstrated by a commitment to learning, good communication skills, effective use of time and resources, appropriate use of constructive feedback, responsibility, critical thinking and problem solving, stress management, and safety.
15. Recognizes when interventions discussed in this course should not be provided due to changes in the patient's status and reports this to the supervising physical therapist.
16. Participate in discharge planning and follow-up at an entry level of supervision from the physical therapist.
17. Review health reports from, interact with, and instruct other members of the healthcare team at an entry level of supervision from the physical therapist.
18. Educate patients, families and healthcare providers about the role of the PTA.
19. Provide accurate and timely information for billing and reimbursement purposes.
20. Participate in quality assurance activities at an entry level of supervision from the physical therapist.
21. Participate in aspects of organizational planning and operation of the PT service.
22. Recognize the role of the PTA in the clinical education of PTA students and prepare to assume that role.
23. Demonstrate how psycho-social issues, age, cultural or socioeconomic background can:
    a) effect the PTA/patient relationship, b) effect how the patient may respond to treatment, and c) how to modify intervention approach.
24. Recognize when the direction to perform an intervention is beyond that which is appropriate for a PTA and initiates clarification with the physical therapist.

25. Demonstrate the ability to interview patients/clients, caregivers, and family to obtain current information related to prior and current level of function and general health status (e.g. fatigue, fever, malaise, unexplained weight loss).
26. Apply the International Classification of Functioning, Disability, and Health (IFC) to describe a patient's impairments, activity, and participation.
27. Analyze and communicate observed healthcare disparities or social determinants of health-related barriers to the supervising PT and healthcare team.

Activities in which the student may participate in order to fulfill the above objectives may include, and not be limited to: presenting an in-service presentation; researching and reporting on professional literature; assisting in the development and deliverance of small group instruction; writing a college-level report, case study, or article review(s); participating in clinical research projects; composing self-evaluation reports.

Note: The student has two rotations in this semester and should become entry level and act in an independent manner as he/she works in each setting.

It is realistic to expect that the student may not be entry level as quickly in rehab-specific or home health setting as in other settings; but evidence of student progression must be made in order to reach the ultimate goal of job-readiness by the end of the rotation. If progress is not made, the student must be counseled and the ACCE notified as soon as possible.

Any student who does not exhibit the potential for job readiness as a PTA at the end of the final rotations must be counseled and the ACCE notified as soon as possible.

CURRICULAR THREADS

- Professionalism – Demonstration of professionalism is critical in the development of physical therapist assistants. To assist in the development of the essential core values of professionalism in physical therapy we refer to the document authored by the American Physical Therapy Association: *Professionalism in Physical Therapy: Core Values.*

- Diversity and Cultural Competence – This concept is addressed in evaluative criteria for accreditation of educational programs by the Commission on Accreditation of Physical Therapy Education (CAPTE). It is a critical core component of professional practice in physical therapy. "Achieving cultural competence as a physical therapist or physical therapist assistant is a process that is cultivated within the individual through acquisition of knowledge, attitudes and behaviors specific to culture, language and communication" (APTA: *Guide to PT Practice & FSBPT Content Analysis*).

- Evidence-based Practice – The application of evidence-based practice is critical in the delivery of physical therapy intervention in today's healthcare system. To do this, students require preparation for active critical thinking and problem-solving processes as well as the ability to access relevant research to guide their practice.

- Self-Assessment and Professional Growth – Emphasis will be placed on self-assessment of skills and abilities throughout the PTA curriculum. To remain current and relevant in the field of physical therapy it is crucial for PTAs to identify their needs for professional skill development. The goal will be to establish the student as a life-long learner.

GRADE DETERMINATION

The student's final grade for the clinical class will not be the sole responsibility of the clinical instructor. Rather, the final grade is composed of several weighted items and is the responsibility of the ACCE or assigned faculty member.

The grade focuses on the completion of the course objectives through the: completion and timely return of all required paperwork; time completed in the clinic; mid-way and final evaluation as denoted on the PTA MACS (including thorough self-assessment by the student) as well as the written and verbal comments made by the clinical faculty; completion and correctness of any project required by the ACCE or clinical rotation

The clinical instructor may deem it necessary for a student to practice a treatment procedure student to student or instructor before implementing the procedure on a patient. Any student who feels uncomfortable about receiving or giving practice treatments of said procedures has the right and the responsibility to discuss their concerns with the clinical instructor and program director before the onset of the activities. Measures should be taken to ease the person into full participation as appropriate. If the student has any contraindication with regards to receiving any practice treatment the student must have a written note from a physician excusing them from receiving the practice treatment. Continued non-participation may have a negative impact on the student's grade.