

ORANGE COUNTY COMMUNITY COLLEGE
Middletown, New York
PHYSICAL THERAPIST ASSISTANT DEPARTMENT
845/341-4280

CLINICAL EDUCATION POLICIES & PROCEDURES

I. RESPONSIBILITIES OF THE CLINICAL AFFILIATION

***Center Coordinator of Clinical Education (CCCE)**

- A. Establish a liaison with the academic institution.
- B. Coordinate and arrange student's clinical education experiences at the affiliation site.
- C. Notify Academic Coordinator of Clinical Education (ACCE) of pre-clinical requirements, such as the need for drug screening or a background check and if student is responsible for the fees pertaining to obtaining this information.
- D. Complete the following forms for the academic institution: Contractual Agreement and Clinical Site Information Form. Update these forms as required.
- E. Maintain records on clinical center and clinical faculty evaluations, and also information and correspondence related to clinical education.
- F. Provide overall student supervision which includes assigning the student to a clinical instructor (see attached list of criteria for selecting a clinical instructor (PT or PTA) following Section I). Ensure that a licensed physical therapist is assigned to provide on-site supervision, not necessarily direct personal supervision. All clinical education sites must follow the dictates of their State Practice Act and reimbursement requirements.
- G. Encourage clinical instructor to attend orientation/training meetings on the role of a clinical instructor (CI) provided by the College, and assist in educating the CI about the content of the student evaluation form.
- H. Attend annual Clinical Educators' Meeting for faculty development and assist in formulating goals/activities for the following year; answer questionnaire following meetings to provide feedback to the academic institution.
- I. Arrange student hours in clinic so that the student does not work in excess of 40 hours/week for the Clinical Education III or in excess of 8 hours/day (not counting lunch) in the Fall and/or Spring. In the happenstance that clinic is open less than 8 hours/day, please call ACCE to discuss alternatives, such as student attending extra clinic days.
- J. Delegate appropriate responsibilities to the clinical instructor.
- K. Share information with CI (as it pertains to student interaction/faculty development) from meetings, minutes of meetings, memos, Evaluation of Clinical Experience & Clinical Instruction.
- L. Provide the student with a complete orientation, including:
 - a tour of the facility and the physical therapy department
 - introduction to staff
 - review of pertinent policies and procedures, including discussion of:
 - HIPAA regulations, including protected health information/confidentiality

- safety when dealing with body substances and hazardous materials
 - emergency procedures (i.e. code, fire)
 - security and evacuation procedures
 - access to emergency services
 - safety in the use of equipment in the clinical setting
 - informed consent
 - discussion of the role of a physical therapist assistant at your particular facility
 - discussion of your expectations for the student during the clinical experience
 - the student should be given an orientation form (provided by the College and completed by you) or your own student manual or handbook
 - discussion of mandatory case study or in-service, including due date
- M. Provide the student with a list of the Center's policies and procedures regarding patients', patients' families', and coworkers' rights, privileges, and safety procedures. Have the responsibility to preserve the privacy, dignity, and safety of all persons including patients/clients, patients'/clients' families, students, academic and clinical faculty, practitioners, and supporting staff who are involved in the academic and clinical portions of the program.
- N. Inform the College if a change in staff creates a newly designated center coordinator of clinical education so that an orientation to the College PTA Program can be provided to the new CCCE.
- O. Submit an annual evaluation of the Physical Therapist Assistant Program
- P. Maintain student confidentiality (discussion of grade and/or student performance should be only with appropriate professional staff on a "Need-to-Know" basis); a student's physical, if requested, should be shredded **immediately** upon student's completion of his/her clinical affiliation.
- Q. Participate in Employer Program Evaluation Summary, if requested.

**** Clinical Instructor (C.I.)**

- A. Attend orientation/training meetings to learn the role of a clinical instructor and become familiar with the student evaluation form and grading system.
- B. Continue to attend annual Clinical Educators' Meetings for faculty development and assist in formulating goals/activities for the following year; answer questionnaire following meetings to provide feedback to the academic center, including making suggestions for meeting topics and or college workshops..
- C. Review the "PTA Student Evaluation of Clinical Experience & Clinical Instruction" sent from the academic center prior to contact with a newly assigned student. This form is meant to serve as a guideline for you to understand your role as a clinical instructor (see attached form following page 6).
- D. Be aware of the student's amount of experience at each previous affiliation by reviewing the "Procedures Frequency Chart" submitted prior to the student's affiliation. This information, in addition to the information contained in the Student Introduction Form, is designed to be helpful in planning a meaningful customized learning experience. The Academic Sequence Summary attached to the back of your student's evaluation form will make you aware of the academic topics the student has had, is presently taking, and has not as yet had.
- E. Serve as an appropriate role model for the student.
- F. Provide own transportation to off site satellites, home care patients, etc., students provide their own transportation to and from clinical sites as well. If a CI prefers to have a student ride with him/her during clinical hours and the student agrees, it is with the mutual understanding that in the event of an automobile accident, that the CI's automobile insurance carrier is considered primary and the agency/facility that the CI is employed by would have secondary responsibility for liability for student injuries. CI is requested by student to sign a contract form.

- G. Supervise the student who has been assigned to you appropriately for his/her level of clinical education. Discuss and demonstrate treatments and procedures with which the student may be unfamiliar to broaden his learning experience, including allowing the student hands-on experience as soon as possible. If the clinical instructor teaches the student an assessment or treatment method that has not been presented or practiced in the academic setting, the clinical instructor is responsible for determining if and when the student should apply the method to a patient following the CI's instruction to the student. Throughout the clinical affiliation, the CI will supervise the student adequately to insure patient and student safety.
- H. If the Clinical Instructor is a PTA, a licensed physical therapist must also be assigned to provide on-site supervision, not necessarily direct personal supervision. If the Clinical Instructor is a PTA, supervision of the PTA student should include appropriate interaction with the supervising PT. All clinical sites must follow the dictates of their State Practice Act.
- I. If the clinical site employs both PTs and PTAs, a PTA student should be provided with appropriate role-modeling of the PT/PTA relationship which is characterized by trust, mutual respect, cooperation, effective on-going communication, problem-solving and teamwork.
- J. Assist student in understanding facility requirements for documentation (progress notes, flow charts, incident reports, etc.) as well as provide opportunity for student to participate in the documentation process.
- K. Encourage the student's practice of reading and interpreting professional literature.
- L. Assign student a project to be done across the semester, such as a case study or in-service (**Mandatory** for all clinics) and discuss at the beginning of the semester the approved topic and due date so that the student will have sufficient time to complete project. However, since students in Clinical Education I & II are simultaneously attending academic classes along with attending their clinical affiliations, we ask that students not be asked to do two or three in-services.
- M. Provide special experiences, such as attendance at conferences, clinics, surgery if this is possible.
- N. Provide opportunities for students to learn through participation and/or observation such activities as administration, quality assurance, financial considerations, supervision of other supportive personnel.
- O. Assist student in understanding of levels of authority and responsibility; planning, time management including scheduling of patients, supervisory process, performance evaluations, policies and procedures, and ordering of equipment.
- P. Introduce the student to the patient so that the patient clearly understands that the student is indeed a student; if students introduce themselves to the patient(s), the same principle applies. Students are required to wear a visible name tag with their student status listed.
- Q. Discuss the student's performance with him on each clinic day providing on-going pertinent and timely feedback. Be honest and constructive! If you see something that isn't up to your expectations, point it out immediately. Otherwise, your subliminal message to the student is that he/she is doing okay and no modifications need be made. Don't wait until the midterm or final evaluation to tell the student he/she needs to make improvements. These should be identified as soon as possible so the student can begin to improve.
- R. Ask the student high level, thought provoking questions so that the student has to come up with the solutions or interventions rather than you providing them.
- S. Describe to the student the criteria for obtaining each letter grade for the student's particular clinical education level at your particular facility.
- T. If your clinical facility is a "one-man" department, inform the college if your absence necessitates re-scheduling of student time.

- U. Notify the academic clinical coordinator if a student's overall performance is unsatisfactory prior to the midterm so that the student will receive immediate remediation as well as a warning notice from the college Registrar's office.
- V. Review the mid-term evaluation and the final evaluation including the final grade with the student prior to submitting the form to the college. Document with specifics. Also include student's absence, early and/or make-up days.
- W. Collaboration is required for the student's final grade when student has essentially been supervised by two Clinical Instructors, especially when student has been assigned to two different clinical settings (example: in-patient and out-patient settings).
- X. Discuss the "Evaluation of Clinical Experience & Clinical Instruction" completed by the student at the mid-term and final to allow for potential on-going changes based on the feedback.
- Y. Clinical Instructors are asked to provide statistical data and sign off on page 3 of the "Evaluation of Clinical Experience and Clinical Instruction" Form at the end of the student's clinical experience.
- Z. Optional: Consider completing Section 2 of the "Student Evaluation of Clinical Experience & Clinical Instruction" (sent to you as a guideline prior to the student's affiliation) as a self-evaluation at the end of the student affiliation and compare the results with the form completed by the student.
- AA. Encourage student's participation in continued development of knowledge and skills beyond the clinical affiliation time period.
- BB. Preserve the privacy, dignity, and safety of all persons including patients/clients, patients'/clients' families, students, academic and clinical faculty, practitioners, and supporting staff who are involved in the academic and clinical portions of the program, i.e. discussion of grade and/or student performance should be only with appropriate professional staff on a "Need-to-Know" basis; a student's physical should be shredded **immediately** upon student's completion of his/her clinical affiliation.

ORANGE COUNTY COMMUNITY COLLEGE
Middletown, New York
PHYSICAL THERAPIST ASSISTANT DEPARTMENT

CRITERIA FOR SELECTING A CLINICAL INSTRUCTOR

The following is a list of criteria which is to be used in selecting a staff member to serve as a clinical instructor. The list contains personal as well as professional qualification.

THE CLINICAL INSTRUCTOR MUST:

1. Be a licensed physical therapist or a certified physical therapist assistant with a minimum of one year's clinical experience. However, a licensed physical therapist must be assigned to provide on-site supervision, not necessarily direct personal supervision. All clinical sites must follow the dictates of their State Practice Act and reimbursement requirements.
2. Want to be involved with the student program and therefore never resent being assigned a student.
3. Possess such personal traits as enthusiasm, patience, sensitivity to others and be supportive.
4. Read and strive to follow the set of guidelines provided by the college which outline clinical instructor skills (see attached).
5. Read the "Academic Sequence Summary" and the "Procedures Frequency Chart" enclosed with the "Evaluation of Student Performance" form in order to be aware of the student's present academic level and previous clinical experiences.
6. Be willing to familiarize himself/herself with the student evaluation form in order to understand the method used for the rating scale and grading system so that it is used in a uniform and objective manner.
7. Supervise the student who has been assigned appropriately for his/her level of clinical education.
8. Discuss and demonstrate treatments and procedures with which the student may be unfamiliar to broaden his learning experience, including allowing the student hands-on experience as soon as possible. If the clinical instructor teaches the student an assessment or treatment method that has not been presented or practiced in the academic setting, the clinical instructor is responsible for determining if and when the student should apply the method to a patient following the CI's instruction to the student. Throughout the clinical affiliation, the CI will supervise the student adequately to insure patient/client and student safety.
9. Collaborate student's final grade with other clinical instructors as appropriate.
10. Allow time at mid-term and final to discuss the student's "Evaluation of Clinical Experience & Clinical Instruction" form to be able to implement appropriate suggestions and provide statistical data on page 3 of this form.
11. Understand role as a teacher and role model rather than just an evaluator.
12. Be able to attend Clinical Educators' meetings for continuous faculty development.
13. Participate in continuing education for on-going professional growth.

**Implementation of APTA's
"Physical Therapist Assistant Student Evaluation
of Clinical Experience and Clinical Instructor"**

Our Physical Therapist Assistant students are now using the APTA's standardized form for evaluating their clinical experiences/instruction. This form introduces 2 new factors: mid-term as well as final feedback and face-to-face discussion of feedback. The main purpose of this type of evaluation form is to encourage students to communicate their needs earlier, which would allow the CI the ability to make mid-course changes as deemed appropriate.

The sequence will be the following:

- Midway through the semester, the midterm portions of "Section 2: PTA Student Assessment of the Clinical Instructor" will be discussed by the student with his/her Clinical Instructor(s) individually. Student is to keep form(s) at this time
- The student will review the Section 2 form(s) with the ACCE during his/her midterm conference at the college
- At the end of the semester, the student will complete the final portions of Section 2 described above, as well as "Section 1: PTA Student Assessment of the Clinical Experience." The student will discuss with his/her designated Clinical Instructor(s) individually and/or the CCCE
- Clinical Instructor(s) will add information and sign the General Information page (page 3) and return all sections of the form to the student
- Student will submit form to PTA Department ACCE who will mail copies of all sections to the Center Coordinator of Clinical Education (CCCE) at the student's clinical affiliation as we have always done in the past

*******FOR YOUR AWARENESS*******

It is the decision of the PTA faculty of Orange County Community College to share the information contained in #'s 15, 17 and 19 only in Section 1 and to NOT share any portion of Section 2 with future PTA students.

II. RESPONSIBILITIES OF THE COLLEGE

Academic Coordinator of Clinical Education-ACCE

- A. Arrange and conduct orientation visit at prospective clinical affiliation(s) in order to:
- survey facility
 - meet with appropriate staff members
 - discuss all policies, procedures, and curriculum of our program with Center Coordinator of Clinical Education (CCCE)
- B. Provide clinical affiliation with the following:
1. Pre-Clinical Forms
 - Contractual Agreement
 - Clinical Site Information Form
 2. Information Sheets
 - a. Course Outlines (academic and clinical education)
 - b. Clinical Education Policies & Procedures (including Student Evaluation of Clinical Experience & Clinical Instruction)
 - c. Criteria for Selection of a Clinical Facility
 - d. Policy Statement of Education & Utilization of the PTA
 - e. Standards of Ethical Conduct for the PTA
 - f. Clinical Teaching Tools
 - g. Clinical Teaching in Physical Therapy Education
 - h. Evaluating Teaching a Skill
 - i. Problem-Solving Worksheets
 - j. Behaviors of Problem Solvers & Non-Problem Solvers
 - k. Identifying Student's Problems
 - l. Effective Management of Students Posing Challenging Situations in the Clinic
 - m. Developing a Clinical Education Learning Contract
 - n. How to Conduct an Appraisal Conference
 - o. Rating Facilitative Communication
 - p. 50 Ways to Say "Very Good"
 - q. PTA Department Library Listings (Books, Videos)
 - r. Clinical Educators' & Adjunct Faculty Rights & Privileges
 - s. Role of the PTA and PTA Student
 3. Individual Student Forms
 - a. Student Introduction Form
 - b. Student Orientation Form
 - c. Summary of Orientation
 - d. Procedures Frequency Chart/Evaluation of Student Performance
 - e. Evaluation of Clinical Experience & Clinical Instruction
 - f. Evaluation of Academic Coordination
 - g. 2 Year Program Evaluation
 - h. Graduate Follow-Up Form
- C. Maintain liaison between the clinical center and the academic center through faculty visits, telephone calls, meetings, memos (approx. 35/year).
- D. Provide orientation to newly designated Center Coordinators of Clinical Education in current affiliations.

- E. Orient new Orange County Community College faculty who participate in visiting students at their clinical affiliations.
- F. Conduct orientation session with Freshmen prior to students attending first clinical affiliation in order to review course syllabus and all aspects of this phase of our program including behavioral objectives and the content of the clinical education evaluation form and grading system.
- G. Provide student access to Clinical Site Information Form.
- H. Make appropriate student assignments after reviewing student Clinical Affiliation Preference sheet and considering student's previous clinical experiences.
- I. Provide college faculty with updated packet of Orientation materials prior to their visits to students at their clinical affiliations, including the students' first impressions of their clinical experience via the "Summary of Orientation" sheets.
- J. Assigned faculty members visit each student 1-2 times during each clinical affiliation; discuss student's present status with student & clinical instructor; orient new clinical instructor as to Evaluation of Student Performance form and grading system; counsel student regarding clinical behavioral problems; guide CI with remediation techniques to improve student outcome, including assisting with learning contract if deemed necessary.
- K. Obtain verbal and written feedback regarding faculty visits to clinical sites.
- L. Promote effective communication between students and clinical faculty.
- M. Schedule and conduct individual mid-semester & final conferences with each student in order to review the student's performance in all areas of clinic. Review student's Evaluation of Clinical Experience & Clinical Instruction as well as the Clinic's Evaluation of the Student.
- N. Conduct meeting with Clinical Education I students one week into the semester to review all aspects of clinical education and to offer encouragement and/or target any concerns.
- O. Research materials for presentations to clinical coordinators/instructors.
- P. Schedule and conduct a Clinical Educators' meeting annually for clinical faculty development; and conduct orientation meeting for newly designated clinical instructors each year.
- Q. Keep all records and correspondence connected with the clinical education up-to-date, including minutes of clinical educators' meeting notebook, resource notebook, class information notebook, curriculum changes summary.
- R. Conduct a yearly review of course syllabus, various clinical forms, clinical policies and procedures, and make any necessary revisions.
- S. Review new contracts and renew term contracts; submit current clinical affiliation list for updated certificates of insurance to be distributed annually.
- T. Review completed questionnaires following Clinical Educators' Meetings and act on appropriate suggestions.
- U. Review Annual Program Evaluations from clinical coordinators and students, write as composites for statistical review, and act on appropriate suggestions.

- V. Present annual revisions in clinical education course; discuss feedback from students (Graduate Follow-Up Form) and (2 Year Program Evaluation), clinical coordinators (Annual Program Evaluation) and employers (Employer Program Evaluation Summary) at Advisory Board Meeting.
- W. Write course evaluation following each semester.
- X. Maintain student confidentiality (discussion of grade and/or performance should be only with appropriate professional staff on a “Need-to-Know” basis); references are to be given with student permission.
- Y. Preserve the privacy, dignity, and safety of all persons including patients/clients, patients’/clients’ families, students, academic and clinical faculty, practitioners, and supporting staff who are involved in the academic and clinical portions of the program.
- Z. Monitor status of student CPR certification/recertification.
- AA. Provide web enhancement to Clinical Education I & II to increase students’ awareness of announcements, course information, course documents (which can be downloaded) and external links.
- BB. Maintain updated department website at <http://orange.cc.ny.us/pta> which includes admission requirements, philosophy/mission/goals, essential functions, student information/news, course sequence/description, physical therapy links, faculty contacts, accreditation status, a copy of department student handbook, “Information for Perspective Physical Therapist Assistant Students” packet, and up-coming college workshops.

III. RESPONSIBILITIES OF THE STUDENTS

- A. Adhere to the code of student conduct as stated in the Orange County Community College Student Handbook. This code applies for both academic and clinical affiliation experiences; students are also expected to follow the Standards of Practice for Physical Therapy, the Standards for Ethical Conduct for the Physical Therapist Assistant, and the Guide for Conduct of the affiliate member; comply with all rules/regulations of assigned clinical education site.
- B. Complete a Clinical Affiliation Preference Sheet.
- C. Attend orientation lecture given by ACCE describing clinical education program (prior to attending first clinical affiliation and a subsequent lecture at the beginning of the Fall semester to review clinic expectations and discuss content of the Evaluation of Student Performance.
- D. It is required that each student has a complete physical examination prior to beginning the core classes. Students will be required to have annual physicals until the core program is completed. This should be done **early** in the month of July (not earlier) and the completed forms must be submitted to the Health Center no later than August 7. If physicals are received after this date, a **\$25 penalty** will apply. Each student should obtain a copy of his/her “Health Clearance Form” from School Health Nurse following submission of physical exam form so that a copy of this information can be submitted to each of his/her three clinical affiliations. The original form is to be retained by the student for the entire school year. The Health Clearance Form will be **mailed** to students who submit their physical exam forms with **ALL** required information by the due date. Students with **incomplete** or **late** physicals will need to obtain the Health Clearance Form “in person” from the Health Office **after** submitting required information and/or late physical exam form plus late fee. Without the Health Clearance Form, a student will be prevented from participating in laboratory sessions (non-participating observation will be considered an absence); and student will also not be permitted to attend clinic at any site. Physicals are good for one year. Students who fulfill Clinical Education III requirements after Summer Session I will be required to have a **third** physical and another Mantoux prior to beginning Clinical Education III (due in Nurse’s office by June 1). However, most students will be assigned to Summer Session I and third physical and Mantoux will not be

necessary. **NOTE:** A new law requires meningitis documentation to be submitted by student (either date of meningitis vaccine in the past 10 yrs. or acknowledgment of receipt of meningitis/vaccine information, and refusal of the meningitis vaccine).

****Please note there may be individual requests from certain clinical affiliations, i.e. a request for Mantoux within the last month, a pre-clinical drug test, a pre-clinical background check etc. Therefore, contacting a clinic early (at least 6 weeks early) allows the student ample time to meet any additional requirements.***

Along the same lines, student must provide proof (to ACCE) of current **professional level** CPR Certification prior to attending Clinical Education I and proof of recertification, if necessary, prior to Clinical Education II or III to document certified status throughout all clinical affiliations. The CPR course level must be American Red Cross for the Professional Rescuer (1 year term) or American Heart Association's BLS for the Health Care Provider (2 year term). Failure to maintain professional level CPR certification will result in the immediate removal from clinic with a resulting grade of "F."

- E. In the event that a student has surgery, a hospitalization, a significant change in medical status, or becomes pregnant, the student must notify the department chair immediately. The department chair requires that the student have permission from his/her medical physician to participate in class, laboratory, or clinical experiences. Please note that certain medical conditions may require the postponement or rescheduling of class, laboratory or clinical experiences and can result in a later completion of the program/graduation. If an injury occurs in the clinical education setting, student may be required by the facility to seek medical attention for that injury; the financial responsibility will still belong to the student (whether by personal health insurance or by personal payment).
- F. Be aware of contents of course syllabus including student responsibilities section as well as Evaluation of Student Performance. Sign Student Policies/Responsibilities Acknowledgment Form for student file.
- G. Review assigned clinical facility's file (CSIF) prior to attending clinic in particular Part II, Student Information which includes transportation, required medical information, whether student may be required to submit to a drug test and whether a criminal background check is required (check with ACCE).
- H. Provide transportation to and from the clinical affiliations as well as during the clinical affiliations unless CI requests student ride with him/her and the student agrees to this arrangement. If student chooses to ride with CI, student must obtain CI signature on consent form (a blank form will be mailed to you prior to every clinical education experience).
- I. Make telephone contact with Center Coordinator of Clinical Education (CCCE) at your assigned clinical affiliation at least six weeks prior to first day to arrange for first day in clinic and to become aware of the specific clinical affiliation hours, whether student is to mail a copy of Health Clearance Form prior to attending clinic, the possibility of attending early days, (only in Spring Semester or Summer Session; **no early** start in the Fall Semester due to required "Review Day" prior to starting Clinical Education I), the possibility of being asked to participate in a clinical education site's drug testing program or participate in a background check (notify Academic Coordinator of Clinical Education), whether clinic requires student to wear a lab coat over PTA Department required uniform,. Students who do not successfully complete these tests, or refuse to comply with these mandates will receive a grade of "F" for the clinical affiliation. Furthermore, students will be required to show proof that they are "substance-free" prior to being assigned to a new clinical assignment. Students may be required to audit PTA core courses while waiting for their next clinical assignment. Failure to successfully pass a drug test for a second time will result in permanent removal from the PTA program. Students who are removed from clinic due to negative criminal background checks must make restitution before another clinical affiliation will be attempted.

**** Students who are assigned to a clinic that has one or more "short" day (less than 8 hours) must contact Academic Coordinator of Clinical Education (ACCE) immediately to discuss alternatives for making up for the inadequate hours, such as starting clinic earlier in the semester, also attending clinic on a Friday if***

schedule allows, etc.

**Students who are assigned to a pediatric setting in the Spring Semester must contact the assigned clinic immediately to discuss either attending a minimum of two early days in January or attending make up days on Friday if the clinic can accommodate and the students' schedule allows. All students are required to make up all absences due to illness or inclement weather (even if the clinical affiliation closes or the College closes on an affiliation day. If the weather is cooperative and the student has no absences, any early or extra days will allow the student to complete clinic up to one week early.*

- J. Review infection control, blood borne pathogens, universal precautions, and management of exposure to blood and other potentially infectious material.
- K. Attend "Review Day" on scheduled day prior to beginning of Fall Semester. Students are not allowed to start their Fall clinical affiliation early but this option is available to students in the Spring semester.
- L. Arrive at clinic at least 10 minutes prior to assigned time; it is helpful to wear a watch and bring a pen and index cards.
- M. Wear appropriate uniform/shoes and mandatory name tag as described in course syllabus; your clinic may require you to wear a lab coat over your uniform. In addition to wearing your name tag which identifies you as a student, either your CI or you should introduce you as a student to any patient/client with whom you will be working.
- N. Complete the following forms at the appropriate time for each clinical education session:
 - a. Student Introduction Form including optional photograph
 - b. Summary of Orientation
 - c. Writing assignments as described in the course outline
 - d. Evaluation(s) of Clinical Instruction - Section 2 (midterm & final)
 - e. Evaluation of Clinical Experience – Section 1 (final)
 - f. Evaluation of Academic Coordination of Clinical Education following each semester
 - g. Procedures Frequency Chart following Clinical Education I and II
- O. Call clinical instructor to report absences prior to expected arrival time; also report absence to visiting faculty member and to the college office (even if college has closed due to inclement weather). Be responsible for timely communication with designated individuals involved with the program.
- P. Arrange make-up sessions for any absences. Students are also required to contact PTA Department regarding early/extra and/or make up days as soon as they are completed.
- Q. Maximize the learning experience by asking appropriate questions and being alert to all aspects of clinical education experiences. During occasional low patient census, it is still your responsibility to maximize your learning experience by practicing with equipment, reading modality manuals, reviewing office procedures, visiting other related departments as arranged by CI, working on clinical assignments, (including mandatory case study or in-service).
- R. Do not attempt to carry out a procedure that is unfamiliar to you. When in doubt, ask for assistance. Remember that the patient's/client's safety is the primary consideration.
- S. Maintain confidentiality of information regarding classmates, instructors, patients/ clients and the clinical affiliations (staff, instructors), including following HIPAA regulations. Legally a patient may be discussed with someone else only on a "NEED TO KNOW" basis, i.e. discuss specific patient with other team members, but not with classmates, relatives, etc. Not only specific patient information, but even the fact that the specific person was a patient is CONFIDENTIAL information!
- T. Do not discuss your personal problems with patients/clients who are trying to deal with their own problems.

- U. Exhibit professionalism at all times which includes having professional appearance (including personal hygiene, appropriate uniform, make up), not using inappropriate language, being punctual (which means arriving *prior* to your assigned hours), abiding by regulations of the facility, abiding by state and federal laws/regulations, respecting others including sensitivity to diversity, contributing to harmonious environment, being trustworthy, ethical, safe, courteous, accepting responsibility, accepting criticism, not allowing personal affairs to interfere with duties/obligations, maintaining confidentiality as described in section S and completing clinical assignments promptly which includes mandatory case study or in-service at each clinical affiliation.
- V. Never indicate to a patient/client that you feel his/her treatment with another professional was inappropriate or inadequate. If patient/client initiates this type of discussion or asks about prognosis, you should defer to the supervising physical therapist.
- W. Bring any potential problem or difficulty to the immediate attention of college or facility, rather than waiting for clinical visit or scheduled conference. Students are encouraged to contact the academic coordinator of clinical education, the clinic liaison, or any faculty member to ask questions or discuss a problem as it arises.
- X. Be aware of Clinical Education Courses' web enhancements at <http://orange.sln.suny.edu>.
- Y. Attend mid-semester and end of semester meetings with CI to discuss the student performance evaluation the CI has completed and the "Student Evaluation of Clinical Experience & Clinical Instruction" which you have completed for shared communication.
- Z. Attend mid-semester and end-of-semester conference with academic coordinator of clinical education (ACCE). During Clinical Education III, attend final conference at the completion of clinic.
- AA. Participate in the on-going assessment of all aspects of the physical therapist assistant program including completion of "Two Year Program Evaluation" and "Graduate Follow-Up Form."
- BB. Provide college office with current address and current job status immediately after graduation and thereafter as changes occur so that the college file will be updated and continuously accurate.
- CC. Obtain prior written approval from the College and Clinical Affiliation before publishing any material relative to the clinical experience.
- DD. Through academic learning and clinical experiences, the student will understand the role and responsibilities of the physical therapist assistant in the physical therapy delivery system. The student's performance will reflect the following:
 - an understanding of levels of authority and responsibility; planning, time management including scheduling of patients/clients, supervisory process, performance evaluations, policies and procedures; fiscal considerations for physical therapy providers and consumers; ordering of equipment; and continuous quality assessment for performance improvement,
 - participation in the review of current professional literature,
 - a commitment to continuing personal and professional growth through self-directed learning.
- EE. Have the responsibility to preserve the privacy, dignity, and safety of all persons including patients/clients, patients'/clients' families, students, academic and clinical faculty, practitioners, and supporting staff who are involved in the academic and clinical portions of the program.
- FF. Following graduation, if working via a limited permit prior to certification, be aware of your responsibility to sign patients' progress notes with your signature followed by "PTA-limited permittee." A PTA graduate is not to begin working until the limited permit number is actually issued. If a graduate is working via a 6 month limited permit and has not obtained his/her certification during the six months, the graduate must apply for another 6 month limited permit if the graduate wishes to continue working until the National

Physical Therapy Exam has been taken, passed and the state licensing agency has issued a certification/ license/registration number. (PTAs become certified in the State of New York.) Be aware that obtaining a second 6-month term limited permit is not automatic and that you must have registered and paid to take the NPTE in order to be considered for a second limited permit. Other considerations may prevent the granting of a second 6 month limited permit. Check with the New York State Education Department. It is strongly recommended that students arrange to take the NPTE soon after graduating from the Program.

The following statements are being included for all participant's awareness:

- Orange County Community College is committed to the principles of non-discrimination and equality of opportunity for all qualified applicants, students and employees. Any questions or allegations should be directed to the college's Human Resources Office, phone (845) 341-4660. Grievance Procedure for the Review of Allegations of Illegal Discrimination or Sexual Harassment.
- In its continuing effort to seek equity in education and employment and in support of federal and state anti-discrimination legislation, Orange County Community College provides an internal grievance procedure for the prompt and equitable investigation and resolution of allegations of sexual harassment or illegal discrimination on the basis of race, color, national origin, religion, age, sex, disability, marital status, or sexual orientation.
- Both Section 504 of the Rehabilitation Act, 29 U.S.C.A. Section 794, and the Americans With Disabilities Act prohibit discrimination against "otherwise qualified" persons with a disability. If an applicant can perform those "essential functions," he or she is "otherwise qualified" under the law and must be treated the same as people without a disability. A person who cannot perform the "essential functions" is not "otherwise qualified" and may be denied access to the program without being subject to legal action for discrimination.

CHARACTERISTICS OF AN EFFECTIVE STUDENT

1. *Independent*, able to take the initiative.
2. *Thirsty for knowledge*, open to learning, seeks information.
3. Looks up information.
4. *Flexible*.
5. Establishes a good rapport with others.
6. Asks thought provoking questions; *inquisitive*.
7. *Enthusiastic*, positive attitude.
8. *Confident* with present knowledge base.
9. *Listens* to feedback and acts on it.
10. *Gives feedback* to CI: indicates own needs.
11. *Honest* with CI if having difficulty with a concept.
12. Willing to try even if unsure of self.
13. Aware of own strengths and limitations.
14. Takes a genuine interest in facility's area of practice.
15. *Actively participates* during treatment sessions and offers ideas.
16. Brings fresh ideas and is willing to verbalize them.
17. Has good basic knowledge and evaluation skills.
18. *Observant* to "little things" about patient, family and others.
19. *Creative*.

These characteristics are adapted from part of a pilot project conducted by the Department of Physical Therapy, at the Medical College of Georgia. Distributed with permission.

CHARACTERISTICS OF AN INEFFECTIVE STUDENT

1. *Passive*, non-questioning, waits to be “spoon-fed.”
2. Does not communicate needs and interests.
3. *Dependent*, follower.
4. Afraid of making mistakes.
5. Lacks “people skills.”
6. *Arrogant*.
7. Concerned about grades rather than the learning process and application.
8. *Insecure*.
9. Does not have basic clinical skills.
10. Too preoccupied with outside interests.
11. *Negative mind set*.
12. Says “yes” to CI without really processing what is being said.
13. *Complains constantly*.
14. Does not listen to or hear feedback on patient care.
15. *Whines and blames*.
16. Acts overwhelmed.
17. Too philosophic or “book knowledge” oriented.
18. Does not respect other staff members.
19. Makes an excuse for mistakes or inappropriate behaviors.

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