PHYSICAL THERAPIST ASSISTANT PROGRAM

Clinical Education Handbook

Physical Therapist Assistant Program

Last Updated:
November 24, 2026

Utah Valley University
800 W. University Parkway
Orem, Utah 84058

ACCREDITATION

Accreditation Statement

Effective April 29, 2026, The Utah Valley University Physical Therapist Assistant Program has been granted Candidate for Accreditation status by the Commission on Accreditation in Physical Therapy Education (3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; phone: 703-706-3245; email: accreditationsupport@apta.org). If needing to contact the program/institution directly, please call 801-863-6313 or email ryan.rushton@uvu.edu.

Candidate for Accreditation is an accreditation status of affiliation with the Commission on Accreditation in Physical Therapy Education that indicates the program may matriculate students in technical/professional courses. Achievement of Candidate for Accreditation status does not assure that the program will be granted Initial Accreditation.

Utah Valley University is a member institution of the Northwestern Commission on Colleges and Universities (NWCCU), with an accreditation status of Accreditation Reaffirmed. 8060 165th Avenue, Suite 100. Redmond, Washington 98052-3981; telephone: 425-558-4224; website: www.nwccu.org.
To learn more about UVU, visit: https://www.uvu.edu/about/

PTA CORE FACULTY

The PTA faculty are listed below. Students may schedule an appointment or advising session as needed:

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PREFACE

This Clinical Education Handbook provides information about the academic course work and clinical education requirements of (UVU) Utah Valley University's Physical Therapist Assistant (PTA) Program. Clinical education is an essential part of the PTA student's education. The purpose of this handbook is to provide information and guidelines for all who are directly involved in the clinical education process, namely:

- the student
- the clinical instructor(s) at each clinical facility
- the student coordinator of clinical education at each facility
- the faculty members of the PTA program at Utah Valley University

If there are any questions, the Director of Clinical Education (DCE) for the Utah Valley University PTA program will be pleased to assist you:

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Thank you in advance for your efforts to enhance our profession by providing quality clinical education for our PTA students.

Revision Date: November 24, 2026

UVU PHYSICAL THERAPIST ASSISTANT PROGRAM

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DESCRIPTION OF A PHYSICAL THERAPIST ASSISTANT

The purpose of physical therapist assistant education is to graduate knowledgeable, competent, self-assured, adaptable, and service-oriented patient/client care providers. Physical therapist assistant education prepares the graduate to perform selected components of interventions and data collection under the direction and supervision of the physical therapist in an ethical, legal, safe, and effective manner. Additionally, graduates of physical therapist assistant programs must be prepared to communicate with other members of the health care delivery team; interact with members of the patient's/client's family and caregivers; and work cooperatively with other health care providers. Graduates are prepared to participate with the physical therapist in teaching other health care providers and providing psychosocial support for patients/clients and their families and caregivers with recognition of individual, cultural, and economic differences.

PROGRAM MISSION STATEMENT

The Physical Therapist Assistant Program at Utah Valley University is dedicated to educating compassionate, competent, and collaborative entry-level physical therapist assistants who provide high-quality, patient-centered care within their communities.

GOALS OF THE PHYSICAL THERAPIST ASSISTANT PROGRAM

Program Goals

- Graduates will provide high-quality, patient-centered care as entry-level physical therapist assistants under the direction and supervision of a physical therapist.
- Graduates will demonstrate appropriate professional conduct and behavior reflecting the highest standards of the physical therapy profession.
- Graduates will collaborate as members of the physical therapy profession and healthcare team through effective communication, critical thinking, and problem-solving skills.
- Students will develop the knowledge, skills, and clinical reasoning necessary to deliver safe and effective interventions under the supervision of a physical therapist
- Students will demonstrate professionalism, effective communication, and collaboration within the academic and clinical learning environments.
- Faculty will foster a dynamic and inclusive learning environment by modeling professionalism, engaging in continuous professional development, and promoting student growth and success.
- The PTA Program will offer a comprehensive, rigorous academic curriculum that drives student success and positively impacts the community.
- The PTA Program will promote the importance of professional development and lifelong learning.

UVU NONDISCRIMINATION STATEMENT

Utah Valley University (UVU) does not discriminate on the basis of race, color, religion, national origin, sex, sexual orientation, gender identity, gender expression, age, disability, veteran status, pregnancy, childbirth, pregnancy-related conditions, genetic information, or any other bases protected by UVU policy, Title IX of the Education Amendments of 1972 (34 C.F.R. Part 106), Section 504 of the Rehabilitation Act of 1973 (Section 504), Title II of the Americans with Disabilities Act of 1990 (ADA), or other applicable federal, state, or local law. This commitment applies to all university programs, activities, services, admissions, and employment.

UVU has designated the following official to coordinate its compliance with Title IX, Section 504, the ADA, and related nondiscrimination laws and policies, including overseeing the investigation and resolution of complaints alleging violations of these standards:

Director of Equity and Title IX/Title IX Coordinator
Equity and Title IX Office
800 W. University Parkway, BA 203
Orem, UT 84058
(801) 863-7999
TitleIX@uvu.edu
uvu.edu/equityandtitleix/

STUDENT OUTCOMES

Student outcomes are derived from and support the mission of the PTA program.

Graduates of the UVU PTA program will:

1. Provide high-quality, patient-centered care as competent entry-level physical therapist assistants, in a variety of settings.

2. Demonstrate professional conduct and behaviors reflecting the highest standards of the physical therapy profession.

3. Collaborate as dynamic members of the physical therapy profession, healthcare team, and society through effective communication, critical thinking, and problem solving.

UVU PHYSICAL THERAPIST ASSISTANT PROGRAM

PHYSICAL THERAPIST ASSISTANT PROGRAM SEQUENCE OF COURSES*

Term	Course	Credit hours
All pre-requisites must be completed prior to admission into program	ENGL 1010 Introduction to Academic Writing **or** ENGL 1005 Foundations of Academic Writing	3
	MATH 1050 College Algebra **or** MATH 1055 College Algebra with Preliminaries **or** STAT 1040 Intro to Statistics **or** STAT 1045 Intro to Statistics with Algebra	3
	HLSC 1300 Medical Terminology	3
	ZOOL 2320 Human Anatomy	3
	ZOOL 2325 Human Anatomy Lab	1
	COMM 1020 Public Speaking	3
	PSY 1010 General Psychology **or** PSY 1100 Human Development Life Span	3
Pre-Requisite Total Credits		**19**
Semester I 13 credits (15 weeks)	PTA 1010 Introduction to Physical Therapy	2
	PTA 2010 Essentials of Physiology for the PTA	3
	PTA 2015 Essentials of Physiology for the PTA Lab	1
	PTA 2100 Clinical Kinesiology	3
	PTA 2105 Clinical Kinesiology Lab	1
	PTA 2400 Clinical Pathophysiology	3
Total Credits Semester I		**13**
Semester II 13 credits (2x 7.5 wk. blocks)	PTA 2200 Foundations of Therapeutic Interventions I	2
	PTA 2205 Foundations of Therapeutic Interventions I Lab	1
	PTA 2300 Therapeutic Procedures	2
	PTA 2505 Therapeutic Procedures Lab	1
	PTA 2500 Health Systems and Services for the PTA	2
	PTA 3810 Clinical Practicum I	5
Total Credits Semester II		**13**
Semester III 14 credits (15 weeks)	PTA 3100 Foundations of Therapeutic Interventions II	3
	PTA 3105 Foundations of Therapeutic Interventions II Lab	1
	PTA 3200 Orthopedic Rehabilitation	3
	PTA 3205 Orthopedic Rehabilitation Lab	1
	PTA 3500 Neurological Rehabilitation	3
	PTA 3505 Neurological Rehabilitation Lab	1
	PTA 3700 Physical Therapist Assistant Seminar	2
Total Credits Semester III		**14**

Semester IV 13 credits (2x 7.5 wk. blocks)	PTA 3300 Cardiopulmonary Rehabilitation .....2 PTA 3305 Cardiopulmonary Rehabilitation Lab .....1 PTA 3600 Specialty Populations in Physical Therapy.....2 PTA 3605 Specialty Populations in Physical Therapy Lab .....1 PTA 3800 Capstone .....2 PTA 3820 Clinical Practicum II 5	
Total Credits Semester IV		**13**
TOTAL CREDIT HOURS		**72**

***For specific course descriptions please refer to the Utah Valley University Academic Catalog.**

PTA PROGRAM PROFESSIONAL BEHAVIORS

The Physical Therapist Assistant Program at UVU promotes Professional Behaviors for PTAs as identified below. Students will self-reflect on these Professional Behaviors three times throughout the program. Prior to graduation students are expected to demonstrate these behaviors at entry-level.

CRITICAL THINKING

The ability to question logically, identify generate, and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision-making process.

COMMUNICATION

The ability to communicate effectively (e.g., verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.

PROBLEM SOLVING

The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.

INTERPERSONAL SKILLS

The ability to interact effectively with patients, families, colleagues, other healthcare professionals, and the community in a culturally aware manner.

RESPONSIBILITY

The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community, and social responsibilities.

PROFESSIONALISM

The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the physical therapy profession.

USE OF CONSTRUCTIVE FEEDBACK

The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.

EFFECTIVE USE OF TIME AND RESOURCES

The ability to manage time and resources effectively to obtain the maximum possible benefit.

STRESS MANAGEMENT

The ability to identify sources of stress and to develop and implement coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the healthcare team, and in work/life scenarios.

COMMITMENT TO LEARNING

The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

CORE VALUES FOR THE PHYSICAL THERAPIST ASSISTANT

American Physical Therapy Association
Department of Physical Therapist Assistant Services and
Department of Academic/Clinical Education Affairs
1111 North Fairfax Street
Alexandria, Virginia 22314

The program promotes the APTA's Core Values for PTAs and incorporates these behaviors into all core PTA courses.

The core values guide the behaviors of physical therapists and physical therapist assistants to provide the highest quality of physical therapist services. These values imbue the scope of physical therapist and physical therapist assistant activities. The core values retain the physical therapist as the person ultimately responsible for providing safe, accessible, cost-effective, and evidence-based services; and the physical therapist assistant as the only individual who assists the physical therapist in practice, working under the direction and supervision of the physical therapist. The core values are defined as follows:

- **Accountability**

  Accountability is active acceptance of the responsibility for the diverse roles, obligations, and actions of the physical therapist and physical therapist assistant including self-regulation and other behaviors that positively influence patient and client outcomes, the profession, and the health needs of society.

- **Altruism**

  Altruism is the primary regard for or devotion to the interest of patients and clients, thus assuming the responsibility of placing the needs of patients and clients ahead of the physical therapist's or physical therapist assistant's self-interest.

- **Collaboration**

  Collaboration is working together with patients and clients, families, communities, and professionals in health and other fields to achieve shared goals. Collaboration within the physical therapist-physical therapist assistant team is working together, within each partner's respective role, to achieve optimal physical therapist services and outcomes for patients and clients.

- **Compassion and Caring**

  Compassion is the desire to identify with or sense something of another's experience, a precursor of caring. Caring is the concern, empathy, and consideration for the needs and values of others.

- **Duty**

  Duty is the commitment to meeting one's obligations to provide effective physical therapist services to patients and clients, to serve the profession, and to positively influence the health of society.

- **Excellence**

  Excellence in the provision of physical therapist services occurs when the physical therapist and physical therapist assistant consistently use current knowledge and skills while understanding personal limits, integrate the patient or client perspective, embrace advancement, and challenge mediocrity.

- **Inclusion**

  Inclusion occurs when the physical therapist and physical therapist assistant create a welcoming and equitable environment for all. Physical therapists and physical therapist assistants are inclusive when they commit to providing a safe space, elevating diverse and minority voices, acknowledging personal biases that may impact patient care, and taking a position of anti-discrimination.

- **Integrity**

  Integrity is steadfast adherence to high ethical principles or standards, being truthful, ensuring fairness, following through on commitments, and verbalizing to others the rationale for actions.

- **Social Responsibility**

  Social responsibility is the promotion of a mutual trust between the profession and the larger public that necessitates responding to societal needs for health and wellness.

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SKILLS COMPETENT IN PRIOR TO PTA 3810: Clinical Practicum I

Please note that if a CI directs a student to perform a technique or skill that the student has not yet demonstrated competence in, within a didactic setting, it is the CI's responsibility to ensure that the student is competent and safe in that skill, prior to performing on a patient.

SKILLS COVERED IN ESSENTIALS OF PHYSIOLOGY FOR THE PHYSICAL THERAPIST ASSISTANT

- Basic Concepts of Anatomy and Physiology
- Function and Interaction of Major Body Systems
- Vital Signs
- Physiological factors contributing to movement
- Physiological Processes and Their Influences on the Body

SKILLS COVERED IN CLINICAL PATHOPHYSIOLOGY

- Common Pathologies
- Signs and Symptoms of Diseases
- Concepts of Tissue Repair, Remodeling, Repair
- Basic Pharmacological Concepts
- Diagnosis, Etiology, Prevention, Prognosis, Treatment, and Physical Therapy Considerations

SKILLS COVERED IN KINESIOLOGY

- Anatomy Review
- AROM, AAROM, PROM
- Manual Muscle Testing, Goniometry
- Muscle Contraction Types
- Arthrokinematics and Osteokinematics
- Basic Gait Assessment
- Palpation and Surface Anatomy
- Basic Documentation

SKILLS COVERED IN FOUNDATIONS OF THERAPEUTIC INTERVENTIONS I

- Thermotherapy
- E-Stim
- Soft Tissue Mobilization/ Therapeutic Massage
- Basic Ther Ex Concepts
- Stretching
- Basic Joint Mobilization Theory
- Resistance Exercise Foundation

SKILLS COVERED IN THERAPEUTIC PROCEDURES

- Aseptic Technique/Standard Precautions (clean gowning, gloving, masking)
- Bed Mobility and Positioning (supine to sit, to head or foot of bed, etc.)
- Transfers (stand pivot, sliding board, dependent, THA, etc.)
- Fitting, Gait Training, Guarding Patients using AD (crutches, walkers, canes)
- Basic Wheelchair Measurements
- Intro to Patient Education
- Basic Patient Documentation (SOAP notes)

SKILLS COMPETENT IN PRIOR TO PTA 3820: Clinical Practicum II

All didactic learning must be complete prior to clinical practicum experiences.

All skills learned prior to PTA 3810 (Clinical Practicum I), plus the following:

SKILLS COVERED IN HEALTH SYSTEMS AND SERVICES FOR THE PTA

- Healthcare Team Members
- Roles and Scopes of Practice for the PT and PTA
- Professional Communication
- Patient Care Settings
- Reimbursement
- HIPPA, Standards of Practice
- Ethics, Jurisprudence

SKILLS COVERED IN FOUNDATIONS OF THERAPEUTIC INTERVENTIONS II

- IASTM Theory and Technique
- Mechanical Agents (Shockwave, Traction)
- Ultrasound Theory and Application
- Hydro/Aquatic Therapy
- Aerobic/Anaerobic Exercise
- PNF Theory and Techniques
- Posture and Gait Assessment
- Balance and Proprioception Principles and Exercise

SKILLS COVERED IN ORTHOPAEDIC REHABILITATION

- Orthopedic pathologies: signs/symptoms, indications/contraindications
- Applying interventions to orthopedic conditions, including strengthening, stretching, balance, and modalities
- Development of appropriate treatment sessions within given plan of care
- Recognition of adverse responses to exercise, and taking appropriate action
- Patient education on orthopedic topics
- Instruction in Home Exercise Programs
- Myotome/dermatome recognition
- Use of functional outcome measures

SKILLS COVERED IN APPLIED NEUROLOGY

- Implement interventions including exercise, positioning, wheelchair management and developmental sequencing interventions as applied to patients with neurological conditions
- Specifically apply facilitatory and inhibitory techniques in patient intervention under the direction and supervision of a physical therapist
- Additional data collection skills including common standardized tests and sensory testing when assisting the physical therapist
- Family instruction regarding home care and exercises for neurological patients
- Pathology specific interventions
- Balance training/exercises
- Progressing a POC
- Therapeutic Activities

SKILLS COVERED IN CARDIOPULMONARY REHABILITATON

- Cardiac and pulmonary anatomy and physiology
- Cardiopulmonary pathology and disease processes

- Advanced vital signs (during exercise)
- Identify adverse responses to exercises, and red flags
- Auscultation, pulse palpation and identification, airway clearance
- Data collection
- Cardiopulmonary standardized assessments (Six-minute walk, etc.)
- Health promotion, wellness, and disease prevention including medication considerations
- Progression of cardiopulmonary rehab within POC

SKILLS COVERED IN SPECIALTY POPULATIONS IN PHYSICAL THERAPY

- Lower extremity bandaging for post-amputation (BKA and AKA) and wound compression
- Cardiovascular Conditions
- Post-mastectomy PT care
- PT Burn Care
- Exercises for patient with upper extremity and lower extremity lymphedema
- Basic upper extremity limb wrapping for upper extremity lymphedema
- Women's Health (Pelvic floor, Osteoporosis, Fibromyalgia, Pregnancy)

PTA PROGRAM CLINICAL SITE PERSONNEL ROLES

In order for the clinical education component to be successful, each student must understand who the players are and be able to distinguish between their roles.

Director of Clinical Education (DCE)

The DCE is the faculty member who carries the primary responsibility for overseeing and coordinating the clinical education component of the program. The DCE works directly with program faculty, SCCEs, CIs, and students to provide a variety of clinical education learning experiences that will effectively bridge the gap between academic learning and practical, hands-on experience. The DCE represents the University, provides indirect supervision of students when in the clinic, and works directly with the SCCE.

ROLES AND RESPONSIBILITIES:

- Responsible for identifying, developing, and maintaining relationships with clinical sites. This includes ensuring each site meets the educational standards and requirements set by the program and accrediting bodies.
- Maintain an active list of all signed contracts involved with the PTA program.
- In conjunction with the PTA program director, review Agreements of Affiliation to ensure they are accurate, current, and continue to meet the needs of the program and clinical facility.
- Scheduling of dates and assignments for clinical practicum, including holidays, atypical arrangements, missed clinical education time, remedial experience, etc.
- Placing students in appropriate clinical education sites.
- Provide clinical education sites with appropriate information pertaining to the clinical practicum. Including developing and updating clinical education policies, procedures, and evaluation tools to ensure a cohesive learning experience.
- Ensure clinical instructors meet all program requirements
- Provide intervention, guidance, training, support, and problem-solving strategies, for both the student and clinical instructor, when necessary. Determine an action plan when issues of student performance and/or conduct arise.
- Obtain necessary documentation associated with providing clinical education, such as clinical contracts, performance evaluations, etc.
- Clarify data related to student performance assessments.
- Provide developmental support to clinical faculty via organizing workshops, providing resources, facilitating communication between the academic program and clinical sites, and in-person training, to ensure CIs properly mentor and evaluate students.
- Based on CI and student feedback via the CPI, determine the final grade for students during each clinical practicum.

Site Coordinator of Clinical Education (SCCE)

The Site Coordinator of Clinical Education is someone employed by the clinical facility, and is typically either a PT or PTA, but can be a non-clinician position employee. The SCCE is the facility staff member responsible for the development and coordination of clinical education at that clinical site.

ROLES AND RESPONSIBILITIES:

- Oversee the organizing of clinical learning at their site and ensure that the clinical practicum align with the program's educational objectives.

- Coordinate and schedule clinical practicum for affiliating education programs.
- Assign students to specific PT or PTA staff member who will serve as the clinical instructor(s).
- Inform the clinical instructor of all pertinent information for the affiliating school.
- The SCCE is involved in the training and development of CIs, including providing resources, organizing training sessions, and ensuring that CIs are prepared to effectively mentor and evaluate students.
- Participate in quality assurance activities to evaluate the effectiveness of clinical education at their site, as well as communicate and problem-solve strategies to implement and improve the experience of students and CIs.
- Communicate, when necessary, with the DCE.
- Develop a program that provides students with an orientation to the services and operation of the clinical site while highlighting the unique qualities and special programs offered by that facility.

Clinical Instructor (CI)

The clinical instructor plays a vital role in the hands-on education and professional development of students. A CI is a licensed physical therapist or physical therapist assistant with one or more years of clinical practicum, who is selected by the SCCE to provide **direct** supervision to the affiliating student, while at the clinical site, and delivers data for assessment of student performance. The CI must be willing to work with student and be able to develop an appropriate environment for learning in the clinic.

ROLES AND RESPONSIBILITIES:

- Demonstrate an interest in teaching and in continuing education and development.
- Assist with facilitating learning experiences to ensure students are exposed to a variety of patient cases and clinical scenarios that are available within the clinical facility, or without, when available.
- Provide appropriate instruction and supervision during the delivery of all patient care.
- Implement and sequence the clinical practicum for the student, progressing the student toward achievement of his/her program goals.
- Set clear expectations and provide frequent feedback to students regarding their performance.
- Complete a formal midterm and final evaluation of the student's performance via the performance assessment tool used by the UVU.
- Complete all documentation required by the program concerning the clinical site and student clinical practicum.
- In the event of illness or other circumstances that would prevent the CI from being on-site, the CI will delegate supervision of the student to another physical therapist or physical therapist assistant.
- Ensure that student learning does not compromise the delivery or safety of patient/client care.
- Upon identifying problems with the student's performance or conduct, the CI will communicate with the student regarding these issues and, if necessary, plan remedial activities in collaboration with the SCCE, DCE, and student.
- Engage in congoing professional development to stay current with best practices within patient care and clinical education.
- Serve as a role model for students by demonstrating ethical behavior, clinical expertise, and effective care practices that inspire students to uphold high standards.

Student

The student is responsible for taking an active role in directing his or her own learning within the clinical education setting.

ROLES AND RESPONSIBILITIES:

- Follow facility/school policies and procedures regarding items such as confidentiality (HIPPA), conduct, dress, hours of attendance, etc.
- Notify the DCE if the level of supervision being provided is not appropriate for a student
- Exhibit professional behavior regarding attendance and punctuality, notifying the CI and DCE when unable to attend clinic (including late arrival and early departure).
- Effectively and clearly communicate with patients, CIs, and other members of the healthcare team.
- Make arrangements with the CI to make up any missed clinical education days or time and notify the DCE of these arrangements.
- Demonstrate appropriate technical competence for the level of didactic education achieved prior to a clinical practicum.
- Take responsibility for developing and refining clinical skills under the supervision of a CI, which can involve practicing techniques, receiving feedback, and continuously improving competencies in various aspects of patient care.
- Engage in self-assessment and reflection to identify strengths and areas for improvement, as well as identify strategies to help achieve personal goals.

INFORMATION FOR CLINICAL FACILITIES AND CLINICAL INSTRUCTORS

This section provides information for SCCEs and CIs concerning processes used by the program and ways to facilitate the process of providing a quality clinical practicum experience for Utah Valley University PTA students, including evaluations and rights and privileges.

UVU Student Assignment Process

1. **Request for Clinical Practicum Dates:** Per the agreement between all PT and PTA programs within the US, on March 1st each year, UVU will send an email to all contracted affiliate clinical sites and/or companies, requesting commitments for student clinical practicum/rotation assignments. Each clinical site/company is asked to respond to the email request as soon as possible, confirming which dates during each clinical practicum/rotation they are able to host a PTA student during that coming year. If possible, we request that the facility also include the name(s), credentials, and email addresses to ensure the correct information is input within the clinical assessment tool used by Utah Valley University PTA program.

2. **Assessment of Sites (Number and Variety):** To ensure maximum response from clinical sites and variety of clinical practicum, reminders are sent via email every 3-4 weeks to sites that have not responded to the initial practicum/clinical request. This timeframe will decrease as clinical practicum/rotation dates draw closer and email reminders may be sent out bi-weekly or even weekly to encourage clinical facilities to respond. Within two months of the initial request, the DCE reviews the confirmed sites to determine if the appropriate number and types of settings are available to provide an inpatient and outpatient experience to each student in the cohort(s). Once all required sites are secured and students have been assigned, the DCE will perform a final check to ensure each student will meet the requirement of one outpatient and one inpatient experience between both clinical practicum/rotations.

3. **Assignment of Clinical Sites:** Once the requisite number of clinical spots have been met, the DCE will make a list of the available clinical sites to distribute to the students. Students will number their preferences based on available sites and desired experiences, with the knowledge that they are required to participate in one outpatient and one non-outpatient experience. Students will be instructed to number every clinical site option and told that they may or may not be assigned to their first/favorite options, based on the lottery system used by the DCE. This system involves creating a randomized list of student names within the cohort, and based on student preferences, making assignments while ensuring that each student meets the requirements of one outpatient experience and one non-outpatient experience. Students who wish to participate at a facility that is not already approved or has not offered a clinical practicum spot, will provide the clinical site/facility information to the DCE who will contact the clinical site/facility to ensure they are willing and able to accommodate the student during the requested clinical practicum dates.

4. **Update the Clinical Agreement (as needed):** Before placing a student at a clinical site/facility, Utah Valley University enters into a written agreement with each host clinical facility. This agreement includes a statement regarding general and professional liability and insurance. When physical therapy services are being provided/contracted by a rehab agency/company, the agreement is made between the university and the rehab agency.

5. **Confirmation of Student Assignments (2-3 months prior to start date):** Utah Valley University will notify the facility by email of final student assignments within two months of the start of each clinical practicum.

6. **Student Information Sheet:** The clinical facility will be provided a packet of information from the UVU PTA program approximately one month prior to the beginning of each clinical practicum. This sheet will contain the student's name and contact information. The UVU PTA program will also provide the clinical education handbook and instructions pertaining to the PTA student performance assessment tool used by the program. The student will provide the facility with some background information about them including emergency information and profile.

7. **Student Contacts the Site (2-4 weeks prior to start date):** The student will call the clinical site a few weeks before the clinical practicum begins. With this initial contact, the student will ask about hours, to whom they report on the first day, confirm facility address and get directions, dress code, and any other necessary information.

Documents Maintained on Campus by the PTA Program

The following documents and records are maintained by the PTA program. Should your facility require a copy of any of these documents, you may make a formal request by contacting the DCE at any time.

1. **Student Immunizations:** All Utah Valley University PTA students enrolled within the program must provide proof of immunizations (see Appendix) prior to the start of the first clinical practicum (PTA 3180).

2. **CPR:** BLS CPR Certification must be current throughout all clinical practicum/rotations. Verification of CPR certification is maintained on campus.

3. **Student Health Insurance:** The UVU PTA program requires that student carry their own health insurance throughout all clinical practicum experiences (see Appendix).

4. **Liability Insurance:** Utah Valley University carries liability insurance on each full-time student for incidents which occur during program-related activities, which include clinical practicum/rotations.

Supervision of the Student

1. **Orientation:** The student should have an adequate orientation to the clinical site. Orientation is one of the most important aspects of a positive and productive experience for the students and their CIs.

2. **Physical Therapist/ Physical Therapist Assistant On-Site:** A Physical Therapist (PT) or Physical Therapist Assistant (PTA) must be on the premises for any student to perform direct patient care. The supervising physical therapist or physical therapist assistant who has been assigned as the clinical instructor will maintain the required direct supervision of PTA students.

3. **Unique Learning Opportunities:** The student should be provided with opportunities to observe or participate in learning experiences unique to the clinical site. These opportunities may include, but are not limited to:
   - Surgery observation
   - Physician's rounds
   - Quality improvement procedures/projects
   - Patient care/family conferences
   - Department staff meetings and in-services
   - Special diagnostic tests
   - Other specialty departments (OT, speech, prosthetics, orthotics, ICU, etc.)

4. **Patient Participation:** Patients are to be notified of student participation in their care and that they have a risk free right not to receive care from a student PTA.

5. **Documentation:** Any documentation written by the student must be signed with the student's full name, followed by the title Student Physical Therapist Assistant (SPTA). All documentation must be read, approved, and co-signed by a physical therapist or physical therapist assistant.

6. **Midterm Visits and Communication with the DCE:** The DCE or another PTA faculty member will contact the student/CI team to arrange a midterm visit to discuss student progress and to answer any questions the CI might have. The CI and/or the SCCE are encouraged to contact the DCE at any time if questions or concerns arise.

Attendance

1. Attendance during clinical practicum is mandatory as follows:
   a. **PTA 3810: Students must attend 40 hours per week over 8 weeks.**
   b. **PTA 3820: Students must attend 40 hours per week over 8 weeks.**

2. Students' daily schedules will follow the clinical facility's calendar, which will vary depending on the clinical site. Because students are required to accept and work the same schedule as their CI(s), they may be required to attend their clinical practicum on holidays where the university campus is closed. In addition, if the university campus is closed due to severe/inclement weather, but the student's clinical site is open, the student will be required to be in attendance. Students are NOT allowed to negotiate different hours with the facility, SCCE, or CI to accommodate an individual schedule. All clinical education practicum are to be considered by the student as the equivalent of contracted employment.

3. Students are allowed one excused absence with prior approval by the facility, SCCE, or CI and the DCE, if the required total hours are met. The DCE will make the final determination on whether an absence is excused or unexcused. Any other missed clinical time must be made up according to the clinical instructor's schedule.

4. If two or more days are missed during the clinical practicum, the student could be required to repeat the clinical practicum or be dismissed from the program.

Clinical Practicum Punctuality and Tardiness

Students must report promptly to the clinical facility at the time specified by the supervising CI. **Tardiness is not acceptable.** It is the student's responsibility to anticipate and plan for severe weather, car problems, carpooling dilemmas, etc. Back-up transportation and childcare plans should be prearranged.

The facility should be notified at least thirty (30) minutes prior to the working day start time, if the student is unavoidably detained.

The student will receive a written warning with the first occurrence of tardiness. Students who arrive to the assigned clinical facility more than one-half hours (30 minutes) after their scheduled start time may be asked to leave until the next workday, and this will be counted as an unexcused absence. Any additional tardiness will result in the student being placed on probation for the remainder of the clinical practicum. In the event of this occurring, the student must petition the program director for a repeat clinical practicum.

Class and Lab Tardiness

Students are expected to be present and punctual for all scheduled classes, laboratory sessions, and clinical practicums. Attendance is **required for a minimum of 90%** of each component of the course (lecture, lab, and clinical) to receive a passing grade. Excessive absences may result in failure of the course and dismissal from the program. Tardiness more than 25% of an individual class or lab period will be counted as an absence.

If a student anticipates being absent, it is their responsibility to notify the instructor in advance, either in person, by phone, or via email. In the case of emergency or unexpected events, the student should contact the instructor as soon as reasonably possible. Messages sent through other students are not considered valid notification.

Students are also expected to plan accordingly for weather and travel conditions and arrive to class or clinical sites on time. Repeated tardiness (>25% of each class/lab period) may be addressed as a professional behavior concern.

Facility Rules and Regulations

Students are expected to comply with the rules and regulations of the clinical site. The clinical site must inform the student of these rules and regulations.

Student's Relationship to Facility

Any clinical site accepting a PTA student for a clinical practicum agrees not to hire the student to work at the same clinical site during the clinical course. The student should NOT be substituted for paid staff during the experience. The student may NOT assume the responsibility of a qualified staff person. However, as the student demonstrates proficiency in clinical skills, s/he should be permitted to perform clinical skills with less supervision.

Early Termination of the Clinical practicum

Following consultation with the SCCE and the CI, the DCE may remove a student from the clinical site if, in their judgment, the student is performing incompetently or poses a safety risk to the patients or staff of the facility. The clinical site supervisor and the CI may immediately remove any student from the premises who poses an immediate threat or danger, or for just cause under the clinical site's disciplinary policy.

Evaluation of the Student

- **Evaluation by the Clinical Instructor (CI)**
  Clinical Practicum I/II (PTA 3810, PTA 3820): The CI will evaluate the student at the midpoint and at the end of the clinical practicum, using the web-based version of the Clinical Performance Instrument 3.0 (CPI Web). The clinical instructor rates the student's performance on the performance criteria given on the CPI, by marking the visual analog scale (VAS) and by providing written comments, as appropriate. The student will also complete a self-assessment on the CPI Web 3.0. **The CI will discuss the written evaluation with the student at midterm and during the final week of the clinical practicum.** The CI and the student both submit their completed evaluations to the DCE by "signing-off" on the CPI Web Assessment at the final.

- **Please see the Appendix for a paper example of the CPI, step-by-step instructions on how to use CPI Web 3.0 to complete the assessment, and a summary of the paperwork your student will be required to complete.**

- **Evaluation by the DCE**
  The DCE will determine whether the student's clinical performance has been satisfactory. Acceptable student performance will be determined on the basis of the CI's evaluation, which includes the CI's written comments, scoring on the VAS, and whether any remediation needs have been submitted by the CI or any red flags have been noted on the CPI Web 3.0.

- **Unacceptable Performance**
  If the DCE determines that there is a question about whether a student's performance has been acceptable, the DCE will bring the issues to the PTA program faculty for consideration. If the student's performance is deemed unacceptable, the PTA program faculty will determine whether the student will be provided with a remediation clinical practicum or be dismissed from the program.

  If the consensus of the DCE, CI, and PTA program faculty is that the student's performance could improve through a remedial clinical practicum, a failing grade will be assigned, and a remediation experience will be arranged. If remediation is successful, the student will receive a final grade for the course based on their performance. If the remediation is unsuccessful, the student will be dismissed from the PTA program.

Evaluation by the Student

- **Clinical Performance Self-Evaluation**
  The student will evaluate his/her own clinical performance at midterm and/or at the end of each clinical practicum, using the CPI Web 3.0. Signing off on the completed evaluation submits it to the DCE, which is a requirement for this course when used. The student will establish a time to discuss their self-evaluation with the CI during the midterm and/or final evaluation.

- **Site and Clinical Instructor Evaluation**
  The student will evaluate the clinical practicum by filling out the Student PTA Site and CI evaluation form (see Appendix). The student is encouraged to review this form with the CI and/or SCCE at the

end of the clinical practicum, however, it is not required. Completing and submitting this form to the DCE is required for each clinical practicum.

In-service or Project

The PTA program at UVU requires students to prepare and present and/or provide an in-service, case study, or project during each clinical practicum. In-services can cover a variety of topics, including, but not limited to patient diagnoses commonly seen in the clinic, modalities or interventions commonly used at the clinic, modalities or interventions not currently used but could benefit patients seen in the clinic. A copy of the outline must be submitted to the DCE. If students choose to present an in-service during both clinical practicums, they can NOT repeat the same topic for their presentations.

At the preference of either the clinical site or student, a project may be completed instead of an in-service. The project must be approved by the clinical site (CI, SCCE, DOR). The project must be completed within the timeframe of the clinical practicum and must benefit one of the following: clinical site, therapy department, or patients. A written description of the project, including pictures or examples of what was done must be submitted to the DCE.

Clinical Instructor Training and Credentialing

Clinical instructors are encouraged, but not required, to seek continuing clinical and educational proficiency through advanced training and certifications, such as:

- Credentialed Clinical Instructor Program
- American Board of Physical Therapy Specialties (ABPTS) certification
- PTA Advanced Proficiency Pathways

Privileges of UVU PTA Program Clinical Instructors

The PTA Program provides the following privileges for clinical instructors:

- Ongoing development activities for the clinical education faculty based on current needs. These activities will be designed to improve the effectiveness of the clinical education faculty and PTA program.
- Availability of PTA academic faculty to serve as resources/consultants for practice, research, or ethical issues/concerns
- Limited access to the UVU online library resources
- Host or co-host a CI-credentialing course at least every other year
- Annually host a clinical education workshop for clinical faculty where needed clin ed content will be presented.
- Provide in-services at clinical education sites, one-on-one meetings between clinical faculty and the PTA program DCE as needed to provide clinical education development.

Expectations of UVU PTA Program Clinical Instructors

To ensure a positive learning experience for UVU PTA students, clinical instructors are required to meet the following expectations:

- **Clinical Competence**
  - Minimum of one year of clinical practicum as a licensed PT or PTA
  - Current PT or PTA license (unencumbered)
- **Teaching Effectiveness**
  - Be acquainted with the learning objectives and passing requirements for each clinical course
  - Provide clear performance expectations to the student at the beginning of the clinical practicum
  - Seek the student's input regarding their expectations at the beginning of the rotation
  - Provide timely and constructive feedback on a regular basis regarding the student's performance
  - Provide frequent opportunities for the student to learn clinical problem solving and demonstrate required competencies
  - Document formal feedback using the CPI Web at midterm an/or final and review with the student
  - Communicate with the DCE in a timely manner regarding any concerns about the student's performance
  - Treat the student with dignity and respect as a future physical therapy professional
  - Stay abreast of new techniques and literature in the field of physical therapy

INFORMATION FOR THE STUDENT PHYSICAL THERAPIST ASSISTANT

Clinical Assignment

- **Site Types**
  Clinical education settings may include hospitals, out-patient clinics, skilled nursing facilities, rehabilitation units, pediatric centers/facilities, or other specialty sites. In order to promote a well-rounded education, students will be placed at a variety of site types typically including orthopedic, neurologic, acute care, general practice, or a specialty are as availability permits. Each student is required to have at least one clinical practicum in an outpatient setting and one in a setting not considered outpatient. During each clinical practicum experience, it is expected that students will seek out every opportunity to participate in interprofessional practice through communication with other healthcare providers, including nursing staff, physicians, support personnel, social workers, and others as appropriate. Students are also expected to actively participate as a member of the PT/PTA teams by seeking opportunities to frequently communicate with the supervising PT regarding patient care.

- **Site Assignment**
  The clinical practicum experience is administered by Utah Valley University through the Director of Clinical Education (DCE). These experiences will take place in a variety of health care facilities throughout Utah and other states. The DCE, in cooperation with the student, will assign the student to a facility based on site availability and the student's experiential needs. Per CAPTE guidelines, geographic location will be considered. Students' requests for specific sites cannot always be accommodated, although will be considered. Student professional and academic performance will be taken into consideration if a specific site is requested. Students may be required to participate in clinical practicum outside the local area (defined as the Wasatch Front-Utah and Salt Lake valleys).

Because of the staggered availability of clinical sites, students must accept placements assigned. If a placement is refused, the student will be given an alternative placement only after all other students have been placed, dependent upon site availability. Refusal of a site may result in postponement of the clinical practicum. Please be aware that the placement may be considered a "distance" placement and a student may incur some additional costs associated with a placement. A "distance" placement is defined as more than a two-hour commute from the UVU campus.

UVU is a member of the National Council for State Authorization Reciprocity Agreements (NC-SARA). Because of this, students can request that one of their clinical practicum placements be at a clinical site within a state that participates in NC-SARA. This request is required to be in place during the student's first semester to ensure enough time for a contract to be completed if one is not present between the university and the clinical facility. In addition, a student's request for an out of state placement will be denied if their GPA is below a 3.0.

- **Accommodations**
  In accordance with the Americans with Disabilities Act (ADA), any student requiring adaptations or special accommodations to participate in clinical education must have the need for accommodations documented with the UVU Office of Accessibility Services, in accordance with UVU Policy 152 (https://policy.uvu.edu/getDisplayFile/5750ea6597e4c89872d9565d), and must inform the DCE in advance. The student must be aware that not every clinical site may be able to make accommodations; therefore, the number of available sites may be limited. The student must also assume the responsibility of working with the DCE to develop an appropriate learning experience and of notifying the clinical site of the need for modifications.

- **Request for Clinical Placement (Specific)**
  If a student wishes to suggest a health care facility to the DCE for clinical placement that is not currently a university affiliate, the suggestion should be given at least eight (8) months in advance of the first clinical affiliation. Advance notice is necessary to allow sufficient time for contractual arrangements to be made between Utah Valley University and the clinical site. It also allows for the development of mutual goals for the clinical practicum between the UVU and the facility. The student should present the name and address of the facility to the DCE. Students are **NOT** to contact a present or prospective clinical site without obtaining prior approval from the DCE. Clinical sites are carefully selected and reviewed to ensure that the sites are appropriate for the student's clinical education. Students cannot affiliate at a site if they have previously volunteered or worked in the Physical Therapy Department at that site, within a six-month time frame prior to the clinical practicum, without special approval. The DCE will determine if a student will be placed at a facility where the student has previously been employed. An affiliated branch of a department, with supervisory personnel unfamiliar with the student, may be considered. Also, students will not be assigned to a facility where the student is currently being treated as a patient in the physical therapy department or in a physical therapy related area. The student may request to NOT be placed at a specific facility. There may be a number of acceptable reasons for this request, as determined by the DCE.

- **Expenses**

Students are responsible for their own housing, food, and transportation to and from their clinical practicum. For out-of-town placements, any other expenses incurred such as housing, meals, transportation, etc. are the student's responsibility, unless provided by the facility.

Schedule of Clinical Practicum

The following schedule represents the general plan for clinical practicum/experiences:

- Semester II, Block II – 1st clinical practicum
  - 8 weeks (320 total hours)
- Semester V, Block II – 2nd clinical practicum
  - 8 weeks (320 total hours)

All students are expected to attend and complete clinical courses according to the schedule above, which is predetermined by the academic calendar.

Requirements Prior to the Start of the Clinical practicum

- **Emergency Information and Student Profile Form**
  Each student is required to complete the emergency information and student profile form and submit it to the clinical site approximately four weeks before the first day of each clinical practicum.

- **Contact with the Clinical Site**
  Two to four weeks prior to the first day of the clinical practicum, the student will contact the CI. The student is expected to contact the clinical instructor concerning who they report to on the first day, dress code, directions to the facility, and other necessary information. Facilities may request that the student visit in-person, prior to the clinical practicum start date.

- **Immunizations and Health Records**
  All immunizations must be current. Students must provide proof of current immunizations to be filed with the DCE. Students should be aware that some facilities require a TB (PPD) test every three to six months. Students will not be assigned a clinical education site until this information is on file and the DCE has confirmed completion of all immunizations. Some clinical sites require additional medical information/immunization records, criminal background checks, and/or drug screen testing. Students must meet the health and safety requirements of participating clinical education facilities.

- **Criminal Background Investigation**
  In accordance with UVU policy 548 4.3.1.1 (https://policy.uvu.edu/getDisplayFile/6780104342d2eeef2bed7754), student are required to complete a criminal background check, prior to admission into the PTA program. Student's may also be required to complete an additional background check prior to the start of a clinical practicum, depending on the specific requirements set forth by each clinical site/facility. It is procedure for the PTA program to follow those guidelines and requirements set forth by the clinical site/facility. Arrangement for and payment of all background checks is the responsibility of the student.

- **Drug Screening**
  In accordance with UVU policy 548 4.3.1.1 (https://policy.uvu.edu/getDisplayFile/6780104342d2eeef2bed7754), all PTA students must pass a drug test prior to admittance to a clinical program. Students should be aware that a clinical site/facility may require an additional drug screen/test prior to participation at the site for their clinical practicum, and it is procedure for the PTA program to follow those guidelines and requirements set forth by the clinical site/facility.

- **CPR**
  All students in the program are required to obtain and maintain CPR certification at the ***Health Care Provider Basic Life Saving*** or the ***CPR/AED for Professional Rescuers*** level before participating in clinical practicum. Certification must be current during and throughout all clinical practicum periods. Students are required to carry a current CPR certification card at all times during their clinical practicum/rotations. A copy of the certification must be on file and confirmed by the DCE prior to participating with any clinical practicum.

- **Liability and Health Insurance**
  In accordance with policy 251 5.2.2 (https://policy.uvu.edu/getDisplayFile/5f6cefc61f1c13e4769eb10c) UVU carries liability insurance on each full-time student, while providing services to members of the public in the course of an approved clinical training program.

  Due to certain occupational health risks that can occur within the field of physical therapy, UVU requires all full-time enrolled students to carry personal health/medical insurance prior to engaging in clinical practicum experiences. A copy of each student's proof of personal health insurance must be on file and confirmed by the DCE prior to participating with any clinical practicum.

  Students are required to carry and use their own health insurance for any incident which occurs during clinical practicum. All students enrolled in the PTA program at UVU are 100% responsible for any medical costs associated with a medical injury or emergency involving themselves while participating in the clinical during a clinical practicum.

Evaluation of the Student

- See "Evaluation of the Student" in the previous section.

Evaluation by the Student

- See "Evaluation by the Student" in the previous section.

Ensuring Success

- Active Learning
  A successful clinical practicum depends on all participants. The student is expected to be actively involved in the learning process. A student will get more out of the experience is she/he:
  - Searches out information, using all available resources, including staff and patients
  - Is conscientious about professional behavior and responsibilities
  - Shows enthusiasm for learning both technical and interpersonal skills

- Discusses his/her clinical strengths and weaknesses with the CI at the onset of the clinical practicum
- Is Assertive in stating his/her education goals and needs during each experience
- Establishes and maintains open and effective communication with the CI, SCCE, facility staff and DCE

ADDITIONAL CLINICAL AFFILIATION POLICIES AND PROCEDURES

Conflict Resolution Procedure

If the student has concerns:
If a student is dissatisfied with or is having difficulty at his/her clinical site, the following steps must be taken:

- The student should first discuss his or her concerns with the Clinical Instructor. Most problems can be resolved by ensuring this communication line is open and used. The Director of Clinical Education (DCE) is always available as a resource for suggestions on how to best approach the CI for this discussion.
- If, following a discussion between the student and CI, the difficulties persist the student should contact the DCE in a timely manner. When the student contacts the DCE, the DCE will document in writing the time, date, and concerns as well as recommendations made to the student. A summary statement will be documented by the DCE.
- If necessary, the DCE will arrange a meeting with the student, CI, and SCCE (if necessary) to attempt to resolve any issues and to develop a plan for a successful clinical practicum.

If the CI has concerns:
If a CI has concerns about the performance of a student, the CI should:

- Address the concerns with the student. The date, time, and areas discussed, as well as recommendations made should be written and signed by the CI and student. A learning contract is an excellent tool to use for this meeting. A sample learning contract is included in the Appendix for use, if desired.
- The CI should contact the DCE immediately to share the considerations and agreed upon performance expectations.
- The DCE may choose to visit the clinical site to observe the student directly. In most instances, a plan will be developed and implemented to address concerns and help the student successfully complete the clinical practicum.
- A written summary of the meeting and action plan should be signed by all in attendance and placed in the student's file. The PTA Program Director will also be informed of the meeting and agreed upon resolution.
- If after the intervention, the student continues to not meet the specific goals and objectives of the clinical practicum experience, successful completion of remediation assignments may be required. If the student's clinical performance has endangered the welfare of a patient/client, the DCE or program director may withdraw the student immediately and issue a failing grade.

Evaluation/Grading

Grades for the clinical education practicum will be assigned by the DCE after reviewing written evaluations submitted via the Clinical Performance Instrument (CPI) and the required program documentation. Grades will only be assigned after both the clinical instructor and the DCE have consulted about the student's performance. This consultation will usually involve a review of the signed-off CPI Web assessments. The academic institution retains the right to determine the final grade.

Students will receive a pass/fail grade for each clinical practicum. Grading will be based on the student's completion of the criteria listed in the syllabus for each clinical practicum course. In the event of a failed clinical practicum, students may be given the opportunity to repeat a clinical practicum only once. Students who do not successfully complete a clinical practicum experience the second time will be dismissed from the PTA Program.

Written evaluation of the student's clinical performance will be completed by the CI using an assessment tool provided by the school or the web-based version of the Clinical Performance Instrument (CPI Web). Following evaluation review with the student, both the student and the CI should sign off on one another's evaluations. Each student will be evaluated twice during each clinical practicum experience (midterm and final). Additional evaluations may occur as the CI, DCE, or the student believes necessary.

A written evaluation of the clinical site will be completed by the student at the end of the clinical practicum experience. Following the CI's final evaluation of the student, the student is required to share the results of the evaluation with the clinical facility and the clinical instructor. The student must return the completed forms to the College, where they will become part of the facility's permanent on-campus file.

Students are required to achieve minimum scores/ratings on the CPI Web to continue in the program or graduate.

- **In order to continue in the program students must demonstrate a 3 (intermediate) clinical performance in all categories of the CPI, at the end of their first clinical practicum (PTA 3810).**
- **In order to graduate from the program students must demonstrate a 5 (entry-level) clinical performance in all categories of the CPI applicable to the setting, at the end of the final clinical practicum (PTA 3820).**
    - **Entry-Level is define by the UVU PTA program as 90% independence. This means a student is capable of handling the full caseload of a PTA but will still ask clarifying questions and may require minimal to no guidance to appropriately treat patients. The student will be able to provide appropriate documentation with little to no additional time to complete and submit for signing by the CI and supervising PT.**

Student evaluations and grades are for the benefit of the student; therefore, the student will have access to those records. Any dispute concerning an evaluation must be made in writing to the DCE who will review the situation with the student and the instructors, in order to take appropriate action.

Academic Misconduct and Sanctions – Student Dispute and Disciplinary Matter

In accordance with UVU Policy 548 Section 5.1 through 5.5 (https://policy.uvu.edu/getDisplayFile/6780104342d2eeef2bed7754) "except for intentional or serious misconduct, or actions that endanger the health or safety of others, a pattern of misconduct or underperformance should be evident before imposing an academic sanction on a student. The disciplinary processes in this policy provide a means for remediating inadequate clinical performance and, ideally, should represent a constructive problem-solving collaboration." This collaboration should include the student, CI, DCE, and program director.

The disciplinary processes for student misconduct or underperformance include, but may not be limited to, the following:

- Informal Remediation (UVU Policy 548 Section 5.2) (https://policy.uvu.edu/getDisplayFile/6780104342d2eeef2bed7754)
    - Will include a personalized learning contract agreed to and signed by the student
- Formal Remediation (UVU Policy 548 Section 5.3) (https://policy.uvu.edu/getDisplayFile/6780104342d2eeef2bed7754)
- Probation (UVU Policy 548 Section 5.4) (https://policy.uvu.edu/getDisplayFile/6780104342d2eeef2bed7754)
- Dismissal (UVU Policy 548 Section 5.5)

Clinical Appeals Process

Should a student have a concern, complaint, or grievance regarding clinical education, he or she should follow the procedure outlined in Section 5.7 Appeals Process of Policy 548 (https://policy.uvu.edu/getDisplayFile/6780104342d2eeef2bed7754), *Academic Rights and Responsibilities of Healthcare and Counseling Clinical Program Students*.

Professional Conduct

Students are required to conduct themselves in a mature, professional, and ethical manner while participating in clinical practicum experiences; failure to do so will result in early termination of the clinical practicum.

The student may not conduct any survey, research, inquiry, or other study related to the facility or its programs, patient or clients, and clinical staff without written permission from the University and clinical facility.

All students must respect the confidentiality of the patients/clients in their care and follow any applicable HIPAA compliance regulations at the facility.

Civility

Students are expected to demonstrate civility in all their interpersonal interactions during all clinical practicum as outlined in the PTA Operational Manual.

Dress Code

Students are expected to dress and groom in a manner that reflects positively on the profession and inspires patient confidence in their abilities as a student PTA. The following are guidelines but are not inclusive. Clinical and PTA faculty reserve the right to determine whether a student's appearance meets appropriate professional and program standards.

Unless otherwise specified by the affiliation facility, all PTA students must conform to the dress code standards set by the PTA Program and University:

Business Casual –
Dress Shirt or Polo
Dress or Khaki/Chino style pants
Close Toed Shoe

Students should be well groomed. Dress and appearance should reflect modesty and cleanliness. No tank tops, shorts or short skirts will be allowed, unless otherwise specified by the clinical site/facility. Hair must be clean and neat, avoiding extreme styles. Long hair should be pulled back from the face so that it does not interfere with patient care. If worn, beards and mustaches must be clean and neatly trimmed. Fingernails must be kept short and well-manicured. Nail polish is allowed. No perfume or cologne is permitted and wearing any other scented body products should be avoided.

All students are *required* to wear a nametag. The UVU PTA Program provides nametags to students prior to their clinical affiliations. Certain facilities may require students to wear identification provided by them.

No visible body-piercing jewelry may be worn, with the exception of earrings, which must be moderate and conservative in nature to not be distracting or unprofessional in nature and look. No more than two earrings per ear are allowed, and students with gauges must wear flesh-colored plugs at all times when on clinical practicums. Nose studs no larger than 20G are allowed. Septum nose rings, other visible piercings (beyond what has been earlier addressed), or excessive jewelry and makeup are to be avoided. It is highly recommended that all students wear a watch capable of tracking seconds.

Any student who is in violation of any of the above dress code items may be sent home and instructed to return to the facility dressed in accordance with the program/university or facility dress code. At the first violation, the student will receive a written warning. A second infraction of the dress code will result in suspension from the clinical practicum experience.

Tattoos are allowed; however, each facility/clinical site reserves the right to have students cover visible tattoos with clothing or makeup. Students who do not adhere to the requirements set forth by clinical sites/facilities will be removed from that site and run the risk of not being able to be placed at a new site.

Cell Phone

Students are not allowed to use cell phones during the treatment of patients and must adhere to the facility policies regarding cell phone use concerning when and where it is allowed, while at the facility.

Alcohol and Drug Awareness

Students are required to adhere to UVU Policy 155 Alcohol- and Drug-Free Workplace (https://policy.uvu.edu/getDisplayFile/5ea1db517c74a7773fe30646), as well as Policy 541 (https://policy.uvu.edu/getDisplayFile/6792bef67e549a541d38896b), sections 4.3.2.3 and 4.3.2.8 concerning alcohol and drug possession, use, distribution, manufacturing, and influence of.

In accordance with UVU policy 548 4.3.1.1 (https://policy.uvu.edu/getDisplayFile/6780104342d2eeef2bed7754), all PTA students must pass a drug test prior to admittance to a clinical program. Students should be aware that a clinical site/facility may require an additional drug screen/test prior to participation at the site for their clinical practicum, and it is procedure for the PTA program to follow those guidelines and requirements set forth by the clinical site/facility. Arrangement for and payment of all drug screening/testing is the responsibility of the student.

Criminal Background Investigation

In accordance with UVU policy 548 4.3.1.1 (https://policy.uvu.edu/getDisplayFile/6780104342d2eeef2bed7754), students are required to complete a criminal background check, prior to admission into the PTA program. Students may also be required to complete an additional background check prior to the start of a clinical practicum, depending on the specific requirements set forth by each clinical site/facility. It is procedure for the PTA program to follow those guidelines and requirements set forth by the clinical site/facility. Arrangement for and payment of all background checks is the responsibility of the student.

Change in Medical Status

A pregnancy or any other change in medical or mental status should be reported to the student's clinical instructor, DCE, and program director as soon as possible, at the student's discretion. This will allow planning of a learning experience that will ensure maximum safety to mother, baby, and patients.

Emergency Procedures

It is the student's responsibility to become familiar with and follow the emergency procedures outlined by each clinical facility where the student is affiliating.

Due to certain occupational health risks that can occur within the field of physical therapy, UVU requires all full-time enrolled students to carry personal health/medical insurance prior to engaging in clinical practicum experiences. A copy of each student's proof of personal health insurance must be on file and confirmed by the DCE prior to participating in any clinical practicum.

All students enrolled in the PTA program at UVU are 100% responsible for any medical costs associated with a medical injury or emergency involving themselves while participating in the clinical during a clinical practicum.

Program Complaint Guideline

The Physical Therapist Assistant (PTA) Program at Utah Valley University (UVU) values open communication and the fair treatment of all students, faculty, and staff. The program will take all submitted complaints seriously, and **no retaliation will occur** against any individual who submits a complaint.

Program Complaint Procedure

The program director will annually ensure that a complaint guideline, including who to contact regarding a complaint and a non-retaliation statement, is accessible on the program webpage, in the program Clinical Education Handbook, Operational Manual, and on the program Employer of Graduate Survey. This complaint information includes the contact information for the program director, department chair, and for CAPTE. When a complaint is filed with the program director, the program director will inform the department chair and will respond to the complaint within one week. Records of program complaints will be maintained by the program director.

Complaints will be addressed according to the following procedure:

Step 1: Instructor Level

- The complainant should first attempt to resolve the concern informally by discussing it directly with the instructor or individual involved.

Step 2: Program Director Level

- If unresolved, the complainant may submit the concern in writing to the PTA Program Director at ryan.rushton@uvu.edu.
- The Program Director will review the concern, communicate with the complainant, and provide a written response within one week.
- The Program Director will also notify the Allied Health Department Chair that a complaint has been received.

Step 3: Department Chair / College Level

- If still unresolved or the complaint is about the Program Director, the complaint may be elevated to the Department Chair of Allied Health at:
  Email: **PTAFEEDBACK@uvu.edu**
- The written complaint should include: a description of the concern, steps already taken, and any relevant documentation.
- The Department Chair will review the concern and provide a written response in a timely manner.

Step 4: Institutional Level

- If the complaint remains unresolved, the complainant may use UVU's official grievance processes:
  - Report & Support Website: https://www.uvu.edu/reportandsupport/
  - Office of Student Rights & Accountability: https://www.uvu.edu/studentconduct/
    - Phone: (801) 863-5841
    - Email: studentconduct@uvu.edu

Step 5: Accreditation-Related Complaints

- Concerns related specifically to accreditation may be submitted directly to:

Commission on Accreditation in Physical Therapy Education (CAPTE)
3030 Potomac Ave., Suite 100
Alexandria, VA 22305-3085
Email: accreditation@apta.org
Website: www.capteonline.org

Complaint Records and Retention

- All formal complaints received at the program level will be documented by the Program Director, including the nature of the complaint, actions taken, and resolution.
- Records will be stored securely in the program files in accordance with UVU retention guidelines.
- Complaint trends will be reviewed annually by program faculty to ensure consistent and equitable application of procedures.

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UVU PHYSICAL THERAPIST ASSISTANT PROGRAM

Student Agreement for Participation in Clinical Practicums

The student agrees to the following:

1. Keep regular work hours as required by the Facility staff.
2. Notify the Director of Clinical Education and the CI in advance of the time the student is scheduled to arrive for work, if the student will be unable to report as scheduled.
3. Demonstrate a willingness to learn, to be honest, courteous, cooperative, punctual, and to exhibit proper dress, grooming, and health habits appropriate for a healthcare professional.
4. Consult the DCE, CI, or SCCE about any difficulties arising at the facility.
5. Conform to the policies, procedures, rules and regulations of UVU and the facility.
6. Submit all information and reports required by UVU and PTA program, promptly to the DCE.
7. Indemnify and hold harmless the facility and its officers, employees, agents and other representatives from and against liability for damages, claims, lawsuits, judgments, expenses and attorney's fees which may be incurred by the facility or the CI resulting from any acts or omissions of the student.
8. Obtain and carry individual health insurance to cover any injuries or illnesses that might arise as a direct or indirect result of your work at the facility.
9. Strictly protect the confidentiality of all records and information belonging to the facility, its personnel and patients, including its methods of operation and business and all information that could be considered proprietary.
10. Inform all patients that you are a student physical therapist assistant from the PTA program at UVU and obtain informed consent prior to providing any treatment interventions.

Student's Signature: _____ Date: _____

UVU PHYSICAL THERAPIST ASSISTANT PROGRAM

Risk Management/ Required Immunizations Form

STUDENT NAME:			
	DATE	RESULTS	EXPIRES
IMMUNIZATIONS (* = Titer may be completed to show immunity)			
*Measles/Rubella (MMR) 1			
*Measles/Rubella (MMR) 2			
*2 Step Tuberculosis (PPD/Quantiferon/X-Ray)			
*2 Step Tuberculosis (PPD/Quantiferon/X-Ray)			
*Tdap (Adult Tetanus/Diphtheria/Pertussis)			
*Varicella (Chicken Pox) 1			
*Varicella (Chicken Pox) 2			
*Hepatitis A			
*Hepatitis B			
1.			
2.			
3.			
Flu (Seasonal)			
OTHER IMMUNIZATIONS (If Required by Clinical Site)			
Polio			
Covid-19			
OTHER INFORMATION			
CPR			
Personal Health Insurance	Verification	Waiver	
Drug Screen			
Criminal Background Check			
UVU OSHA/HIPPA/PPE Training			
I certify this information is correct and true according to information supplied by the above-named student and verified by documentation. Supporting documentation is on file at the institution and available upon request.			

Director of Clinical Education Date

Student Emergency Information

Name:

Address:

City: State: Zip:

Home phone: Cell phone:

Contact person (in case of an emergency):

Relationship to student:

Contact person's home phone: Cell phone:

Physician

Name/Facility:

Address:

City: State: Zip:

Facility phone:

Insurance Information

Name of carrier: Policy #: Expires:

Student Profile for Clinical Instructor

Name:

- My interests and hobbies:

- Learning style (How I learn best):

- Previous clinical experience:

- What I hope to accomplish during my clinical practicum:

- Three specific goals that I hope to achieve during this clinical practicum:

  1.

  2.

  3.

IN-SERVICE ASSIGNMENT INSTRUCTION AND SUGGESTIONS

Students will be required to either present an in-service to the clinical staff and others or carry out a service project to benefit the clinic and/or patients.

In-Service
If the student chooses to present and in-service, the topic of the in-service is at the discretion of the Clinical Instructor (CI). If no topic is assigned by the CI, the student may present on the topic of the student's choosing. Regardless of the topic, the student will research current information and be able to answer any questions about that topic during the course of the presentation.

The student should have a handout to give each member of the audience that summarizes the information in the presentation. The student will also be required to give the DCE the following forms filled out by the appropriate persons:

1. Presentation outline (a copy of the handout is sufficient, so long as it is comprehensive)
2. Audience feedback form (see following pages)
3. Self-evaluation (See following pages)

Tips for making a good in-service presentation

1. **Introduce, state, and restate the topic**
   Tell the audience what you are going to tell them, tell them, and then tell them what you have just told them. In other words, let them see where you are going with your topic. Present your topic. Then summarize your topic.

2. **Be focused with your topic**
   Hold their interest by adapting to your audience. Try not to tell them everything you ever learned on the topic. It is better to narrow the focus and cover the topic more in depth. Use visual or audiovisual aids to supplement your lecture and keep their interest.

3. **Provide an outline**
   Provide your audience with a skeletal outline that they can use to follow along and even fill in to encourage them to stay active and not become passive learners.

4. **Be active while speaking**
   a. Be enthusiastic about your topic. Show your interest in the topic and your audience will be interested.
   b. Look organized and alert.
   c. Maintain eye contact with the audience, showing them that they matter.
   d. Maintain an alert and erect posture.
   e. Move about the room and gesture comfortably and naturally.

5. ***DON'T READ YOUR NOTES***
   Your audience will stay with you if you just talk to them about the topic. They'll lose interest if you simply stare at your paper and regurgitate information.

SERVICE PROJECT ASSIGNMENT INSTRUCTION AND SUGGESTIONS

Students will be required to either present an in-service to the clinical staff and others or carry out a service project to benefit the clinic and/or patients.

Service Project
If the student chooses to carry out or create a service project, the project is at the discretion of the Clinical Instructor (CI). If no project is assigned by the CI, the student can choose a service to provide, with the focus being to benefit the clinical site and/or patients.

The student will be required to write a 1-page, double spaced plan/reflection for their service project that describes how they determined the service that was needed and how it will benefit the clinic and patients.

The plan/reflection should include the following:

- A copy of the initial planned service project (how the project was decided, including benefit to the patient and clinic)
- Feedback provided by your CI and other staff you involved
- Evaluation and reflection of the process and how it turned out

Tips to making a good service project

1. **Identify a real need**
   Talk with clinical staff and patients to identify areas in care or services that need improvement. This can be anything from patient education, treatment techniques, or wellness initiatives, just to name a few.

2. **Focus on patient-centered care**
   Design your project around improving the patient experience or outcomes. Think about what would make their rehab journey smoother, more engaging, or more empowering.

3. **Collaborate with the clinic team**
   Involve PTs, PTAs, and even administrative staff. Their input ensures your project aligns with the clinic goals and is feasible.

4. **Incorporate evidence-based practice**
   Support your project with current research or clinical guidelines, if applicable. It will add credibility and ensure your project is grounded in best practices.

5. **Keep it scalable and sustainable**
   Design something that can continue after your rotation ends. Use templates and digital tools, or train staff to carry it forward.

PHYSICAL THERAPIST ASSISTANT PROGRAM

Attendee In-Service Evaluation Form

Presenter's Name: Date:

Topic: Facility:

Grading

5 = strongly agree *4 = agree* *3 = somewhat agree* *2 = disagree* *1 = strongly disagree*

Please circle your response in each section below

ORGANIZATION

The topic was introduced in a clear manner.

5 4 3 2 1

Comments:

The material was presented in a logical order.

5 4 3 2 1

Comments:

The presentation was well paced within the time allotted.

5 4 3 2 1

Comments:

CONTENT

The objectives were clearly stated.

5 4 3 2 1

Comments:

The objectives were addressed during the presentation.

5 4 3 2 1

Comments:

PHYSICAL THERAPIST ASSISTANT PROGRAM

Student In-Service Self-Evaluation Form

Presenter's Name: Date:

Topic: Facility:

Grading

5 = strongly agree *4 = agree* *3 = somewhat agree* *2 = disagree* *1 = strongly disagree*

Please circle your response in each section below

ORGANIZATION					
Introduction	5	4	3	2	1
Order	5	4	3	2	1
Pace	5	4	3	2	1

CONTENT					
Clarity	5	4	3	2	1
Continuity	5	4	3	2	1
Appropriateness	5	4	3	2	1

TEACHING METHODS					
Variety	5	4	3	2	1
Adequate time	5	4	3	2	1
Summary	5	4	3	2	1

OVERALL EXPERIENCE: Excellent Good Fair Poor Waste of time

What did your audience consider the <u>best points</u> of your presentation?

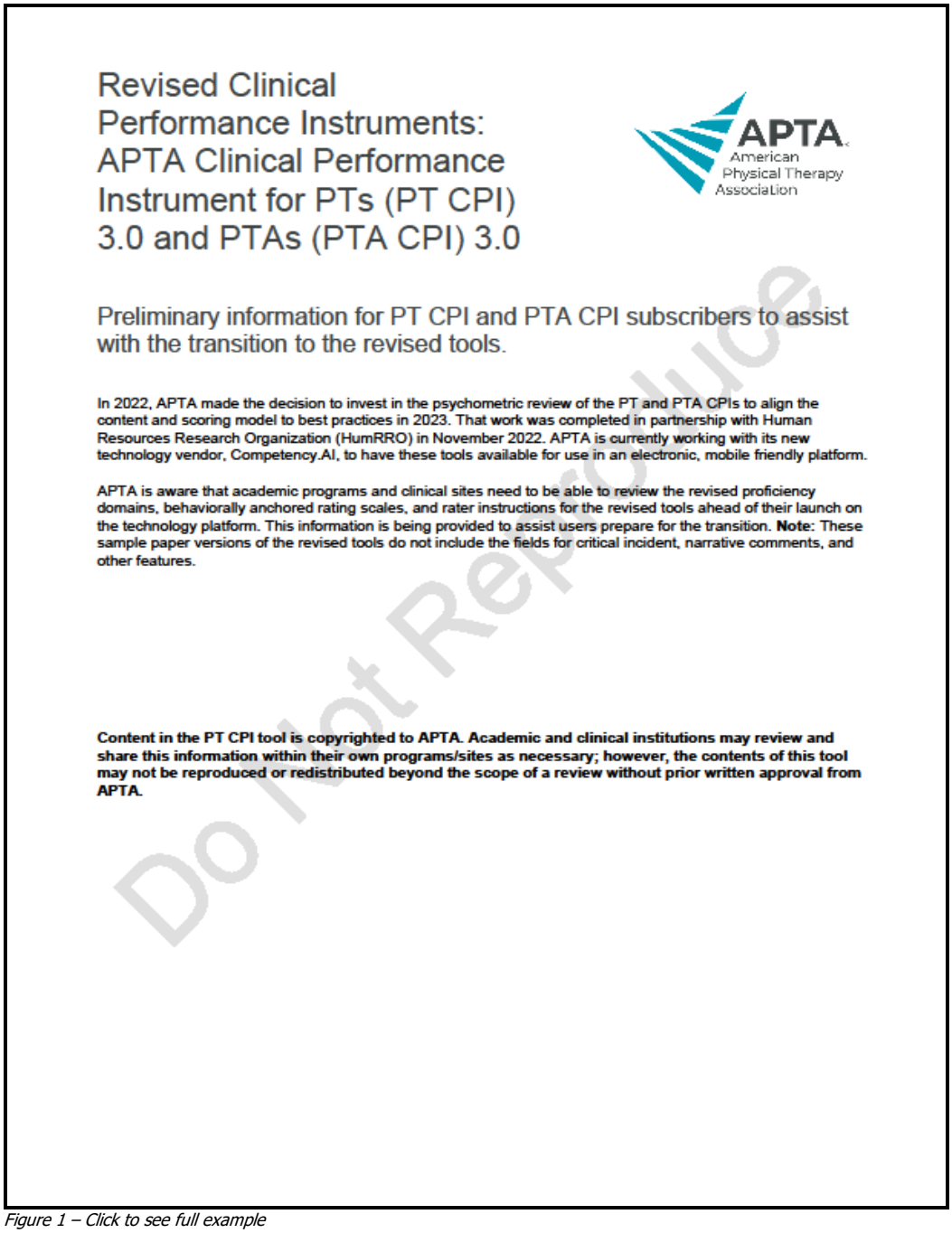
What did your audience consider the <u>weak points</u> of your presentation?

General Comments

Clinical Practicum – Weekly Goal Sheet

Date Set	Goal	Result/Date Met
	1.	
	2.	
	3.	
	4.	
	5.	
	6.	
	7.	
	8.	

Comments: _____



Revised Clinical Performance Instruments: APTA Clinical Performance Instrument for PTs (PT CPI) 3.0 and PTAs (PTA CPI) 3.0

APTA American Physical Therapy Association

Preliminary information for PT CPI and PTA CPI subscribers to assist with the transition to the revised tools.

In 2022, APTA made the decision to invest in the psychometric review of the PT and PTA CPIs to align the content and scoring model to best practices in 2023. That work was completed in partnership with Human Resources Research Organization (HumRRO) in November 2022. APTA is currently working with its new technology vendor, Competency.AI, to have these tools available for use in an electronic, mobile friendly platform.

APTA is aware that academic programs and clinical sites need to be able to review the revised proficiency domains, behaviorally anchored rating scales, and rater instructions for the revised tools ahead of their launch on the technology platform. This information is being provided to assist users prepare for the transition. **Note**: These sample paper versions of the revised tools do not include the fields for critical incident, narrative comments, and other features.

Content in the PT CPI tool is copyrighted to APTA. Academic and clinical institutions may review and share this information within their own programs/sites as necessary; however, the contents of this tool may not be reproduced or redistributed beyond the scope of a review without prior written approval from APTA.

Do Not Reproduce

Figure 1 – Click to see full example

ORIENTING YOUR NEW STUDENT

General Suggestions:

1. Put the student at ease. Be friendly.

2. Provide an orientation schedule. Include times, name(s) of person responsible. (See sample schedule provided.)

3. Provide handouts and include:

    a. A written list of staff with whom the student will have frequent contact. Include contact information for quick reference.

    b. Location of work areas, offices of instructors, supervisors, restrooms, etc.

    c. Expectations of free time (coffee breaks, lunch).

    d. Important information for easy reference. The student cannot retain everything at once.

4. Introduce staff, referring to a list when appropriate. Help the student take notice of individuals who may be able to provide future assistance. Be personable and include items of interest: hobbies, personalities, strengths.

5. Reassure the student that although grades are given, evaluations are used to determine strengths and weaknesses with the emphasis on learning rather than on grading.

6. Encourage the student to feel comfortable about asking questions. Solicit questions from the student from time to time throughout the first few days.

We strongly encourage each clinical site to create an in-house student orientation manual for the student's reference. Please see the next page for an example.

In-House Orientation Manual

Once the student arrives, the challenge of trying to organize what can be a very confusing day begins. A written in-house orientation manual may help reduce the confusion by providing the student with concrete written and visual examples of how they are to function within your facility. An introduction to some of the important policies, procedures, and philosophies of your department may also be helpful. Below are some examples of items that can be included:

1. Expectations of the student; behavioral objectives
2. Emergency procedures
3. Telephone and paging system (with numbers)
4. Patient charting and charging systems
5. Documentation: completed forms, samples of progress notes, any unique requirements
6. Approved medical abbreviation list (especially if there are any specific to your clinic)
7. Accident/incident report forms
8. Policies and procedures
9. Facility organization chart
10. Location of equipment and supplies available
11. Chain of command – who is responsible to whom
12. Patient scheduling system
13. Learning experiences available in your facility. The student may not fully understand what is offered at your facility, and this can be a great opportunity for you to get to know the student and what they want out of the clinical practicum
14. Responsibilities and training background of supportive personnel

Detail as many components as possible with examples/samples to help the student understand each. Do you have any special features in your department which should be mentioned in this manual? For example: information on referring physicians (e.g., specialty area, how and when to contact, etc.) or current research projects, specialty areas of the staff, etc. should be included.

This manual should be available for reference throughout the clinical practicum to answer the student's questions.

Sample Orientation Schedule

Day One

1. Greet student(s) with a friendly smile
2. Tour department
3. Introduce student(s) to each staff member
4. Discuss expectations of student(s) and clinical instructor (CI)
5. Review orientation manual
6. Lunch – Include the student(s)
7. Student(s) to observe the CI providing treatment and assist as appropriate
8. Help the student set weekly goals
9. If appropriate, begin patient assignments for student(s)

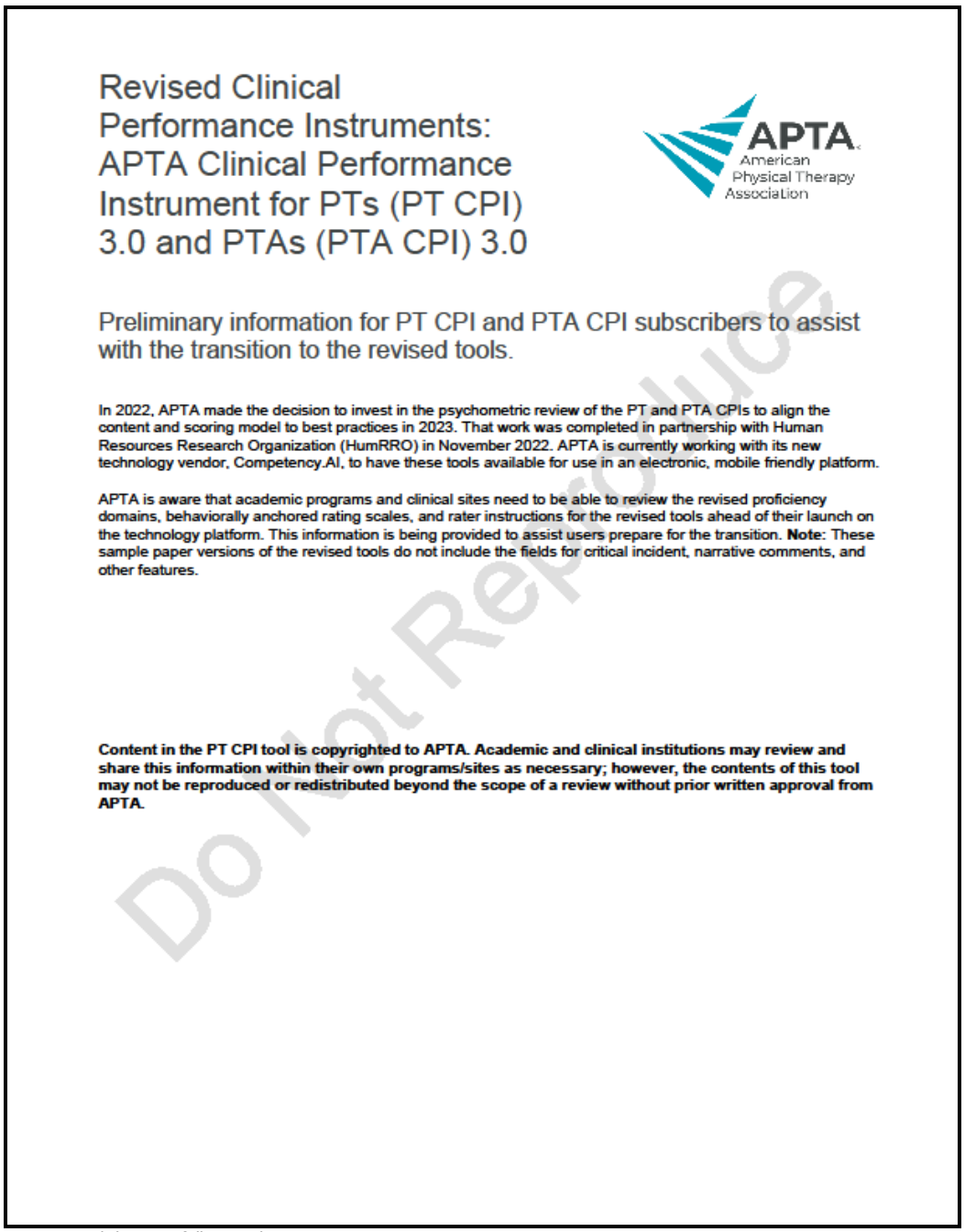
Day 2+

1. Tour facility
2. Confirm special opportunities that can be experienced (if appropriate and available) and possibly schedule times
3. Arrange conference and evaluation sessions (daily, weekly, etc.) to review patients, answer questions, or address problems
4. Issue checklist of available procedures, modalities, and techniques with which the student(s) should become familiar. Make the student responsible for completion of specific procedures/treatments
5. Ensure both CI and student are able to login to the CPI

Example Orientation Worksheet

A good orientation is critical to the success of any clinical practicum experience. The student and the CI (or someone who has been designated by the CI, in some cases) should cover the following information within the first week, if not days of the clinical practicum.

- ☐ A 30–60-minute meeting between the student and CI to discuss the following:
  - ☐ Phone number of the person the student should call if he/she will be unable to arrive at the clinic on time due to illness or emergency
  - ☐ If someone needs to get emergency information to the student while they are at the facility, what number should they call?
  - ☐ Emergency weather plans of facility (who to call, etc.)
  - ☐ The CI should have the student's emergency medical information
  - ☐ Learning style preferences of the student and teaching style preferences of the CI
  - ☐ Feedback and supervision – discuss the student's and CI's preferences
  - ☐ Student's goals and expectations for the clinical practicum
  - ☐ Expectations the CI has of the student
  - ☐ Observational opportunities available to the student and how these will be scheduled. (Surgery, OT, Speech, additional clinics, and specialty areas)
- ☐ Tour of the department and facility
- ☐ Emergency policies within the facility (Fir, Medical Emergency, Evacuation, etc.)
- ☐ How to use facility phones/paging/communication systems
- ☐ Where to keep valuables
- ☐ Restrooms
- ☐ Working and lunch hours
- ☐ Documentation and patient charging systems (including confidentiality procedures)
- ☐ Review Policies and Procedures Manual (handling of linen, color coding systems for waste, proper cleaning of bodily fluids or spills, proper waste disposal)
- ☐ Patient scheduling system
- ☐ Introduction to personnel student(s) will be working with
- ☐ Location of equipment and supplies, including emergency and safety equipment (protective garments, CPR mask, first aid kit, transfer/gait belts, etc.)



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Do Not Reproduce

Figure 1 – Click to see full example

UVU PHYSICAL THERAPIST ASSISTANT PROGRAM

Sample Academic Development Plan

[STUDENT NAME]
[FACILITY NAME]
Clinical Affiliation #___
[DATE]

The attached detailed clinical objectives reflect the results of a discussion with [FACILITY STAFF]; [UVU FACULTY] at [LOCATION], in which we clarified expectations of my behavior and performance, in areas that were identified as problems on [DATE].

The purpose of defining specific performance statements is to clarify the expectations of my performance during the remainder of my clinical practicum at [FACILITY].

I understand that I must incorporate these suggestions and goals into my daily activities at [FACILITY]. Failure to successfully meet these objectives by the end of the clinical (with a max of [EXTENSION TIMEFRAME] if the CI feels appropriate) will result in failure of this clinical practicum and remediation will take place at a determined location and time agreed upon by the CI, DCE or another PTA Program Faculty, and Student.

I understand that the emphasis on these objectives should in no way be construed to mean that these are the only criteria for successful completion of the clinical affiliation.

I also understand that ongoing communication with the CI is important in monitoring my progress towards these objectives.

By signing below, the undersigned acknowledges that they have read, understand, and agree to the terms and conditions contained within this Academic Development Plan.

Student Name	Student Signature	Date
CI Name	CI Signature	Date
SCCE Name	SCCE Signature	Date
DCE Name	DCE Signature	Date

UVU PHYSICAL THERAPIST ASSISTANT PROGRAM

Sample Academic Development Plan: Objectives/Goals

[STUDENT] will demonstrate the following by the end of the clinical affiliation [Could include an extension of [EXTENSION TIMEFRAME] if deemed appropriate by the CI):

1. Student will perform all activities related to patient care in a safe manner that minimizes the risk to both the patient and self. Examples of this include:
    a. Demonstrating awareness of contraindications and precautions of interventions
    b. Using acceptable techniques for safe patient handling of patients
    c. Recognizing physiological and psychological changes in patients

2. Student will demonstrate professionalism and responsibility during all interactions at [FACILITY]. Examples include:
    a. Punctuality and dependability
    b. Demonstrating initiative
    c. Accepting responsibility for his/her own actions and learning experiences
    d. Honesty

3. Student will communicate with the staff in a way that is appropriate for the situation. Examples include:
    a. Initiates communication in difficult situations
    b. Listens actively and attentively to understand what is being communicated

4. Student will demonstrate the ability to document appropriately all aspects of physical therapy care. Examples include:
    a. Patient response to interventions
    b. The interventions that took place during treatment
    c. Selected data collection measurements

5. Student will be able to participate inpatient problem solving with in the established POC. Examples include:
    a. Able to explain rationale for specific judgements regarding treatment
    b. Takes safety into account when making decisions regarding patient care

6. Student will obtain accurate information by performing selected data collection consistent with the POC. Examples include:
    a. Able to collect pertinent information in a timely manner from the patient's chart
    b. Perform data collection (vitals, ROM, MMT, etc.) in order to monitor the patient during treatment

7. Student will perform physical therapy interventions in a competent manner. Examples include:

a. Performs interventions consistent with the POC
b. Performs interventions in an effective and efficient manner
c. Provides interventions in a safe manner
d. Adjusts within the POC as needed based on the patient's response to treatment

8. Student will demonstrate good time management skills. Examples include:
    a. Using time effectively
    b. Stays productive during down time (looking up information, helping others, documenting, etc.)

9. Student will be able to differentiate the difference between the various levels of assistance used during ambulation and transfers. Examples include:
    a. Verbalizing to the CI the level of assistance using/used
    b. Correctly documenting the level of assistance, the was used

By signing below, the undersigned acknowledges that they have read, understand, and agree to the terms and conditions contained within this Academic Development Plan.

Student Name	Student Signature	Date
CI Name	CI Signature	Date
SCCE Name	SCCE Signature	Date
DCE Name	DCE Signature	Date

UVU PHYSICAL THERAPIST ASSISTANT PROGRAM

CI Checklist for Completing the Clinical Practicum

Similar to a patient care episode, successful completion of a clinical practicum requires documentation to show that all required elements have been accomplished. Your student is aware of all documentation requirements, and they should take accountability for ensuring that all required paperwork is completed for the clinical practicum. However, some of the documentation can only be accomplished by you, the CI, and some will require your input and advice. Please help your student be successful by completing your portion of the documentation in a timely manner.

Your student must complete the following in order to pass their clinical practicum experience:

a. **Weekly Goals**
   At the beginning of each week, you and your student should briefly discuss some appropriate goals for them to achieve during the coming week. Goals can be related to their clinical performance, productivity, or even simply exposure to various interventions/opportunities. This is your opportunity to guide your student's experience and communicate your expectations.

b. **In-Service**
   During the first week, please choose a date and topic for your student to present their in-service. The topic can be one of your choosing, or you may leave it up to the student to decide. As part of this requirement, your student must turn in documentation as follows:
   1. Prepare a concise handout for participants that covers the key points of the presentation
   2. Have all participants fill out an evaluation of their performance
   3. Fill out a self-assessment of their own performance

c. **Midterm and Final Performance Assessments:**
   1. PTA 3810 and PTA 3820 Assessments: The PTA program at UVU will use the web based Clinical Performance Instrument (CPI Web 3.0) for both the midterm and final student assessments. This is a crucial part of the clinical practicum experience for all of the affiliations, as it is your opportunity to provide your student with an assessment of their performance.

   The midterm assessment is especially important, since it gives your student an idea of their weaknesses, while allowing them adequate time to improve these areas prior to their final assessment.

UVU PHYSICAL THERAPIST ASSISTANT PROGRAM

Clinical Practicum Midterm Site Visit Form (For DCE Use)

Rotation: ☐ ***Clinical Practicum I*** ☐ ***Clinical Practicum II***

Student:_____ **Facility:**_____

Clinical Instructor(s):_____

CI CPI Email:_____

Student	**Yes**	**Some**	**No**	**N/A**	***Comments are only required if student is functioning below expectations***
1. Meeting expectations of the facility and clinical instructor					
2. Adapts to unexpected changes that occur in the clinic with confidence and problem-solving solutions					
3. Clinical skills are appropriate and progressing					
4. Maintaining safety of patients, self, and others					
5. Seeking and taking advantage of learning opportunities and feedback					
6. Large number of patients being treated with assistance from the CI					
Clinical Instructor	**Yes**	**Some**	**No**	**N/A**	***Comments are only required if CI is functioning below expectations***
7. Provides a positive learning experience					
8. Adequately plans for the student experience					
9. Observed providing constructive feedback to the student					
10. Provides a good professional role model.					
11. Appears clinically competent with student interactions					

12. Provides appropriate student supervision					
13. Demonstrates sensitivity to individual differences.					
14. Has completed the APTA Clinical Instructor Credentialing Course					
Recommendations for clinical instructor development:					
Clinical Facility	**Yes**	**Some**	**No**	**N/A**	***Comments are only required if facility is functioning below expectations***
15. Provides ethical, legal practice					
16. Provides time for CI to provide adequate student supervision					
17. Responsive to program's communication needs					
18. Provides care to patients representing the 4 practice patterns					
Circle all that apply: *Musculoskeletal* *Neurological* *Integumentary* *Cardiopulmonary*					
19. Provides care across the lifespan & Continuum of Care					
20. Provides the appropriate PT/PTA relationship					
21. Allowed the student to provide required project & in-service					
22. Offers unique learning experiences for students (Describe in comments)					
23. Offers opportunity for interprofessional collaborative practice					

Additional Comments:

UVU PHYSICAL THERAPIST ASSISTANT PROGRAM

Double click below to open full assessment

APTA
American Physical Therapy Association

Last Updated: 09/14/2011
Contact: pta@apta.org

PHYSICAL THERAPIST ASSISTANT STUDENT EVALUATION:

CLINICAL EXPERIENCE AND CLINICAL INSTRUCTION

June 10, 2003
(updated 9/14/11)

American Physical Therapy Association
Department of Physical Therapy Education
1111 North Fairfax Street
Alexandria, Virginia 22314