

PHYSICAL THERAPIST ASSISTANT PROGRAM

CLINICAL EDUCATION HANDBOOK 2023-2024

College Accreditation Status

Northwest Mississippi Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award the Associate of Arts degree, the Associate of Applied Science degree, and certificates in career education. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, GA, 30033-4097, or call (404) 679-4500 for questions about the accreditation of Northwest Mississippi Community College. The College was initially accredited by the Mississippi Junior College Accrediting Association in 1928 and by the Southern Association of Colleges and Schools in December 1953. The latest reaffirmation of the SACSCOC accreditation was in 2017. Northwest is authorized to operate in Mississippi by the Mississippi Commission on College Accreditation. The college is also a member of the American Association of Community Colleges.

Program Accreditation Status

Graduation from a physical therapist assistant education program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) American Physical Therapy Association, 3030 Potomac Ave., Suite 100 Alexandria, VA 22305-3085; phone (703) 706-3245; accreditation@apta.org is necessary for eligibility to sit for the licensure examination, which is required in all states.

COMMISSION ON ACCREDITATION IN PHYSICAL THERAPY EDUCATION (CAPTE)

The Physical Therapist Assistant Program at Northwest Mississippi Community College is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; telephone: 703-706-3245; email: accreditation@apta.org; website: http://www.capteonline.org. If needing to contact the program/institution directly, please call 662-562-3247 or email ballen@northwestms.edu.

Welcome to clinical education. We hope the contents of this handbook will assist in providing a high-quality clinical education experience for both clinical faculty members and their students. Clinical education is a vital portion of the physical therapist assistant curriculum. It allows the student to fully integrate and implement the information and skills learned during basic science coursework, as well as the clinical classroom and laboratory portions of the program.

The purpose of this handbook is to provide information and guidelines as a common frame of reference for all who are involved in the clinical education process:

- The student
- •The Clinical Instructor
- •The Center Coordinator of Clinical Education
- •The faculty members of the PTA Program at Northwest Community College

If you have any questions or concerns, please do not hesitate to contact us.

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I. Program Information

Institutional History

Northwest Mississippi Community College has its roots in the system of agricultural schools which were set up throughout this rural state in the early years of the 20th century. First organized as Tate County Agricultural High School in 1915, the school began to offer college level classes in the fall of 1926. With encouragement from the State Department of Education and leadership from Porter Walker Berry, who became the college's first president, this initial endeavor proved to be successful. Two years later Quitman County pledged its support for the expanded class offerings. Meanwhile the Mississippi Junior College Commission urged school officials to convert the established classes into a complete two-year program. As a result, in the fall of 1928 a fully-sanctioned junior college, later named Northwest Mississippi Junior College and accredited by the Mississippi Junior College Accrediting Association, opened its doors to 59 students.

Like all public institutions Northwest has been influenced by the political and economic climate in the state. When the Great Depression struck Mississippi with particular virulence, students were allowed to pay for their board by donating garden and farm products to the dining hall, while the government's public works program provided funds to supplement the school's budget. During World War II an accelerated program was introduced to allow young men to complete their educations quickly so that they could join the war effort. As returning veterans enrolled in large numbers after the war, the curriculum was expanded to fit their needs, and new buildings were constructed from government surplus materials.

Throughout this time the course offerings, the physical facilities, and the extracurricular activities of the school were growing. By the end of its third decade of operation the curriculum had expanded from a basic program of liberal arts and agriculture to include science, art, and journalism in addition to a variety of vocational technical courses. The original three buildings had been supplemented with a cafeteria, additional dormitory and classroom space, sports and recreational facilities, and acreage for a model farm. In 1953 the Southern Association of Colleges and Schools commended Northwest as a "bargain in educational facilities" and granted the college its coveted accreditation. During the next few years the college continued to prove that it deserved this honor by broadening its capacity to serve the needs of the 11-county district it had grown to encompass. A bus route began to provide free transportation for commuters, while night classes and off-campus courses offered extended educational services. Recent innovations include DCElerated classes and non-traditional scheduling to accommodate adults, as well as short non-credit courses of interest to all ages. Northwest's first distance learning programs were offered on the Internet in the spring of 1999.

Today Northwest serves students at four campuses: the main campus in Senatobia, DeSoto Center at Southaven and Olive Branch, and Lafayette-Yalobusha Technical Center at Oxford. Yet after nine decades of growth and in the school's ninth administration, the mission of Northwest remains true to the

vision of its founders. Northwest strives today, as it did in 1926, to bring higher education closer to the people as it serves the academic, employment, physical, cultural, and special needs of the citizens of northwest Mississippi.

Program Summary

The Physical Therapist Assistant (PTA) Program at Northwest Mississippi Community College is a two-year program involving six semesters in total, including two summer semesters. Graduates will receive the degree of Associate in Applied Science in Physical Therapist Assistant. The Program curriculum includes courses in general education and basic science as well as technical physical therapy coursework. The program places a strong emphasis on integrating clinical education experiences within the technical portion of the curriculum. Students will be introduced to direct patient care through an integrated, initial clinical education experience in the second technical semester and an integrated, full-time clinical education experience in the penultimate semester, followed by two, terminal, full-time clinical education experiences in the final semester.

STATEMENT OF NONDISCRIMINATION

Northwest Mississippi Community College does not discriminate on the basis of race, color, national origin, sex, disability, religion, gender identity, age, or status as a veteran or disabled veteran in all its programs and activities. Northwest Mississippi Community College prohibits sexual harassment and all forms of sexual violence, regardless of sex, gender identity or sexual orientation. The following have been designated to handle inquiries regarding non-discrimination policies: Americans with Disabilities Act of 1990/Section 504 of the Rehabilitation Act of 1973: Disability Support Services Coordinator, Tate Hall, P.O. Box 5555, 4975 Highway 51 North, Senatobia, MS 38668, telephone number 662-562-3309, e-mail address mkelsay@northwestms.edu; Title II of the Age Discrimination Act: Vice President for Finance and Administration, James P. McCormick Administration Building, P.O. Box 7017, 4975 Highway 51 North, Senatobia, MS 38668, telephone number 662-562-3216, e-mail address ihorton@northwestms.edu; Title IX of the Educational Amendments of 1972/Title VII of the Civil Rights Act of 1964: Associate Vice President for Student Services and Enrollment Management, Tate Hall, P.O. Box 7010, 4975 Highway 51 North, Senatobia, MS 38668, telephone number 662-562-3409, e-mail address trush@northwestms.edu.

Northwest Community College Mission Statement & Values

As part of this strategic planning process, and with new leadership at the college, the NWCC mission statement was revised to streamline the mission and add a vision and values. The new vision, mission, and values for NWCC are as follows.

Vision:

Northwest Mississippi Community College transforms our students' lives, enriches our communities, and strives for excellence in our educational programs and services.

Mission:

Northwest Mississippi Community College is an open-DCEss, public, two-year institution primarily serving Benton, Calhoun, DeSoto, Lafayette, Marshall, Panola, Quitman, Tallahatchie, Tate, Tunica, and Yalobusha counties. NWCC is a learning-centered community providing educational opportunities with quality instruction for students from all walks of life. Our college fosters a culture of innovation, collaboration, and student success. We strive for continuous improvement, with a standard of excellence in every area of the institution. Our college partners with businesses and industries that seek to grow the economy and the workforce, as well as partners with alumni, friends, and others. Engagement takes place in all communities that the college serves.

Values:

- Accountability Accepting responsibility for appropriate actions, obligations, and duties.
- Integrity Committing to honesty and ethical behavior in all situations.
- Excellence Achieving the highest standards as benchmarks to surpass.
- Respect A feeling of esteem or regard for the unique qualities of all individuals.
- Service Helping others without the desire for personal gain.
- Sustainability Ensuring effective, efficient use of college resources while
 implementing fiscally sound practices and environmentally sustainable
 initiatives that can be modeled.
- Accessibility Providing affordable and available opportunities for all.
- Creativity Being innovative in accomplishing objectives.
- Leadership Influencing others positively.

NWCC School of Health Science Mission

NWCC School of Health Sciences provides excellence in academic instruction, instills proficient and safe clinical practices in students, and meets the community needs in which they serve. The collaborative effort of the SHS develops students with a knowledge base including cultural competence and continued advancement through service, professionalism, excellence, and leadership.

PTA Mission Statement

The Northwest Mississippi Community College Physical Therapist Assistant program provides a comprehensive and contemporary curriculum in a high-quality learning-centered environment to prepare graduates to practice as entry level physical therapist assistants able to work under the direction and supervision of a physical therapist. Graduates will serve the college region and beyond by providing culturally competent healthcare services while understanding the importance of lifelong learning and professionalism.

CORE VALUES

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.

Program Goals

Goal 1. Program graduates will serve the community by working as competent, entry-level physical therapist assistants able to work under the direction and supervision of a physical therapist.

Goal 2. Program faculty will provide a high-quality learning-centered environment and a comprehensive curriculum based on contemporary physical therapy practice

Goal 3. The program will promote the importance of continuing personal and professional development through faculty modeling, life-long learning opportunities and membership in professional organizations.

backgrounds

in a culturally competent manner with patients and caregivers from diverse

Goal 4. PTA Program graduates will communicate effectively and professionally

PHYSICAL THERAPIST ASSISTANT **CURRICULUM AND PROJECTED SCHEDULE (Subject to change)**

FIRST YEAR

FALL	SPRING	
3 sch Medical Terminology I (BOT 1613)	3 sch Humanities/Fine Arts Elective	
3 sch English Composition I (ENG 1113)	3 sch Personal and Community	
	Health (HPR 1213)	
4 sch Anatomy & Physiology I/Lab	4 sch Anatomy and Physiology/Lab II	
(BIO 2513/2511)	(BIO 2523/2521)	
3 sch Public Speaking (SPT 1113)	3 sch College Algebra (MAT 1313)	
3 sch Psychology (PSY 1513)	3 sch Medical Terminology II	
	(BOT 1623)	
TOTAL 16 sch	TOTAL 16 sch	

FIRST SUMMER TERM

3 sch Fundamental Concepts of Physical Therapy (PTA 1123) 3 sch Fundamental Skills for Physical Therapist Assistants (PTA 1213)

TOTAL 6 sch

SECOND YEAR

FALL	SPRING
4 sch Kinesiology (PTA 1314)	4 sch Electrotherapy (PTA 2234)
4 sch Therapeutic Modalities (PTA 1224)	4 sch Therapeutic Exercise and
4 sch Therapeutic Exercise and	Rehabilitation II (PTA 2334)
Rehabilitation I (PTA 1324)	3 sch Medical Conditions and
4 sch Clinical Education I (PTA 2414)	Related Pathology (PTA 2513)
	4 sch Clinical Education II (PTA 2424)
TOTAL 16 sch	TOTAL 15 sch

TOTAL 15 sch

SECOND SUMMER TERM

3 sch Physical Therapy Seminar (PTA 2523) 4 sch Clinical Education III (PTA 2434) 4 sch Clinical Education IV (PTA 2444) TOTAL 11 sch

Course Descriptions

PTA 1123, Fundamental Concepts of Physical Therapy

This course is an introduction to the field of physical therapy including role orientation, professional organizational structure, legal and ethical implications, and legislation. Historical patterns in the development of the profession will be explored and medical terminology introduced.

PTA 1213, Fundamental Skills for Physical Therapist Assistants

This course provides knowledge of topics utilized in the practice of physical therapy. Topics covered will include positioning, draping, transfers, body mechanics, gait training, and standard precautions. Vital signs, first aid, and emergency techniques will also be covered.

PTA 1224, Therapeutic Modalities

This course is an introduction to the theory and practical application of hydrotherapy, thermotherapy, cryotherapy, light therapy, and mechanotherapy. Emphasis will be placed on the technique of application, indications, and contraindications of modalities.

PTA 1314, Kinesiology

This course studies individual muscles and muscle function, biomechanical principles of joint motion, gait analysis, goniometry, and postural assessment.

PTA 1324, Therapeutic Exercise and Rehabilitation

This course provides an overview of the biochemical and neurophysiological basis and application of various therapeutic exercises. The basics of therapeutic exercises as correlated with specific conditions. This course focuses on rehabilitation techniques in the treatment of a variety of selected conditions. Specialized exercise procedures are emphasized.

PTA 2234, Electrotherapy

This course emphasizes theory and practical application of electrotherapy and other therapeutic procedures. Indications and contraindications of modalities are also discussed.

PTA 2334, Therapeutic Exercise and Rehabilitation II

This course presents theory, principles and techniques of therapeutic exercise and rehabilitation for primary neurological conditions. Methods of functional, motor, and sensory assessment and intervention techniques are included. Principles of prosthetics and orthotics functional training and other techniques are covered.

PTA 2414, Clinical Education

This course provides supervised clinical experiences in demonstrating the attributes and applying the skills for which students have been deemed competent for the clinical setting.

PTA 2424, Clinical Education II

This is the first of three culminating clinical education experiences that provide supervised clinical experiences in demonstrating the attributes and applying the skills that prepare students for entry into the physical therapy profession.

PTA 2434, Clinical Education III

This is the second of three culminating clinical education experiences that provide supervised clinical experiences in demonstrating the attributes and applying the skills that prepare students for entry into the Physical Therapy profession.

PTA 2444, Clinical Education IV

This is the third of three culminating clinical education experiences that provide supervised clinical experiences in demonstrating the Physical Therapy profession.

PTA 2513, Medical Conditions and Related Pathology

This course provides a basic knowledge of selected diseases and conditions encountered in physical therapy practice. Emphasis is etiology, pathology, and clinical picture of diseases studied. Various physical therapy procedures in each disability are discussed.

PTA 2523, Physical Therapy Seminar

This course represents a synthesis of previous didactic, laboratory, and clinical experiences. Students are directed to explore a topic or area of interest in physical therapy practice. Recognition of the importance of employability skills after graduation is included.

Clinical Education Learner Outcomes

PTA 2414: Clinical Education I

- 1. Demonstrate safe performance of selected physical therapy assessment skills and treatment interventions from within the physical therapist's plan of care with routine patients at an Advanced Beginner level on the Clinical Performance Instrument
- 2. Demonstrate appropriate documentation and communication with the physical therapist regarding treatment interventions, data collection, and patient response to treatment with moderate guidance, displayed by achieving Advanced Beginner performance on the Clinical Performance Instrument
- 3. Display the ability to assist in the education of patients, family members, and caregivers with moderate supervision and guidance by the physical therapist
- 4. Demonstrate the ability to assist in routine administrative tasks of the department with moderate supervision and guidance, at the Advanced Beginner level on the Clinical Performance Instrument
- 5. Display appropriate legal and ethical behavior during skill performance and interactions with patients, family members, and other healthcare providers with moderate guidance from the supervising physical therapist
- 6. Demonstrate appropriate patient communication in a culturally competent manner, with moderate guidance from the physical therapist

PTA 2424: Clinical Education II

- 1. Demonstrate safe performance of selected physical therapy assessment skills and treatment interventions from within the physical therapist's plan of care at an Intermediate level on the Clinical Performance Instrument
- 2. Demonstrate appropriate documentation and communication with the physical therapist regarding treatment interventions, data collection, and patient response

to treatment with minimal guidance, shown by achieving Intermediate performance on the Clinical Performance Instrument

- 3. Display appropriate education of routine patients, family members, and caregivers with occasional guidance; displayed by achieving Intermediate performance on the Clinical Performance Instrument
- 4. Demonstrate the ability to participate in routine administrative tasks of the department including scheduling and billing at the intermediate level of the Clinical Performance Instrument
- 5. Display appropriate legal and ethical behavior during skill performance and interactions with patients, family members, and other healthcare providers with minimal guidance from the supervising physical therapist
- 6. Demonstrate appropriate patient communication in a culturally competent manner, with minimal guidance from the physical therapist

PTA 2434: Clinical Education III

- 1. Demonstrate safe and independent performance of selected physical therapy assessment skills and treatment interventions from within the physical therapist's plan of care for routine patients and with occasional guidance for complex patients, displayed by achieving Advanced Intermediate level on the Clinical Performance Instrument
- 2. Demonstrate independent documentation and communication with the physical therapist regarding treatment interventions, data collection, and patient response to treatment for routine patients, and with occasional cueing with more complex patients, displayed by achieving Advanced Intermediate performance on the Clinical Performance Instrument
- 3. Display the ability to independently provide education to patients, family members, and caregiver in simple situations, with occasional cueing for complex situations; shown by achieving Advanced Intermediate performance on the CPI
- 4. Demonstrate the ability to participate in administrative functions of the department including attending departmental meetings, patient case conferences, and scheduling to meet patient needs at an Advanced Intermediate level on the Clinical Performance Instrument
- 5. Display appropriate legal and ethical behavior during skill performance and interactions with routine patients, family members, and other healthcare providers, and with occasional cuing with complex patients
- 6. Demonstrate appropriate patient communication in a culturally competent manner independently for routine patient and with occasional cueing from the physical therapist for complex patients.

PTA 2444: Clinical Education IV

- 1. Demonstrate entry-level performance of selected physical therapy assessment skills and treatment interventions from within the physical therapist's plan of care
- 2. Demonstrate entry-level documentation and communication skills regarding all aspects of treatment and the patient's response to treatment

- 3. Display entry-level education skills for patients, family members, and caregivers
- 4. Demonstrate the ability to independently participate in administrative functions of the department including attending departmental meetings, patient case conferences, and scheduling to meet patient needs at entry-level on the Clinical Performance Instrument
- 5. Display entry-level legal and ethical behavior during skill performance and interactions with patients, family members, and other healthcare providers
- 6. Demonstrate entry-level patient communication in a culturally competent manner with routine and complex patients

II. General Guidelines and Procedures

Selection of Clinical Education Sites and Clinical Instructors

The "Guidelines for Clinical Education" endorsed by the APTA's House of Delegates was used as a resource to select the following criteria for selection of clinical education sites and clinical instructors.

Criteria for Selection of Clinical Education Sites

- 1. The clinical site's philosophy regarding clinical education is compatible with the NWCC PTA
- 2. The clinical site's clinical education program is planned to meet the specific objectives of the academic program, the physical therapy service, and the individual student.
- 3. The physical therapy staff practices ethically and legally.
- 4. The clinical site demonstrates administrative support for physical therapy clinical education.
- 5. The clinical site has a variety of learning experiences, appropriate to the setting, available to students.
- 6. The clinical site provides an active, stimulating environment appropriate for the learning needs of the student.
- 7. The physical therapy staff is adequate in number to provide an educational program for students.
- 8. Clinical sites with more than three physical therapists have a designated Clinical Coordinator of Clinical Education.
- 9. There is an active staff development program for the clinical site.
- 10. The clinical education site is committed to the principle of equal opportunity affirmative action as required by Federal law.

Criteria for Selection of Clinical Instructors (CI):

- 1. The CI is either a PT or PTA.
- 2. The CI graduated from an accredited program.
- 3. The CI is licensed, registered, or certified in those states where applicable.
- 4. The CI has at least one year of clinical experience.
- 5. The CI demonstrates clinical competence, professional skills, and ethical behavior.

- 6. The CI demonstrates effective communication skills.
- 7. The CI demonstrates effective instructional skills.
- 8. The CI demonstrates effective performance evaluation and supervisory skills.

Responsibilities of the Director of Clinical Education (DCE)

One member of the PTA faculty is responsible for coordinating the clinical education portion of the program curriculum. The DCE works directly with the other program faculty, clinical faculty, and students to provide learning experiences which will help the student develop clinical competence. The DCE is responsible for the following:

- 1. Development of clinical education sites.
- 2. Coordinate and provide clinical instructor development activities.
- 3. Assessment and determination of student readiness for clinical experience in collaboration with program faculty.
- 4. Meet with students to discuss clinical site selection.
- 5. Set up and schedule clinical assignments for students.
- 6. Ensure that students get a variety of clinical experiences.
- 7. Meet with students to discuss goals related to clinical education.
- 8. Coordination of all clinical education experiences.
- 9. Maintain and update clinical site database.
- 10. Maintain and update Clinical Affiliation Agreement database.
- 11. Update the Clinical Education Handbook.
- 12. Provide updated Clinical Education Handbook to all clinical sites and students.
- 13. Provide all forms and information to clinical site and clinical instructor.
- 14. Contact clinical site by phone mid-way through clinical experiences.
- 15. Ensure students are trained in CPI prior to Clinical Education I.
- 16. Complete, schedule, and/or coordinate site visits for Clinical Education I, II, III, and IV as needed.
- 17. Serve as a resource to the student and the clinical instructor.
- 18. Confer with student and clinical instructor regarding student learning needs and progress towards meeting objectives.
- 19. Keep student and clinical instructor informed on APTA and state specific regulations and rules that guide clinical practice.
- 20. Facilitate conflict resolution and problem-solving strategies.
- 21. Assess student overall clinical education performance based on methods of evaluation.
- 22. Contact and secure new clinical sites and complete all appropriate paperwork.
- 23. Ensure that Clinical Affiliation Agreement between NWCC and clinical site is reviewed and renewed annually by academic and clinical faculty.
- 24. Ensure that clinical education sites receive a copy of NWCC's liability insurance on an annual basis.
- 25. Ensure that clinical instructors meet selection criteria by compiling a database for monitoring the background, quality and effectiveness of clinical instructors

Responsibilities of the Center Coordinator of Clinical Education (CCCE)

Each clinical site with three or more PTs and PTAs should have a designated CCCE who is responsible for coordinating the clinical education assignments and student activities. The CCCE is responsible for the following:

- 1. Coordinate and schedule potential clinical experiences for affiliating schools
- 2. Provide orientation materials on the day of student arrival
- 3. Delegate actual clinical supervision of students to a staff PT or to a PT/PTA team
- 4. Serve as a resource for the CI for establishing goals and objectives, setting up learning experiences, and evaluating student performance
- 5. Inform the CI of all pertinent information from the affiliating schools
- 6. Monitor the supervision and learning experiences of students. Provide communication and problem-solving strategies for the student and CI, if needed
- 7. Provide necessary documentation to the schools (clinical agreements, completed student CPIs)
- 8. The CCCE should contact the PTA Program Director with any complaints involving the PTA Program. The CCCE should contact the SHS Dean, Dr. Craig Lafferty*, with any complaints regarding the DCE or PTA Program Director. See *Complaints* on page 35.

Responsibilities of the Clinical Instructor (CI)

CIs are individuals who provide clinical instruction and supervision when students are engaged in the clinical education portion of the curriculum. CIs are considered PTA Program clinical faculty members, but are not employed by NWCC. The CI demonstrates clinical competence and a willingness to share his/her insights and rationales related to patient care. The responsibilities of the CI are as follows:

- 1. Demonstrate an interest in teaching and in continuing education.
- 2. Orientate the student to the facility.
- 3. Facilitate student accomplishment of goals and objectives; assist with planning learning experiences with the student.
- 4. Supervise the student or arrange supervision by another qualified person.
- 5. Serve as a resource to the student.
- 6. Serve as a role model of professional behavior.
- 7. Encourage the student to take advantage of unique resources and learning experiences of the clinical setting and its staff.
- 8. Provide an opportunity for regularly scheduled review and discussion of student clinical performance and progress.
- 9. Confer and consult with the DCE regarding student learning needs and progress toward meeting objectives.
- 10. Consult with the DCE regarding unsatisfactory progress of the student.

- 11. Assess and evaluate the student clinical experience. Set clear expectations and provide ongoing verbal and written feedback.
- 12. Problem-solving needs are to be addressed through open communication between the student and CI. If problems cannot be solved to the satisfaction of the CI and the student, the CCCE and DCE should be contacted.
- 13. The CI is responsible for being aware of which assessment or intervention techniques the student has demonstrated competence on during the PTA Program prior to the clinical experience (See skill list located in the Appendix). If a CI teaches a student an assessment or treatment technique that has not been presented or practiced in the academic setting, the CI is responsible for determining if the student is safe in applying the procedure to the patient in the clinical setting. The student cannot be evaluated on that skill.
- 14. The CI is expected to act in an ethical manner and maintain student confidentiality
- 15. The CI may contact the SHS Dean with any complaints regarding the DCE or PTA Program Director.
- * The CI should contact the PTA Program Director with any complaints involving the NWCC PTA Program.
- 16. When a patient or member of the public has a complaint or concern regarding a PTA student or the NWCC PTA Program, the CI is responsible to give the individual the name, title, and phone number of SHS Dean.* No retaliation will occur by the program or college due to a complaint being field. See *Complaints* on page 35.
- 17. The CI must complete or have completed the online CPI training. If the CI is identified as not having completed this training, the DCE will provide opportunity for this training.

Affiliation Agreement

Only clinical facilities with current, unexpired, written Clinical Affiliation Agreement in place will be utilized for the placement of students. A complete Clinical Affiliation SPTA is sent when a facility is first utilized. The DCE reviews the list of clinical sites annually to make sure all sites have a current Clinical Affiliation Agreement. The agreement automatically rolls over from year to year within the agreement's timeline. (5 years) NWCC and/or the clinical facility can terminate the agreement with a written notice, 90 days prior to termination.

Arrangement of clinical rotations

Requests for dates of clinical experiences are emailed out to the Clinical Coordinators of Clinical Education (CCCE) annually before March 5th for all clinical rotations. The deadline to return clinical slots is March 31st. The CCCE receives clinical assignments for students by no later than the first week day of June for fall clinicals. The CCCE is responsible for assigning students to each clinical instructor.

Placement Policy

The PTA Program DCE makes all clinical assignments. Clinical placements are designed to expose the student to different physical therapy settings. It is hoped this exposure will assist the student's attainment of the skills needed for entry level practice as a Physical Therapist Assistant.

All students are required to complete four, 180-hour clinical rotations. The DCE will ensure that all students participate in at least one outpatient and at least one inpatient clinical, defined as an acute experience at a hospital, acute/inpatient rehab unit, subacute facility/unit, or skilled nursing facility during the clinical experiences.

Selection of clinical sites will occur using a lottery system. Upon entry to the program, students will be assigned a number, (i.e. 1-15). The DCE will provide a listing of available sites prior to each selection period for students to discuss and negotiate with their peers. For the first clinical rotation, 1-5 will choose first, 6--10 second, and 11-15 last during a designated time period on the same day. For the second clinical 6-10 will choose first, 11-15 second, and 1-5 last. For the third clinical experience, 11-15 will choose first, 1-5 second, and 6-10 last. In the event that there are fewer than 15 students, we will skip over the numbers that are not selected. If the class begins with fewer than Physical Therapist Assistant Program Handbook 15 students, then we will redesign the numbering system, however, it will follow the same pattern so that each student gets to choose in a first, second, and third group. For clinical education placements, all expenses incurred (transportation, meals, housing, etc.) are the students' responsibility unless they are provided by the clinical facility. Special clinical experience arrangements and reasonable accommodations can be made for students with a documented disability and who are working with LCC Disabilities Resources. Reasonable accommodations shall be consistent with standards at the clinical facility for employed physical therapist assistants. Special situations should be discussed with the DCE.

For Clinical Education I, students will have the educational background to perform either a SNF, acute, or outpatient orthopedic clinical experience. For Clinical Education II, III, and IV, students will also have the background to perform a clinical experience in a more advanced clinical setting, such as pediatrics, inpatient rehabilitation, and spinal cord injury rehab.

Readiness for Clinical Experiences

The DCE in consultation with other PTA program faculty will assess each student's readiness prior to each clinical experience. The student will either be placed or not be placed in the clinic based on this assessment. Considerations will include, but not be limited to the following areas:

- 1. Skill competency demonstrated on practical exams
- 2. Professional Behaviors status
- 3. Prior or current probationary status

- 4. Clinical evaluations and performance from completed affiliations
- 5. Ability to perform in a safe manner

An important aspect of this readiness assessment is determining if the student is safe for clinical practice. Safety in regards to patient care is a priority of this program. In order to ensure that the student will be able to perform in a safe manner that minimizes risk to patient, self, and others, the PTA faculty will consider all of the areas listed above. In addition, all practical exams will be monitored in regards to safety criteria, including retakes. The student will be notified in writing if they are placed on program probation or if they are denied a clinical placement.

Grading Criteria for Passing Clinical Education

Clinical Education courses are graded on a Pass-No Pass system. There is a minimum criterion rating on the Clinical Performance Instrument which must be met to consider the clinical experience passed. The minimum acceptable rating for Clinical Education I is Advanced Beginner for all 14 criteria. For Clinical Education III, the minimal acceptable rating for all 14 criteria is Intermediate. For Clinical Education III, the student must be at Advanced Intermediate level for all 14 criteria. Clin Ed IV- the minimal acceptable rating is Entry-level. A student must also meet the program's clinical education attendance and absenteeism policy and complete all clinical experience assignments to obtain a passing grade for all clinical education coursework. A No Pass grade for a clinical education experience may still be given even if a student follows the attendance and absenteeism policy and obtains the minimal acceptable score on the Clinical Performance Instrument. This decision is a professional judgment based upon the following:

- 1. Whether any "Significant Concerns" boxes are checked on the final CPI form. If one or more "Significant Concerns" are checked on the final evaluation it is unlikely the student's performance would be considered satisfactory for the course.
- 2. Problems or concerns raised by the student and clinical faculty during the clinical experience and whether or not these were effectively resolved
- 3. How the problems in #2 affected patient care and safety as well as the student's chances of performing at entry-level by graduation
- 4. Whether the problems in #2 fit a pattern of problems that were evident during the student's academic coursework
- 5. DCE consultation with the student, CI, CCCE, and PTA Program Director
- 6. The uniqueness or complexity of the clinical education site
- 7. Whether or not all outcomes on the course syllabus have been met (Such as Expected Professional Behaviors levels).

The final decision as to whether or not the student passes the clinical experience is made by the DCE. If the DCE determines that there is a question about whether a student's performance is acceptable, the DCE brings up the issue to the PTA program faculty for consideration.

Failing Grade for the Clinical Experience

- 1. The DCE meets with the student to discuss the grade and reason for the grade.
- A student who fails a clinical course may be allowed to retake the clinical course as outlined in the readmission policy. All SHS students who fail to abide by the Student Occurrence policy (3.28 PTA Student Handbook)

may have further disciplinary actions placed against them as outlined within the guidelines of the NWCC policies. Issues such as patient safety, substance impairment, actions unbecoming of a healthcare professional are examples of issues documented as student occurrences that may warrant removal from the program. A student must pass Clinical Education Experience I, II, and III, to remain in the program. If a student does not achieve all of the requirements to pass Clinical Education IV, the student may be provided with an opportunity to complete the course after graduation with a grade of "Incomplete" until the time of satisfactory completion, at which time graduation requirements will also be met. The student is reminded that this could delay their eligibility of sitting for the licensure exam.

- 3. Recommendations are made for remediation of the problem.
- 4. The student is reminded of NWCC policies regarding the student's right of appeal.
- 5. A plan of action is developed by the DCE, PTA Program Director, and the student.

Graduation Criteria

Upon successful completion of the following criteria, Northwest Mississippi Community College will grant the Degree of Associate of Applied Science in Physical Therapist Assistant.

- 1. Credit Courses: Students are required to complete all program general education and technical coursework with a minimum grade of "C" for each course with the exception of "B" or higher in Anatomy & Physiology I/II Lecture and Lab.
- 2. Clinical Education: Students are required to pass all clinical education courses
- 3. Practice Exam and Assessment Tool (PEAT): Students are required to pass (score of 600 or greater) one of the two PEAT examinations during PTA 2523 Physical Therapy Seminar. If a student does not obtain a passing score, the student must achieve a passing score on a comprehensive exam (score 78% or higher) provided by faculty. The interval between exam attempts will not be less than one week to allow students adequate time to prepare. Students will not be able to complete the program until either the PEAT OR comprehensive exam is passed.
- 4. Student must be assessed at "Entry-level" for all ten Professional Behaviors by program faculty. The graduation date will be defined as the month of graduation commencement or the end of clinical experiences, whichever comes later. In order to qualify to participate in commencement, a student must have met all program requirements and be in good academic standing.
- 5. Student must pass all required skill competency checks and practical examinations.

School Holiday and Inclement Weather

Not all clinical education sites recognize the same holidays as NWCC. These sites may remain open for regular business although NWCC may be closed. Students will follow the clinical education site schedule for holidays. If the site remains open for regularly scheduled business, the student will perform their clinical education duties during those holidays. If the clinical education site is closed during a holiday, the student will also have that day off.

If a clinical education facility closes for regular business due to inclement weather the student is to call or email the DCE as per the absenteeism policy. It will not be considered an absence if the clinical education site is closed due to inclement weather.

III. STUDENT POLICIES

In accordance with Mississippi law governing the practice of physical therapy, the following activities may not be delegated to a Student Physical Therapist Assistant (SPTA): patient/client initial examination, intervention planning, initial intervention, and initial or final 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 and cosigned by the physical therapist. PTA students are expected to be asked to perform only those duties that are routinely delegated to PTAs and within their scope of practice.

Student Responsibilities at Clinical Sites

- 1. The student shall be supervised at all times by a licensed physical therapist or licensed physical therapist assistant.
- The student shall be responsible for providing to the Facility proof of liability insurance, current certification in CPR, record of Hepatitis B vaccination or letter of declination, and record of current TB screening.
- 3. The student shall be responsible for his/her own transportation to/from all clinical assignments.
- 4. The student shall be responsible for his/her own illnesses/injuries and costs of treatment during the clinical assignment.
- 5. The student shall be responsible for maintaining his/her own healthcare insurance.
- 6. The student shall complete health forms as requested by the Facility.
- 7. The student shall be responsible for complying with the Facility's administrative policies.
- 8. The student shall be responsible for abiding by the dress code of the Facility. If a certain uniform is not required by the facility, the student must abide by the School's clinical education program dress code.
- 9. The student shall notify the Facility of intended time of arrival and be responsible for reporting to the Facility as instructed by the Facility.
- 10. The student shall be responsible for his/her own housing during clinical assignments.

Attendance and Absenteeism

In order to ensure that each student enrolled in the PTA program progresses through the program with an adequate background, knowledge, competency, and skills, the faculty at Northwest Mississippi Community College emphasizes attendance in each phase of the program. The faculty Accepts this responsibility of holding each student accountable for their attendance. The commitment to this policy is to ensure that each student is able to utilize the learned knowledge and skills in a safe, competent, and professional manner. With the sequential and progressive nature of the program, this policy must be adhered to in order to provide learning experiences that are integrated with previously introduced material. Many learning opportunities will be provided through collaborative experiences between both students and faculty. These opportunities are vital for the student's learning. The NWCC PTA Program considers attendance to be a professional responsibility. Absences could lead to missing a learning experience that cannot be repeated. All enrolled PTA students are expected to participate in all scheduled PTA assignments, classes, laboratories, PTA sponsored events, and clinical education experiences.

Students are expected to be in class and on time. A student will be considered tardy if they are not in the classroom prior to the instructor completing the roll. A student arriving for class or clinical ten (10) minutes late from the start of the class will be considered ABSENT. Three (3) tardy events will constitute 1 absence in any class or clinical. Students must attend a minimum of ninety (90) percent of each component of the course in order to receive a passing grade. Exceeding the absences allowed will result in dismissal from the PTA Program. All missed clinical time that constitutes as an absence is completed on the designated dates provided by the faculty. The student is not allowed to make up any clinical time on any other day not designated by the faculty. The clinical make-up hours may be longer than the number of hours missed. For example, if a student leaves clinical early and accrues an absence, their make-up day could be a full day of clinical per faculty discretion. Any previous clinical time the student completed on the day of the absence may not count for clinical hours. If the student is assigned a make-up day and is absent, they will fail the clinical course. If the student is tardy and has already accrued two other tardy events, they will fail the clinical course. Make up days do not substitute an absent and does not cancel out any absence accrued. If a student knows they will be absent, it is the STUDENT'S responsibility to inform the instructor (CI and DCE) prior to the absent date. In the event of illness, the student must contact & call the CI and DCE before they are scheduled to report to clinic. A formal record of absences and tardy events will be kept by the PTA program faculty.

In the event of inclement weather for classroom events, the PTA program will follow the guidance of the college. If the college is open, the PTA program will be open. It is the student's responsibility to adapt their travel in order to

arrive on time. If in the clinical setting, the student will follow the orders of the facility. If the facility is still open, the student will be expected to arrive at their regularly scheduled clinical rotation on time. It is the student's responsibility to adapt their travel in order to arrive on time.

Absences involving personal or family emergencies or those involved a death in the immediate family may be excused. It is the responsibility of the student to communicate such an instance with a faculty member for the PTA program. At all times, the instructors reserve the right to deny approval of being absent based on student reason.

With respect to being absent, it is the responsibility of the student to arrange make-up work with the appropriate instructor. If a student is absent for any examination/practical examination/graded activity, you must notify the appropriate instructor prior to the beginning of the examination. This communication MUST be completed. Failure to do so will result in the student not being allowed to make up the graded activity and will receive a "0" (zero) for that test grade. The student must have written documentation as to why he/she was not present for the graded activity. It is the student's responsibility to schedule a make-up time with the instructor. Failure to do so immediately upon returning to school will result in a failure of the assignment. The instructor reserves the right to appoint a time and type of graded activity for the make-up activity which will be determined on an individual basis.

If a student finds it necessary to withdraw from the program for any reason, the official steps as outlined in the NWCC Bulletin are required. A student who properly and officially withdraws will receive a grade of "W" (official withdrawal). Withdrawal is required as stated in the Bulletin. An unofficial withdrawal is attributed to a student who leaves the program without going through the published withdrawal procedures. This unofficial withdrawal will result in the student receiving an "F" in all classes. It is the responsibility of the student to initiate and complete this process. A leave of absence may be requested from the program by the student. The student must document the reason for request in writing and submit this form to the PTA Program Director. Each request will be considered on an individual basis. If granted, the leave of absence will be limited to one year after which the student must petition to be readmitted to the program. All students have the right to appeal for exceeding absences. The following are the steps for appeal:

- 1. Submit a written complaint to the Dean of Health Sciences (clafferty@northwestms.edu) **and** the Director of the Physical Therapist Assistant Program (ballen@northwestms.edu).
- 2. The Director will request a meeting with the student for discussion and gathering of information.
- 3. If the issue is not resolved, the student will submit a written request for appeal to the Dean of Health Sciences. The policy of appeal will be followed as outlined in the 2023-2024 NWCC Bulletin, Class Attendance Policy.

Professional Behavior

While enrolled in the program professional behaviors are expected in all settings, directly or indirectly related to the program. Students are expected to take

ownership of their learning experience. This includes maintaining regular attendance, being prepared for class, completing all assignments in a timely manner, asking for clarification or assistance when needed, and being receptive to feedback provided by the faculty. Preparedness includes reading any assigned material, researching expected skills or diagnoses, preparing assignments on time and bringing necessary books and materials to clinic. Students are encouraged to participate in classroom discussions related to the lecture content. Discussion should remain professional; arguing and disruptive/unprofessional behavior will not be tolerated. Extraneous conversations in the classroom keep other students from listening to the instructor causing them to miss valuable lecture content and should be kept to a minimum. Sleeping will not be tolerated during classroom, laboratory, clinical education, or program activities. Breaks and lunches will vary due to course content, college programs, and clinical education scheduling. Students are expected to follow the directions and/or schedule of the clinical education facility for lunch breaks.

Appropriate Professional Behavior by students is expected at all times. Students are expected to follow professional standards when in the classroom, laboratory and clinical settings. Guidelines for these standards are as follows:

Professional Behaviors (Located in Appendix)

Professional behavior by students is expected at all times. Students are expected to follow professional standards when in the classroom, laboratory and clinical settings. Guidelines for these standards are as follows:

1. Professional Behaviors (Appendix)

Ten specific "Professional Behaviors" are assessed throughout the PTA Program curriculum. PTA program faculty will assess the Professional Behaviors once per semester with students also performing a self-assessment once per semester.

Expected Professional Behavior levels are:

- a. End of Semester III: All Professional Behaviors at least beginning level
- b. End of Semester IV: 50% of Professional Behaviors at intermediate level or higher
- c. End of Semester V: all Professional Behaviors at least intermediate level
- d. End of Semester VI: all Professional Behaviors at entry level

Faculty will provide both oral and written feedback regarding professional behaviors each semester. Copies of this feedback will be placed in the student's file. Students are expected to change unsatisfactory behaviors after receiving feedback from faculty, and faculty will discuss any concerns about professionalism as soon as concerns arise. If a student is not demonstrating professional behaviors at an appropriate level at the end of each semester, students will be placed on probation or dismissed from the program.

Personal Appearance

Dress Code and Appearance Policy

All NWCC PTA students represent the College and the profession of physical therapy. Students are required to conduct themselves in a professional manner at all times in the classroom, in the laboratory, and in the clinic setting. The following are minimum expectations of a PTA student, expected at all times on and off campus when representing NWCC and the PTA Program. Students must be prepared to have all materials from the PTA student kit for all classroom, laboratory, and clinical experiences unless otherwise notified. In the clinical/lab/classroom setting, a student is expected to set an example of cleanliness, tidiness, and professionalism. Personal appearance is regarded as an important aspect of a student's overall effectiveness. Given today's fashions and the level of physical activity required in most PT settings, it is recommended that students check their appearance from all angles and positions to ensure that clothing ensures freedom of movement, remains in position and does not expose undergarments at any time. No caps/hats are to be worn in the classroom, laboratory, or clinical experiences. NWCC ID must always be present and visible in all settings.

Daily Classroom Dress Code:

This will remain consistent with the established Dress Code of NWCC No manner of dress will be allowed which disrupts the normal educational process. In order to prepare students for careers and occupations, all students are expected to dress in good taste and be well groomed. Shirts must be worn at all times except within a student's assigned residence hall room or if engaged in an outdoor athletic activity. Underwear and undergarments should remain covered at all times except in a student's assigned residence hall room. All pants and shorts must be worn at the waist. Pajamas are not to be worn outside the student's assigned residence hall. In public areas, personal grooming should be kept as minimal and discreet as possible. No hairdressing, nail painting, etc. is allowed in public areas. It is unacceptable for undergarments to be showing at any time. Undergarments must not be visible under clothing. Students should dress professionally with respect to classroom and laboratory climate.

Daily Lab Dress Code:

Students are expected to dress appropriately for all labs and practical exams. Failure to adhere to the dress code as listed below will result in the student being dismissed from the lab, possible **student occurrence report**, and/or may be ask to wear a hospital gown in the laboratory setting.

Labs in the GLS Health Science Building: Both males and female should wear T-shirts and shorts (shorts should be loose fitting and should not be shorter than the tip of the finger with arms by the side and standing fully erect; shorts that fall below the waist will not be allowed). Students are expected to wear closed shoes (no sandals or flip flops allowed) while in the lab. Women are expected

wear a halter top or sports bra (T-shirt over undergarment) to expose the full back and shoulders and shorts. Men are expected to wear shorts, T-shirt that can be easily removed to expose the full back and shoulders. With respect to the multiple body positions students will be in as both student and therapist, males and females should wear supportive/compressive undergarments to ensure proper coverage during lab at all times.

Off campus Labs- Both male and females are required to wear khakis or solid colored pants, closed shoes (no sandals or flip flops), and a polo style shirt with a collar. No low cut or plunging neck lines are allowed. There should not be any writing on the shirt other than the logo. Do not wear scrubs, shorts, skirts, or dresses. Your NWCC Student ID Badge should be clearly visible to all.

Clinical Dress Code:

Students are expected to comply with the dress code for each clinical facility. If not specified, the student will follow the guidelines as seen above in "**Off Campus Labs**". A white lab coat may be worn in some facilities. Athletic shoes are Acceptable if they are neat and professional looking.

GENERAL DRESS CODE TO BE FOLLOWED AT ALL TIMES:

- 1. Students are expected to keep neat and clean at all times. All dress must be kept clean, neat and free of stains and wrinkles.
- 2. When indicated. scrubs, uniforms, and lab coats must fit properly, i.e. large enough to allow movement and performance of duties. Shoes and shoelaces must be kept clean at all times.
- 3. Nails must be clean and short. Nails should be shorter than fingertips when viewed from the palm side. Acrylic nails are an infection control risk and will not be allowed. Absolutely no false eyelashes are to be worn in the clinical setting.
- 4. Students are to avoid wearing perfume, colognes, or after shaves in the classroom, laboratory, and clinical experiences as patients, classmates, and/or staff may be allergic to them.
- 5. Long hair should be arranged in a style that brings the hair away from and out of the face and secured as to avoid contaminating patient care areas. No extreme hair color or hair styles are allowed. Hair color should be a natural occurring color. Hair must be clean and neat at all times while in clinic, in the classroom, and in the laboratory. Professional hairstyles worn off the collar and out of the face are required in the clinical area. If the hair is longer than the nape of the neck, it should be worn in a ponytail or off the nape of the neck. If the hair, even when pulled up, continues to pass the student's shoulders when leaning forward; the hair must be additionally secured. The hair does not have to be pulled up in the classroom setting. No hair fashion colors or ornaments (i.e. red, blue, purple, green, orange etc.) will be Accepted in classroom or clinical site. Jewelry, beads, hair ribbon or any item outside of a ponytail holder, bobby-pin or neutral hair clip are not allowed in the clinical area. If PPE equipment is required in the clinical area, the hair must have the ability to be easily covered. Hair that is excessively tall on the head does not meet this criterion.
- 6. For men, facial hair should be clean shaven and/or neatly trimmed and clean. Any hair growth on the neck region must be shaved.

- 7. No jewelry other than wedding band, watch, and/or stud type earrings are to be worn. This is for the safety of the student and the patients. No piercings; except one piercing in each ear lobe for females. Ear spacers, spikes, tongue ring, nose or facial piercing, or gauges are not allowed. Violation of this policy will result in a student occurrence report. No other body piercings should be visible at any time. Earrings worn must be small and not dangle. Males are not allowed any piercings.
- 8. Tattoos must be completely covered at all times in the clinical setting. With the nature of the PTA curriculum, some tattoos may be exposed during classroom/lab experiences.
- 9. Students are to adhere to the **Dress Code and Appearance Policy** for any remote meetings.
- 10. Daily attention should be given to personal hygiene during the course of the program as this is an important component of each student's overall image. Students must maintain a high level of personal hygiene including bathing and dental care. Students' breath and clothes/lab coats must not smell of smoke. The student's physical appearance in the classroom and the clinical area should remain professional. This includes proper hygiene, use of deodorant, shampooing and styling hair appropriately.
- 11. For clinical rotations and other events, the students will be expected to purchase and wear scrubs that represent the NWCC PTA Program. These scrubs will be uniform in color and brand. The students will also be expected to have the scrub tops monogrammed with verbiage that identifies the PTA Program. However, any dress code that the clinical site requires of the PTA Program student will supersede the requirements of the PTA Program. Please note that some clinical affiliates may hold more strict policies regarding dress and appearance. If the clinical site does not have specific requirements, then the student will be expected to default to the dress code requirements of the PTA Program as noted previously.
- 12. Exceptions to the PTA dress code may be made for religious, cultural, or medical reasons on a case by case scenario. These cases must be brought directly to the Program Faculty in a timely manner.

Work Policy While Enrolled in PTA Program

Students are not to be paid employees of clinical facilities during clinical education rotations. If a student works in any separate facility while enrolled in the program, she/he may not legally function as a student PTA/PTA. A student employed under these conditions may only function as a PT Aide/Tech according to regulations of the Mississippi State Board of Physical Therapy (MSBPT) under the Physical Therapy Practice Act. Working while enrolled in the PTA Program is discouraged. Class schedules will vary greatly each semester and no attempt will be made to schedule classes around a student's work schedule. If work

interferes with PTA Program success, the student will be referred to the career technical counselor.

Name Tags

A NWCC name tag must be worn by all students at all times while in clinical education sites unless facility name tag is provided at site orientation. Wearing of the name tag assures proper identification for security purposes and entitles the student access to the premises. The name tag is also a necessary communication tool as the student meets a variety of people, including patients and staff. The facility may require that the student wear a facility name tag as well.

Student Preparedness

Students are expected to come to the clinic prepared for that day. Preparedness includes reading any assigned material, researching expected skills or diagnoses, preparing assignments on time and bringing necessary books and materials to clinic.

Confidentiality

Students are expected to maintain confidentiality standards at all times in the clinical setting. It is not ethical to share information with other individuals regarding patients/clients, facilities, clinical instructors, or classmates. This includes placing the patient's name or other identifying item on case study reports, class presentations; etc.; failing to obtain written permission to utilize pictures or videos of a patient in presentations, or talking about patients to your classmates. Violation of this policy may result in probation or dismissal from the PTA Program.

All clinical facilities are expected to have policies on the confidentiality of records and other personal information. Facility policies concerning the informed consent of patients seen by the student. Facility guidelines on the use of human subjects for educational purposes should also exist at each facility. These policies should be reviewed with the students affiliating at that facility. Patients condition & information should not be discussed in ANY public area inside or outside of the facility.

During first semester of the PTA program, students are instructed in basic HIPPA (Health Insurance Portability and Accountability Act) policies and procedures for proper use and handling of confidential patient/client information. Prior to their first clinical education course the student must pass a written assessment at 78% efficiency to progress into the course. The CI should give the student instruction in site-specific HIPPA procedures at the start of the clinical experience. Prior to the start of Clinical Introduction, students are required to sign a Confidentiality

Agreement, this Agreement will be considered in force for the rest of the student's tenure in the PTA Program.

CPR/Immunizations/Background Requirements

Once a student has been officially accepted into the program, the student MUST provide accurate documentation of the following items prior to the program start date:

- 1. Student Health Record including physical examination. A licensed health care provider must sign <u>FORM.</u>
- 2. *CPR certification will be provided during the time of the program. It is the responsibility of the student to ensure they complete this aspect of the program. A student's CPR certification must be active to complete all aspects of the program as well as terminal student clinical rotations.
- 3. Complete a background affidavit and/or Criminal Background Check (CBC) with a statement as to whether he/she has been arrested, charged with, convicted of, plead guilty or nolo contendere to a Felony or Misdemeanor offense. The applicant may be fingerprinted at any time for a criminal background check as required by clinical agencies. Fingerprinting/Background Check is required prior to taking licensure exam per the Mississippi Board of Physical Therapy. The cost of fingerprinting will be the responsibility of the student. This will be completed at an assigned orientation date.
- 4. Receipt and understanding of the minimum technical standards for the PTA student and maintaining the standards for the program as detailed in the student handbook by signing the PTA Student Agreement (provided at Orientation).

<u>Prior to admission into the technical phase of the program, the student must complete the following:</u>

- 5. Negative 10-panel drug screen, no older than 1 month old. Only drug screens collected at the direction of the PTA program will be considered. Any applicant is subject to drug screening and responsible for the test results, regardless of the timing of urine collection or use of drug.
- 6. Two-step TB Skin Test (dependent on clinical education site requirements)
- 7. Documentation of Flu vaccination (dependent on clinical education site requirements)
- 8. Copy of immunization records must be submitted (FORM 121 Certificate of Immunization Compliance)
- 9. Completed Hepatitis B vaccine or waiver form

*The student will be responsible for the fees and costs associated with these requirements. Information concerning these requirements will be provided after class selection and/or during the mandatory orientation session. The student handbook will be provided during the mandatory orientation session.

Please note: a criminal conviction may prohibit a student from participating in clinical rotations, graduation, and/or taking the required national licensure exam. A felony conviction or disqualifying event on the background check arranged by the PTA staff will likely disqualify the applicant from gaining program entry.

Accidents

If not already informed, all accidents occurring at a clinical facility which results in patient, hospital personnel, personal injury and/or damage to equipment must be reported to the clinical instructor immediately. Students may also be required to fill out a facility incident report. Students are required to understand the safest methods of properly performing treatment procedures and operation of equipment before undertaking them. Each student is required to carry their own malpractice/liability insurance.

Students are responsible for the cost of their individual medical care that may result from an accident while at clinicals.

In the event of an accident, please have the student complete an incident form and notify the DCE of the incident.

Accommodations

Students with disabilities that require special accommodations must register with the NWCC Disability Coordinator within two (2) weeks of school registration with proper documentation to support accommodations. The Disability Coordinator will notify the course instructor of the list of accommodations required. The student must contact the disability coordinator within the first two weeks of the semester to insure accommodations are established.

Senatobia Campus: DeSoto Campus: Oxford Campus: Missy Kelsay Terri Reeves Betsy Grubbs 662-562-3309 662-280-6123 662-560-7951

mkelsay@northwestms.edu treeves@northwestms.edu grubbs@northwestms.edu

While attending NWCC, a student may have an unforeseeable medical event. Prior to returning class, clinical or laboratory instruction, the student must meet with the disability coordinator and present proper documentation demonstrating their ability to perform all the required duties of their professional clinical standards. The documentation requirement should include a complete physical examination, a documentation statement of the ability to perform the physical requirements of the profession, the ability to mentally process the complexity of problem solving, mathematics, rational thoughts and ethical reasoning. A statement from the licensed professional must be included stating the student is deemed to be safe in performing the duties of a School of Health Science student in the designated program in the classroom, clinical and laboratory setting. Once the documents have been received and processed, a decision will be rendered. Administrators reserve the right to make re-entry decisions on a case-by-case basis if the safety of the student, faculty, other students, or the community maybe jeopardized.

EARLY TERMINATION OF CLINICAL EXPERIENCE

The PTA Program DCE and the NWCC PTA program faculty may remove the student from the clinical site if it appears that the student is performing incompetently or poses a safety threat to the patients/clients or staff of the clinical site. This decision will be made based on input from the CCCE and/or student's CI. The DCE will meet with the student either in person or by phone within 24 hours to explain the reasons for removal from the clinical area and to inform the student that he/she is failing. Please keep the DCE informed of any potential problems. If you feel the student must be removed from the clinical education experience, contact the DCE or PTA Program Director immediately.

Following this action an informal meeting with the student, DCE, CI and/or CCCE, and PTA Program Director will be convened as soon as possible to discuss the student's status. If the removal from the clinical setting is upheld as a result of this meeting, the student receives a failing grade in the clinical component of the course and may be dismissed from the program.

Even if a student is not removed from a clinical experience, failure to meet the standard clinical objectives by the end of the semester may also result in failure of that clinical education course.

Due Process/Grievance Procedure

It is the policy of the NWCC Physical Therapist Assistant Program to work with students in finding a fair and just solution to problems that may arise, including grievances, questions, and misunderstandings. At all steps of the grievance procedure students should feel free to discuss the matters fully with clinical faculty, PTA program faculty, and NWCC administration. Students are urged to first take their problems to their clinical instructor. Usually the CI will have direct knowledge about the subject and is best qualified to work with the student in resolving the manner.

If the student and CI are unable to find a solution, the student should then bring up the situation to the CCCE, who may consult with the program's DCE. If the student, CI, and CCCE are unable to find a solution, the student should then bring up the matter to the PTA program DCE. Should the student feel an unsatisfactory solution was achieved after involving the DCE, the student should then bring up the matter to the PTA Program Director. If the student still feels an unsatisfactory solution was achieved, the student should bring up the matter with the appropriate Dean.

Student complaints involving clinical faculty or clinical facilities should be directed to the PTA Program DCE. See *Complaints* on page 35.

Clinical Reassignment

When a student is on a clinical experience but is unable to complete the required hours, an alternative clinical may be provided. Possible reasons a student may be unable to complete these hours include, but will not be limited to the following: (1) family crisis, (2) health status (3) conflict with the Clinical Instructor, and (4) lack of patients at the clinical site. The DCE and PTA Program Director will decide on an individual basis whether the student will be provided with a clinical reassignment.

A student will be allowed only one opportunity during the PTA Program to be considered for a clinical reassignment. The student will not be allowed a clinical reassignment if they are on PTA program probation, and they must be off PTA program probation prior to clinical reassignment.

Knowledge of Program and College Policies and Procedures

The PTA Program abides by Northwest Mississippi Community College policies as noted in the Bulletin. The most current college policies can be found on the college website and HERE. Students are expected to have a working knowledge of the content of the NWCC PTA Program Clinical Education Handbook, students will sign and date the "Clinical Education Handbook Agreement", which is an agreement where the student states they understand the content of the handbook and agree to abide by the policies and procedures set forth during their tenure as a Physical Therapist Assistant student. Students will also be able to access the PTA Program Clinical Education Handbook on the program website.

The PTA Program Clinical Education Handbook is reviewed and revised annually by program faculty. To ensure all program policies are consistent with those of the College, the handbook is reviewed annually by the School of Health Sciences Dean. Program faculty will consider input for manual revisions from students, college administration, the PTA program advisory committee, and clinical faculty. When changes are made after the initial publication of each year's Clinical Education Handbook, PTA Program students and NWCC administration will be notified of the updates. The Handbook available on the program website will also be updated.

Informed Consent

Patients will be made aware by the CI, or by the student under the direction of the CI, when a student is involved in patient care. Students are required to identify themselves as a physical therapist assistant student, and should obtain consent for treatment from the patient and/or family members prior to student treatment. Patients have a risk-free right to decline to receive care from a student participating in the clinical education program and can do so by informing either the student or the CI.

Shared Data

Student information such as background check and drug screen results; immunizations; CPR certification; and liability insurance confirmation will be shared with clinical sites when requested by the site. This information will be kept on file with the DCE, and the DCE will ensure that all students pass the background check and drug screen; have the required immunizations; have an active CPR certification; and have the appropriate amount of liability insurance prior to participating in a clinical education experience. Students will be notified at the beginning of the program that this information will be shared with clinical sites. This information is to be kept confidential by the DCE and any clinical site.

IV. Responsibilities of Clinical Facility

Clinical Education Agreement

Only clinical facilities with current, unexpired, written Clinical Affiliation Agreement in place will be used for the placement of students. A Complete Clinical Affiliation Agreement is sent when a facility is first utilized. The DCE reviews the list of clinical sites annually to make sure all sites have a current Clinical Affiliation Agreement

Equipment & Facility Safety

All clinical facilities are expected to have policies concerning safety regulations governing the use of equipment and the storage and use of any hazardous materials. These policies should be reviewed with students affiliating at that facility. Equipment should be inspected regularly and safety regulations should be posted and reviewed periodically.

Supervision

All clinical facilities are expected to provide direct supervision of students to ensure patient safety and to enable the successful completion of the program's educational objectives. All students require on-site supervision by a licensed physical therapist or a physical therapist/physical therapist assistant team. Preferably, this should be the student's assigned clinical instructor.

If the clinical instructor is unavailable on-site, another licensed person who is on-site must be assigned to that student for that time period. The clinical instructor should have adequate release time to adequately supervise the student and be available for questions, assistance, and mentoring. All supervisory clinical faculty are expected to demonstrate positive role modeling for the students. If there is no PT in the building for part of a day when the student in on their clinical experience, the student may perform non-patient care clinic duties such as chart reviews, assignments on reference materials, documentation, in-service preparation, and observation of other health care practitioners. Students should contact the DCE immediately if supervision does not follow these guidelines or if academic regulations are not being upheld in the clinical site.

Complaints

Complaints regarding the program should be first addressed to the PTA Program Director:

Dr. Barton Allen, PT, DPT

Physical Therapist Assistant Program Director ballen@northwestms.edu

Phone: (662) 562-3247

Unresolved complaints or complaints about the PTA Program Director should be directed to the School of Health Science Dean:

Dr. Craig Lafferty, DPM, MS
Dean, School of Health Sciences

Northwest Mississippi Community College 4975 Hwy 51 North P.O Box 5432 Senatobia, MS 38668

Phone: (662) 562-3652 Fax (662) 562-3231

All complaints will be documented, including the projected outcome, and kept on file at the program facility. No retaliation will occur by the college or program due to a complaint being filed. Complaints regarding Accreditation of this program should be addressed to the Commission for Accreditation for Physical Therapy Education. This Commission is located at 3030 Potomac Ave., Suite 100 Alexandria, VA 22305-3085; phone (703) 706-3245; accreditation@apta.org.

V. Clinical Faculty Rights and Privileges

The NWCC PTA Program values the clinical faculty who are involved with the clinical education of Northwest students. Cls and CCCEs are entitled to rights and privileges as a result of their participation with the NWCC PTA Clinical Education Program. All Cls and CCCEs are invited annually to a Clinical Faculty Meeting each fall. The agenda of this meeting will include reviewing any curricular changes in the PTA Program, reviewing of the CPI, and a question and answer session with the PTA Program Faculty. A topic will also be discussed that has been identified as a need through the review of student evaluations, interviews and observations made by the DCE.

The NWCC PTA Program annually determines the professional development needs of the clinical faculty members. With this information, the PTA Program hopes to facilitate continued growth and development in clinical faculty in their role as clinical educators. Clinical faculty are encouraged to complete relevant Clinical Instructor self-assessments from the American Physical Therapy Association. These assessments are related to the Clinical Instructors, CCCEs and Clinical Education sites. The PTA Program hopes Clinical Education sites will use these forms to complete a yearly assessment of needs. These assessments, along with a brief survey of professional development needs, will be given and collected to clinical faculty by the DCE during clinical education visits. Upon request, a NWCC library card to allow them to access NWCC library journals, books, and electronic resources. Clinical Faculty will be given the opportunity to use PTA Program departmental resources as able. Departmental resources are located in the PTA Program laboratory and in Program faculty offices. Please contact the PTA Program Director for a list of available departmental resources. The Mississippi Board of Physical Therapy allows clinical instructors licensed in Mississippi to receive continuing education credit for being a clinical instructor. Credit for 1 CCU is applied for each 40 hours of clinical supervision with the same student. A maximum of 3 CCUs per clinical rotation for a total of 6 CCUs per licensure period is allowed. Students must be enrolled in CAPTE accredited or eligible DPT or PTA program. Verification of the clinical supervision agreement with the student's educational program and a log reporting supervision hours is required as evidence of compliance. A certificate of completion from the educational program may also be used as evidence of compliance.

Appendix

American Physical Therapy Association (APTA) Standards of Ethical Conduct for the Physical Therapist Assistant

Preamble

The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients/clients to achieve greater independence, health and wellness, and enhanced quality of life. No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.

Standards

- **Standard** #1: Physical therapist assistants shall respect the inherent dignity, and rights, of all individuals.
- 1A. Physical therapist assistants shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.
- 1B. Physical therapist assistants shall recognize their personal biases and shall not discriminate against others in the provision of physical therapy services.
- **Standard** #2: Physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.
- 2A. Physical therapist assistants shall act in the best interests of patients/clients over the interests of the physical therapist assistant.
- 2B. Physical therapist assistants shall provide physical therapy interventions with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.
- 2C. Physical therapist assistants shall provide patients/clients with information regarding the interventions they provide.
- 2D. Physical therapist assistants shall protect confidential patient/client information and, in

collaboration with the physical therapist, may disclose confidential information to appropriate authorities only when allowed or as required by law.

- **Standard** #3: Physical therapist assistants shall make sound decisions in collaboration with the physical therapist and within the boundaries established by laws and regulations.
- 3A. Physical therapist assistants shall make objective decisions in the patient's/client's best interest in all practice settings.
- 3B. Physical therapist assistants shall be guided by information about best practice regarding physical therapy interventions.
- 3C. Physical therapist assistants shall make decisions based upon their level of competence and consistent with patient/client values.
- 3D. Physical therapist assistants shall not engage in conflicts of interest that interfere with making sound decisions.
- 3E. Physical therapist assistants shall provide physical therapy services under the direction and supervision of a physical therapist and shall communicate with the physical therapist when patient/client status requires modifications to the established plan of care.
- **Standard #4:** Physical therapist assistants shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, other health care providers, employers, payers, and the public.
- 4A. Physical therapist assistants shall provide truthful, accurate, and relevant information and shall not make misleading representations.
- 4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative or other authority (eg, patients/clients, students, supervisees, research participants, or employees).
- 4C. Physical therapist assistants shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.
- 4D. Physical therapist assistants shall report suspected cases of abuse involving children or vulnerable adults to the supervising physical therapist and the appropriate authority, subject to law.
- 4E. Physical therapist assistants shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.
- 4F. Physical therapist assistants shall not harass anyone verbally, physically, emotionally, or sexually.
- Standard #5: Physical therapist assistants shall fulfill their legal and ethical obligations.
- 5A. Physical therapist assistants shall comply with applicable local, state, and federal law and regulations.
- 5B. Physical therapist assistants shall support the supervisory role of the physical therapist to ensure quality care and promote patient/client safety.
- 5C. Physical therapist assistants involved in research shall abide by accepted standards governing protection of research participants.
- 5D. Physical therapist assistants shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.
- 5E. Physical therapist assistants who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.
- **Standard** #6: Physical therapist assistants shall enhance their competence through the lifelong acquisition and refinement of knowledge, skills, and abilities.
- 6A. Physical therapist assistants shall achieve and maintain clinical competence.
- 6B. Physical therapist assistants shall engage in lifelong learning consistent with changes in their roles and responsibilities and advances in the practice of physical therapy.
- 6C. Physical therapist assistants shall support practice environments that support career development and lifelong learning.

- **Standard** #7: Physical therapist assistants shall support organizational behaviors and business practices that benefit patients/clients and society.
- 7A. Physical therapist assistants shall promote work environments that support ethical and accountable decision-making.
- 7B. Physical therapist assistants shall not accept gifts or other considerations that influence or give an appearance of influencing their decisions.
- 7C. Physical therapist assistants shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.
- 7D. Physical therapist assistants shall ensure that documentation for their interventions accurately reflects the nature and extent of the services provided.
- 7E. Physical therapist assistants shall refrain from employment arrangements, or other arrangements, that prevent physical therapist assistants from fulfilling ethical obligations to patients/clients
- **Standard** #8: Physical therapist assistants shall participate in efforts to meet the health needs of people locally, nationally, or globally.
- 8A. Physical therapist assistants shall support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.
- 8B. Physical therapist assistants shall advocate for people with impairments, activity limitations, participation restrictions, and disabilities in order to promote their participation in community and society.
- 8C. Physical therapist assistants shall be responsible stewards of health care resources by collaborating with physical therapists in order to avoid overutilization or underutilization of physical therapy services.
- 8D. Physical therapist assistants shall educate members of the public about the benefits of physical therapy

Skills Learned by 1st Clinical			
		Therapeutic Exercise &	
Fundamental Skills	Therapeutic Modalities	Rehab	Kinesiology

	1			
Hoyer Lift transfers	Cryotherapy	Strengthening exercises		MMT of extremities & head
Patient transfers	Massage	AROM		Gait, Locomotion & Balance
Fit Assistive Device	Ultrasound	AAROM		Spinal Nerve Reflexes
Gait training, stairs, level surfaces	Hydrotherapy (theory)	Tilt Table		Dermatomes
Bed mobility	Phonophoresis	Concentr	ric/eccentric Ex.	Myotomes
Proper use of wheelchair	Traction cervical & lumbar	Reciproc	al inhibition	
OSHA standards	Compression devices	open/clo	sed chain	
		Intro		
Vital Sign Assessment	Diathermy (theory only)		coordination	
Proper documentation	Ultraviolet (theory only)	-	gical Ex. Program	
Positioning & Draping	Contrast bath (theory only)	Women's	s Health	
UE ROM Check	Light therapies (theory only)	Lumbar S	Stabilization	
LE ROM check	Soft Tissue Mobilization	Aerobic		
Aseptic Techniques (handwashing, PPE)		Aquatic		
			bilization (theory	
Sterile Techniques		only)		
Girth Measurements				
Skills Learned by 2nd Clinical				
Electrotherapy	Therapeutic Exercise & Rel	nab II		
TENS	Balance & coordination Exerc	ises		
	-I C I : I !:	•		
Interferential current	Therex for neurological condit	tions		
Interferential current Biofeedback	Prosthetics	tions		
	-	tions		
Biofeedback	Prosthetics PNF	tions		
Biofeedback Electric Stimulation Iontophoresis	Prosthetics	tions		
Biofeedback Electric Stimulation	Prosthetics PNF Motor Function training	tions		
Biofeedback Electric Stimulation Iontophoresis Coughing Exercises Coughing Techniques	Prosthetics PNF Motor Function training Pediatric	tions		
Biofeedback Electric Stimulation Iontophoresis Coughing Exercises	Prosthetics PNF Motor Function training Pediatric NDT	tions		
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Biofeedback Electric Stimulation Iontophoresis Coughing Exercises Coughing Techniques Wound Management Sterile Techniques High Volt	Prosthetics PNF Motor Function training Pediatric NDT Sensation assessment Cognition assessment Functional Movement Analysi Inhibition Techniques	S		
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Biofeedback Electric Stimulation Iontophoresis Coughing Exercises Coughing Techniques Wound Management Sterile Techniques High Volt Postural Drainage Wound care	Prosthetics PNF Motor Function training Pediatric NDT Sensation assessment Cognition assessment Functional Movement Analysi Inhibition Techniques Transfers for Rehab Diagnosis Training	S		
Biofeedback Electric Stimulation Iontophoresis Coughing Exercises Coughing Techniques Wound Management Sterile Techniques High Volt Postural Drainage Wound care	Prosthetics PNF Motor Function training Pediatric NDT Sensation assessment Cognition assessment Functional Movement Analysi Inhibition Techniques Transfers for Rehab Diagnosis Training Spinal Cord Injury	S		
Biofeedback Electric Stimulation Iontophoresis Coughing Exercises Coughing Techniques Wound Management Sterile Techniques High Volt Postural Drainage Wound care	Prosthetics PNF Motor Function training Pediatric NDT Sensation assessment Cognition assessment Functional Movement Analysi Inhibition Techniques Transfers for Rehab Diagnosis Training Spinal Cord Injury Balance Assessment	S		
Biofeedback Electric Stimulation Iontophoresis Coughing Exercises Coughing Techniques Wound Management Sterile Techniques High Volt Postural Drainage Wound care	Prosthetics PNF Motor Function training Pediatric NDT Sensation assessment Cognition assessment Functional Movement Analysi Inhibition Techniques Transfers for Rehab Diagnosis Training Spinal Cord Injury Balance Assessment Advanced Balance	S		
Biofeedback Electric Stimulation Iontophoresis Coughing Exercises Coughing Techniques Wound Management Sterile Techniques High Volt Postural Drainage Wound care	Prosthetics PNF Motor Function training Pediatric NDT Sensation assessment Cognition assessment Functional Movement Analysi Inhibition Techniques Transfers for Rehab Diagnosis Training Spinal Cord Injury Balance Assessment Advanced Balance Residual Limb	s & Gait		

Isotonic/Isometric

Stretching exercises

Bony Prominence Palpation

Goniometric measurement

Moist Heat

Paraffin

Teaching Body Mechanics

Sliding board transfers

Professional Behaviors Assessment Tool

Student Name	Date:	

Directions: 1. Read the description of each professional behavior.

- 2. Become familiar with the behavioral criteria described in each of the levels.
- 3. Self-assess your performance continually, relative to the professional behaviors, using the behavioral criteria.
- 4. At the end of each semester:
 - a. Using a highlighter, highlight all criteria that describes behaviors you demonstrate in Beginning Level (column 1), Intermediate Level (column 2), or Entry Level (column 3).
 - b. Give at least one specific example of a time when you demonstrated a behavior from the highest level highlighted.
 - c. Place an "x" along the visual analog scale to indicate the level (B, I, or E) at which you primarily function in each ability. This should be based on your highlighted areas, the specific example, and feedback from your CI.
- 5. Sign and return to Program Director

1. <u>Critical Thinking</u>: 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.

Beginning Level:	Intermediate Level:	Entry Level:
Raises relevant questions; Considers all available information; Articulates ideas; Understands the scientific method; States the results of scientific literature but has not developed the consistent ability to critically appraise findings (i.e. methodology and conclusion); Recognizes holes in knowledge base; Demonstrates Acceptance of limited knowledge and experience	Feels challenged to examine ideas; Critically analyzes the literature and applies it to patient management; Utilizes didactic knowledge, research evidence, and clinical experience to formulate new ideas; Seeks alternative ideas; Formulates alternative hypotheses; Critiques hypotheses and ideas at a level consistent with knowledge base; Acknowledges presence of contradictions	Distinguishes relevant from irrelevant patient data; Readily formulates and critiques alternative hypotheses and ideas; Infers applicability of information across populations; Exhibits openness to contradictory ideas; Identifies appropriate measures and determines effectiveness of applied solutions efficiently; Justifies solutions selected
Specific Example:		Place an "x" on the visual analog scale
		B I E
	communicate effectively (i.e.) for varied audiences and purp	verbal, non-verbal, reading, writing, poses.
_	Intermediate Level: Utilizes	Entry Level:
	and modifies communication	Demonstrates the ability to maintain
English language (verbal and	(verbal, nonverbal, written and	appropriate control of the
written): uses correct grammar,	electronic) to meet the needs	communication exchange with

of different audiences; accurate spelling and expression, individuals and groups; Presents Restates, reflects and clarifies legible handwriting; Recognizes persuasive and explanatory verbal, message(s); Communicates impact of non-verbal written or electronic messages with collaboratively with both communication in self and others; logical organization and sequencing; individuals and groups; Recognizes the verbal and Maintains open and constructive Collects necessary information nonverbal characteristics that communication; Utilizes from all pertinent portray confidence; Utilizes communication technology effectively individuals in the patient/client electronic and efficiently communication appropriately management process; Provides effective education (verbal, non-verbal, written and electronic) Specific Example: Place an "x" on the visual analog scale В ı Ε

3. <u>Problem Solving</u>: The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.

Beginning Level: Intermediate Level: Entry Level: Recognizes problems; States Prioritizes problems; Identifies Independently locates, prioritizes and contributors to problems; uses resources to solve problems; problems clearly; Describes known solutions to Consults with others to clarify accepts responsibility for implementing problems; Appropriately seeks solutions; problems; Identifies resources input or guidance; Implements solutions; Reassesses needed to develop solutions; Prioritizes resources (analysis solutions: Uses technology to search for and critique of resources); Evaluates outcomes; Modifies and locate resources; Identifies solutions based on the outcome and Considers consequences of possible solutions and probable current evidence; Evaluates possible solutions outcomes generalizability of current evidence to a particular problem Place an "x" on the visual analog scale **Specific Example:** В Ī Ε

4. <u>Interpersonal Skills</u>: The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.

Beginning Level:

Maintains professional demeanor in all interactions; Demonstrates interest in patients as individuals; Communicates with others in a respectful and confident manner; Respects differences in personality, lifestyle and learning styles during interactions with all persons; Maintains confidentiality in all interactions; Recognizes the emotions and bias that one brings to all professional interactions

Intermediate Level:

Recognizes the non-verbal communication and emotions that others bring to professional interactions; Establishes trust; Seeks to gain input from others; Respects role of others; Accommodates differences in learning styles as appropriate

Entry Level:

Demonstrates active listening skills and reflects back to original concern to determine course of action; Responds effectively to unexpected situations; Demonstrates ability to build partnerships; Applies conflict management strategies when dealing with challenging interactions; Recognizes the impact of non-verbal communication and emotional responses during interactions and modifies own behaviors based on them

Specific Example:

Place an "x" on the visual analog scale

B I E

5. <u>Responsibility</u>: 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.

Beginning Level:

Demonstrates punctuality; Provides a safe and secure environment for patients; Assumes responsibility for actions; Follows through on commitments; Articulates limitations and readiness to learn; Abides by all policies of academic program and clinical facility

Intermediate Level:

Displays awareness of and sensitivity to diverse populations; Completes projects without prompting; Delegates tasks as needed; Collaborates with team members, patients and families; Provides evidence-based patient care

Entry Level:

Educates patients as consumers of health care services; Encourages patient accountability; Directs patients to other health care professionals as needed; Acts as a patient advocate; Promotes evidence-based practice in health care settings; accepts responsibility for implementing solutions; Demonstrates accountability for all decisions and behaviors in academic and clinical settings

Specific Example:

Place an "x" on the visual analog scale

B I E

6. Professionalism: The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.

Beginning Level:

Abides by all aspects of the academic program policies and the APTA Code of Ethics;
Demonstrates awareness of state licensure regulations; Projects professional image; Attends professional meetings;
Demonstrates cultural/generational awareness, ethical values, respect, and continuous regard for all classmates, academic and clinical faculty/staff, patients, families, and other healthcare providers

Intermediate Level:

Identifies positive professional role models within the academic and clinical settings; Acts on moral commitment during all academic and clinical activities; Identifies when the input of classmates, coworkers and other healthcare professionals will result in optimal outcome and acts accordingly to attain such input and share decision making; Discusses societal expectations of the professional

Entry Level:

Demonstrates understanding of scope of practice as evidenced by treatment of patients within scope of practice, referring to other healthcare professionals as necessary; Provides patient & family centered care at all times as evidenced by provision of patient/family education, seeking patient input and informed consent for all aspects of care and maintenance of patient dignity; Seeks excellence in professional practice by participation in professional organizations and attendance at sessions or participation in activities that further education/professional development; Utilizes evidence to guide clinical decision making and the provision of patient care, following guidelines for best practices; Discusses role of physical therapy within the healthcare system and in population health; Demonstrates leadership in collaboration with both individuals and groups

7. <u>Use of Constructive Feedback</u>: The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.

Beginning Level:

Demonstrates active listening skills; Assesses own performance; Actively seeks feedback from appropriate sources; Demonstrates receptive behavior and positive attitude toward feedback; Incorporates specific feedback into behaviors: Maintains two

Incorporates specific feedback into behaviors; Maintains two-way communication without defensiveness

Intermediate Level: Critiques own performance accurately; Responds effectively to constructive feedback; Utilizes feedback when establishing professional and patient related goals; Develops and implements a plan of action in response to feedback; Provides constructive and timely feedback

Entry Level:

Independently engages in a continual process of self-evaluation of skills, knowledge and abilities; Seeks feedback from patients/clients and peers/mentors; Readily integrates feedback provided from a variety of sources to improve skills, knowledge and abilities; Uses multiple approaches when responding to feedback; Reconciles differences with sensitivity; Modifies feedback given to patients/clients according to their learning styles

Specific Example:

Place an "x" on the visual analog scale

B I E

8. <u>Effective Use of Time and Resources</u>: The ability to manage time and resources effectively to obtain the maximum possible benefit.

Beginning Level:

Comes prepared for the day's activities& responsibilities; Identifies resource limitations (i.e. information, time, experience); Determines when and how much help/assistance is needed; accesses current evidence in a timely manner; Verbalizes productivity standards and identifies barriers to meeting productivity standards; Self identifies and initiates learning opportunities during unscheduled time

Intermediate Level:

Utilizes effective methods of searching for evidence for practice decisions; Recognizes own resource contributions; Shares knowledge and collaborates with staff to utilize best current evidence; Discusses and implements strategies for meeting productivity standards; Identifies need for and seeks referrals to other disciplines

Entry Level:

Uses current best evidence: Collaborates with members of the team to maximize the impact of treatment available; Has the ability to set boundaries, negotiate, compromise, and set realistic expectations; Gathers data and effectively interprets and assimilates the data to determine plan of care; Utilizes community resources in discharge planning; Adjusts plans, schedule etc. as patient needs and circumstances dictate; Meets productivity standards of facility while providing quality care and completing non-productive work activities

9. Stress Management:

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

Beginning Level:

Recognizes own stressors; Recognizes distress or problems in others; Seeks assistance as needed; Maintains professional demeanor in all situations

Intermediate Level:

Actively employs stress management techniques; Reconciles inconsistencies in the educational process; Maintains balance between professional and personal life; accepts constructive feedback and clarifies expectations; Establishes outlets to cope with stressors

Entry Level:

Demonstrates appropriate affective responses in all situations; Responds calmly to urgent situations with reflection and debriefing as needed; Prioritizes multiple commitments; Reconciles inconsistencies within professional, personal and work/life environments;

Demonstrates ability to defuse potential stressors with self and others

Specific Example:

Place an "x" on the visual analog scale

B I E

10. 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.

Beginning Level:

Prioritizes information needs; Analyzes and subdivides large questions into components; Identifies own learning needs based on previous experiences; Welcomes and/or seeks new learning opportunities; Seeks out professional literature; Plans and presents an in-service, research or cases studies

Intermediate Level:

Researches and studies areas where own knowledge base is lacking in order to augment learning and practice; Applies new information and reevaluates performance; accepts that there may be more than one answer to a problem; Recognizes the need to and is able to verify solutions to problems; Reads articles critically and understands limits of application to professional practice

Entry Level:

Respectfully questions conventional wisdom;

Formulates and re-evaluates position based on available evidence; Demonstrates confidence in sharing new knowledge with all staff levels; Modifies programs and treatments based on newly-learned skills and considerations;

Consults with other health professionals and physical therapists for treatment ideas

Beerlee Before ID I I I	ar to a control to the fall of	
Based on my Professional Behaviors Assessment, I am setting the following Goals:		
To accomplish these goals, I will take the follow	ring specific actions:	
Student Signature:	Date:	
- 11		
Faculty Signature:	Date:	

Northwest Mississippi Community College School of Health Sciences- Physical Therapist Assistant Program

Clinical Site Orientation Checklist

Student's Name.	
Clinical Site (Full Name):	
Clinical Site Address:	
Clinical Instructor's Name:	
Clinical Instructor's Contact Number:	
Clinical Instructor's Email Address:	
Is this the first time to serve as a CI using PTA CPI Web as the clinical grading tool?	
If "Yes", the DCE will email information regarding CPI training & use.	
If "No", please provide the email associated with your CPI login (if different from above)	
To verify completion, the Clinical Instructor must <i>initial</i> when each task is accomplished.	
Review the Clinical Instructor's expectations and objectives for the student.	
Review clinical schedule including any required evenings & weekends.	
Review facility policy in the event of absence. Note that the student must also notify Case Saturday, DCE at Northwest Community College.	у
Provide student with a tour of the facility.	
Review available supplies and equipment.	
Review facility Infection Control procedures.	
Review facility emergency procedures. (Fire, Medical Emergency, etc).	
Discuss student learning preferences & the skills to be focused on during the clinical	
education experience. Discuss due dates for clinical paperwork.	
Review facility documentation procedures & process.	
Review facility cell phone policy (NWCC cell phone policy is in the class syllabus)	
CI received & reviewed NWCC PTA Clinical Handbook	

We appreciate your support in advancing future PTA's. Students are responsible for faxing this completed form to Casey Saturday at 662-562-3231 or scan and email to csaturday@northwestms.edu

Northwest Mississippi Community College Physical Therapist Assistant Program Clinical Instructor/Student Meeting Form

PTA Clinical Experience II (4.5 week experience, fall) PTA Clinical Experience II (4.5 week experience, spring) PTA Clinical Experience III (4.5 week experience, summer) PTA Clinical Experience IV (4.5 week experience, summer)
Week #: Dates:
CLINICAL INSTRUCTOR COMMENTS:
Student's Strengths:
Areas/Skills Showing Improvement:
Areas/Skills to Work on:
STUDENT COMMENTS:
GOALS FOR NEXT WEEK:
Clinical Instructor Date Student Date Students are to fax completed forms to the DCE at (662)562-3231 at midterm and final

Students are to fax completed forms to the DCE at (662)562-3231 at midterm and final portions of the Clinical Experience

Northwest Mississippi Community College Physical Therapist Assistant Program

Confidentiality Agreement

The faculty at Northwest Community College acknowledges the extreme importance of confidentiality with respect to the affairs of all patients in all clinical agencies. In light of this acknowledgment, each student agrees to keep confidential all information acquired pertaining to any clinical agency and any related activities in the course of clinical education. This commitment to confidentiality includes:

- •Any information regarding the patient, the patient's family, or health issues related to the patient
- •Information regarding the strategic plan, programs, and process toward meeting goals in the agency plan
- •Issues related to legal, moral, and regulatory responsibility for the oversight of patient quality. This includes information regarding appointment and reappointment of professionals to the medical staff; information included in quality reports and statistical data regarding the agency's clinical services and patient care; risk management and malpractice information; and individual professional performance and reviews of attitudes and opinions from those who work for the agency
- •Financial information including annual budgets, revenues, expenses, long-term capital expenditure plans and equipment purchases, and information regarding the agency's financial condition such as debt, liquidity, return on investment, profitability, and other financial data
- •Employment information including employee salaries, employment agreements, and terms and conditions of employment

It is particularly important that the student recognizes the sensitivity of information regarding medical recruitment plans, capital decisions, real estate purchases, decisions regarding closures, mergers, and other strategic plans that may have impact on the agency's competitive position relative to other health care providers (both institutional and individual) in the service area.

Signature	Print Name	Date

Northwest Mississippi Community College Physical Therapist Assistant Program Essential Functions for Physical Therapist Assistant Students

There are several important factors for you to consider when you are determining your future career directions. To be successful in the PTA classroom and in your job following graduation, you should be able to meet all of the following expectations:

- 1. Attend class approximately 10-25 hours a week or perform 40 hours a week of clinical education, depending on the stage of the program curriculum.
- 2. Complete all assignments on time.
- 3. Participate in classroom discussions.
- 4. Perform or instruct others in the following procedures (learned in class) in a timely manner: transfers, gait training, physical agents, activities of daily living, therapeutic exercises or activities, and data collection procedures.
- 5. Use sound judgment and safety precautions (exposure to bloodborne pathogens and/or infectious disease may occur as part of the educational experience). Students are trained in safety/infection control and are expected to follow these guidelines to avoid contracting or transmitting disease.
- 6. Meet class standards for successful course completion.
- 7. Use critical thinking when making decisions.
- 8. Follow standards stated in PTA Program Student Handbook the PTA Program

Clinical Education Handbook.

- 9. Address problems or questions to the appropriate person at the appropriate time.
- 10. Maintain classroom, work area, equipment, supplies, personal appearance and hygiene conducive to a professional setting as appropriate.
- 11. Behave in a competent, professional manner.

Physical requirements for the PTA Program include the need to occasionally, frequently, or continually:

- 1. Sit 2-5 hours per day with lecture blocks up to 3 hours.
- 2. Stand 1-6 hours with lab time blocks up to 3 hours.
- 3. Lift up to 60 pounds.
- 4. Push/pull up to 50 pounds of force exerted at waist level.
- 5. Squat or stoop.

- 6. Use auditory, tactile, and visual senses to assess physiological status of an individual.
- 7. Demonstrate good standing and unsupported sitting balance.
- 8. Demonstrate good finger dexterity
- 9. Coordinate verbal and manual instructions
- 10. Communicate effectively with a variety of people through written verbal, and nonverbal methods.
- 11. Use hands repetitively
- 12. Shift weight in sitting or standing
- 13. Demonstrate the ability to use a firm grasp while using physical therapy equipment and while performing physical therapy interventions.
- 14. Reach above shoulder level.
- 15. Kneel, kneel-stand, and half kneel.
- 16. Use equipment that emits electrical, ultrasonic, and thermal energy.
- 17. Physically move and transfer patients

Students who have concerns about the ability to perform any of these functions should contact the PTA Program Director at (662) 562-3247. Individuals with disabilities may request reasonable accommodations or information by contacting

Missy Kelsay Disability Support Services Coordinator, Tate Hall, P.O. Box 5555, 4975 Highway 51 North, Senatobia, MS 38668, telephone number 662-562-3309, e-mail address mkelsay@northwestms.edu



Influenza Vaccination Acknowledgement and Exemption Form Request

To consider a request for exemption, this Acknowledgement and Exception Form request along with the required documentation must be submitted within one week of starting the semester. Waivers are only granted for documented medical conditions for which there is a vaccine contraindication as outlined by the CDC (Centers for Disease Control) and the Mississippi State Department of Health or religious beliefs. Waiver requests must be approved by the Physical Therapist Assistant Director in the FIRST WEEK of the semester and if necessary, sent to the Employee Health at the clinical agency the student is assigned. The clinical agency has the final decision on the documentation required to request the exemption. The clinical agency also has the final decision on whether exemption from vaccinations is granted according to their policy based on applicable law. If the student is not allowed in the clinical area, the student will not be allowed to continue in the program. I understand that in order to comply with the contractual agreements with clinical agencies it is the policy of NWCC Physical Therapist Assistant program that all PTA students be immunized against influenza on an annual basis.

I acknowledge that I have read and understand the following facts:

- Influenza vaccination is recommended for me and all other health care personnel to protect our patients, employees and families from influenza, its complications and death.
- I am likely to be exposed to the influenza virus through the community or while participating in clinical experiences in a variety of healthcare settings.
- If I contract influenza, I will shed the virus for 24-48 hours before the symptoms appear. At this time, I can spread the disease to patients, my colleagues and family.
- If I become infected with influenza, even when symptoms are mild or nonexistent, I can spread severe illness to others.
- I understand that the strains of virus that cause influenza infection change almost every year, which is why a different influenza vaccine is recommended each year.
- I understand that I cannot get influenza from the vaccine. The consequences of my not being vaccinated could have life-threatening consequences to my health and the health of those with patients, my coworkers, my family and my community.
- I understand that if I am granted an exemption, I will be required to follow all
 policies of the facility I am assigned, which may include wearing a surgical mask
 at all times while in the facility.

Exemption Request

immunization. I request an exemption based of Medical Contraindication-Indicate Reason and	on the following:
Religious Belief or Creed-Indicate Reason and	d attach supporting documentation:
Signature	
Printed Name	Date
Results of Exemption Request/Director Comm	nents:
Director Signature	Date

Revised: 11.202

Northwest Mississippi Community College Physical Therapist Assistant Program

CLINICAL EDUCATION HANDBOOK AGREEMENT

I have received and read the Clinical Education Handbook for the Physical Therapist Assistant Program at Northwest Community College. I understand its content and agree to abide by the policies and procedures set forth during my tenure as a Physical Therapist Assistant student. The Program reserves the right to alter policies, procedures and content.

Student Name (Please Print)
O'
Signature
Date

Revised 5.2024