

**GUILFORD TECHNICAL COMMUNITY COLLEGE**  
**PHYSICAL THERAPIST ASSISTANT PROGRAM**

**CLINICAL EDUCATION MANUAL**

To Guide and Advise in the Clinical Education Process

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## INTRODUCTION

This manual was developed to familiarize Guilford Technical Community College students and clinical coordinators with the program and clinical philosophies of the Physical Therapist Assistant Program at GTCC. It contains the policies and procedures for the clinical affiliation experience. It is also designed to help clinical instructors in their planning of the clinical affiliation and to acquaint them with the academic coursework that the students have completed prior to each clinical affiliation experience.

Each student is required to complete at least 624 supervised clinical hours in approved clinical sites before graduation. No student may affiliate until he/she has met all academic requirements as defined in the statement on “academic standard requirements” found in this document.

## ACCREDITATION STATUS

The Physical Therapist Assistant Program at Guilford Technical 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](mailto:accreditation@apta.org); website: <https://www.capteonline.org>. If needing to contact the program/institution directly, please call 336-334-4822 Ext. 50280 or email [injeffers@gtcc.edu](mailto:injeffers@gtcc.edu).

## SPECIAL NOTES

If a clinical instructor teaches the student a data collection or an intervention technique that has not been presented and practiced in the academic setting, the clinical instructor is responsible for determining that the student is safe in applying the procedure to a patient within that clinical setting. If the data collection or intervention techniques are ones in which all students in the program must be competent (Evaluative Criterion 3.3) the program remains responsible for assuring this competence for all students.

Clinical faculty and students are responsible for ensuring that patients are informed when students are involved in patient care.

## CLARIFICATION OF TERMS

Clinical Instructor (CI)	The individual who is responsible for direct student supervision and evaluation during clinical education experiences.
Site Coordinator for Clinical Education (SCCE)	The individual who is responsible for coordination and supervision of a healthcare facility's student clinical education program.
Clinical Education Coordinator (CEC)	The individual who is responsible for coordination and supervision of student clinical education of the college's PTA program.
Program Director (PD)	The individual who is the director of the college's PTA program.

## **CLINICAL EDUCATION FACULTY DEVELOPMENT POLICY**

**The following assessment tools will be used to assess clinical education faculty effectiveness:**

1. Students' weekly journal submissions to the CEC during clinical education courses.
2. The CEC's Midterm Visit-Call Report form which is filled out by the CEC at the midpoint of each clinical education course while meeting with the student and the CI.
3. The CEC's Exit Interview Following Clinical Rotations form which is filled out by the CEC at the end of each clinical education course as he meets with the students.
4. The PTA Student Evaluation of Clinical Experience and Instruction form which is filled out by the students at the end of each clinical education course and then reviewed by the CEC.

If any of these assessments reveal that a CI is not credentialed, the CEC will provide the CI with information regarding the benefits and availability of the APTA CI Credentialing Course. The program then will provide funding for interested CIs to participate in the credentialing course according to PTA budgetary limits.

If any of these assessments reveal that a CI does not know how to correctly use the Clinical Performance Instrument (CPI), the CEC will initiate facility training or personal training of the CI in the proper use of the CPI.

If any of these assessments reveal a deficiency in a CI's effectiveness in clinical education, the CEC will initiate communication with the SCCE and/or the CI to elicit feedback regarding opportunities for development activities desired and/or needed by the CI.

The effectiveness of clinical education faculty development will be assessed through the same assessment tools as mentioned above.

## **MISSION OF GUILFORD TECHNICAL COMMUNITY COLLEGE**

People. Pathways. Partnerships.

## **VALUES OF GUILFORD TECHNICAL COMMUNITY COLLEGE**

- Collaboration
- Learning
- Accessibility
- Excellence
- Integrity
- Inclusion

## **GUILFORD TECHNICAL COMMUNITY COLLEGE INSTITUTIONAL GOALS**

**Goal 1:** Improve student access, success, progress and completion.

**Goal 2:** Use technology effectively to enhance the student, faculty and staff experience.

**Goal 3:** Secure additional funding through strategic pursuit of grants, gifts and entrepreneurial endeavors.

**Goal 4:** Identify and meet employer and community needs in the region.

**Goal 5:** Provide learning opportunities in a safe, convenient and inviting atmosphere.

**Goal 6:** Cultivate a workplace culture of inclusion that welcomes, develops, supports and empowers employees.

**Goal 7:** Enhance a culture of evaluation and continuous improvement using data, proven practices, measurement, and evaluative decision-making.

## **PHYSICAL THERAPIST ASSISTANT PROGRAM MISSION STATEMENT**

The mission of the Physical Therapist Assistant Program at Guilford Technical Community College is to prepare entry-level physical therapist assistants who will provide quality physical therapy services under the direction and supervision of physical therapists in order to positively impact their patients, profession, and community. This two-year comprehensive program offers students the opportunity to earn the Associate in Applied Science Degree with immediate entry into a career as a physical therapist assistant upon successful completion of the National Physical Therapy Exam for Physical Therapist Assistants.

## **PHYSICAL THERAPIST ASSISTANT PROGRAM PHILOSOPHY**

The Physical Therapist Assistant Program is a program of the Health Sciences Division of Guilford Technical Community College, which provides comprehensive quality educational programs and services to the community and Piedmont Triad Region. The PTA Program is designed to prepare persons for careers as physical therapist assistants, thus contributing to the health care of the community.

The College and the program serve a diverse population. The PTA faculty endorses the open-door admission policy of the College, while recognizing the need to restrict the number of PTA program students to a level commensurate with available resources. The PTA faculty also acknowledges the need to establish specific selection criteria indicative of applicants' potential to successfully complete the program and function as competent practitioners upon graduation.

The following statements represent the program philosophy of the PTA faculty and Advisory Committee:

- A. The physical therapist assistant is an integral part of the health care team and provides direct patient care under the direction and supervision of a licensed physical therapist. The physical therapist assistant may be employed in a variety of settings in which his/her role is to actively assist the physical therapist in the treatment of patients with various impairments and functional limitations. The physical therapist assistant is involved in promoting awareness of the profession and an interdisciplinary approach to health through education of the patient, family and community.
- B. A physical therapist assistant adheres to the *Standards of Ethical Conduct of the Physical Therapist Assistant*, *Guide for Conduct of the Physical Therapist Assistant*, and *Direction and Supervision of the Physical Therapist Assistant* set forth by the American Physical Therapy Association and abides by the laws governing practice set forth by the North Carolina Board of Physical Therapy Examiners. The program is committed to instilling in its students a sense of professionalism and clinical excellence.
- C. Learning is a life-long process, resulting in changes in knowledge, behavior, values, and attitudes. Learning takes place most readily when concepts are covered in a logical sequence and progress in difficulty from simple to complex. The ability to learn is influenced by individual life experiences and one's potential.

- D. Education provides opportunities for the acquisition of theoretical knowledge, the development of psychomotor skills, and the refinement of values and attitudes in support of GTCC's workforce productivity effort. The student and the instructor are partners in the learning process. The instructor facilitates learning by constructing experiences to promote the achievement of course/program outcomes. The student acquires significant learning through responsible and active participation. Learning should result in the ability to problem solve and think critically. Student educational achievement is evaluated by measurement of the attainment of course and program outcomes.
- E. Learning is more likely to occur in an atmosphere in which students feel respected and accepted. Positive feedback and success build confidence in the learner and encourage further learning.
- F. Physical therapist assistant education responds to the changes in healthcare and incorporates those changes into its curriculum, allowing the graduate to meet the needs of the healthcare consumer. In response to changing health-care patterns, physical therapist assistant education and community agencies collaborate to form partnerships for the education of the entry-level practitioner.
- G. Physical therapist assistant education at the community college level should provide a curriculum, which is broad based, both enriching life and serving as a basis for further study. A scientifically based curriculum coupled with a strong clinical component and emphasizing the humanistic aspects of physical therapy is necessary to give the students the foundation they require to provide quality health care and thereby fulfill the needs of the community. Individuals who meet the educational requirements of the program will be eligible to take the National Physical Therapy Examination (NPTE) for Physical Therapist Assistants upon graduation and will be prepared to competently practice physical therapy at the entry level.
- H. The Physical Therapist Assistant Program is dedicated to utilizing community resources and values active input from the community it serves. The clinical component of the program will provide a variety of clinical experiences that will broaden vocational options and enhance the students' personal, social, cultural, and intellectual growth.

## **PHYSICAL THERAPIST ASSISTANT PROGRAM GOALS AND OUTCOMES**

**Goal #1:** The PTA Program admissions process will select students that are qualified to achieve success in the PTA Program and in the physical therapy profession.

**Outcome A:** The success rate for first-semester PTA courses will be equal to or greater than the average for the North Carolina Community College System.

**Outcome B:** The PTA Program will achieve a graduation rate of 85% averaged over two years.

**Goal #2:** PTA Program faculty will demonstrate professionalism for students as they consistently deliver high quality instruction related to contemporary physical therapy practice.

**Outcome A:** All full-time and adjunct PTA faculty will meet continuing competency requirements for licensure renewal in North Carolina.

**Outcome B:** All full-time PTA faculty will complete at least one professional development activity in the subject they are teaching every two years.

**Outcome C:** Program faculty will achieve “Meets Expectations” rating during annual Employee Performance Appraisal.

**Outcome D:** On the Student Evaluations of Instruction, PTA faculty will receive 90% ratings of “Agree” or “Strongly Agree” for item #5: “I would rate the full-time faculty as effective” and item #11: “I am satisfied with how this course was taught.”

**Goal #3:** PTA Program clinical education will be delivered by well-qualified clinical instructors in the context of excellent healthcare facilities.

**Outcome A:** All ratings on Clinical Education Midterm Surveys will be “Agree” or “Strongly Agree” on item #21: “The clinical instructor(s) is demonstrating effective teaching” and item #24: “The clinical site is meeting the expectations of the PTA program.”

**Outcome B:** All ratings on Clinical Education Exit Surveys will be “Agree” or “Strongly Agree” on item #46: “Overall, I would recommend my clinical instructor to other PTA students” and item #47: “Overall, I would recommend this clinical education site to other PTA students.”

**Goal #4:** PTA Program students will participate in classroom and clinical experiences that enable them to develop the cognitive, psychomotor, and affective skills relevant to the physical therapist assistant.

**Outcome A:** Students will demonstrate practical competency by achieving scores of at least 80% on all items of the grading rubric for their final practical exam in PTA 235.

**Outcome B:** Students will demonstrate clinical competency by achieving a rating of entry-level on all criteria on the Clinical Performance Instrument at the end of their final clinical education course.

**Goal #5:** PTA Program graduates will find employment as licensed physical therapist assistants who are highly valued by healthcare employers.

**Outcome A:** Program graduates will demonstrate a first-time pass rate on the National Physical Therapy Exam for PTAs of 100% over two years.

**Outcome B:** Program graduates will demonstrate an employment rate of 100% within one year of graduation averaged over two year.

**Outcome C:** All surveyed employers will give ratings of “Agree” or “Strongly Agree” for item #10 on Employer Surveys: “The graduate was prepared by the GTCC PTA program for entry-level practice as a physical therapist assistant.”

## **PTA PROGRAM STUDENT LEARNING OUTCOMES**

Upon successful completion of the Physical Therapist Assistant curriculum, graduates will be able to:

- A. Perform physical therapy data collection and interventions in a safe, effective, and efficient manner.
- B. Communicate verbally, nonverbally, and in writing to support the delivery of physical therapy services.
- C. Demonstrate clinical problem-solving that is legal, ethical, and professional in all situations.
- D. Pass the National Physical Therapy Examination for Physical Therapist Assistants.

## PHILOSOPHY OF CLINICAL EDUCATION

GTCC is committed to the ideal that professional education requires a sound academic preparation that is enhanced and enriched by strong clinical experience. To this end, the clinical education program seeks to provide clinics that offer a stimulating environment to further enhance the development of the physical therapist assistant student.

The primary focus of the clinical education program is to provide the physical therapist assistant student at an entry-level atmosphere in which to promote the health and function of clients. The maximum level of function will be advanced through scientific principles and treatment rationales. While problem solving often follows logical predetermined steps, students must learn that many solutions are created by innovative, abstract thought processes. The excitement of research and discovery will be nurtured.

The student's goal in clinical education is the achievement of the highest level of competency in all areas of patient care and related areas of physical therapy. The students are expected to actively participate, question, explore, and teach during their interaction with the clinical community to reinforce their learning experiences and thereby enhance their education.

The clinical environments will stimulate the student to look beyond the information provided and discover new meanings and relationships within the profession. The clinical centers must also create learning situations that guide students to expand their knowledge, attitudes, and skills. The clinical centers will provide the student an awareness of fiscal responsibility as it will impact their clients and institutions. The clinical experience will include exposure to realistic environments to allow practice in interdisciplinary communication, documentation, problem solving, and medical-legal aspects of patient care with a variety of disabilities and various ages. The student will have a variety of experiences working with patients in multiple settings who present with myriad diagnoses across the life span. The student will have experience in interacting with the interdisciplinary team within the facility. This philosophy of Clinical Education assumes and builds upon the Physical Therapist Assistant Program's philosophy goals and objectives.

## SPECIAL NOTE

All students accepted into the PTA program will be required to participate in Drug Testing, Office of the Inspector General Reviews (OIG), and Criminal Background Checks (CBC) prior to the start of the first clinical education course. The drug testing, OIG, and CBC will be performed through a National Institute of Drug Abuse (NIDA) approved laboratory and will be done at the student's expense (approximately \$100.00). If a clinical facility refuses to accept a student due to a failed drug test or criminal background investigation, the student may not be allowed to continue in the course or the PTA program. In order to avoid liability issues with the college, students **should not** inform PTA faculty of any criminal background in their history.

Once a drug screen form is submitted at the lab site, students must complete the drug screening process prior to leaving the lab site premises. Failure to complete the drug screening is considered an automatic failure and an automatic dismissal from the PTA Program. Admission into a new Health Science program requires a new drug screening.

Clinical facilities may require students to participate in an additional drug testing and criminal background check. This additional testing may or may not be at the students' expense.

While participating in a clinical education course, a PTA student who is believed to be impaired by alcohol, a controlled substance, or prescription medication (either from side effects or improper use) shall be subject to disciplinary action determined by the clinical facility. They shall also be subject to disciplinary action determined by the PTA faculty based on the circumstances and consistent with GTCC's Student Conduct procedure. Disciplinary actions may include, but are not limited to, a written reprimand, receiving a failing grade on a test or course, dismissal from the PTA program, dismissal from GTCC, referral for prosecution, or required successful completion of a drug or alcohol treatment program sponsored by an approved private or governmental institution as a precondition for continued enrollment at GTCC and/or the PTA program.

## **PLANS FOR CLINICAL EDUCATION MEETINGS**

- Clinical education meeting #1: early spring semester
- Clinical education meeting #2: mid spring semester
- Clinical education meeting #3: early summer semester
- Clinical education meeting #4: early second fall semester

### **CLINICAL EDUCATION MEETING #1**

The CEC will give an overview of the Clinical Education Manual for the students. The section on Clinical Education Policies will be explained in detail. The Clinical Performance Instrument will also be explained to the students.

The CEC will explain and distribute Consent for Use of Medical Records to the students. The students will sign the form and return it to the CEC.

The CEC will explain the Student Agreement with Clinical Policies. The students will sign it and return it to the CEC as soon as possible.

The CEC will distribute the Clinical Site Slots form to the students and explain the characteristics of the different clinical sites. The students will return the form to the CEC within one week (the CEC will then assign clinical sites to the students, taking into consideration the information on the Clinical Site Slots form).

The CEC will answer any questions asked by the students.

## CLINICAL EDUCATION MEETING #2

The CEC will describe to the students the content of the packet that he is sending to the clinical sites:

- Letter or email
  - Dates for clinical
  - Experience of students
  - Explanation of Clinical Performance Instrument
  - Explanation of PTA Clinical Education Exit Survey
  - Explanation of visits/calls at midterm
  - Explanation of the inservice required
- Grading policy for this clinical
- List of skills attained
- Proof of liability insurance (If requested)

The CEC will explain to the students what they are to prepare to send to the clinical sites:

- Letter or email
  - Greeting
  - Students phone number and address
  - Dates of clinical
  - Clarification of details that need to be addressed prior to start of clinical
- Student data form
- Learning style profile
- Self-Assessments
- Medical information (measles, mumps, rubella, tuberculin screening, hepatitis B, chicken pox hx., DPT and CPR card)

The CEC will give the students the deadline to have all their information ready.

The CEC will answer any questions asked by the students.

## CLINICAL EDUCATION MEETING #3

The CEC will distribute the *Clinical Site Slots* form to the students and explain the characteristics of the different clinical sites. The students will select their next clinical site. The students will return the forms to the CEC within one week (the CEC will then assign clinical sites to the students, taking into consideration the information on the *Clinical Site Slots* form).

The CEC will describe to the students the content of the packet that he is sending to the clinical sites:

- Letter or email
  - Dates for clinical
  - Experience of students
  - Explanation of Clinical Performance Instrument
  - Explanation of PTA Clinical Education Exit Survey
  - Explanation of visits/calls at midterm
  - Explanation of the inservice required
- Grading policy for this clinical
- List of skills attained
- Proof of liability insurance (If requested)

The CEC will explain to the students what they are to prepare to send to the clinical sites:

- Letter or email
  - Greeting
  - Students phone number and address
  - Dates of clinical
  - Clarification of details that need to be addressed prior to start of clinical
- Student data form
- Learning style profile
- Self-Assessments
- Medical information (measles, mumps, rubella, tuberculin screening, hepatitis B, chicken pox hx., DPT and CPR card)

The CEC will give the students the deadline to have all their information ready.

The CEC will answer any questions asked by the students.

#### **CLINICAL EDUCATION MEETING #4**

The CEC will distribute the *Clinical Site Slots* form to the students and explain the characteristics of the different clinical sites. The students will return the forms to the CEC within one week (the CEC will then assign clinical sites to the students, taking into consideration the information on the *Clinical Site Slots* form).

The CEC will describe to the students the content of the packet that he is sending to the clinical sites:

- Letter or email
  - Dates for clinical
  - Experience of students
  - Explanation of Clinical Performance Instrument
  - Explanation of PTA Clinical Education Exit Survey
  - Explanation of visits/calls at midterm
  - Explanation of the inservice required
- Grading policy for this clinical
- List of skills attained
- Proof of liability insurance (If requested)

The CEC will explain to the students what they are to prepare to send to the clinical sites:

- Letter or email
  - Greeting
  - Students phone number and address
  - Dates of clinical
  - Clarification of details that need to be addressed prior to start of clinical
- Student data form
- Learning style profile
- Self-Assessments
- Medical information (measles, mumps, rubella, tuberculin screening, hepatitis B, chicken pox hx., DPT and CPR card)

The CEC will give the students the deadline to have all of their information ready.

The CEC will answer any questions asked by the students.

## **CLINICAL EDUCATION POLICIES**

### **PURPOSE**

The purpose of the clinical rotations/internships is to provide physical therapist assistant students the appropriate sequence of learning opportunities needed to develop and extend their knowledge, skills, and attitudes in direct patient care, communications, and interpersonal relationships, and to understand the delivery system in a clinical facility in a manner consistent with ethical and legal practice of physical therapy.

Qualified sites for clinical education are experiencing increasing demands on their resources as new schools enter the market for clinical sites, and as all schools increase their standards to meet the new accreditation requirements. Likewise, qualified sites have fluctuation in staffing or other administrative or fiscal restraints that may require them to withdraw from an affiliation on short notice. Should this event occur, the faculty of the Physical Therapist Assistant Program will make every effort to find a suitable clinical site to substitute for a canceled experience.

During all academic and clinical education courses, the student will be expected to perform in a safe manner that minimizes risk to patients, self, and others. Failure to meet the following critical safety elements could result in failure of skills tests, practical exams, and clinical education courses:

1. The student will ensure the safety of patient, self, and others throughout the clinical interaction (e.g., standard precautions, responding and reporting emergency situations).
2. The student will use acceptable techniques for safe handling of patients (e.g., body mechanics, guarding, level assistance).
3. The student will establish and maintain safe working environment (e.g., awareness of all indwelling lines and catheters, other medical equipment, physical therapy equipment, and assistive devices; maintaining hazard free work space).
4. The student will request assistance when necessary (e.g., requests assistance from instructor, utilizes and monitors support personnel).
5. The student will demonstrate knowledge of facility safety policies and procedures.
6. The student will recognize physiological and psychological changes in patients and
  - a. Adjust interventions accordingly within the plan of care or
  - b. Withhold interventions and consults supervising physical therapist

### **ATTENDANCE POLICY**

Attendance is required unless the student is ill or excused by the Clinical Education Coordinator of (CEC) and/or assigned clinical instructor (CI) and the Site Coordinator of Clinical Education (SCCE). Students are expected to attend clinic during the assigned hours and to arrive at the facility on time and stay the allotted number of hours. The student will follow facility procedure for notification of the clinical instructor of impending absence. Excessive absences in the clinical setting will impede meeting the course outcomes. Excessive absenteeism is defined as being tardy or absent two times in one clinical rotation for any reason without prior approval from the CEC or due to extenuating circumstances as determined by the CEC. Excessive absenteeism will result in a reduction of one letter grade and consultation with the CEC for that clinical. A second occurrence of excessive absenteeism will result in a reduction of one letter grade, consultation with the PTA program director and possible dismissal from the program. All hours missed in the clinical must be made up unless the CEC, SCCE, and CI excuse those hours.

## **GRADING POLICY**

All experiences are graded numerically and are converted into either pass or fail. The student must meet all expectations for items 1-3, 5, 7 (Red Flag Items) and at least 80% of all criteria to pass.

The grade for this clinical rotation will be based on the percentage of expectations that are met compared to those that are observed. (Ex: 9 criteria met and 11 criteria observed)

## **GENERAL CLINICAL CRITERIA**

1. To successfully complete the clinical, any critical incident must be resolved by completion of the final evaluation. The resolution of a critical incident is the absence of reason for immediate failure AND successful remediation of the incident by the final evaluation.
2. To successfully complete the clinical, any categories not meeting expectations must not be due to safety concerns.

## **SPECIFIC CLINICAL CRITERIA**

### **Clinical I Expectations**

Entry Level Performance = None

Advanced Entry Performance = None

Intermediate Performance = *Communication, Inclusivity, Ethical Practice, Legal Practice, Professional Growth*

Advanced Beginning Performance = *Clinical Reasoning, Mechanical/Electrotherapeutic Modalities, Therapeutic Exercise/Techniques, Functional Training/Application of Devices, Documentation, Resource Management*

Beginning Performance = None

### **Clinical II Expectations**

Entry Level Performance = None

Advanced Entry Performance = *Communication, Inclusivity, Ethical Practice, Legal Practice, Professional Growth*

Intermediate Performance = *Clinical Reasoning, Mechanical/Electrotherapeutic Modalities, Therapeutic Exercise/Techniques, Functional Training/Application of Devices, Documentation, Resource Management*

Advanced Beginning Performance = None

Beginning Performance = None

### **Clinical III Expectations**

Entry Level Performance = *Communication, Inclusivity, Ethical Practice, Legal Practice, Professional Growth, Clinical Reasoning, Mechanical/Electrotherapeutic Modalities, Therapeutic Exercise/Techniques, Functional Training/Application of Devices, Documentation, Resource Management*

Advanced Entry Performance = None

Intermediate Performance = None

Advanced Beginning Performance = None

Beginning Performance = None

## **ACADEMIC SUSPENSION/APPEALS POLICY**

PTA students making a grade less than 70 (D or F) or unsatisfactory in any PTA course will be suspended (i.e., dismissed) from the PTA Program. Withdrawal from a PTA course for any reason will withdraw the student from the PTA Program

A student may appeal the grading practice of an instructor to the instructor's immediate supervisor, whose decision will be final.

Students who have been suspended (i.e., dismissed) have the right to appeal. To appeal the suspension, the student must see the PTA department chair to get an Academic Suspension Appeal form. The student must complete it before the last day to add classes for the semester following the suspension.

## **SCHEDULE**

In the third semester, one clinical is scheduled. This affiliation (PTA 245) occurs during the final five weeks of the semester. Students should achieve the objectives outlined in the PTA 245 course syllabus. It is the goal of the program that half of the class will do an acute care rotation while the remaining half does an outpatient rotation.

After completing academic work in PTA 225 (Intro to Rehabilitation) in the fourth semester, students will complete a clinical affiliation in a setting which allows exposure to the rehabilitation of general medicine patients (e.g., pulmonary dysfunction, cardiac disease, PVD, LE amputation, prosthetics or burn injuries). This rotation is five weeks in length and students should achieve the objectives outlined in the PTA 255 course syllabus. It is the goal of the program that half of the class will do an acute care rotation while the remaining half does an outpatient rotation.

In the fifth semester of the program, following satisfactory completion of all curricula coursework, students attend their final clinical rotation. This rotation is seven weeks in length with the major emphasis of this experience is in the area of neurological rehabilitation. Students should achieve the objectives outlined in the PTA 155 and PTA 185 course syllabi.

## **SELECTION OF CLINICAL EDUCATION SITES**

The CEC screens possible clinical education sites to ensure high quality learning experiences for physical therapy students in a wide variety of settings. Potential clinical education sites are required to submit completed Clinical Site Information Forms (CSIF) and will be visited and evaluated by the CEC or a designated representative.

The clinical education relationship between the clinical site and the academic program is formalized through a written clinical education agreement.

### **1. Assignments to Clinical Facilities**

The students are required to successfully complete three clinical rotations. Each student will affiliate with *at least* one inpatient facility (e.g., hospital, SNF, rehab unit, nursing home, etc.) and *at least* one outpatient facility (e.g., private clinic, home health, school system, sports center, etc.).

Assignments to clinical facilities will be made by the Clinical Education Coordinator (CEC). When making clinical assignments, the CEC will consider the following factors:

- a. Special needs of the student (e.g., family, financial, and/or social needs)
- b. Student preferences
- c. Previous association of the student with a facility
  - i. Students may not complete more than one clinical education experience with the same physical therapy department.
  - ii. Students cannot be assigned to the department within a facility where they have previously worked, a facility in which they are currently employed, a facility in which they are receiving financial assistance, a facility in which they have a work agreement, or a facility in which they will be supervised by family or relatives.

The placement decisions will be based on:

- a. The availability of clinical facilities that have current written agreements with GTCC
- b. Students' performance in didactic coursework and previous clinical education experiences
- c. The types of learning experiences available (preference is given to facilities with learning experiences that reinforce content in previous academic courses)
- d. Student's previous clinical placements
- e. The experience of available clinical instructors

## **2. Procedures for Assigning Students to Clinical Facilities**

The following procedures will be followed when the students are being assigned to the clinical facilities:

- a. The CEC will give a summary of the types of clinical sites that are available for each clinical rotation.
- b. The students will be given the Clinical Rotation Information Sheet and return it to the CEC within one week.
- c. After the Clinical Rotation Information Sheet is returned, the CEC will assign students to each clinical site.
- d. The proposed assignments, with clinic requirements and deadlines, and will be emailed to each student.
- e. After the proposed clinical education courses have been posted, students will have one week to discuss assignment problems with the CEC.
- f. After one week, the CEC will post a final assignment list and notify the clinical facilities with the names of the students assigned to their facility. At this time the assignments are considered FINAL and NO changes will be made unless:
  - i. The clinical facility cancels the assignment.
  - ii. The student encounters extenuating circumstances that the CEC considers important enough to reconsider the assignment.
  - iii. The CEC encounters extenuating circumstances with the affiliation site and considers it important enough to reconsider the assignment.
- g. After the facilities have been notified of the student assignments, the CEC will have responsibility for all changes and dealings with the facilities during specific clinical education courses.
- h. Students may suggest clinics that are not under contract with GTCC. There is no guarantee that these sites can or will be developed.

## **CPR**

All Physical Therapist Assistant students must obtain and maintain CPR certification before participating in PTA 155, 185, 245, 255. It is the student's responsibility to locate and complete CPR certification.

It is expected by GTCC and the affiliating facilities that students will carry current CPR certification cards at all times during clinical affiliations.

## **HEALTH POLICY**

In compliance with the philosophy, purposes, and objectives of the college, the physical therapist assistant program is committed to fostering the total development of the student, the physical as well as the spiritual, intellectual, emotional, and social development.

Because of contractual agreements with community agencies, and to ensure patient and student safety, students must follow certain practices.

1. All students in the PTA program are required to submit the Student Medical Form prior to beginning of the second semester in the program. The following sections of the Medical Form must be completed:
  - a. Immunization record/Section A
  - b. Immunization record/Section B/Hepatitis B (3 injections)
  - c. Report of medical history
  - d. Family and personal health history

In addition to the sections noted above, the Physical Examination section must be completed/signed/dated, omitting the hearing test at 15 feet, Microscopic urinalysis, and STS (Serological Test for Syphilis). A QuantiFERON-TB Gold must be completed by the end of January of the spring semester of the PTA program. TDAP booster must be within the last 10 years. Documentation of Varicella (chicken pox) immunization series/titer of immunity is required.

All PTA students must buy accident insurance. This insurance covers you when you're on campus for classes and while you're participating in official school sponsored activities, including clinical education. If you need more information, stop by the Finance Office in the Medlin Campus Center.

When students are participating in clinical education courses, the health care facility will provide emergency care to the students in case of illness or accidental injury at the student's own expense and in accordance with the college's Accident Insurance Plan.

2. A physician's statement may be needed when health concerns arise that place the student or others at risk. The PTA Program Director or CEC may request that the student seek appropriate treatment and provide documentation of that treatment. Physical and emotional concerns not responding to treatment within a reasonable period of time and resulting in the student's inability to perform satisfactorily may result in dismissal.
3. Students demonstrating health problems/behaviors which present a risk to themselves or others are subject to departmental and College disciplinary action. Disciplinary action may include suspension from the program and/or the College.
4. Students with a known or suspected communicable disease must report this to the Program Director. The College Infectious or Communicable Disease Policy and Procedures will be followed.

## STUDENT DRESS POLICY

GTCC Student Dress Code (GTCC Management Manual, IV-3.1.3, p. 235)

1. Students will dress in a manner that observes health and safety regulations and is appropriate to the instructional programs.
2. Students will be informed of particular dress/uniform requirements for the particular Health Program they are enrolled in.
3. Students who fail to comply with such requirements may be subject to disciplinary action.

### PTA Program Dress Policy:

1. Academic Courses:
  - a. In order to practice physical therapy interventions, both male and female students will often be required to wear lab clothes that allow the exposure of their upper extremities, lower extremities, and trunk.
  - b. Male students need to have shorts and short-sleeve shirts.
  - c. Female students also need to have shorts and short-sleeve shirts. They will also need sports bras.
2. Clinical Courses: An individual's appearance communicates an aspect of professional integrity. The student will be expected to adhere to the following dress code in the clinical setting:
  - a. Pants must be full length.
  - b. Shirts must be short, 3/4, or full-length sleeves (no sleeveless shirts or shirts with capped sleeves).
  - c. Shirts must be tucked in or of sufficient length to cover the low back with bending and moving.
  - d. Shoes must be closed-toe and close-heeled with a heel no higher than ½ inch.
  - e. A name tag should be worn at *all* times with the lab coat or acceptable uniform.
  - f. Do not use perfume or aftershave.
  - g. Nails must be cut to just cover fingertips.
  - h. Wear only simple jewelry (e.g., watch, small earrings, and wedding band).
  - i. Hair must be neat and clean. Hair must be completely off the face – it cannot fall forward when one leans over. Facial hair (beards, mustaches, etc.) must be neatly trimmed.
  - j. Students must practice adequate personal hygiene (e.g., bathing, grooming, deodorant, mouthwash, etc.).
  - k. No gum chewing or smoking will be permitted when in the clinical setting except in designated areas.
  - l. If required, scrubs should be in conformity to the requirements of the clinical facility (e.g., color).
  - m. The student must conform to the dress code of the facility in which he/she is participating in clinical education.

## **HOLIDAYS**

The student will follow the holiday schedule established by the clinical facility, NOT the academic schedule of Guilford Technical Community College. Any additional absences for holidays are at the discretion of the clinical faculty.

## **TRAVEL/LIVING EXPENSES**

Students are responsible for providing their own transportation to all clinical experiences. Students are also responsible for providing their own living expenses during the affiliation. Students should anticipate additional costs for full-time clinical experiences and the possibility of obtaining housing for clinical rotations outside acceptable travel distances.

## **CLINICAL EDUCATION MEETINGS**

Clinical meetings will be scheduled for the purpose of selecting affiliation sites, reviewing clinical course objectives or exchanging information. Attendance by all students at clinical meetings is MANDATORY! Students who fail to attend clinical meetings will forfeit their right to participate in the selection process and will be assigned to their clinical experience by the CEC.

## **EVALUATIONS**

The CI will be responsible for completing the Clinical Performance Instrument.

There will be a student mid-term and a final evaluation. The mid-term will allow the CI and student to review goals and course objectives as well as discuss student progression in the rotation. The final evaluation will be completed by the CI and reviewed with the student. All evaluations must be returned to GTCC.

Students will be expected to complete an online survey of the facility and of the clinical experience by the end of each affiliation. The student is not required to share this information with the CI, but must return this evaluation to GTCC. Some facilities will require their own evaluation forms completed by the student as well.

## **COMMUNICATION**

Students are expected to correspond with each assigned facility at least two weeks prior to the affiliation start date. The purpose of this communication is to allow opportunities for students to ask questions, make requests, finalize room/board arrangements, etc. Students are also required to complete the personal data form, learning style profile and student self-assessment form located in the back of this manual and mail to each assigned facility.

The CEC or faculty representative will conduct an on-site visitation of the clinical education facilities prior to the start date of the student affiliations. Planning for the student's clinical education experiences will be the purpose of this arranged, on-site visitation.

The CEC /Program Director will contact all clinical sites during each affiliation. This will occur via telephone conference or an arranged, on-site visitation. The purpose for the conference will be to ascertain how the student is progressing in the clinical learning experience. Should problems arise during the clinical rotation, the Policy on Resolution of Clinical Problems, should be followed. This Policy is found on page 31 of this manual.

All students will receive a mid-term evaluation from their CI. Students may also be expected to perform a self-evaluation and give an informal evaluation of the clinical experience at mid-term.

Final evaluations will be completed by the CI and also by the student. The student is encouraged to share this evaluation with the clinical facility but the form must be returned to the CEC.

Students and clinical faculty are encouraged to contact the CEC or Program Director whenever there is a perceived need or desire to speak with the academic faculty.

Open lines of communication are encouraged between the clinical faculty and the academic faculty/ CEC to discuss student progression, develop learning objectives, receive support, or verbalize any other questions or concerns that may arise.

Upon the return to the academic setting, the students will participate in a group exit interview with the program director and the CEC. The CEC will meet with individual students and review the Clinical Performance Instrument and the Clinical Exit Survey as needed. The CEC will also tell the student his/her grade.

Students must submit to the CEC via a canvas upload a weekly journal detailing their time in clinic and their completed weekly time sheet.

## **PROFESSIONAL CONDUCT**

Students are required to conduct themselves in a professional manner while on clinical affiliations or while wearing uniforms identifying themselves as students at GTCC.

Each student's attitude and conduct reflect on the College, the student, and the profession of Physical Therapy. Any student who displays conduct which adversely affects the College's educational objectives or whose conduct is counter to the rules and regulations of the college is subject to disciplinary action. Please see copy of policy in GTCC Student Handbook/Calendar.

A written report of Student Conferences for any and all consultations between the CI, GTCC faculty representative, and student relating to clinical progress, attendance, tardiness, and all disciplinary problems will be maintained in the student's file within the PTA Program Director's office at the college.

All students are to arrive on time for their clinical rotations and remain at the site for their scheduled shift. If a student leaves the facility premises without completing their shift, they must have documented permission of the clinical instructor.

The student may not conduct any survey, research, inquiry, or other study related to the clinical facility, patient, staff, or clinical programs without written permission from the college and the clinical facility, in collaboration with a physical therapist. If permission is granted, students must follow the GTCC policy on Use of Human Subjects (GTCC Management Manual, III-2.1.12, pp. 178-179).

All patient information is to be kept confidential. Discussion of patient's situations may occur during clinical conference or within the clinical setting, but use of patients' names and other identifying information outside the clinical experience is strictly prohibited. Breach of patient confidentiality is a violation of student conduct policy (GTCC Management Manual, II-1.1, p. 95).

Students must understand that while on clinical rotations, they are not paid employees of the physical therapy department. Clinical affiliations are considered specific courses within the PTA program curricula.

The facility representative or clinical instructor reserves the right to send a student home if the student breaches any facility policies or procedures. The facility must notify the college and the college will be responsible for any and all subsequent disciplinary action.

All students must submit to drug testing and a criminal background investigation prior to the start of clinical rotations (PTA Student Handbook, p. 9)

### **CURRICULUM STATEMENT**

Physical therapist assistant education at the community college level should provide a curriculum which is broad based, both enriching life and serving as a basis for further study. A scientifically based curriculum coupled with a strong clinical component and emphasizing the humanistic aspects of physical therapy, are necessary to give the students the foundation they require to provide quality health care and thereby fulfill the program will be eligible to take the Physical Therapist Assistant Board Examination upon graduation and will be prepared to competently practice physical therapy at the Associate Degree level.

Educational syllabi for each class are available upon request. Clinical syllabi are included in this manual.

Courses in the PTA curriculum are sequential. Co-requisite and pre-requisite course are identified. In each succeeding semester, the student is responsible for material presented in previous curriculum courses. Students must have completed the curriculum courses for each semester as identified in the curriculum master plan before proceeding to the next semester.

Individuals entering the program must have taken all seven general education courses listed below as part of the program admission requirements.

## **CURRICULUM MASTER PLAN**

Individuals entering this program must pass (with at least a “C”) all seven general education courses listed below as part of the program admission requirements.

Courses in the PTA curriculum are sequential. In each succeeding semester, the student is responsible for material presented in previous curriculum courses. Students must have completed the curriculum courses for each semester as identified in the curriculum master plan before proceeding to the next semester. This curriculum is subject to change.

### **Spring Semester I**

- BIO 168 Anatomy and Physiology I - Credits: 4
- ENG 111 Writing and Inquiry - Credits: 3
- PHY 110 Conceptual Physics - Credits: 3
- PHY 110A Conceptual Physics Lab - Credits: 1
- PSY 150 General Psychology - Credits: 3
- Humanities/Fine Arts Elective - Credits: 3

### **Fall Semester I**

- BIO 168 Anatomy and Physiology II - Credits: 4
- PTA 110 Introduction to Physical Therapy - Credits: 3
- PTA 125 Gross and Functional Anatomy – Credits: 5
- PTA 135 Pathology – Credits: 4

### **Spring Semester II**

- PTA 145 Therapeutic Procedures – Credits: 4
- PTA 215 Therapeutic Exercise – Credits: 4
- PTA 222 Professional Interactions – Credits: 2
- PTA 245 PTA Clinical III – Credits: 4
- Communications or Second English Elective – Credits: 3

### **Summer I**

- PTA 225 Introduction to Rehabilitation – Credits: 4
- PTA 255 PTA Clinical IV – Credits: 4

### **Fall Semester II**

- PTA 212 HealthCare Resources – Credits: 2
- PTA 235 Neurological Rehabilitation – Credits: 5
- PTA 155 PTA Clinical I – Credits: 2
- PTA 155 PTA Clinical II – Credits: 3

## **CONSENT FOR USE OF MEDICAL RECORDS**

On GTCC's Learning Management System, PTA students will give permission for GTCC Health Science program officials to have access to their medical records required for the clinical onboarding process.

PTA students will acknowledge that they understand that the required medical records are to be submitted electronically through the approved GTCC vendor to meet the requirements for the Health Sciences program. They understand that information from their medical records will be available to the clinical agencies where they have educational experiences.

## **STUDENT AGREEMENT WITH CLINICAL POLICIES**

On GTCC's Learning Management System, students will acknowledge they have read, understood, and agreed to abide by the clinical policies as outlined in the Clinical Education Manual (these clinical policies outlined in the Clinical Education Manual are subject to change in extenuating circumstances as deemed appropriate by the Program Director, Coordinator of Clinical Education, Site Coordinator of Clinical Education, or Clinical Instructor).

Students will also agree to the following:

1. To follow policies and procedures set forth by the clinical sites where they will be affiliating.
2. To maintain confidentiality of patient records.
3. To maintain their current immunization status as follows:
  - a. If they were born on January 1, 1957 or after, they will provide documented proof of immunity to the following diseases.
  - b. If they were born before 1957, they will give a verbal history, and of course, if negative, they should be immunized and/or counseled. These records will be provided before beginning their clinical rotations.
    - i. German measles
    - ii. Red measles (Rubeola)
    - iii. Mumps
    - iv. Tuberculosis screening (QuantiFERON-TB Gold). If +, a chest x-ray should be negative and I should be asymptomatic of TB with at least an annual assessment.
    - v. Chicken Pox (history only)
    - vi. Tetanus/Diphtheria (optional, should be encouraged to update routinely every 10 years).

## **POLICY ON RESOLUTION OF CLINICAL PROBLEMS**

In the event that any problems arise regarding a student's performance or between a student and clinical faculty during a clinical experience, the following steps should be taken:

1. **IDENTIFY THE PROBLEM:** Any specific areas of concern or weakness of a student's performance should be identified as soon as possible and referenced to the specific criteria of the Clinical Performance Instrument. Significant concerns regarding patient safety issues may be reason for immediate failure.
2. **COUNSEL THE STUDENT:** The CI should express concern over the issues to the student, and counsel the student; mutual suggestions should be discussed for ways to rectify the weaknesses.
3. **NOTIFICATION OF SCCE and CEC:** The SCCE and CEC should be notified immediately and informed of student status.
4. **DOCUMENTATION:** Documentation regarding the student's performance level and the plan and goals (with time frames) should be completed and signed by the student and CI.
5. **FOLLOW-UP:** The CI and student should follow-up on the plan and results, keeping the SCCE and CEC informed of the student's progress.
6. **INSUFFICIENT PROGRESS:** If insufficient progress is made toward the established goals the CEC should be contacted immediately and a meeting must be held for discussion between the CI, student, SCCE, and CEC.
7. **REMEDICATION PLAN:** A learning contract or another format for a remediation plan may be utilized, with written copies given to and signed by the student, CI, SCCE, and CEC. The possibility of failing the affiliation will be discussed between the student, CI, SCCE, and CEC (for example, if the remediation plan is not followed by the student or if unacceptable performance is noted).
8. **SUPERVISION OF STUDENT:** If it is determined that the student should continue the clinical rotation their performance must be supervised closely with immediate feedback.
9. **PROGRESS TOWARD GOALS:** If the student's performance improves per the remediation plan, continue to supervise the student closely and encourage the student to progress toward completion of the objectives for the clinical experience. Progress towards goals DOES NOT guarantee a passing score at final evaluation.
10. **INSUFFICIENT PROGRESS CONTINUED:** If the student's performance does not improve per the remediation plan, the student may be removed from the clinical setting. A meeting between the student, CI, SCCE, and CEC will be held regarding the student's inability to achieve the required standard/expectations or plan objectives in the stated time frames.
11. **COMPLETION OF APPROPRIATE DOCUMENTATION:** The CI must complete the appropriate midterm/final performance evaluations for the clinical, with comments, to be submitted to the program, along with all documentation of the student's performance.
12. **If any questions or concerns arise, never hesitate to contact the CEC or the PTA Program Director.**

# GUILFORD TECHNICAL COMMUNITY COLLEGE

## STUDENT DATA FORM

### I. Student's Personal Data:

Name: \_\_\_\_\_ School: \_\_\_\_\_

Preferred Mailing Address:

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Phone: \_\_\_\_\_

Medical Insurance: \_\_\_\_\_ Policy #: \_\_\_\_\_

Liability Insurance: \_\_\_\_\_ Policy #: \_\_\_\_\_

In case of emergency: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Status:

Please identify any recent illnesses, operations, current physical limitations or pertinent medical history.

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Are you presently on any prescribed medication? \_\_\_\_\_

Medication name: \_\_\_\_\_

Purpose: \_\_\_\_\_

**II. Learning Style Profile:** Check the response(s) which most clearly describe(s) you.

a. Do you prefer to learn....

\_\_\_\_\_ Under considerable pressure with specific goals and deadlines?

\_\_\_\_\_ Under limited pressure with general goals and flexible deadlines?

\_\_\_\_\_ In a completely relaxed manner that lets you try things when and if you feel like it?

b. When involved in a social situation, are you generally....

\_\_\_\_\_ reserved

\_\_\_\_\_ outgoing

c. When learning something new do you usually prefer....

\_\_\_\_\_ To find out the rationale for it first, understand the whole process, and then start to work on practical specifics?

\_\_\_\_\_ To get right into practical aspects at the beginning and wait to learn theory after you have gotten your feet wet on specifics?

d. How frequently do you seem to need feedback on how you are doing during learning?

\_\_\_\_\_ Several times near the start then infrequently after that.

\_\_\_\_\_ Fairly frequently until you have made substantial progress in mastery, then infrequently.

\_\_\_\_\_ Frequently, even after you seem to have mastered the skill.

e. I like to ....

\_\_\_\_\_ Be told exactly how tasks are expected to be done.

\_\_\_\_\_ Be given choices of how I could do the tasks that are expected of me.

### III. Student Self-Assessment:

In this section, you will first be asked to describe your background and rate your competency in the following areas: evaluation procedures, treatment procedures, training procedures and process skills. The purpose of the form is to assist not only students but academic and clinical faculty to planning educational programs to meet each student's needs. The rating you use (see further explanations below) represents your perception of where you are in the development of your professional competence. Self-assessment is a skill vital for effective professional development, so be accurate, honest and assertive in your description, so that each clinical experience can offer the most appropriate program available to meet your needs.

#### Rating your exposure:

Using the following scale, indicate for each item listed on the following pages, whether you have been exposed to the item during classroom, lab, or clinical situations. **Add a “+” or a “-”** to indicate lots or little exposure.

- 4 = clinical, classroom, and lab
- 3 = clinical only
- 2 = classroom and lab
- 1 = classroom only
- 0 = no exposure

#### Rating your competency:

Competency means to consistently perform the activity accurately, skillfully, and in the appropriate time and place. Under the competency column indicate how competent you feel in each area listed using the following scale (comment to clarify as needed).

- 4 = competent, requiring only confirmation from CI
- 3 = competent, with guidance from CI
- 2 = competent with supervisor physically present
- 1 = require assistance to complete skill competently

# GENERAL PHYSICAL THERAPY PROCEDURES

## Exposure

4 = clinical, classroom & lab  
 3 = clinical only  
 2 = classroom and lab  
 1 = classroom only  
 0 = no exposure

## Competency

4 = competent, requiring only confirmation from CI  
 3 = competent with guidance from CI  
 2 = competent with supervisor physically present  
 1 = requires assistance to complete skill competently

	Exposure					Competency			
	0	1	2	3	4	1	2	3	4
1. Vital signs									
2. Goniometry									
3. Manual muscle testing: gross									
4. Manual muscle testing: definitive									
5. Sensory evaluation									
6. Reflex testing									
7. Skin condition									
8. Cardiopulmonary assessment									
9. Musculoskeletal:									
a. posture									
b. scoliosis									
c. mobility (passive movement)									
d. lower ¼ screening									
e. upper ¼ screening									
f. cervico-thoracic									
g. thoraco-lumbar									
h. hip									
i. knee									
j. ankle & foot									
k. shoulder									
l. elbow									
m. wrist & hand									
10. Gait									
11. Activities of daily living									
12. Coordination (balance)									
13. Perceptual motor									
14. Neuro-developmental									
15. Muscle tone									
16. Motor control									

COMMENTS:

## TRAINING PROCEDURES

### Exposure

4 = clinical, classroom & lab  
 3 = clinical only  
 2 = classroom and lab  
 1 = classroom only  
 0 = no exposure

### Competency

4 = competent, requiring only confirmation from CI  
 3 = competent with guidance from CI  
 2 = competent with supervisor physically present  
 1 = requires assistance to complete skill competently

	Exposure					Competency			
	0	1	2	3	4	1	2	3	4
1. Body mechanics									
2. ADL's:									
a. transfers									
b. mat activities									
c. adaptive equipment									
3. Gait training									
4. Pre-prosthetic training									
5. Prosthetic training									
6. Orthotic training									
7. Cardiac rehabilitation									
8. Bronchial drainage									
9. Perceptual motor training									
10. Safety procedures									

## PROCESS SKILLS

### Exposure

4 = clinical, classroom & lab  
 3 = clinical only  
 2 = classroom and lab  
 1 = classroom only  
 0 = no exposure

### Competency

4 = competent, requiring only confirmation from CI  
 3 = competent with guidance from CI  
 2 = competent with supervisor physically present  
 1 = requires assistance to complete skill competently

	Exposure					Competency			
	0	1	2	3	4	1	2	3	4
1. Scheduling patients efficiently									
2. Gathering information from chart									
3. Writing progress notes									
4. Writing home instructions									

## TREATMENT PROCEDURES

### Exposure

4 = clinical, classroom & lab

3 = clinical only

2 = classroom and lab

1 = classroom only

0 = no exposure

### Competency

4 = competent, requiring only confirmation from CI

3 = competent with guidance from CI

2 = competent with supervisor physically present

1 = requires assistance to complete skill competently

	Exposure					Competency			
	0	1	2	3	4	1	2	3	4
1. Passive exercise									
2. Assistive exercise									
3. Active exercise									
4. Resistive exercise									
5. Isometric exercise									
6. Isokinetic exercise									
7. Home exercise program									
8. Massage									
9. Jobst compression									
10. Paraffin									
11. Hydrocollator packs									
12. Cold packs									
13. Ice massage									
14. Whirlpool									
15. Hubbard tank									
16. Contrast baths									
17. Ultrasound									
18. Infrared									
19. Ultraviolet									
20. Microtherm									
21. Diathermy									
22. High volt E-stim.									
23. Low volt E-stim.									
24. Iontophoresis									
25. Phonophoresis									
26. T.E.N.S.									
27. Biofeedback									
28. Mechanical traction									
a. Cervical									
b. Lumbar									
29. Manual traction									
30. Articulations (mobilization)									
31. Bandaging									
32. Sterile technique									
33. Guarding patients									
34. Bed positioning									
35. Neuro-developmental techniques									
a. Rood									
b. Brunnstrom									
c. PNF									
36. Integration of neuro techniques									
37. Responsible for patient's safety									
38. Other:									

## TYPES OF DIAGNOSES

Describe your experience with various types of diagnoses. Please check whether you have observed, evaluated, and/or treated each diagnostic type.

	OBSERVED	TREATED
1. Pediatric – acute		
2. Pediatric – chronic		
3. CVA		
4. Geriatrics		
5. Amputee – LE		
6. Amputee – UE		
7. Cardiac conditions		
8. Neuromuscular disease (specify)		
9. Spinal cord injury (indicate level)		
10. Cerebral palsy		
11. Head trauma		
12. Respiratory disease		
a. Acute		
b. Chronic		
13. Burns		
14. Orthopedic		
a. Total joint replacement (indicate which)		
b. Soft tissue injuries (please specify)		
c. LE injuries/surgeries (please specify)		
d. UE injuries/surgeries (please specify)		
e. Spinal dysfunction (please specify)		
f. Other (please specify)		
15. Psychiatric		
16. Chronic pain		
17. Arthritis		

## AFFECTIVE SKILLS

Help your CI get “to know” you by describing how confident you feel in performing various affective (communication) skills which are necessary in clinical practice. Use a 5-point scale to describe how confident you feel in each “situation”.

### Key:

- 0-1** = No exposure
- 2-3** = Lack confidence
- 4** = Confident
- 5** = Very confident

### I am confident in my ability to competently...

	0	1	2	3	4	5
1. Give instructions to patients						
2. Discuss illness with patients						
3. Communicate with patient's family						
4. Discuss PT management with patient						
5. Communicate effectively with physicians						
6. Interact with other health professionals						
7. Request more or less help or supervision						
8. Discuss own weaknesses and strengths						
9. Provide feedback to my supervisor						
10. Confront and resolve conflict with others						

**Guilford Technical Community College  
Physical Therapist Assistant Program**

**Inservice/Case Presentation:**

TOPIC: \_\_\_\_\_

FORMAT: \_\_\_\_\_ Inservice      \_\_\_\_\_ Case Presentation  
             \_\_\_\_\_ Special Project      \_\_\_\_\_ Research Project

	<u><b>Acceptable</b></u>	<u><b>Unacceptable</b></u>
1. Demonstrates appropriate teaching skills.	_____	_____
2. Topic selected is appropriate.	_____	_____
3. Relates clear, appropriate objectives.	_____	_____
4. Selects appropriate style of presentation.	_____	_____
5. Selects media which enhances presentation.	_____	_____
6. Speaks clearly and appropriately.	_____	_____
7. Presentation is appropriate to level of audience.	_____	_____
8. Information presented is correct.	_____	_____
9. Non-verbal presentation and/or demonstrations are appropriate.	_____	_____
10. Responds to and interacts with audience.	_____	_____
11. Answers all questions appropriately.	_____	_____
12. Used at least one peer reviewed article.	_____	_____

**Comments:**

**Clinical Instructor Signature:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**NOTE: All criteria must be acceptable or the student must present another inservice on a different topic.**

## **The Rights and Privileges of Clinical Education Faculty**

1. Clinical education faculty members receive North Carolina continuing competency points when they serve as clinical instructors for GTCC PTA students.
2. Clinical education faculty members have full and complete access to the Learning Resources Center (Library) at Guilford Technical Community College.
3. Clinical education faculty members have full and complete access to the Physical Therapist Assistant Program's computer lab.
4. Clinical education faculty may participate in any of the professional development activities offered by Guilford Technical Community College.
5. Clinical education faculty members are invited to go through the American Physical Therapy Association's Clinical Instructor and Credentialing Program. The PTA program at GTCC will sponsor clinical education faculty to participate in the credentialing program on a limited basis.
6. Clinical education faculty are invited to attend any of the academic classes in the PTA program at GTCC, including classes taught by guest lecturers such as:
  - a. Guest lecture and demonstration of neurological seating for clients with TBI, CVA, and SCI by a wheelchair representative
  - b. Guest lecture and demonstration of rehab of people with amputations and prosthetics
  - c. Guest lecture on SCI, TBI, and Stroke
  - d. Guest lecture for pediatrics
7. Clinical education faculty are invited to attend PTA program field trips.
8. Clinical education faculty are invited to request the Program Director or the Clinical Education Coordinator to do an inservice for your department on topics related to physical therapist assistant education, such as how to use the Clinical Performance Instrument or the role of the Physical Therapist Assistant.
9. Clinical education faculty are invited to be a part of the Physical Therapist Assistant Program Advisory Committee which meets two times a year for the purpose of advising the PTA faculty in regard to training and educating the PTA students.
10. Clinical education faculty members are invited to attend and participate in the monthly PTA faculty meetings as well as the college's Faculty Association.