

The University of Findlay
College of Health Professions
Doctor of Physical Therapy Program
SPRING Semester, 2021

**The mission of The University of Findlay is to equip our students for
meaningful lives and productive careers.**

Course Number/Title: PHTH 720 Clinical Education I, Inpatient

Credit Hours: 5 semester hours

Class Time/Place: Assigned Clinical sites (40 hours/week, AT A MINIMUM)

Contact Time: hours reflect per semester totals based on 15-week semesters

Prerequisites, Co-requisites and Course Description: Successful Completion of Term VII in the PT Program. Full-time, ten-week clinical experience, supervised by a licensed physical therapist in an inpatient setting with emphasis on integumentary, cardiopulmonary and neuromuscular practice patterns. Designed to provide students with the opportunity to analyze and synthesize current knowledge and experience with clinical practice. In addition, experience with education, management, and research is provided, as available.

Instructor: Deborah George, PhD, MS, PT, DCE

Instructor Contact Information: 349 Trenton Ave., Findlay; george@findlay.edu 419-434-5531(office); 419-434-4336 (FAX)

Office Hours: Mondays and Thursdays 1:00 to 3:30; Also by appointment throughout the week

PT Program Mission

The mission of the physical therapy program at The University of Findlay is to empower students to help transform society by optimizing movement and function to improve the lives and well-being of those they serve.

Relationship to the Conceptual Framework: Clinical education is considered an integral component of the Weekend PTA to DPT Bridge program curriculum. The clinical affiliations are designed to provide the student with a supervised, concentrated course of study in which he/she is given opportunities to apply theory and practice learned skills in the clinic setting. Three full-time clinical education experiences (total of 30 weeks) are required at the end of the student's academic course work. Experiences with all practice patterns, all age groups, and in both outpatient and inpatient settings are obligatory. In addition, the student has the opportunity to continue with a general experience or to specialize in an area of their choice for the final clinical experience.

PT Program Curricular Goals

Course meets the following curricular objectives in whole or in part:

Following completion of the PT program curriculum, the graduate PT will be a generalist who will be able to:

1.0 Demonstrate an understanding of and ability to apply the knowledge, skills and values obtained in prerequisite, foundational science, and behavioral science course work in preparation for contemporary practice in physical therapy. **(7A, 7B, 7C)**

Course Objectives:

1. Applies current knowledge, theory, clinical judgment, skills, and the patient's values and perspective in patient management. **[CPI Skill #7]**
 - a. Selects interventions based on the best available evidence, clinical expertise, and patient preferences.
 - b. Assesses patient response to interventions using credible measures.
 - c. Integrates patient needs and values in making decisions in developing the plan of care.
 - d. Clinical decisions focus on the whole person rather than the disease.
 - e. Recognizes limits (learner and profession) of current knowledge, theory, and judgment in patient management.

2.0 Establish effective culturally competent **communication** with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers and policymakers, by demonstrating appropriate verbal, non-verbal and written communication. **(7D7, 7D8)**

Course Objectives:

2. Communicates in ways that are congruent with situational needs. **[CPI skill #4]**
 - a. Communicates, verbally and nonverbally, in a professional and timely manner.
 - b. Initiates communication in difficult situations.
 - c. Selects the most appropriate person(s) with whom to communicate.
 - d. Communicates respect for the roles and contributions of all participants in patient care.
 - e. Listens actively and attentively to understand what is being communicated by others.
 - f. Demonstrates professionally and technically correct written and verbal communication without jargon.
 - g. Communicates using nonverbal messages that are consistent with intended message.
 - h. Engages in ongoing dialogue with professional peers or team members.
 - i. Interprets and responds to the nonverbal communication of others.
 - j. Evaluates effectiveness of his/her communication and modifies communication accordingly.
 - k. Seeks and responds to feedback from multiple sources in providing patient care.
 - l. Adjust style of communication based on target audience.
 - m. Communicates with the patient using language the patient can understand (e.g., translator, sign language, level of education, cognitive impairment, etc.).
3. Produces quality documentation in a timely manner to support the delivery of physical therapy services. **[CPI skill #15]**
 - a. Selects relevant information to document the delivery of physical therapy patient care.
 - b. Documents all aspects of PT care, including screening, examination, evaluation, plan of care, intervention, response to intervention, discharge planning, family conferences, and communication with others involved in delivery of patient care.
 - c. Produces documentation (e.g., electronic, dictation, chart) that follows guidelines and format required by the practice setting.
 - d. Documents patient care consistent with guidelines & requirements of regulatory agencies & third-party payers.
 - e. Documents all necessary information in an organized manner that demonstrates sound clinical decision-making.
 - f. Produces documentation that is accurate, concise, timely and legible.
 - g. Utilizes terminology that is professionally and technically correct.
 - h. Documentation accurately describes care delivery that justifies physical therapy services.
 - i. Participates in quality improvement review of documentation (chart audit, peer review).

3.0 Incorporate an understanding of the implications of **individual and cultural differences** when engaged in all physical therapy roles. **(7D8)**

Course Objectives:

4. Adapts delivery of physical therapy services with consideration for patients' differences, values, preferences, and needs. **[CPI skill #5]**
 - a. Incorporates an understanding of the implications of individual and cultural differences and adapts behavior accordingly in all aspects of PT services.
 - b. Communicates with sensitivity by considering differences in race/ethnicity, religion, gender, age, national origin, sexual orientation, and disability or health status.
 - c. Provides care in a nonjudgmental manner when the patients' beliefs and values conflicts with the individual's belief system.
 - d. Discovers, respects, and highly regards individual differences, preferences, values, life issues, and emotional needs within and among cultures.
 - e. Values the socio-cultural, psychological, and economic influences on patients and clients and responds accordingly.
 - f. Is aware of and suspends own social and cultural biases.

4.0 Complete **screening** activities to determine the need for further examination or consultation by a physical therapist or referral to another health care professional. **(7D16)**

Course Objectives:

5. Determines with each patient encounter the patient's need for further examination or consultation by a physical therapist or referral to another health care professional. **[CPI skill #8]**
 - a. Utilizes test and measures sensitive to indications for physical therapy intervention.
 - b. Advises practitioner about indications for intervention.
 - a. Reviews medical history from patients and other sources (e.g., medical records, family, other health care staff).
 - c. Performs a system review and recognizes clusters (historical information, signs and symptoms) that would preclude interventions due to contraindications or medical emergencies.
 - d. Selects the appropriate screening tests and measurements.
 - e. Conducts tests and measurements appropriately.
 - f. Interprets tests and measurements accurately.
 - g. Analyzes and interprets the results and determines whether there is a need for further examination or referral to other services.
 - b. Chooses the appropriate service and refers the patient in a timely fashion, once referral or consultation is deemed necessary.
 - c. Conducts musculoskeletal, neuromuscular, cardiopulmonary, and integumentary systems screening at community sites.

5.0 **Examine** movement related impairments in body structure and function, activity limitations, and participation restrictions across the lifespan and continuum of care by:

5.1 Using health informatics, the interview process, and other sources to appropriately complete a patient history. **(7D17, 7D20)**

5.2 Completing a relevant review of the musculoskeletal, neuromuscular, cardiovascular, pulmonary and integumentary systems in terms of their relationship to movement and movement dysfunction. **(7D18)**

5.3 Demonstrating knowledge of the scientific basis and effectiveness of physical therapy that utilizes the best evidence for tests and measures in the evaluative processes. **(7D11, 7D19)**

5.4 Selecting, administering and integrating the best evidence to support tests and measures that are appropriate to the patient's demographics, diagnosis, health status and culture. **(7D11, 7D19)**

Course Objectives:

6. Performs a physical therapy patient examination using evidence-based tests and measures. **[CPI skill #9]**
 - a. Obtains a history from patients and other sources as part of the examination.
 - b. Utilizes information from history and other data (e.g., laboratory, diagnostic tests & pharmacological information) to formulate initial hypothesis and prioritize selection of test and measures.
 - c. Performs systems review.
 - d. Selects evidence-based tests and measures that are relevant to the history, chief complaint, and screening. Tests and measures (listed alphabetically) include, but are not limited to, the following: a) aerobic capacity, b) anthropometric characteristics, c) arousal, mentation, and cognition, d) assistive and adaptive devices, e) community and work (job, school, or play) reintegration, f) cranial nerve integrity, g) environmental, home, and work barriers, h) ergonomics and body mechanics, i) gait, assisted locomotion, and balance, j) integumentary integrity, k) joint integrity and mobility, l) motor function, m) muscle performance (including strength, power, and endurance), n) neuromotor development and sensory integration, o) orthotic, protective, and supportive devices, p) pain, q), posture, r) prosthetic requirements, s) range of motion, t) reflex integrity, u) self-care and home management (including activities of daily living and instrumental activities of daily living), v) sensory integration (including proprioception and kinesthesia), and w) ventilation, respiration, and circulation.
 - e. Conducts tests and measures accurately and proficiently.
 - f. Sequences tests and measures in a logical manner to optimize efficiency.
 - g. Adjusts tests and measures according to patient's response.
 - h. Performs regular reexaminations of patient status.
 - i. Performs an examination using evidence based test and measures.

6.0 Synthesize examination data to complete the physical therapy **evaluation** by:

6.1 Identifying body structure and function impairments, activity limitations and participation restrictions that can be minimized or alleviated through physical therapy using the ICF model. **(7D21, 7D22)**

6.2 Evaluate data from the examination to make clinical judgments. **(7D20)**

6.3 Specifying conditions beyond the scope of their abilities or the practice of physical therapy and referring to the appropriate professional. **(7D16)**

Course Objectives:

7. Evaluates data from the patient examination (history, system review, and tests & measures) to make clinical judgments. **[CPI skill #10]**
 - a. Synthesizes examination data and identifies pertinent health disorder, body structure and function, activity and participation restrictions based on environmental and personal contextual factors.
 - b. Makes clinical judgments based on data from examination (history, system review, tests and measures)
 - c. Reaches clinical decisions efficiently.
 - d. Cites the evidence to support a clinical decision.

7.0 Efficiently establish a physical therapy **diagnosis** by:

7.1 Utilizing examination data and evaluation results to establish a differential diagnosis for patients across the lifespan and continuum of care. **(7D22)**

7.2 Considering the policies and procedures of the practice setting. **(7D28)**

7.3 Effectively communicating diagnostic results and clinical impressions with all stakeholders as appropriate. **(7D7, 7D22)**

Course Objectives:

8. Determines a diagnosis that guides future patient management. **[CPI skill #11]**

a. Establishes a diagnosis for physical therapy intervention and list for differential diagnosis.

b. Determines a diagnosis that is congruent with health disorder or disease, body structure and function, activity restrictions, participation restrictions and contextual factors (environmental and personal).

8.0 Determine patient **prognoses** based on the results of the physical therapy examination, evaluation and diagnostic process. **(7D23)**

Course Objectives:

9. Determines a diagnosis and prognosis that guides future patient management. **[CPI skill #11]**

a. Integrates data and arrives at an accurate prognosis with regard to intensity and duration of interventions and discharge status.

b. Estimates the contribution of factors (e.g., preexisting health status, co-morbidities, race, ethnicity, gender, age, health behaviors) on the effectiveness of interventions.

c. Utilizes the research and literature to identify prognostic indicators (co-morbidities, race, ethnicity, gender, health behaviors, etc.) that help predict patient outcomes.

9.0 Develop and execute a safe and effective **plan of care** by:

9.1 Collaborating with clients, families, payers and other healthcare professionals to establish an appropriate and culturally competent plan of care, including a plan for discontinuation of care. **(7D23, 7D24, 7D26)**

9.2 Constructing physical therapy goals and functional outcomes within available resources (including applicable payment sources) and specify the time frame for achievement. **(7D23, 7D24)**

9.3 Complying with the administrative policies and procedures of the practice environment. **(7D28)**

9.4 Evaluating and modifying treatment plans and goals according to patient feedback and response and the analysis of outcome measures. **(7D24, 7D30, 7D31)**

9.5 Maintaining a fiduciary responsibility for all patients/clients. **(7D42)**

Course Objectives:

10. Establishes a physical therapy plan of care that is safe, effective, patient centered, and evidence-based. **[CPI skill #12]**

a. Establishes goals and desired functional outcomes that specify expected time durations.

b. Establishes a PT plan of care in collaboration with the patient family, caregiver, and others involved in the delivery of health care services.

c. Establishes a PT plan of care consistent with the examination and evaluation.

d. Selects interventions based on the best available evidence and patient preferences.

e. Follows established guidelines (e.g., best practice, clinical pathways, and protocol) when designing the plan of care.

f. Progresses and modifies plan of care and discharge planning based on patient responses.

g. Identifies the resources needed to achieve the goals included in the patient care.

- h. Implements, monitors, adjusts, and periodically re-evaluate a plan of care and discharge planning.
- i. Discusses the risks and benefits of the use of alternative interventions with the patient.
- j. Identifies patients who would benefit from further follow-up.
- k. Advocates for the patients' access to services.

10.0 Competently provide physical therapy **intervention** by:

10.1 Selecting and executing appropriate therapeutic procedures in order to achieve defined goals. **(7D27)**

10.2 Carrying out all physical therapy procedures safely. **(7D27)**

10.3 Incorporating effective teaching methods and strategies in all physical therapy roles. **(7D12)** 10.4

Completing accurate written documentation of the physical therapy examination, evaluation, diagnosis, prognosis, intervention and outcomes. **(7D32)**

10.5 Applying principles of risk management and taking appropriate action in an emergency in any practice setting. **(7D33, 7D37)**

Course Objectives:

- 11. Practices in a safe manner that minimizes risk to patient, self, and others. **[CPI skill #1]**
 - a. Establishes & maintains safe working environment.
 - b. Recognizes physiological and psychological changes in patients and adjusts interventions, accordingly.
 - c. Demonstrates awareness of contraindications and precautions of patient intervention.
 - d. Ensures the safety of self, patient and others throughout the clinical interaction (e.g., universal precautions, responding and reporting emergency situations etc.)
 - e. Requests assistance when necessary.
 - f. Uses acceptable techniques for safe handling of patients (e.g., body mechanics, guarding, level of assistance etc.).
 - g. Demonstrates knowledge of facility safety policies and procedures.

- 12. Performs physical therapy interventions in a competent manner. **[CPI skill #13]**
 - a. Performs interventions safely, effectively, efficiently, fluidly, and in a coordinated and technically competent manner. Interventions (listed alphabetically) include, but not limited to, the following: a) airway clearance techniques, b) debridement and wound care, c) electrotherapeutic modalities, d) functional training in community and work (job, school, or play) reintegration (including instrumental activities of daily living, work hardening, and work conditioning), e) functional training in self-care and home management (including activities of daily living and instrumental activities of daily living), f) manual therapy techniques: spinal/peripheral joints (thrust/non-thrust), g) patient-related instruction, h) physical agents and mechanical modalities, i) prescription, application, and as appropriate fabrication of adaptive, assistive, orthotic, protective, and supportive devices and equipment, and j) therapeutic exercise (including aerobic conditioning).
 - b. Performs interventions consistent with the plan of care.
 - c. Utilizes alternative strategies to accomplish functional goals.
 - d. Follows established guidelines when implementing an existing plan of care.
 - e. Provides rationale for interventions selected for patients presenting with various diagnoses.
 - f. Adjusts intervention strategies according to variables related to age, gender, co-morbidities, pharmacological interventions, etc.
 - g. Assesses patient response to interventions and adjusts accordingly.

11.0 Appropriately utilize **outcome assessment** data by:

11.1 Selecting measures that are reliable and valid and take into account the practice setting, individual differences and societal influences. **(7D19)**

11.2 Collecting accurate information to allow for analysis of individual patient/client outcomes. **(7D19)**

11.3 Analyzing and applying results to allow for modification of the plan of care. **(7D31)**

Course Objectives:

13. Collects and analyzes data from selected outcome measures in a manner that supports accurate analysis of individual patient and group outcomes. **[CPI skill #16]**

- a. Applies, interprets, & reports results of standardized assessments throughout a patient's episode of care.
- b. Assesses and responds to patient and family satisfaction with delivery of physical therapy care.
- c. Seeks information regarding quality of care rendered by self and others under clinical supervision.
- d. Evaluates and uses published studies related to outcomes effectiveness.
- e. Selects, administers, and evaluates valid and reliable outcome measures for patient groups.
- f. Assesses the patient's response to intervention in practical terms.
- g. Evaluates whether functional goals from the plan of care have been met.
- h. Participates in quality/performance improvement programs (program evaluation, utilization of services, patient satisfaction).

12.0 Identify, assess and promote the health needs of individuals, groups and communities, including screening, prevention and wellness programs that are culturally appropriate within the practice of physical therapy. **(7D34)**

Course Objectives:

14. Performs physical therapy interventions in a competent manner for the promotion of health wellness and fitness. **[CPI skill #13]**

- a. Discusses strategies for caregivers to minimize risk of injury and to enhance function.
- b. Considers prevention, health, wellness and fitness in developing a plan of care for patients with musculoskeletal, neuromuscular, cardiopulmonary, and integumentary system problems.
- c. Incorporates the concept of self-efficacy in wellness and health promotion.

13.0 Provide and manage care in a variety of **care delivery systems** by:

13.1 Providing physical therapy through direct access or referral based on patient/client goals, expected functional outcomes, and knowledge of one's own and other's capabilities. **(7D34, 7D35)**

13.2 Managing human and material resources and services to provide high-quality, efficient physical therapy services based on the patient/client's goals, expected outcomes, and plan of care. **(7D28, 7D29, 7D30, 7D31, 7D36, 7D42)**

13.3 Interacting with patients, clients, family members, other healthcare providers and community-based organizations for the purpose of coordinating activities to facilitate culturally competent, efficient and effective patient or client care. **(7D7, 7D34, 7D39)**

13.4 Participate in patient centered interprofessional and collaborative practice with active participation from the patient in aspects of his/her care and treatment. **(7D39)**

Course Objectives:

15. Directs and supervises personnel to meet patient's goals and expected outcomes according to legal standards and ethical guidelines. **[CPI skill #18]**
 - a. Determines those physical therapy services that can be directed to other support personnel according to jurisdictional law, practice guidelines, policies, codes of ethics, and facility policies.
 - b. Applies time-management principles to supervision and patient care.
 - c. Informs the patient of the rationale for and decision to direct aspects of physical therapy services to support personnel (e.g., secretary, PT Aides, PT Assistants).
 - d. Determines the amount of instruction necessary for personnel to perform directed tasks.
 - e. Provides instruction to personnel in the performance of directed tasks.
 - f. Supervises those physical therapy services directed to physical therapist assistants and other support personnel according to jurisdictional law, practice guidelines, policies, codes of ethics, and facility policies.
 - g. Monitors the outcomes of patients receiving physical therapy services delivered by other support personnel.
 - h. Demonstrates effective interpersonal skills including regular feedback in supervising directed support personnel.
 - i. Demonstrates respect for the contributions of other support personnel.
 - j. Directs documentation to physical therapist assistants that is based on the plan of care that is within the physical therapist assistant's ability and consistent with jurisdictional law, practice guidelines, policies, codes of ethics, and facility policies.
 - k. Reviews, in conjunction with the clinical instructor, physical therapist assistant documentation for clarity and accuracy.

- 14.0 Demonstrate appropriate **professional behavior** by:
 - 14.1 Demonstrating behavior congruent with the APTA *Core Values* and *Code of Ethics* during interactions with others. **(7D4, 7D5, 7D6)**
 - 14.2 Adhering to the standards of practice, state and federal laws. **(7D1)**
 - 14.3 Reporting to appropriate authorities suspected cases of fraud and abuse. **(7D2, 7D3)**
 - 14.4 Reflecting upon and appropriately addressing self and peer assessment outcomes. **(7D5, 7D38)**
 - 14.5 Participating in both integrated and full-time terminal clinical education activities. **(6L)**
 - 14.6 Formulating and implementing a plan for personal and professional career development. **(7D15)**
 - 14.7 Becoming involved and demonstrating leadership in professional organizations and activities through membership, service and advocacy for the profession and healthcare needs of society. **(7D13, 7D14)**
 - 14.8 Demonstrating professional judgment and consideration of patient/client values in the application of current theory and knowledge to patient/client management. **(7D10, 7D11)**
 - 14.9 Utilizing information technology to access appropriate sources of information in support of clinical decisions. **(7D9)**
 - 14.10 Critically evaluating current literature and information sources related to contemporary physical therapy practice, research, administration, consultation, and education. **(7D9, 7D11 7D40)**
 - 14.11 Participating in scholarly activities that contribute to the body of physical therapy knowledge. **(7D9, 7D15)**

Course Objectives:

16. Demonstrates professional behavior in all situations. **[CPI skill #2]**
 - a. Demonstrates initiative (e.g., Arrives well prepared, offers assistance, and seeks learning opportunities).

- b. Is punctual and dependable.
- c. Wears attire consistent with expectations of the practice setting.
- d. Demonstrates integrity in all interactions.
- e. Exhibits caring, compassion, and empathy in providing services to patients.
- f. Maintains productive working relationships with patients, families, CI and others.
- g. Demonstrates behaviors that contribute to a positive work environment.
- h. Accepts feedback without defensiveness.
- i. Manages conflict in constructive ways.
- j. Maintains patient privacy and modesty.
- k. Values the dignity of patients as individuals.
- l. Seeks feedback from CI related to clinical performance.
- m. Provides effective feedback to CI related to clinical/teaching mentoring.

17. Practices in a manner consistent with established legal and professional standards & ethical guidelines. **[CPI skill #3]**

- a. Places patient's needs above self-interests
- b. Identifies, acknowledges, and accepts responsibility for actions and reports errors.
- c. Takes steps to remedy errors in a timely manner.
- d. Abides by policies and procedures of the practice setting (e.g., OSHA, HIPAA etc.).
- e. Maintains patient confidentiality.
- f. Adheres to legal practice standards including all federal state/province, and institutional regulations related to patient care and fiscal management.
- g. Identifies ethical or legal concerns and initiates action to address the concerns.
- i. Displays generosity as evidenced in the use of time and effort to meet patient needs.
- j. Recognize the need for PT services to underserved and underrepresented populations.
- k. Strive to provide patient/client services that go beyond expected standards of practice.

15.0 Function in the role of an **administrator** by:

15.1 Appropriately delegating to and supervising physical-therapy-related services to support personnel, physical therapist assistants and caregivers. **(7D25, 7D29)**

15.2 Demonstrating understanding of the history, current status and future projections for health care delivery in the United States and assessing health care policies and their potential implications in the healthcare environment. **(7D41)**

15.3 Participating in practice management functions appropriate for a given practice setting, including marketing, public relations, regulatory and legal requirements, risk management, staffing and continuous quality improvement. **(7D36, 7D43)**

15.4 Participating in the financial management of practice settings including billing and payment for services. **(7D42)**

15.5 Establishing a business plan on a programmatic level within a practice. **(7D43)**

15.6 Participating in activities related to marketing and public relations. **(7D43)**

Course Objectives:

18. Participates in the financial management (budgeting, billing and reimbursement, time, space, equipment, marketing, public relations) of the physical therapy service consistent with regulatory, legal, and facility guidelines. **[CPI skill #17]**
- a. Schedules patients, equipment, and space.
 - b. Coordinates physical therapy with other services to facilitate efficient and effective patient care.
 - c. Sets priorities for the use of resources to maximize patient and facility outcomes.
 - d. Uses time effectively.

- e. Adheres to or accommodates unexpected changes in the patient's schedule and facility's requirements.
- f. Provides recommendations for equipment and supply needs.
- g. Submits billing charges on time.
- h. Adheres to reimbursement guidelines established by regulatory agencies, payers, & facility.
- i. Requests and obtains authorization for clinically necessary reimbursable visits.
- j. Utilizes accurate documentation, coding, and billing to support request for reimbursement.
- k. Negotiates with reimbursement entities for changes in individual patient services.
- l. Utilizes the facility's information technology effectively.
- m. Functions within the organizational structure of the practice setting.
- n. Implements risk-management strategies (ie, prevention of injury, infection control, etc).
- o. Markets services to customers (eg, physicians, corporate clients*, general public).
- p. Promotes the profession of physical therapy.
- q. Participates in special events organized in the practice setting related to patients and care delivery.
- r. Develops and implements quality improvement plans (productivity, length of stay, referral patterns, and reimbursement trends).

16.0 Function as an effective **educator** by applying teaching and learning theories in designing, implementing and evaluating learning experiences for individuals, organizations and communities
(7D12)

Course Objectives:

- 19. Educates others (patients, family, caregivers, staff, students, other health care providers, business and industry reps., school systems) using relevant and effective teaching methods. **[CPI skill #14]**
 - a. Identifies and establishes priorities for educational needs in collaboration with the learner.
 - b. Identifies patient learning style (e.g., demonstration, verbal, written).
 - c. Identifies barriers to learning (e.g., literacy, language, cognition).
 - d. Modifies interaction based on patient learning style.
 - e. Instructs patient, family members and other caregivers regarding the patient's condition, intervention and transition to his or her role at home, work, school or community.
 - f. Ensures understanding and effectiveness of recommended ongoing program.
 - g. Tailors interventions with consideration for patient family situation and resources.
 - h. Provides patients with the necessary tools and education to manage their problem.
 - i. Provides education and promotion of health, wellness, and fitness.

17.0 Demonstrate the ability to function in the role of **consultant** by providing consultation to individuals, case managers, businesses, schools, government agencies or other organizations. **(7D13)**

Course Objectives:

- 20. Provides consultation to individuals, businesses, schools, government agencies, or other organizations. **[CPI skill #14]**
 - a. Determines need for consultative services.
 - b. Applies physical therapy knowledge and skills to identify problems and recommend solutions in relevant settings (e.g., ergonomic evaluations, school system assessments, corporate environmental assessments).

18.0 Function as a **self-directed lifelong learner** by:

18.1 Completing projects requiring selection of a topic and independent integration of information from a number of sources. **(7D9)**

18.2 Understanding the dynamic nature of the knowledge base of physical therapy and the need to stay current through practice, professional literature, and education. **(7D15)**

18.3 Seeking out new information regarding the practice of physical therapy. **(7D9)**

Course Objectives:

21. Participates in self-assessment to improve clinical and professional performance. **[CPI skill #6]**
- a. Identifies strengths and limitations in clinical performance.
 - b. Seeks guidance as necessary to address limitations.
 - c. Uses self-evaluation, ongoing feedback from others, inquiry, and reflection to conduct regular ongoing self-assessment to improve clinical practice & professional development.
 - d. Acknowledges and accepts responsibility and consequences of his or her actions.
 - e. Establishes realistic short and long-term goals in a plan for professional development.
 - f. Seeks out additional learning experiences to enhance clinical and professional performance.
 - g. Discusses progress of clinical and professional growth.
 - h. Accepts responsibility for continuous professional learning.
 - i. Discusses professional issues related to physical therapy practice.
 - j. Participates in professional activities beyond the practice environment.
 - k. Provides to and receives feedback from peers regarding performance, behaviors, and goals.
 - l. Provides current knowledge and theory (in-service, case presentation, journal club, projects, systematic data collection, etc.) to achieve optimal patient care.

19.0 Use **critical thinking skills** to:

19.1 Assess and critically analyze scientific literature and apply best evidence for practice with clinical judgment to determine the best care for a patient. **(7D9, 7D10, 7D11)**

19.2 Explain one's reasoning and conclusions. **(7D10, 7D11)**

19.3 Monitor, reflect on and question one's own thinking in order to minimize errors and enhance patient/client outcomes. **(7D38)**

Course Objectives:

22. Utilizes critical thinking skills in patient management. **[CPI Skill #7]**
- a. Presents a logical rationale (cogent and concise arguments) for clinical decisions.
 - b. Makes clinical decisions within the context of ethical practice and informed consent.
 - c. Utilizes information from multiple data sources to make clinical decisions (e.g., patient and caregivers, health care professionals, hooked on evidence, databases, and medical records).
 - d. Seeks disconfirming evidence in the process of making clinical decisions.
 - e. Recognizes when plan of care and interventions are ineffective, identifies areas needing modification, and implements changes accordingly.
 - f. Critically evaluates published research articles relevant to physical therapy and applies to clinical practice.
 - g. Demonstrates an ability to make clinical decisions in ambiguous situations or where values may be in conflict.
 - l. Recognizes limits (learner and profession) of current knowledge, theory, and judgment in patient management.

Required Textbooks and other materials:

Required:

American Physical Therapy Association. *Physical Therapist Clinical Performance Instrument*. 2nd ed. Alexandria, VA: American Physical Therapy Association; June 2006.
PT Faculty. *Student Handbook*. The University of Findlay; 2021.

Recommended:

Curricular Books

American College of Sports Medicine. *ACSM's Guidelines for Exercise Testing and Prescription*. 10th ed. Philadelphia, PA: Wolters Kluwers; 2018. ISBN: 978-1496339072.
American Physical Therapy Association. *The Guide to Physical Therapist Practice*. 3rd ed. Alexandria, VA: American Physical Therapy Association; 2015. ISBN: 978-1-931369-85-5. Available online at: <http://guidetoptpractice.apta.org/>
American Medical Association. *AMA Manual of Style*. 10th ed. Oxford, NY: Oxford University Press; 2007. ISBN: 978-0195176339.
Tecklin JS. *Pediatric Physical Therapy*. 5th ed. LWW; 2014. ISBN: 978-1451173451

Knowledge Base:

Anderson D, Irwin K. Self-assessment of professionalism in PT education. *Work*. 2013;44:275-281.

APTA. *Clinical Education: An Anthology I*; 1992.

APTA. *Clinical Education: An Anthology II*; 1996.

APTA. *Clinical Education: An Anthology III*; 2000.

Buccieri KM, Pivko SE, Olzenak DL. How does a physical therapist acquire the skills of an expert clinical instructor. *J Phys Ther Educ*. 2011; 25:17-25.

Buccieri KM, Schultze K, Dungey J, Kolodziej T, et al. Self-reported characteristics of physical therapy clinical instructors: a comparison to the American Physical Therapy Association's Guidelines and Self-Assessments for Clinical Education. *J Phys Ther Educ*. 2006;20:47-55.

Deusinger S. Establishing clinical education programs: a practical guide. *Journal of Physical Therapy Education*. 1990;4(2):58-61.

Deusinger S. Evaluating effectiveness of clinical education. *Journal of Physical Therapy Education*. 1990;4(2): 66-70.

Emery MJ. Effectiveness of the clinical instructor: student's perspective. *Physical Therapy*. 1984;64:1079-1083.

Ettinger ER. Role modeling for clinical educators. *Journal of Optometric Education*. 1991;16(2): 60-62.

George D. Bridge program: An alternative education. *Journal of Continuing Higher Education*. 2012; 60 (2): 66-79.

Giberson TR, Black B, Pinkerton E. The impact of student-clinical instructor fit and student-organization fit on physical therapist clinical education experience outcomes. *J Phys Ther Educ*. 2008;22:59-64.

Graham CL. Conceptual learning processes in physical therapy students. *Phys Ther*, 1996;76: 856-865.

- Gwyer J. Rewards of teaching physical therapy students: clinical instructor's perspective. *Journal of Physical Therapy Education*. 1993;7(2):63-66.
- Hall M, McFarlane L, Mulholland S. Positive clinical placements: perspectives of students and clinical educators in rehabilitation medicine. *Int J Ther Rehabil*. 2012;19:549-556.
- Haskins AR, Rose-St Prix C, Elbaum L. (1997). Covert bias in evaluation of physical therapist students' clinical performance. *Phys Ther*. 1997;77:155-163.
- Hayes KW, Huber G, Rogers J, Sanders B. Behaviors that cause clinical instructors to question the clinical competence of physical therapist students. *Phys Ther*. 1999;79:653-667.
- Healey WE. (2008). Physical therapist student approaches to learning during clinical education experiences: a qualitative study. *J Phys Ther Educ*. 2008;22:49-58.
- Higgs J. Managing clinical education: the programme. *Physiotherapy*. 1993;39(4):239-246.
- Housel N, Gandy J, Edmondson D. Clinical instructor credentialing and student assessment of clinical instructor effectiveness. *J Phys Ther Educ*. 2010;24:26-34.
- Jarski RW, Kulig K, Olson RE. Allied health perceptions of effective clinical instruction. *Journal of Allied Health*. 1989;19:469-478.
- Jette DU, Bertoni A, Coots R, Johnson H, et al. Clinical instructors' perceptions of behaviors that comprise entry-level clinical performance in physical therapist students: A qualitative study. *Phys Ther*. 2007; 87:833-843.
- Jette DU, Portney LG Construct validation of a model for professional behavior in physical therapist student. *Phys Ther*. 2003;83:432-443.
- Ladyshefsky RK. Enhancing service productivity in acute care inpatient settings using a collaborative clinical education model. *Phys Ther*. 1995;75:503-510.
- Ladyshefsky RK, Barrie SC, Drake VM. A comparison of productivity and learning outcome in individual and cooperative physical therapy clinical education models. *Phys Ther*. 1998;78:1288-1298.
- Laitinen-Vaananen S, Taltitie U. (2007). Clinical supervision as an interaction between the clinical educator and the student. *Physiother Theory Pract*. 2007;23: 95-103.
- McCallum CA, Mosher PD, Jacobson PJ, Gallivan SP, Giuffre SM. Quality in physical therapist clinical education: A systematic review. *Phys Ther*. 2013;93:1298-1311.
- Meltzer M, Palau SM, *Acquiring Critical Thinking Skills*. Philadelphia, PA:WB Saunders; 1996.
- Moore A, Hilton R, Morris J, Caladine L, Bristow H. *The Clinical Educator - Role Development*. New York, NY: Curchill Livingston; 1997.
- Morren KK, Gordon SP, Sawyer BA. The relationship between clinical instructor characteristics and student perceptions of clinical instructor effectiveness. *J Phys Ther Educ*. 2008;22: 52-63.

O'Connor A, Cahill M, McKay EA. Revisiting 1:1 and 2:1 clinical placement models: Student and clinical educator perspectives. *Aust Occup Ther J.* 2012;59:276-283.

Page GG, MacKinnon JR. (1987). Cost of clinical instructors' time in clinical education--physical therapy students. *Phys Ther.* 1987;67:238-243.

Plack MM. (2008). The learning triad: potential barriers and supports to learning in the physical therapy clinical environment. *J Phys Ther Educ.* 2008;22:7-18.

Rindflesch A, Hoversten K, Patterson B, Thomas L, et al. Students' description of factors contributing to a meaningful clinical experience in entry-level physical therapist professional education. *Work.* 2013; 44:265-274.

Roach KE, Frost JS, Francis NJ, Giles S, et al. Validation of the revised physical therapist Clinical Performance Instrument (PT CPI): Version 2006. *Phys Ther.* 2012;92:416-428.

Roach K, Gandy J, Deusinger SS, Clark S, Gramet P et al. The Development and Testing of APTA Clinical Performance Instruments. *Phys Ther.* 2008;82:329-353.

Stith JS, Butterfield WH, Strube MJ, Deusinger SS, Gillespie DF. (1998). Personal, interpersonal, and organizational influences on student satisfaction with clinical education. *Phys Ther.* 1998;78: 635-645.

Strohschein J, Hagler P, May L. Assessing the need for change in clinical education practices. *Phys Ther.* 2002; 82: 160-172.

Triggs M, Shepard KF. Physical therapy clinical education in a 2:1 student-instructor education model. *Phys Ther.* 1996;76:968-981.

Vendrely A, Carter R. The influence of training on the rating of physical therapist student performance in the clinical setting. *J Allied Health.* 2004;33:62-69.

Wolff-Burke M. Clinical instructors' descriptions of physical therapist student professional behaviors. *J Phys Ther Educ.* 2005;19:67-76.

Instructional Strategies:

Case Analysis		Library and Internet Research	
Debate		Practice/drill	
Discovery/Independent Research	X	Problem solving	X
Discussion/Questioning/Interviewing	X	Reading assignments	
Experiential Learning		Role playing/simulation games	
Field Experience	X	Service Learning	
Group Presentation		Video/Audio Review and Critique	
Laboratory Experiences		Other	
Lecture			

Methods of Assessment:

Method of Evaluation	Course Objective #	Points or Percentage
Abstracts		
Attendance		
Capstone Project		
Case Study		
Exams		
Group Projects		
Homework Assignments		
Internet Research		
Journaling		
Lab Performance		
Oral/written review of literature		
Participation		
Peer Evaluation		
Portfolio		
Portfolio Lab Performance		
Presentations		
Professional Evaluation		
Quizzes		
Research project		
Other : Clinical Performance Instrument (CPI)		
Method of Evaluation	Course Objective #	Points or Percentage
CPI skill #1	#11	N/A – Satisfactory grade
CPI skill #2	#16	N/A – Satisfactory grade
CPI skill #3	#17	N/A – Satisfactory grade
CPI skill #4	#2	N/A – Satisfactory grade
CPI skill #5	#4	N/A – Satisfactory grade
CPI skill #6	#21	N/A – Satisfactory grade
CPI skill #7	#1, #22	N/A – Satisfactory grade
CPI skill #8	#5	N/A – Satisfactory grade
CPI skill #9	#6	N/A – Satisfactory grade
CPI skill #10	#7	N/A – Satisfactory grade
CPI skill #11	#8, #9	N/A – Satisfactory grade

CPI skill #12	#10	N/A – Satisfactory grade
CPI skill #13	#12, #14	N/A – Satisfactory grade
CPI skill #14	#19, #20	N/A – Satisfactory grade
CPI skill #15	#3	N/A – Satisfactory grade
CPI skill #16	#13	N/A – Satisfactory grade
CPI skill #17	#18	N/A – Satisfactory grade
CPI skill #18	#15	N/A – Satisfactory grade

Description of Assignments:

To obtain a satisfactory grade the student must have completed the following assignments/activity:

1. Satisfactory attendance record – 40 hrs. per week MINIMUM & follows CI SCHEDULE (See the policy on attendance in *Student Handbook*)
2. Completion of Letter of Intent and minimum data set of CSIF
3. Completion of *Clinical Education Experience Evaluation Report*, online.
4. Completion of Clinical Education Data Collection Forms (and cover sheet) on a daily basis.
5. Completion of Weekly Reflection forms with CI.
6. Completion of two inservices.
7. Satisfactory completion of clinical skills from *Physical Therapist Clinical Performance Instrument*.
8. There must be NO evidence of significant concerns and performance that does not show forward movement. In addition, the student needs to show performance that is at the following levels:
 - a. FOR Clinical Education Experience ONE: A MINIMUM of Intermediate to Advanced Intermediate or Above Performance for ALL Skills
 - b. ALL students must show entry-level performance in ALL skills by the end of the clinical education series.
9. All practice patterns concerning clients across the lifespan also must be addressed. If there is no opportunity or minimal opportunity to work on a certain skill, practice pattern, or age group, then a mini-clinical or an extension of a clinical will need to occur.

Grading: Grading is satisfactory/unsatisfactory. Failure to complete any of the requirements will result in an unsatisfactory grade. Unsatisfactory grade in two clinical education experiences will result in dismissal from the program. However, the DCE and the Director have the right to review the requirements and make concessions on an individual basis.

Grading Scale/Distribution:

Grade	Points	Grading Scale
A	4.00	93-100
A-	3.67	90-92
B+	3.33	87-89
B	3.00	83-86
B-	2.67	80-82
C+	2.33	77-79
C	2.00	73-76
C-	1.67	70-72
D+	1.33	67-69
D	1.00	63-66
D-	0.67	62-60
F	0.00	below 60
U	0.00	

University Honor Code:

Each and every student of the University will adhere to the following Honor Code:

"I will not knowingly engage in any dishonorable behavior, cheat, steal, lie, or commit any act of plagiarism during any academic work, course, or endeavor. If I observe an act which I believe violates the University's Honor Code, I may, at my discretion, report it to the appropriate personnel."

Student Acknowledgement of University Honor Code:

"I acknowledge that I have fully complied or will comply with all aspects of the University's Honor Code in submitting this work."

Student Rights and Responsibilities Statement, Article VIII-Academic Integrity:

<http://catalog.findlay.edu/en/current/Undergraduate-Catalog/Student-Rights-and-Responsibilities-Statement/VIII-Academic-Integrity>

University Diversity Statement:

As part of our commitment to achieve excellence, the University of Findlay values and actively promotes a welcoming and supportive environment that honors the many aspects of diversity. We aspire to foster acceptance of, respect for, and appreciation of all persons in our campus community. We celebrate our commonalities and unique differences, and we acknowledge that diversity broadens learning, stimulates creativity, promotes the exchange of ideas, and prepares our students for meaningful lives and productive careers.

Course Policies and Practices: (Please refer to the DPT Student Handbook for a complete list of policies)

Attendance

Faculty devote much time and energy to preparing and teaching their courses, designing appropriate assignments and examinations, and evaluating students' progress. Excessive absence in a course can seriously threaten a student's academic progress and may result in suspension from the program course. More importantly, however, every absence represents a risk to the student's investment, both financial and intellectual, in a course. Faculty are under no obligation to offer extraordinary assistance to students who are persistently absent.

Email Etiquette

It is expected that all email correspondences to the instructor will be conducted in a professional manner. When utilizing email for this class, students should: (1) include the course name and number in the email subject heading, (2) address the recipient in an appropriate manner, (3) utilize proper spelling, grammar, and punctuation, (4) close with your full name, and (5) name file attachments by including the course name and number, student last name, and assignment/document title.

Minimum Competency:

For the purposes of this class on all exams, quizzes, papers, and projects, etc. **a grade of C must be earned to display competency.** If a student receives below a C, remediation will be required per the discretion of the instructor until competency is reached but the original grade will be the one used for determining the student's grade for the course. For clinical science courses with a laboratory component, the Clinical Science Course Practical Examinations and Safety Errors policy will also be enforced to ensure minimum competency.

Clinical Science Course Practical Examinations and Safety Errors:

Practical examinations are important means of assessing clinical skills. While it is accepted that a student may occasionally have difficulty on a practical examination, it is important that the student be competent in clinical skills. Students must successfully pass the practical examination in accordance with the minimal passing score of 80%.

Procedure:

- Any student that commits a safety error or scores below 80%, will fail that practical examination. The student may repeat the practical if it is the first or second program practical failed. .
- The student will arrange with the instructor within one week, a plan of remediation and a time to retake the practical.
- The maximum grade earned for a retaken practical examination will be 80%.
 - If the student passes the practical retake, they may proceed in the course, however, the student will have the lab practical failure on record.
 - If during the practical retake a student commits a safety error or fails to obtain an 80% on the retake, they will receive a failing grade for the course, and the policy regarding 'Failure to Meet Minimum Academic Standards' will be followed.
- Faculty teaching clinical courses will monitor the performance of students on practical examinations. If a student fails the exam, the Associate Chair will be notified, so that the number of failed practicals can be tracked throughout the curriculum.
- If a student fails a third practical throughout the curriculum, the student will be dismissed from the

Videotaping

Video recording of classroom or laboratory demonstrations or activities is strictly prohibited. Under certain circumstances and with the expressed written or verbal consent of the course instructor for personal study and review, approval may be granted. Approved video recordings of classroom or laboratory activities shall not be disseminated to in any format to anyone other than the individual who took the video, unless given written or verbal consent of the course instructor.

Late Assignments:

Any student whose assignment is not received by the course instructor prior to the due date and time will have a **minimum 5% point reduction for EACH DAY LATE.**

Special Services: If you are a student with a disability, it is your responsibility to inform your instructor and register with the Office of Accommodation and Inclusion (oai@findlay.edu) at least one week prior to a needed service so reasonable accommodations can be made.

Course and Instructor Evaluation: Each student is expected to complete the course and instructor evaluation which is sent electronically to the student by the Office of the Registrar. The electronic notification comes in the form of an e-mail from the UF Registrar's Office with the following subject line: Online survey for the designated course (e.g., BIOL 102).

Last Date of Attendance Policy: A student's last date of attendance is the date he/she was last present in class. If the student attends all classes, the official last date of the class, as determined by the institution, will be used for reporting purposes.

Tentative Course Outline:

Week One

- Completion of the letter of intent & FAX
- Email Experiential Educator (EE): CI email address, location, & full name

Week Four

- Completion of online self-assessment of CPI midterm & notify CI of its completion

Midterm, Week Five

- Completion of online CPI by the CI
- Call DCE for midterm contact
- Make sure the CPI is signed off on
- Completion of the CSIF minimum data & notify EE

Week Nine

- Completion of online self-assessment of CPI final & notify CI of its completion

Final, Week Ten

- Completion of online CPI by the CI
- Completion of online CEEER
- Make sure the CPI is signed off on by all parties
- Email DCE as ONE pdf document:
- Daily CEF data sheets & cover
- Weekly reflections;
- Inservice proof (needed for 2 clinicals)
- Signature page of the CEEER
- Completion of Certificate of supervision for the CI & turn in with TY note to the CI

Course Content is focused on the following CPI skills:

1. Safety
2. Professional Behavior
3. Accountability
4. Communication
5. Cultural Competence
6. Professional Development
7. Clinical Reasoning
8. Screening
9. Examination
10. Evaluation
11. Diagnosis/Prognosis
12. Plan of Care
13. Procedural Interventions
14. Educational Interventions
15. Documentation
16. Outcomes Assessment
17. Financial Resources
18. Direction & Supervision of Personnel

Note: This syllabus is subject to change at the discretion of the instructor.

Syllabus Template Approved by Faculty Senate 26 March 2018
Modified 12 June 2018