Course Syllabus PHTH 7840
Final Full-Time Clinical: Experience II

Credit Hours: 6

Course Meeting Days, Time & Location: All course contact time takes place at the student’s assigned clinical site. Students are required to match the schedule of their clinical instructor so hours per day/week may vary according to site and instructor. Time Frame: 11 weeks full-time, **August 12 – October 25, 2019**, for a minimum of 55 days on site and 440 clinical hours; adjustable time frames are at the discretion of the Clinical Instructor in consultation with the Director of Clinical Education.

Course Coordinator and Instructors/Contact Information:
- Reva Rauk, PT, PhD, MMSc, NCS, Director of Clinical Education (DCE) & Assistant Professor (Clinical)
  - Email: reva.rauk@hsc.utah.edu; ☎️ CELL: 435.901.4803; OFFICE PHONE: 801.581.8665
  - Office Hours: TBA or by appointment
  - Office Hours Location: Rm 358, HPEB or on location at clinical site as requested
- Brad Jensen, PT, DPT, Adjunct Instructor
  - Email: brad.jensen@utah.edu; ☎️ CELL: 801-557-2966
  - Office Hours: TBA or by appointment
  - Office Hours Location: Rm 386, HPEB or on location at clinical site as requested
- Assigned Clinical Instructor (CI)
- Center Coordinator of Clinical Education (CCCE)

Prerequisite(s): Successful completion of ALL didactic coursework (Year 1 & Year 2) in the Doctor of Physical Therapy (DPT) program, including: Part-Time Clinical Experience I - PHTH 6800 and Full-Time Clinical Experience I – PHTH 7810; Intermediate Level Professional Behaviors, progressing towards Entry-Level, and good standing in the Department of Physical Therapy and Athletic Training.

*All students are to provide a copy of their Exxat Student Profile Information AND Clinical Questionnaire to the coordinator and on-site clinical instructor prior to the start of the experience. These documents outline the student’s previous experience, specific experience goals, perceived strengths, areas for improvement, feedback preferences, etc. See the Department website for specific curriculum and course information: [http://www.health.utah.edu/physical-therapy/degrees/doctor-physical-therapy.php](http://www.health.utah.edu/physical-therapy/degrees/doctor-physical-therapy.php)*

Required Text:

Recommended Readings:
- *Educating the Reflective Practitioner*, Schon, Donald A., Part 1, pp. 3-40 (on Canvas)

Course Description: One, full-time clinical experience, eleven (11) weeks in length, taking place after all didactic coursework is complete. Students practice patient management skills in the clinical environment under the direct supervision of an experienced physical therapist. Students perform patient examination/measure techniques, evaluate and interpret examination results, determine a physical therapy diagnosis and prognosis, design and implement a thorough plan of care, and evaluate patient outcomes. The student will also practice and progressively develop a variety of skills critical for appropriate development of professionalism. Students should refer to the course CANVAS site for clinical education updates and specific course assignments.

Student Learning Outcomes: Upon completion of this course, the student, under the supervision of a licensed physical therapist, will:
1. Demonstrate performance criteria listed in #5 below with 0% CI guidance/supervision (independent) to manage patients with simple conditions and 0%-25% CI guidance/supervision with complex conditions.
2. Demonstrate performance criteria listed in #5 below exhibiting proficiency with simple tasks and occasional cuing needed in complex examinations, interventions and clinical reasoning.
3. Demonstrate consistency with simple tasks; consistency is developing with complex or skilled tasks.
4. Demonstrate the capability of 75%-100% of a full time physical therapist’s caseload in a cost effective manner, with respect to the performance criteria listed in #5 below.

5. Perform the following performance criteria within the context of supervision/guidance, quality of care, complexity of patient/environment, consistency of performance, and efficiency as referenced in outcomes 1-4.
   a. Practice in a safe manner that minimizes the risk to patient, self and others
   b. Demonstrate professional behavior in all situations
   c. Practice in a manner consistent with established legal and professional standards and ethical guidelines
   d. Communicate in ways that are congruent with situational needs
   e. Adapts delivery of physical therapy services with consideration for patients’ differences, values, preferences, and needs
   f. Participate in self-assessment to improve clinical and professional performance
   g. Applies current knowledge, theory, clinical judgment, and the patient’s values and perspective in patient management
   h. Determine with each patient encounter the patient’s need for further examination or consultation by a physical therapy or referral to another health care professional
   i. Perform a physical therapy patient examination using evidence-based tests and measures
   j. Evaluate data from the patient examination to make clinical judgments
   k. Determine a diagnosis and prognosis that guides future patient management
   l. Establish a physical therapy plan of care that is safe, effective, patient-centered and evidence-based
   m. Perform physical therapy interventions in a competent manner
   n. Educate others using relevant and effective teaching methods
   o. Produce quality documentation in a timely manner to support the delivery of physical therapy services
   p. Collect and analyze data from selected outcome measures in a manner that supports accurate analysis of individual patient and group outcomes
   q. Participate in the financial management of the physical therapy service consistent with regulatory, legal and facility guidelines
   r. Direct and supervise personnel to meet patient goals and expected outcomes according to legal standards and ethical guidelines

6. Access and critical analyze scientific literature related to identified questions regarding individual patient/client management.

7. Provide physical therapy services addressing primary, secondary and tertiary prevention, health promotion, and wellness to individuals, groups, and communities.

8. Participate in patient-centered interprofessional collaborative practice

Teaching & Learning Methods: Experiential learning; problem-based learning

Course Policies / Student Expectations: Throughout the experience the student will:

1. Abide by the University of Utah Department of Physical Therapy and Athletic Training Student Code of Responsibilities (see Student Handbook).

2. Abide by the University of Utah Department of Physical Therapy and Athletic Training Clinical Education Policies (see Clinical Education Handbook).

3. Demonstrate appropriate professional behaviors and skills in all interactions (APTA PT Clinical Performance Instrument (CPI))

4. Achieve appropriate level of student performance on CPI evaluation.

5. Complete all assignments:
   A. Complete all on-boarding clinical site requirements (e.g., immunizations, background check, drug screen, etc.) as applicable prior to the start of the experience, or as required by site.
   B. Provide SCCE & CI with a copy of completed Student Profile Information AND Clinical Questionnaire prior to the start of the experience. Exxat will indicate if your profile was sent (or not). If used Acadaware, submit evidence of email sent I Canvas
   C. Submit (Canvas) the best days of the week and available times of day to schedule the onsite or telephone visit.
   D. Confirm with Clinical Education Assistant the onsite or telephone visit. Identify any special directions for the visit.
   E. Midterm and Final Self-Assessment with the PT CPI Web: review/compare with CI’s and/or SCCE’s evaluation of student performance.
      1. Student self-assessment – with electronic “sign off”
      2. CI evaluation of the student – with electronic “sign off”
   Both Student & CI MUST “sign off” on each evaluation in order for the DCE to view/review the evaluation.
   F. Student Evaluation of the Clinical Site: complete near the end of the experience via Exxat (www.exxat.com)
G. **Student evaluation of the Clinical Instructor:** complete near the end of the experience via Exxat (www.exxat.com).

H. **CANVAS ASSIGNMENTS:** (Click on assignment links for further info, directions, and assignment examples on course site).
   1. Submit **Student Profile Information AND Clinical Questionnaire** to site. If Acadaware, submit evidence of email.
   2. Submit CI Details through Exxat (name, contact information, student schedule, etc.).
   3. Submit (Canvas) the best days of the week and available times of day to schedule the onsite or telephone visit.
   4. **Evidence-Based Case Report** (see criteria posted on Canvas)
   5. **Midterm and Final Self-Assessment within the PT CPI Web:** review/compare with the CI’s and/or the SCCE’s evaluation of student performance.
      a). Student Intern’s self-assessment – with electronic signature* - if CI is late with completion, the student is required to:
         1. sign off on completed self-assessment on time
         2. notify Reva/Brad via Canvas of delay & expected CI completion
      b). CI’s evaluation of the student – with electronic signature*
         *NOTE: To successfully complete the experience, BOTH student and CI must “sign-off” on all electronic evaluations! **Student & CI MUST “sign-off” on each evaluation in order for the DCE to view/review the evaluation.**
   6. **Evidence-Based Case Report** (see criteria posted on Canvas)
   7. **Case Report Presentation** (see criteria on Canvas)

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<thead>
<tr>
<th>ASSIGNMENTS:</th>
<th>DUE</th>
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<tbody>
<tr>
<td>Evidence of Student Profile Information &amp; Clinical Questionnaire (Canvas)</td>
<td>Wk 0 / 10</td>
</tr>
<tr>
<td>Clinical Instructor Details (Exxat)</td>
<td>Wk 1 / 10</td>
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<tr>
<td>Midterm visit: best days of days and available times of day (Canvas)</td>
<td>Wk 1 / 10</td>
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<tr>
<td>MIDTERM CPI Signed-Off by BOTH CI AND Student via PT CPI Web</td>
<td>Wk 5 / 50</td>
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<tr>
<td>Weekly Planning Forms Week 1-5 (Canvas)</td>
<td>Wk 5 / 1 EC each</td>
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<tr>
<td>DRAFT Case Report – Submitted to Peer (Canvas)</td>
<td>Wk 5 / 10</td>
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<tr>
<td>DRAFT Case Report – Peer Review DUE (Canvas)</td>
<td>Wk 6 / 10</td>
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<tr>
<td>Patient-Centered Interprofessional Collaborative Practice</td>
<td>Wk 7 / 30</td>
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<tr>
<td>FINAL Case Report (Canvas)</td>
<td>Wk 8 / 30</td>
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<tr>
<td>Weekly Planning Forms Weeks 6-11</td>
<td>Wk 11 / 1 EC each</td>
</tr>
<tr>
<td>Case Report Presentation Completed (Canvas)</td>
<td>Wk 11 / 15</td>
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<tr>
<td>Student Evaluation of Clinical Site (<a href="http://www.exxat.com">www.exxat.com</a>) &amp; Canvas</td>
<td>Wk 11 / 10</td>
</tr>
<tr>
<td>Student Evaluation of Clinical Instructor (<a href="http://www.exxat.com">www.exxat.com</a>) &amp; Canvas</td>
<td>Wk 11 / 10</td>
</tr>
<tr>
<td>FINAL CPI Signed-Off by BOTH CI AND Student via PT CPI Web</td>
<td>Wk 11 / 50</td>
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<tr>
<td>Post-Experience Group Webinar</td>
<td>Wk 12 / 30</td>
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5. **Notes to CI/SCCE:**
   A. Students have been instructed on the use of the electronic CPI. They should be able to answer questions regarding implementation, but please feel free to contact the **Director of Clinical Education** (Reva Rauk) or **Clinical Education Assistant** (Emily Walton) for any clarifications regarding use of the assessment tool.
   B. It is the student’s responsibility to be pro-active in pursuing appropriate clinical learning experiences, pursuing practice opportunities for appropriate skills, and self-initiating the scheduling of student evaluation sessions with the clinical instructor.
   C. These 3rd year DPT students should demonstrate solid performance of clinical skills. If there are ANY concerns whatsoever about the student’s performance in any of the CPI skills or any other skill the CI or SCCE feel the student should be demonstrating, please communicate any concerns to the Director of Clinical Education **as soon as possible**.
   D. Students are advised **NOT** to attempt part-time or full-time employment during these full-time clinical experiences.
**Evaluation of Student’s Clinical Performance:**
The University of Utah, Department of Physical Therapy utilizes the APTA Clinical Performance Instrument (CPI) in the evaluation of student performance in the clinic. The evaluation should be reviewed early in the experience, with formal evaluations of the student schedule at least at midterm and near the end of the experience (final).

*The midterm evaluation is completed in weeks 5-6 of the experience; the final evaluation is completed in week 11 of the experience. Interns submit the self-assessment & discuss at the same time as the instructor evaluations – see instruments for further instructions. The DCE is to be kept apprised of the student’s progress and status.*

If **ANY concerns arise** regarding the student’s performance in **any** of the criteria please communicate your concerns to the Director of Clinical Education immediately via 435-901-4803. Addressing these concerns early is prudent and in the best interest of all parties.

If you have **any** questions about the PT CPI Web training, rating scale, or how to access the site, please contact Kristin Augustine at 801-585-7962, kristin.augustine@hsc.utah.edu, or Reva Rauk at 435.901.4803, reva.rauk@hsc.utah.edu. **We appreciate the time and energy you invest in educating the next generation of physical therapists!**

**CPI Web Performance Criteria:**

**Red Flag Items** - The Performance Criteria 1-4 & 7 of the CPI are foundational elements of clinical practice, and therefore the student must achieve **appropriate performance** of each skill by the end of the experience. Students are NOT expected to be at entry-level, but “appropriate” for a 3rd year student during his/her 2nd clinical experience. Although effective student performance of these items is essential, these red flag items do not stand alone in the evaluation of student performance. Each skill is critical to the overall assessment of a student’s clinical competence. Students who demonstrate difficulty with any red flag performance criteria require:

- Immediate attention!
- Documentation describing performance deficiency
- Call to the DCE! - **•** Any concerns with student performance in ANY of the Red Flag criteria should be communicated with the student and the DCE immediately via 435-901-4803 and/or reva.rauk@hsc.utah.edu for appropriate interventions.
- Development of a plan with the student, clinical site, and academic program to address and improve performance.

**Student Performance Rating and Expectations:**

Student performance ratings must be completed at midterm and near the completion of the experience (final). Ratings are based on six defined anchors with five distinct categories and specific criteria within each category. The scale is designed to reflect a continuum of performance ranging from “Beginning Performance” to “Beyond Entry-Level Performance.” In other words, a rating is given to identify, in your professional opinion, at what capacity the student is performing within your specific clinical setting based on the defined categories.

The Department of Physical Therapy expects the Final Full-Time Clinical: Experience II student to progress along the continuum ranging from Intermediate to Advanced Intermediate or beyond, in ALL 18 performance criteria by the **END** of the experience.

**Lack of appropriate progress** is more concerning and should be immediately communicated with the DCE for appropriate interventions. The CI should check the Significant Concerns Box when the student’s performance does not meet the CI’s expectations and the observed deficits place the student AT RISK for not completing the experience successfully. If a student is unsure as to the expected performance level, it is the student’s responsibility to make an appropriate and timely inquiry. Once concerns are brought to the attention of the intern (written and/or verbal), students’ are expected to be responsive. Do not hesitate to utilize the evaluation instruments more frequently if desired. The Weekly Feedback form, Critical Incident Report form and Anecdotal Record forms are available within PT CPI Web. The Professional Behaviors Assessment and APTA Professional Core Values Assessment are available from the students or the DCE to further diagnose and remediate issues with professional behavior.

**Grades:** **The experience is GRADED**

All assignments must be completed and student interns must achieve appropriate clinical performance ratings throughout the experience to be successful. Final determination of experience grades is at the discretion of the DCE in consultation with clinical instructors, center coordinators of clinical education, academic faculty and the Department Chair. It’s important to remember the CI does not assign/determine the course grade. Refer to the Department of Physical Therapy and Athletic Training Student Handbook and Clinical Education manual for further information on program progression standards.
Final grades for the course will be determined using the following grading scale:

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<thead>
<tr>
<th>Percentage of Points Possible</th>
<th>Grade</th>
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<tbody>
<tr>
<td>93-100</td>
<td>A</td>
</tr>
<tr>
<td>90-92</td>
<td>A-</td>
</tr>
<tr>
<td>88-89</td>
<td>B+</td>
</tr>
<tr>
<td>83-87</td>
<td>B</td>
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<td>80-82</td>
<td>B-</td>
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<tr>
<td>78-79</td>
<td>C+</td>
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<tr>
<td>75-77</td>
<td>C</td>
</tr>
<tr>
<td>&lt;75</td>
<td>Fail</td>
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**Additional Grading Considerations:**

- Failure to abide by any clinical education policy regarding this clinical experience, at any time during the placement process, will result in a reduction of grade. Each infraction will result in grade reduction. Students should be very familiar with the clinical education policies. Examples of infractions may include, but are not limited to: requesting time off without consultation of DCE; failure to notify DCE of unexpected absence (e.g., illness); requesting site change experience dates directly to site (after experience is confirmed and without prior approval from DCE); and scheduling vacations during experience dates, to name a few.

- Late assignments
  - Late assignments will result in a reduction in points for that assignment. For individual assignments:
    - 1-2 days late = 90% of points
    - 3-4 days late = 88% of points
    - 5-7 days late = 83% of points
    - 8-10 days late = 80% of points
    - 11-14 days late = 78% of points
    - 15+ days late = 75% of points
    - Not completed = 0 points
  - Two or more late assignments will result in **overall** course grade reduction.
    - 2 late assignments = 95% (-5%)
    - 3 late assignments = 90% (-10%)
    - 4 late assignments = 85% (-15%)
    - 5 late assignments = 80% (-20%)
    - 6 late assignments = 75% (-25%)
    - 7 late assignments = Fail

- Quality of student clinical performance will impact grade!
  - Documented performance significantly below academic or site expectations (e.g., negative Anecdotal Record Report; Critical Incident Report; CPI ratings indicating significant concerns) will result in a reduction of grade. First incident may result in one full letter grade reduction (e.g., from A to B). Second incident may result in an additional reduction of one full letter grade (e.g., B to C). Third incident may result in course failure.
  - Documented performance significantly above academic or site expectations (e.g., positive Anecdotal Record report; unsolicited email report from CI) may positively enhance a student’s grade. A student may off-set up to two grade reductions due to late assignments

**Additional Information:**

**Absence or “Time Off” Policies:** The program does not allow the student any “time off” during clinical education courses other than for professional development opportunities described below.

**Illness & Medical Appointments:**

Any time missed due to illness or emergency must be reported to the CI and DCE, and must be made up. Time off for appointments for medical and dental care – either for the student or the student’s dependents, should be discussed with the DCE first and then the CI prior to making the appointment. The student is expected to schedule appointments outside of clinical time or so time away from the clinical setting is least disruptive to the functioning of the facility. In all sudden illness or emergency cases, the student will notify the facility prior to the start of the workday or as soon as the student knows of the illness/emergency, and will speak directly to the CI or
SCCE regarding the absence. Text or email notifications are NOT approved methods of communication unless you have tried multiple times to reach the CI/SCCE by phone, or have made prior arrangements with your CI.

Other Absences:
Any planned absence must be FIRST approved by the DCE before addressing the CI. When a student misses a day from an experience, the CI and the student will schedule the make-up time, and the student must notify the DCE within three working days: the date of the absence, the reason for the absence, and the date of the make-up time. Students and CIs must document ALL missed time in the CPI – amount of time missed and when/how that time was made up. Failure to comply with this policy may result in a delay in the scheduled completion of the student’s experiences.

Participation in Opportunities for Professional Development: CONDITIONAL
NO MORE THAN TWO DAYS TOTAL CAN BE EXCUSED OR MADE UP FROM YOUR CLINICAL EXPERIENCE
1. Professional Conference - TWO (2) Days Excused Absence
Students may be excused a maximum of TWO (2) days without penalty from clinical experiences or experiences in order to participate in opportunities for professional development such as state, national, or international professional conferences, student conclaves, research symposia, and professional political action events. These opportunities will be considered excused absences. Students are required to obtain prior written approval from the DCE and clinical faculty during the time of their absence. Such absences, however, do not lessen the student’s responsibility to meet the expectations of the experience or experience. If the student is not meeting the expectations of the experience, the request to attend the event may be denied. If the student attends an event and does not meet expectations of the experience/experience after the event, the student will be required to make up any missed time, extend the experience to allow for additional time to meet competencies, or fail the experience.

2. Student Pro Bono Clinics – Participation during any full-time clinical experience – FOUR ½-day Clinical Experience Credit
Students may be excused from their full-time clinical experience a maximum of FOUR ½-days (or TWO full days), to compensate for active participation in providing patient care services at any Student Pro Bono Clinic. Students are required to plan ahead to obtain prior written approval from the DCE and clinical instructor, then send the DCE verification of service completion from the Pro Bono Board Student Liaison.
If the student is not meeting the expectations of the clinical experience, the request for time-away credit may be denied. If the student participates in the Pro Bono Clinic, takes time off from the clinical experience and ultimately does not meet expectations of the experience after the event, the student will be required to make up any missed time, extend the clinical experience to allow for additional time to meet competencies, or fail the experience.

Examples of Clinical Training Agreement language of which students must be aware:
“The Facility may immediately remove from the premises any student who poses an immediate threat or danger to personnel or to the quality of medical services or for unprofessional behavior.”
“It is mutually understood and agreed between the parties that the Hospital or the Educational Institution may withdraw any student from the program at any time if the qualifications, performance, or actions of such individual is unsatisfactory or if an individual is disruptive or otherwise interferes with desirable work relationships within the Hospital. If in the opinion of the Hospital or its agents, the health of the student may be detrimental to the health of the Hospital’s patients or employees, the Hospital may remove that student. The above action may be exercised summarily and without recourse.”

APTA Credential Clinical Education Program:
The University of Utah highly recommends all Clinical Instructors and Clinical Coordinators of Clinical Education complete the APTA Credentialed Clinical Instructor Programs and achieve credentialing. The programs are offered a minimum of annually through the Department. See the Department website for upcoming courses: https://health.utah.edu/physical-therapy-athletic-training/
- Credentialed Clinical Instructor Program - Level 1 – October 11-12, 2019 @ Rocky Mountain University, Provo
- Credentialed Clinical Instructor Program - Level 2 – November 22-23, 2019 @ University of Utah, Health Professions Education Building, Salt Lake City
For further information contact the DCE, Reva Rauk, PT, PhD, MMSc, NCS, reva.rauk@hsc.utah.edu, 801-581-8665, or the Clinical Education Assistant (Emily Walton), at 801-585-7962. For detailed information on each APTA Credentialed Clinical Instructor Program, visit: http://www.apta.org/Educators/Clinical/EducatorDevelopment
The Americans with Disabilities Act. The University of Utah seeks to provide equal access to its programs, services, and activities for people with disabilities. If you will need accommodations in this class, reasonable prior notice needs to be given to the Center for Disability & Access (CDA; http://disability.utah.edu/; 162 Olpin Union Building; 801-581-5020). CDA will work with you and the instructor to make arrangements for accommodations. All written information in this course can be made available in an alternative format with prior notification to the CDA.

Addressing Sexual Misconduct. Title IX makes it clear that violence and harassment based on sex and gender (which includes sexual orientation and gender identity/expression) is a Civil Rights offense subject to the same kinds of accountability and the same kinds of support applied to offenses against other protected categories such as race, national origin, color, religion, age, status as a person with a disability, veteran's status or genetic information. If you or someone you know has been harassed or assaulted, you are encouraged to report it to the Title IX Coordinator in the Office of Equal Opportunity and Affirmative Action, 135 Park Building, 801-581-8365, or the Office of the Dean of Students, 270 Union Building, 801-581-7066. For support and confidential consultation, contact the Center for Student Wellness, 426 SSB, 801-581-7776. To report to the police, contact the Department of Public Safety, 801-585-2677(COPS).

Campus Safety Statement. The University of Utah values the safety of all campus community members. To report suspicious activity or to request a courtesy escort, call campus police at 801-585-COPS (801-585-2677). You will receive important emergency alerts and safety messages regarding campus safety via text message. For more information regarding safety and to view available training resources, including helpful videos, visit https://safeu.utah.edu/.

The Code of Student Rights and Responsibilities. The code, which specifies student rights as well as conduct involving cheating, plagiarism, collusion, fraud, theft, etc., is provided at http://regulations.utah.edu/academics/6-400.php.

Wellness Statement. Personal concerns such as stress, anxiety, relationship difficulties, depression, cross-cultural differences, etc., can interfere with a student's ability to succeed and thrive at the University of Utah. For helpful resources contact the Center for Student Wellness, http://wellness.utah.edu; 801-581-7776.