Course Title/Number	PT 793 Clinical Internship III
Semester/Year	SPRING 2018
Days/Time	Days and Time: January 8, 2018 - April 20, 2018
	15 weeks Full time
Location	Clinical site
Course	Gretchen R. Pfost, PT, DPT, NCS
Coordinator/Instructor	
Office	SMEC Room 145
Phone	304-696-5608
E-Mail	Lane36@marshall.edu
Office/Hours	by appointment
University Policies	By enrolling in this course, you agree to the University Policies listed below. Please read the full text of each policy be going to www.marshall.edu/academic-affairs and clicking on "Marshall University Policies." Or, you can access the policies directly by going to http://www.marshall.edu/academic-affairs/?page_id=802
	Academic Dishonesty/ Excused Absence Policy for Undergraduates/ Computing Services Acceptable Use/ Inclement Weather/ Dead Week/ Students with Disabilities/ Academic Forgiveness/ Academic Probation and Suspension/ Academic Rights and Responsibilities of Students/ Affirmative Action/ Sexual Harassment

Course Description: From Catalog

This 15 week, 8 credit course is the third in a series of three supervised clinical education experiences emphasizing continued development and reinforcement of clinical skills in various clinical settings. Competence is expected in areas of the material presented to date in the curriculum. The student must have successfully completed all prior curricular course, work.

Prerequisites: Competence is expected in areas of the material presented to date in the curriculum. The student must have successfully completed all prior curricular course work.

Students are required to have proof of meeting all health requirements including CPR certification and those outlined in the Clinical Education Handbook, which is available at: http://www.marshall.edu/physical-therapy/files/DPT-Clinical-Education-Handbook-June-1-2016.docx.pdf

If a clinical site required documentation to verify the student's records, the student is responsible for providing those records from their Castle Branch (https://www.castlebranch.com/) and Emedley (https://he.emedley.com/univ/he/common/login/login.php) accounts.

In addition, some clinical sites may require additional screenings or immunizations (ie fingerprinting, repeated background checks or drug screens). It is the student's responsibility to identify any additional requirements, the process for completion, and assuring that the results are provided to the site. Students may gain this information through correspondence and discussion with the clinical education site prior placement and through clinical site information forms located in the DCEs' offices.

Course Student Learning Outcomes	How Practiced in this Course	How Assessed in this
Upon Completion of this course, the student will:		Course
1. Demonstrate the ability to perform safe and effective physical therapy practice. (C5.35, 5.44)	Clinical Experience and application of psychomotor skills	As reported on Clinical Performance Instrument (CPI), Clinic Documentation, Clinic Visit Skills Performance, Discussion with

		Clinical Instructor (CI)
2.Apply principles of APTA Code of Ethics and Guide to Professional Conduct to the clinical setting. (C5.1-5.3)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
3.Recognize the importance of and act in accordance with all federal and state laws governing the practice of physical therapy. (C5.1-5.3)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
4.Actively participate in the preparation and implementation of the clinical education experience. (C 5.12- 5.14, C 5.1-5.5)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
5.Demonstrate the ability to self-assess his or her progress accurately in the clinical setting. (C 5.10)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
6.Apply knowledge acquired of human anatomy, physiology, and pathophysiology of all systems in the clinical setting; and, demonstrate understanding of how these concepts affect the overall outcome and prognosis of each patient. (C 5.19-23)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
7.Demonstrate competence in the ability to perform the following tests and measurements in the clinical setting: (C 5.5.28- 30) a. History b. Observation c. Palpation d. Vital signs e. Posture analysis f. Range of motion g. Manual muscle testing h. Neurological / Sensory testing i. Integumentary integrity	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
8.Provide appropriate, evidence-based rationale for the use of specific tests and measurements in the management of the patient/client. (C 5.21-23)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
9.Perform a comprehensive physical therapy examination on a simple patient in the general setting in an effective and efficient manner. (C 5.28-5.30)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI

10.Perform the following patient management skills in a safe and effective manner: (C. 5.35, 5.39) a. Draping and positioning b. Basic transfers and bed mobility c. Gait training with assistive devices d. Stair training with and without assistive devices e. Basic wheelchair mobility and management f. Dependent wheelchair mobility	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
11.Produce concise and accurate physical therapy documentation for all examination and treatment services provided by the student in patient care. (C. 5.42)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
12.Demonstrate competence in communicating appropriately with all members of the healthcare team including, but not limited to, physicians, other therapists, other health care workers, supporting staff, patients, and family members. (C 5.17)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
13.Adapt treatment and communication to the individual needs of patient's and others. (C 5.17, 5.39)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
14.Adequately perform patient / family education by demonstrating the ability to educate on numerous levels using verbal communication, demonstration, and any other applicable methods of instruction. (C 5.51- 5.52)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
15.Assess the reception and understanding of the patient / family to educational concepts addressed. (5.51-5.52)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
16. Assess the effectiveness of a physical therapy plan of care through re-evaluation of patient functional status.(5.28- 30, 5.34- 38,5.45- 5.49)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
17.Adapt the physical therapy plan of care to increase effectiveness and to meet the changing needs of the patient.(5.34- 39)	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit Skills Performance, Discussion with CI
18.Demonstrate an understanding of appropriateness of physical therapy intervention with each patient/client and suggest appropriate	Clinical Experience and application of psychomotor skills	As reported on CPI, Clinic Documentation, Clinic Visit

consultation when deemed necessary. (5.27)	Skills Performance, Discussion with CI

Required Texts, Additional Reading, and Other Materials

APTA: Physical Therapy Clinical Performance Instrument Web, 2008

CPI Web: http://cpi2.amsapps.com/user session/new

All students, clinical instructors, and DCEs are required to complete an online training module prior to using the instrument. All students completed this training during PT 791. The DCE will provide instructions to clinical instructors regarding completion of the online training prior to the student's clinical internship.

At midterm, the student will complete a self-assessment using the CPIWeb portal. The CI will complete an assessment of the student using the same tool. The student and CI will meet to discuss and share their ratings. The DCE may consult with the student and CI by phone or via a site visit if questions or problems arise.

At the end of the rotation, the student and CI will again complete the CPI, review together, and consult the DCE as needed. Student self-assessments must be completed and "signed off" by the student AND the CI on or before the last day of the rotation.

APTA: Guide to Physical Therapists Practice, January 2003 http://guidetoptpractice.apta.org/

Attendance Policy: Please see the School of Physical Therapy Student Handbook for details. http://www.marshall.edu/physical-therapy/files/DPT-Student-Handbook-March-1-2017.pdf

Course Requirements

ATTENDANCE:

PT 793 is a required course of the DPT program. The student is expected to attend all assigned days of the clinical experience. Students are not allowed to miss any days of the clinical experience for personal reasons. If there is some reason (ie. Sickness, death of a family member, etc.) that may require the student to be absent for one or more days, they are to contact both the facility **AND** the Director of Clinical Education to request permission to be absent. If any days are missed due to these reasons, they must be made up in order to meet the requirements of the course. Failure to show up for the clinical without contacting the CCCE and DCE prior to the absence may result in failure of the course. Students will adhere to the holiday schedule and inclement weather policies of the facility rather than the University.

Tardiness: Students are expected to be punctual at all times and arrive prepared for clinic each day. Similar to absences, tardiness should only occur in extenuating circumstances. If a student must be late for clinic, the student must contact his/her CI promptly and preferably before the start of the clinic day. Repeated tardiness may impact the student's grade. If tardiness becomes a pattern, the CI is encouraged to contact the DCE.

Clinical Instructor Absence: If a Cl is absent during the students scheduled affiliation, the school requests that arrangements be made for another licensed physical therapist to provide instruction and supervision to the student. If this is not possible, the student should be notified and should not go to clinic. Students are instructed to never provide care in a clinical setting without a licensed physical therapist on-site to supervise.

Attire: The department policy on professional attire in the clinical setting will apply.

ASSIGNMENTS

Inservice Presentation: The student will prepare a professional inservice to present to the staff of the facility on a topic appropriate to the clinical setting and the educational level of the clinical staff. A project handout, including references, will be prepared and turned in to the DCE at the culmination of the clinical experience. **Due on or before April 20, 2018.**

Surveys and Self-Assessments:

- a. Students will complete a self-assessment to be shared with the CI prior to the start of the clinical experience.
- b. Student Assessment of Clinical Experience survey to be completed at midterm and final.
- c. Student Evaluation of Clinical Instructor at the conclusion of each clinical experience.

GRADING CRITERIA:

The students will be graded on a pass – fail basis according to comments on the written evaluation by the clinical instructor, use of the APTA Clinical Performance Instrument, and on completion of all objectives and course requirements. The minimum requirements for a "pass" grade using the CPI are as follows: final marks on all criteria 1-18 at or above "Entry Level" performance and no "Significant Concerns" boxes checked in any of the 18 performance criteria. According to CPIWeb, "significant concerns" signifies that the student's performance on one or more of the criteria is unacceptable for the clinical experience. If the CI has "significant concerns" at any time during the rotation, the CI should immediately contact the DCE. Ideally, the situation or issue should be documented on CPIWeb as a "Critical Incident Report," which will immediately alert the DCE. However, the CI may rather choose to contact the DCE directly (lane36@marshall.edu or 304-696-5608). The DCE will work with the student and CI to develop a remediation learning plan and contract. While the CI assesses the students' clinical performance, the DCE makes the final determination of the course grade.

The final course grade will be determined by timely completion of all assignments, satisfactory scores on the APTA CPI as noted above as well as consideration by the DCE of comments/feedback from the CI, "significant concerns" and critical incidents reported by the CI, complexity of the clinical environment, student progress from midterm to final, and congruence between all written and verbal information regarding the student's performance.

Circumstances which may warrant a decision by the DCE to award a "pass" or "incomplete" grade when a student has not met the minimum criteria include:

- a. The clinical instructor did not follow correct procedure in assessing mastery of skills, documenting results, or submitting completed progress reports.
- b. A determination, based on investigation and sufficient evidence, is made that the clinical instructor was biased or unfair in recording and reporting on the students' clinical performance

See attached for definitions of Performance dimensions and rating scale anchors.

Week	Content	
1	Complete and submit Clinical Site Questionnaire – Due 1/12/18	
2		
3		
4		
5		
6		
7		
8	Complete, submit and sign CPI & Section 1 of PT Student Assessment of Clinical	
	Experience Form – Due on or before 3/2/18	
9		
10		
11		
12		
13		
14		
15	Complete, submit and sign CPI & BOTH sections of PT Student Assessment of	
	Clinical Experience and Instruction Form	
	Submit Final Inservice Presentation	
	All DUE 4/20/18	

<u>Split Rotations</u>: Students who are splitting the rotation between 2 different settings will have a modified schedule and will complete midterm CPIs at the midpoint and during the final week of the affiliation. Dates of midterm evaluations may vary based on clinical caseloads/schedules. Clinical Site Questionnaires need to be completed for both settings by the end of the first week in each setting. The student will complete The PT Student Assessment of Clinical Experience and Instruction (both sections) only during the final weeks of each setting. Only one inservice presentation at either setting is required by the program.

APPENDIX C DEFINITIONS OF PERFORMANCE DIMENSIONS AND RATING SCALE ANCHORS

CATEGORY	DEFINITIONS
	Performance Dimensions
Supervision/ Guidance	Level and extent of assistance required by the student to achieve entry-level performance. As a student progresses through clinical education experiences, the degree of supervision/guidance needed is expected to progress from 100% supervision to being capable of independent performance with consultation and may vary with the complexity of the patient or environment.
Quality	Degree of knowledge and skill proficiency demonstrated. As a student progresses through clinical education experiences, quality should range from demonstration of limited skill to a skilled performance.
Complexity	Number of elements that must be considered relative to the task, patient, and/or environment. As a student progresses through clinical education experiences, the level of complexity of tasks, patient management, and the environment should increase, with fewer elements being controlled by the CI.
Consistency	Frequency of occurrences of desired behaviors related to the performance criterion. As a student progresses through clinical education experiences, consistency of quality performance is expected to progress from infrequently to routinely.

Efficiency	Ability to perform in a cost-effective and timely manner. As the student progresses through clinical education experiences, efficiency should progress from a high expenditure of time and effort to economical and timely performance.			
	Rating Scale Anchors			
Beginning performance	 A student who requires close clinical supervision 100% of the time managing patients with constant monitoring and feedback, even with patients with simple conditions. At this level, performance is inconsistent and clinical reasoning* is performed in an inefficient manner. Performance reflects little or no experience. The student does not carry a caseload. 			
Advanced beginner performance	 A student who requires clinical supervision 75% – 90% of the time managing patients with simple conditions, and 100% of the time managing patients with complex conditions. At this level, the student demonstrates consistency in developing proficiency with simple tasks (eg, medical record review, goniometry, muscle testing, and simple interventions), but is unable to perform skilled examinations, interventions, and clinical reasoning skills. The student may begin to share a caseload with the clinical instructor. 			
Intermediate performance	 A student who requires clinical supervision less than 50% of the time managing patients with simple conditions, and 75% of the time managing patients with complex conditions. At this level, the student is proficient with simple tasks and is developing the ability to consistently perform skilled examinations, interventions, and clinical reasoning. The student is <u>capable of</u> maintaining 50% of a full-time physical therapist's caseload. 			
Advanced intermediate performance	 A student who requires clinical supervision less than 25% of the time managing new patients or patients with complex conditions and is independent managing patients with simple conditions. At this level, the student is consistent and proficient in simple tasks and requires only occasional cueing for skilled examinations, interventions, and clinical reasoning. The student is <u>capable of</u> maintaining 75% of a full-time physical therapist's caseload. 			
Entry-level performance	 A student who is <u>capable of</u> functioning without guidance or clinical supervision managing patients with simple or complex conditions. At this level, the student is consistently proficient and skilled in simple and complex tasks for skilled examinations, interventions, and clinical reasoning. Consults with others and resolves unfamiliar or ambiguous situations. The student is <u>capable of</u> maintaining 100% of a full-time physical therapist's caseload in a cost effective manner. 			
Beyond entry -level performance	 A student who is <u>capable of</u> functioning without clinical supervision or guidance in managing patients with simple or highly complex conditions, and is able to function in unfamiliar or ambiguous situations. At this level, the student is consistently proficient at highly skilled examinations, interventions, and clinical reasoning, and is a capable of serving as a consultant or resource for others. The student is <u>capable of</u> maintaining 100% of a full-time physical therapist's caseload and seeks to assist others where needed. The student is capable of supervising others. The student willingly assumes a leadership role* for managing patients with more difficult or complex conditions. 			