The University of Tennessee at Chattanooga

Clinical Education IV

Spring 2024

PHYT, 7332, 20312, Face-to-Face, 9 credit hours

This syllabus is to be used in conjunction with the UTC Campus Syllabus. Students should access the UTC Campus Syllabus via Canvas and be aware of the policies and resources contained therein.

Course Coordinator/Instructor of Record: Dr. Carolyn Padalino, PT, DPT, CEEAA

Email and Phone Number: Carolyn-Padalino@utc.edu, office: (423)425-4045, mobile: (423)504-8767

Office Hours and Location: Tuesday 12:00-1:00 pm, Wednesday 12-2:30 pm (all EST)

Course Meeting Days, Times, and Location: January 2-April 12, 2024, times determined by Clinical Instructor schedule (or designee in their absence), location based on clinical site assignment

Course Catalog Description: This Clinical Education IV experience is the final course of the curriculum. Students will work under the direct supervision of a licensed physical therapist focusing on a particular patient/client population, with preferences expressed by the student. The desired outcome is for the student to reach entry-level performance in patient/client management. Spring semester; year 3. 600 clinical hours. Differential course fee will be assessed. Graded Satisfactory/No Credit.

Course Pre/Co Requisites: Enrollment in the DPT Program; Successful completion of prior DPT plan of study coursework.

Course Student Learning Outcomes: Performance in patient/client management as defined by the 12 clinical performance criteria within the American Physical Therapy Association's (APTA) PT Clinical Performance Instrument (PT CPI) 3.0 scale, with the student expected to achieve an "Entry-Level" rating to demonstrate mastery, as defined in the APTA's Learning Center training for the PT CPI 3.0 The student will:

	Objective Description	I = introduced R = reinforced M = mastered
1	Professionalism: Ethical Practice – Demonstrates professional behavior in the clinical setting; practices according to legal and professional standards and ethical guidelines; demonstrates respect for self, patients, and colleagues in all situations.	M

2	Professionalism: Legal Practice – Practices according to legal and professional standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.	M
3	Professionalism: Professional Growth – Accepts and is receptive to feedback; participates in planning and/or self-assessment to improve clinical and professional performance; seeks out opportunities for professional development.	M
4	Interpersonal: Communication – Demonstrates professional verbal and nonverbal communication with all stakeholders (e.g., patients, caregivers, intra/interdisciplinary colleagues); ongoing communication with physical therapist assistants regarding patient care; adapts verbal and nonverbal communication styles based on the patient's cognitive status and/or literacy level; utilizes communication resources (e.g., translators) as appropriate; incorporates appropriate strategies to engage in challenging encounters with patients and others.	M
5	Interpersonal: Inclusivity – Adapts the delivery of physical therapy services with consideration for patient diversity; encourages equity and is inclusive to all regardless of race, gender, age, etc.	M
6	Technical/Procedural: Clinical Reasoning – Strategically gathers, interprets, and synthesizes information from multiple sources to make effective clinical judgments; applies current knowledge and clinical judgement leading to accurate and efficient evaluations including: selection of examination techniques, diagnosis, prognosis, goals, and plan of care; ensures patient safety with medical screening during the episode of care and when making discharge and progression decisions; presents a logical rationale for clinical decisions with all stakeholders (e.g., patients, caregivers, intra/interdisciplinary colleagues).	M
7	Technical/Procedural: Examination, Evaluation, and Diagnosis – Performs evidence-based initial and re-examination tests and measures that are relevant to the practice setting; rules out other pathologies and refers to other healthcare professionals as necessary; evaluates data from the patient examination (e.g., history, systems review, tests and measures, screening, and outcome measures) to make clinical decisions, including the determination of a diagnosis to guide future patient management.	M
8	Technical/Procedural: Plan of Care and Case Management – Establishes a physical therapy plan of care that is safe, effective, patient-centered, and	M

	evidence-based while also considering prognostic factors; adapts plan of care as appropriate by utilizing test and retest measures, outcome measures, and caseload discussions to ensure patients are progressing toward discharge goals.	
9	Technical/Procedural: Interventions and Education – Selects and performs appropriate physical therapy interventions (e.g., therapeutic exercise, therapeutic activity, neuromuscular re-education, application of modalities, manual therapy) that are evidence-based and completed in a competent and efficient manner; educates patients and caregivers using multimodal approach based on patient's learning style; educates healthcare team on relevant topics by taking active an role in activities (e.g., journal clubs) or other in-service opportunities.	M
10	Business: Documentation – Produces quality documentation in a timely manner to support the delivery of physical therapy services.	M
11	Business: Financial Management and Fiscal Responsibility – Identifies financial barriers and limitations to patient care (e.g., authorization limits, cost to patient); adjusts plan of care and schedule frequency based on the patient's financial concerns or needs; understands nuances of insurance including copay, co-insurance, out-of-pocket max, deductible, etc.; appropriately bills patients according to legal guidelines and insurance regulations; demonstrates appropriate understanding of other fiscally responsible behaviors including time management and appropriate use of clinical supplies and equipment when providing physical therapy services.	M
12	Responsibility: Guiding and Coordinating Support Staff – Actively participates in caseload discussions to optimize patient outcomes; delegates tasks to support staff as appropriate; identifies patient complexity model of care when scheduling patients with a physical therapist assistant versus a physical therapist.	M

Course Fees: DPT differential tuition is applied.

Required Course Materials: 1) Canvas under course tile PHYT 7332, 2) The APTA PT CPI 3.0: https://cpi.apta.org/login. 2) EXXAT Clinical Education Management system: https://apps.exxat.com/Fusion/Account/Login. 3) Other readings, appropriate to the patient population or clinical site, may be assigned by the clinical instructor. 4) No texts are required for this course, however, use of previous physical therapy textbooks is expected. 5) Access to the

PT State Practice Act for the location of the site assigned (search may be initiated at fsbpt.org > Top Resources > Licensing Authority Contact Information > Search for applicable state

Technology Requirements for Course: Daily access to the internet and a personal working phone line (may not be facility's phone)

Technology/Digital Literacy Skills Required for Course: Appropriate use of search engines to showcase learning relative to patient population, appropriate use of email communications to ensure consistent messaging between student, Director of Clinical Education (DCE), Clinical Coordinator (CC), Clinical Instructor (CI) and/or Site Coordinator of Clinical Education (SCCE), evaluating online resources for accuracy/trustworthiness of information

Proctorio Online Examination Proctoring Software: Proctorio will be used to proctor all online examinations. It is essential for students to have computer and internet connectivity that supports this online testing.

If Proctorio software review and analysis supports the conclusion that cheating was attempted or occurred on an online exam, disciplinary action may be taken against the student per UTC's Student Conduct Policy and Honor Code.

Unicheck Plagiarism Review Software: The instructor of this class reserves the right to submit papers to the UTC Learn /Canvas text-matching software (Unicheck) for review and analysis of originality and intellectual integrity. If the results of the review indicate academic dishonesty, disciplinary action may be taken against the student per UTC's Student Conduct Policy and Honor Code.

Course Assessments and Requirements: *APTA PT CPI 3.0* for the PT is utilized for assessment of student skills. The CI and the student evaluate student performance at the midterm and final utilizing the PT CPI 3.0. Students must review their self-assessment and the CI's assessment of student performance with the CI. Additionally, students complete an evaluation of the clinical experience and clinical instruction utilizing the PTSE1 and PTSE2Midterm and PTSE2Final within EXXAT. The PTSE2Midterm must be reviewed with the CI. See Course Calendar/Schedule for additional required items and associated deadlines. In addition, for successful completion of the course, the student must:

1. Maintain communication with the DCE, at all times, during the clinical education experience. The DCE is the course coordinator for all clinical education courses and will serve as advisor, facilitator, and monitor.
2. Contact the SCCE prior to the beginning of the experience to confirm arrangements, ensuring all clinical requirements (see #9 below) and facility-specific paperwork are completed as required by the facility.
3. Review information for the assigned site on the site's website and within the site details in EXXAT, including a thorough review of the affiliation agreement (contract).

4. Be familiar with the PT state practice act that would apply to the site based on location.
5. Demonstrate no safety concerns for any of the 12 items in the PT CPI 3.0.
6. Submit all assignments prior to and during the clinical education experience, in the required manner, by the published deadlines by the DCE, CC, CI, and/or SCCE.
7. Not fail an active Learning Contract.
8. Provide evidence of personal health insurance coverage, which must be maintained throughout the clinical education experience. Students are financially responsible for any medical care (emergency or non-emergency) received as a result of the clinical education experience.
9. Meet all health and safety requirements of the clinical education assigned site. It is the responsibility of the student to communicate with the site/SCCE/CI to identify the requirements of the assigned clinic site and to provide evidence of completion for all items in the manner (mechanism and timeframe) defined by the facility and/or the educational program. Information may be found in the clinic site's Requirements and/or Documents section in EXXAT, but the SCCE may provide additional and/or replacement items. Students must upload all signature pages, certificates or other evidence of training or completed items to the appropriate folder in EXXAT Additional Required Documents. Failure to meet this requirement may result in a delay to the beginning of the experience, and ultimately jeopardize timely completion of the course.

*Make-up plans = additional working days to make-up for missed time (weekend or extension to scheduled end date), or any plan created due to planned or emergency absence of the CI without the student being assigned to another licensed PT who can serve as a CI for the duration of the primary CIs absence.
- Any half-day or more absence is required to be made up in one day (cannot be completed incrementally or with early ins and/or late outs)
- Any absence less than a half a day may be made up incrementally

May include:

- Up to 4 hours of observation per discipline (not per individual) available at the site, not to exceed 24 hours across the 15 weeks
- Up to 16 hours of surgical observations across the 15 weeks
- Up to 1 full workday of observation in a different setting offered by the same site (ex. If working in outpatient at a hospital, may observe acute care in related areas)
- Weekends
- Days added beyond scheduled end date. Must be added consecutively to scheduled end date (ex. Would begin on Monday, April 15, 2024, and continue until all missed days successfully completed – should make-up days extend to NPTE testing dates, the student is permitted to be absent for the day before testing and the day of testing)

May not include (not limited to the following list):

- Home assignments
- Early ins or late outs

All make-up plans require approval by the DCE in advance if due to planned CI absence, as soon as the student is made aware of a plan if due to an emergency CI absence, within 2 days of student returning to clinic if due to student emergency absence (no absences permitted other than emergency absences for students, unless defined in Course Attendance Policy items A-E below).

10. Attend all scheduled days of the clinical education placement, based on the CIs schedule. If the CI has a planned or emergency absence, and the student is assigned to another licensed PT with a regular working schedule, no communication with the DCE is required (students and CI/SCCEs should always feel welcome to loop in the DCE, as desired). If another licensed PT is unavailable, the student must submit the make-up plan to the DCE for approval prior to the CI's absence if planned, as soon as becoming aware of the make-up plan if the CI's absence is an emergency and within 2 days of returning to the clinic if due to student emergency absence. (See Course Attendance policy for more absence information)

11. Make-up any emergency-related absences (no other absences permitted outside of those defined in the Course Attendance Policy items A-E below) with the make-up plan coordinated by the student and CI and/or SCCE, and approved by the DCE prior to the make-up plan being completed (lack of prior approval may require additional work to fulfill make-up requirements). *Students must submit absence and make-up plan information into MyLeave in EXXAT *after* completion of the make-up plan.

12. Take necessary supplies (goniometer, reflex hammer, measuring tape, stethoscope, gait belt, etc.) and texts/notes to clinical setting each day of the experience.

13. Adhere to all policies and procedures of the clinical site. Failure to do so may result in termination of the experience by either the site or the DCE.

Course Grading

Course Grading Policy: Narratives must be provided to support performance ratings selected for each of the 12 items within the PT CPI 3.0 for the student to gain credit. All items must be marked at Entry-Level performance by the end of the clinical education experience, and narrative submissions must support the Entry-Level performance rating. There is no requirement for performance at the mid-term; however, significantly low ratings may elicit additional requirements for the student by the DCE and/or site. All requirements identified in the Course Assessments and Requirements section above must be met, in addition to Entry-Level performance ratings and supporting narratives per rating must be achieved for the student to

successfully complete the clinical education course and receive a Satisfactory grade. Otherwise, a grade of No Credit is applied.

Instructor Grading and Feedback Response Time: The DCE will provide any necessary feedback to the PT CPI 3.0 within 2 weeks of the mid-term submission and within 1 week of the final submission.

Course Policies

Late/Missing Work Policy: The student will complete all assignments made by the DCE, CC, CI, SCCE (or designees) willingly, thoroughly, promptly, and satisfactorily. Additional proof of completion may be required, at any time. The consequence of failing to meet requirements may result in interruption of the clinical education course. A Learning Contract may be employed to direct successful completion of future activities and/or behaviors. The DCE will generate a Learning Contract that includes objective information about the event as well as requirements and associated consequences moving forward (up to termination from the program). The Learning Contract will then be reviewed and signed by the DCE, PT Department Head and the student and maintained in the student record within the PT program.

Course Attendance Policy:

1. Students must attend all days of the clinical experience, January 2-April 12, 2024. Students are expected to work the clinic/CI's schedule, regardless of university closings or weekend assignments. If the student's assigned CI has a scheduled or emergency day off that prohibits the student's ability to complete the regular work week, it is the student's responsibility to ensure that an adequate make-up plan has been implemented by the CI and/or SCCE and is approved by the DCE. Opportunities may include working with another licensed PT, shadowing other disciplines, adding weekend days, or extending the end date of the clinical education experience. (See Make-up Plan definition and item 10 of Course Requirements and Assessments above.)
2. Students are expected to be on time. If the student experiences an **emergency** that prevents attendance or will require tardiness, **the student must notify the a) DCE via text (423-504-8767 – required) immediately upon determining an absence will occur, and b) the Clinical Instructor and/or SCCE via the method defined on the first day of clinic (determined by the clinic site's preferences). In case of illness, students must notify the DCE, SCCE/CI at least 1 hour prior to the student/CIs scheduled start time for that day, via mechanisms defined above.** If voice mail is utilized initially per SCCE/CI preference, it is the responsibility of the student to follow-up with the at regular intervals throughout the day until direct contact is made (either via phone or email response to voicemail) to ensure all necessary contacts have been made. Missed time may delay completion of degree

requirements, and thus, graduation, and could jeopardize the student's continuation in the clinical experience.

3. **There are no excused absences in Clinical Education.** All appointments and events should be scheduled prior to beginning or after ending Clinical Education placements, or during non-clinic working hours, including weekends, in such a way that the schedule (including necessary travel) does not overlap with the clinical placement. Students are welcome to review event details with the DCE should a path be available to facilitate student participation in the desired event. Frequent tardiness is a professionalism issue and may result in failure of the clinical education course.

4. **Students and CIs and/or SCCEs are not permitted to independently determine impacts of absences or complete make-up plans without prior DCE approval.** Full day absences require full day make-up to maintain the integrity of the placement. Because typical clinical education includes assignments outside of clinic time and overtime, we cannot accept home assignments/research/clinic work or early ins and late outs as make-up time. If the site is unable to accommodate requirements noted, the student must contact the DCE within two days of returning to the clinic to determine additional remediation work.

Additionally:

A. Students are permitted one full clinic day to participate in job interviews (or two half days), pending approval in advance by both the CI and DCE.

B. Students who are pursuing residencies programs where timelines include interviews during the clinical education timeframe must submit the residency information to both the PT Department Head and DCE for review at least 2 weeks in advance of the anticipated response time by the program for interviews. Make-up time is left to the discretion of the DCE and site.

C. Students who have a conference proposal or abstract (education session, platform, poster) accepted for presentation at state or national conference may petition the department head for permission to miss class and/or clinical education days to attend the conference for their presentation and engagement in conference professional development activity. In the case of clinical education, the director of clinical education will discuss the opportunity with the site coordinator of clinical education and/or clinical instructor to determine whether the absence is possible without compromising patient care. This information is provided to the department head for their use in consideration of the student's petition. The department head will consider the presentation date and time and conference location/travel requirements when approving or denying the petition and in setting the number of absence days approved, as well as review student performance over the previous semesters. Note: In Clinical Education IV, time spent at conference may be required to be made up, per clinic

preference and/or student performance. In Clinical Education I – III, all time missed will be made up.

D. Students are permitted to attend internal (defined as presented or hosted by the clinical education site) continuing education opportunities, if their CI is also in attendance, without being required to make-up the missed clinic time. However, students are not permitted to attend external continuing education or professional development activities, regardless of their CI attendance (see item 10 of Course Requirements and Assessments above). *Grand Rounds for students or other student-specific events generated by the company/SCCE are considered exempt from this policy and students are expected to attend, as required by the company/SCCE. After-hours student events do not replace clinic time if attendance is optional. If attendance is required, student must notify the DCE in advance to discuss the event for the DCE to determine make-up requirements.

E. If the CI is off, utilizing a paid holiday, the student is permitted to be off, as well. If the CI is off for any other reason, the student must work the day (see item 1 of the Course Attendance Policy above).

No other excused or unexcused absences exist for CE placements.

Course Participation/Contribution: Students are expected to proactively communicate with the DCE, CC, CI and/or SCCE. Students are expected to present themselves to their peers, DCE, CC, CI(s) and SCCE in a professional manner, at all times. Collegiality is both permitted and expected. Professional conduct includes, but is not limited to, following the clinic's dress code, following the Code of Ethics identified by the APTA, demonstrating respect for patients, peers, healthcare professionals and the community, punctuality with all assignments and demonstrating polite, personable, engaging and friendly behaviors.

Clinic Preparedness Policies: Students are expected to prepare for clinic, outside of working hours, through any necessary or assigned readings and activities. Students who are not prepared for clinic may be asked to leave, constituting an absence, and must make up the clinic time, at a later date (item 11 of Course Assessments and Requirements above would be employed in this case).

Classroom and Lab Technology Policy: Technology (phones, tablets, computers, etc.) should be used for educational purposes only during working hours. The clinic site is not responsible for the safety of any such device and students bring them to clinic at their own risk.

Communication: Class announcements are made through UTC Learn/Canvas and UTC email. UTC email is the official means of communication between instructor and student at UTC. Please check your UTC email and UTC Learn/Canvas M-F at least daily. The

DCE, CC, CI and SCCE may utilize the student's personal phone number in emergency situations via phone calls or text messages.

Course Learning Evaluation: Course evaluations are an important part of our efforts to continuously improve learning experiences at UTC. Toward the end of the semester, students will be emailed links to course evaluations. We appreciate growth-oriented feedback and the time taken to complete these anonymous evaluations.

Course Calendar/Schedule: Paperwork and documentation requirements prior to clinic start date are communicated via cohort class tile in Canvas. See below for deadlines associated within the placement timeframe (students are expected to communicate with the DCE and/or CC in advance of any deadline below if difficulty in completing the item arises):

January 2, 2024: First day of clinic

January 4, 2024: Student must attest, in a Canvas Assignment, to reading both the PHYT 7332 CE IV syllabus in Canvas, as well as the PT State Practice Act for the state in which their clinic is located.

January 4, 2024 (the following 2 items require collaboration with CI(s))

- Students must *generate and send an email* to the DCE (Carolyn-Padalino@utc.edu), copying in the CC (Janine-Boehme@utc.edu) and CI. The student must submit the following information:
  - Whether or not the CI already has PT CPI 3.0 access.
    - If so, which email address do they use to access the PT CPI 3.0 (will be either their APTA member associated email account, or the email address utilized to generate the free account they created to complete the training in the APTA Learning Center and access the PT CPI 3.0 system)
    - If not:
      - If an APTA member, what email address is associated with their member account (will be utilized by the APTA for training and to connect to the PT CPI 3.0)
      - If not an APTA member, what email address will they use to generate their free account to complete the PT CPI 3.0 training and access the system.

*if have more than one primary CI, and both CIs wish to submit narrative comments and anchor ratings to the PT CPI 3.0, student must submit one email per CI.

- Students must *complete or update SupervisorInformation* (**ALL** fields – not only red asterisk items – submit "n/a" if/where appropriate to indicate not overlooking the field) within EXXAT To Do List for the Clinical Education IV 2024 placement – make sure to verify that **primary email is the email the CI prefers to utilize for communication with the DCE and CC.**
  * if you pass your device to the CI for completion of SupervisorInformation, it is your responsibility to ensure they complete everything as required above before submitting. If items are missing, the entry will be deleted and the student will be required to resubmit)

*the student is responsible for notifying the DCE, in advance, if January 4th is not the second day of clinic and must provide the date of the 2nd day of clinic for the DCE/CC to anticipate the above mentioned email and ability to review CI Details

*should any other licensed PT provide supervision 16 hours or more, CI details must be entered for requirement tracking, accreditation reports and for the PT(s) to receive a certificate for continuing education credit (students will clarify final supervisory hours per PT/CI within the CI Clinical Hour submission due April 12, 2024 – any previous anticipated supervision % submitted for other CIs will not be edited)

February 16, 2024: Mid-term CPI 3.0 completed by both CI and student (do not sign off fully on comments until review comments and ratings in person with CI, but must be fully signed off by all necessary individuals after reviewing to complete the item)

February 16, 2024: PTSE2MidTerm within EXXAT To Do List – assessment of CI engagement (must be reviewed with CI – will have Canvas Assignment associated with student attesting to having presented the Mid-term PTSE 2 to CI – professional development opportunity for student to provide effective and growth-oriented in-person feedback and for CI to be aware of potential areas for improvement over the remainder of the clinical education experience)

April 12, 2024: Last day of clinic

April 12, 2024: Final CPI 3.0 completed by both CI and student (do not sign off fully on comments until review comments and ratings in person with CI, but must be fully signed off by all necessary individuals after reviewing to complete the item) per requirements noted in Course Grading Policy above

April 12, 2024: PTSE2Final within EXXAT To Do List – assessment of CI engagement as compared to mid-term (should be reviewed with CI)

April 12, 2024: PTSE1 within EXXAT To Do List – site information – student must review content of PTSE 1 with CI to ensure accurate reflection of lifespan, systems and settings – will have Canvas Assignment associated with student attesting to review with CI prior to submission

April 12, 2024: MyLeave report within EXXAT To Do List– verify complete in EXXAT (no green checkmark if no leave reported)

April 12, 2024: ClinicalHour within EXXAT To Do List – verify/submit total number of supervisory hours provided by CI(s) – students must have added CI Details for any PT who provided supervision for 16+ hours not added to date and complete CI Clinical Hour for them, as well, per instructions in January 4 item above) (possible for no green checkmark to appear if nothing changed from anticipated hours per SupervisorInformation anticipated % supervision)

Course Syllabus/Schedule Change: This syllabus and course calendar/schedule provides a general plan for the deadlines required for research projects approved for this course. However, changes may be made at the discretion of the faculty as warranted. Students will be notified of any changes as soon as possible via in-meeting announcement, UTC Learn/Canvas announcement, and/or email.