

**DOCTOR  
OF  
PHYSICAL THERAPY  
PROGRAM**

**Clinical Education Handbook**



**ANGELO STATE UNIVERSITY  
Archer College of Health and Human  
Services  
Doctor of Physical Therapy Program  
(Revised September 2017)**

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Angelo State University  
Archer College of Health and Human Services  
Doctor of Physical Therapy Program

**SECTION I: ACADEMIC/CLINICAL EDUCATION PROGRAM**

**Academic Program**

**Vision Statement**

The Department of Physical Therapy DPT Program at Angelo State University will be a leader in evidence-based, research-focused, practice-oriented preparation of physical therapists.

**Program Mission**

The mission of the physical therapy program at Angelo State University is to prepare autonomous practitioners, contribute to the knowledge of the field, and provide valuable service to meet the needs of the community.

**Clinical Education**

The clinical education portion of the curriculum supports the mission and vision of the program by striving to meet the following goals:

- Provide hands-on experiences with “real patients and situations” under the supervision of a licensed physical therapist or another appropriate professional in a variety of settings and locations. These experiences are designed to challenge students to master skills and techniques while developing professional behaviors and attributes that satisfy essential criteria necessary for successful entry into the profession of physical therapy upon graduation. These skills and techniques are taught in the classroom and practiced in the laboratory prior to applying them to clinical situations with clients.
- Obtain mastery of clinical skills and professional behaviors that will prepare the student for entry into the profession of physical therapy upon graduation.

## CURRICULUM

Building on the study of normal structure and function, the systems-based lock-step curriculum presents the clinical art and science of physical therapy in an integrated manner organized around four primary body systems (cardiopulmonary, integumentary, musculoskeletal and neurosensory). Concepts between and within each course are cumulative and continued enrollment depends upon mastery and use of previous concepts. Practical clinical experiences are integrated into the academic program at the successful completion of major areas of study. **Students cannot progress to each full-time clinical internship without achieving mastery of the previous didactic portions of the curriculum.**

### A. Year 1

<b>1<sup>st</sup> Term – Summer</b>		<b>Credits</b>
PT 7311	Clinical Exercise Physiology	3
PT 7710	Clinical Anatomy	7
	Total	<hr/> 10

<b>2<sup>nd</sup> Term - Fall</b>		
PT 7240	Evidence-based Practice in Physical Therapy	2
PT 7320	Foundation in Clinical Pathology	3
PT 7330	Functional Biomechanical Relationships	3
PT 7331	Motor Control & Clinical Application	3
PT 7550	Fundamentals of Physical Therapist Examination	5
	Total	<hr/> 16

<b>3<sup>rd</sup> Term – Spring</b>		
PT 7221	Cardiopulmonary Pathology	2
PT 7232	Foundation for Systems Review	2
PT 7241	Clinical Research for Physical Therapy	2
PT 7322	Musculoskeletal Pathology	3
PT 7651	Acute Care Management	6
	Total	<hr/> 15

### B. Year 2

<b>4<sup>th</sup> Term – Summer</b>		
PT 7220	Special Topics in Physical Therapy ( <i>Elective</i> )	(2)
PT 7212	Introduction to Neuroscience Concepts	2
PT 7234	Education & Communication for Physical Therapy	2
PT 7260	Introduction to Clinical Education and Professionalism	2
PT 7152	Introduction to Therapeutic Exercise	1
	Total	<hr/> 7

**B. Year 2 (continued)**

<b>5<sup>th</sup> Term Fall</b>		<b>Credits</b>
PT 7261	Acute Care Practicum	2
PT 7242	Evidence-based Practice Seminar I	2
PT 7353	Musculoskeletal Examination and Management I	3
PT 7224	Neuropathology I	2
	Total	<hr/> 9
<b>6<sup>th</sup> Term – Spring</b>		
PT 7325	Neuromuscular Pathology II	3
PT 7336	Management of Physical Therapy	3
PT 7556	Musculoskeletal Examination and Management II	5
PT 7235	Disability Studies	2
	Total	<hr/> 13

**C. Year 3**

<b>7<sup>th</sup> Term – Summer</b>		
PT 7220	Special Topics in Physical Therapy ( <i>Elective</i> )	(2)
PT 7233	Health Care Issues for Physical Therapists	2
PT 7462	Musculoskeletal Practicum	4
	Total	<hr/> 6
<b>8<sup>th</sup> Term – Fall</b>		
PT 7243	Evidence-based practice Seminar II	2
PT 7337	Operational Management of Physical Therapy	3
PT 7354	Essentials of Rehabilitation Practice	3
PT 7655	Neuromuscular Examination and Management	6
	Total	<hr/> 14
<b>9<sup>th</sup> Term - Spring</b>		
PT 7663	Neuromuscular Practicum	6
PT 7344	Evidence-based Practice Seminar III	3
	Total	<hr/> 9
	<b>Total Credits</b>	<hr/> <hr/> <b>99</b>

**Introduction to Clinical Practice**

Students must enroll in and pass PT 7260 Introduction to (Clinical Education and Professionalism) and PT 7234 (Education and Communication for the Physical Therapist) as part of the orientation to the clinical education portion of the curriculum. These courses are designed to introduce the student to issues and problems other than direct patient care that are a part of the clinical experience. The topics that are covered in this course include but are not limited to:

- Clinical instructor training
- The Clinical Performance Instrument (CPI)
- Written assignments in the clinic
- Communication

- Teaching and learning
- Supervision and delegation
- The health care team and team conferences
- Cultural competence
- Values and Ethics
- Professional behavior
- Sexual harassment, domestic violence and inappropriate patient sexual behavior
- Stress and time management
- Occupational Health and Safety Act and safety

### **Evaluation of the Clinical Education Program**

#### Student Performance

##### Clinical Performance Instrument

The instrument used for evaluation of student performance in the clinic is the Clinical Performance Instrument (CPI) (**Appendix 1**).

##### Grading Criteria

The Acute Care Practicum, the Musculoskeletal Practicum and the Neuromuscular Practicum will be graded on a pass/fail basis. The Academic Coordinator of Clinical Education (ACCE) has the ultimate responsibility for assigning grades. The following requirements must be met for successful completion of the course (passing grade):

- Meets expectations on the CPI that are listed in the course syllabus.
- Completes all clinical assignments in a satisfactory manner and on time according to the course syllabus.
- No problems with Red Flag skills or Significant Concerns at Final Evaluation.

Students who fail to submit required assignments or who submit assignments late are in danger of failing the practicum and may not be eligible to attend class upon return to campus.

#### Clinical Instruction and Clinical Site

Clinical instructors are evaluated using the Clinical Instructor Evaluation Form (**Appendix 9**) by the ACCE annually in each year that they supervise a student physical therapist. This form was developed using *A Normative Model of Physical Therapist Professional Education: Version 2004* and ASU's *Clinical Education Handbook*. Information on each Clinical Instructor is collected from the Clinical Instructor copy of the Clinical Performance Instrument (**Appendix 1**), the facility's Clinical Site Information Form (CSIF) (**Appendix 2**), Student Mid-term & Final assessment of the Clinical Experience (**Appendix 3**;

questions 22 – 26), Mid-term Faculty Site Visit Evaluation form (**Appendix 4**), clinical debriefing sessions with students and faculty, and other communication with the Clinical Instructor, Center Coordinator of Clinical Education and the student physical therapist. Results are compiled, analyzed, summarized, and discussed by the ACCE with the faculty and Program Director. Data is used to determine appropriateness of clinical faculty and sites for continuing student placement.

The clinical education experiences of the students are evaluated yearly in multiple ways. The number and variety of clinical sites are determined from the following: CSIF, pre-placement visits by the ACCE, student midterm and final site evaluations, and student placement request forms. Sites are classified by primary and secondary services, and patient/client populations are available for student placement in a variety of settings over the continuum of care. The Clinical Site database is used to track the types and number of clinical sites established and those in process.

There is an assessment of the clinical education program as a whole to determine the adequacy of the program in meeting the needs of the students, as well as fulfillment of the mission and philosophy of the DPT program by using an electronic survey of the Clinical Practicum Course Outcomes form (**Appendix 5**). Whenever possible, students are placed in clinical sites of their choice; however, students may be placed in clinical sites that emphasize their educational needs. The students quantitatively evaluate the clinical experience at midterm and again at the end of the experience using the Clinical Site Evaluation Form (**Appendix 3**) and qualitatively with an oral debriefing session after each practicum. All data are analyzed, summarized, and provided to core DPT faculty.

#### Problem Resolution (Program and Clinical)

Complaints and/or problems which arise within the Department of Physical Therapy should be brought to the attention of the Program Director and be resolved expediently with respect for all parties involved. All activities and records regarding problem resolution shall be kept confidential, as applicable to institutional policy and Texas state law. The faculty member (e.g., Course Coordinator, Academic Advisor, Program Director, etc.) is responsible for recording the concern and establishing a plan of resolution. *Complaints and grievances outside the university due process will be managed according to departmental policy on the matter (**Appendix 11a**).*

The following procedure is recommended to resolve issues which may arise using the Problem Resolution Form (**Appendix 11**).

1. Problem resolution begins with open and confidential discussion between the parties involved as soon as the problem is identified.
2. The Program Director will be notified by either or all parties. If the problem requires intervention, and/or if not resolved after Step 1, the completed Problem Resolution form shall be forwarded to the Program Director.
3. The Program Director will notify the Department Chair if the problem has not been resolved within the Program.
4. The complainant will be advised to follow the steps outlined above if the complainant brings the problem directly to the Program Director.
5. The Program Director will investigate each incident fairly and confidentially.
6. The Program Director will offer suggestions and strategies for resolution of the problem to the complainant.



7. The Problem Resolution Form shall be labeled “confidential” and kept on file in the Physical Therapy Program for five years in a locked file cabinet in a locked office.
8. As needed, the Program Director may refer the incident to the Department Chair who may in turn refer the incident to the Office of Student Affairs and Enrollment Management as indicated. The Department of Physical Therapy aligns itself with Angelo State University procedures under the Code of Conduct located at <http://www.angelo.edu/student-handbook/code-of-student-conduct/>, and the Community Policies located at <http://www.angelo.edu/student-handbook/community-policies/>. Both of these documents are located in the Angelo State University Student Handbook <http://www.angelo.edu/student-handbook/>

## **SECTION II: CLINICAL SITES**

### **Criteria for Clinical Sites**

#### **Selection of a Clinical Site**

The academic faculty, primarily the ACCE, is responsible for selecting, establishing, developing and evaluating appropriate clinical sites. The primary consideration is the desire of the facility to be involved in the education of future physical therapists. The administrative and professional staff of the clinical facility must support this desire.

Sites are selected based on the following minimum criteria:

- The clinical facility's philosophy and objectives for patient/client care and education are similar to and compatible with those of the physical therapy educational program.
- Clinical staff members meet the legal requirements to practice in their setting and maintain ethical standards of practice.
- The programs for the clinical experience reflect the objectives of the individual student, the educational program, and the clinical facility.
- The clinical staff evaluates and reports on the performance of the student as well as provides consistent and constructive feedback to the student throughout the clinical experience.
- The clinical facility has a variety of learning experiences available during the clinical experience.
- The clinical facility has an open, stimulating, learning environment that is appropriate for the learning needs of the student.
- The clinical facility has more than one professional physical therapist on staff; exceptions may occur if appropriate supervision exists.
- The roles of the various types of physical therapy personnel at the clinical facility are clearly defined and distinguished from one another.
- The clinical facility is willing to sign a legal agreement (STUDENT CLINICAL EXPERIENCE PROGRAM AGREEMENT / INSTITUTIONAL AFFILIATION AGREEMENT **Appendix 6**) or facility generated document with Angelo State University.
- The clinical facility maintains approval from the proper local, state and federal government agencies as well as from the appropriate national accreditation agency(s).

#### **Establishment of a Clinical Site**

When a potential site has been identified, the ACCE, clinical education or program office coordinator will contact the facility regarding its potential to become a clinical site for students.

- To determine the suitability of entering a Student Clinical Experience Program Agreement with the facility a Clinical Affiliation Contract Initiation form (**Appendix 7**) will be completed by the contact person and reviewed by the ACCE.
- A fully executed Student Clinical Experience Program Agreement/Institutional Affiliation Agreement (**Appendix 6**) or Facility Contract that outlines the responsibilities of all parties in the agreement must be on received and on file prior to student placement in the facility. The process for an Angelo State University contract is as follows:
  - The ACCE or Clinical Education Office Coordinator sends the contract electronically or by regular mail to the site
  - Contract negotiations are handled by Angelo State University's Office of Materials Management under the advice of Texas Tech University System's legal counsel.
  - All contract negotiations are resolved before the contract is submitted to the university administration for approval.
  - A minimum of two (2) originals are signed once the contract is acceptable to both

- parties.
- Administration approval includes the Department Head of Physical Therapy and/or the Program Director of Physical Therapy.
  - An executed original contract is kept in a locked file cabinet in the Clinical Education Office Coordinator's office with a copy distributed to the Office of Materials Management.
- The facility may choose to use its own contract. In this case, the procedure for approval is as follows:
    - The contract is submitted to Angelo State University's Office of Material Management for review to ensure that all necessary elements are included to minimize risk to the university.
    - Any amendments are negotiated with the advice of Texas Tech System's legal counsel.
    - A minimum of two (2) originals are signed once the contract is acceptable to both parties
    - Administration approval includes the Department Head of Physical Therapy and/or the Program Director of Physical Therapy.
    - An executed original contract is kept in a locked file cabinet in the Clinical Education Office Coordinator's office with a copy distributed to the Office of Material Management.
  - The Physical Therapy Department maintains a database with the contract information. The database allows for tracking of contracts that are in need of renewal. The renewal process is handled as outlined above.
  - Clinical Site Information Form (CSIF) (**Appendix 2**) and additional materials that will aid the student in making a choice about that facility are requested from the facility upon the receipt of an executed document.
- Inter-state Clinical Education Agreements
    - Angelo State University is a member of the State Authorization Reciprocity Agreement (SARA). When a student requests an out of state clinical location, the ACCE will determine if the state is a member of SARA. If the state is a member, no additional authorization is required from the state for the student's clinical practicum.
    - Angelo State University's Department of Materials Management is responsible for ensuring that proper state approval is in place for non-SARA state practicums.
    - The ACCE will contact the Department of Materials Management when a student has selected a Non-SARA state for a clinical location.
    - A representative of the Department of Materials Management will contact the designated state agency for securing state approval.
    - A list of approved practicum states is located in the office of the ACCE and Department of Materials Management.
    - No student will be allowed to participate in an inter-state practicum without proper state approval.

### **Benefits of Participation**

Through cooperation, the University and the Clinical Facility will promote and develop excellence in patient care and education. Further, it is acknowledged that the educational program at Angelo State University will be enhanced through the use of the staff, resources, and facilities at the Clinical Facility and that the Clinical Facility will benefit through the stimulus of association with the University, its faculty members, resources, facilities, and its students. The University provides continuing education

courses at a discounted rate for Clinical Facilities that accommodate students. Faculty members serve as resources to Clinical Facilities when searching for evidence-based practice methods. The University is receptive and encourages research collaboration between Faculty, Students, and Clinical Facilities.

### Adjunct Faculty

Adjunct faculty are local clinical personnel who teach portions of the curriculum or regularly accept ASU students for clinical practicums, observation, and integration experiences. A listing of adjunct faculty may be found in the Angelo State University Catalog.

### Evaluation of a Clinical Site

A clinical site is evaluated continuously by the ACCE with assistance from other faculty members, students and the clinical staff (**Appendix 3, Appendix 4, Appendix 9**). Results of the evaluation may be used to determine the continued use of a site for the education of the students. Information for the evaluation is gathered from several sources including:

- Student feedback given at the mid-term site/phone visit and during de-briefing sessions after return to campus.
- The student evaluation of the facility that is completed at the end (**Appendix 3**) of each student experience.
- The review of the facility and staff that occurs with each on-site or phone visit by the ACCE or a faculty member. (See **Appendix 4**, Mid-term Site Visit Evaluation Form, **Appendix 8** Report of Onsite/Phone Visit).
- Feedback from supervisory personnel including the CCCE and/or the Clinical Site's Program Director.

The areas addressed in these sources will include evaluation of the willingness of each clinical faculty member to participate in the education of student physical therapists, the appropriateness of supervision and learning experiences offered by the clinical faculty member, and the ability to evaluate each student's performance thoughtfully and accurately.

The assessment form (**Appendix 9**) for clinical faculty is based on resources from the American Physical Therapy Association including the Normative Model Version 2004, and the Clinical Site Information Form (CSIF). Each clinical facility is encouraged to update their CSIF every two years with information on current staff, participation in continuing education courses; awards and recognitions received for professional and community activities; scholarly activities conducted, completed and/or published; and community services performed.

The information gathered from all sources will be used to identify topics for clinical faculty development activities coordinated by the ACCE.

### Renewal of a Clinical Site

The continued use of a clinical site is a mutual decision between the university and the facility. The "STUDENT CLINICAL EXPERIENCE PROGRAM AGREEMENT/INSTITUTIONAL AFFILIATION AGREEMENT" initiated by Angelo State University automatically renews annually unless either party notifies the other party in writing of its intent not to renew. Facility generated contracts are renewed according to the specifications in the agreement.

## **Key Personnel**

### Clinical Advisory Board

The Clinical Advisory Board (**Appendix 10**) is composed of local clinical personnel from a

variety of clinical sites who have agreed to act as consultants for the ACCE. Their duties are as follows:

1. Provide current news and information from their site and the local medical community.
2. Provide feedback to the core faculty regarding the strengths and weaknesses of the preparation of the students and the administration of the clinical education program.
3. Offer suggestions for improvement of all aspects of the clinical education program.
4. Provide current information about the impact of current issues facing clinicians including pending and current state and federal regulations, reimbursement, etc.
5. Evaluate and respond to ideas of the core faculty to improve the quality of the clinical education program.
6. Offer suggestions for topics for training sessions and other means that the core faculty can use to prepare and support the clinical education faculty and local clinicians.

#### Center Coordinator of Clinical Education (CCCE)

The facility is responsible for designating a person who will act as the liaison between the school and the facility. Minimum recommended requirements for the CCCE include a current state license to practice physical therapy or related health discipline, three (3) or more years of clinical practice preferably in a variety of settings, demonstrated competence in the area of practice, evidence of continuing education, and formal approval from the facility's administration for participation in the program. The CCCE must be available to the student and the clinical instructors when students are in the clinic. This person is responsible for coordinating the student's educational program while in the facility.

Specific responsibilities of the CCCE include:

- Identifying, organizing, developing, coordinating and evaluating the specific learning experiences within the clinical educational facility.
- Organizing and coordinating the activities of the student(s) assigned to their facility.
- Participating in clinical faculty development programs.
- Maintaining communication with the Academic Coordinator of Clinical Education, Clinical Instructor and the assigned student during the Practicum (i.e., notification of student progress and problems). See policy (page 17) regarding problem resolution and **Appendix 11** for Problem Resolution Form.

#### Clinical Instructor (CI)

This person is a licensed physical therapist employed by the clinical center, who is designated by the Center Coordinator of Clinical Education (CCCE) to supervise and evaluate the activities of the student physical therapist(s) assigned by the CCCE. The CI will be required to have a minimum of one year full-time experience in clinical practice, have successfully completed the APTA's training module on the Clinical Performance Instrument, demonstrate a willingness to be involved in the clinical education program, understand the goals and philosophy of the physical therapy program, evaluate each student's progress with attention to accuracy and supervise each student appropriately. This is the person to whom the student is directly responsible. In smaller facilities, the CCCE and the CI may be the same person. It is desirable for the CI to have completed a basic CI Credentialing Course through the APTA or another agency, i.e., a consortium.

Specific responsibilities of the CI include:

- Assisting with the identification and development of the learning experiences and resources for the student practicum.
- Directing and supervising the activities of the student(s) assigned to them by the CCCE.
- Evaluating each student accurately.
- Participating in clinical education meetings and other clinical faculty development programs.
- Maintaining communication with the Academic Coordinator of Clinical Education (ACCE), Center

Coordinator of Clinical Education (CCCE) and the assigned student during the Practicum (i.e., notification of student progress and problems). See policy regarding problem resolution (page 17) and **Appendix 11** for Problem Resolution Form.

#### Evaluation of CI:

- The CI's overall performance is rated on a Likert scale from 1-5. One representing poor performance and 5 excellent performances. The program requires a mean of  $\geq 3$  (good) for continued assignment of students to the CI.
- The CI's performance is scored by calculating a mean on the 10 categories on the Clinical Instructor Evaluation Form (Appendix 9) and categories 5-10 and 12-21 on Section II of the final Physical Therapy Student Evaluation of Clinical Experience and Clinical Instruction (**Appendix 3**).
- The CI's rating and qualifying comments are entered into the Access data base under CI Rating.

### **Information Provided to Clinical Site**

The information provided to the clinical site is governed by the Federal Family Education Rights and Privacy Act of 1974 (FERPA). All clinical sites receive the information listed below. This information is mailed and/or transmitted electronically to the CCCE four to six weeks prior to the start of the clinical rotation.

#### Information Provided by the ACCE:

1. Clinical Education Handbook (on-line at Program website).  
<http://www.angelo.edu/content/files/22082-dpt-student-clin-ed-handbook>
2. Qualifications and responsibilities of the CI
3. Instructions on how to enroll in the APTA's Clinical Performance Instrument (CPI) training and CPI log in directions.
4. CPI anchor definitions
5. Syllabus with the course objectives for the specific clinical experience. The program of study and syllabi from completed academic courses will be provided as needed or upon request of the site.
6. Student and University liability insurance information.
7. Health and insurance information as required by the clinical site.
8. Current CPR certification
9. URL link to the University's Clinical Educator's webpage:  
[http://www.angelo.edu/dept/physical\\_therapy/clinical\\_educators/](http://www.angelo.edu/dept/physical_therapy/clinical_educators/)

#### Information Provided by the Assigned Student:

1. A letter of introduction (See Guidelines in **Appendix 12**)
2. Student Self-Assessment of Competency (**Appendix 13**).
3. Criminal Background Check if requested by the clinical site.
4. Drug screen if requested by the site.

From time to time, the ACCE may share information about the performance of a specific student with the CCCE in order to assist the clinical site in planning and delivering appropriate learning experiences.

At mid-term and conclusion of the clinical assignment, the student will complete the student evaluation of the clinical experience (**Appendix 3**). The mid-term and final evaluation will be shared with the Clinical Instructor. The student will also send a thank-you letter to the clinical instructor after

completion of the clinical experience.

### Responsibilities of a Clinical Site

#### Legal

The legal responsibilities of the clinical site are delineated in the legal agreement (e.g., STUDENT CLINICAL EXPERIENCE PROGRAM AGREEMENT / INSTITUTIONAL AFFILIATION AGREEMENT, **Appendix 6**). Additional responsibilities include but are not limited to:

- Orienting the student to the appropriate policies and procedures.
- Providing learning experiences appropriate to the learner's level of knowledge.
- Evaluating the student's performance.
- Providing appropriate facilities for student learning.
- Providing adequate time for conferences between the student and the Clinical Instructor (CI).
- Participating in face to face and/or telephone conferences with the ACCE.

#### Evaluation of Student Performance

The program has chosen to use the APTA's Clinical Performance Instrument (CPI) web version to evaluate student performance in the clinical setting. All users of this document including students, CI's, CCCE's, and the ACCE must complete a 2 hour on-line training offered through the APTA Learning Center that is free and worth 2 CCUs to licensed professionals. Sites will be notified of this requirement at least 1 month prior to the start of a clinical experience. The CI is the person responsible for evaluating the student's performance in the clinical education facility and completing this document. These performance assessments include both formative and summative evaluations. Formative evaluations are in the form of written and/or verbal feedback. It is highly recommended that feedback be given frequently to help the student improve performance on specific skills that the student is attempting to master. See **Appendix 14** for guidelines on "Giving and Receiving Feedback." Summative evaluations are written summaries of the student's progress to that point. These are completed (at a minimum) at the middle and the end of the clinical experience, but may be given and/or be required more frequently as warranted by the student's performance. Students are also expected to evaluate their performance through self-assessment using the CPI.

## **SECTION III: STUDENT PHYSICAL THERAPIST**

### **Requirements for Participation in Clinical Education**

#### General Requirements

Program:

Students must meet the following requirements to participate in each sequence of Clinical Education:

- Professional Behaviors Assessment (**Appendix 15**)
- Mastery level in all didactic course work preceding each clinical internship including a “pass” on all Practical Examinations and Integration Experiences during Exam & Management Courses
- Health requirements (See below)
- Current CPR certification - Each student must provide documentation of valid CPR certification. CPR training may be obtained from the American Heart Association (Level C) or the American Red Cross (BLS, Adult Child Professional Rescuer [2-man CPR]). The Program coordinates CPR training for each cohort during the 1<sup>st</sup> and 3<sup>rd</sup> years. It is the student’s responsibility to maintain CPR certification until graduation. All renewals of CPR certification must be performed in a face to face class with an instructor. On-line renewals of CPR certification are not acceptable.
- Malpractice (liability) Insurance. (See page 13)
- Current health insurance.
- Criminal Background Check\* (CBC).

\*Students are required to get the following checks to meet the requirements of most clinical facilities:

- Statewide - Criminal
- Nationwide - Sexual Offender Index
- Nationwide - Healthcare Fraud & Abuse
- Scan Nationwide - Patriot Act
- Social Security Alert
- Residency History

The program has arranged for the students to get a CBC that includes these checks through an on- line agency ([www.certifiedbackground.com](http://www.certifiedbackground.com), package code NG25) at the students expense.

Students are not required to use this agency.

#### Health Requirements

Students must present documentation of the following health requirements **prior to enrolling** in the Doctor of Physical Therapy program (See Student Health Form, **Appendix 16**):

- Completed Student Health Form which includes student’s blood type
- PPD or Chest X-Ray (If a student has a positive (+) result from the Mantoux/P.P.D., or is unable to take that test due to medical reasons, a chest radiograph will be required).
- Evidence of immunity to Measles, Mumps, and Rubella (MMR) by exposure, immunization (2 doses), or titer.
- Hepatitis B
  - Hepatitis B immunization is a series of three (3) injections that are given over a 6-month period. Students should plan ahead to be sure that they will be able to obtain the third injection before acute care clinical integration during the 3<sup>rd</sup> term. Students have the option to decline (See **Appendix 16**, Hepatitis B Vaccine Declination).



- Evidence of immunity against Chicken Pox by vaccination or titer.
  - Note from physician no longer allowed
- Tetanus/Diphtheria/Pertussis (TDap) vaccine (must be current within last 10 years)
- Meningitis vaccine – (if applicable)– Registrar’s office must have proof before enrolling first-time students
- Poliomyelitis vaccine

Additionally, students must meet the following health requirement **annually**. The student is responsible for presenting documentation of completion of this requirement yearly to the ACCE.

- Tuberculosis (Mantoux/P.P.D). If a student has a positive (+) result from the Mantoux/P.P.D., or is unable to take that test due to medical reasons, a chest radiograph will be required.
- Influenza vaccine is recommended and may be required by clinical site.

Students may receive the required immunizations and/or titers from the Health Department or their own private physician. The students are responsible for any fee charged. Current evidence of immunization requirements are to be met annually throughout enrollment in the physical therapy program.

Documentation must be submitted to the Physical Therapy Program through the Academic Coordinator of Clinical Education (ACCE). Evidence of current immunizations must be presented to each clinical site prior to student’s arrival at the site, so students are responsible for making sure the information is current.

The student must understand that some clinical facilities to which they may be assigned may have **other health and/or safety requirements** that the student will be required to meet at the student’s expense. This includes extra vaccinations, titers, background checks, and drug tests (10 panel).

Female students who become pregnant during any phase of the DPT program will be required to obtain a physician release for Authorization for Clinical Practicum and Laboratory Participation During Pregnancy (**Appendix 17**) to participate in didactic laboratory sessions and clinical practicums. In addition, students may be requested to secure a physician’s medical clearance for certain program activities due to a medical condition that may limit or restrict participation in didactic or clinical aspects of the DPT program (**Appendix 18**).

### Malpractice Insurance

The program purchases liability insurance for each student in the amount of \$1,000,000/\$5,000,000. The insurance covers the student for all activities in the clinical site that are a part of the curriculum until the student graduates and/or is no longer enrolled in the program. This policy is a “student blanket” policy.

### Professional Behavior

Students are expected to exhibit professional behavior at all times while in the clinic. Clinical site faculty evaluates the student’s professional behavior through the Clinical Performance Instrument.

No gum chewing or tobacco use is permitted. The illicit use of drugs and/or alcohol will result in immediate dismissal from the program. Please refer to the section titled “Immediate Removal from the Clinical Experience” on page 17 of this handbook.

### Dress Code/Hygiene

All students and faculty members are required to project a professional image. Students are

expected to dress in a professional manner when in the clinic. Appearance reflects not only upon the individual, but also upon the Angelo State University's Doctor of Physical Therapy Program and the physical therapy profession. If a student appears at a clinical site inappropriately attired, the clinical instructor or site's representative has the authority to require the student to correct the situation.

Students should follow these guidelines for appropriate clinical attire unless the agency specifies alternative attire.

- ◆ **Accepted Clinical Facility Attire with ASU nametag** (issued by the ASU DPT program) should be worn at each off-campus assignment.
- ◆ **Personal Hygiene** - Students should maintain a high level of personal hygiene, be neatly dressed, be well groomed and avoid "stylish" modes of attire during all clinical internships. This includes daily bathing. Hair, including facial hair, should be clean and neatly groomed. Long hair should be tied back to not interfere with patient/client treatment. Fingernails should be kept clean, trimmed short, and free of brightly colored nail polish. Makeup should be light and tasteful. Students are advised to use unscented or very lightly scented soap, deodorant, and shaving and hair products to avoid causing problems for patients/clients who are allergic to fragrances. Students should never use heavy perfumes and colognes.
- ◆ **Closed-Toe Shoes** – Shoes should be kept clean. No sandals, mules, clogs, flip-flops or high heels should be worn. Shoes should always be worn with socks or stockings.
- ◆ **No jeans, T-shirts, Tank Tops or short skirts** – All clothing should present a professional appearance. Button down shirts, polo shirts, blouses and dress slacks are preferred. Shirts or blouses should be tucked in at all times.
- ◆ **Jewelry** - One pair of simple earrings, plain neck-chains and wedding bands are permitted. Avoid large or costume jewelry, as it is a safety hazard. Any jewelry that the student chooses to wear should be kept to a minimum and tasteful.
- ◆ **Body piercings** - limited to 1 earring in each ear.
- ◆ **Visible Tattoos** - must be covered by clothing or bandage.
- ◆ **Gum chewing** – is not permitted for clinical experiences.

### Attendance

Students are expected to attend clinic every day it is scheduled. Students are expected to follow the holiday policy of the clinic, not the University, when in the clinic. **Illness and personal emergencies are the only excused absences after contacting the CI and the ACCE.** Absences for other reasons are considered unexcused. The first unexcused absence will place a student on First Clinical Probation. See Clinical Probation Policy, page 17.

Students are required to follow the clinical facility policy regarding their return to work after an illness. Students are required to make up all absences in excess of two working days. Absences less than two days will be handled on an individual basis. Students are required to make up all missed assignments due to any absence from the clinic.

Students are expected to arrive at the clinical site on time and prepared for the day. Tardiness will not be tolerated. A second unexcused tardiness will place the student on first clinical probation, Clinical Probation Policy, page 17. Examples of excused tardiness include: congested traffic due to an accident, mechanical failure of vehicle, and a personal emergency that requires immediate attention. **In the event of potential late arrival to the clinic, the CI and ACCE should be contacted by phone or other established means of communication.**

## Accident/Incident Reporting

Any student involved in an accident/incident (e.g. fall) must notify the ACCE, clinical instructor and/or Program Director immediately. Information will then be provided on appropriate action to take.

Reporting of any incident must be done immediately for the safety of all persons involved. A Student Accident/Incident Report (**Appendix 30**) available on the Environmental Health, Safety and Risk Management website at [http://www.angelo.edu/services/risk\\_management/](http://www.angelo.edu/services/risk_management/) **must** be completed no matter how insignificant the incident may appear. Facility incident report may also be required.

## Travel/Living Expenses

Students are responsible for providing their own transportation and lodging for all learning experiences associated with the clinical education component of the curriculum. Students should anticipate a total additional cost of \$6,000 to \$7,000 for all full time clinical experiences. The total cost may vary significantly from student to student and from clinical to clinical depending on the cost of living and travel expenses.

## ADA Accommodations in the Clinic

ASU is committed to the principle that no qualified individual with a disability shall, on the basis of disability, be excluded from participation in or be denied the benefits of the services, programs or activities of the university, or be subjected to discrimination by the university, as provided by the Americans with Disabilities Act of 1990 (ADA), the Americans with Disabilities Act Amendments Act of 2008 (ADAAA), and subsequent legislation.

Student Affairs is the designated campus department charged with the responsibility of reviewing and authorizing requests for reasonable accommodations based on a disability, and **it is the student's responsibility** to initiate such a request by emailing [ADA@angelo.edu](mailto:ADA@angelo.edu), or by contacting:

Mrs. Dallas Swafford  
Director of Student Disability Services  
Office of Student Affairs  
University Center, Suite 112  
325-942-2047 Office  
325-942-2211 FAX  
[Dallas.Swafford@angelo.edu](mailto:Dallas.Swafford@angelo.edu)

When a student states he or she could meet the program's technical standards with accommodation(s), the Office of Student Affairs will confirm that the stated condition qualifies as a disability under applicable laws. If the condition qualifies as a disability, the University will determine if it agrees that the student can meet the technical standards with reasonable accommodation; this includes a review of whether or not the accommodation requested is reasonable, taking into account whether or not the accommodation would jeopardize clinician/patient safety or the educational process of the student or the institution, including all course work, clinical educational experiences and internships deemed essential to graduation. Students are required to read and sign the DPT program's technical standards (DPT Program Student Handbook **Appendix 19**) form and to update their responses on this form if their health status changes.

A student who requires accommodation to meet the technical standards must obtain verification by the Office of Student Affairs that proper reasonable accommodation is available for the student to meet the standard. The program will not provide accommodation without such written verification. Accommodations that affect the student's clinical education are subject to approval by the clinical site.

Requests for accommodations for injuries or illnesses that occur during the clinical rotation must be

received by the ACCE within 48 hours of the discovery of the disability. These requests will be handled through the Problem Resolution Process (**Appendix 11 Clinical Education Handbook**).

## **The Clinical Education Experience**

### **Student Input into Selection of a Clinical Site**

Students will complete a minimum of three (3) rotations at a variety of sites across the United States. These rotations include an eight (8) week acute care practicum, a ten (10) week outpatient musculoskeletal practicum and a twelve (12) week rehabilitation practicum (in-patient or outpatient). At least six (6) months prior to each full time clinical experience, the ACCE will provide a listing of available sites. The ACCE maintains a file on each site in the Physical Therapy Program's Office Coordinator's office. The student is advised to review the list and the available information about each site including location, patient population, staffing, housing, parking, etc. The student should consult with the ACCE, his/her academic advisor and other faculty members during the selection process. Prior to each of the three practicums the student will submit a list with a minimum of five (5) sites with a rationale that clearly delineates the reasons why the student has selected each site. It is the student's responsibility to meet with the ACCE to discuss any concerns regarding a site and/or the site selection process.

Site selection lists with a rationale for each choice should be submitted by the deadline established by the ACCE. Every attempt will be made to consider the academic and financial needs of each student. The program cannot guarantee that all needs will be met at all times. The academic needs of the student represent the first priority in the final decision for clinical placement. Sites will be assigned by the ACCE using the process for Clinical Site Selection (**Appendix 20**). **A student may petition the ACCE within 2 weeks of receiving the clinical assignment for a change in his/her clinical site assignment. If the problem is not resolved, the student should meet with the program director. If the problem remains unresolved, the student may request a meeting of an ad hoc committee consisting of the ACCE, a clinician, the student's advisor and a student from a different cohort.** The committee will make a recommendation to the ACCE regarding each request. **The ACCE makes the final decision for student placement.**

### **Student Preparation for the Clinical Experience**

Each student is responsible for his/her preparation for the clinical experience. Preparation includes but is not limited to:

- ✓ Completing a review of all information about the site including location, health requirements, dress code, hours of operation, directions, etc.
- ✓ Writing a letter of introduction following the guidelines in **Appendix 12** and completing the Student Self-Assessment of Competency (**Appendix 13**). The letter and Self-Assessment should be submitted to the ACCE at least six (6) weeks prior to the start of the clinical experience or the date designated by the ACCE. The documents are sent to the facility in the student packet at least one month prior to the student's arrival; a copy of each document is kept in the student's clinical education file by the ACCE.
- ✓ Arranging for housing well in advance of the clinical internship start date. Be certain of what household items you will need, safety of the house, utility expectations, etc.
- ✓ Completing health requirements, current CPR certification, and current health insurance coverage.
- ✓ Taking necessary dress code items. Also you must take and wear your Angelo State University nametag.
- ✓ Writing a minimum of three (3) goals to accomplish during your clinical experience. These should be specific and related to the type of experience you will be having. The goals

should be included in your letter of introduction, but expect to discuss them with your Clinical Instructor early in the clinical experience as time allows.

- ✓ Assembling textbooks, notebooks, Clinical Education Handbook (available online), Clinical Journal and weekly logs/envelopes to take to clinic.
- ✓ Assuring necessary transportation needs will be met for the clinical experience, including timely arrival/departure for the assigned hours; necessary transportation for special experiences and home health visits, if necessary.

### Student Responsibilities in the Clinic

Students are expected to exhibit professional behavior at all times in the clinic. In addition, students will:

- Dress according to the facility's dress code or ASU's dress code if the facility does not indicate a preference.
- Follow the attendance policy established by the clinic.
- Make a contribution to each facility through an educational presentation or project. Acceptable presentations are in-services (**Appendix 21**), oral patient case presentations (**Appendix 22**) or special projects (**Appendix 23**). Examples of special projects are a brochure or pamphlet, an article for hospital newsletter, a slide show, a video, an exercise protocol, etc. The student is expected to do an in-service on the first clinical experience, a case presentation on the second experience and a special project on the third rotation. The student must obtain approval for in-service topics, case study subjects, and special projects from the clinical instructor and/or the CCCE and the ACCE prior to the presentation. A copy of the in-service, case study presentation or special project and an outline that includes the required information must be submitted to the ACCE before a grade for the clinical experience will be issued.
- Participate in professional activities at the site as requested by the clinical instructor (e.g. facility and/or Program orientation, staff meetings, team meetings, committee meetings, training of new and/or non-professional staff, etc.).
- Follow the applicable local, state and federal laws, including but not limited to HIPAA, state licensure laws and rules, Medicare/Medicaid regulations, etc.
- Follow the rules and regulations, policies and procedures of the clinical site and the Program/area to which the student is assigned. These may include, but are not limited to, policies about patient rights, protected health information, obtaining and using images, clinical protocols, etc.
- Participate in the evaluation of his/her mastery of the physical therapy competencies. Please see **Appendix 14** for guidelines on "Giving and Receiving Feedback." "Participation" includes, but is not limited to completion and discussion of the following assessments:

Clinical Performance Instrument (**Appendix 1**)

Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction (**Appendix 3**)

Student Self-Assessment of Competency (**Appendix 13**)

- Complete the weekly activity logs (**Appendix 24**), guidelines for reflective practice (journal or case study, **Appendix 25**), special projects and other assignments including but not limited to Discussion Board postings (**Appendix 26**) from the ACCE.
- Evaluate the effectiveness of the clinical internship and discuss with the facility (**Appendix 3**). A copy of this evaluation must be turned in to the ACCE within five (5) days of the completion of the clinical experience. Failure to submit **Appendix 3**, The

Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction will result in a failing grade for the practicum.

### Problem Resolution

Problems that arise in the clinical setting shall be resolved expediently with respect for all parties involved.

Effort will be made to maximize the learning potential in each situation. All activities and records regarding problem resolution shall be kept confidential according to the applicable institutional policies and Texas state laws.

The following procedure is recommended to students, faculty, clinical personnel and/or other outside parties to resolve issues that may arise. The Problem Resolution Form (**Appendix 11**) will be used to document the situation.

1. Problem resolution begins with open and confidential discussion between the parties involved as soon as the problem is identified. (e.g. between the student and the Clinical Instructor)
2. Either or both parties should consult the Center Coordinator of Clinical Education (CCCE) if the problem requires intervention and/or if not resolved after Step 1.
3. The CCCE or CI, as appropriate, should contact the Academic Coordinator of Clinical Education (ACCE) when the problem is brought to their attention.
4. The student may bring the problem to the ACCE after following steps 1 and 2.
5. The ACCE will conduct a fair and confidential investigation.
6. The ACCE will offer suggestions for resolution of the problem to the student and the CCCE/CI.
7. The ACCE, CCCE/CI and/or student may contact the Program Director if the problem is not solved after step 6. If the problem is not resolved at the Program level, the process continues as outlined in the Student Handbook for the Physical Therapy Program.
8. The ACCE will document all "Problems" using the "Problem Resolution" form (**Appendix 11**). This form shall be labeled "confidential" and kept in the Doctor of Physical Therapy Program's Coordinator's office for five (5) years.

### **Breach of Program Policy(s)**

### Clinical Probation

A student will be placed on clinical probation at midterm for any one of the following reasons:

1. A "significant concerns" box is checked on the CPI (page 13 of **Appendix 1**),  
**and/or**
2. A student's CPI rating falls below expected mastery level per practicum syllabus at midterm, and/or the clinical instructor's comments indicate that the student has not reached mastery level of expectations
3. A student has one (1) unexcused absence.  
**and/or**
4. **A student has two (2) unexcused tardy arrivals to clinic.**

The Academic Coordinator of Clinical Education will issue a probation letter signed by the Program Director detailing the conditions of probation and expeditiously deliver it to the student (e.g., E-mail, fax, registered mail, etc.).

### Probation Conditions

The conditions of probation may include but are not limited to:

1. Established meetings between the ACCE, CCCE, CI and/or student.
2. Weekly review of progress with ACCE.
3. Written learning contract between the CI and the student.
4. Bi-weekly evaluations by the CI.
5. Additional clinical experience to remediate the areas of concern.
6. Counseling.
7. Didactic remediation.
8. Make-up of missed time and assignments from unexcused absence.

A student's status during probation will be documented on the Clinical Probation Tracking Form (**Appendix 27**).

### Termination of Clinical Probation

Probation will terminate upon successful completion of the conditions defined in the probation letter.

### Failure to Meet Probation Conditions

The consequences of unsuccessful completion of the probation conditions are:

1. A failing grade for the clinical practicum.
2. Review of the student's status by the Academic Committee. (The Academic Committee consists of all core physical therapy faculty assigned to the Doctor of Physical Therapy Program, in consultation, as applicable with supportive or adjunct physical therapy faculty.)
3. Possible recommendation to the Dean of the College of Graduate Studies for dismissal from the program.

Please see "Probation Policies" in the Student Handbook of the Doctor of Physical Therapy Program. Students have the right to appeal any decision of the Academic Committee.

### Failure of the Clinical Internship

A student may fail a clinical experience when:

1. A student's CPI rating falls below expected mastery level per practicum syllabus at the final evaluation and/or the clinical instructor's comments indicate that the student has not reached mastery for that clinical setting,  
**and/or**
2. A "Significant Concerns" box is checked (CPI, page 13 of **Appendix 1**) at the final evaluation of the student's performance,  
**and/or**
3. A student fails to meet the probation conditions in the probation letter,  
**and/or**
4. A student has two (2) unexcused absences or three (3) unexcused tardy arrivals

A student who fails a clinical experience is subject to automatic review by the Academic Committee.

### Immediate Removal from the Clinical Experience

The student physical therapist will be immediately removed from the clinical experience, receive a grade of "F" in the course, and may be permanently dismissed from the physical therapy program for any behavior that is inconsistent with the professional physical therapist and/or the Texas Physical

Therapy Practice Act, Rule 322.4: Practicing in a Manner Detrimental to the Public Health and Welfare (**Appendix 28**).

Some specific examples of misconduct for which students may be subject to disciplinary action include, but are not limited to:

1. Unprofessional, unsafe or unethical behavior on the part of the student.
2. Failure on the part of the student to meet any necessary academic requirements.
3. Arrest for a felony or crime involving moral turpitude or theft.
4. Use of alcohol, drugs, or other toxic or foreign agents.

### **Evaluation of the Clinical Education Program**

#### **Student Evaluation**

Students interviewed at mid-term and at the completion of clinical internships will provide feedback about the variety of learning experiences offered, the level of supervision provided, the appropriateness of the site for their level of expertise, and the clarity of understanding concerning student, program, and clinical faculty expectations for the clinical experience (**Appendix 3**). Students also participate in a clinical debriefing session where they are given the opportunity to comment on aspects of the clinical education program. Students complete a written evaluation of the effectiveness of the ACCE after the completion of each full-time clinical education portion of the curriculum.

#### **Faculty Evaluation**

Faculty mid-term site visits will offer insight into the appropriateness of the site, the variety of learning experiences that are available, the communication between student and facility staff (See **Appendix 4**, Mid-Term Site Visit Evaluation Form). Faculty will also be expected to offer feedback on the administration and effectiveness of the clinical education program at mid-term site visits or any other time such feedback is necessary. (See Clinical Site Update form **Appendix 29**)

Clinical faculty are evaluated each year that they supervise a student using the Clinical Instructor Evaluation (**Appendix 9**).

Clinical practicum course outcomes are measured after each clinical practicum using the Clinical Practicum Course Outcome form (**Appendix 5**). The form is either mailed or emailed in an electronic survey format to the clinical instructor immediately after the conclusion of the clinical experience with instructions for completion and return. .

The information gathered from these sources will be used to plan improvements to the clinical education program and the DPT program's curriculum so that it will continue to meet the needs of the student physical therapists while advancing the mission and objectives of the DPT program.