



DEPARTMENT OF PHYSICAL THERAPY

CLINICAL EDUCATION MANUAL

Clinical Education Policies, Procedures, and Expectations

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Daemen University

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PURPOSE OF THE CLINICAL EDUCATION MANUAL

The purpose of this Clinical Education Manual is to provide information, policies, and procedures for all who are directly involved in the clinical education process for the Daemen University Doctor of Physical Therapy program. This document serves as a reference for program faculty, Director of Clinical Education (DCE), students, Site Coordinators of Clinical Education (SCCEs), and Clinical Instructors (CIs) throughout the completion of clinical education experiences. This manual was created to:

- Enhance communication between DPT students, Daemen's DPT Program, and our clinical education faculty who offer clinical education experiences for our students
- Detail roles and responsibilities of all involved parties to assist in making each clinical experience successful and valuable
- Serve as a resource to provide information to all parties regarding the clinical education process and policies at Daemen University

CLINICAL EDUCATION DEFINITIONS AND ABBREVIATIONS

Clinical Education Agreement: A formal and legally binding agreement that is negotiated between academic institutions and clinical education sites or individual providers of clinical education that specifies each party's roles, responsibilities, and liabilities relating to student clinical education.

Clinical Education Experience: Experiences that allow students to apply and attain professional knowledge, skills, and behaviors within a variety of environments. Experiences include those of short and long duration (eg, part-time, full-time), provide a variety of learning opportunities, and include physical therapy services for patients/clients across the lifespan and practice settings. Although the emphasis is on the development of patient/client physical therapy skills, experiences also may include interprofessional experiences and non-patient/client service delivery, such as research, teaching, supervision, and administration. Clinical education experiences are a part of the professional curriculum and include formal student assessment.

Clinical Education Faculty: The individuals engaged in providing the clinical education components of the curriculum, generally referred to as either site coordinators of clinical education (SCCEs), preceptors, or clinical instructors. Although the academic institution does not usually employ these individuals, they do agree to certain standards of behavior through contractual arrangements for their services.

Clinical Education Site: A health service delivery agency or other setting in which clinical education experiences are provided for physical therapist students. The clinical

education site may be, but is not limited to, a hospital, agency, clinic, office, school, or home and is affiliated with the education program(s) through a contractual agreement.

Clinical Instructor (CI): The physical therapist responsible for the physical therapist student and for directly instructing, guiding, supervising, and formally assessing the student during the clinical education experience. When engaged in full-time clinical education designated to meet the minimum number of weeks required by CAPTE, the clinical instructor must be a licensed physical therapist with a minimum of one year of full-time (or equivalent) post-licensure clinical experience.

Clinical Performance Instrument (CPI): A valid, reliable, and multidimensional clinical performance assessment tool utilized to determine if, and how well, a student meets established objectives during clinical education experiences.

Director of Clinical Education (DCE): Academic faculty member who is responsible for planning, directing, and evaluating the clinical education program for the academic institution, including facilitating clinical site and clinical faculty development.

Physical Therapist Student: Student enrolled in a CAPTE-accredited or CAPTE-approved developing physical therapist professional education program. Students should not be referred to as "physical therapy students".

Site Coordinator of Clinical Education (SCCE): A professional who administers, manages, and coordinates clinical assignments and learning activities for students during their clinical education experience. In addition, this person determines the readiness of people to serve as preceptors and clinical instructors for students, supervises preceptors and clinical instructors in the delivery of clinical education experiences, communicates with the academic program regarding student performance, and provides essential information to academic programs.

CLINICAL PLANNING PROCEDURES AND POLICIES

Pre-Clinical Seminar Course

Clinical education at Daemen University incorporates several different components. The first component is the pre-clinical seminar course (PT575) during the first semester of the professional phase of the Daemen DPT program where the student:

- Is introduced to the personnel involved in clinical education, i.e. DCE (Director of Clinical Education), SCCE (Site Coordinator of Clinical Education), CI (Clinical Instructor), etc.
- Begins the selection process for clinical experiences
- Discusses expectations, goals, and objectives for various clinical experiences

- Reviews the instrument that is used to determine performance level - the Clinical Performance Instrument (CPI 3.0)
- Participates in exercises designed to enhance communication skills, professional behaviors, problem-solving skills, etc.
- Learns how to use the EXXAT system to request, obtain relevant information about, and submit materials for clinicals

Clinical Site Selection Procedure

During PT575 Pre-Clinical Seminar course, students are provided with details of the clinical inquiry process and the clinical placement process. Students are educated on the process by which the list of available sites for each clinical is determined as well as the clinical setting requirements they must fulfill. Students are provided with details regarding the specific process for assigning each clinical experience.

During established timeframes, students are provided with access to the list of available clinical sites for each rotation through the EXXAT web-based system. Students have the ability to research available sites for each of the clinical rotations on EXXAT as well as ask questions of the DCE throughout the planning process. Students submit their individual wishlists for their clinical experiences through the EXXAT system. Sites must be selected from the list of available sites in order for a student to qualify for the clinical placement process. The EXXAT Placement Assist tool is used to determine each student's clinical assignments. Each student's preferences are reviewed by the EXXAT program simultaneously to determine the best possible clinical assignments for every student. The goal of the placement system is to assign student clinical placements with the highest level of student satisfaction. Every student is treated equally, and every student's preferences are taken into account.

In situations where a student does not receive a placement through EXXAT's matching program or an assigned site becomes unavailable, students will be assigned to a clinical site by the Director of Clinical Education based on matching clinical site availability, clinical education expectations, academic requirements, student needs identified by faculty, and student preferences.

The faculty of the Daemen University Physical Therapy Department reserves the right to make final decisions regarding clinical placements.

Academic Requirements/Eligibility for Participation in Clinical Education Experiences

Academic requirements that all students must meet in order to participate in clinical education experiences are published in the Daemen University Department of Physical Therapy Student Handbook.

Students are required to obtain permission of department faculty and successfully complete all course-related competency exams prior to starting each clinical education experience. Program faculty review each class of students to determine readiness of each individual student in order to be eligible to begin clinicals. Permission to participate in clinical education experiences may be denied on the basis of demonstrated weakness or inability to meet the program's academic or professional standards.

Full-Time Clinical Experiences

Each student will complete four full-time clinical experiences while in the professional phase of the PT program. There are three types of clinical experiences that each student is required to complete:

- ***Musculoskeletal*** - outpatient orthopedic/musculoskeletal
- ***Inpatient care*** – acute; subacute; skilled nursing; inpatient rehab
- ***Neuromuscular Rehab*** - outpatient neuro; inpatient neuro; pediatrics - inpatient, outpatient, school-based, or home-based; adults with developmental disabilities; wound care; home care; outpatient with vestibular
- One of the final two clinicals may be in an area of student preference

Clinical I: PT 577 is a nine (9) week full-time clinical experience which will be completed following the successful completion of the fall and spring semesters of the first year in the professional phase of the PT curriculum. The focus of this clinical experience is ***musculoskeletal/orthopedic*** patient care. The type of clinical setting for this rotation is traditionally outpatient.

Clinical II: PT 582 is a nine (9) week full-time clinical experience that will take place during the summer following successful completion of the second year in the professional phase of the curriculum. The focus of this clinical experience is ***neuromuscular rehab*** (outpatient neuro; inpatient neuro; pediatrics - inpatient, outpatient, school-based, or home-based; adults with developmental disabilities; wound care; home care; outpatient with vestibular) or ***inpatient*** (acute; subacute; skilled nursing; inpatient rehab).

Clinical III: PT 680 is a nine (9) week full-time clinical experience that will take place during the spring semester of the final year in the professional phase of the PT program. The student will start this clinical experience upon successful completion of the didactic component of the curriculum the previous semester.

Clinical IV: PT 690 is the final nine (9) week full-time clinical experience which will follow the PT 680 clinical experience.

The setting for the PT680 and PT690 clinicals will vary depending on the type of setting completed for the PT 582 clinical, assuring the student completes all of the required clinical settings across the four full-time clinical experiences. Additional types of specialty clinical affiliations may include: cardiac rehab, sports medicine, aquatic therapy, hand therapy, pelvic health, sports performance, etc.

Clinical Site Cancellation and Reassignment

Occasionally it may become necessary for a clinical site or Daemen to cancel or reassign a clinical site placement. When the DCE is notified about the clinical cancellation, the student is immediately notified either by email or a meeting with the DCE. An unfortunate result of such changes is that the options for reassignment can be quite limited. The student meets with the DCE to discuss preferences and options for a new site. The student is assigned to the first site that is available that meets the clinical education requirements.

Establishment of Clinical Education Agreement with Daemen University Physical Therapy Program

Daemen University will establish clinical education agreements with Physical Therapy clinical sites which are able to demonstrate the ability to effectively provide clinical teaching. The quality of the clinical site's learning environment will be determined by on-site visits, student feedback, written documentation, and APTA Guidelines.

Once a clinical site has been identified by either students, alumni, core faculty, or the clinical community, the Director of Clinical Education (DCE) will obtain initial information regarding the site via phone contact or email communication with the site. After the DCE reviews the information, a determination is made as to whether or not the program would like to enter into a contractual agreement with the clinical site.

If the site is deemed appropriate to provide clinical learning opportunities that align with the academic program and the clinical course outcomes, the DCE will forward the Daemen University Clinical Experience Affiliation Agreement to the clinical site's Site Coordinator of Clinical Education (SCCE) for approval by their administration. If the clinical site requires their own affiliation agreement, it is forwarded by the SCCE to Daemen University's DCE. The DCE will send the site's contract document to the university's legal reviewer for approval.

The DCE may choose to schedule a visit with the new clinical site either prior to the first student or during the first student's clinical experience to ensure a proper learning environment.

Suggestions for future site development from students can be submitted to the Director of Clinical Education. Of note, students and family members are not to contact a potential clinical site in an attempt to arrange a clinical experience until after the site information has been shared with the DCE and the DCE has given approval for the student to make direct contact with the site. All new sites are evaluated by the Director of Clinical Education according to the guidelines listed above. Students and family members are not to contact any clinical site with whom Daemen University is already affiliated. Any student who bypasses this process may be referred for disciplinary action.

Department Position Statement on Referral for Profit

The Daemen University Department of Physical Therapy supports the American Physical Therapy Association's Position on Physician-Owned Physical Therapy Services (POPTS). The Daemen University Department of Physical Therapy will not participate in clinical education with practice settings that identify themselves as physician owned physical therapy services (POPTS).

Clinical Site Visits and Phone/Video Conferences

At a mutually acceptable time, a member of the Daemen University PT program faculty will schedule either a meeting or video/phone conference with the CI and student for a formal discussion of student performance at the clinical site. Determination of whether a face-to-face site visit is made or a video/phone conference is conducted is dependent upon several factors, including geographic location, student and/or site needs, number of times site and/or student have been visited, and availability of the faculty member to travel to site location. Additional visits may be scheduled if deemed necessary due to unusual circumstances or student difficulties.

STUDENT CLINICAL EDUCATION POLICIES

The following sections detail Daemen University PT Program's policies for students related to clinical education. It is the student's responsibility to become familiar with and to abide by the individual rules and regulations of each clinical site. Ignorance of the rules and regulations will not be accepted as an excuse.

Contacting Clinical Sites

Students are NOT allowed to contact any clinical sites with whom Daemen University is already affiliated. By extension, family members and friends of the students are not to contact any clinical sites with whom Daemen University is already affiliated. If students wish to contact sites Daemen is not affiliated with, they must have this approved by the Director of Clinical Education BEFORE reaching out to any sites. Violations of this policy will be reviewed by the department faculty and may result in one or more of the following actions:

- Referral to the Student Conduct Committee
- Clinical education consequences, including removal from clinical placement or cancellation of clinical experience

Submission of Documents to Site

Students are required to email two introductory documents to the SCCE for their assigned clinical site:

- Letter of Introduction
- Student Profile

These two documents are to be sent to the SCCE within one week after the DCE has instructed students to send them.

Communication With Clinical Site

Students will send the documents discussed in the above section to the clinical approximately two months before the clinical start date. As the clinical timeframe approaches, it is the student's responsibility to directly communicate with the SCCE at his/her assigned clinical site well in advance of the start date of the clinical. The student must have direct email or phone communication with the SCCE no later than one month prior to the start date of the clinical. Many sites have additional requirements that must be fulfilled, most of which require time and advanced notice to complete (i.e. background check, drug screen, additional health documentation, etc.). If a student fails

to make direct email or phone contact with the SCCE after instructed by the DCE to do so, the student's clinical experience may be cancelled.

Clinical Education Travel and Transportation Expectations

Clinical education experiences may occur at clinical sites located within or outside the immediate geographic area of Daemen University. Students are expected to be prepared to travel to assigned clinical sites and are responsible for arranging reliable transportation and/or accommodations necessary to attend all scheduled clinical education activities. The University cannot guarantee placement at a site within a student's preferred geographic area or within a specific distance from the student's housing. Students should maintain the ability to travel to and from assigned clinical sites and should plan accordingly for the financial and logistical responsibilities associated with clinical education. Students are expected to maintain reliable transportation that allows them to arrive at the clinical site on time and fulfill the attendance and scheduling requirements of the clinical education experience.

Students are required to perform at least one of their clinical experiences outside of the Buffalo area, defined as greater than 50 miles from Daemen's campus address (4380 Main Street, Amherst, NY), in order to experience a variety of health care regional factors and in an effort to afford all students depth and breadth along the continuum of care.

Students are expected to plan their travel and transportation arrangements in a manner that supports professional attendance, punctuality, and participation throughout the clinical education experience. Transportation difficulties, traffic, weather, or other foreseeable travel-related issues do not automatically excuse a student from meeting the attendance requirements of the clinical site. Students should develop contingency plans when appropriate and communicate promptly with their Clinical Instructor and the DCE when an unexpected travel-related circumstance affects their ability to report to the clinical site.

Expenses

Students are responsible for all expenses associated with clinical education. Expenses may include, but are not limited to, the following: housing; meals; transportation; library fees; parking; fuel; tolls; uniforms; and professional attire. Students are also responsible for any costs associated with meeting site requirements. This may include, but is not limited to, the following: drug screen; criminal background check; additional immunizations and titers; etc.

Professional Dress Code

Neatness and cleanliness are essential characteristics of a health professional. As a student of a professional program, appropriate attire and grooming will always be expected.

Professional appropriate attire is required for clinical exposure and clinical rotations. All clothing must be neat, clean, in good repair and properly fitted and selected for the type of work performed.

The following are considered to be inappropriate in the clinic setting: denim, sloppy or disheveled clothing, t-shirts, printed clothing (with the exception of Daemen University printed professional clothing), spandex, leggings, sweatshirts, sweatpants and shorts.

Students represent the PT department, Daemen University, the Physical Therapy profession, and themselves to all persons with whom they come in contact on and off campus. Physical Therapy students should convey an impression of competence, reliability, and professionalism in the way that they think, act, and dress.

Clinical Hours

Students are required to adhere to the hours of their assigned Clinical Instructor(s) as specified by the Site Coordinator of Clinical Education (SCCE) and/or Clinical Instructor (CI). Holidays and semester breaks, which are honored by the university, are not necessarily honored by the specific clinical site. **Students should never request modification of their assigned clinical schedule to accommodate their personal or work schedules.**

A student is expected to be punctual in daily arrival at the site and to remain at the site until excused by the CI or SCCE. Excessive tardiness or a failure to maintain specified hours may be a cause for dismissal from a clinical experience.

Students are not permitted to request a change of their clinical hours to accommodate personal schedules, including outside employment or family obligations. Students will not be granted permission to alter their clinical schedule or miss clinical days for trips, family vacations, etc. Students are provided with clinical dates many months in advance so plans for personal travel may be made accordingly.

If a situation arises where a student is granted permission to miss clinical for an extended period of time due to personal illness or serious family matters, all missed clinical time must be made up before the student will be cleared for graduation. Final grades will not be granted until all work is completed.

Attendance

Students are expected to avoid absences during clinical education experiences and to submit documentation of reasons for any absences that may occur. **In the event a student is unable to report to their clinical site during a clinical experience, the student must inform the CI, SCCE, and DCE by email or phone prior to the start of the scheduled clinical day.** If a student anticipates any missed days due to external circumstances, this **MUST** be discussed well in advance with the DCE. It is expected that this would occur only in rare and extenuating circumstances. Permission is required from the DCE prior to discussing this with the SCCE or CI.

All absences from clinicals must be made up to achieve a Satisfactory grade for a clinical experience. Equivalent make-up time will be scheduled at the discretion of the CI/SCCE. Make-up time is subject to availability at the assigned clinical site.

In cases of inclement weather, student safety in travel is of utmost concern. Students are to use caution with inclement weather. Students are still expected to attend their clinical if the site is open and if weather conditions warrant safe travel. If the clinical site closes or the clinical instructor specifically tells the student to avoid travel due to inclement weather then the student will be excused. Generally it is not necessary to make up days missed due to inclement weather, but the SCCE/CI will discuss expectations with the student and DCE.

Absence of Clinical Instructor

Students are not permitted to treat patients during clinical education experiences at times when a licensed physical therapist designated to supervise the student is not on the premises of the clinical site. If a student's clinical instructor is unable to report for work, the student must leave the clinical site if another licensed physical therapist who the SCCE deems to be an approved qualified substitute is unable to serve as the on-site supervising therapist in the CI's absence. Under no circumstances is a student allowed to engage in the treatment or evaluation of patients if a licensed physical therapist is not present on the premises.

Health Requirements

Students must submit all required health documentation through the Exxat Approve online system by the published due date in order to be cleared by the university and the Daemen Physical Therapy Program to begin each clinical experience.

Many clinical sites have additional requirements for "onboarding" to be cleared to start the clinical experience. Students are responsible for adhering to and completing all site

requirements in addition to the Daemen Physical Therapy program requirements listed below.

Daemen Physical Therapy Program Health Requirements for Participating in Clinical Education Experiences

- **Proof of Physical Examination** - within 1 year of clinical experience start date
- **Proof of Immunity to Hepatitis B** - three vaccines or positive titer
- **Proof of Immunity to Varicella (Chicken Pox)** – two vaccines, positive titer, or physician diagnosed date of disease
- **Proof of Immunity to Measles, Mumps, and Rubella (MMR)** – two vaccines or positive titer
- **Proof of Screening for Tuberculosis (Negative PPD or Quantiferon Gold)** - within 1 year of clinical experience start date
- **Proof of Tetanus Vaccination** - Td or Tdap vaccine administered within the last 10 years
- **Proof of Flu Shot or Completed Flu Shot Declination Form** - within the established “flu season” of the clinical experience timeframe
- **Proof of COVID vaccine – *recommended, not required*** – requirements for COVID vaccines vary by site. If a site requires COVID vaccination, the student will be required to comply in order to complete the clinical experience.
- **Proof of Health Insurance** – documentation of current health insurance coverage, including copy of insurance card and completed attestation form

Neither the Daemen University PT program nor the Exxat system send any student health documents to clinical sites. Any health documents requested by the site must be sent directly by the student to the clinical site.

Individual clinical sites often request additional medical documentation from the student that is over and above the Daemen PT program requirements. It is the responsibility of the student to find out this information prior to attending the clinic. The student has the responsibility to fulfill these requirements within the timeframe required by the clinical site in order to participate in the clinical experience.

Should a student’s health status change after a health form is submitted and before participation in a clinical education course, a medical release from a physician will be required before the student can participate in the clinical experience.

Health Insurance

Every student is required to have active health insurance coverage in order to participate in clinical experiences and to be in compliance with clinical education agreements with clinical sites. Daemen DPT students are eligible to purchase the

Daemen University Student Health Insurance Plan, which provides health insurance coverage to students in compliance with the Affordable Care Act. Students may contact the Office of Health & Insurance Services to arrange for coverage or to get more information about the plan.

Liability Insurance

Each student will have purchased Malpractice Insurance through the Daemen University Business Office before his/her clinical experience, as included in the clinical education course registration fees. Students must be registered for the respective clinical course in order to be covered by the university's liability insurance. Under no circumstances may a student participate in any clinical experience without current liability insurance. A copy of the policy is sent directly by the insurance company to each clinical site prior to the start of the assigned clinical experience.

CPR

Prior to starting clinical experiences, students must provide evidence of current certification in Cardiopulmonary Resuscitation (CPR). CPR certification must have a hands-on training component and skills performance evaluation. Hybrid courses are acceptable as long as there is an in-person hands-on component to the course. CPR courses that are offered fully online will not be accepted.

OSHA, Blood Borne Pathogens, and HIPAA Training

Training for Occupational Safety and Health Administration (OSHA), Blood Borne Pathogens (BBP), and Health Insurance Portability and Accountability Act (HIPAA) is required for clinical experience participation and will occur within the DPT curriculum prior to full-time clinical experiences.

Criminal Background Check

Some facilities require criminal background checks prior to the student starting a clinical experience at the site. It is the responsibility of the student to determine the specific background checks that are required as well as fulfill the appropriate requirements of the clinical site. Students are responsible for all costs associated with these checks if they are not covered by the clinical site.

Drug Screen

Some facilities require drug screening prior to the student starting a clinical experience at the site. It is the responsibility of the student to determine the type of drug screen required, including the number of panels required, as well as fulfill the appropriate requirements of the clinical site. Students are responsible for all costs associated with the drug screening if they are not covered by the clinical site.

Interview

Some facilities require an interview with the student prior to acceptance of the student for a clinical placement. If an interview is required, the student must complete this prior to being confirmed for the clinical experience.

Confidentiality

All clinical education faculty, clinical site employees or representatives, students, academic faculty, and Daemen University representatives shall protect from unauthorized disclosure all information, records, and data pertaining to clinical site patients/clients. Students must be in full compliance with HIPAA regulations. Please find additional details in the section titled *Professional Program Behavior, Electronic Communication, and Social Media Expectations*.

Completion of CPI Self-Evaluation

Students are required to perform a self-evaluation on the CPI 3.0 at mid-term and final during each of their clinical education experiences. Students are expected to invest time and effort into self-assessing and self-reflecting on their performance. The student is expected to write reflective comments under every item on the CPI tool.

In-Service Project Requirement

Students are required to complete an in-service project during each of their clinical education experiences. This project is at the discretion of the clinical instructor and may include items such as a presentation, research assignment, patient education video or assignment, case study presentation, community wellness education event, or teaching resource for the clinic.

Professional Conduct

There is an expectation that students enrolled in the Daemen University DPT program accept full responsibility for their behavior, professionalism, and performance of safe practice during clinical education courses. This is confirmed by student agreement with the *Professional Phase Student Conduct Policy* prior to the first semester of study.

A clinical education site SCCE may dismiss a student **without warning** for behavior regarded as being dangerous, disruptive, or unprofessional. In such cases, the SCCE will immediately notify the Program DCE. Following dismissal for behavior, the approval of both the SCCE and DCE are required for student resumption of the interrupted clinical education experience. The student will be referred to the Professional Phase Student Conduct Committee. Problems considered sufficiently difficult or serious by the SCCE, DCE, or Student Conduct Committee may be referred for appropriate professional counseling. In the event an unacceptable behavioral problem cannot be fully resolved, a student may be required to withdraw from the program by formal action of the Student Conduct Committee.

Patient Rights and Student Participation in Patient Care

Patients receiving care at a clinical education site retain all rights afforded to them by the clinical site, applicable law, and professional standards of practice. Students are expected to respect and uphold these rights throughout the clinical education experience.

Patients have the right to be informed when a Doctor of Physical Therapy student is participating in their care and to decline or refuse treatment or participation by a student at any time. A patient's decision to decline student involvement must be respected and must not result in pressure, coercion, discrimination, or retaliation.

Students must obtain and respect patient consent for their participation in patient care in accordance with the policies and procedures of the clinical site and under the direction and supervision of the Clinical Instructor (CI). If a patient declines to be treated by or participate in care with a student, the student must immediately notify the CI and follow the clinical site's established procedures.

Students are expected to demonstrate professional and ethical behavior by respecting patient autonomy, maintaining patient dignity and privacy, and supporting the patient's right to participate in decisions regarding their care.

Professional Program Behavior, Electronic Communication, and Social Media Expectations

As student physical therapists, students are expected to conduct themselves in a manner consistent with the ethical standards of the physical therapy profession, including the APTA Code of Ethics, APTA Core Values, University policies, clinical site policies, and all applicable federal and state laws and regulations.

Students are expected to demonstrate mature, respectful, and professional behavior in all educational, clinical, and electronic environments. This expectation applies to conduct occurring in person, online, through social media, and through any other form of electronic communication.

1. ***Definition of Social Media and Electronic Communications:*** For purposes of this policy, social media and electronic communications include, but are not limited to, Facebook, Instagram, X (formerly Twitter), TikTok, Snapchat, LinkedIn, YouTube, blogs, podcasts, GroupMe, Discord, Reddit, messaging applications, discussion boards, email, text messaging, and any current or future digital communication platforms.
2. ***Professional Conduct Expectations:*** Students shall not engage in harassing, threatening, discriminatory, defamatory, intimidating, retaliatory, or otherwise unprofessional communications directed toward or involving patients, faculty, staff, clinical instructors, healthcare personnel, classmates, affiliated institutions, or members of the public. Students are expected to maintain a professional online presence that reflects the standards and values of the physical therapy profession. Nothing in this policy is intended to prohibit students from expressing concerns, reporting misconduct, participating in protected activities, or utilizing established PT Department and University grievance procedures. Concerns regarding academic, clinical, or program-related matters should be communicated through appropriate professional channels.
3. ***Electronic Device Use:*** During classroom, laboratory, simulation, and clinical education activities, electronic devices shall be used only for educational, clinical, or program-related purposes unless otherwise authorized by the instructor, faculty member, or clinical educator. Prohibited non-program-related activities include, but are not limited to:
 - Checking personal email
 - Social media use
 - Online shopping
 - Personal texting or messaging
 - Video gaming
 - Streaming or watching non-course-related videos

- Other personal entertainment activities
4. ***Confidentiality and Clinical Education Expectations:*** Students are responsible for maintaining the confidentiality of all patient, clinical site, educational, and professional information obtained through their role as a student physical therapist. Students shall not post, transmit, share, discuss, or otherwise disclose through social media or non-approved electronic communication platforms any information, photographs, videos, audio recordings, or descriptions related to:
- Patients or patient encounters
 - Clinical sites or affiliated healthcare organizations
 - Clinical instructors, preceptors, or healthcare personnel
 - Protected health information (PHI)
 - Confidential educational or institutional information

This prohibition applies even when identifying information has been removed. Information that appears de-identified may still permit identification of a patient, provider, clinical site, or institution and therefore remains prohibited. Students may not photograph, video record, audio record, livestream, or otherwise capture images or information involving patients, clinical sites, healthcare personnel, classmates, faculty, or educational activities without appropriate authorization and compliance with University and clinical site policies. Information related to clinical experiences should only be discussed through approved educational or supervisory channels as directed by the Program or clinical site.

5. ***HIPAA and Patient Privacy:*** Students must comply with all HIPAA requirements and applicable privacy regulations. Students shall not:
- Leave patient health information on voicemail unless specifically authorized and compliant with applicable regulations and site policies.
 - Post, share, discuss, or disclose patient-related information on social media or through non-secure electronic communications.
 - Transmit protected health information through unauthorized communication platforms.
6. ***Violations and Disciplinary Action:*** Violations of this policy will be reviewed by the Department and may result in one or more of the following actions:
- Verbal warning
 - Written warning
 - Referral to the Student Conduct Committee
 - Clinical education consequences, including removal from clinical placement
 - Suspension from the Physical Therapy Program
 - Dismissal from the Physical Therapy Program

The severity of disciplinary action will be determined based upon the nature of the conduct, the extent of actual or potential harm, whether confidentiality or patient privacy was compromised, prior violations, and applicable University policies.

ROLES AND RESPONSIBILITIES IN CLINICAL EDUCATION

Roles and Responsibilities of the Director of Clinical Education (DCE)

The Director of Clinical Education (DCE) is the licensed physical therapist employed by the academic institution who plans, develops, supervises, organizes, facilitates, monitors, assesses, coordinates, and administers the clinical education component of the physical therapy curriculum. The DCE is the faculty member of record for the clinical education courses. The DCE serves as the liaison between the didactic and clinical components of the curriculum.

The primary roles and responsibilities of the DCE include the following:

- 1) Communicate Between Daemen University and Affiliated Clinical Sites
 - a. Communicates current information about curriculum, program philosophy, clinical course objectives, and site availability to all concerned parties (clinical education sites, clinical education faculty, Daemen clinical education team, and students).
 - b. Provides ongoing communication with clinical education faculty (SCCEs and CIs) regarding the academic program, including curriculum, course objectives, and policies and procedures related to clinical education.
 - c. Facilitates negotiations of clinical education agreements as well as maintains current agreements with affiliated sites.
 - d. Communicates with clinical education faculty about type of student placements available and expectations of clinical education faculty and site.
 - e. Communicates with SCCEs and CIs regarding clinical education faculty development opportunities.
 - f. Communicates directly with and oversees communication with SCCEs and CIs regarding student progress and assessment of student progress during clinical experiences.
 - g. Provides support and guidance as required in situations where issues or concerns are present during clinical experiences.
- 2) Communicate With DPT Program Students
 - a. Informs students of clinical education policies and procedures.
 - b. Provides students with information about clinical sites to facilitate selection of wishlist preferences for assignment of clinical experiences.
 - c. Develops schedules of clinical assignments and coordinates the dissemination of this information to students and sites.
 - d. Oversees the communication related to clinical education, including direct communication with students and clinical education faculty as needed to support, problem solve, and discuss relevant issues.
 - e. Obtains and evaluates feedback from students regarding clinical education experiences and clinical instruction.

3) Clinical Education Program Planning, Implementation, and Assessment

- a. Plans and implements Daemen's clinical education curriculum in collaboration with the Program Director/Chairperson, academic faculty, clinical education faculty, and students.
- b. Develops, revises, and reviews clinical education policies and procedures.
- c. Monitors student performance to ensure that they successfully complete the clinical education experiences, including reviewing student evaluations and overseeing communications with clinical education faculty and students.
- d. Assigns the final grade for all clinical education courses, determining the grade based on the *Clinical Education Course Grading Policy* found later in this manual.
- e. Utilizes appropriate intervention strategies with SCCEs, CIs, and students in situations where difficulties have been demonstrated while on clinical education experiences, including instances where learning strategies are necessary.
- f. If necessary, develops remedial clinical experiences for students, including collaboration with other appropriate faculty and university resources.
- g. Provides direct input into the curriculum development process, including design, review, and revision of curriculum, through collection, organization, and dissemination of pertinent information from clinical sites and students.
- h. Administers the program's clinical education records systems, including the database of affiliated sites, current information on clinical education sites and faculty, copies of fully executed clinical education agreements, student performance reports during clinical education experiences, and assessment data on clinical sites and clinical faculty.
- i. Develops and coordinates the program's evaluation process for the clinical education component of the curriculum, including determination of the tools used to evaluate the clinical sites, teaching effectiveness of clinical education faculty, and student performance.
- j. Administers immunization and preventative health policies and procedures that are consistent with the requirements of federal, state, institutional, and site specific guidelines.
- k. Implements liability protection of students that is consistent with legal, institutional, and site requirements for risk management.
- l. Serves the Physical Therapy Program in additional teaching, advising, research, and service activities.

4) Clinical Site and Clinical Education Faculty Development

- a. Determines criteria and procedures for selecting, utilizing, assessing, and maintaining clinical sites.
- b. Establishes and maintains an appropriate number of quality clinical sites to meet the educational needs of the students and the DPT program.

- c. Offers development opportunities for clinical education faculty at clinical education sites through collaboration with clinical education faculty and through ongoing evaluation of site needs.
- d. Continues to be aware of and knowledgeable about current trends in health care and the effects on clinical education, apprising clinical education faculty and academic faculty about trends and changes.
- e. Advises faculty members of the DPT program about their roles and responsibilities related to clinical education.

Roles and Responsibilities of the Site Coordinator of Clinical Education (SCCE)

The Site Coordinator of Clinical Education (SCCE) is the licensed physical therapist employed and designated by the clinical site to direct, organize, coordinate, supervise, and evaluate the clinical education program for that site. The SCCE's primary role is to serve as a liaison between the academic institution and the clinical site.

The primary roles and responsibilities of the SCCE include the following:

- 1) Identify, organize, and coordinate the specific learning experiences available at the clinical education site.
- 2) Maintain communication with DCE and program faculty in regard to availability of clinical education experiences, scheduling of students, and site-specific requirements.
- 3) Once student is scheduled to the site, SCCE confirms placement and communicates directly with the student (or directs the CI to communicate directly to the student) about site expectations and requirements.
- 4) Assign clinical instructors (CIs) for each clinical placement, evaluating each CI's readiness and preparedness to serve as a CI. The SCCEs is expected to select Clinical Instructors who have at least one year of clinical experience prior to serving as a CI. The CI is expected to demonstrate clinical competence and legal and ethical behavior that meets or exceeds the expectations of the PT profession.
- 5) Provide or schedule provision of a thorough orientation to the site, including but not limited to general policies and procedures, emergency procedures, philosophy of the site's clinical education program, goals and expectations for the student while at the site, and student learning objectives.
- 6) Maintain communication with DCE, program faculty, CI, and student during the clinical education experience.
- 7) In situations where indicated, collaborates with the DCE, CI, and student to problem solve and assist in planning remedial, alternative, accommodative, or challenging learning experiences.
- 8) Organize, coordinate, direct, evaluate, and supervise the activities of the clinical instructors and students assigned to the clinical site.
- 9) Revise and submit updated Clinical Site Information Form (CSIF).

- 10) Organize and implement development activities for the clinical instructors to enhance their skills as clinical educators.
- 11) Provide regular feedback to the program about student performance and perceived strengths and weaknesses of the academic program.
- 12) Provide regular assessment of the effectiveness of the DCE and program faculty involved in clinical education supervision.
- 13) Review the Daemen University Department of Physical Therapy Clinical Education Manual.
- 14) Act as a role model for ethical, legal, and professional behavior.
- 15) Demonstrate effective communication, interpersonal, instructional, supervisory, performance evaluation, administrative, and managerial skills.
- 16) Adhere to and utilize as a guiding resource the APTA's *Guidelines to Promote Excellence in Clinical Education Partnerships* (HOD G06-19-62-59) found at the following link: <https://www.apta.org/siteassets/pdfs/policies/clinical-continuing-education-other-than-pt-pta.pdf>

Roles and Responsibilities of the Clinical Instructor (CI)

The clinical instructor (CI) is the licensed physical therapist employed by the clinical site who is designated by the Site Coordinator of Clinical Education (SCCE) to instruct, mentor, supervise, and evaluate the physical therapy students in the clinical education setting. The CI has a minimum of one year of clinical experience. The CI is involved with the daily responsibility and direct supervision of student clinical learning experiences.

The primary roles and responsibilities of the CI include the following:

- 1) Communicate with the SCCE and student prior to the student's arrival at the site, providing information to the student on the clinical site, expectations of students, and site requirements.
- 2) Plan and provide appropriate clinical learning experiences for the student, taking into account the student's level in the academic program as well as their previous clinical experiences.
- 3) Provide or schedule provision of a thorough orientation of the site, including but not limited to general policies and procedures, emergency procedures, philosophy of the site's clinical education program, goals and expectations for the student while at the site, and student learning objectives.
- 4) Communicate expectations, assignments, and objectives to the student.
- 5) Maintain communication with the SCCE, DCE, and Daemen PT faculty regarding the student's performance.
- 6) Provide appropriate supervision and guidance to the student throughout the clinical experience.
- 7) Contact the DCE with unexcused student absences or other student requests that are not consistent with a positive learning experience.

- 8) Contact the SCCE and DCE to identify any “red flag” areas on the CPI prior to midterm evaluation.
- 9) Formally evaluate the student’s performance at midterm and final using the Clinical Performance Instrument, providing comments to substantiate the level of performance.
- 10) Verbally review student performance formally at midterm and final through discussion of CPI evaluations completed by CI and student.
- 11) Promptly recognize student performance or professional concerns, identifying these concerns to the student. If concerns persist and/or are significant in nature, notify SCCE and DCE of the concerns.
- 12) Assure that in their absence at the clinical site that the student is provided with direct supervision from a licensed physical therapist. If another licensed physical therapist is not available to directly supervise the student in the CI’s absence, the student may not evaluate, treat, or otherwise be involved in treatment care for that time period.
- 13) If a student requires emergency or other medical care as a result of an injury, illness, or other medical need occurring during a clinical education experience, the CI and/or clinical site personnel will take appropriate steps to facilitate or obtain necessary medical evaluation and care in accordance with the clinical site’s policies and procedures. All costs associated with emergency or medical care received by the student are the financial responsibility of the student.
- 14) Demonstrate clinical competence and legal and ethical behavior that meets or exceeds the expectations of members of the profession of physical therapy.
- 15) Demonstrate effective behavior, conduct, and skill in interpersonal relationships.
- 16) Demonstrate effective communication skills, instructional skills, supervisory skills, and performance evaluation skills.
- 17) Demonstrate effective clinical teaching skills, including the following:
 - a. Providing constructive and timely feedback to the student on their performance
 - b. Demonstrating active listening skills
 - c. Providing clear and concise communication in an open and non-threatening manner
 - d. Teaching in an interactive manner that encourages problem solving
 - e. Providing the student with responsibilities that are within their scope of knowledge and skills
 - f. Integrating knowledge of various learning styles into clinical teaching
 - g. Using the clinical environment for planned and unplanned learning experiences
 - h. Being accessible and available to discuss patient/client management
 - i. Serving as a positive role model in physical therapy practice
 - j. Encouraging the student to self-assess
- 18) Review the Daemen University Department of Physical Therapy Clinical Education Manual.

- 19) Complete the required documentation for the completion of the student's clinical, including completion and sign-off on the CPI.
- 20) Seek opportunities to engage in continuing education and development courses offered to enhance clinical instruction skills.
- 21) Act as a role model for ethical, legal, and professional behavior.
- 22) Adhere to and utilize as a guiding resource the APTA's *Guidelines to Promote Excellence in Clinical Education Partnerships* (HOD G06-19-62-59) found at the following link: <https://www.apta.org/siteassets/pdfs/policies/clinical-continuing-education-other-than-pt-pta.pdf>

Rights of Clinical Instructors and SCCEs

- 1) The right to request on-site in-services related to clinical education and other clinically relevant topics.
- 2) The right to request assistance from the academic program dealing with clinical education issues and problems which arise in the clinic.
- 3) The right to receive information regarding affiliating students and any changes in the clinical education and physical therapy program in a timely manner.
- 4) The right to terminate a student participating in the clinical education experience if it is felt that the continued participation of a student is unsafe, disruptive, or detrimental to the clinical site or patient care, or otherwise not in conformity with the standards, policies, procedures, or health requirements.

Privileges Provided to Clinical Instructors and SCCEs

- 1) Annual Clinical Education Seminar hosted on Daemen's campus free of charge.
- 2) Clinical Instructors are able to obtain access to Daemen University library resources upon request.
- 3) Continuing Education courses on the Daemen University campus at reduced rates for clinical instructors.
- 4) Each Clinical Instructor is able to earn 0.5 hours of continuing education for each two-week period of supervision per student, capped at 10 hours per three-year registration period, per New York State Department of Education policy. A CEU certificate will be sent to individual clinical instructor via email after each clinical experience is completed.

Responsibilities of the Student Physical Therapist (SPT)

The Student Physical Therapist is expected to fulfill all the responsibilities listed below. Failure to meet the listed responsibilities may result in one of following: cancellation of the clinical experience; academic probation; and/or academic dismissal.

Prior to the student's arrival at the assigned clinical site, the student is responsible for:

1. Adhering to the PT Program's policies for clinical education, in particular annual physical examination and health screens, immunizations and titers, annual PPD, HIPAA training, OSHA training, and CPR certification. If applicable, students must also adhere to site requirements for criminal background checks, drug screening, and other required health and training documents as required by the site.
2. Demonstrating proof of current health insurance policy in order to participate in clinical education experiences.
3. Reviewing the academic program's Student Handbook and the Clinical Education Manual and abiding by all policies and procedures.
4. Completing the Student Profile and Letter of Introduction for each clinical rotation and emailing to their assigned site when directed by the DCE.
5. Making telephone and/or email contact with the site SCCE in a timely manner as instructed by DCE. Students are responsible for inquiring about and fulfilling all site requirements according to the site's timeline.

While at the assigned clinical education site, the student is responsible for:

1. Adhering to the policies, procedures, rules, and regulations of the clinical education site.
2. Adhering to the Daemen University DPT program clinical education policies as stated in the Student Handbook and the Clinical Education Manual.
3. Demonstrating the utmost professionalism and adult learning behaviors when participating in all activities related to the clinical education experience and the clinical site, including adherence to the APTA Core Values.
4. Completing all assignments requested by the clinical site, SCCE, CI, and academic program within the timeframe given.
5. Completing CPI self-evaluation at midterm and final, providing comments that substantiate performance level.
6. Communicating with assigned faculty member regarding the clinical education experience. In cases where concerns or issues are present, the student is required to communicate immediately with the DCE.
7. Reflecting on the quality of his/her own mastery of professional knowledge, attitudes, and skills by completing the required student self-assessments. At a minimum, this includes the CPI midterm and final self-evaluations.
8. Evaluating the effectiveness of the clinical education experience at the clinical education site and providing feedback about the clinical education site and clinical instructor by completing the required evaluation forms at the completion of each clinical experience.
9. Adhering to all of the policies included in the Daemen University Clinical Education Manual.

CLINICAL EDUCATION COURSE GRADING POLICY

Clinical Education Course Grading

Students enrolled in the Doctor of Physical Therapy (DPT) program receive a grade of Satisfactory (S) or Unsatisfactory (U) for each clinical education experience: PT577, PT582, PT680, and PT690.

The purpose of clinical education grading is to determine whether the student has demonstrated satisfactory clinical performance and successfully fulfilled the requirements of the respective clinical education course.

Clinical education grading is based on the student's overall performance within the context of the clinical experience and is not determined by a single assessment measure or performance criterion.

Clinical Performance Instrument and Clinical Education Grading

The Clinical Performance Instrument (CPI) is a primary component of the clinical education assessment process. The Clinical Instructor (CI) provides an overall assessment of the student's clinical performance through the CPI and through ongoing communication with the student and the Daemen University DPT Clinical Education Team.

The Director of Clinical Education (DCE) is responsible for determining the final academic grade for the clinical education course. The clinical site and Clinical Instructor do not independently assign the student's course grade.

In determining the final grade, the DCE considers the CI's overall assessment of the student's performance in conjunction with the DCE's interpretation of the student's clinical education experience. The DCE may consider the following factors when determining the final grade:

- Final and midterm CPI ratings and narrative comments
- Progression of performance throughout the clinical experience
- Achievement of the performance expectations established for the specific clinical experience
- Student performance related to patient/client safety
- Clinical reasoning and decision-making
- Professional behaviors and communication
- Quality, consistency, and efficiency of performance
- Level of supervision and guidance required

- Complexity of patients, clients, tasks, and clinical environment
- Clinical setting and opportunities available within the experience
- Completion of required clinical education assignments and documentation
- Feedback and communication from the CI, SCCE, and/or other clinical faculty
- Student's level of preparation and prior didactic and clinical education
- Presence of significant concerns identified through the CPI or other clinical education communications
- Demonstrated improvement and responsiveness to feedback throughout the experience

The DCE may seek additional information from the student, CI, SCCE, faculty, or other appropriate individuals when necessary to make a grading determination.

The following outlines the expected minimum student performance ratings on the Clinical Performance Instrument (CPI) for each of the four clinical education experiences. These expectations represent the level of performance students are expected to demonstrate by the conclusion of each clinical experience and are used by the DCE as benchmarks when determining the final course grade. CPI ratings are considered in conjunction with the student's overall clinical performance and the additional grading factors outlined above.

- **PT 577 – FIRST CLINICAL EXPERIENCE** - *summer after first year in the professional phase*
 - Ratings of student performance are expected to be at least at “Advanced Beginner Performance” for all performance criteria on the CPI.
- **PT 582 – SECOND CLINICAL EXPERIENCE** - *summer after second year in the professional phase*
 - Ratings of student performance are expected to be at least at “Intermediate Performance” for all performance criteria on the CPI.
- **PT 680 – THIRD CLINICAL EXPERIENCE** - *spring semester of third year in the professional phase*
 - Ratings of student performance are expected to be at least at “Advanced Intermediate Performance” for all performance criteria on the CPI.
- **PT 690 – FOURTH AND FINAL CLINICAL EXPERIENCE** - *spring semester of third year in the professional phase*
 - Ratings of student performance are expected to be at least at “Entry-Level Performance” or beyond for all performance criteria on the CPI.

Performance Concerns During a Clinical Education Experience

When concerns regarding a student's performance arise, the DCE will work with the student and, when appropriate, the CI and/or SCCE to identify the concerns, clarify expectations, and determine appropriate interventions. Whenever possible, performance concerns should be identified and communicated early enough in the

clinical experience to allow the student an opportunity to respond to feedback and demonstrate improvement.

Depending upon the nature and severity of the concern, the DCE and Clinical Education Team may:

- Clarify performance expectations
- Establish specific goals for improvement
- Increase communication with the student and clinical site
- Develop a formal remediation or performance improvement plan
- Provide additional academic or clinical support
- Conduct a site visit or other direct observation when appropriate
- Consult with appropriate DPT faculty
- Modify or extend the clinical experience when appropriate and feasible
- Determine that the student is unable to safely or successfully continue the clinical experience

Significant Concerns

A student's performance may be identified as demonstrating significant concerns when the student exhibits performance or behaviors that substantially interfere with successful completion of the clinical education experience or raise concerns regarding patient/client safety, professional behavior, ethical conduct, or the student's ability to progress toward the expected level of clinical performance.

Examples may include, but are not limited to:

- Performance that places a patient/client, student, CI, or other individual at risk
- Significant or persistent failure to follow appropriate safety procedures
- Significant violations of professional, ethical, or legal standards
- Failure to demonstrate appropriate accountability or professional behavior
- Significant or persistent communication concerns
- Inability or unwillingness to respond appropriately to feedback
- Failure to demonstrate adequate clinical reasoning or decision-making expected for the student's level of education and clinical experience
- Failure to demonstrate meaningful improvement following identification of performance concerns
- Other performance or behavioral concerns determined by the DCE and/or appropriate program faculty to represent a significant threat to successful completion of the clinical experience

The identification of a significant concern does not, by itself, automatically determine the student's final course grade. The DCE will consider the nature, severity, persistence, and context of the concern in conjunction with the student's overall clinical performance and other available evidence.

Unsatisfactory Performance

A student will receive an Unsatisfactory (U) grade when the student does not successfully meet the established expectations and requirements of the clinical education course.

An Unsatisfactory grade may result from, but is not limited to:

- Failure to demonstrate the expected level of clinical performance for the respective clinical education experience
- Failure to demonstrate appropriate progression during the clinical experience
- Significant concerns related to patient/client safety
- Significant or persistent concerns related to professional, ethical, or legal behavior
- Failure to respond appropriately to feedback or required remediation
- Failure to complete required clinical education course requirements
- Inability to demonstrate sufficient improvement to successfully complete the clinical experience
- Other circumstances in which the DCE determines that the student has not satisfactorily met the requirements of the clinical education course

An Unsatisfactory grade is determined through consideration of the totality of evidence available regarding the student's clinical performance. A specific CPI rating or individual performance criterion will not, in isolation, automatically determine an Unsatisfactory grade.

Failure of a Clinical Education Course

If a student fails a clinical education experience (P 577, PT582, PT680, or PT690) by receiving a grade of Unsatisfactory, the student is required to repeat the clinical experience in a similar clinical environment ***once a period of remedial work has been completed***. Remediation programs are individual to the student based on areas of deficiency. Scheduling of the repeat clinical experience will be completed by the DCE as site and setting availability allows.

If a student fails two clinical affiliations, the student is subject to dismissal from the Physical Therapy Program as per departmental policy.

Clinical Education Remediation

Clinical remediation is a structured process designed to assist students in addressing identified performance concerns and achieving the established expectations for their level of clinical education. Remediation may be initiated at any point during a clinical education experience when a student demonstrates performance that is below expected levels or when concerns arise regarding patient/client safety, professional behavior, clinical reasoning, communication, technical skills, or other components of clinical performance.

The Director of Clinical Education (DCE) determines when formal remediation is warranted, in consultation with the Clinical Instructor (CI), Site Coordinator of Clinical Education (SCCE), and/or appropriate members of the Clinical Education Team or DPT faculty as appropriate.

When formal remediation is initiated, the DCE may develop a written remediation or performance improvement plan in collaboration with the student and, when appropriate, the CI and/or SCCE.

The remediation plan may include, but is not limited to, as appropriate:

- The specific area(s) of performance concern
- The expected level of performance
- Specific, measurable performance goals
- Strategies and interventions to support improvement
- Available resources and support
- The timeline for improvement
- The method(s) that will be used to reassess performance
- Criteria for successful completion of the remediation plan

Remediation expectations will be individualized based on the student's level within the DPT curriculum, the nature and severity of the performance concern, the clinical setting, patient/client population, available learning opportunities, and the student's previous didactic and clinical education experiences.

Remediation strategies may include, but are not limited to:

- Increased supervision or structured guidance
- Additional opportunities for practice or patient/client management
- Targeted clinical assignments or case-based learning activities
- Additional clinical reasoning activities
- Review of documentation or other clinical work
- Targeted educational resources or readings

- Structured self-reflection or self-assessment
- Direct observation and feedback
- Increased communication between the student, CI, and DCE
- Faculty consultation or additional academic support
- Site visits or virtual observation when appropriate
- Extension or modification of the clinical experience when appropriate and feasible

The remediation strategy selected will be based on the identified performance concern and the student's learning needs.

The student's progress toward remediation goals will be monitored throughout the established remediation period. The CI will provide ongoing feedback and communicate significant concerns or progress to the DCE. The DCE will determine whether the student has demonstrated sufficient improvement based on the criteria established in the remediation plan and consideration of available evidence regarding the student's clinical performance. Successful remediation is demonstrated when the student consistently meets the established performance expectations and demonstrates sufficient improvement to safely and successfully participate in and complete the clinical education experience.

Participation in remediation does not, in itself, result in an Unsatisfactory grade. Students who successfully address identified performance concerns and meet the established clinical education expectations may receive a Satisfactory (S) grade. When a student does not demonstrate sufficient improvement following remediation, the DCE will consult with appropriate members of the Clinical Education Team and/or DPT faculty to determine the appropriate course of action.

Depending upon the nature and severity of the concern, the outcome may include:

- Continued remediation or additional performance improvement strategies
- Additional monitoring or supervision
- Modification or extension of the clinical experience when appropriate and feasible
- Assignment of an Incomplete (I) grade for the clinical education course, followed by a defined period of remediation. Upon completion of remediation, the DCE will determine the student's readiness to return to clinical education and, when appropriate, the number and duration of supplemental or remedial clinical weeks required to provide the student with an opportunity to demonstrate achievement of the performance expectations necessary for a Satisfactory (S) grade.
- Removal from the clinical experience
- An Unsatisfactory (U) grade
- Requirement for a repeat clinical education experience

- Other academic action consistent with DPT program and University policies

The outcome will be based on the student's overall performance, the nature and severity of the identified concern, the student's response to remediation, and the student's ability to demonstrate safe, professional, and effective clinical performance at the expected level.

REQUIRED DOCUMENTATION BY STUDENTS FOR COMPLETION OF CLINICAL EXPERIENCE COURSES

In order for a student to receive a Satisfactory (S) grade for a clinical education course, the following must be submitted through the EXXAT system by the established due date. Students will be notified via email approximately one week prior to the end of the clinical experience in regard to the required documentation that must be submitted and the due date.

- Student Self-Evaluation (Midterm and Final) on Clinical Performance Instrument (CPI): completed on CPI web-based system
- PT Student Evaluation of Site: completed on EXXAT
- PT Student Evaluation of Clinical Instruction: completed on EXXAT
- Submission of In-service or Project Documentation: uploaded to EXXAT

CONCERNS, INCIDENTS, AND RESOLUTION PROCESSES

The Daemen University DPT Program encourages students, Clinical Instructors (CIs), and Site Coordinators of Clinical Education (SCCEs) to address concerns at the lowest appropriate level and to seek assistance early when concerns arise. Most concerns can be effectively addressed through open communication and collaboration among the student, CI, SCCE, and DPT Clinical Education Team.

When a concern cannot be adequately resolved at one level, or when an individual believes that additional administrative review or guidance is necessary, the concern may be escalated through the following administrative hierarchy:

Level 1: Clinical Instructor/SCCE and Student

When appropriate, students should first discuss concerns related to the clinical experience with the CI and/or SCCE. CIs and SCCEs should communicate student performance concerns directly with the student and, when appropriate, work collaboratively with the student to identify strategies for improvement.

Level 2: Director of Clinical Education (DCE)

If a concern cannot be adequately resolved at the clinical site, if the individual does not feel comfortable addressing the concern at the clinical site, or if additional guidance or program involvement is needed, the student, CI, or SCCE should contact the DCE. The DCE will review the concern, gather information as appropriate, and work with the individuals involved to determine an appropriate course of action. The DCE may consult with the Program Director as needed.

Level 3: Program Director and/or Department Chair

If the concern remains unresolved after consultation with the DCE, or if the concern involves the DCE, the individual may request review by the Program Director and/or Department Chair. The Program Director and/or Department Chair may review relevant documentation, consult with individuals involved in the concern, and determine appropriate next steps consistent with University and DPT Program policies.

Level 4: Dean, College of Health Professions

If the concern remains unresolved after review by the Program Director and/or Department Chair, or if the concern involves the Program Director or Department Chair, the individual may request review by the Dean of the College of Health Professions. The Dean may review the concern and relevant documentation and determine appropriate next steps in accordance with University policies and procedures.

Additional University Processes

Nothing in this clinical education escalation process limits a student's, faculty member's, clinical faculty member's, or other individual's right to access applicable Daemen University policies and procedures, including formal grievance, grade appeal, discrimination or harassment, academic appeal, or other institutional due-process procedures. When a concern falls under an established University process, the applicable University policy and procedure will govern. Daemen University's published Complaint Procedures can be found at this link: <https://www.daemen.edu/student-life/student-affairs/complaint-procedures>.

Important Distinction

Seeking guidance or escalating a concern does not, by itself, constitute a formal complaint, performance concern, or remediation process. The purpose of this process is to facilitate timely communication, problem-solving, appropriate oversight, and resolution of concerns while supporting students and clinical education partners.

Incident Reporting and Medical Care

If a student is involved in any incident during a clinical education experience in which the student sustains an injury or illness, or in which a patient under the student's care sustains an injury, the student must immediately notify the Clinical Instructor (CI) and follow the clinical site's policies and procedures for incident reporting. The student must also immediately notify the Director of Clinical Education (DCE) of the incident and provide the DCE with a written copy of the clinical site's incident report, when applicable.

If a student requires emergency or other medical care as a result of an injury, illness, or other medical need occurring during a clinical education experience, the clinical site and its personnel will take appropriate steps to facilitate or obtain necessary medical evaluation and care in accordance with the clinical site's policies and procedures.

All costs associated with emergency or medical care received by the student are the financial responsibility of the student. This includes, but is not limited to, emergency services, transportation, medical evaluation and treatment, hospitalization, medications, diagnostic testing, and follow-up care. Students are responsible for maintaining appropriate health insurance coverage and for understanding the terms and limitations of their individual health insurance plans. Neither the clinical site nor the Doctor of Physical Therapy Program assumes financial responsibility for medical expenses incurred by a student during a clinical education experience, except as otherwise required by applicable law or institutional policy.

Nondiscrimination Policies

The Daemen University DPT program is fully aligned with the Daemen University Non-Discrimination Equal Opportunity and Affirmative Action Policy. The policy can be found here: <https://www.daemen.edu/about/policies-and-procedures/nondiscrimination-equal-opportunity-policy>.

CLINICAL COURSE SYLLABI

COURSE SYLLABUS – PT577 CLINICAL INTERNSHIP I

a. Course Title and Number: Clinical Internship I, PT 577

b. Course Description:

This is a nine (9) week full-time clinical education experience designed to develop skills deemed appropriate for entry-level physical therapy practice. Those skills include but are not limited to examination, evaluation, diagnosis, prognosis, and intervention. To accomplish this, the students will participate in direct patient care with supervision by the Clinical Instructor. Integration of curriculum from the previous academic year will be the focus of the clinical education experience. The sites utilized for the clinical education experience will focus on musculoskeletal or orthopedic patient care.

c. Department offering the course:

Department of Physical Therapy in conjunction with affiliated clinical sites.

d. Credit hours:

Three

e. Instructor(s):

Affiliated Clinical Instructor

f. Clock hours (lecture and laboratory) and schedule:

360 hours (9 weeks @ 40 hours/week)

g. Course prerequisites:

PT Second Year professional status and Grade of C or better in all PT course work

h. Course objectives:

Upon the completion of this course, the student will perform at the **Advanced Beginner Performance** level or higher for the following objectives:

- 1) Practice in a safe manner that minimizes the risk to the patient, self, and others.
- 2) Practice according to the Code of Ethics for the Physical Therapist; demonstrate respect for self, the patient/client, and colleagues in all situations.
- 3) Practice according to legal and professional standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.

- 4) Accept and be receptive to feedback; participate in planning and/or self-assessment to improve clinical performance; contribute to the advancement of the clinical setting through educational opportunities; seek out opportunities to improve knowledge and skills.
- 5) Demonstrate professional verbal and nonverbal communication with all stakeholders; adapt to diverse verbal and nonverbal communication styles during patient/client interactions; utilize communication resources as appropriate.
- 6) Deliver physical therapy services with consideration for patient/client diversity and inclusivity for all regardless of age, disability, ethnicity, gender identity, race, sexual orientation, or other characteristics of identity; provide equitable patient/client care that does not vary in quality based on the patient's/client's personal characteristics.
- 7) Strategically gather, interpret, and synthesize information from multiple sources to make effective clinical judgments; apply current knowledge and clinical judgement leading to accurate and efficient evaluations including selection of examination techniques, diagnosis, prognosis, goals, and plan of care; present a logical rationale for clinical decisions.
- 8) Perform evidence-based initial and re-examination tests and measures that are relevant to the practice setting; rule out other pathologies and refer to or consult with other healthcare professionals as necessary; evaluate data from the patient/client examination to make clinical decisions.
- 9) Establish a physical therapy plan of care that is safe, effective, patient/client-centered, and evidence-based while also considering prognostic factors; adapt plan of care as appropriate by utilizing test and retest measures, outcome measures, and caseload discussions to ensure patients/clients are progressing toward discharge goals.
- 10) Select and perform appropriate physical therapy interventions that are evidence-based and completed in a competent and efficient manner; consult with interprofessional colleagues as appropriate to seek advice or an opinion; educate patients/clients and caregivers using multimodal approach based on patient's/client's learning style; educate healthcare team on relevant topics by taking an active role in activities or in-service opportunities.
- 11) Produce quality documentation that includes changes in the patient's/client's status, descriptions and progressions of specific interventions used, and communication among providers; maintain organization of patient/client documentation.

- 12) Identify financial barriers and limitations to patient/client care; adjust plan of care and schedule frequency based on the patient's/client's financial concerns or needs; understand nuances of insurance; appropriately bills patients/clients according to legal guidelines and insurance regulations; demonstrate appropriate understanding of other fiscally responsible behaviors, including time management and appropriate use of clinical supplies and equipment.
- 13) Actively participate in caseload discussions with interprofessional colleagues to optimize patient/client outcomes; delegate tasks to support staff as appropriate; identify patient/client complexity model of care when scheduling patients/clients with a physical therapist assistant versus a physical therapist.
- 14) Complete the designated assessment tools through EXXAT within one week of completion of the clinical experience, providing timely, specific, and constructive feedback on the clinical experience, clinical site, and clinical instruction to support program assessment and improvement.
- 15) Design and deliver an in-service project or service activity that demonstrates graduate-level scholarship (i.e. integration of evidence-based literature, critical analysis, application to practice, etc.) and present the completed work to clinical staff in a professional manner.

i. Description of teaching methods and learning experiences:

Collaborative and direct patient care opportunities with the clinical site's staff. Additional learning experiences may include observations with other health care professionals, attendance at discharge planning and team meetings, grand rounds attendance, opportunities for clinical teaching, etc.

j. Methods of student evaluation and grading:

The clinical instructor will utilize the APTA Clinical Performance Instrument in order to assess the student's abilities and performance while on the clinical education experience. The associated final grade will be administered by the DCE after review of the completed Clinical Performance Instrument and other associated documentation for the clinical experience.

k. Special Requirements:

Each student is required to give an educational in-service or case study during their clinical experience. The student is required to perform a mid-term and final self-assessment in the CPI 3.0 system. Additionally, the student must complete the Physical Therapy Student Evaluation: Clinical Experience and Clinical Instruction through Exxat within one week of the end of the clinical education experience.

PT 577 – First Clinical Experience

Summer after first year in the professional phase

For successful completion of PT577 Clinical Internship I, the student is required to achieve ratings of performance at least at the “Advanced Beginner Performance” level. Definitions of performance levels can be found in the CPI 3.0 system.

COURSE SYLLABUS – PT582 CLINICAL INTERNSHIP II**a. Title and number:**

Clinical Internship II, PT 582

b. Course Description:

This is a nine (9) week full-time clinical education experience designed to further enhance the student's patient/client management skills. The focus of this clinical education experience will be the management of patients/clients with neuromuscular disorders, incorporating information and skills acquired in the previous academic semesters. The sites utilized for the clinical education experience will focus on neurorehabilitation of patients in any age group.

c. Department offering course:

Department of Physical Therapy in conjunction with affiliated clinical sites

d. Credit hours:

Three

e. Instructor(s):

Affiliated Clinical Instructor

f. Clock hours (lecture and laboratory) and schedule:

360 hours (9 weeks @ 40 hours/week)

g. Course prerequisites:

PT Third Year professional status and Grade of C or better in all required PT coursework

h. Course objectives:

Upon the completion of this course, the student will perform at the *Intermediate Performance* level or higher for the following objectives:

1. Practice in a safe manner that minimizes the risk to the patient, self, and others.
2. Practice according to the Code of Ethics for the Physical Therapist; demonstrate respect for self, the patient/client, and colleagues in all situations.
3. Practice according to legal and professional standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.

4. Accept and be receptive to feedback; participate in planning and/or self-assessment to improve clinical performance; contribute to the advancement of the clinical setting through educational opportunities; seek out opportunities to improve knowledge and skills.
5. Demonstrate professional verbal and nonverbal communication with all stakeholders; adapt to diverse verbal and nonverbal communication styles during patient/client interactions; utilize communication resources as appropriate.
6. Deliver physical therapy services with consideration for patient/client diversity and inclusivity for all regardless of age, disability, ethnicity, gender identity, race, sexual orientation, or other characteristics of identity; provide equitable patient/client care that does not vary in quality based on the patient's/client's personal characteristics.
7. Strategically gather, interpret, and synthesize information from multiple sources to make effective clinical judgments; apply current knowledge and clinical judgement leading to accurate and efficient evaluations including selection of examination techniques, diagnosis, prognosis, goals, and plan of care; present a logical rationale for clinical decisions.
8. Perform evidence-based initial and re-examination tests and measures that are relevant to the practice setting; rule out other pathologies and refer to or consult with other healthcare professionals as necessary; evaluate data from the patient/client examination to make clinical decisions.
9. Establish a physical therapy plan of care that is safe, effective, patient/client-centered, and evidence-based while also considering prognostic factors; adapt plan of care as appropriate by utilizing test and retest measures, outcome measures, and caseload discussions to ensure patients/clients are progressing toward discharge goals.
10. Select and perform appropriate physical therapy interventions that are evidence-based and completed in a competent and efficient manner; consult with interprofessional colleagues as appropriate to seek advice or an opinion; educate patients/clients and caregivers using multimodal approach based on patient's/client's learning style; educate healthcare team on relevant topics by taking an active role in activities or in-service opportunities.

11. Produce quality documentation that includes changes in the patient's/client's status, descriptions and progressions of specific interventions used, and communication among providers; maintain organization of patient/client documentation.
12. Identify financial barriers and limitations to patient/client care; adjust plan of care and schedule frequency based on the patient's/client's financial concerns or needs; understand nuances of insurance; appropriately bills patients/clients according to legal guidelines and insurance regulations; demonstrate appropriate understanding of other fiscally responsible behaviors, including time management and appropriate use of clinical supplies and equipment.
13. Actively participate in caseload discussions with interprofessional colleagues to optimize patient/client outcomes; delegate tasks to support staff as appropriate; identify patient/client complexity model of care when scheduling patients/clients with a physical therapist assistant versus a physical therapist.
14. Complete the designated assessment tools through EXXAT within one week of completion of the clinical experience, providing timely, specific, and constructive feedback on the clinical experience, clinical site, and clinical instruction to support program assessment and improvement.
15. Design and deliver an in-service project or service activity that demonstrates graduate-level scholarship (i.e. integration of evidence-based literature, critical analysis, application to practice, etc.) and present the completed work to clinical staff in a professional manner.

i. Description of teaching methods and learning experiences:

Collaborative and direct patient care opportunities with the clinical site's staff. Additional learning experiences may include observations with other health care professionals, attendance at discharge planning and team meetings, grand rounds attendance, opportunities for clinical teaching, etc.

j. Methods of student evaluation and grading:

The clinical instructor will utilize the APTA Clinical Performance Instrument in order to assess the student's abilities and performance while on the clinical education experience. The associated final grade will be administered by the DCE after review of the completed Clinical Performance Instrument and other associated documentation for the clinical experience.

k. Special Requirements:

Each student is required to give an educational in-service or case study during their clinical education experience. The student is required to perform a mid-term and final self-assessment on the CPI 3.0 system. Additionally, the student must complete the Physical Therapy Student Evaluation: Clinical Experience and Clinical Instruction through Exxat within one week of the end of the clinical education experience.

PT 582 – Second Clinical Experience

Summer after second year in the professional phase

- For successful completion of PT582 Clinical Internship II, the student is required to achieve ratings of performance at least at the “Intermediate Performance” level.
- Definitions of performance levels can be found in the CPI 3.0 system.

a. Title and number:

Clinical Internship III, PT 680

Clinical Internship IV, PT 690

b. Description:

PT 680 Clinical Internship III

This is a nine (9) week full-time clinical education experience designed to integrate all the academic knowledge gained as well as incorporate the previous clinical experiences into an entry-level physical therapist. The sites utilized for the clinical education experience will focus on patient care of any age group, and clinical setting will vary based on fulfillment of program requirements to complete one clinical in each of these four areas: outpatient musculoskeletal; inpatient; neuromuscular rehab; and one setting area of the student's choice.

PT 690 Clinical Internship IV

This is the final nine (9) week full-time clinical education experience designed to enhance the student's entry-level skills in physical therapy. The sites utilized for the clinical education experience will focus on patient care of any age group, and clinical setting will vary based on fulfillment of program requirements to complete one clinical in each of these four areas: outpatient musculoskeletal; inpatient; neuromuscular rehab; and one setting area of the student's choice.

c. Department offering course:

Department of Physical Therapy in conjunction with affiliated clinical sites.

d. Credit hours:

Eight credits: 4 credits for PT 680 and 4 credits for PT 690

e. Instructor(s):

Affiliated Clinical Instructor

f. Clock hours:

720 hours: 360 hours for PT 680 = 9 weeks @ 40 hours/week and

360 hours for PT 690 = 9 weeks @ 40 hours/week

g. Course prerequisites:

PT Third Year professional status and Grade of C or better in the Fall 3rd year professional phase course work

h. Course objectives:

Upon the completion of the PT680 course, the student will perform at the *Advanced Intermediate Performance* level or higher for the following objectives. Upon completion of the PT690 course, the student will perform at the *Entry-Level Performance* level or higher for the following objectives.

1. Practice in a safe manner that minimizes the risk to the patient, self, and others.
2. Practice according to the Code of Ethics for the Physical Therapist; demonstrate respect for self, the patient/client, and colleagues in all situations.
3. Practice according to legal and professional standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.
4. Accept and be receptive to feedback; participate in planning and/or self-assessment to improve clinical performance; contribute to the advancement of the clinical setting through educational opportunities; seek out opportunities to improve knowledge and skills.
5. Demonstrate professional verbal and nonverbal communication with all stakeholders; adapt to diverse verbal and nonverbal communication styles during patient/client interactions; utilize communication resources as appropriate.
6. Deliver physical therapy services with consideration for patient/client diversity and inclusivity for all regardless of age, disability, ethnicity, gender identity, race, sexual orientation, or other characteristics of identity; provide equitable patient/client care that does not vary in quality based on the patient's/client's personal characteristics.
7. Strategically gather, interpret, and synthesize information from multiple sources to make effective clinical judgments; apply current knowledge and clinical judgement leading to accurate and efficient evaluations including selection of examination techniques, diagnosis, prognosis, goals, and plan of care; present a logical rationale for clinical decisions.
8. Perform evidence-based initial and re-examination tests and measures that are relevant to the practice setting; rule out other pathologies and refer to or consult with other healthcare professionals as necessary; evaluate data from the patient/client examination to make clinical

decisions.

9. Establish a physical therapy plan of care that is safe, effective, patient/client-centered, and evidence-based while also considering prognostic factors; adapt plan of care as appropriate by utilizing test and retest measures, outcome measures, and caseload discussions to ensure patients/clients are progressing toward discharge goals.
10. Select and perform appropriate physical therapy interventions that are evidence-based and completed in a competent and efficient manner; consult with interprofessional colleagues as appropriate to seek advice or an opinion; educate patients/clients and caregivers using multimodal approach based on patient's/client's learning style; educate healthcare team on relevant topics by taking an active role in activities or in-service opportunities.
11. Produce quality documentation that includes changes in the patient's/client's status, descriptions and progressions of specific interventions used, and communication among providers; maintain organization of patient/client documentation.
12. Identify financial barriers and limitations to patient/client care; adjust plan of care and schedule frequency based on the patient's/client's financial concerns or needs; understand nuances of insurance; appropriately bill patients/clients according to legal guidelines and insurance regulations; demonstrate appropriate understanding of other fiscally responsible behaviors, including time management and appropriate use of clinical supplies and equipment.
13. Actively participate in caseload discussions with interprofessional colleagues to optimize patient/client outcomes; delegate tasks to support staff as appropriate; identify patient/client complexity model of care when scheduling patients/clients with a physical therapist assistant versus a physical therapist.
14. Complete the designated assessment tools through EXXAT within one week of completion of the clinical experience, providing timely, specific, and constructive feedback on the clinical experience, clinical site, and clinical instruction to support program assessment and improvement.
15. Design and deliver an in-service project or service activity that demonstrates graduate-level scholarship (i.e. integration of evidence-

based literature, critical analysis, application to practice, etc.) and present the completed work to clinical staff in a professional manner.

i. Description of teaching methods and learning experiences:

Collaborative and direct patient care opportunities with the clinical site's staff. Additional learning experiences may include observations with other health care professionals, attendance at discharge planning and team meetings, grand rounds attendance, opportunities for clinical teaching, etc.

j. Methods of student evaluation and grading:

The clinical instructor will utilize the APTA Clinical Performance Instrument in order to assess the student's abilities and performance while on the clinical education experience. The associated final grade will be administered by the DCE after review of the completed Clinical Performance Instrument and other associated documentation for the clinical experience.

k. Special Requirements:

Each student is required to give an educational in-service or case study during their clinical education experience. The student is required to perform a mid-term and final self-assessment on the CPI 3.0 system. Additionally, the student must complete the Physical Therapy Student Evaluation: Clinical Experience and Clinical Instruction through Exxat within one week of the end of the clinical education experience.

PT 680 – Third Clinical Experience

Spring semester of third year in the professional phase

- For successful completion of PT680 Clinical Internship III, the student is required to achieve ratings of performance at least at the "Advanced Intermediate Performance" level.
- Definitions of performance levels can be found in the CPI 3.0 system.

PT 690 – Fourth Clinical Experience

Spring semester of third year in the professional phase

- For successful completion of PT690 Clinical Internship IV, the student is required to achieve ratings of performance at least at the "Entry-Level Performance" level.
- Definitions of performance levels can be found in the CPI 3.0 system.