

Physical Therapist Assistant



Clinical Education Handbook 2024-2025

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Welcome

The PTA Clinical Education Handbook is intended to aid students, clinical instructors, faculty, and staff of IECC who will be monitoring students in the clinical agency. Clinical education is a crucial component of the physical therapist assistant curriculum. It allows the student to fully integrate the skills learned during didactic and laboratory college courses.

The PTA program's mission is "to develop knowledgeable and competent physical therapist assistant professionals to go out and positively influence the community's health under the supervision of a physical therapist in a safe, legal, and ethical manner. IECC will seek to provide students educational and collaborative opportunities to develop a racially, socially, and culturally sensitive professional, who seeks life-long learning and a fulfilling career."

Please familiarize yourself with the information throughout the PTA Program Clinical Education Handbook. Students will be expected to follow the policies outlined in this manual and the Program Handbook.

Questions or concerns regarding any item related to the Physical Therapist Assistant Clinical Education should be directed to:

Kinsey Whitaker PT, DPT, GCS

Academic Coordinator for Clinical Education

Email: whitakerk@iecc.edu

Phone: (618)263-5107 Fax: (618)262-7541

Address:

WVC PTA Program

2200 College Drive

Mt. Carmel, IL 62863

Commission on Accreditation in Physical Therapy Education (CAPTE)

Graduation from a physical therapist assistant education program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; phone; 703-706-3245; accreditation@apta.org is necessary for eligibility to sit for the licensure examination, which is required in all states.

"Wabash Valley College Physical Therapist Assistant Program at IECC Wabash Valley College Campus is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305-3085; telephone: 703-706-3245; email: accreditation@apta.org; website: <http://www.capteonline.org>. If needing to contact the program/institution directly, please call (618) 263-5548 or email hoipkemierl@iecc.edu."

Disability Support Services

Contact the Director of Learning Commons for Assistance

Support is available in the form of accessible facilities, individualized plans, and reasonable accommodations to students who meet the requirements of a person with a disability. A disability requiring additional staff or funding, contractual arrangements through an outside vendor, or structural modifications (such as adaptive or assistive technology) may require several weeks to be arranged. Additional information is available at www.iecc.edu/ada.

Questions regarding the IECC ADA Policy and/or the American with Disabilities Act should be directed to the District ADA Coordinator:

Libby McVicker

Title IX/District ADA Coordinator

Illinois Eastern Community Colleges

320 East North Avenue

Noble, IL 62868

Ph: 618-393-3491

APPEALS AND GRIEVANCES

The Americans with Disabilities Act Procedure describes the process for appealing a denied request for reasonable accommodations; contact the Director of Learning Commons if an appeal is desired. Students who believe IECC has not met its obligations under the ADA should refer to IECC's [Policy to Address a Complaint \(100.16\)](#).

Nondiscrimination

Illinois Eastern Community College District No. 529 is committed to the most fundamental principles of human dignity, equality of opportunity, and academic freedom. Decisions involving students and employees are based on individual merit and free from discrimination or harassment in any form.

IECC operates pursuant to all applicable state and federal laws relating to equal educational opportunity and affirmative action, including but not limited to Executive Orders 11246 and 11375 as amended, Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Human Rights Act of 1977, Section 503/504 of the Rehabilitation Act of 1973, Section 402 of the Vietnam Era Readjustment Act of 1974, the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Illinois Human Rights Act.

Illinois Eastern Community College District No. 529 does not discriminate on the basis of race, color, sex, pregnancy, gender identity, sexual orientation, age, marital status, parental status, religious affiliation, veteran status, national origin, ancestry, order of protection status, conviction record, physical or mental disability, genetic information, or any other protected category.

The IECC Nondiscrimination policy is applicable to educational programs and offerings, activities, and services provided or operated by IECC. Additionally, this policy applies to all conditions of employment, including but not limited to hiring, placement, promotion, transfer, demotion, selection, recruitment, employment, advertising, layoff and termination, and compensation.

Retaliation against a person who files a charge of discrimination, participates in a discrimination proceeding, or otherwise opposes an unlawful discriminatory practice is prohibited.

Reporting and Processing Complaints

Students and employees are encouraged to resolve grievances through informal methods. However, if either party, the complainant, or respondent, is dissatisfied with the informal

process, he or she may file a formal complaint with the designated Compliance Coordinator at any point.

When the Compliance Coordinator receives a complaint, the following steps will be taken.

Step 1. The Compliance Coordinator shall review the report and coordinate the Civil Rights Investigator to investigate the alleged conduct violation through prompt and fair measures. The Civil Rights Investigator is defined as the Program Director of Grants and Compliance (or designee) for employee grievances and the Director of Human Resources (or designee) for student grievances.

Step 2. Within 10 business days of receipt of a complaint by the Compliance Coordinator, the complainant and respondent will be notified in writing of the following:

- The name of the respondent;
- The name of the complainant (unless determined to honor a request by the complainant to remain confidential);
- The date(s) of the alleged discrimination;
- A brief description of the allegation, including how the nondiscrimination policy was violated;
- The identity of the individual(s) with authority to make a finding or impose a sanction prior to any contact from the individuals; and
- The investigatory process that will follow.

Step 3. Investigations shall include a review of involved parties' testimonies, an equal opportunity for interview and response, witness interviews, and any other pertinent information to the case. The clear and convincing evidence standard shall be used to determine the outcome of the allegation.

Step 4. At the conclusion of the investigation, the Civil Rights Investigator will prepare a thorough report outlining:

- The complaint;
- The investigation conducted and all relevant evidence obtained;
- The investigator's conclusions with an explanation of reasoning and/or support for such conclusions; and
- The recommendations for sanctions or other remedial action, as appropriate.

The report will be submitted to the Compliance Coordinator within 7 business days of the conclusion of the investigation.

Step 5. The Compliance Coordinator shall review the investigator's report to determine if the alleged discrimination violated the Nondiscrimination Policy.

Step 6. Within seven business days after receipt of the investigator's report, the Compliance Coordinator shall prepare a written Notice of Decision supporting the decision and deliver it to both parties simultaneously. The Notice of Decision shall contain:

- The identity of who is issuing the decision;
- Notice of the finding of whether the alleged conduct occurred;
- Any individual remedies for the complainant;
- Notice of any sanctions imposed;
- Steps to eliminate the discrimination from recurrence; and
- Process to file an appeal of decision.

Generally, the investigation will conclude within 60 calendar days, unless the allegations are complex or other factors delay the investigative process. In the event of delay, the Compliance Coordinator will notify the complainant and respondent of an extended investigation.

Related Policies & Procedures

Consult the following policies which are specific to the form of discrimination or harassment for which they address:

[100.12 Americans with Disabilities Act](#)

[100.31 Preventing Sexual Misconduct / Rights of Pregnant and Parenting Students](#)

Student Competency Skills

All the following competencies have been successfully completed by the student prior to participation in clinical education. All competencies and skills check offs contain critical elements related to patient safety. These critical elements must be demonstrated correctly to pass the check off/competency.

Competencies and skills check that has been successfully completed by each student prior to beginning PTA 1211:

PTA 1203 PTA Clinical Processes:

Handwashing, Mental Function, Vital Signs
Movements of the Body
Bony Landmark and Palpation
Passive ROM Routine, Positioning and Joint ROM Norms
Assistive Device Fitting / Gait
Wheelchair Fitting
ADA Accessibility
Therapeutic Exercise and Pain
Basic Wound Care
Final Practical (Cumulative)

PTA 1205 Patient Care Interventions:

Massage and Myofascial Release Skills Check
Superficial Heat Competency
Cryotherapy Competency
Ultrasound Competency
Pelvic and Cervical Motorized Traction Competency
ESTM/NMES Competency

PTA 1206: Functional Anatomy & Biomechanics:

UE Goniometry Competency
LE Goniometry Competency
Palpation of Joints and Muscles Competency
UE Manual Muscle Testing Competency
LE Manual Muscle Testing Competency
Movement Analysis Competency

PTA 1210 PTA Field Experience

ICF Mapping/Chart Review/Audit/ Ther Exercise
Direction of PT/ Adhere to legal practice standards/Patient Interview/Documentation/
Ther Exercise.
Guide for Conduct of PTA/ Ethical Conduct/VBB/Report Abuse/Report Fraud and abuse
of therapy/ Implement Plan of Action/Ther Exercise

Patient/Client Interaction Considerations/Communications and
Knowledge/Theory/Clinical Judgment
Evidence Based Practice and integration into Treatment/ Report to PT/ PTA Scope
Initiation of Treatment and Plan of Care Progression/ Goals /Intervention Clinical
Indications / Reporting to PT
Midterm Practical
Final Practical

PTA 2202: Musculoskeletal Therapy:

Posture Analysis Competency
Gait Training Competency
UE Therapeutic Exercise and Intervention Competency
LE Therapeutic Exercise and Intervention Competency
Spine Therapeutic Exercise and Intervention Competency
Documentation Competency
Goniometry Competency
Manual Muscle Testing Competency

PTA 2210 Multi-System Rehabilitation

Transfer Training
Gait Training
Percussion / Pulmonary Treatments / Patient Ed/ Communication
Cardiopulmonary Rehab / Patient Ed / Communication
Compression Treatments for Vascular / Arterial Management/ Patient Ed/
Communication
Aseptic Wound Care/Wound Care / Patient Ed/ Communication
Amputation / Prosthetic Treatment / Patient Education/ Communication
Home Evaluation / Discharge Planning/ Patient Education/ Communication
Lab Final / Case Management/ Patient Education / Communication

Additional Competencies and skills check that has been successfully completed by each student prior to beginning PTA 2249 and PTA 2250:

2211 Neuromuscular Rehabilitation:

Pediatric and Adult Handling and Positioning Competencies
Neurological Gait Training Competencies
Functional Mobility for Pediatric and Adult Competencies
Biophysical Agents for Neuromuscular Retraining Competency

Clinical Education Student Outcomes

The clinical instructors have access to the PTA course syllabi which articulate standards of progression, competency checkoffs, and course content. This information is available in the Program Resources Page on www.exxat.com as well as online on the WVC PTA CI Resource Web page.

PTA 1211

Upon completion of this course the student will:

1. Demonstrate effective and culturally sensitive various forms of communication skills with patients/clients, caregivers, team members and other health care providers. **7D7, 7D8, 7D11, 7D12, 7D27**

2. Adhere to federal and state legal and ethical practice standards, as well as facility practice guidelines regulating PT practice while utilizing behavior adherent with APTA Guide of the Physical Therapist Assistant, Standards of Ethical Conduct, and Values Based Behaviors for the Physical Therapist Assistant. **7D1, 7D2, 7D3, 7D4, 7D5, 7D6, 7D25**
3. Demonstrate professional behaviors in interactions with patients, caregivers and other health care providers. **7D5, 5D7, 7D11, 7D9, 7D11, 7D17, 7D18, 7D19, 7D20, 7D21, 7D22, 7D23, 7D24, 7D25**
4. Demonstrate entry-level performance in required clinical skills (see Table on page 5 of syllabus) as defined in the Physical Therapist Assistant: Review of health records, monitor and adjust interventions, Manual and Assessment of Clinical Skills (PTA MACS) including data collection, treatment implementation, communication, and treatment modification for patients with various diagnoses within the plan of care under the direction and supervision of the physical therapist. **7D9, 7D11, 7D17, 7D18, 7D19, 7D20, 7D21, 7D22, 7D23, 7D24**
5. Complete accurate and timely chart audits and documentation that complies with federal and state regulations, professional guidelines, and facility requirements using the International Classification of Functioning, Disability, and Health (ICF). **7D16, D25, 7D29**

PTA 2249

Upon completion of this course the student will:

1. Demonstrate effective and culturally sensitive various forms of communication skills with patients/clients, caregivers, team members and other health care providers. **7D7, 7D8, 7D11, 7D12, 7D27**
2. Adhere to federal and state legal and ethical practice standards, as well as facility practice guidelines regulating PT practice while utilizing behavior adherent with APTA Guide of the Physical Therapist Assistant, Standards of Ethical Conduct, and Values Based Behaviors for the Physical Therapist Assistant. **7D1, 7D2, 7D3, 7D4, 7D5, 7D6, 7D25**
3. Demonstrate professional behaviors in interactions with patients, caregivers and other health care providers. **7D5, 5D7, 7D11, 7D9, 7D11, 7D17, 7D18, 7D19, 7D20, 7D21, 7D22, 7D23, 7D24, 7D25**
4. Demonstrate advanced performance in required clinical skills as defined in the Physical Therapist Assistant: Review of health records, monitor and adjust interventions, Manual and Assessment of Clinical Skills (PTA MACS) including data collection, treatment implementation, communication, and treatment modification for patients with various diagnoses within the plan of care under the direction and supervision of the physical therapist. **7D9, 7D11, 7D17, 7D18, 7D19, 7D20, 7D21, 7D22, 7D23, 7D24**
5. Complete accurate and timely chart audits and documentation that complies with federal and state regulations, professional guidelines, and facility requirements using the International Classification of Functioning, Disability, and Health (ICF). **7D16, D25, 7D29**

PTA 2250

Upon completion of this course the student will:

1. Demonstrate effective and culturally sensitive various forms of communication skills with patients/clients, caregivers, team members and other health care providers. **7D7, 7D8, 7D11, 7D12, 7D27**
2. Adhere to federal and state legal and ethical practice standards, as well as facility practice guidelines regulating PT practice while utilizing behavior adherent with APTA Guide of the Physical Therapist Assistant, Standards of Ethical Conduct, and Values Based Behaviors for the Physical Therapist Assistant. **7D1, 7D2, 7D3, 7D4, 7D5, 7D6, 7D25**

3. Demonstrate professional behaviors in interactions with patients, caregivers and other health care providers. **7D5, 5D7, 7D11, 7D9, 7D11, 7D17, 7D18, 7D19, 7D20, 7D21, 7D22, 7D23, 7D24, 7D25**
4. Demonstrate entry-level performance in required clinical skills (see Table on page 5 of syllabus) as defined in the Physical Therapist Assistant: Review of health records, monitor and adjust interventions, Manual and Assessment of Clinical Skills (PTA MACS) including data collection, treatment implementation, communication, and treatment modification for patients with various diagnoses within the plan of care under the direction and supervision of the physical therapist. **7D9, 7D11, 7D17, 7D18, 7D19, 7D20, 7D21, 7D22, 7D23, 7D24**
5. Complete accurate and timely chart audits and documentation that complies with federal and state regulations, professional guidelines, and facility requirements using the International Classification of Functioning, Disability, and Health (ICF). **7D16, D25, 7D29**

Responsibilities of the Academic Coordinator of Clinical Education (ACCE)

One member of the PTA faculty is responsible for coordinating the clinical education portion of the curriculum. The ACCE works directly with other program faculty, clinical instructor, and students to provide quality learning experiences which will help the student develop his or her clinical skills.

The ACCE is responsible for the following tasks:

1. Approve use of clinical agencies.
2. Coordinate and provide clinical instructor development.
3. Assess student readiness for clinical experience.
4. Coordination and assignment of clinical sites for student education.
5. Review and update clinical affiliation agreements in coordination with the department's secretary.
6. Assure that students are provided a copy of current syllabi. Syllabi will be made available to clinical instructors upon their request.
7. Provide clinical education packets to students and clinical instructors.
8. Contact clinical agencies to determine the number of clinical education positions available for students for clinical education.
9. Schedule clinical agency visits.
10. Serve as a resource for students, faculty, and clinical educators.
11. Confer with students and clinical instructors regarding student progress in the clinical education setting.
12. Assess students' clinical education performance based on the guidelines for each clinical syllabus.
13. Secure new clinical agencies as needed.
14. Ensure CPR certification and immunization records are accurate and on file.
15. Assign final grades for each clinical experience utilizing input from clinical instructors.
16. Assure students are assigned to clinical agencies with clinical agreements in good standing.

Responsibilities of the Clinical Instructor (CI)

All clinical agencies should have a clinical instructor that will be charged with the supervision of students affiliating at their facility. This person must be a physical therapist or physical therapist assistant. Responsibilities of the CI are to assist the student in achieving the appropriate clinical education objectives, including the following.

1. Provide student with appropriate facility information prior to affiliation period.
2. Inform/introduce student to his/her immediate supervisor.
3. Schedule a formal on-site orientation to include appropriate introductions, hospital geography and review of hospital/department policies and procedures. Complete orientation checklist will be provided to the clinical instructor in the week 1 Goals Sheet.
4. Review Wabash Valley College's Clinical Education Handbook to be familiar with students' academic exposure and expected competency level.
5. Discuss your expectations of the student.
6. Determine which areas of treatment exposure would be most beneficial to the student, i.e., does he/she require more exposure to therapeutic exercise than to modalities.
7. Offer the student exposure to other departments such as Occupational Therapy, Rehabilitative Nursing, Speech Therapy, etc.
8. Review new or unusual equipment and/or procedures with student.
9. Ensure that student is provided with responsible, on-going supervision and direction.
10. Complete formal evaluation conference at mid-point and completion of clinical affiliation with appropriate forms completed and returned to the ACCE.
11. Return completed evaluation form to the College within one week of clinical affiliation.
12. Make every effort to offer the student a clinical experience, in which he/she will perceive as both personally and professionally rewarding.
13. Assume ultimate care for the patient.
14. Ensure that the PTA student introduces themselves as a "student" to the patient.
15. Inform the patient of his/her right to refuse treatment by a student without any type of consequences.
16. Report any public complaints or concerns regarding the PTA Program and/ or a PTA student to the Wabash Valley College PTA Program Director.

Responsibilities of the Clinical Coordinator of Clinical Education (CCCE)

1. Coordinate and schedule clinical experiences in coordination with the ACCE of the Wabash Valley College PTA Program.
2. Provide orientation materials on the day of student arrival.
3. Assigns a clinical instructor (CI) to the PTA student.
4. Serve as a resource for the CI for establishing goals and objectives, arranging learning experiences, and evaluating student performance.
5. Keep the CI informed of pertinent information regarding the WVC PTA Program, including providing the CI with the clinical packet provided by Wabash Valley College.
6. Monitor the supervision and learning experiences of the PTA students, while keeping in contact with the CI.
7. Notify PTA Director at Wabash Valley College of any complaints that involve the PTA Program, including concerns with student progress.
8. Program Information and Expectations.

Clinical Affiliation Agreements

Students will only be assigned to clinical agencies that have a current clinical affiliation agreement on file. These agreements will be reviewed on an average of every two years by the ACCE and/or the department secretary to ensure that the agreement is not expired. The agreement must contain the signature of the appropriate personnel from Wabash Valley College and the Clinical Agency.

Arrangement of Clinical Assignment

The ACCE will contact clinical agencies via mail approximately six to twelve months in advance to determine the number of agencies willing to participate with any clinical rotation.

Communication is typically sent in the Spring and will request slots for the following Fall, Spring and Summer. Agencies that confirm they are willing to participate with the clinical rotation necessary will be notified via email with the student(s) assigned to their agency for a particular date. Students will be asked for location preferences and the ACCE will strive to accommodate requests; however, students should expect to be assigned to any clinical agency in which the program participates. Students may be required to travel to clinical agencies that require a 2-hour drive (one way). Students are not permitted to arrange their own clinical assignment or contact clinical agencies regarding clinical placement. Students are expected to attend clinical as assigned by the ACCE. Students that do not attend clinical as assigned (including the assigned dates) will be dismissed from the PTA Program.

Clinical Site Visitation by the ACCE

Each student will receive a minimum of one on-site clinical visit by the ACCE while in the PTA Program. Additional visits may be scheduled if deemed necessary by the ACCE. The ACCE will schedule clinical site visits in coordination with the CI and /or SCCE (Site Center Coordinator of Education).

Criteria for selection of CI and clinical agencies:

1. The clinical agency's clinical philosophy is compatible with the WVC PTA Program philosophy.
2. The clinical agency is able to meet the objectives of the PTA Program.
3. The staff of the clinical agency practices with legal and ethical responsibility.
4. The clinical agency has appropriate administrative support for the education of PTA students.
5. The clinical agency has a variety of learning opportunities in an appropriate setting that are made available to students.
6. There is adequate physical therapy staff to accommodate the learning needs of the PTA student.
7. The clinical agency employs a minimum of one full-time physical therapist who is able to provide on-site supervision.
8. The clinical agency adheres to Federal law regarding equal opportunity and non-discrimination laws.

Criteria for selection of a CI will include the following:

1. The CI will be a PTA or a PT that graduated from an accredited program and has licensure in the state where applicable.
2. The CI has a minimum of one year of experience in the clinical setting.
3. The CI performs in a professional, ethical, and competent manner.
4. The CI demonstrates effective communication and instructional skills.
5. The CI demonstrates adequate skills in the ability to evaluate and supervise PTA students.

Clinical Affiliation Agencies

A list of Clinical Affiliation Agencies can be found [here](#).

Evaluation of Student Progress

PTA 1211, 2249, 2250 Paperwork Requirements per each syllabus. See syllabus for course assignments.

Midterm and Final Assessments will utilize the Physical Therapist Assessment Manual for the Assessment of Clinical Skills (PTA MACS):

The PT MACS will be used by your clinical instructor to assess your clinical performance. You will assess your own performance using the PTA MACS. You will be given an orientation on the use of this tool by the ACCE prior to your first clinical experience.

Upon completion of PTA 1211 Clinical Education I, it is expected that the student will have achieved the following minimal expectations using the PTA MACS as rated by the student's CI:

1. Achieve Beginners or Advanced Beginners Level as deemed by achieving "Entry Level or Needs Experience" performance on all selected items on the web-based PTA MACS by the end of the four weeks.
2. No significant concerns in selected criteria.
3. CI comments provide objective information to quantify rating as appropriate.

Upon completion of PTA 2249 Clinical Education II, it is expected that the student will have achieved the following minimal expectations using the PTA MACS Assessment Tool as rated by the student's CI:

1. Achieve Intermediate Level as deemed by achieving "Entry Level or Needs Experience" performance on all selected items on the web-based PTA MACS by the end of the six weeks.
2. No significant concerns in selected criteria.
3. CI comments provide objective information to quantify ranking as appropriate

Upon completion of PTA 2250 Clinical Education III, it is expected that the student will have achieved the following minimal expectations using the PTA MACS as rated by the student's CI:

1. Achieve Entry-level performance as deemed by achieving "Entry Level or Beyond Entry Level" performance on all selected items on web-based PTA MACS.
2. No significant concerns in selected criteria
3. CI comments provide objective information to quantify ranking

Criteria for Grading for PTA 1211, 2249, 2250

- A:** Obtain the minimal PTA MACS course requirement + receive 92% of the possible points for required paperwork.
- B:** Obtain the minimal PTA MACS course requirements + receive 85% of the possible points for required paperwork.
- C:** Obtain the minimal PTA MACS course requirements + receive 78% of the possible points for required paperwork.
- D:** Obtain the minimal PTA MACS course requirements and receive 70-77% of the possible points for required paperwork. **OR**
Obtain below the minimal PTA MACS course requirements and 70-100% of the possible points required for paperwork.
- F:** Obtain the minimal PTA MACS course requirements and receive 0-69% of the possible points for required paperwork. **OR**
Obtain below the minimal PTA MACS course requirements and receive 0-69% of the possible points for required paperwork

Visual Representation of Grade Calculation:

Grade	PTA MACS met (+) /not met (-)	Points from Paperwork
A	PTA MACS met (+)	92% and above

B	PTA MACS met (+)	85% and above
C	PTA MACS met (+)	78% and above
D	PTA MACS met (+)	70-77%
D	PTA MACS not met (-)	70-100%
F	PTA MACS met (+)	0-69%
F	PTA Macs not met (-)	0-69%

Students will be evaluated by their respective CI, who will present the final evaluative report to both the student and the ACCE. The evaluative process is expected to be an on-going one, with the student and his/her CI meeting on a regular basis to discuss the student's actions and reactions to the clinical environment. The ACCE will be in close communication with both the student and the CI via clinical visits and/or telephone communications.

Upon completion of the clinical period, the student will be assigned a letter grade by the ACCE. If the student's clinical performance is unsatisfactory, i.e., if the student is unsafe, fails to abide by institutional policy, or demonstrates unsatisfactory ability to apply knowledge of theory and learned skills to the clinical environment, he/she will receive a failing grade for the course. Although it is not required, the CI is encouraged to recommend a letter grade that best reflects the student's overall performance. The ultimate responsibility for final grades does rest with the ACCE, who will consider all elements, including visit information, written evaluations, and student input/reports.

Clinical Attendance

Clinical attendance, punctuality, attitude, and participation are all evidence of professional behavior and commitment to learning the essential of giving quality health care. Students are expected to attend **all** scheduled days of **each** affiliation regardless of the number of hours accrued. **Scheduled 10-hour days or week-end days may occur due to CI schedules. The student is required to work the schedule of their clinical instructor.** When the student is informed of this schedule, the student is to receive consent of the ACCE. The ACCE will be the faculty member on-call when the college office is closed unless otherwise notified.

On the Attendance Record, do not count lunch breaks as part of your attendance. Consider the Clinic's full workday as 8 hours, unless otherwise designated by the administrator of the department of physical therapy. College holidays will be observed, and make-up will not be expected for these days only. Any variation in normal clinic hours worked or scheduled should be documented and approved by the CI and ACCE. Full attendance is required during the affiliation. Any time missed due to absence **must** be made up. The time may be made up in partial or full days. The CI and ACCE must approve the make-up time in advance. Points are deducted for **ALL** missed days, even though the day is made up.

In the event of an occurrence that a day in the clinic will be missed, the student **must directly notify and speak with his/her CI or facility as well as notify the ACCE by email/phone/text** prior to scheduled report time. The student **must** provide a **reason** for the absence to **both** the CI and ACCE prior to the scheduled report time.

- The CI of the facility must be notified **in advance** of the student's expected return to the Clinic. Absences are cumulative; 5 days of absence that are not made up over the 3 affiliations is the maximum number of days missed allowed.
- After the second consecutive day of absence a physician/physician's office note is required.

- After the 3rd cumulative absence that is not made up, a written plan of action is required.
- The sixth day of absence, that is not made up will result in an automatic failure of that Practicum and the course will need to be repeated.
- Three tardies (more than 15 min. late or leaving early) will constitute one absence.
- Attendance is required for all other scheduled class activities (orientation days, seminar days, or days scheduled by ACCE to be on campus)
- Absences due to catastrophic medical and personal emergencies will be reviewed by faculty and will require appropriate official documentation upon return to class (example: Doctor's note, police report).

Student Responsibilities

Students must achieve a minimum grade of "C" in classroom theory as well as a satisfactory grade for professional behaviors (Reference Appendix A) and the laboratory components of each PTA course as determined by the criteria of each PTA course. Any grade of less than "C" achieved in a PTA or concurrent general education course is unacceptable for progression in the PTA Program.

Student Appearance and Conduct

STUDENT APPEARANCE

Acceptable dress and behavior are expected during all aspects of the educational program. Clinical uniform shall be white lab coat or scrubs (if required by clinical facility), professional shirt/blouse, professional slacks, and appropriate clean shoes; identification badge must be worn. No Shorts will be worn unless designated by the clinical setting. Some facilities may provide an additional name badge for student use. Students must wear the name badge that is requested by the clinical agency. If no preference is indicated by the agency, the WVC PTA Student identification badge should be worn.

- Students must be clean, neat, and well-groomed during all clinical activities. A clean and neat uniform is always expected.
- Cologne or perfume is not acceptable in the clinical area.
- Students must abide by the agency/IECC policy regarding smoking areas. Students are not to smoke or vape in the clinical facilities / agencies or during the hours of clinical assignments.
- Minimal application of cosmetics is acceptable in clinical area.
- Jewelry must be limited to a watch and wedding band (or similar ring); small earrings are acceptable for students. Some clinical sites may require that you remove all non-visible body piercing such as a belly button piercing.
- Body art is not to be visible in the clinical setting. Students with visible body art are expected to have appropriate covering of all body art.

The final determination of dress and/or behavior in the clinical area rests with the policies of the respective clinical facility; the student must abide by these policies.

STUDENT CONDUCT

Students are expected to exhibit professional, legal, and ethical behavior at all times including during lecture, laboratory, and clinical experiences. Acceptable student conduct includes the following:

- Attend and be punctual for clinical.
- Cell Phones, or other electronic communication devices are to remain OFF in the clinical setting. Students should not cause interruptions during clinical.
- Refrain from improper language use, disorderly conduct.

Professional behavior is ALWAYS expected of students. These may include but are not limited to the following:

- Shows initiative.
- Treats others with positive regard/respect.
- Exhibits sensitivity to individual differences.
- Adheres to APTA Standards of Ethical Conduct for the Physical Therapist Assistant (a copy of the standards is in the PTA Program Handbook).
- Seeks guidance as necessary to address limitations.
- Accepts constructive criticism from faculty, students, and clinical instructors without defensiveness

Student Privacy and Confidentiality

Policy: WVC complies with the [Family Educational Rights and Privacy Act \(FERPA\)](#). Students have the right to limit disclosure of their education records to third parties unless written consent has been given for disclosure.

Procedures

1. All permanent physical therapy student records, including medical records, reside in the Office of the Registrar; other student records are maintained in the private offices of faculty members that are locked when unoccupied.
2. Confidential conversations with students take place in the private offices of faculty members. Confidential information includes, but is not limited to:
 - a. advising and counseling sessions
 - b. clinical performance
 - c. grades
 - d. health status

The clinical facilities and clinical instructors will be provided a face sheet with the student's contact information (name, address, phone number, and email address) prior to the clinical assignment, as well as being issued a student profile via www.exxat.com. They will also have access to student background checks, drug screens, immunization records, and titers.

Clinical Incidents

If an accidental injury occurs in lab or at the clinical site, such as sustaining a needle stick or a physical injury, the procedures of the clinical agency should be followed.

Standard procedure would include:

1. Student to follow emergency procedure of Clinical Agency.
2. Report the injury immediately to the CI and ACCE.
3. Thoroughly wash the area and apply antiseptic.
4. Some clinical agencies may have you go to their Emergency Room, depending on how severe the injury and/or the policy.

5. Report this to the program instructor as soon as possible and obtain a copy of the incident report from the clinical.
6. The hospital/clinic may ask the patient for permission to obtain an HIV test or other blood tests.
7. All costs incurred are the responsibility of the student.
8. Completing an incident form at the clinical agency and the College may be necessary.

Immunization and CPR Requirements

Students enrolled in the Physical Therapist Assistant Program are required to have CPR Certification in one on the following levels: Professional Rescuer Level through the American Red Cross or Healthcare Provider Level through the American Heart Association. A copy of the student's CPR certification card will be available on www.exxat.com to the CCCE prior to attending clinical.

Immunization records are on file at www.exxat.com. The Clinical Agencies will have digital access to all immunization records via the above-mentioned website.

Substance Abuse Policy

To protect the safety of other students and patients, drug and alcohol abuse is strictly prohibited. PTA students are expected to remain drug free and in appropriate physical condition for the learning and care-giving environment. A student who is under the influence, or has abused, either separately or in combination: alcohol, over-the-counter medication, illegal drugs, prescribed medications, inhalants, or synthetic designer drugs becomes an individual at risk for harming others and themselves.

"Reasonable suspicion" is a belief based on objective facts sufficient to lead to a prudent person to suspect that a student is under the influence of alcohol and/or drugs in a manner that the students' ability to perform satisfactorily is reduced. All students are subject to an alcohol and/or drug test whenever a supervisor has a reasonable suspicion that the student is under the influence of alcohol and/or drugs while at clinical. The instructors' observations of any suspected physical or behavioral manifestation of alcohol and/or drug use will determine reasonable suspicion. Examples may include, but not limited to:

- Drug count discrepancy
- Extreme and rapid mood swings
- Odors of alcohol on the breath or the body
- Slurred speech
- Dilated or pinpoint pupils or reddened eyes
- Sleeping on duty
- Excessive absence or tardiness
- Frequent disappearance from the unit
- Changes in physical appearance, which may include personal grooming, weight loss, tremors, diaphoresis

All PTA Students have completed a successful Drug Test prior to the start of the first semester, , which is available for the ACCE to view on www.exxat.com. If there is reasonable suspicion at any point during the program, drug and alcohol testing will be done at the student's expense. Students may be required to repeat a drug screening for specific clinical sites in order to follow the timeline of the Clinical Agencies Guidelines.

Addressing Complaints

IECC STUDENT COMPLAINT POLICY

Students are encouraged to seek resolution for any complaints by communicating informally with the appropriate individual(s). When a resolution is not reached, students may initiate a formal complaint. IECC's Policy to Address a Complaint establishes a fair, impartial, and timely process to review and/or resolve causes of dissatisfaction in an orderly and systematic manner. The Policy is available at www.iecc.edu/studentcomplaint.

Any complaints and/or allegations relating to non-compliance with the CAPTE STANDARDS should follow the same complaint policy.

PTA PROGRAM COMPLAINTS

The PTA Program encourages any individual who is not satisfied with their experience or encounter with any student, faculty, or staff member to file an informal or formal complaint. Anyone may file a complaint regarding any aspect of the program. This may include, but is not limited to, complaints from clinical education sites, prospective students, employers of graduates, and the public. Informal complaints may be directed verbally to the ACCE:

Kinsey Whitaker PT, DPT, GCS
Academic Coordinator of Clinical Education
Physical Therapist Assistant Program
Email: whitakerk@iecc.edu
Phone: (618) 263-5107
Fax: (618) 262-8647

Formal complaints should be in writing and addressed to the attention of the Program Director:

Lisa Hoipkemier, PT, DPT, NCS
Program Director
WVC Physical Therapist Assistant Program
2200 College Drive
Mt. Carmel, IL 62863
618-263-5548 Ext: 3432
hoipekmierl@iecc.edu

If the complaint involves the Program Director, the matter should be addressed directly to the Dean of Health Professions.

Alani Frederick, DNP, RN, PCCN, CNE
Dean of Health Professions
305 N. West Street
Olney, IL 62450
618-395-7777, ext. 2136
mfredericka@iecc.edu

Any complaints or concerns from the student regarding Clinical courses must be submitted in writing to the Academic Coordinator of Clinical Education (ACCE) in order to receive further consideration. All written concerns or complaints will be reviewed by the ACCE and forwarded to the Program Director.

Process for handling complaints that fall outside the realm of due process:

1. When a complaint is received, the Program Director will contact the person(s) making the complaint within ten (10) business days. If the complaint is focal and may be resolved with one individual, the Program Director contacts the individual, investigates the complaint, proposes a resolution, and informs all parties of the resolution by written communication. A written record of the complaint and resolution will be kept.
2. Complaints which cannot be resolved by the process described above are referred to the Dean of Health Professions. The Dean will investigate and propose a resolution. The Dean will communicate findings to all parties via written communication. A written record tracking form will be maintained.

Complaints will be handled in an expedited manner. Complaints will be kept on file for at least five (5) years. Complaints can be filed without fear of retribution.

If a student has a grievance about any incident at a clinical facility, they should contact the Site Coordinator of Clinical Education (SCCE) and the ACCE as soon as possible regarding the details of the incident.

Complaints about the Program related to compliance with the accreditation standards must be submitted in writing to the Commission on Accreditation in Physical Therapy Education (CAPTE). The process for submitting a complaint to CAPTE is found here: <https://www.capteonline.org/complaints> The complaint should be addressed as follows:

Department of Accreditation, APTA
3030 Potomac Ave., Suite 100
Alexandria, VA 22305-3085

IECC Policies and Procedures

Policies and procedures of Illinois Eastern Community Colleges may be found in the current [academic catalog](#).

Facility Safety

All clinical agencies should have policies concerning safety regulations regarding the use of equipment and hazardous materials. These policies should be provided to students in orientation to the affiliate clinic. Equipment should be inspected on a regular basis and safety regulations should be posted.

Clinical Instructor Rights and Privileges

The WVC Physical Therapist Assistant Program appreciates the time and dedication required of clinical instructors. To help provide professional development needs, the PTA Program plans to implement professional development continuing education seminars. Please complete the surveys sent to Clinical Affiliates regarding professional development needs. We hope to be able to offer rewarding educational workshops that will meet the needs of professional development for our clinical instructors.

If any clinical instructor is interested in attending a Clinical Instructor Credentialing Course, they are encouraged to contact the Program ACCE.

Clinical Instructor Education Tips

The ACCE will send resources for each student assigned to a clinical agency. The clinical instructor should review this information prior to the start of the clinical. It is recommended that the clinical instructor meet with the student frequently to discuss the student's progress and any concerns.

The faculty and staff of the PTA Program welcome comments and suggestions for improvement to the Clinical Handbook or any information pertinent to the Physical Therapist Assistant Program. Please, do not hesitate to contact the WVC PTA Department. It is our pleasure to answer any questions and assist in any way possible. A small or big concern can always be communicated to the ACCE. If the ACCE is unavailable, you may leave a message with the PTA Department at 618-263-5164.

Appendix A

APTA Professional Behaviors

APTA Professional Behaviors

DEFINITIONS

1. Commitment to Learning

The ability to self-assess, self-correct, and self-direct; to identify needs and sources of learning; and to continually seek new knowledge and understanding.

2. Interpersonal Skills

The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community and to deal effectively with cultural and ethnic diversity issues.

3. Communication Skills

The ability to communicate effectively (i.e., speaking, body language, reading, writing, listening) for varied audiences and purposes.

4. Effective Use of Time

The ability to obtain the maximum benefit from a minimum and Resources investment of time and resources.

5. Use of Constructive Feedback

The ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.

6. Problem-Solving

The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.

7. Professionalism

The ability to exhibit appropriate professional conduct and to represent the profession effectively.

8. Responsibility

The ability to fulfill commitments and to be accountable for actions and outcomes.

9. Critical Thinking

The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.

10. Stress Management

The ability to identify sources of stress and to develop effective coping behaviors.

BEHAVIORAL CRITERIA FOR THE 10 PROFESSIONAL BEHAVIORS

Professional Behavior	Beginning Level Behavioral Criteria	Developing Level Behavioral Criteria	Entry Level Behavioral Criteria
1. Commitment to Learning	Identifies problems; formulates appropriate questions; identifies and locates appropriate resources; demonstrates a positive attitude (motivation) toward learning; offers own thoughts and ideas; identifies need for further information	Prioritizes information needs; analyzes and subdivides large questions into components; seeks out professional literature; sets personal and professional goals; identifies own learning needs based on previous experiences; plans and presents an in-service, or research or case studies; welcomes and/or seeks new learning opportunities	Applies new information and re-evaluates performance; accepts that there may be more than one answer to a problem; recognizes the need to and is able to verify solutions to problems; reads articles critically and understands the limits of application to professional practice; research and studies areas where knowledge base is lacking
2. Interpersonal Skills	Maintains professional demeanor in all clinical interactions; demonstrates interest in patients as individuals; respects cultural and personal differences of others; is non-judgmental about patients' lifestyles; communicates with others in a respectful, confident manner; respects personal space of patients and others; maintains confidentiality in all clinical interactions; demonstrates acceptance of limited knowledge and experience	Recognizes impact of non-verbal communication and modifies; accordingly, assumes responsibility for own actions; motivates others to achieve; establishes trust; seeks to gain knowledge and input from others; respects role of support staff	Listens to patient but reflects back to original concern; works effectively with challenging patients; responds effectively to unexpected experiences; talks about difficult issues with sensitivity and objectivity; delegates to others as needed; approaches others to discuss differences in opinion; accommodates differences in learning styles
3. Communication Skills	Demonstrates understanding of basic English (verbal and written): uses correct grammar, accurate spelling and expression; writes legibly; recognizes impact of non-verbal communication listens actively; maintains eye contact	Utilizes non-verbal communication to augment verbal message; restates, reflects and clarifies message; collects necessary information from the patient interview	Modifies communication (verbal and written) to meet needs of different audiences; presents verbal or written messages with logical organization and sequencing; maintains open and constructive communication; utilizes communication technology effectively; dictates clearly and concisely
4. Effective Use of Time and Resources	Focuses on tasks at hand without dwelling on past mistakes; recognizes own resource limitations; uses existing resources effectively; uses unscheduled time efficiently; completes assignments in timely fashion	Sets up own schedule; coordinates schedule with others; demonstrates flexibility; plans ahead	Sets priorities and reorganizes when needed; considers patient's goals in context of patient, clinic and third-party resources; has ability to say "No"; performs multiple tasks simultaneously and delegates when appropriate; uses scheduled time with each patient efficiently
Professional Behavior	Beginning Level Behavioral Criteria	Developing Level Behavioral Criteria	Entry Level Behavioral Criteria

5. Use of Constructive Feedback	Demonstrates active listening skills; actively seeks feedback and help; demonstrates a positive attitude toward feedback; critiques own performance; maintains two-way information	Assesses own performance accurately; utilizes feedback when establishing pre-professional goals; provides constructive and timely feedback when establishing pre-professional goals; develops plan of action in response to feedback	Seeks feedback from clients; modifies feedback given to clients according to their learning styles; reconciles differences with sensitivity; considers multiple approaches when responding to feedback
6. Problem-Solving	Recognizes problems; states problems clearly; describes known solutions to problem; identifies resources needed to develop solutions; begins to examine multiple solutions to problems	Prioritizes problems; identifies contributors to problem; considers consequences of possible solutions; consults with others to clarify problem	Implements solutions; reassesses solutions; evaluates outcomes; updates solutions to problems based on current research; accepts responsibility for implementing of solutions
7. Professionalism	Abides by APTA Code of Ethics; demonstrates awareness of state licensure regulations; abides by facility policies and procedures; projects professional image; attends professional meetings; demonstrates honesty, compassion, courage and continuous regard for all	Identifies positive professional role models; discusses societal expectations of the profession; acts on moral commitment; involves other health care professionals in decision-making; seeks informed consent from patients	Demonstrates accountability for professional decisions; treats patients within scope of expertise; discusses role of physical therapy in health care; keeps patient as priority
8. Responsibility	Demonstrates dependability; demonstrates punctuality; follows through on commitments; recognizes own limits	Accepts responsibility for actions and outcomes; provides safe and secure environment for patients; offers and accepts help; completes projects without prompting	Directs patients to other health care professionals when needed; delegates as needed; encourages patient accountability
9. Critical Thinking	Raises relevant questions; considers all available information; states the results of scientific literature; recognizes holes in knowledge base; articulates ideas	Feels challenged to examine ideas; understands scientific method; formulates new ideas; seeks alternative ideas; formulates alternative hypotheses; critiques hypotheses and ideas	Exhibits openness to contradictory ideas; assess issues raised by contradictory ideas; justifies solutions selected; determines effectiveness of applied solutions
10. Stress Management	Recognizes own stressors or problems; recognizes distress or problems in others; seeks assistance as needed; maintains professional demeanor in all situations	Maintains balance between professional and personal life; demonstrates effective affective responses in all situations; accepts constructive feedback; establishes outlets to cope with stressors	Prioritizes multiple commitments; responds calmly to urgent situations; tolerates inconsistencies in health care environment

Appendix B

Student Clinical Checklist

Wabash Valley College
Physical Therapist Assistant Program
Student Clinical Checklist

	Item	Due
	Goals and Expectations Form	Week 1
	Student Time Logs	Daily
	Patient Treatment Demographics Log	Daily
	Multi week Template	Weekly
	Discussion Boards	Weekly
	Other Assignments as indicated by syllabus**	Due Date on Canvas**
	Mid-term PTA MACS	Midterm*
	Topic Selected for Assignment	Midterm*
	Final PTA MACS	Final Week
	Project	After Midterm and no later than Final Week
	Site/ CI Evaluation by Student	Final Week
	ACCE Evaluation by Student	Final Week
	ACCE Evaluation by Clinical Instructor	Final Week
	Clinical Portfolio	Final Week

Midterm for Clinical I Due Week 2; Clinical II and III Due Week 3

Each Clinical may have varying assignments for students. Syllabus will hold a detailed list of any additional assignments such as Scorebuilders Study Materials or required dates to attend on Campus for Learning Activities.

Each Clinical contributes to the Clinical Portfolio, please refer to your Student Portfolio instructions on Canvas for further details.

Weekly Assignments are submitted as designated on Exxat and Canvas.

Time Sheets, Patient Treatment Logs, Midterm and Final PTA MACS should be completed on Exxat

Appendix C

Clinical Instructor Clinical Checklist

**WVC PTA Program
CI Clinical Checklist**

	Item	Due
	Orientation Checklist and Syllabus Acknowledgement Form	Week 1
	Student Time Sheets	Daily Submissions, CI Review daily or at earliest convenience
	Student Patient Treatment Logs	Daily Submissions, CI Review no later than end of Clinical
	Weekly Goal Forms	Weekly
	Mid-term PTA MACS	End of Week 2 for Clinical I End of Week 3 for Clinical II and III
	Final PTA MACS	Final Week
	ACCE Feedback Form	Final Week

The PTA MACS and Surveys should be completed online via Exxat Software at www.exxat.com.

Appendix D

HIPPA / Confidentiality Statement Form

**Wabash Valley College
Physical Therapist Assistant Program**

HIPAA / CONFIDENTIALITY STATEMENT FORM

I understand I will have access to confidential health information while enrolled in the Clinical Education Courses of the Physical Therapist Assistant program and/or when observing patient care in the clinical setting. I understand that this patient information is private and must be kept confidential. Furthermore, unauthorized release of this information is punishable by law. I will abide by all policies, procedures, rules, and regulations related to the Health Insurance Portability and Accountability Act (HIPAA), as well as any additional policies and procedures of the facility where I am assigned.

Student Name Printed

Date

Student Signature

Appendix E

Notice of Patient Informed Consent Form

**Wabash Valley College
Physical Therapist Assistant Program**

NOTICE OF PATIENT INFORMED CONSENT FORM

I understand that I must always introduce myself, as a student physical therapist assistant to patients/clients and that I must request permission to treat them. In addition, I understand that the patient/client has the right to refuse services that are provided by a student physical therapist assistant, and that I will be respectful of their choice. As a part of the Patient Informed Consent, Physical Therapist Assistant Students must always wear the school assigned or facility assigned Identification Badge.

Student's Name Printed

Date

Student's Signature

Appendix F

Student Affirmation Form

Wabash Valley College
Physical Therapist Assistant Program

STUDENT AFFIRMATION

Each student is responsible for being familiar with the information in this manual. Failure to read the information will not be considered an acceptable excuse for non-compliance.

The program faculty reserves the right to change policies or revise curricula as necessary to promote continued high-quality education.

I affirm that I have received a copy of the WVC PTA Clinical Education Handbook. I have been instructed that the PTA Clinical Education Handbook, Program Handbook, the [Wabash Valley College Student Handbook](#), and the [IECC Academic Catalog](#) contain policies pertaining to PTA students. I have also been instructed regarding where to obtain copies of all of these documents.

By signing below, I agree to abide by all Clinical Agency Facilities, IECC, and PTA Program policies and procedures.

Signature

Printed Name

Date

A copy of this signed affirmation will be kept on file in the PTA Program office.